

Exploring Inmate Reentry in a Local Jail Setting

Implications for Outreach, Service Use, and Recidivism

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Although prisoner reentry has taken center stage in correctional research and policy discussions, there has been little emphasis on reentry among jail populations. This paper examines a jail-based reentry program in New York City that begins while individuals are incarcerated and includes 90 days of postrelease services. This article explores these assumptions through an evaluation of a jail-based reentry program in New York City that begins while individuals are incarcerated and includes 90 days of postrelease services. To determine program impact, the authors compare samples of participants with nonparticipants and program completers with noncompleters. The groups are matched using developmental trajectories derived from group-based trajectory modeling, in addition to propensity score matching. Findings show that participants perform no better than nonparticipants over a 1-year follow-up, but those who stay engaged for at least 90 days of postrelease services experience significantly fewer (and slower) returns to jail. The findings regarding program completion are tempered by several methodological concerns, however. The article concludes with a discussion of how the study may offer insights for program implementation and operation with this target population.

Keywords: *jail reentry; jail programs; group-based trajectory modeling; propensity score matching*

From 1985 to 2006, the number of people incarcerated in the United States increased by more than 200%—from 744,208 to more than 2.2 million (Gilliard & Beck, 1997; Sabol, Minton, & Harrison, 2007). Although fewer inmates are incarcerated at any given time at the local level (approximately 760,000), the number of people released annually from jails nationwide (approximately 12 million) far exceeds the number released from state and federal prisons (approximately 600,000; Beck, 2006). Given that nearly all inmates will gain release at some point in the future and more than 50% will be reincarcerated within 3 years (Langan & Levin, 2002), the issue of prisoner reentry has taken center stage in correctional research and policy discussions. A recent survey of state prison systems by the American Correctional Association (2000) found that 39 of the 41 states surveyed had reentry or transitional services in place for inmates approaching their release.

There has been much less emphasis on reentry from the jail setting, however, even though the jail population struggles with many of the same issues as those returning from prison. For example, many of those returning to local communities from jail suffer from substance abuse and mental illness and are typically undereducated, unskilled, and usually without solid family supports. Yet, several unique features of the jail setting have served as formidable barriers to the implementation of reentry programs, including shorter stays in jail, the transience of the jail population, and the presence of significant numbers of pretrial detainees (Roman & Chalfin, 2006). Moreover, discussion of jail reentry occurs within the context of untested assumptions regarding the extension of the principles of correctional programming from prison to jail and from the correctional setting to the community.

Therefore, basic questions regarding reentry program design, implementation, and impact in the jail setting remain unanswered. The New York City Department of Correction (NYC DOC) began providing reentry services to city-sentenced offenders in June 2004 through the Rikers Island Discharge Enhancement (RIDE) Program. RIDE seeks to link inmates with appropriate health and human service organizations in the community through a coordinated, collaborative effort to provide a continuum of care

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during the reentry process. This process begins while the inmate is incarcerated and culminates with 90 days of postrelease services, provided by a community-based service agency paid for by the NYC DOC. The authors of this article examines the impact of the RIDE program on participant recidivism through a two-phase analysis involving four different groups of inmates. The first phase compares outcomes among a group of inmates who participated in the RIDE program ($n = 478$) and a matched group of inmates who did not ($n = 1,231$); the RIDE group and matched comparison group, respectively. The second phase explores the program dosage issue—that is, how much of the RIDE program did each released inmate actually receive? This issue is explored through examination of two additional study groups: a group of inmates who received 90 days of RIDE postrelease services ($n = 312$) and a group of matched inmates who received some services but less than the full 90 days ($n = 371$). In both phases, we performed the matching using a technique advanced by Haviland and Nagin (2005, 2007)—developmental trajectories derived from group-based trajectory modeling in addition to the traditional propensity score matching technique—as the intervention was beyond traditional experimental control.

The article is guided by two research questions: (a) Does the RIDE program reduce return to jail among released inmates (recidivism)? and (b) Does the RIDE program delay return to jail among released inmates? Bivariate tests—chi-square and independent sample *t* tests—as well as survival and multivariate analysis were used to test for group differences in return to jail over a 1-year observation period. The article concludes with a discussion of the findings and their implications for reentry generally and for local jail settings specifically.

Prior Research

The Growing Concern Over Prisoner Reentry

Over the past decade, prisoner reentry has emerged as a critical issue in correctional research, policy, and practice (for a full discussion of the issues surrounding prisoner reentry, see Petersilia, 2003; Petersilia & Travis, 2001). This growing concern over prisoner reentry did not propagate in a public policy vacuum. The nexus between reintegration and improvements in public safety, public health, and budgetary (fiscal) savings is increasingly apparent at all levels of the government. In his 2004 State of the Union Address, President George Bush acknowledged the public safety aspect of

providing transitional services for prisoners returning home. In fact, \$300 million was allocated in the 2005 federal budget for reentry programs. Although not as compelling from a political standpoint, civil litigation has also focused policy makers' attention on reentry, as a number of jurisdictions have begun providing reentry services as part of court-ordered settlements. For example, Santa Fe County, New Mexico, now provides a prescription and a 1-week supply of medication to released inmates with physical and mental disabilities (Memorandum of Agreement between the United States and Santa Fe County, 2004).

Key Principals of Successful Programming

Given long-standing efforts at rehabilitation coupled with the recent focus on prison reentry, there is now a sizable body of literature examining the programming features that facilitate successful treatment. Importantly, much of this work has focused on programs during incarceration rather than following release (or programs that focus on both prerelease and postrelease). Nevertheless, there is an implicit though untested assumption that the principles of correctional programming will carry over to reentry programming in the community. Although the research on prerelease correctional programming represents a logical starting point for examining postrelease programs, they represent two very different treatment environments, and it is not at all clear that this carryover assumption will bear out. The available literature on programming in both settings is reviewed further.

Programming in the Correctional Setting

The literature on correctional treatment (prerelease) is robust, with a number of definitive studies that have isolated factors related to successful prerelease and postrelease outcomes (Listwan, Cullen, & Latessa, 2006; Lowenkamp, 2004; Palmer, 1995; J. Wilson & Davis, 2006). Gaes, Flanagan, Motiuk, and Stewart (1999), for example, analyzed 128 adult correctional treatment programs and identified 8 key principles of effective treatment intervention. Meta-analysis research in a number of corrections-based programming areas has consistently identified a relationship between time in treatment and successful outcomes (Andrews & Dowden, 1999). Building on this evidence, Gaes et al. (1999) highlighted the importance of identifying the "optimal or sufficient levels" of intervention based on client and treatment characteristics—that is, optimal program dosage may vary based on client needs.

Reentry Programming Following Release

The body of research evaluating reentry programs that provide services postrelease (or prerelease and postrelease) is actually quite scant, and the findings are far from definitive. For example, Petersilia (2004) reviewed the available evidence and concluded that the principles of effective reentry are well established but that research and practice are “moving on independent tracks and the gulfs between them are still wide” (p. 8). Similarly, Visher and Travis (2003) noted that the time immediately before and after an inmate’s release is thought to be critically important, but very little is known about the reentry process itself or about what might facilitate the successful transition to the community (also see Gaes et al., 1999). In an introduction to a series of reentry articles in *Criminology and Public Policy*, Visher (2006) noted that there is little consensus among practitioners and researchers regarding the effectiveness of reentry programs.

Perhaps the most widely cited evaluation of a prisoner reentry program is J. Wilson and Davis’s (2006) study of *Project Greenlight*, which provided 8 weeks of daylong reentry training and services to New York State prisoners approaching release. The results showed that program participants performed significantly worse than nonprogram individuals across all measures of re-offending. J. Wilson (2007) suggested that the negative findings could be related to problems in program implementation and design, as the program was modified considerably from the recommended treatment schedule and participants were transferred to another prison and required to participate (which may have led to frustration and anger). Moreover, there may have been a mismatch between individual needs and services offered, as *Greenlight* was designed as a broad-based intervention (Wilson, 2007). Last, although *Project Greenlight* was identified as a reentry demonstration program, there was, in fact, no postrelease treatment component (J. Wilson, 2007).¹

There are two other postrelease reentry studies that warrant discussion. Freudenberg, Willets, Greene, and Richie (1998) evaluated a prerelease and postrelease substance abuse program for women in the New York City jail and found that those who participated in the program had lower rates of re-offending compared to nonparticipants. Last, MDRC² is currently evaluating the Center for Employment Opportunities reentry employment program using a random assignment design. Bloom (2008) noted that participants in the transitional services project who were recently released from prison (within the past 3 months) experienced significant declines in several measures of recidivism (felony convictions, parole revocations, and state incarcerations), compared to individuals who did not participate in the reentry employment program.³

The Unique Challenges Posed by the Jail Setting

Over the past two decades, increases in the local jail population have mirrored the tremendous growth at the state level (Sabol et al., 2007). Much of the increase in jail population has been driven by recidivism—both arrests for new offenses and revocations among those on community supervision. Beck (2006) estimated that 50% of the jail population is incarcerated for violating a condition of their community supervision, either probation (34%) or parole (13%).

Despite these trends, Roman and Chalfin (2006) noted that “reentry programming has been limited for jail populations” (p. 5). Developing and implementing programs to transition jail inmates to the community is complicated by the unique features of the jail setting, most notably inmates’ short length of stay in jail, the mixing of pretrial and sentenced populations, and the typically low rates of postrelease supervision. State inmates, for example, have an average length of stay of 25 months compared to jail inmates who are incarcerated on average between 10 and 20 days (Cunniff, 2002; Ditton & Wilson, 1999; Paige & Beck, 2006). The significantly shorter incarceration time severely restricts effective programming, as the amount of time spent in treatment should be measured in months, not days, to increase the probability of success (Gendreau, 1996; Lipton, 1995).

Perhaps because of these challenges, research has failed to adequately explore the development, implementation, and impact of jail-based reentry programs. Often, these programs, even those considered “best practices” in the field have not been subjected to rigorous external evaluation (Solomon, Osborne, LoBuglio, Mellow, & Mukamal, 2007). Moreover, there is a second implicit—and again untested—assumption: that the principles of prison reentry translate equally well to jail reentry. Given the unique features of the jail setting, the veracity of this second carryover assumption remains unclear.

Thus, the relevant literature for jail reentry is framed by two unproven assumptions regarding the successful application of treatment principles from correctional to community settings and from prisons to jails. In this article, the authors seek to explore these assumptions through an examination of the use and impact of the RIDE program, a jail-based reentry program in New York City. Because RIDE is jail based and provides programming prerelease and postrelease, the extant literature on prison-based programming provides an important backdrop for this study.

Data and Method

The Study Site

The NYC DOC has, on average, an annual admissions rate of 102,000 persons and a daily inmate population average of 13,788 (Montero, 2007). Approximately 80,000 of those admitted annually will return to the five boroughs of New York City. Consistent with the profile of inmates nationwide, New York City jail inmates are a highly vulnerable population: Forty percent receive mental health services during their incarceration, 75% have a history of substance abuse, and 7% of male inmates and 20% of female inmates are infected with HIV (City of New York, 2003; New York City Department of Correction, 2005). The co-occurring health and nonhealth problems of this population, in large part, explain the high annual readmission rates: Forty percent of all inmates incarcerated in 2003 recorded two or more stays during that calendar year (City of New York, 2003).

Key RIDE Program Elements

The RIDE Program was created in 2004 to provide discharge planning and reentry services for city-sentenced inmates returning to the five boroughs of New York City. The core feature of the voluntary program centers on participants working with one of several nonprofit community based service providers in the jail, followed by up to 90 days of services postrelease.⁴ Upon release, participants are immediately connected to services in the community via transportation from jail to the provider office (Martin, 2005). The RIDE program also emphasizes case management, as each participant is assigned a case manager who coordinates service provision, provides guidance and support, assesses milestones and progress, and maintains client engagement. Case managers are contractually required to have a minimum of two client contacts per month.

Design and Data

This article uses a two-phase comparison of outcomes among four different groups of inmates. In the first phase, the analysis centers on a comparison of a group that participated in the RIDE program and a group that did not. In the first 6 months of 2005, 15,740 city-sentenced individuals were released from Rikers Island—645 participated in the RIDE program and 14,835 did not.⁵ From these subgroups, the authors created

matched samples of participants ($n = 478$) and nonparticipants ($n = 1,231$), by using group-based trajectory modeling and propensity scores.⁶

The first part of the matching process is the group-based trajectory modeling, conducted with the annual number of days confined in the previous 5 years. The technique allows the authors to account for different incarceration trajectories across groups and to match treatment and comparison individuals based on similarities in their histories (Haviland & Nagin, 2005). The analysis produces posterior group probabilities that are used to divide subjects into trajectory groups based on their jail histories over the previous 5 years.⁷ The second part of the matching process involves a standard propensity score-based inference strategy whereby logistic regression is used to predict group assignment. In effect, the matching variables are treated as covariates, and the group assignment variable (RIDE or comparison group) serves as the dependent variable. The matching criteria for this study include the posterior group probabilities from the group-based modeling as well as race and ethnicity, gender, age, mental illness, self-reported drug use, NYC DOC risk classification,⁸ number of prior confinements, length of current confinement, and borough of residence at time of jail admission (Rosenbaum & Rubin, 1983). The logistic regression generates a propensity score for each case based on the likelihood that the case would be in a particular group.

The final part of the process involves a matching of RIDE and comparison group individuals based on similarities in their propensity scores—formally called “nearest neighbor matching” (Dehejia & Wahba, 2002). The combined group-based trajectory and propensity score technique improves on the propensity score method by itself, because the trajectory groups serve as a potential balancing score or latent strata in the data that then establishes balance between the treated and untreated groups on both observed and unobserved confounding factors (Haviland & Nagin, 2005, 2007). The technique reduces but does not eliminate methodological concerns of sampling bias.⁹

The second phase of the study examines the program dosage issue—did the RIDE participant receive the full amount of available services? To explore the issue of actual engagement in postrelease services—or program dosage—the authors identified two additional study groups: a group of inmates that received 90 days of RIDE postrelease services and a group of inmates who received some services but remained engaged for fewer than 90 days.¹⁰ The RIDE “90-Day Completer” sample was drawn from all city-sentenced inmates who remained engaged in community-based services for at least 90 days following release during fiscal years 2005 and 2006 ($n = 503$).

The RIDE “Less than 90 Days” group was drawn from all city-sentenced inmates discharged to the community during the first 6 months of 2005, who received some postrelease services—but fewer than 90 days ($n = 558$).¹¹ Recognizing the methodological shortcomings of the traditional completer and noncompleter comparison, the authors again applied the three-step matching procedure with the same matching criteria as in the first phase. This group-based trajectory and propensity score procedure created matched samples of 312 RIDE completers and 371 RIDE noncompleters.

Analysis

The primary outcome variables for both comparisons over a 1-year follow-up include any new jail admissions (yes or no), the number of jail admissions, the number of days confined, and time to first jail admission.¹² The authors used simple bivariate tests (chi-square and independent sample t tests) as well as survival and multivariate analysis to test for group differences. Specifically, Kaplan-Meier survival analysis was used to test for group differences in the time to first jail confinement variable. Logistic regression and Cox regression survival analysis were used to assess whether participation (and completion) in RIDE was related to lower and slower rates of jail return, when controlling for other factors.

Limitations

There are a number of limitations that warrant discussion. First, the authors were unable to document the quality or exact nature of services received by each participant, both before and after release. There were three RIDE service providers during the study period, and each provider offered a range of specific services tailored for each participant. Efforts to track services received by participants retrospectively failed, primarily because of limitations in service provider data collection and record keeping. Moreover, with regard to dosage, the study was forced to rely on a rough measure of time in the program—90 days (yes or no)—because neither NYC DOC nor the service providers kept detailed records on participation on a day-to-day basis. Second, Rikers Island is the second largest jail in the United States, and its size and resources may limit generalizability to other smaller correctional settings. Third and perhaps most important, the various groups were matched on a number of relevant variables, but the authors were unable to capture a measure of motivation to participants in the program. Motivation is often tied to treatment success and dosage—issues

very much related to this research—but given the retrospective nature of the study and the inability to track participation through service provider data, the authors had no way to capture this important variable.

Findings

Phase 1: RIDE Versus Matched Comparison Group

Table 1 shows that the groups were similar in terms of age, race and ethnicity, gender, mental illness, drug use, and DOC classification, which suggests that the matching technique worked well. Inmates in both groups had extensive prior jail histories. Nearly 90% had at least one prior confinement, and both groups averaged approximately five prior jail stays. Also, both groups had been confined approximately 6 months (cumulative) over the past five years. Table 1 also shows the primary outcomes of interest by study group for a 1-year follow-up period, and the two groups differed little on these measures of recidivism. Nearly three quarters of both samples returned to jail at least once during the next year—73.7% for RIDE and 71.5% for the matched comparison group (chi-square = .794, $p = .373$). Both groups recorded approximately two new jail stays ($t = -1.521$, $p = .129$), and both spent, on average, approximately 2 months in jail during the follow-up period (69.8 days for the RIDE group and 59.9 days for the matched comparison group $t = -2.281$, $p = .023$).¹³ Last, both groups recorded their first return to jail approximately 3 months following release, 96.0 days for the RIDE group and 103.1 days for the matched comparison group. Figure 1 shows the rates of return to jail among both groups, and the results from the Kaplan-Meier survival analysis confirm that the groups do not differ on this outcome measure (log rank = 1.62, $p = .20$)

Phase 2: RIDE Completers Versus Matched RIDE Noncompleters

The completer and noncompleter groups were similar in terms of age, gender, mental health status, race and ethnicity, drug use, and DOC risk classification (see Table 1). Although both groups had extensive prior jail histories, there were notable differences in overall prior confinement measures. Noncompleters averaged more prior confinements in the past 5 years (4.8 vs. 3.8) and spent considerably more time in jail during that time—160.3

Table 1
Background Characteristics and Return to Jail Among the Study Groups

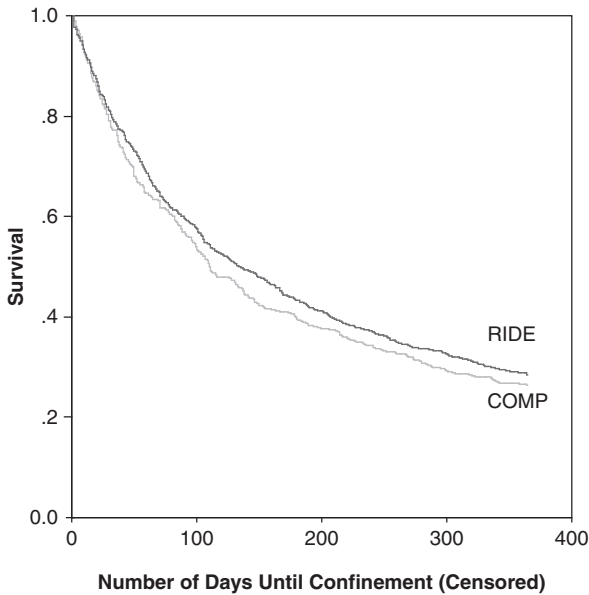
Characteristics	Rikers Island Discharge Enhancement (<i>n</i> = 478)	Matched Comparison (<i>n</i> = 1,231)	Completer (<i>n</i> = 312)	Noncompleter (<i>n</i> = 371)
Mean age	38.5	38.5	37.0	37.0
Percentage female	25.7%	24.2%	19.2%	22.1%
Percentage mentally ill	15.9%	16.7%	23.4%	22.1%
Race				
Black	64.6%	64.4%	62.8%	62.8%
White	13.4%	13.2%	14.3%	14.7%
Other	22.0%	22.4%	22.9%	22.5%
Ethnicity				
Hispanic	26.2%	26.1%	28.5%	28.3%
Self-reported drug use indicated	36.2%	35.7%	33.3%	34.2%
Inmate classification				
Low (0-5)	30.5%	33.3%	36.2%	33.9%
Low medium (5-10)	54.4%	45.1%	46.6%	50.7%
High medium (11-16)	13.4%	17.7%	14.9%	14.6%
High (17+)	1.7%	3.8%	2.3%	0.8%
Percentage with at least one prior confinement	89.1%	87.4%	76.9%	89.2%
Mean number of prior confinements	5.7	5.3	3.8	4.8
Mean number of prior days confined	177.0	158.1	100.0	160.3
Return to jail				
Percentage with at least one confinement*	73.7%	71.5%	40.7%	72.2%
Mean number of confinements*	2.6	2.5	0.9	1.8
Mean number of days confined*	69.8	59.9	32.6	65.6
Number of days to first confinement*	96.0	103.1	145.7	99.4

*Significant at $p < .05$.

days, compared to 100 days for completers. The differences in prior confinement history are addressed in the multivariate analysis.

Table 1 also shows that the matched groups are very different in terms of the outcome measures. Nearly three quarters of RIDE noncompleters recorded an additional jail stay during the follow-up period (72.2%), compared to just 41% of RIDE completers (chi-square = 69.098, $p < .001$).

Figure 1
Survival Rates Among the Rikers Island Discharge Enhancement (RIDE) and Matched Comparison Groups (COMP)



RIDE completers recorded on average half as many jail stays (0.9 vs. 1.8, $t = 6.030$, $p < .001$) and spent considerably less time in jail as a result of those new admissions (32.6 days vs. 65.6 days, $t = 7.750$, $p < .000$).

Multivariate Analysis

The differences in prior jail history among the completers and noncompleters, despite the matching procedure, are troubling. As a result, the authors used binary logistic regression to identify a predictive model of any return to jail during the follow-up (yes or no), by using three covariates: completed 90 days (yes or no), the total number of days confined in the past 5 years, and the total number of confinements in the past 5 years. Results in Table 2 (top section) show that all three variables are statistically significant, though the completer variable is the most powerful. In other words, when controlling for prior jail history, program completion is strongly associated with lower rates of recidivism.¹⁴

Table 2
Results From Logistic and Cox Regression With RIDE
Completers and Matched RIDE Noncompleters

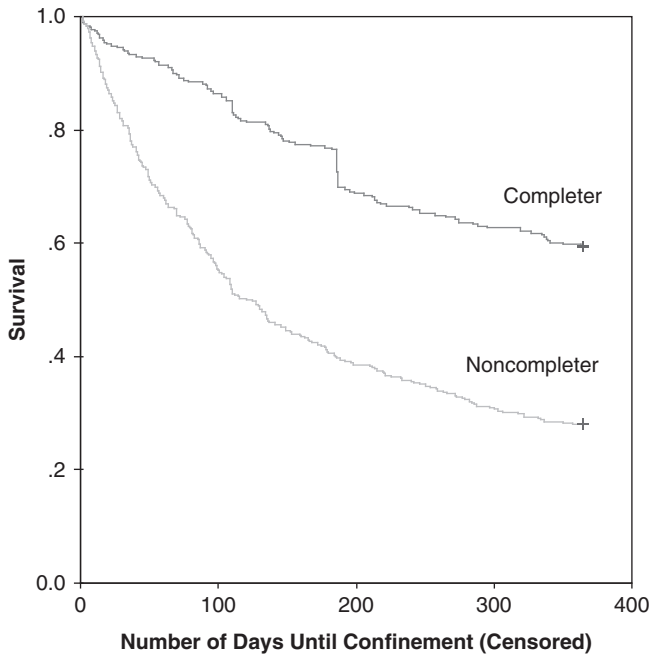
Predictor Variables	<i>B</i>	<i>SE</i>	Wald	Exp(<i>B</i>)	Significance
Logistic regression—any jail return (yes, no)					
RIDE completion (yes, no)	-1.240	.177	48.887	0.289	.000
Total prior confinements	0.081	.033	6.048	1.085	.014
Total prior days confined	0.005	.001	27.253	1.005	.000
Log likelihood	751.727				
<i>R</i> ² (Cox and Snell)	.230				
Chi-square	178.280				
<i>df</i>	3				
Significance	.000				
<i>N</i>	683				
Cox regression—time to first confinement (censored)					
RIDE completion (yes, no)	-0.884	.110	65.136	0.413	.000
Total prior confinements	0.062	.015	17.356	1.064	.000
Total prior days confined	0.002	.000	22.302	1.002	.000
Log likelihood	4614.514				
Chi-square	199.308				
<i>df</i>	3				
Significance	.000				
<i>N</i>	683				

RIDE completers took significantly longer time to return to jail—145.7 days compared to just 99.4 days for noncompleters (see Table 1). Figure 2 shows the survival rates, which clearly illustrates that RIDE noncompleters returned to jail much more frequently and much more quickly than RIDE completers. Results from the Cox Regression analysis (see bottom of Table 2) again show that program completion is strongly and negatively associated with time to jail return, when controlling for prior jail history.

Program Completion, Return to Jail, and the Temporal Ordering Problem

Figure 2 shows that approximately 10% of completers and 40% of non-completers returned to jail within 90 days of release. This phenomenon represents a problem with temporal ordering, as the return to jail for these individuals (the dependent variable) may, in fact, have prevented program completion (the independent variable). This temporal order problem is endemic to analyses like those carried out here, and the problem cannot be fully reconciled.

Figure 2
**Survival Rates Among the Rikers Island Discharge
 Enhancement Completers and Noncompleters**



Nevertheless, the authors conducted additional analyses with the RIDE noncompleter sample to explore the potential pervasiveness of the problem. The first important consideration is that the 90 days required for program completion does not have to be consecutive. Theoretically, an individual could complete 45 days in the community, experience 30 days of incarceration because of a new offense, but subsequently gain release and complete the remaining 45 days of RIDE programming. As a result, the temporal ordering violation is greatest for those individuals who returned to jail within 90 days of release and who then experienced more than 275 days of incarceration, which prevented program completion during the follow-up year.

Table 3 shows that, among the 268 noncompleters who returned to jail, 150 (56%) were admitted within 90 days of their release (“early failures”).¹⁵

Table 3
Time to Failure and Days Confined Among Noncompleters

	Noncompleters who Returned to Jail (<i>N</i> = 268)	
	%	<i>n</i>
Time to first incarceration		
Early failures: 90 days or fewer	57.4	150
Late failures: More than 90 days	42.6	113
Early failures (<i>n</i> = 150)		
Number of days incarcerated		
30 days or fewer	20.0	30
31-90 days	32.0	48
91-180 days	21.3	32
181-274 days	20.0	30
275 or more days	6.7	10
Late failures (<i>n</i> = 113)		
Number of days incarcerated		
30 days or fewer	46.0	52
31-90 days	28.3	32
91-180 days	19.5	22
181-274 days	6.2	7
275 or more days	0.0	0

For these 150 individuals, the new incarceration interrupted their RIDE experience. The remaining noncompleters who returned to jail (43%, *n* = 113) did so after 90 days in the community, which gave them the opportunity to complete the program before their new incarceration (“late failures”). The second issue involves the number of days confined for those who failed early (*n* = 150). Table 3 shows that very few of the “early failure” participants were prevented from completing the program because of the number of days spent in jail. Only 10 individuals were incarcerated for more than 275 days, and as a result, their time in confinement prohibited their completion of the program.¹⁶

This is by no means the final word on the temporal ordering problem. The analyses here have demonstrated that, at a minimum, most noncompleters spent enough time in the community to finish the 90-day RIDE program, but the consequences of early return to jail may be far reaching and difficult to measure. As a result, the implications of findings from the completer and noncompleter analysis must be considered with caution.

Discussion

Summary

The authors conducted a two-phase examination of the use and impact of the RIDE program in New York City, a reentry initiative for city-sentenced inmates leaving jail. This study was carried out in the context of untested assumptions regarding the application of programming principles from the prison setting to the jail and community settings. The comparison of group outcomes leads to two general conclusions:

1. When examined as a whole, released inmates who participated in RIDE fared no better than comparable released inmates who did not participate. Individuals returned at approximately the same rate, at approximately the same time.
2. Individuals who received 90 days of postrelease services fared far better than both those who received less than 90 days of postrelease services and those who did not participate in RIDE at all. This suggests that program dosage is important, but the finding is tempered by methodological concerns.

Potential Explanations for the RIDE Study Findings

There are a number of potential explanations for the two findings. First, both findings may be related to limitations in the research design. Despite our efforts to control for group imbalance, there may be fundamental and important differences between the groups that affect recidivism outcomes. Perhaps most important, the authors were unable to include and control for a measure of treatment motivation. This is particularly salient for the completer and noncompleter analysis in which concern over selection bias is greatest, but it may also be relevant for the more general analyses.

Beyond the possible methodological explanations, there are also a number of program-related issues to consider. First, because the authors were unable to characterize the type and nature of services received by each participant, we cannot comment on the quality of service provision or determine whether the services offered actually met the needs of the participants. The no-difference finding may be explained by inadequate services, differences in services across providers, or a disjuncture between services and individual participant needs. For example, Table 1 shows that most study participants were classified as low or low-medium risk, and prior research suggests that services should be targeted at high-risk individuals (Gaes et al., 1999). Second, many participants failed to take advantage of the full complement of services. This may be

related to the shorter length of stay in jail, which then limited the period of prerelease engagement. It is possible that when participants were released, they were not fully engaged in the program and were more likely to slip back into their old and possibly criminal habits.

Next Steps for Reentry

Taken as a whole, the findings shed little light on the veracity of untested assumptions regarding the extension of programming principles from prison to the jail setting, as well as from the custodial setting to the community. As a result, there is a strong need for additional sound empirical research on jail reentry programs. Given the challenges of the jail setting and the findings, there are two important points that warrant discussion. First, researchers should seek to capture individual-level treatment information, particularly what services were received and in what dosage. Efforts to identify and replicate evidence-based practices hinge on an ability to parse out which aspects of a treatment regimen are effective and which are not. Second, researchers should also capture an indicator of treatment motivation for both program participants and nonparticipants. The treatment motivation measure is particularly important, because most reentry programs are voluntary in nature and experimental designs are difficult to use under those conditions. This measure would allow researchers to alleviate concerns over selection bias when exploring outcomes and would permit serious testing of carry-over assumptions regarding prison-based treatment principles.

Despite the complex set of findings, this study is one of the first empirical examinations of reentry at the local jail setting. As such, there are some more modest insights regarding program implementation and operation—in particular, illustrating how the Department of Correction in New York has overcome some of the formidable barriers to providing reentry services to the jail population. These insights may serve to guide other jurisdictions in their efforts to launch jail reentry programming. First, in 2004, the City of New York enacted a discharge planning law that mandates the NYC DOC to provide comprehensive postrelease services to sentenced inmates leaving Rikers Island (New York City Administrative Code, 2004). Roman and Chalfin (2006) stated that correctional administrators have been reluctant to provide jail-based reentry programming, because they do not anticipate getting a return on their reentry investment. The City of New York removed this debate from the equation by mandating the provision of reentry services, and other jurisdictions may require this same level of governmental support to initiate jail-based reentry programming.

Second, the target population for jail-based reentry programs is typically resistant because of sometimes long histories of failed efforts in programs. Oftentimes, inmates have been disappointed numerous times before by the criminal justice and social service systems, and they are both “program-weary” and “program-wary” (K. Coughlin, deputy commissioner of discharge planning, personal communication, July 5, 2007). Recruitment efforts must take into account this initial resistance to programming, because limited outreach will undoubtedly result in low program enrollment. The NYC DOC and its partner service agencies have developed intensive outreach efforts to recruit inmate participation. For example, the RIDE program is widely publicized at Rikers Island via written literature, videos, posters, and billboards throughout the facility, as well as persistent reminders from NYC DOC staff. Moreover, participation in other jail programs and access to more frequent visitations (including family reunification days) are often tied to enrollment in the RIDE program.

Third, in the RIDE program, preparation for reentry begins well before release. The service providers involved in the RIDE program have staff placed at Rikers Island, and they are responsible for recruitment, assessment, and service provision in the jail. When individuals are released, they have an existing relationship with a case manager, and they have already begun addressing their service need areas. This early preparation is critical for client engagement because of the typically short jail stays with this population.

Fourth, many state prisoner reentry programs and nearly all jail-based programs provide prerelease services only. The emphasis on prerelease services is primarily explained by resource limitations and the fact that most inmates, particularly at the local jail level, are not under any sort of correctional authority after release. Nevertheless, prior research suggests that this population requires a great deal of support both before and after release (The Council of State Governments, 2004). In recognition of the need for this support, RIDE functions as an in-reach, outreach program in which the NYC DOC pays for up to 90 days of postrelease services. Payment for postrelease services represents an investment by the NYC DOC, and the overarching goal is that the return on this investment will be measured in improvements in participants’ quality of life and lower recidivism.

Last, the program dosage issue is particularly difficult for jail-based reentry programs, because once released, these individuals are not under the authority of the DOC. Moreover, in many cases, service providers do not have the resources to aggressively keep active clients engaged. The NYC DOC has responded to this issue by using performance-based

contracts with RIDE service providers. Service providers bill the NYC DOC for individual clients, and the billing structure relies on a pay scale that ties increased fee amounts with continued client involvement. This type of performance-based contract provides strong incentives for service providers to be aggressive in their efforts to maintain client engagement.

Conclusion

Although there are formidable barriers to jail-based reentry, a number of jurisdictions across the country have begun implementing such programs. Reentry programming at the local jail level has developed with two untested assumptions at its foundation: (a) that the principles of reentry at the state level apply equally well to the local jail level and (b) that principles of effective correctional programming during incarceration apply equally well after release to the community. This study represents an exploratory effort to investigate these assumptions through an evaluation of the RIDE program in New York City. Unfortunately, the results produce more questions than answers about program impact and offer little insight on the aforementioned assumptions. Nevertheless, there is a clear need for greater emphasis on jail reentry because of the sheer volume of the jail population and the importance of addressing their needs. In that regard, the RIDE study offers guidance to jurisdictions on the implementation and operation of jail-based reentry, which is particularly useful for overcoming some of the challenges of providing programming to this target population.

Notes

1. As a result, it may actually be more appropriate to discuss Project Greenlight in the previous section on correctional treatment, despite its emphasis on reentry.

2. MDRC was created in 1974 as “Manpower Demonstration Research Corporation.” In 2003, the organization officially made “MDRC” the registered corporate identity.

3. Differences in recidivism were statistically significant: felony convictions (1.7% for program group, 6.2% for control group), parole revocations (18.8% for program group, 27.0% for control group), and state incarceration (9.6% for program group, 19.7% for control group; Bloom, 2008).

4. During the study period, there were three service providers responsible for prerelease and postrelease programming: the Women’s Prison Association (www.wpaonline.org), Samaritan Village (www.samvill.org), and the Osborne Association (www.osborneny.org). All three providers offer a full range of services to RIDE participants, though each has its own primary focus (Samaritan Village: substance abuse; Osborne: employment; Women’s Prison Association: reentry issues for women) and each refers RIDE participants to outside agencies

as needed. The actual services received both during incarceration and postrelease are determined by individual need as well as by service availability at the selected provider.

5. Note that enrollment was determined, to a large extent, by both the early implementation phase of the program as well as program capacity.

6. When possible, the authors matched three comparison group individuals to a single RIDE participant to boost sample size.

7. Haviland and Nagin (2005) highlight the importance of including prior measures of the outcome variable as one of those matching criteria—what they refer to as “modeling the lagged outcome.” Heeding Haviland and Nagin’s advice, the trajectory modeling we carried out with the annual number of prior jail days over the past 5 years.

8. The New York City Department of Correction (NYC DOC) risk classification score is calculated based on criminal justice characteristics, including severity of current charge, history of prior convictions, history of escape, and inmate’s age. The 12-item classification instrument is completed by staff after admission to determine the security classification and housing assignment for each inmate. The total scores are grouped into four risk categories: low (0 to 5), low-medium (6 to 10), high-medium (11 to 16), and high (17 and above).

9. There are still limitations to this approach, however. Common criticisms of the technique include the claim there may still be unaccounted-for differences among the groups despite the matching procedure and the fact that selection of the number of latent groups is often subjective. Nevertheless, the bottom line is that these matching procedures represent a significant advance in quasiexperimental research, giving researchers a better chance to understand program impact when random assignment has not been used. Given the retrospective nature of this study, the authors used the matching procedure in both phases of the analysis in an effort to improve group balance.

10. The manner in which the NYC DOC maintains its records prevented the authors from identifying the exact number of days engaged in postrelease services. NYC DOC data indicate whether the 90-day benchmark was achieved (yes or no).

11. The completer sample was drawn from a larger study period to ensure an adequate sample size for the matching procedures.

12. Given that RIDE is an NYC DOC program with the overall goal of reducing return to jail, the recidivism measures focus solely on confinement during the follow-up period. The authors acknowledge that other measures of recidivism could have been used in the study—such as arrests or state prison incarcerations—but given the program goals, we limited our analysis to various measures of return to jail. Also, each individual was observed for a period of 1 year, beginning on the day of their release.

13. The difference in number of days confined was statistically significant, which suggests that when those who participated in RIDE returned to jail, they tended to stay for longer periods.

14. Of course, the flip side of this is also true. Independent of program completion, prior jail history is still a significant predictor of jail return. Although not shown here, we also ran linear regression models (with the same three covariates) for the number of follow-up jail confinements and the number of days confined, and the results are similar.

15. Time to failure was missing for five individuals.

16. Number of days confined is also shown for the “late failures,” who by definition, spent at least 90 days in the community.

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