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No. _

**TESTIMONY ON HOUSE BILL 413
RELATING TO PUBLIC SAFETY**

by
Clayton A. Frank, Director
Department of Public Safety

House Committee on Public Safety
Representative Faye P. Hanohano, Chair
Representative Henry J.C. Aquino Vice Chair

Thursday, February 12, 2009; 8:30AM
State Capitol, Conference Room 309

Representative Hanohano, Representative Aquino, and Members of the Committee:

The Department of Public Safety (PSD) strongly opposes HB 413, which seeks to require the Department to develop and implement a community substance abuse treatment program with a community-based transition phase of the program where the offender completes at least six (6) months of the program while in a halfway house.

This bill is based on the program initiated in the Federal Bureau of Prisons (BOP). PSD understands the intent of the measure, but clearly the BOP and PSD are very different from an organizational basis. Many inmates within the BOP are transferred to halfway houses for up to the last six months of their sentences. The BOP contracts with an extensive network of halfway houses around the country, which is why this program was structured to finish with community treatment in a halfway house. PSD on the other hand, uses the furlough program to achieve the same practical result. However, with no structured setting, the community based program would be much more difficult to achieve, and would require more staff, contractors, and facilities for this measure to be successful.

Even if PSD attempted to comply with this measure, the requirement for drug treatment in a halfway house would be very difficult to accomplish in Hawaii due to the very small numbers of halfway houses in Hawaii. Even the BOP has limited resources within the State in regard to halfway houses, and only contracts for a halfway house on Oahu, and not on any of the other islands, due to the shortage of qualified vendors. Therefore, even more expenditures would be required, to develop and then contract with private companies to operate the halfway houses.

In addition, there were thousands of lawsuits around the country suing the BOP and contesting the same issues in the federal program that this measure seeks to put into statute. These lawsuits took millions of dollars to litigate, and countless staff hours to defend. Among the issues that were litigated around the country was the definition of "non violent" in regard to inmates qualifying for the program, and the discretion to give up to one year off the sentence. In this measure, there is no scale or standard to determine what portion of the up to one year off their sentence an inmate would qualify for upon completion of the program, and no specification as to who makes the determination.

PSD already has a sound operational drug treatment program that is available to inmates with the need for drug treatment. While this proposed program could improve the overall treatment, it is repetitive and not necessary in light of the exceptionally high anticipated costs.

PSD appreciates the intent of this measure; however, given the current fiscal difficulties, it would not be prudent to pursue enactment at this time.

Finally, thank you for the opportunity to provide testimony on this matter.



the
**Drug Policy
Forum**
of hawai'i

February 12, 2009

To: Representative Faye Hanohano, Chair
Representative Henry J.C. Aquino, Vice Chair
And Members of the Committee on Public Safety

From: Jeanne Ohta, Executive Director

RE: HB 413 Relating to Public Safety
Hearing: February 12, 2009, 8:30 a.m., Room 309

Position: Support

I am Jeanne Ohta, Executive Director of the Drug Policy Forum of Hawai'i. Thank you for this opportunity to testify in support of HB 413 which establishes a state residential drug abuse program with an in-community component to help inmates' reentry into the community upon their release from prison. Expands number of transition beds in module nineteen at the Oahu Community Correctional Center.

Since 1993 the Drug Policy Forum has been dedicated to safe, responsible, humane, and effective drug policies. Establishing effective drug treatment programs are more effective and less costly than incarceration; reduces recidivism and enhances public safety.

This proposed reentry program would be based on the Federal Residential Drug Abuse or Alcohol Reintegration Program that is a six-month follow up to their treatment program; which assists participants in making a successful transition from prison back into the community. If the department opposes locating the program as designated in the measure, it could certainly be placed in an alternate location that is appropriate and accessible for participants.

The National Institute on Drug Abuse in its guide "Principles of Drug Abuse Treatment for Criminal Justice Populations" says that "drug abuse treatment is cost effective in reducing drug use and bringing about associated healthcare, crime, and incarceration cost savings. Positive economic benefits are consistently found for drug abuse treatment across various setting and populations."

I urge the committee to pass HB 413, which would save the state money and would help stop the revolving doors of our prison system.

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COMMITTEE ON PUBLIC SAFETY
Rep. Faye P. Hanohano, Chair
Rep. Henry J.C. Aquino, Vice Chair
Thursday, February 12, 2009
8:30 am Room 309

STRONG SUPPORT
HB 413 – RELATING TO PUBLIC SAFETY (Residential Drug Abuse Program)

Aloha Chair Hanohano, Vice Chair Aquino and Members of the Committee!

My name is Carrie Ann Shiota and I offer my strong support for HB 413. As a former deputy public defender and staff member of a re-entry program on Maui, I have directly worked with those accused of crimes, as well as the prison population and their families.

HB 413 establishes a state residential drug abuse program with an in-community component to help inmates' reentry into the community upon their release from prison. It would also expand the number of transition beds in module nineteen at the O'ahu community correctional center.

Recent findings from the Urban Institute on Substance Abuse and Reentry provide support for HB 413:

- A majority of prisoners have extensive substance abuse histories.
- Prisoners identify drug use as the primary cause of many of their past and current problems
- Despite high levels of drug use, relatively few prisoners receive drug treatment while incarcerated. In Hawai'i, a report commissioned by PSD indicated that less than 15% of all prisoners receive substance abuse treatment. *See Ten Year Corrections Master Plan Update.*
- Consensus in the field holds that individualized in-prison treatment in concert with community based aftercare can reduce substance use and dependency.
- Those with substance abuse use histories and those who engage in substance use after release are at a high risk to recidivate.

Given the challenges that substance abuse among former prisoners presents to successful re-entry, particularly upon release into the community, I strongly encourage you to pass HB 413!

Sincerely,

Carrie Ann Shiota, Esq.
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**Hepatitis Prevention, & Support Network of Hawai'i
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February 12, 2009

COMMITTEE ON PUBLIC SAFETY

Rep. Faye Hanohano, Chair

Rep. Henry J.C. Aquino, Vice-chair

Thursday, February 12, 2009

8:30 a.m.

Conference room 309

HB 413

RELATING TO PUBLIC SAFETY

SUPPORT

My name is Andy Botts, Director of The Hepatitis Network's Prisoner Reintegration Program, and author of Nightmare In Bangkok. I strongly support implementation of the reintegration phase of RDAP within Hawaii's correctional system. As an RDAP participant and graduate, I know from experience that it is an exceptional program which boasts a success rate of over 60%. That rate may be even greater for Hawaii's inmates considering the cultural differences that we have from the mainland US. The Federal Bureau of Prisons adapted RDAP from the early 1990's, and continues to expand due to its phenomenal success. Additionally, RDAP's time-off incentive is strategic as well as rewarding due to the fact that it isn't vested until a participant successfully completes the program. This serves as a tool to prevent former addicts from relapse for at least 6 months, which statistics show is when they are most vulnerable. Furthermore, community based prison programs are a cost-effective alternative to incarceration, and a common sense approach to reduce recidivism.

Thank you for the opportunity to testify in this matter, it is of great importance to consider.

Andy Botts, Director
Prisoner reintegration program
Author, Nightmare In Bangkok

HB413 RELATING TO PUBLIC SAFETY.

Establishes a state residential drug abuse program with an in-community component to help inmates' reentry into the community upon their release from prison. Expands number of transition beds in module nineteen at the Oahu community correctional center.

HOUSE COMMITTEE ON PUBLIC SAFETY

Representative Faye Hanohano, Chair

Representative Henry Aquino

DATE: Thursday, February 12, 2009

TIME: 8:30 a.m.

PLACE: Conference Room 309

Hawaii Substance Abuse Coalition (HSAC)

Aloha, Chair Hanohano, Vice Chair Aquino and distinguished members. My name is Alan Johnson, Chairperson of the Hawaii Substance Abuse Coalition, which is a hui of 22 treatment agencies throughout the state.

HSAC supports HB413

Residential drug abuse programs in prisons, referred to Therapeutic Communities (TC) are most effective when in alignment with evidenced-based-practices (EBP) as defined by research, especially as determined by the federal agencies National Institute for Drug Abuse (NIDA) and Substance Abuse and Mental Health Services Administration (SAMHSA).

A successful TC will develop a therapeutic trustful environment:

- Cognitive and behavioral therapies are key EBP
- Address perceptual, emotional and social issues
- Treat the whole person by understanding that virtually every aspect of person's life is affected
- Involve community partnerships
- Establish rational authority by the way staff make, communicate and follow up on decisions such as fair applications of discipline and promotions, participation in activities, demonstrating respect, openness to confrontation and willingness to listen and learn.
- Addresses Recovery: Changes in thinking, feeling, values, behavior and self-identity to build or rebuild a new life
- Addresses Right Living: honesty in word and deed, responsible concern for others, work ethic and active and continuous learning

Living in a TC with people of all backgrounds promotes recovery and right living.

- Staff Competency: Understanding the need for a belief system within the community that promotes self-help and mutual help as well as promoting upward mobility and privilege system.
- Embraces structured socialization: step-by-step process through which offenders learn pro-social behaviors and attitudes that allow them to become productive members of mainstream society
- Create a physical setting that allows offenders to disengage from previous lifestyle, attain positive affiliation, achieve self-discipline and reinforce recovery principles and right living as well as restrict access to provide security for residents.
- Promote health relationships, especially through positive role modeling by staff and senior residents that “act as if,” show responsible concern for others and assume responsibility in leadership roles.

A diverse community results in offender’s self-knowledge, self-acceptance, knowledge of how common issues can outweigh differences, and promotes mutual self-help.

It is critical to understand the relationship between belonging and individuality. Cultural competency is primary.

An appropriate TC will benefit offenders/residents by instilling personal growth and self-learning, increased status in peer community, develop leadership skills, facilitate identity change and increase self-esteem.

In a therapeutic environment, offenders will learn:

- Show compassion and responsible concern
- Confront reality
- Be honest
- Seek self-awareness
- Resolve issues and concerns

The purpose of work is to reveal and address residents’ attitudes, values, and emotional growth issues:

- Shape personal behavior
- Promote positive interpersonal relationships
- Create a sense of community
- Instill attitudes that promote right living
- Teach job skills

Measuring Outcomes is Essential

Program Graduates demonstrate positive outcomes:

- Have remained alcohol and drug free
- Are employed or are in school or a training program
- Have resolved legal problems
- Have resolved most of their practical problems
- Accept that they need to continue to work on specific problem areas and on themselves in general
- May have a regular therapist
- Are attending AA or NA or some sort of self-help meetings regularly
- Have a firm commitment to continued abstinence

A successful TC will help offenders make fundamental changes in the way they live and perceive themselves through emotional healing, social relatedness and caring, and subjective learning of self-efficacy and self-esteem. According to research using best practices, TC treatment is effective. This is best exemplified when the offender, now resident, exclaims: "I am making progress and I see benefits."

We appreciate the opportunity to provide information and are available for questions, if needed.

Franklin Jackson
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February 12, 2009

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HB 413
RELATING TO PUBLIC SAFETY
SUPPORT

My name is Franklin Jackson, and I strongly support any and all alternatives to incarceration. RDAP is a federally proven program that has the lowest rate of recidivism in the nation. Most offenders have a history of drug and/or alcohol dependence, and this proposal specifically addresses the typical non-violent drug offender. They aren't true criminals in regards to crime being their livelihood. Crime was the means to get drugs to satisfy the crave. The best approach to prevent relapse and reduce recidivism is to use different approaches, and the reintegration phase of RDAP will reduce recidivism while saving my tax dollars.

Mahalo for the opportunity to testify in this matter.

Franklin Jackson