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# The Offender and Reentry: Supporting Active Participation in Reintegration\*

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RECENT ATTENTION TO the reentry issue, or the transition of the offender from prison to the community, has focused on providing services to the offender. The reentry movement has been premised on the notion that a transition process is needed that addresses both the survival needs (e.g. food, housing, employment) and skill-based services (e.g. treatment, literacy, job training, and so on) to thwart the recycling of offenders from prison to the community and back to prison. Addressing both survival and skillbased services is considered essential to securing reintegration in light of the traditional issues that offenders confront once entering the community, such as insufficient services, societal barriers to employment, and housing (see Taxman, Byrne, & Young, 2003; Petersilia, 2003), limitations on civil liberties, and negative peer and community associations. The current genre of reentry initiatives—the Serious and Violent Offender Reentry Initiative (SVORI), Transition from Prison to the Community Initiative (TPCI), Reentry Partnership Initiative (RPI), reentry drug courts, Weed and Seed—all approach the reentry process from the service acquisition model. Each relies on a similar framework to organize governmental, private, and community resources for the needy offender. Once they are available, the offender will then take advantage of these accessible services.

Under this model, the role of the offender is to be the recipient of the services that others (namely, authoritarian government agencies such as correctional and/or judicial agencies) deem necessary. The model is premised on governmental agencies organizing an array of services that they believe are important for the offender to attain a crime-free lifestyle.

Yet, the model fails to acknowledge two reoccurring issues: 1) many offenders, even when they are court-ordered for treatment services, do not attend treatment services; and 2) in the era of intermediate sanctions (early 1990s) nearly a third of offenders elected jail and/or prison over community-based treatment-type intervention services (e.g. boot camps, day reporting programs, drug courts, intensive supervision, etc.). An even more apparent lesson learned over the last decade and a half is that many offenders, placed in scenarios that have increasing conditions and requirements, demonstrate an increased risk of technical violation that adds to the prisonrecycling problem. Yet to be addressed in the current discussion of the contemporary reentry issues is the role of the offender in the reentry process. Reentry is perceived as a three-stage process that

Taxman and colleagues (2003) outlined and others have concurred with: institutional (at least six months before release), structured reentry (six months before release and 30 days after release), and integration (31-plus days after release). There are two different models for how offenders are to be part of the process—as active participants or as active recipients. Most of the contemporary models rely on an active recipient model, in which the offender receives the services that are decided upon by others (or as a result of some objective or semi-objective assessment protocol). Yet, another model could alter the reentry landscape and reinforce the offender's sense of accountability and responsibility for actions taken during the reintegration process. This is the active participant model, where the offender is part of the decisionmaking process for examining the risk, needs, and community factors that affect his or her involvement in criminal behavior, and then uses the information to strategically address his/her own criminogenic needs. This paper discusses the active participant model as a different premise for reentry.

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### The Offender as an Inmate

During incarceration, prison officials limit the decisions that offenders are allowed to make. Part of the punishment associated with imprisonment is the loss of civil liberties and restrictions on the freedoms of an individual. Goffman (1957 as published in 2003), for example, describes the prison as the total institution, where every aspect of a person's life is controlled and where individual needs are subsumed under those of the correctional institution. The correctional institution is challenged with the details of managing large numbers of people and therefore the movement of individuals is defined in terms of managing blocks of people. Individual inmates make few decisions regarding their daily activities, and the institution controls the decisions. Donald Clemmer (1958 as published in 2003) extends the argument to describe how the offender takes on the values and mores held within the prison walls (the process of prisonization), internalizing the new rules, expectations, and roles that are expected of inmates. Inmates are expected to be followers and make few decisions of their own.

These attributes of prison may have other unintended consequences for the offender's ability to assume responsibility for his/her own behavior, to be held accountable for his/her actions, and to participate in activities that are seen as state (authoritarian)-driven even if they are presumably intended to "help" the offender. The prison environment to a large extent positions the inmate to be dependent on the institution. The mores of the prison define whether some types of services are considered acceptable and whether attention to criminogenic needs should be addressed. Much has been written about how the prison environment tends to undermine treatment or rehabilitation efforts. Thus, a major challenge is that the very nature of prisons is counter to the stated goals of reentry. The goal of reentry is to improve public safety by providing offenders with services that are perceived to reduce the risk of recidivism and to improve integration into the community. Prisons do not encourage, and in many cases, overtly discourage offenders from making decisions that affect their wellbeing in prison and/or in the community. For example, participating in prison-based programs is a decision that offenders might be able to make, but often this decision is based on the offender's ability to be screened, the location of the program (whether it exists in the prison that the offender is assigned to or not), and the potential interference of the program with other activities such as recreational time and work-related responsibilities. The offender returning to the community is therefore conditioned to deal with short-term needs instead of long-term goals. The prison experience reinforces a model in which the offender responds to the issues defined by authority instead of using an empowerment model where the offender identifies his/her own needs or issues and then pursues them. Offenders in the reentry phase therefore must be given the "permission" and responsibility to be more in control of their destiny.

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The punitive-oriented correctional system releases offenders back into the community with a little more than they came into prison with (usually a bus ticket and some pocket change). The preparation usually involves the completion of a form identifying where the offender expects to reside and the likely place of employment. Offenders are expected to make as many arrangements as they can from prison, with most issues left up to the offender after returning to the community. While the current approach makes the offender accountable for transition in reentry and stabilization in the community, it is built on three basic assumptions: 1) the offender can return to his/her place of residence with ease; 2) the offender can make meaningful arrangements in prison; and 3) the offender can make the transition from dependency (having all decisions and movements controlled by the prison environment) to independence instantaneously (overnight). Yet, the prison experience defines the offender, and often positions the offender to be reactive. When returning to the community, where there are fewer restrictions, the offender's defiance is generally directed toward not being "controlled" by the state.

In many ways, the last 30 years have not advanced our efforts towards offender reintegration into the community. While little progress has been made toward understanding the *prison* and another offender, many steps have been added to the process of becoming a member of the community. And, even more important, new restrictions in the employment and housing arena have made it more difficult for offenders to stabilize in the community since new barriers limit the prospects of offenders to be employed and to live in a crime- and substance abuse-free environment. Maruno (2000), in his new book, *Making Good: How Ex-Convicts Reform and Rebuild Their Lives*, presents some of the issues related to transition from the sociological and psychological perspective of the offenders. As noted by many, part of the dilemma is the societal expectation that the offender will reform instantaneously, and that the offender will lead a life that society will consider lawabiding. This assumption does not take into consideration a process of change or the different pathways that offenders climb through to become part of society. Maruno notes that instead of thinking about "going straight and being crooked," society would be better to consider reintegration as "going curved" or "straight enough" (Maruno, 2000:43).

The reentry process can be perceived from a behavioral health management perspective that supports a curvilinear trans-theoretical process. Prochanskia and DiClemente (1992), in their seminal work on how people change, present a five-step process that Taxman and colleagues have found useful in considering the steps that offenders must go through for successful reintegration. Part of the model begins with the offender growing more aware of the detractors that often inhibit success in the reintegration. The reintegration process involves making connections without falling into the same old traps of the past.

Table 1 presents a conceptual framework that is based on the offender becoming an active participant in the reentry. Three major themes are critical to the offender assuming responsibility for his/her actions: self-awareness, self-diagnosis, and self-management. The model builds on the offender's decisionmaking skills and enhances these skills as the offender progresses through the reentry process. It also sets benchmarks for the offender's accomplishment during each of the stages of reentry. Applied to the process of reentry, the stages of change must comport with the offender being proactive in understanding his or her various needs in the transition and stabilization periods. The model can also provide the framework for adapting to the environment and making life decisions about residence, peers, and relationships that affect stability in the community. Ultimately, the goal is to ensure that addressing those unmet needs of the offender that affect community safety will maximize public safety.

The premise behind this model is that the offender is largely responsible for his/her own actions. This model thus requires changes in the prison environment and the conditions of release that allow the offender to be more in charge of his or her actions.

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Several different models exist that are focused on empowerment as a form of strengthening the offender's (or disenfranched individual's) commitment to new goals. The current interest in reentry is not just an exercise; it is a commitment to public safety through the successful reintegration of the offender into the community. Essentially this means that the goal is for the offender to subscribe to the mainstream goals and to pursue a crime-free (and substance abuse-free) lifestyle. The goal of reentry is therefore for the offender to be in a position to make decisions that support the ultimate goals of public safety. Empowerment is therefore an important and necessary component of the process, since most of the change literature will attest to the reality that offender change is only going to be successful when the offender has internalized the goals and objectives. External controls (e.g., conditions of release, mandates, etc.) are likely to assist the process but will not sustain the internalization. The offender must be committed to this change and pursue it.

**Step 1: Message to the Offender.** Reentry or the successful integration of the offender into mainstream society requires a clear message to the offender on personal responsibilities. Stated simply, even during the punishment phase of incarceration one of the key messages to the offender must be that the offender controls his/her own destiny. Therefore, it is critically important that the offender have options so that he or she can learn to make decisions that are in his/her own interest. These decisions must be made during each of the stages of incarceration but also about the types of survival and skillbased services that offenders desire to ease their transition back into society as contributing and responsible members of society.

As part of the reentry process, many agencies are focusing on using objective risk and needs instruments to guide the types of services that would be of value to the offender to reduce his/her propensity to commit crimes. The use of standardized risk and need tools is well-recognized in the correctional arena as a means to obtain objective information to guide program placement. Part of the process of assessment should include sharing information from the assessment with the offender. This is a critical component to the offender becoming more aware of his/her own behavior—the assessment tool can begin the process of helping to increase the offender's knowledge about his/her own behavior and then begin a dialogue to consider action that may address these criminogenic features. Too often correctional and/or treatment staff conduct the assessment and then never review the results with the offender. (And as noted by many, often the correctional and/or treatment staff fails to use the assessment to drive program decisions.) In this model, the goal is to have the offender involved in reviewing "objective" information about his/her behaviors and contributors to these behaviors, and then use this information to develop an action plan.

The message to the offender needs to underscore that the plan is actually the offender's plan. Again, the state-centered approach of a plan that is developed without the offender, but which the offender is expected to abide by, has not been successful in many arenas (e.g., treatment, probation, parole, etc.). The plan should have distinct, time-delimited goals, so that the offender is sequencing steps towards reintegration into the community. The plan should address some of the deficits, employment-based skills, and treatment interventions for an array of social needs (e.g. substance abuse, employment, mental health, etc.). Further ties to the community, especially some of the offender's social network of non-criminal peers and support network, will help to integrate the offender into the community.

Table 2 illustrates the principles of successful reentry for offenders that Taxman and her colleagues developed based on a review of the treatment, correctional, and social support literature. To reduce the risk of recidivism, components of this list should be staged into the offender plan. The offender should become aware of those features of the plan addressing criminogenic risk factors. One of the most important issues is that the plan—which the offender should develop with the assistance of correctional and/or treatment staff—should stage in some of the features. During different phases of the reentry process, different components become more or less important. But it is important for the offender and the person assisting with the planning to discuss these components and how they can be phased in. Two rules of thumb are: 1) the offender should define the issues that are most important to him/her; and 2) the plan should never have more than three components (Taxman, Bello, & Shepardson, 2004). Too many

components often result in unsuccessful action, since it is unlikely that the offender can successfully address a long laundry list.

**Step 2: Institutional Treatment** (from incarceration to 90 days before release). Many offenders lack basic skills to be contributing members of society and many offenders are not necessarily committed to a crime-free lifestyle. Prisons present the offender with a large percent of idle time, which can be more effectively used by providing necessary educational, vocational, and clinical intervention services. The challenge of offering services within the prison setting is well documented (Farabee, et al. 1999; Taxman & Bouffard, 2000), but research tends to support the value of prison-based programming, especially with the continued provision of services in the community (Simpson, Wexler, & Inciardi, 1999).

During the institutional phase, the key to programming is twofold: to assist the offender to determine reintegration goals and to link the programming to transitional planning. The process should assist the offender in learning some skills of self-diagnosis and selfawareness of the behavioral patterns that affect the offender's involvement in criminal behavior. One key component that is important to achieve during incarceration is the motivation to change, so that the offender will be prepared to return to the community with a mindset to seek a crime-free lifestyle. Some correctional departments focus on case management principles of getting the offender to identify resources in the community but do not prepare the offender psychologically for taking advantage of these resources. Others merely tap into scarce correctional resources, such as existing drug treatment and educational programs. Regardless, the offender needs to be involved in making decisions about where he/she is in the change process, and to begin to identify reintegration goals.

One key question is whether corrections should provide the services or whether community-based agencies should be responsible for the services. The answer depends on the nature of the intervention as well as on the location of the prison facility. The closer the facility is to the community, the more advantages accrue if the provider can begin to work with the offender prior to release. However, prior studies of continuum processes have shown that the success of this technique depends upon whether or not the provider focuses on transitioning the offender from one programming to another, and reduces some of the intake processes that occur. That is, no programming strategy is foolproof if the correctional institutions and providers do not agree on systemic processes that reduce the barriers for offenders and meet their psychosocial needs (Taxman & Bouffard, 2000).

Step 3: Institutional/PreRelease (from 90 days before release to release day). In the prerelease stage the offender begins planning for his or her transition into the community. Most important for the offender to address are the housing and employment plans, since these concern basic survival needs. The offender should take an active participant role by assessing housing and employment issues and then beginning to make plans. Many correctional departments have started to develop procedures for offenders to obtain necessary identification, such as a driver's license, social security card, Medicare coverage, etc., that will ease reintegration into the community. Priority should be given to the concerns of offenders that generally fall into the categories of survival needs—a place to live, a place to work, food on the table, and people to love. The attention to these basic details will soothe the concerns of offenders. But, it is equally necessary to alert the offender to changes that have taken place in the community since his or her incarceration. For example, some local police departments are alerting offenders about changes in policing, including greater collaboration with correctional and community entities, that have occurred during the offender's incarceration. The police department also reports to the offender that police officers are well aware of who has returned to the community, thus reducing the anonymity of the offender. Alerting the offender to these and other socio-political changes helps the adjustment process.

**Step 4: Post Release (from release day to 30 days).** What issues take precedence at the post-release phase depends on the emphasis during the pre-release phase and the offender's analysis of his/her own adjustment.

In the active participant model, the early stages of release should focus on the offender's perception of adjustment in the community and a reassessment of criminogenic factors. That is, it is critical to have the offender begin to assess the degree to which he or she is vulnerable to involvement in criminal behavior. If the reentry process has a pre-release phase that develops a reasonable plan for the offender, then the purpose of the post release phase should be to stabilize the offender by making sure that more attention is paid to quality of life issues. If there is no pre-release phase, then the focus of the post release plan should be on securing and stabilizing the offender in the basic survival areas of home, work, and extracurricular activities. More attention will need to be paid to the offender's survival needs and determining how these impact the offender's ability to maintain a crime-free lifestyle.

Step 5: Integration (from 30 days after release for up to two years). Maintenance and crisis management defines the integration phase, during which the emphasis should rest on incremental advancements in the offender's life. As an active participant, the offender should be involved in adjusting the plan based on his/her own experiences in the community. The focus should be on addressing some of the survival skills that will stabilize the offender in the community. The goal during reintegration is to strengthen the resolve of the offender to be crime- and drugfree. Attachments to community members are important components during this phase. This is the time when the offender is relearning to be a citizen, instead of being under the thumb of the correctional system. It is here that more freedoms and fewer restrictions are needed to assist the offender in assuming his or her role in the community. While this is a gradual process, the active participant model must recognize that reintegration is best described not as "going straight" but going to a "straight curve." Involvement in the community should assist with some of these different paths that the offender will have to navigate.

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#### Conclusion

The transition from prison to community is complex, intertwined with balancing the needs of society with the needs of the individual offender. Society at large is concerned with safety first and foremost. People look towards public agencies to ensure that the returning offenders are "safe" and will not commit violent acts in their communities. The immense concerns about safety emerge from the past two decades, in which decay and blight were heightened by criminal activities of drug dealers and random acts of violence committed by offenders under parole supervision.

While the needs of society to protect itself are evident, the returning offender is ensnarled in a web of social, economic, and psychological needs. Part of the dilemma is how best to engage the offender in the reentry process, and the process that supports the offender to be accountable for his/her own behavior. The nature of prisons and prisonization dilutes the offender's sense of responsibility. Part of successful reentry lies in ensuring that the offender's role is defined as a critical component of the reentry process. In fact, it is important for reentry to occur in a manner that empowers the offender to be a productive citizen contributing to the community. Efforts to dictate to the offender will only reinforce his or her failure to become a part of the community. The reentry process must be directed toward ensuring that the offender assumes responsibility and control for his/ her own behavior. The success of reentry will be measured by the offender's integration into the community and his or her assumption of more responsibility for prosocial, crime-free lifestyle.

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Table 1

# Building Components to Promote Public Safety

Reentry Stage	Stages of Change	Constructs	Offender's Needs
Institutional	Precontemplation	Beginning to consider that a noncriminal lifestyle is possible	Motivate the offender to change his behavior; define own needs to correct
Institutional/ Pre-Release	Contemplation	Offender begins to contemplate changes in his lifestyle	Offender defines areas that are likely to be threat to public safety such as housing, support network, employment
Pre-Release/ Post Release	Action	Offender lays out a plan to make changes in different components	Certain areas (e.g., employment, leisure activities, family, etc.) have been defined as contributors to negative behaviors; focus on mediators to these factors
Post Release Reintegration	Maintenance	Offender establishes plan to stabilize the situation	Establish a noncriminal network to support the prosocial lifestyle through financial independence

### Applying Research Findings to Principles for Reentry Programming

- Emphasize informal social controls. Family, peer, and other informal community networks and supports have more direct and lasting effects on offender behavior than formal government and service agencies, such as law enforcement, corrections, and treatment programs.
- Ensure sufficient duration of the intervention. Behavior change is a long process that requires a minimum of 12 to 24 months with different stages and steps. By intervening initially in prison and continuing in the community, reentry initiatives provide the duration needed to assist the offender in learning new behaviors.
- **Provide sufficient dosage of the intervention.** Intensity and frequency are important to assist the offender in making critical decisions that affect the likelihood of success. Intervention units should be matched to offenders' risks and needs, and their readiness for change. Often, intensive interventions are more effective when they are preceded by treatment focused on building offender motivation and advancing their readiness for change. Intensive services should be followed by support services provided during stabilization and maintenance periods to reinforce treatment messages.
- Provide comprehensive, integrated, and flexible services designed to address the psychosocial needs of the offender. The services must address the myriad of need and risk factors that affect long-term success. Offenders typically present diverse deficits and strengths, and programs are effective when they can meet the multiple needs of individuals. Valid assessment tools should be used to prioritize needs, and services must be integrated so there are not competing demands and expectations placed on offenders.
- Ensure continuity in behavior-change interventions. Interventions, either in prison or in the community, should build upon each other. Incompatible clinical approaches or inconsistent messages to offenders must be avoided. The most effective prison-based programs are continued in the community with aftercare programming.
- Provide clear communication of offender responsibility and expectations. Offender accountability and responsibility are critical. Sanction and incentive systems must ensure that the offender understands expectations and rules, and the offender should take part in the process of developing these accountability standards. A behavioral contract is an effective tool for conveying these expectations and consequences for non-compliance. Accountability systems must include reinforcements for positive behaviors to ensure lasting outcomes.

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