



# Public Health Reentry Policy Initiative – FACT SHEET

## About the Organization

Regional Congregations and Neighborhood Organizations (RCNO) training center is a national intermediary that strengthens and connects congregation and community organizations throughout the United States. RCNO Training Center specifically focuses on building the capacity of clergy, laity and community leaders in small- to mid-sized African American congregations and community organizations to engage in public policy initiatives that lead to program innovations and stronger communities. By conducting training on faith-based community organizing tactics, teaching advocacy skills, helping congregations develop programs, and sharing strategies for changing public policy, RCNO creates opportunities for clergy and churchgoers alike to demonstrate leadership as advocates for their families and communities. Groups affiliated with RCNO have gained national recognition for their holistic and community-centered approaches to addressing criminal justice issues, banking reinvestment, environmental justice and economic development issues. Leadership training, community organizing, empowerment, innovative programs and faith are at the core of the RCNO approach to community building and uplift.

**Contact and More Info**  
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**PRIMARY CONCERN:** *The healthcare needs of recently released offenders are being ignored. Their health conditions are negatively impacting the families and communities that receive them.*

## ABOUT THE ISSUE:

309,000 offenders are returning to California communities each year for the foreseeable future. Many have significant health challenges. The California Department of Corrections & Rehabilitation’s Healthcare Department was recently placed under federal receivership because *one person dies needlessly a week from medical neglect* according to a federal judge.

Category	Condition	Prevalence Compared to U.S. Population
Infectious Diseases	Active tuberculosis	4 times greater
	Hepatitis C	9–10 times greater
	AIDS	5 times greater
	HIV infection	8–9 times greater
Chronic Diseases	Asthma	Higher
	Diabetes/hypertension	Lower
Mental Illness	Schizophrenia or other psychotic disorder	3–5 times greater
	Bipolar (depression) disorder	1.5–3 times greater
	Major depression	Roughly equivalent
Substance Abuse and Dependence	Alcohol dependence	25% fit CAGE profile
	Drug use	83% prior to offense; 33% at time of offense

SOURCES: NCCHC, "Prevalence of Communicable Disease, Chronic Disease, and Mental Illness Among the Inmate Population," *The Health Status of Soon-To-Be-Released Prisoners, A Report to Congress, 2002*; *BJS Special Report: Substance Abuse and Treatment, State and Federal Prisoners, 1997*, NCJ 172871, 1999.

## RECOMMENDED STRATEGIES:

- Form Public Health Reentry Task Forces in 5 California Counties (Los Angeles, Alameda, San Diego, San Bernardino & Riverside). The Task Forces will develop policy recommendations to increase access to public health services to ex-offenders and their families. Task forces comprised of faith based groups, public health officials, criminal justice officials.
- Faith based organizations provide public support for recommendations, health care education, referrals and support to ex-offenders.
- Faith based organizations and counties approach State of California for additional funding for healthcare for ex-offenders and their families. Funding targeted to communities over-represented by recently released offenders.

***“No One is Coming To Help Us But Us.” Rev. Eugene Williams***

# Regional Congregations & Neighborhood Organizations Statewide Public Health Initiative – Process Diagram



**I. Form county public health taskforce steering committees comprised of local African American churches.**



San Diego

Los Angeles

Riverside

San Bernardino

Alameda



**II. Establish county public health policy taskforce(s) comprised of County public health officials, 7 local churches, health services providers, 1 drug and alcohol court judge and County public safety officials.**

