

A Wiser Approach to Reentry:

Three-Year Post-Release Evaluation Findings
for Worcester Initiative for Supported Reentry (WISR)

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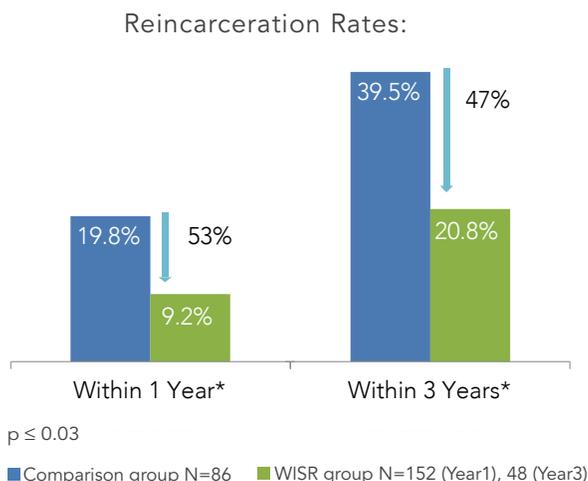
An Evidence-Based Post-Release Reentry Model That Significantly Reduces Recidivism

Three-Year Post-Release Evaluation Executive Summary

In 2011, the Massachusetts Department of Correction (DOC) reported that 44% of all individuals released from prison were reincarcerated within three years post-release. With reentry services spread across multiple state agencies and the needs of newly released individuals spanning multiple systems, reentry barriers for this vulnerable group were formidable. A group of criminal justice, mental health and community health professionals came together to develop the **Worcester Initiative for Supported Reentry (WISR)** to address these reentry barriers from 2011-2016.

Key Findings

WISR reduced recidivism by 47% three years post-release and saved more than \$375,000 per 100 participants — a 59% return on investment (ROI).



WISR Model

Pre-release services began 30 to 90 days before participants' return to the community and included comprehensive assessments and transitional treatment planning. Upon release from incarceration, WISR provided intensive case management services to support participants with housing, healthcare, employment and other key needs. Participants were required to have Superior Court From and After Probation to be eligible for services.

Program Participants

WISR provided post-release reentry services to 152 men over a four-and-a-half-year period. Participants were 19 to 57 years old, with an average age of 30.8 years. More than half (58%) were persons of color, with 27% Hispanic, 20% black and 9% multi-racial. About 70% of participants came from the DOC and 30% from the Worcester County House of Correction.

Client-Centered Approach

WISR created service plans tailored to each individual, which allowed for individual success regardless of race/ethnicity. Three years post-release, WISR participants of color were less likely than white participants to be reincarcerated (*p*<0.05).



The recidivism rate among WISR participants three years post-release was 20.8%, a reduction of 47% relative to a historical comparison group. This reduction in recidivism yields a ROI of 59% based on one-year incarceration costs in Massachusetts. Accounting for additional years of averted incarcerations would generate additional cost savings.



Nearly all participants (96%) were housed immediately upon release, and the remaining 4% were housed within one day of release. The share of participants renting their own apartments increased from 10% immediately post-release to 26% at the end of the evaluation period.



Almost all participants (97%) in need of MassHealth insurance enrolled. Of those who needed a primary care physician, 94% were seen. Almost all participants (93%) referred to substance abuse treatment services accessed the services. Three out of every four participants (75%) referred to mental health services accessed the services.



Among the 152 participants released, 62% became employed post-release. Of those who became employed post-release, nearly three quarters (71%) were continuously employed for one year or longer.



The WISR model successfully engaged partners in the Executive and Judiciary branches and the Worcester County Sheriff's Office to build a collaborative, cohesive approach to address post-release reentry into the community. The three-year post-release evaluation demonstrates a significant reduction in recidivism and a substantial ROI, thereby supporting widespread implementation of the WISR model throughout Massachusetts to reduce reincarceration, increase public health, and improve public safety.

BACKGROUND

In 2011, Massachusetts experienced high rates of recidivism among individuals released from prison and jail. The Massachusetts Department of Correction (DOC) reported that 44% of all individuals released from prison were incarcerated again three years after their release (Papagiorgakis, 2015). At an annual average cost of about \$53,000 per person per year, the cost to the state of this revolving door of incarceration was prohibitive. Also, these costs did not account for the suffering of families and communities due to recidivism and decreased public safety.

With reentry services spread across multiple state agencies and the needs of newly released individuals spanning multiple systems, including substance use disorder treatment, housing, and employment, reentry barriers for this vulnerable group were formidable. Individuals reentering the community after prison or jail sentences present with multiple concurrent needs and, in many cases, face challenges in effectively managing their own reentry into society. With a criminal justice system housed under the Executive and Judicial branches, in addition to a county-based Sheriff's office, the fragmented system exacerbated the challenges faced by ex-offenders. Without a coordinated system to address their physical, mental and emotional health and to provide support finding housing and employment, ex-offenders emerged from prison and jail on a track to experience poor health outcomes and with an inability to reintegrate into the community. Negative health outcomes and poor quality of life often lead ex-offenders back into criminal behaviors.

In response to these needs, a group of criminal justice, mental health and community health professionals (see Sidebar) came together in 2011 to design and implement the post-release Worcester Initiative for Supported Reentry (WISR). These partners believed that a coordinated reentry effort between criminal justice entities and community-based behavioral health organizations could reduce recidivism and do so at a cost less than the Commonwealth's per person annual incarceration costs. The project's mission was to reduce recidivism, increase public health, and improve public safety.

The Health Foundation of Central Massachusetts provided a total of \$1.9 million for planning in 2011, piloting in 2012 and full implementation in 2013-2016 for WISR. With implementation led by Advocates, a behavioral health treatment organization, WISR used community-based partnerships to reduce recidivism among formerly incarcerated men housed in certain DOC and Worcester County House of Correction intervention sites. Based on numerous studies and the direct working experience of WISR's partners, the program focused on three key factors for successful reintegration into the community — housing, healthcare (including substance abuse treatment) and employment — that, if accessed by returning citizens, would greatly reduce their risk of reincarceration.

WISR was overseen by a Steering Committee comprised of primary project partners and evaluators from Brandeis University who provided the program with strategic direction. WISR also convened a community-wide collaborative called the WISR Reentry Roundtable which met quarterly for the first 18 months of implementation (January 2013 through May 2014). The Reentry Roundtable was comprised of key stakeholders, including project partners, local business and social service leaders, faith-based organizations and academics committed to working together to identify and overcome systems-level barriers that inhibited WISR participants' positive reentry experiences. WISR's operations team, which included a project manager, three case managers, and a clinician, provided inter-agency coordination and daily programmatic and operational management. WISR's case managers provided evidence-based clinical and case management services.

WISR maintained a culture of strengths-based treatment with a collaborative approach focused on improving reentry outcomes and creating long-term, sustainable systems change. The program used continuous quality improvement feedback loops within all aspects of its operation and acted with speed and agility to incorporate strategic and operational changes to ensure its ability to meet its goals and objectives.

WISR Primary Partners

- Advocates, Inc.
(grantee/lead organization)
- Worcester Superior Court Probation
- Worcester County Sheriff's Office/
Worcester County House of
Correction
- Massachusetts Department
of Correction
- Massachusetts Parole Board,
Region 4 Office
- Worcester District Court Probation
- Dismas House
- Edward M. Kennedy Community
Health Center

WISR Reentry Model

WISR provided intensive transition case management services to individuals being released from Massachusetts medium, minimum and pre-release state prisons and the Worcester County House of Correction and reentering the community in Worcester County. Collaboration with reentry and other staff in the DOC and House of Correction and Probation Officers created a coordinated set of support services from pre-release discharge planning well into post-release supervision. Partners' treatment recommendations were aligned with mental health and substance abuse assessments and criminogenic risk factors, as well as post-release supervision conditions. Partners were able to work together in inter-agency teams to increase participants' motivation, address participants' challenges and recognize participants' successes with positive reinforcement.

Partners incentivized participation in the project, which aided in recruitment efforts pre-release and maintenance of post-release program engagement. With Probation's collaboration, participants who were active in the project for one year after their release from jail and prison and who had met their conditions of probation were eligible for a 30% reduction in their remaining probation sentence.

A critical component of WISR was providing participants with case management to support them with housing, employment, healthcare and other key needs. Case managers met with participants 30 to 90 days before release, administered screenings and assessments to identify participants' strengths and service needs, and, in partnership with the participants, developed individually-tailored service plans to encourage smooth transitions to the community.

Case managers coordinated services including housing and residential substance use disorder treatment programming and medical and behavioral health appointments to ensure supports were in place prior to each participant's release. In many instances, case managers provided participants with transportation on the day of release from the prison or jail to meet with their probation officers and then transportation to residential programming.

Evaluation Approach

The evaluation, conducted by researchers from Brandeis University, involved both process and outcomes evaluation. The evaluation used a quasi-experimental historical control group design to compare reincarceration rates post intervention. The intervention group included 152 men who participated in WISR. A comparison group of 86 men was randomly selected from a group of comparable men who would have been eligible for WISR but were released to probation in 2011, before WISR started.

Data on criminal justice outcomes, abstracted from the Criminal Offender Record Information (CORI), were provided by the Worcester Superior Court Probation department for both the WISR group and the comparison group. Other data for this report were obtained from a management information system maintained by Advocates. The study received approval from the Massachusetts Department of Correction and the Brandeis University Institutional Review Board. This report covers the pilot and implementation years from January 2012 through June 2016.

Key Components of the WISR Model

- Coordination across agencies and partners
- Individualized case management pre- and post-release
- Superior Court From and After Probation
- Incentives to participate (i.e., reduced probation time)

PROCESS EVALUATION

Program Participants

To participate in WISR, offenders reentering the community had to have:

- Been under the supervision of Worcester Superior Court Probation upon release
- Had plans to return to Worcester County
- Been between the ages of 18 and 57
- Had convictions that did not include arson, a sex offense, or murder.

WISR enrolled and discharged 152 participants over a four-and-a-half year period. All 152 participants consented to the evaluation. Participants ranged in age from 19 to 57 years old, with an average age of 30.8 years. More than half of the participants (58%, n=89) were persons of color, with 27% Hispanic (n=41), 20% black (n=31), 9% multi-racial (n=14), 42% white (n=63) and 2% other (n=3) (see Figure 1). About seven out of every ten participants (71%, n=108) came from the DOC, and three out of every ten (29%, n=44) from the Worcester County House of Correction.

Time in WISR

Overall, individuals who received reentry supportive services from WISR remained engaged in the program for significant periods of time. The median length of time participants utilized WISR services post-release was 628 days (1.7 years) and the mean was 611 days (1.7 years), with a range of 15 to 1,256 days (3.4 years) (see Figure 2).

Figure 1: Race/Ethnicity of WISR Participants
N=152

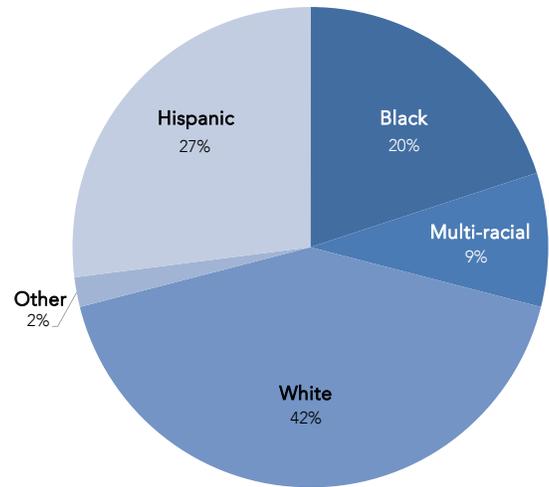
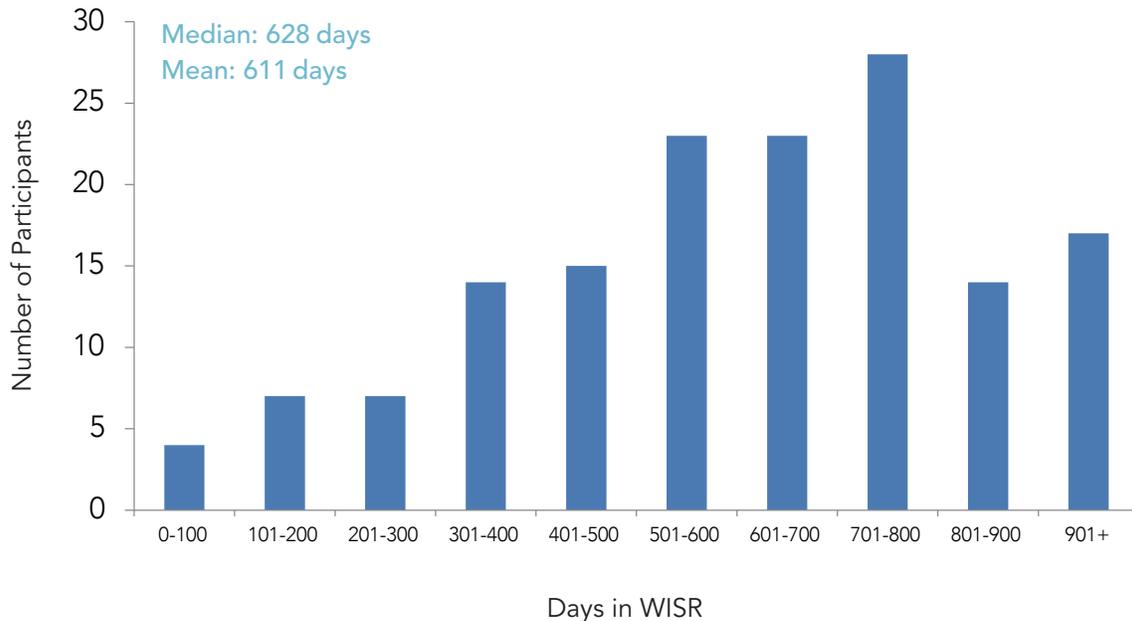


Figure 2: Days in WISR
N=152

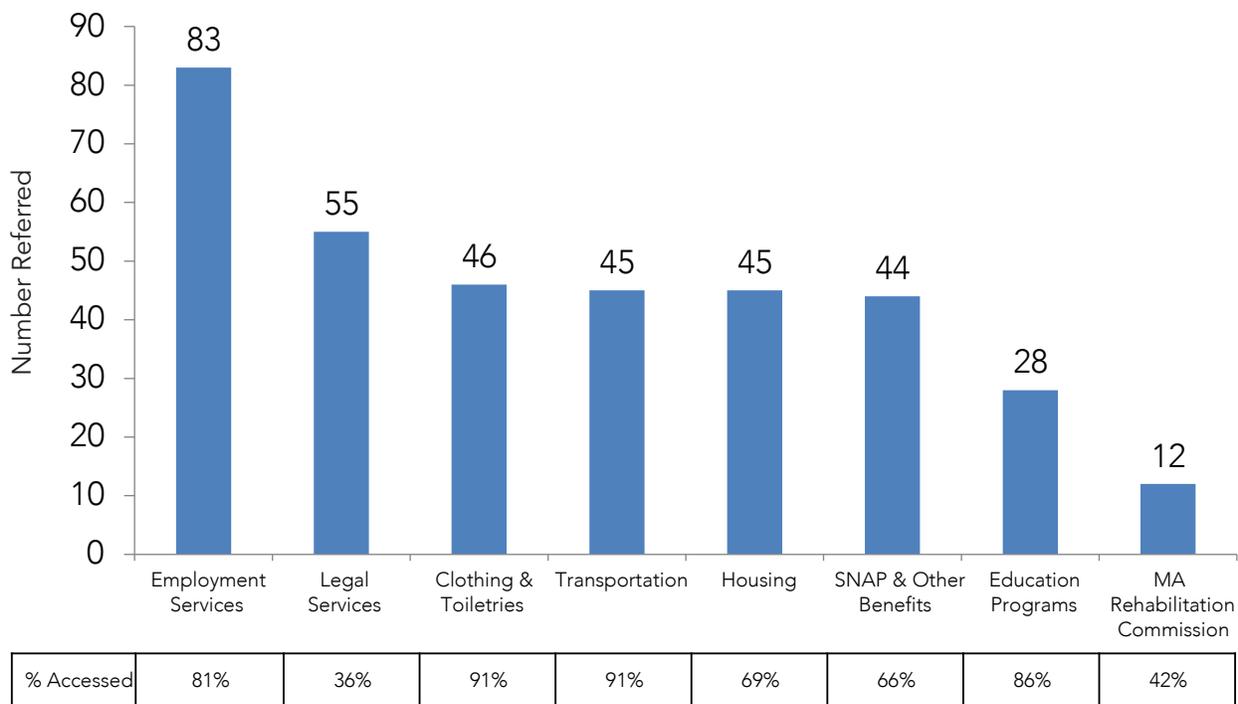


Social Support Services

Once participants reentered the community, case managers provided comprehensive and individualized transition and case management services and referred participants to a wide variety of community services (see Figure 3). In particular, participants received referrals to employment services, legal services, clothing and toiletries, transportation and housing services most often. In terms of actually acting on referrals, participants accessed referrals to employment services, clothing and toiletries, transportation and housing services most often. Clothing and toiletries were provided as a way to keep participants engaged in WISR and/or in contact with the case managers.

Figure 3: Referrals to Support Services

N=152



Housing

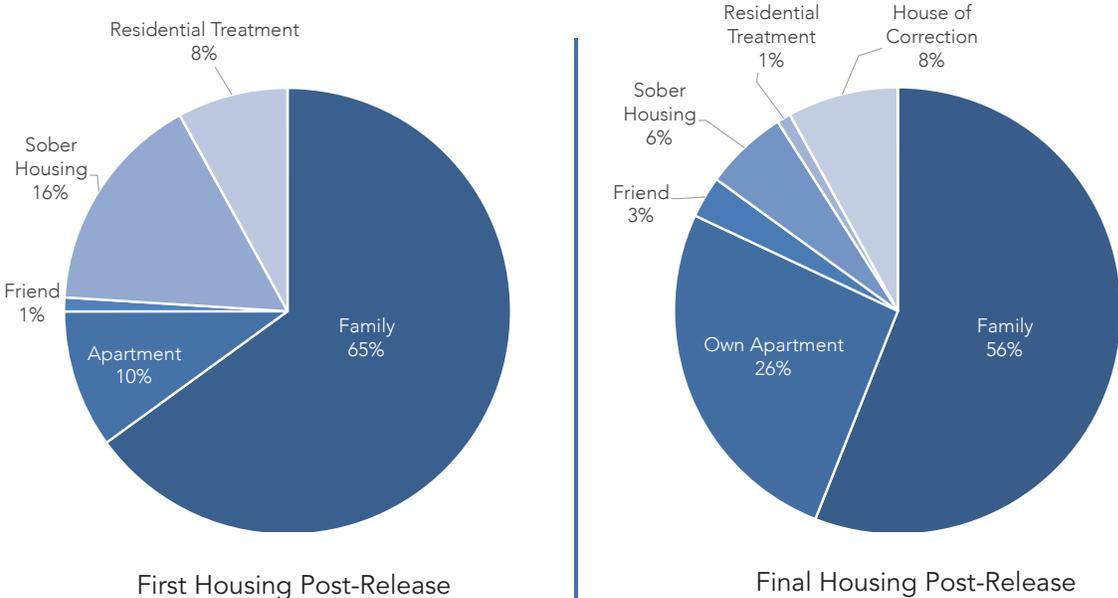
WISR staff identified and secured appropriate post-release housing and residential substance use disorder treatment programs for all WISR participants prior to their return to the community. Case managers utilized flexible, short-term housing funds for participants who were not returning to live with family and who did not have the means to secure their own housing upon release in order to ensure that no person returned to the community homeless. Among the 152 participants, 17% (n=26) used this gap funding. Participants used gap funding for 1 month (46%, n=12) up to 12 months (4%, n=1). The median number of months of gap funding was 2.5 months. Overall, WISR spent \$32,624 for these 26 participants, or an average of \$1,255 per participant receiving gap funding. In an early phase of the gap funding, WISR funded specific beds to provide on-demand housing. Due to the ebb and flow of need, however, WISR spent \$20,500 on beds that remained unoccupied. Therefore, WISR staff moved to a model of paying for housing that participants identified rather than the dedicated beds, which eliminated spending on unoccupied beds.

Among the 152 participants, 96% (n=146) were housed immediately upon release and 4% (n=6) within one day of release. The median and mean time to housing was 0 days. Two out of every three participants (65%, n=98) moved in with family, 10% (n=15) rented their own apartments, and 1% (n=1) moved in with friends (see Figure 4). One out of every four participants (24%, n=37) moved into a sober transitional house or residential treatment facility. Half of the participants who moved into sober transitional houses or residential treatment facilities (57%, n=21) later moved in with family or friends (n=12) or rented their own apartments (n=9).

Many participants needed housing support even after the initial placement. Half of the participants (51%, n=78) moved to a second housing arrangement, 22% (n=33) moved to a third housing arrangement, 10% (n=16) moved to a fourth housing arrangement and 7% (n=10) moved to a fifth housing arrangement.

In terms of the final housing arrangement for each participant, 56% (n=85) were housed with family, 26% (n=39) had their own apartments, 3% (n=4) were living with friends, 6% (n=9) were in sober/transitional housing, 1% (n=1) was in residential treatment, and 8% (n=13) were in the Worcester House of Correction (some were being held on violations and not technically re-incarcerated) (see Figure 4). Three out of every five participants (62%, n=94) remained housed for more than two years. Another 30% (n=46) were housed between one and two years, and only 8% (n=12) were housed for less than one year.

Figure 4: Type of Housing
N=152



HOUSING SUPPORTS EASE TRANSITION TO INDEPENDENT LIVING

“RICARDO”, AGE 51

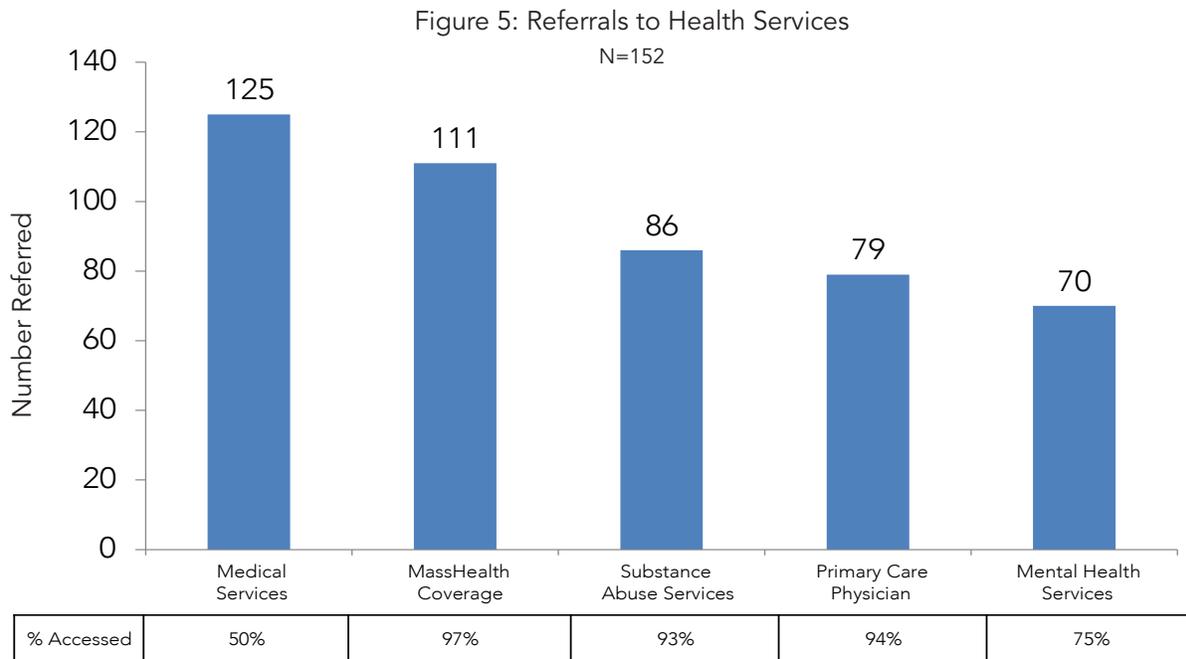
After aging out of the foster care system, spending a good portion of his life in prison and treatment facilities, and being homeless, Ricardo had never lived independently at the age of 51. In fact, he did not think renting his own apartment would ever be a possibility. His history of multiple incarcerations and virtually no employment history seriously limited Ricardo’s possibilities to live independently. When Ricardo returned from prison, WISR helped him pay for transitional housing and find temporary employment. Over time, he built his employment skills and developed a list of people willing to give him employment references. He moved from a temporary day labor position to a temporary warehouse position and eventually became the team leader in a local factory. Four months after he returned from prison, he started to pay his shared room fee in the transitional housing and no longer needed WISR’s financial housing support. Two months later, he rented a three-bedroom apartment with two roommates. A year after that, Ricardo rented a studio apartment – the very first time in his adult life that he had lived independently. WISR helped him find the studio apartment and advocated with the landlord. Ricardo explained to us,

“I’ve never felt this good about myself before. I don’t know why WISR believed in me, but I’m so glad they did.”

Healthcare Services

WISR supported participants in obtaining health insurance coverage and accessing needed health services. Many participants were eligible for MassHealth (Massachusetts Medicaid) insurance coverage, and WISR referred 70% (n=111) to MassHealth (see Figure 5). WISR worked with a Federally Qualified Health Centers to ensure participants’ access to comprehensive and integrated healthcare. WISR case managers referred many participants to healthcare services in the community. Most participants were referred to general medical services (82%, n=125). About half of the participants were referred to substance abuse treatment services (57%, n=86) and to a primary care physician (52%, n=79), and just under half were referred to mental health services (45%, n=70).

Half of participants referred to general medical services (50%, 62 out of 125 participants) accessed these services. Nearly all participants in need of MassHealth insurance accessed MassHealth insurance (97%, 108 out of 111 participants). Nine out of every ten participants referred to substance abuse treatment services (93%, 80 out of 86 participants) accessed the recommended services. More than nine out of every ten participants (94%, 74 out of 79) who needed a primary care physician (PCP) were seen by a PCP. (Note, some participants had a PCP prior to engagement in WISR services.) Three out of every four participants (75%, 52 out of 70 participants) referred to mental health services accessed these services.



MENTAL HEALTH AND SUBSTANCE ABUSE TREATMENT SERVICES BUILD RESILIENCY

“CASEY,” AGE 32

When Casey first returned to the community, he rebelled against his conditions of probation and would not engage in WISR’s services. After multiple violations of probation, and in the face of returning to prison to serve the remainder of his sentence, he finally agreed to work with the WISR case manager. WISR’s clinician conducted an updated mental health evaluation and helped Casey enter into regular therapeutic treatment. He attended anger management groups and counseling to address his PTSD. WISR also helped him find a Narcotics Anonymous group, as one of Casey’s fears was that he would begin to use drugs again. With WISR’s assistance, shortly after his treatment began, Casey started working. Probation noted that he was “a new man” – more polite, more willing to talk about his problems even when it was difficult for him to do so. In addition, Casey showed real effort, despite numerous challenges and set-backs, to meet the conditions of his probation. Casey’s mental health and substance use treatment and WISR’s collaboration with probation ensured that whenever Casey experienced trouble, the team was there to provide him with a safety net and keep him on the path of successful reentry.

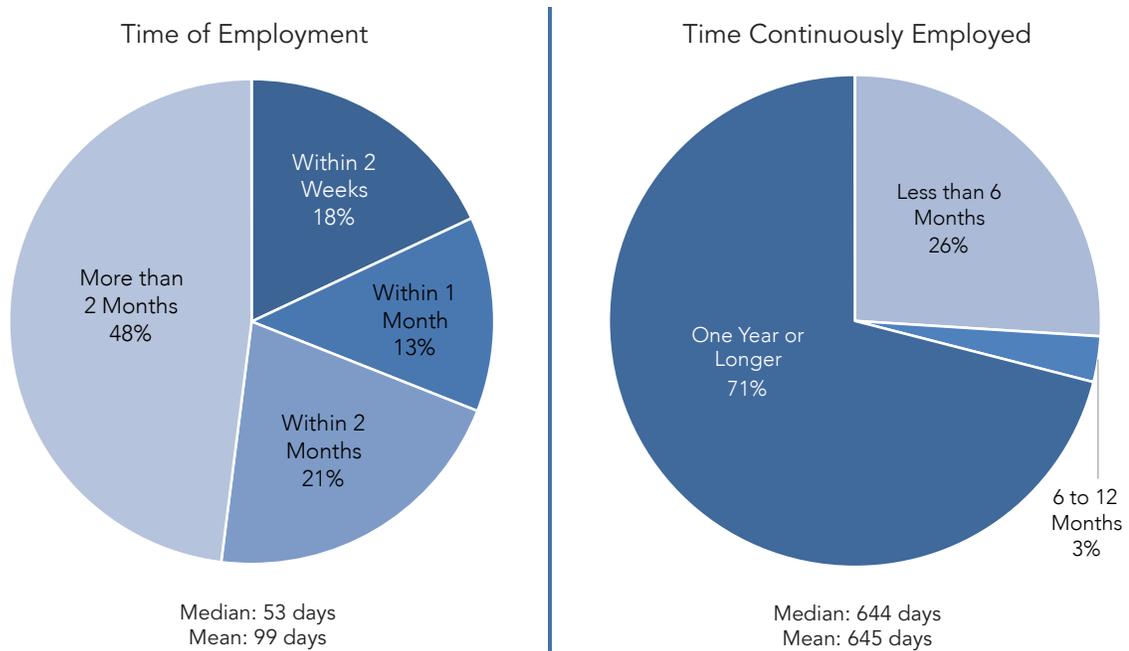
Employment

Achieving stable employment is a critical factor in participants' successful reentry. Case managers' pre-release assessments and work with participants included a strong focus on educational status, vocational skills, past employment history and desired employment upon release.

Although participants could not apply for jobs while incarcerated, preparation such as resume building was done, and careers goals were discussed as a part of the Individual Service Plan (ISP). Once a participant was released into the community, case managers provided participants with additional support completing resumes and job applications, practicing interviewing skills and conducting independent online job searches. Participants were also connected with local employment agencies, job fairs, and the Workforce Career Center. Once a participant was hired, case managers provided ongoing employment support, including assistance adapting to the new work schedule, working on a team, addressing workplace conflict and frustrations appropriately, and seeking and negotiating advancement in the workplace.

Among the 152 participants, 62% (n=94) became employed following release from prison or jail. The median time to find a job was 53 days, and the mean time was 99 days (see Figure 6). About half of employed participants (48%, n=44) took more than two months to obtain a job. Once they obtained a job, however, most participants (71%, n=66) were continuously employed for one year or longer before the end of the evaluation, with a median of 644 days and a mean of 645 days.

Figure 6: Employment Data for Those Employed
N=94



OUTCOMES EVALUATION

Participant Satisfaction

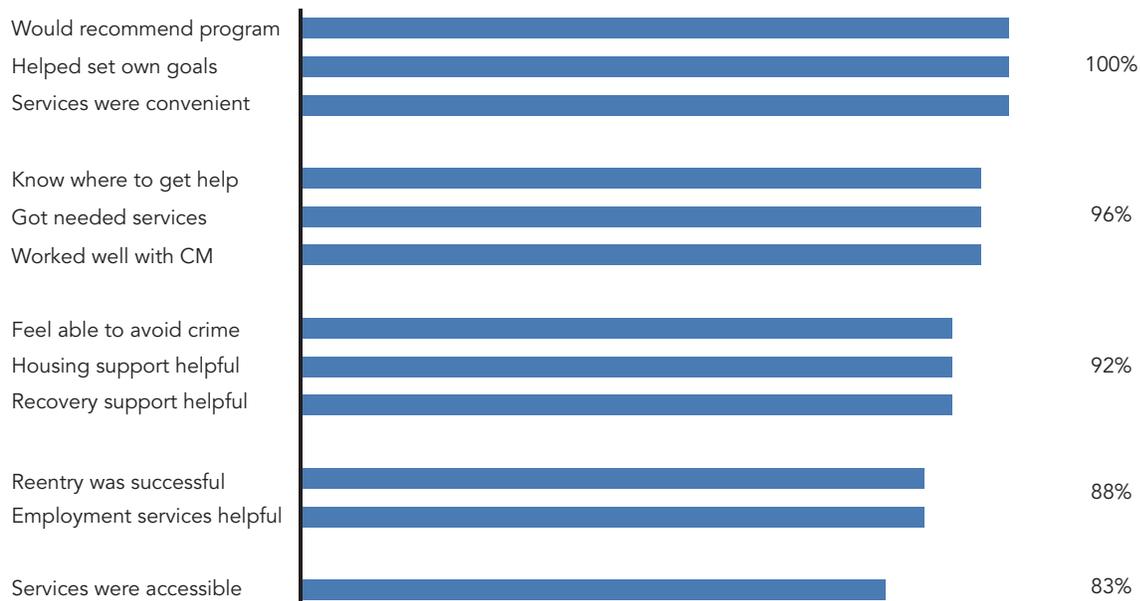
Information about participants' experiences with WISR services was collected from a subset of participants throughout the course of the study. At periodic intervals, WISR staff asked participants to complete participant satisfaction surveys. They were given the option of completing written or electronic versions of the survey. For participants who did not respond in a timely manner, an evaluator called the participant to conduct the survey over the telephone. Overall, 24 participants completed satisfaction surveys. The surveys asked about satisfaction with services and feelings about each participant's own outcomes.

Nine out of every ten participants felt they were better able to avoid committing a crime in the future because of WISR.

Participants who completed the surveys were engaged in WISR for varying lengths of time. Almost all respondents reported being able to get what they needed when they were first released (96%, n=23) and that services were accessible in terms of location and transportation (83%, n=20) (see Figure 7). Respondents further reported that the service times were convenient (100%, n=24) and that they worked well with their case managers (96%, n=23). Respondents reported being actively involved in setting their program and treatment goals with their case managers (100%, n=24), and all respondents would recommend the program to other previously incarcerated individuals (100%, n=24).

Figure 7: Participant Satisfaction

N=24



Overall, respondents reported satisfaction with WISR services and felt that WISR supported their efforts in engaging in law-abiding behaviors. Nine out of every ten respondents found the recovery support services (92%, n=22), employment services (88%, n=21), and housing services (92%, n=22) helpful (see Figure 7). Nearly all respondents (96%, n=23) said they now know where to get help if they need it. Additionally, nine out of every ten respondents felt that their reentry was successful (88%, n=21) and that they felt able to avoid committing a crime in the future because of WISR (92%, n=22).

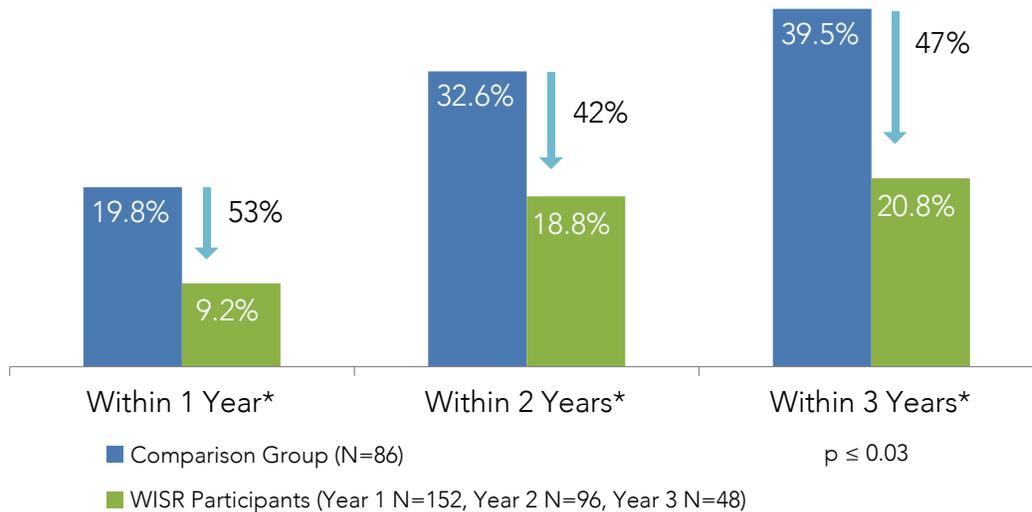
Recidivism Analysis

To conduct a recidivism analysis, Worcester Superior Court Probation accessed Criminal Offender Record Information (CORI) on the 152 WISR participants and the 86 men in the comparison group. For this analysis, recidivism was defined as a new incarceration due either to a new crime or a violation of probation. The analysis did not count men who were held in jail pending adjudication, only convictions resulting in reincarceration. We analyzed recidivism for one, two and three years post-release. For the WISR participants, they were only included in the analysis if they had been out of jail or prison for at least one full year, two full years and three full years, respectively. All comparison group members had been released for at least three full years and were, thus, included in all three analyses.

The analysis indicates that WISR participants were significantly less likely to recidivate than men in the comparison group for one, two and three years post-release (see Figure 8). Three years post-release, 39.5% of the comparison group had been reincarcerated compared to 20.8% of the WISR participants, representing a reduction in recidivism of 47.3%.

Multivariate analyses were conducted, with race, age, institution, employment after release, type of housing after release, and use of medical, substance abuse and mental health services post-release as covariates to determine if there were differences in reincarceration rates by subgroups one, two and three years post-release.

Figure 8: Reincarceration Rates by Years Post-Release



Statistically significant findings showed that:

- Participants who were unemployed post-release were more likely (OR=6.10, $p \leq 0.01$)
- Participants who were unemployed post-release were more likely than those who were employed to be reincarcerated within two years (OR=8.00, $p \leq 0.01$)
- Older participants were less likely than younger participants to be reincarcerated within three years post-release (OR=0.88, $p \leq 0.05$)
- Participants who were white were more likely than black or Latino participants to be reincarcerated within three years post-release (OR=7.81, $p \leq 0.05$)

Three years post-release, WISR participants of color were less likely to be reincarcerated than white participants.

Cost Analysis

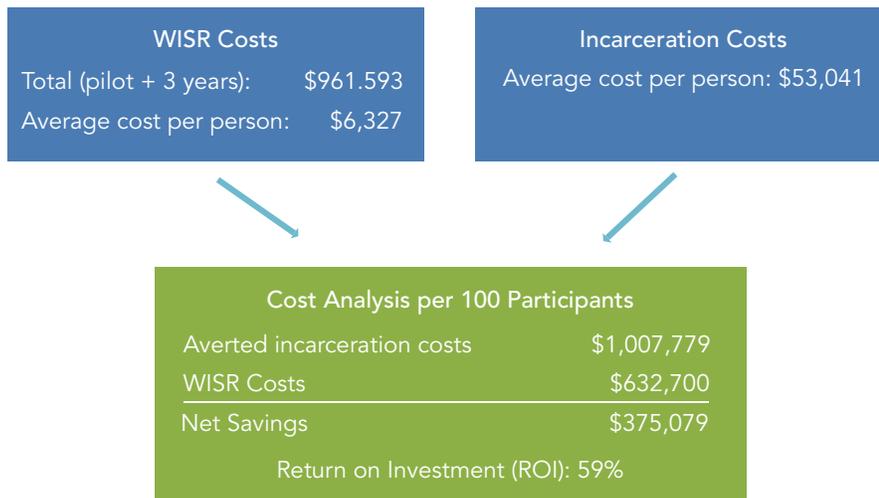
The cost of the program was compared to estimated savings due to averted WISR incarcerations to calculate a return on investment. Calculating the program costs, including the pilot (2012) and three implementation (2013-2015) years but excluding the evaluation and advocacy costs, the program costs totaled \$961,593 or \$6,327 per participant (see Figure 9). Note, 2016 costs were excluded as all men included in this analysis had completed the program by then.

Comparing the three-year reincarceration rate for the WISR group (20.8%) to the comparison group (39.5%), it was estimated that WISR prevented 19 incarcerations per 100 participants over the three-year period. At an incarceration cost of \$53,041 per person per year (from MA DOC), this is an estimated savings of \$1,007,779 per 100 participants due to averted incarcerations.

The net savings were \$375,079 per 100 participants, which represents a 59% return on investment. This is the lower bound of savings as the analyses assume just one year of reincarceration, while sentences could have been longer (these data were not collected, however). The projected savings also do not include costs saved on arrests, processing, and court procedures, as well as victimization costs.

WISR reduced recidivism by 47% three years post-release and saved more than \$375,000 per 100 participants — a 59% return on investment.

Figure 9: Cost Analysis



Strengths And Limitations

The key limitation of this study was the use of the quasi-experimental historical control group design. A randomized design would have provided greater confidence in the results, but such studies are difficult to conduct with community-based interventions. Although the timeframes during which offenders were released and experienced community reintegration differed between the WISR group and the control group, those differences were minimized by selecting a comparison group among men who were released to the community just prior to WISR implementation. In addition, limited data on the comparison group precluded statistical analyses comparing the men in the intervention and control groups. The study was strengthened by using official CORI data rather than self-reported data for the key outcome of interest.

DISCUSSION

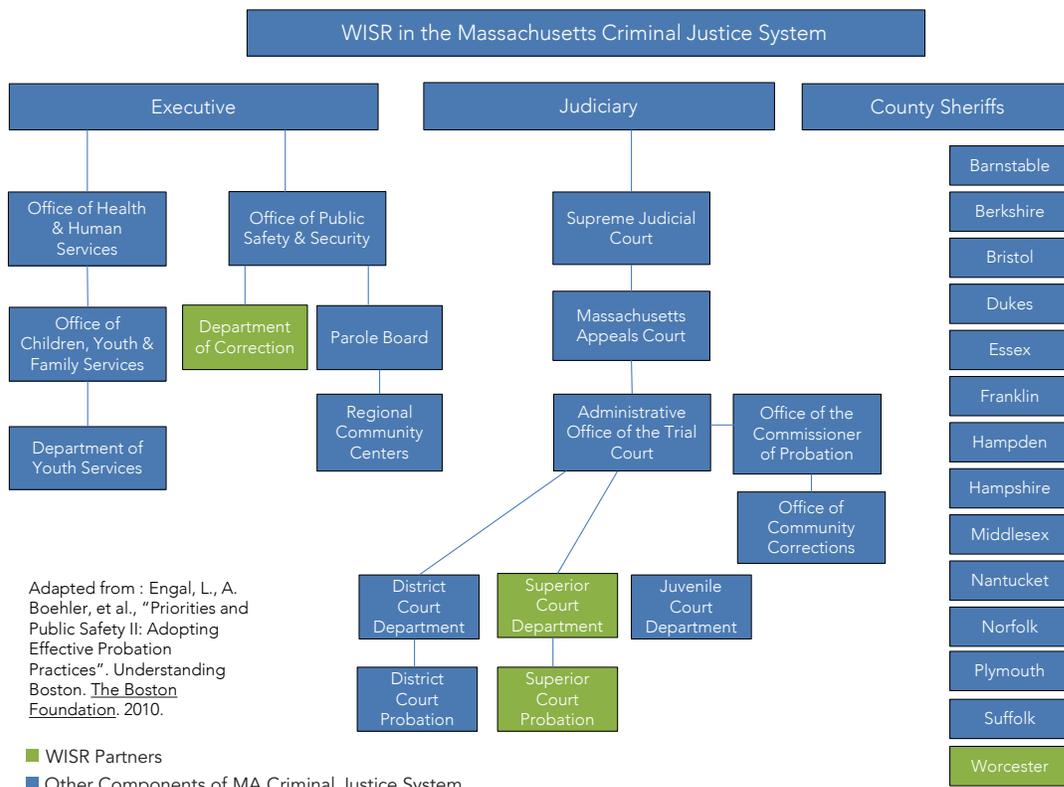
This evaluation revealed that WISR resulted in a 47% reduction in recidivism three years post-release. This significant reduction improves the safety of communities and reduces economic and social costs due to crime. In addition, WISR demonstrated that men reentering the community after incarceration were willing and able to access recommended healthcare and behavioral health services, important steps in successful reentry. More than nine out of every ten participants referred to MassHealth insurance, primary care physicians and substance use disorder treatment accessed those services. Furthermore, three out of every four participants referred to mental health services and half of those referred to general medical services accessed those services. Research demonstrates that individuals who access needed health and behavioral health services have less involvement with the criminal justice system, while the lack of treatment, particularly for those with substance use and mental health disorders, can lead to greater involvement with the criminal justice system (for example, see French et al., 2000; Cook and Alegría, 2011; Honig, 2015). In addition, WISR's housing and employment support helped individuals reentering the community build productive and safe lives. All participants were housed immediately upon release or within one day of release. Three out of every five participants successfully found employment while still in WISR.

The success of WISR can be attributed to several key components of the program, which were coordination across agencies and partners, individualized case management pre- and post-release, Superior Court From and After Probation, and incentives to participate.

WISR Collaborations Across The System

Massachusetts experiences high rates of recidivism, with 44% of individuals released from prison being reincarcerated within three years of release (Papagiorgakis, 2015). With reentry services spread across multiple state agencies and the needs of newly released individuals spanning multiple systems, including substance use disorder treatment, housing, and employment, reentry barriers for this vulnerable group are formidable. Massachusetts leaders have recognized the need for reform and have been working with the Council of State Governments on the Justice Reinvestment Initiative sponsored by the Bureau of Justice Assistance. Reforms in the criminal justice system can increase public safety, while also addressing racial, ethnic and gender disparities. However, such reforms require collaboration across agencies and systems. For example, in Massachusetts, criminal justice work takes place in the Executive and Judicial branches, as well as among the County Sheriff's Offices.

Figure 10: WISR in the Massachusetts Criminal Justice System



Individuals reentering the community after prison or jail sentences present with multiple concurrent needs and, in many cases, face challenges in effectively managing their own reentry into society. With a criminal justice system housed under the Executive and Judicial branches, in addition to a county-based Sheriff's office, the fragmented system exacerbates the challenges faced by ex-offenders. Without a coordinated system to address their physical, mental and emotional health and to provide support finding housing and employment, ex-offenders emerged from prison and jail on a track to experience poor health outcomes and with an inability to reintegrate into the community. Negative health outcomes and poor quality of life often lead ex-offenders back into criminal behaviors.

WISR, led by Advocates, successfully engaged partners in the Department of Correction and Regional Community Centers within the Executive branch; District Court Department and Probation, Superior Court Department and Probation, and Office of Community Corrections within the Judiciary branch; and the Worcester County Sheriff's Office and House of Correction (see Figure 10). This collaboration was a key factor in the success of the WISR program.

Individualized Case Management Pre- And Post-Release

WISR provided intensive case management services that were tailored to each individual. WISR provided pre- and post-release transitional case management services that included pre-release assessments, highly individualized case management and reentry navigation service delivery, and supported referrals with priority access to community-based services. Staff assisted participants with housing, employment and access to primary and behavioral health care services. A WISR clinician oversaw the case managers' work and provided assessments, but most clinical services – like other services – were referred to existing services in the community. This helped to contain costs, ensure client choice and provide placements to participants with organizations who specialized in particular services.

Addressing Racial And Ethnic Disparities

The one-on-one approach of the WISR model worked to reduce racial and ethnic disparities evidenced in the criminal justice system. The collaborations that WISR case managers built with the DOC and Worcester House of Correction staff led to clear eligibility guidelines that allowed equal access among men of different racial and ethnic groups. About three out of every five WISR participants were persons of color (58%). This parallels the proportion of persons of color within the Massachusetts DOC (57%), suggesting that WISR successfully enrolled a diverse and representative range of participants.

As of January 1, 2014, the race/ethnicity of inmates serving criminal sentences within the Massachusetts DOC was:

- 43% white (n=4,209)
- 28% black (n=2,737)
- 26% Latino (n=2,581)
- 3% other (n=281)

Beyond equal access, participants of color were less likely to be reincarcerated three years after release compared to white participants. WISR case managers developed individual service plans, with input from participants, that focused on the specific needs of each individual participant. This client-centered approach allows for individual success regardless of race or ethnicity.

Superior Court From And After Probation

All participants in WISR had been sentenced to Superior Court From and After Probation, which meant that Worcester Superior Court Probation provided all WISR participants with post-release supervision services. WISR staff worked in partnership with probation staff to support participants in meeting their conditions of probation. In cases where participants were challenged to meet their conditions of probation or who were at risk for re-offending, WISR staff and probation staff worked in concert to increase participants' motivation and to access services that supported their journey to independent and lawful community tenure.

Incentives To Participate

Partners incentivized participation in the project, which aided in recruitment efforts pre-release and maintenance of post-release program engagement. Superior Court incentivized participation in WISR by offering reduced probation time to participants who were actively engaged in the program and who were progressing toward independent living. Participants who were active in the project for one year after their release from jail and prison and who had met their conditions of probation were eligible for a 30% reduction in their remaining probation sentence.

Related Work

The Worcester County Sheriff's Office and House of Correction recognized the value of the WISR model and partnered with Advocates and The Health Foundation of Central Massachusetts in 2014 to study an enhanced approach to the WISR model with funding from the Bureau of Justice Assistance, a component of the U.S. Department of Justice's Office of Justice Programs. In this enhanced approach, called *Wiser Men*, the House of Correction assesses the needs of each individual upon entry and provides enhanced in-house education, mental health and substance use disorder treatment services to prepare men for reentry from the first day of entry. Advocates then brings the traditional WISR services to these men pre-release and continues to provide intensive case management services upon release. Unlike WISR, not all participants in the *Wiser Men* project have post-release community-based supervision. This study is ongoing, with results available in late 2017.

The Health Foundation of Central Massachusetts also supported Advocates to conduct a pilot study of a *Wiser Women* model during 2016. Through this effort, the value of the collaborations within the criminal justice system and among community-based health and social service organizations was emphasized to support women upon reentry. The entrance into and ongoing involvement of women with the criminal justice system varies significantly from that of men. Women are at greater risk of experiencing trauma including sexual abuse, assault, and domestic violence; are more likely to have primary caregiver responsibilities than men; and experience high levels of economic and social marginality and, as a result, homelessness. Mental health and substance use disorders among female offenders are also highly prevalent. This pilot study, which concluded in December 2016, can also inform state policy makers and providers as they look to expand the WISR model throughout Massachusetts and include women reentering the community.

RECOMMENDATIONS

Incarceration costs Massachusetts significant resources every year. With incarceration costs over \$53,000 per person per year, the 1,564 inmates convicted of drug offenses alone cost Massachusetts \$83.0 million per year (MA DOC, 2014; MA EOPSS, 2015). The WISR model offers an effective way to reduce reincarceration and its related costs. The estimated reduction in incarcerations due to WISR yielded a net savings of \$375,079 per 100 participants, which represents a 59% return on investment. Thus, the results suggest that for every \$1 million spent on sustaining and expanding the WISR model, more than a half million dollars could be saved. This is a conservative estimate as it only includes the costs saved due to reduced incarceration and not the costs saved on arrests, processing, and court procedures, as well as victimization costs. Further, it does not include other potential financial benefits to the Commonwealth, such as taxes paid by employed ex-offenders or reduced public benefits that ex-offenders with successful reentry may no longer need.

The results of this evaluation suggest that widespread implementation of the WISR model throughout Massachusetts would reduce reincarceration, increase public health, and improve public safety. Widespread implementation of the WISR model would require systemic changes to the ways that reentry services are currently being delivered. To bring necessary services to individuals reentering the community effectively and efficiently, public health organizations, such as community health centers and behavioral health treatment organizations, must take part in the reform efforts. Furthermore, collaboration across multiple branches of government would build a stronger, more cohesive approach, especially in collaboration with public and behavioral health organizations. It will also be important for these partners to recognize that people reentering the community after incarceration may need continued support such as housing and employment support services for an extended period of time as their situations change.

Given the success of the WISR model, including the partnerships across criminal justice agencies forged by the WISR Reentry Roundtable, members of the Roundtable should share their experiences with the WISR model and the successful findings to advocate for resources to continue the WISR model in Worcester County. State policy makers, particularly those involved in the Massachusetts Justice Reinvestment Initiative, might also look to the WISR model for dissemination in other counties. The WISR model offers an evidence-based, cost-effective approach to reduce crime and recidivism, improve public safety, and build health and resiliency among individuals reentering the community after incarceration.

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