Building the Capacity of Faith-Based Organizations to Support Prisoner Re-Entry

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In response to lawsuits, federal receivership of its medical, mental health and juvenile justice systems, and pressure from the federal courts to immediately reduce massive overcrowding, the California Department of Corrections and Rehabilitation (CDCR) recently released a plan to reduce prison overcrowding by gradually decreasing the prison population over the next three years, and expanding community-based alternatives to incarceration.

The CDCR presently houses 172,500 offenders in 33 correctional facilities designed to hold only 100,000 inmates. More than 18,000 inmates are housed in gymnasiums and other spaces designed for programming activities. In an effort to avoid a federal takeover of the entire system, Governor Arnold Schwarzenegger announced that the CDCR may be forced to release up to 33,000 people from state correctional facilities.

But where will they go? An estimated 70% of all released offenders will return to the primarily urban areas of Los Angeles, Riverside/San Bernardino, San Diego and Sacramento, where the service agencies themselves are *battered* by the same political/socio/economic stressors encountered by their clients.[1]

The 2007 Little Hoover report "Solving California's Corrections Crisis: Time is Running Out", recommends that the state reallocate resources to assist communities with expanding community-based options by establishing a continuum of alternatives to prison.

It is a well-known and documented fact that the church is the key institution in the African American community, where churches and faith-based organizations are seen as *first responders* to any crisis.

Churches have a significant role to play in the re-entry process in their communities, since offenders and their family members often turn to them for immediate assistance and advice on accessing services. Therefore, as the CDCR prepares to move thousands of prisoners (many of whom are African American) into community re-entry programs (located in primarily urban areas), black churches (and mosques) need to be prepared not only to provide services, but to actively participate in developing its capacity to impact public policy. More importantly, churches and other faith-based programs need to provide strong, supportive, welcoming and caring environments that can help recently released prisoners (and their

families), take the initial steps toward community re-engagement.

Most offenders return to their communities with multiple, cross-systems levels of needs; i.e. lack of adequate job skills, safe housing, and -

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the number one predictor of parole success or failure –substance abuse. Relapse to drug use is common for all recovering individuals, and offenders suffer from stresses more numerous and intense than those affecting the typical treatment patient. Many offenders, even those rare few who have received some type of in-custody treatment and/or education and are motivated to follow aftercare recommendations, are unable to maintain abstinence when faced with a myriad of difficult decisions with little or no positive support.

Successful recovery requires development of a set of positive coping skills (being able to identify "triggers", organize one's day and disengage from negative situations); as well as strong social and family supports. This is difficult for many offenders because of weakened family ties, and long-standing psychosocial problems, which put them at greater risk for relapse by virtue of their extreme socioeconomic deficits, exposure to drug-using associates, and other high-risk situations *(SAMSHA, Relapse Prevention and the Substance Abusing Criminal - TAP 8, 1993).*

The benefits of engaging the faith community in both prevention and treatment of substance abuse and dependence cannot be overstated, as the spiritual model of addiction is one of the most influential in America. Twelve-Step fellowships - Alcoholics Anonymous (AA), Narcotics Anonymous (NA), etc., and 12-Step program models emphasize the importance of a spiritual path to recovery; recognizing a *Higher Power* (God) beyond one's self, and a desire to achieve health through a connection with that which transcends the individual. Many churches actively support spiritual recovery models by opening their facilities for meetings, maintaining lists of available community resources, and/or operating transitional housing programs.

In 2003, acknowledging the need to support the faith community's contribution and participation in substance abuse efforts, SAMSHA supported a broadly based expert panel to develop a set of "core competencies" – basic knowledge, attitude and skills essential to the ability of clergy and pastoral ministers to meet the needs of substance abusers and their families. In addition to developing the 12-core competencies, panelists acknowledged the multiple, intersecting roles of most clergy: to create communities of mutual caring,

and to educate their congregations and sometimes the greater community about issues of importance to individual and community well-being. *(SAMSHA, Core Competencies for Clergy…, 2003*).

In a rare agreement, both Democratic and Republican presidential candidates endorse and want to expand faith-based initiatives. Senator Obama stated that "the challenges we face today…are simply too big for government to solve alone. We need an all hands on deck approach" *(New York Times, July 2, 2008).*

Building the capacity of faith-based organizations to provide effective programming and engage in public policy formation is essential, as good intentions can only go so far and most faith-based organizations lack the organizational and programmatic infrastructure to handle not only the high, cross-system levels of offender needs, but also the reporting and other systemic obligations required when dealing with governmental agencies. However, mutual respect, equity and clearly defined roles and responsibilities should guide alliance opportunities between faith-based organizations, and government agencies.

Capacity Building Needs

Organizational capacity, as defined by Eisinger (2002) is "a set of attributes that help or enable an organization to fulfill its missions," is a critically important issue in this context. Funders tend to make decisions about which agencies to support based on their assessments of organizational capacity; however, prior research has failed to demonstrate whether greater capacity equates to increase success in service delivery, or in fulfilling one's mission *(Eisinger, 2002).*

Churches and other faith-based organizations have traditionally done more with less; but they should not be seen as ineffective, based solely on perceived capacity. In the 2005 study "Measuring Organizational Capacity among Agencies Serving the Poor: Implications for Achieving Organizational Effectiveness" (*White, et al*), of the six agencies who experienced the most success across several measures of organizational effectiveness and client progress (positive change, movement away from dependence on emergency services, etc.), four (4) of those agencies were classified as *low capacity* agencies. However, their ability be more flexible, creative, open to change, and able to accept and adapt to the sometimes complex and changing problems of their clientele, were considered their best attributes.

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Fiscal accountability is often cited as an impediment that prohibits faith-based organizations from equitable participation in publicly funded programming opportunities. Equally important, is a need to increase the capacity of faith-based groups to price a unit of service, as there is great disparity in the costs of doing business between larger, more sophisticated housing and service delivery organizations and faith-based organizations.

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Equity Is Important

When a highly resourced government bureaucracy like CDCR engages with small churches and faith-based programs, equity is a determining factor in the ultimate success of those partnerships. While governmental and corporate institutions view capacity building as an essential element when launching new initiatives and sufficient resources are dedicated to staff development, marketing and compliance, faith-based organizations see such efforts as taking time and resources from their core mission, i.e. providing direct services.

Public and philanthropic investment in faith-based capacity building is essential to California's long term reintegration efforts. Transitional housing administration and compliance, alcohol and drug treatment staffing certification requirements, the new fee schedule for siting programs, social service delivery and case management, each require specific skill sets. Faith-based organizations possess a wealth of *human capital* that can be leveraged to address service gaps for residents returning from prison. However, this *capital* must be properly nurtured, which requires capacity building investment capital.

Properly diagnosing faith-based capacity building needs as a *cost of doing business*, rather than a sign of institutional weakness will be a determining factor in successful community-based reintegration strategies and public safety outcomes.

Clearly Defined Roles and Responsibilities

Similar public safety interests make alliance opportunities evident to both public safety officials and faith-based organizations. However, similarities should not be confused with agreement. CDCR efforts to partner with faith-based organizations are driven by cost containment and public safety, whereas faith-based organizations are driven by compassion and public safety. Cost containment and compassion are not the same; so, the roles, responsibilities and intended outcomes of all parties must be clearly defined as a

prerequisite for a successful partnership.

A recent study of faith-based organizations conducted by Regional Congregations and Neighborhood Organizations Training Center (RCNO) for the Alameda County Public Health Department (ACPH), unveils three over-arching themes that challenge partnerships between government and faith-based organizations:

1. Faith leaders are reluctant to partner with government for fear of undermining their prophetic character (getting away from their mission);
2. Faith leaders did not have sufficient knowledge of public systems (governmental regulations, bureaucratic lingo, etc.) to build effective partnerships with government entities; and
3. Faith-based service providers were concerned about potential citations for non-compliance with governmental regulations

California could learn from other states that are succeeding in collaborative efforts by implementing inter-agency teams to improve the transition from prison to community. Michigan, Missouri and Indiana are each recognized by the National Institute of Corrections as *models* for these types of collaboration, that take place in at least three phases: institutional, re-entry and community, using evidence-based tools to measure success. However, the most important component of these collaborations is a clear mission shared by all of the participating agencies to improve public safety through effective re-entry. *(Little Hoover, 2007).*

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Public Policy Capacity Building

California's corrections crisis requires policy intervention, because the present corrections reform debate is limited largely to *inside the building* discussions between bureaucrats, legislators and traditional public safety interests. The response to reintegration thus far has overwhelmingly been from a program perspective and few community and/or faith-based organizations are in a position to make investments in public policy. This imbalance hinders comprehensive reintegration efforts. Increasing the capacity of community and faith-based organizations to contribute to public policy discussions increases successful reintegration efforts, by adding a unified community voice to the discussions. An additional benefit is that

ownership/buy-in of reintegration and public safety outcomes expands.

RCNO's Alameda County study found that over half (54%) of the respondents reported that their congregations participate in social justice or social outreach ministries, which presents a tremendous opportunity for collaboration to support public policy efforts in the areas of public health and safety.

Conclusion

Healthy, productive ex-offenders can fortify families and resurrect the fragile communities that receive them socially, politically and economically. These same men and women also bring with them overwhelming potential public health and safety challenges, if their communities and governmental agencies do not provide them with appropriate, compassionate care.

Faith-based organizations have a significant role to play in reintegrating residents returning from prison. Communities that receive these residents are depending on faith-based organizations to respond. CDCR officials are encouraging community and faith-based organizations to assist them in developing plans to deal with the more systemic problems, such as substance abuse, lack of educational/ vocational skills and housing. Local public safety officials are relying on the faith community to help keep large numbers of offenders out of the revolving door between incarceration and freedom. However, faith-based organizations cannot continue to respond effectively without an expansion of true partnership opportunities and public investment in building their capacity to provide services.

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1. Source: Expert Panel on Adult Offender Reentry and Recidivism Reduction Programs
2. ibid

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RCNO Training Center Organizational Background

Regional Congregations and Neighborhood Organizations Training Center (RCNO) is a community organizing and public policy intermediary that strengthens and connects congregation and community organizations throughout the United States. Small- to mid-sized congregations and community organizations are RCNO's priority. RCNO Training Center specifically focuses on building the capacity of clergy, laity and community leaders to participate in public life through structured community organizing campaigns and public policy initiatives. RCNO's work produces informed leaders that promote community driven solutions to pressing problems, expanding the public square and fortifying communities. Over 95 percent of RCNO's constituents reported little or no involvement in public life prior to their RCNO participation. RCNO affiliated groups have gained national recognition in criminal justice reform, banking reinvestment, environmental justice and economic development. Leadership training, community organizing, empowerment, innovative programs and faith are at the core of the RCNO approach to community building and uplift.

RCNO's Methodology

RCNO's organizing methods/model utilizes traditional community organizing praxis and group-centered reflection and analysis to carry out its mission. Traditional praxis emphasizes leadership training/development, establishing intentional relationships with primary leaders through person to person interviews, listening campaigns, identifying common concerns, shaping the concerns into issues, and public dialogue with political and corporate decision-makers to arrive at measurable solutions.

RCNO's utilization of group-centered reflection and analysis establishes an environment that affords leaders an opportunity to discuss their cultural peculiarities, denominational traditions and community values. Lessons that arise out of these discussions constitute essential organizing building blocks. First, the lessons provide staff and leaders with an effective method of understanding a group's epistemology (how leaders construct knowledge). Second, it uncovers how specific groups view the world and therefore respond and/or do not respond to public challenges. Third, it highlights commonalities between ethnic groups, which strengthens dialogue and collaboration.

RCNO's Theory of Change

RCNO's Theory of Change: Culture, Epistemology and Historical Analysis are the basis for effective community building in civil society.

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