Key Findings:

- Women at Illinois’ only female Adult Transition Center (ATC) were not provided the same benefits and supports as men, which was both unfair and to their detriment.
  
  - Residents of work release centers must agree to cover their healthcare costs for placement, many of these women would be Medicaid eligible based on income yet were not enrolled unless they were pregnant or within 3 months of release. While some healthcare services are provided without cost by community providers, concerningly, other healthcare expenses incurred by women at Fox Valley presented serious financial hardships. In contrast, men at work release centers operated by Safer Foundation in Chicago were enrolled in public assistance. IDOC should immediately revisit outdated policy and practices regarding Medicaid education and enrollment to prevent further harms to people leaving custody.
  
  - Women at Fox Valley reported they felt unsafe without access to cell phones while working in the community. Meanwhile, men at work release centers had use of cell phones. JHA recommended women have use of cell phones and continues to recommend that other outdated policies relating to use of technology also be revisited. Administrators report that women should be able to use cell phones on or before February 1, 2019.

- Individuals housed at work release centers reported that they were not able to obtain an Illinois state ID without paying fees, despite a law that went into effect at the beginning of 2018 that waives fees for returning citizens. While technically ATC residents are still incarcerated, they face the same challenges the change to the law sought to address. IDOC should provide ATC residents with the same assistance and documents that waive fees to ensure a state ID can be secured.

- People eligible for sentencing credits were not receiving them due to systemic inefficiencies including lack of program availability and timely implementation by IDOC of legislatively expanded discretionary credits. JHA continues to call for prompt action to implement sentencing credit and maximize use.

- Current information about opportunities and limitations of all custodial facilities and programming systemwide should be made readily available; IDOC could better use resources and positively impact the women in custody by being more strategic in matching people to work, education, or other programming within the system.

- Fox Valley could benefit from increased communication and dialogue with the community organizations and members that are interested in supporting women leaving prison, as this could lead to enhanced opportunities for the women.
INTRODUCTION

This report updates JHA’s 2014 Fox Valley report, and is based on August 16, 2018 visit. At that time, there were 125 women housed at Fox Valley, the only female work release center of the four remaining ATCs within the Illinois Department of Corrections (IDOC). With fewer than 900 ATC beds, work release capacity for men and women within IDOC makes up only 2% of the total system bedspace; this use of transitional community corrections is low compared to other states. Connecting returning citizens to employment opportunities is critical to their future success, as former prisoners in general, and formerly incarcerated black women in particular, suffer higher rates of future unemployment.

Coupled with this visit, JHA piloted an anonymous and voluntary reentry survey designed to examine and gather more data regarding how residents felt they were prepared as returning citizens for reentry, both within prisons and in work release. JHA similarly piloted the reentry survey on July 23, 2018 at a male ATC, North Lawndale, which is operated contractually with IDOC by the Safer Foundation. Responses and data from these surveys are discussed throughout this report, the pilot survey tool is attached as Appendix A, and additional data and comments from the survey responses compose Appendix B.

Input from this pilot reinforced JHA’s long-held belief that IDOC must meaningfully and continually evaluate the impact of programming efforts beyond the collection of systemwide recidivism data, which masks differences in needs and service provision within its population. While encouragingly, statewide recidivism numbers are dropping, blatant programmatic deficits, as well as individual missed opportunities and harms gleaned from JHA reentry survey responses and discussions with incarcerated individuals and staff, again draw attention to the critical need for ongoing improvements at both the departmental policy and facility levels. Fox Valley, like other IDOC facilities, does not track recidivism at the facility level; however, administrators believed that IDOC’s research department should be able to determine recidivism by facility. While individuals commonly move from one facility to another over the course of their incarceration, certain facility placements or program participation have expected effects that should be measured. JHA continues to observe major inconsistencies at IDOC facilities that will result in disparate outcomes, at times between facilities, and at times for men and women. This must be addressed.

JHA also urges IDOC to more equitably and effectively use resources to better prepare people to return to useful citizenship and reduce prison population. Critical to this effort is placing and programming people appropriately to optimize limited state resources within the prison system. Reentry preparation should begin at intake to IDOC and be individualized. Beginning such planning for residents only once they come to an ATC causes missed opportunities for future success.

Women interviewed during JHA’s 2018 visit and responding to the pilot reentry survey seemed to feel that Fox Valley was most successful in teaching them to “work to live,” and “does what it’s intended to do” in that it helps them save some money. One woman who was leaving shortly observed that working “pulls you out of being in that lazy mood” and noted she appreciated that
now she has “people to speak good” about her as job references. Such experiences with work can give people self-confidence, worth, and dignity.

Work release centers can also offer returning citizens many advantages over placements in prisons above and beyond an opportunity to make some money. Ideally this structured environment enables financial education, family contact, and greater freedom, allowing an individual to adjust to less custodial control and greater responsibility over time, rather than all at once upon release. While administrators described Fox Valley as a place where women “get to be themselves,” and noted that the ATC importantly affords them new autonomy and independence relative to prison, they also appreciated for some this freedom was at times “overwhelming.” Some women discussed how there were still aspects of institutionalization and control at the facility, but noted that there was now at least some personal “choice.” With freedom of the work release setting for many comes an intense sense of renewed responsibility for one’s self and the “fear of going home.” One woman stated she felt that the structure of an “ATC doesn’t truly prepare you to leave the facility.” While another seemed to embody the feeling of overwhelm, as she acknowledged that there were people who were willing to help, but noted that they still could not provide what the women needed to heal at that time. Administrators stressed that staff at the facility want to support the women and aim to provide holistic treatment coupled with planning goals.

Administrators reiterated that increased feedback regarding preparation needs would be welcomed. At Fox Valley women are reportedly offered an exit survey within a month of release by their facility counselor to attempt to learn from residents about their experience. JHA believes that soliciting feedback from exiting residents presents a good opportunity for ongoing program evaluation. However, people in custody often will not feel comfortable presenting their input directly to IDOC staff, in a manner where they can be easily identifiable, especially as they remain under state control at the facility and while under mandatory supervised release, or parole, in the community. Hence JHA’s reentry pilot reentry survey was designed to allow ATC residents to give anonymous feedback about their experience to an independent entity for use in system evaluation and improvement.

**INDIVIDUALIZED REENTRY PLANNING**

Of the people responding to JHA’s pilot reentry survey at ATCs, only 6 out of 45 respondents (~13%) reported they felt they had received any individualized reentry planning, even while in the more personalized and specialized setting of a work release center compared to a prison. As JHA has long recommended, use of validated, objective risk, needs, and strengths assessments will help with individualization. However, IDOC has only recently started using an assessment tool within facilities to screen individuals and is still not screening everyone, or screening individuals at IDOC intake.

Another one of JHA’s longstanding recommendations, as set out e.g. in our 2012 healthcare report, “Unasked Questions, Unintended Consequences - Fifteen Findings and Recommendations on Illinois’ Prison Healthcare System,” is that IDOC adopt gender responsive evidence based best practices. In the intervening years, such recommendations, also included in JHA’s female facility reports and the Gender Informed Practices Assessment of Logan Correctional Center, coupled with the weakening of the previous iteration of the IDOC
Women’s Division, ultimately resulted in the recent legislated response, the 2018 Women’s Division Act, effective June 1, 2018, which codifies this principle including mandates for gender responsive staff training and risk assessment. Since JHA’s last report, all Fox Valley staff have reportedly received gender-responsive training from IDOC, along with a two day mental health training required of all IDOC staff (referred to as NAMI training), and Fox Valley administrators reported that their staff would soon undergo additional de-escalation training.

JHA is cautiously optimistic that renewed attention to issues within IDOC’s female facilities will facilitate improvements to issues noted in this and prior reports, and provide needed support to those who live and work in the facilities. One indication of improvement is that IDOC had in mid-2018 begun using an assessment tool that is specifically designed for women. Every resident who is admitted to Fox Valley is now given this assessment and JHA was encouraged to learn from staff at Fox Valley that this tool seems to be useful. Importantly, staff using the new screening tool report that the tool designed for women, unlike the prior tool, is more likely to accurately capture when a woman has moderate or high risks, indicating enhanced treatment is appropriate, while the prior tool was more likely to overidentify women as low risk. However, this assessment was still not being used effectively to determine programming for the female population within IDOC as a whole, as only some women have been screened, and they were still not screened at intake to IDOC at Logan. In fact, as of August 2018, staff reported that few assessments had been done of the residents at Fox Valley prior to their arrival at the facility, since staff had only been trained in the use of the tool a few months prior. Adaptation and use of the tool designed for women is a start, although it had not been utilized to determine who should come to the ATC.

Fox Valley administrators were surprised that more women in survey responses did not report that they received individualized reentry planning at Fox Valley. They reported that all women who come to the facility are now given a holistic assessment by the facility’s social worker, which was a new position hired for in 2018. Every resident, in partnership with her counselor and the social worker, is given treatment and service goals and related action steps. As residents complete goals they are promoted through levels of privileges. These plans and goals can be changed as needed, as residents have ongoing meetings with counselors every other week to assess their case planning and progress. Residents’ perception that their reentry planning was not individualized may relate more in the ATC context to staff-resident communication issues, including unclear expectations for reentry input and assistance, rather than the inattention of staff and nonexistence of case management and planning, which is a commonly reported issue in prisons.

**PLACEMENT**

As JHA has previously reported, more than half of the women incarcerated in IDOC are doing time for a property or drug crime. As of 2018, the process by which IDOC selects individuals for placement in work release centers out of the many who appear eligible by law remains opaque and at times counterintuitive. For example, JHA heard from one woman at Fox Valley who indicated that she is already retired and plans to live off of retirement benefits upon release, which raised the question of the practicality of using a work release bed for someone who had no real need or plan to benefit from employment connections, although she likely benefited from other aspects of the work release environment, such as opportunity to earn passes to visit her
home, etc. Another woman we spoke to had no ties in Illinois, as she caught a case while traveling, so she cannot take advantage of any of the leaves allowed by the ATC, as residents are not permitted out of state, despite the fact that Wisconsin, Indiana, and Iowa, are geographically closer to the facility than many of the women’s families in the Southern part of the state. While placement at Fox Valley likely would have benefits for many women in IDOC custody, given the limited bedspace, it seems reasonable to consider things like opportunity to take full advantage of the special circumstances provided in this setting. For example, being able to go home and spend time with family seems to be a particular potential benefit to mothers. Moreover, as discussed in JHA’s 2014 Fox Valley report, we continue to question whether incarceration as opposed to early release via use of sentencing credits or electronic detention is always thoughtfully considered.

JHA has encouraged expanding criteria for placement in ATCs so that those who may benefit most are able to participate. As noted above, research shows that directing more resources to higher risk individuals improves outcomes. Fox Valley administrators reported they felt that in the past few years the criteria for placement at the facility had changed and become more inclusive permitting women with what would be considered more serious offenses or whom had served more time, perhaps without being eligible for certain other programs, to participate, such as women with driving under the influence convictions, and even a woman serving time for murder, who was reportedly successful at the facility and upon release. Also, administrators reported that at times women would come to Fox Valley despite having been recently in disciplinary segregation, and noted that such a change of environment can be good for people. Additionally, more women with serious mental illness, if stable, were permitted to participate, as well as women who were or became pregnant. In the past, participation of these individuals might have been limited or not approved because it was seen as too risky.

While JHA encourages expanding eligibility for placement, we also think it is important for there to be clear public rules regarding who may participate so that selection can be as fair as possible for those who are eligible, e.g. programs cannot be properly carried out and evaluated if exceptions are continual approved. Participants who do not appear to meet eligibility criteria as set out in agency policies can give an appearance of improper favoritism. When there is significant demand coupled with insufficient information about potential participants, a lottery method may be the only fair manner to select participants. The Department should be transparent about how people are being prioritized for participation. Relatedly, JHA has heard concerns from men whom are housed at Stateville’s Minimum Security Unit prior to transition to an ATC that men who have less time until their release date are being placed at ATCs prior to others who have been waiting for transfer for a longer time, again creating an impression of improper favoritism and inefficient population management. Again, JHA recommends that IDOC objectively evaluate the placement and success of people in their programs, including participant characteristics and lengths of stay, to determine who may most benefit, as is being done at the Kewanee Life Skills Reentry Center. If such evaluation is impossible, placement should at least be carried out in a transparent and consistent manner.

We continue to urge Illinois and the Department to examine and address the needs of incarcerated people and maximize the use of extremely limited resources. Further, there is need
for more transparency regarding continued challenges, so that the state and community can also appropriately support returning citizens.

**EMPLOYMENT**

Another way in which greater individualization and advanced preparation for people coming to ATCs would be useful would be to better match residents to work opportunities. JHA received some reports that employment options were not matching individuals’ capabilities. Administrators reported that while most women at the facility have had sporadic work histories and about 30% of residents have never had a legal job, the employment rate at Fox Valley is consistently 100% of the residents, other than those who are in orientation status, which is 3 weeks. The women were reportedly typically given 3-5 employment options and could also apply independently. Administrators stated that all residents obtain employment within 4 weeks of arrival and that residents meet with counselors and the social worker to determine the best fitting position, as residents’ work schedules will revolve around service and treatment needs, They report that often times the residents may select from numerous employment opportunities, which include but are not limited to: cashier, cook, waitress, business manager/supervisor, factory/warehouse worker, fork lift driver, seamstress, and theater usher. JHA recommends that general information about placements for work release centers be made regularly publicly available.

Administrators reported approximately 30% of the women were employed as managers or supervisors. Further they reported that about 25% of residents keep or transfer their job upon parole and about 15% remain in the Aurora area. While many women at Fox Valley reportedly work their way up to supervisory positions or greater responsibilities, it seems that most initial placements were for entry level positions in retail, restaurant, temporary or warehouse settings. Having individuals’ needs and strengths evaluated earlier on could make for stronger employment connections. Only 5 of the female residents responding to our survey reported that they had left prison, Decatur or Logan, with a resume. It seems that starting some of these processes earlier would enable women to have more productive periods of work in the community, enabling them to save more money for release. Administrators at Fox Valley report that all residents must have a resume to promote to Level 2 and these resumes are updated for release.

Many of the women only have a short period of time to work at the facility prior to release due to various factors including delays in getting identification, receipt of sentencing credits, etc. Residents come with vast differences in background, ability, and time to be trained as their expected lengths of stay at Fox Valley can be from just 6 months to 2 years. Administrators reported that 70% of the women at Fox Valley at the time of the August 2018 visit had less than a year left to serve, and this is without accounting for any possible additional sentencing credits received. Staff reported that if a woman came to the facility with only 6 weeks to work, she could temp or probably work at Dunkin Donuts. Employers tend to be willing to work with residents despite possible shorter lengths of stay because the structure of the facility ensures they will be responsible workers. As one resident emphasized, “Felons are the BEST people to hire because they work harder.” Research has affirmed this assessment; although people with felony records often have trouble obtaining employment, they have better job retention.
JHA advises that better planning and looking at ideal lengths of time at the facility could maximize the benefits of work release and improve outcomes.

HEALTHCARE
JHA continues to find the Fox Valley residents’ responsibility for the cost of healthcare hugely problematic and an issue that must be addressed. People have to agree to pay for medical expenses in order to come to IDOC work release centers, and if a resident ends up getting a job without health insurance or has a health issue prior to obtaining work coverage, they can incur substantial medical costs and debts. Although Fox Valley administrators listed several employers that offer health insurance, they also acknowledged that some employers will hire residents for fewer hours to avoid supplying health insurance. While this behavior by employers is a problem for people who are not in custody as well, those individuals may enroll in public assistance, such as Medicaid, which Fox Valley residents are not able to do unless they are pregnant or within 3 months of release. Administrators reported that all residents can enroll in Medicaid or public assistance, if they qualify and want to, 3 months prior to release, while residents who are pregnant may enroll regardless of release date.

While one of the requirements for placement at work release centers is medical stability and medication compliance, women may be stable but still require expensive care, such as medication costs or emergency treatment. If care becomes unmanageable or exorbitantly costly, residents may be sent back to prison where they will again receive the typical IDOC care provided to prisoners. Fox Valley administrators stated in such a case, once the healthcare issue is stabilized, the women could be returned to the work release center. However, desire to not get returned to prison can be a strong motivation for people to try to get healthcare issues addressed on the outside when they can, regardless of possible cost.

Administrators at Fox Valley estimated that about 30% of the residents were considered seriously mentally ill and on psychotropics, and 55% were on some kind of medication. Fox Valley has had beginning in 2018 an onsite state employee social worker who seemed to be an asset. Some women believed that mental health treatment remained their greatest need, however, some also observed that a person has to be ready for it. While the women are able to obtain some free and subsidized healthcare, JHA again heard from women that some cannot afford their medications and received reports of women running up substantial bills, some of which have gone into collection, for emergency healthcare received while they were residents.

JHA reported on the problem of Fox Valley residents’ responsibility for healthcare expenses and not being enrolled in Medicaid in our 2014 Fox Valley report. IDOC should look to practices elsewhere, as JHA has recommended, including at Safer Foundation work release centers operated for IDOC for men in Chicago. This would allow the Department to fully take advantage of Medicaid expansion, which by neglecting to do, leads to the unfortunate and unnecessary detriment of many people. Since 2014, the federal government has also issued further clarifying guidance, stating that individuals who have freedom of movement and association to seek healthcare are eligible for coverage despite still being in custody, which seemed to be a common sense response. As one JHA visitor observed, the intent of Medicaid regulations cannot be to preclude coverage for people at work release centers, rather it is more likely a requirement that the state or employer cover healthcare where appropriate for people in
custody, i.e. the intent is not to stick reentering individuals with massive debt or impossible choice of receiving care at a cost in the community or returning to prison for care.

In August 2018, one woman at Fox Valley wrote in survey comments, “I was told no medical card at ATC, we pay cash for health care visits,” another wrote, “I can’t afford to get Hep C treatment.” Meanwhile, men in the Safer-operated facility, North Lawndale ATC, reentry survey responses again reported that they received Medicaid information and enrollment while at the facility (41% or 9 of the respondents). Some women at Fox Valley were aware that men in work release were enrolled in healthcare assistance and they thought that this was unfair. Only one female respondent (4%) reported she had received this at Fox Valley. As Fox Valley administrators acknowledged, the enrollment process for most Fox Valley residents would only be started 3 months prior to a woman’s release date. Given that many of the residents are eligible for sentencing credits, release dates may be variable and earlier than planned for; clearly enrollment should begin at the earliest possible point. Yet, no women in the reentry survey responses reported that she received any information regarding government healthcare support while still in a prison.

A December 2018 report on Connecticut’s Medicaid enrollment for people housed in transitional work release settings, who had previously been considered inmates and who had in the past been forced to return to prison for healthcare as in Illinois, found that once Medicaid was an option “residents, staff, and correctional personnel found community-based care a substantial improvement over the previous system, which deterred people from seeking care, entailed logistical and security challenges, and burdened staff and residents alike.” Availability of Medicaid enrollment promoted “greater self-sufficiency and accountability” and led to residents being more likely to seek care and for the care to be proactive and preventative, rather than more costly emergency care. The report also stressed, as JHA has observed, that residents under the old system were “highly adverse” to returning to a correctional facility for care based on prior negative healthcare experiences within prisons and trauma associated with the secure setting.

People who are housed at the Illinois work release facilities as permanent parties, who are typically kitchen workers, without the required freedom of movement for Medicaid eligibility, should still have their healthcare covered by IDOC, as if they were incarcerated in a prison. Administrators report that permanent party medical expenses are paid for by the state; however, Illinois has been behind on many payments. JHA believes IDOC has an obligation to help everyone within their population understand healthcare options at work release centers, and on release, and assist with enrollment in a timely fashion as appropriate.

While JHA has heard IDOC officials speak of a pilot or improvements to Medicaid enrollment facilitation, we have seen none of this in action within prisons; further, facility and other IDOC administrators seem unaware of any options. In addition to practices in Connecticut, the Ohio corrections system has reported success with Medicaid planning and enrollment within facilities, and had successfully enrolled more than 19,000 people in Medicaid prior to release from 2014-2017, while also providing community care coordination services. We recommend that IDOC review current federal guidance, as well as practices in other states that have been successful, and make public reports of data regarding enrollment or any issues they are having. Connecting people to healthcare is one of the most critical tools for improving outcomes. JHA has had
facility staff at various IDOC facilities express concern to us regarding how returning citizens will receive their medications upon release, but without agency action it is beyond their ability to help these people to continue to get medication beyond the limited supply they leave prison with in hand for a brief initial period.

In addition to general healthcare and mental health issues, administrators at Fox Valley reported that consistently about 90% of the women at Fox Valley are dealing with substance abuse issues, particularly for opiates, methamphetamine, and alcohol. Everyone interviewed stated that Fox Valley needs more treatment services and counselors, specifically more mental health, substance use disorder, and trauma responsive services for women. As one person stated, “All the women at Fox Valley have stories that matter, and there shouldn’t be a cap on who gets to heal,” It was acknowledged that with only one substance use counselor onsite, while every woman gets treatment, given the low staffing, issues have to be “triaged.”

Nonprofit community substance abuse treatment and mental health provider Breaking Free has office space at Fox Valley with one counselor who meets with residents at the facility and provides free counseling services, which are also available at the Breaking Free offices, which are located about 2.5 miles from the facility. Some reported that the onsite Breaking Free type of group was not necessarily what everyone needs and that they need additional classes, such as parenting. Administrators report that residents can also receive counseling services for various needs onsite from the facility social worker, or in the community at Mutual Grounds, Family Focus, Open Door Health Center, and the Carlton Center, covering topics such as substance abuse, parenting, social skills, emotional regulation, medical management, grief, trauma, and survivors’ groups. One resident explained that she felt while most women need greater treatment services, the focus at Fox Valley is on employment and they do permit the women to seek treatment in the community. However, JHA also heard that the women’s schedules could be full, again suggesting that better communication or greater individualized attention to people’s needs and assistance for planning or scheduling to promote success is needed. Administrators responded that residents’ identified treatment needs are a scheduling priority and supersede full time employment, and this should be accounted for in case planning.

Services were reportedly “confidential” at with community providers, such as Breaking Free, but JHA was told by Breaking Free staff that residents are informed that if they are using drugs or alcohol that this information will be shared with the facility by providers, as they did not want any “bodies.” Limits to confidentiality should be made explicit and explained to residents seeking treatment. In the time since JHA’s 2014 visit and report, administrators at one time reported the facility had tried to giving some individuals suffering from addiction issues more than one chance at sobriety. As of 2018, the facility has again returned to a zero-tolerance stance for substance use, and individuals with dirty drops will be returned to prison. Again, this practice seems to be inconsistent with what is done at some male work release centers, where there is more understanding that relapse is a predictable part of addiction treatment and can be incorporated into recovery.

Fox Valley administrators reported that in 2017, 52 residents were sent back to prison, mostly due to the zero-tolerance policy for drug or alcohol use at the facility. In 2018, as of August 16, there were only 17 residents who were returned. JHA does not know whether the same number
of women identified with substance use disorders continued to be sent to Fox Valley during this time period. Administrators reported that in total, over 2018, 31 women were returned to Logan from Fox Valley due to various misconduct issues including alcohol and drug use. Administrators reported they typically have only one or two people a year who do not report back to the facility, and a warrant is put out for their arrest, but most of their returns to prison have been for dirty drug tests. JHA has received concerns regarding prescribed medications possibly resulting in false positive drug tests and return to prison. Administrators report that specimens that test positive at the facility are sent to a lab for more extensive testing, while the woman is placed on a movement restriction during the investigation, and that if a test is positive and it is not due to prescribed medications, the resident’s work release status is then revoked and she is returned to Logan.

Despite the high rate reported for women needing substance abuse treatment at Fox Valley, it was unclear whether these women’s risk, needs, and strengths were considered in their coming to a work release setting. Best practice standards require such screening and reentry case planning encompassing substance use issues, and many resources on this topic are available. While IDOC does screen for such issues, it is unclear how this information is used and prioritized in treatment planning and placements. Some women mentioned that they had participated in and appreciated the substance abuse treatment programs still available in the prisons, which again fall far short of the population’s needs. Although administrators represent and acknowledge that nearly all women in custody, 9 in 10, have substance use issues, only 6 of the 23 women responding to JHA’s pilot reentry survey reported receiving treatment for this while in prison. Some women also opined that many people in the treatment programs in prison were not ready for treatment. JHA continues to urge IDOC to publicly regularly report the number of individuals who need such treatment, the number of people provided with treatment in their facilities, and the outcomes of these programs. Further evaluation of who is most likely to benefit is also advised.

IDOC and Fox Valley should continue to provide increased supports for women who are struggling with addiction. JHA notes that a zero-tolerance approach may lead to people masking issues when they need additional support to be successful on release. It is doubtful that women returned to the female prisons will receive treatment as they will likely be subject to disciplinary segregation due to the failed drug test and also may only have a short time left to serve, which can preclude placement in any programming. We recommend increasing education about substance misuse for incarcerated women, particularly those known to be soon transitioning to the community and residents of Fox Valley. As treatment provision within IDOC is clearly insufficient to meet need, as with all areas of programming, JHA stresses the importance of IDOC being more transparent regarding the unmet needs of its population to garner political and public support for increased and targeted resources.

STATE IDS
Many women at Fox Valley reported in survey comments and other communications with JHA that despite a new law that provides for waiver of fees for ID cards for people in or leaving IDOC custody, they still had to pay for a state ID. Administrators stated that some residents come from prisons with a social security card and birth certificate, and then they are able to obtain a state ID for $20, but if residents lack proper documentation, they can have their family
obtain documents or pay for copies themselves. One woman wrote, “women had to borrow money from other ATC residents and we shouldn’t had to worry about that after we got here. If we didn’t have any $ when we was inside prison, where was we supposed to get $20 once we got here. Another struggle to worry about as well.” Similarly, male survey respondents noted that they paid $20 for state IDs at North Lawndale, noting in one case the need to get an ID with the facility address despite having an ID that was still valid with his home address. Fox Valley administrators observed that often family members are not able to provide necessary documents, such as birth certificates or social security cards, for women to get their IDs, so residents have to apply and pay for those as well, and then, since new IDs are now mailed by the DMV, this takes additional time and can delay when residents begin to work. This is a major inefficiency when the goal of an ATC is to allow residents to work and gain resources for release.

JHA and others have long worked to try to get returning citizens access to free state IDs and underlying documents (free birth certificates and social security cards), as we recognize the substantial barrier lack of identification poses to reentry success. The clear legislative intent behind the latest law, effective January 1, 2018, was to enable and increase access to identification for everyone in IDOC custody, in any facility, including people at work release centers.

IDOC must work to ensure that residents of ATCs can also get underlying identification documents and waivers for the cost for a state ID and to work with people in prisons who are going to ATCs to obtain their underlying documents without cost in a timely manner. Again, assessing and addressing people’s needs beginning at intake, should expedite this process. In addition to this, JHA strongly recommends that the law providing state IDs at no cost to returning citizens include public reporting requirements for IDOC and the Illinois Secretary of State so that data regarding utilization and compliance with the law is available.

CELL PHONES
Women at Fox Valley reported they felt unsafe without access to cell phones while working in the community. The women work all shifts and all hours and cannot have their own means of transportation. One wrote, “We need cell phones in FVATC for security reasons. It is very hard and we are at danger in this time that we live in without having a way to communicate.” Residents who are out in the community are at times required to check in with facility staff and one commented that having to use a stranger’s phone made her uncomfortable, while another woman observed that other people do not like to let them use their phones. Residents also stated that Aurora police were not aware until recently that the women did not have cell phones and reportedly were concerned about the practice. Some women at Fox Valley were aware that men in work release were able to use cell phones while in the community.

At the time of the visit, Fox Valley administrators stated they planned to install a cell phone locker and address this issue, so that women could use the phones when they were in the community and then lock them in the locker upon return to the facility so that cell phones would not be used inside, as had been done at the male ATCs. However, they reported that construction issues with the rented building delayed installation. As of December 2018, administrators reported the cell phone locker had been installed and should be in use by February 1, 2019. Administrators again reported the delay in granting residents access to and use of a cell phone.
was due to the pending installation of a cell phone cabinet as well as lease negotiations. Additionally, the facility needed to develop policy and staff and resident training and education for use of cell phones.

Some women also expressed that they would like more access to the payphones within the facility. Administrators stated that residents typically should have access to the payphones between 7:30am to 9:45pm, other than during shift change or restricted movement. IDOC must ensure people in their custody have appropriate safety protections and means of communication while at work release centers.

**PROGRAMMING AND SENTENCING CREDITS**

JHA was disturbed to hear that some women by coming to Fox Valley actually delayed their anticipated release date because they were no longer eligible for programming credit contract time that they would have received at a prison, e.g. by working in an Illinois Correctional Industry program, by being in school, or by participating in substance abuse treatment program. However, JHA also continually heard from the women at Fox Valley disappointment due to the lack of productive activity and programmatic opportunity within IDOC’s female prisons.

As reflected in JHA’s survey responses, many women reported feeling that their time in custody was not helpful in providing them with an education or employment skills. JHA has repeatedly reported that there have been no college academic or vocational credit courses available to women in IDOC prisons since the end of 2015, when some community college partners backed out due to budget concerns and state non-payment issues, and called on IDOC to address this void. While such college classes typically have a very limited, small number of people enrolled, they represent opportunity for both individual success and cost-saving for the state through provision of sentencing credits, leading to earlier release, and potential recidivism reduction. The absence of these opportunities was keenly felt and stressed by the women. Although JHA is optimistic that some classes may soon be returning to the facilities, we must recognize the disadvantage experienced by women who have been through the period of time when these opportunities went from slim to none, and work to ensure that this will no longer occur and that women will be provided opportunities to improve their education and not be penalized for not participating in classes where none were available, e.g. for consideration of things such as possible good conduct credits. Only 2 of the women who responded to JHA’s reentry surveys thought educational programming had been adequate.

One woman wrote of Logan: “The men’s prison still have skilled jobs and classes and is still offered all kinds of days. The only thing women are offered is substance abuse treatment and once you finish there’s nothing else to work towards and that class lasts only 90-120 days. Then there’s education only to get your GED, there’s days available for doing that, but if it’s your 2nd or 3rd or 4th time you can’t even sign up for school so you’re doing dead time! For the 3,4,5,6,7,8,9 years that you have to do before being paroled, all there is to do is watch TV, argue and fight, bulldog, play cards for the women. How is doing any of these things helping us, educating us, giving us skills. It doesn’t!!!” Another woman simply stated, “there is no vocational or educational opportunities for someone like me at Decatur.”

Disappointingly, of the female reentry survey respondents, only 2 women, both of whom reported being incarcerated more than 6 years, reported any increase in their educational levels.
while incarcerated, from high school completion to having completed some college classes. Reportedly at least 40% of people within IDOC have less than a high school graduate education. About half of the female survey respondents at Fox Valley reported they received some job skills or employment experience; considering the setting of the survey at a work release center we expected that number to be higher. However, the survey responses may not be entirely representative of the population. While no classes are offered onsite, Fox Valley administrators stated that they strongly encourage women to participate in GED and college educational opportunities, and reported that 4 women were taking college courses in the community, that some were in vocational programs, and that educational programming was part of the residents “required hours” necessary to move up in privileges/level at the facility. Nonetheless, educational achievement of formerly incarcerated people universally lags that of the general public, and inhibits employment opportunities.

Meanwhile, as JHA has repeatedly commented on, IDOC’s delay in implementing earned discretionary sentencing credits has resulted throughout 2018 in people who are some of the most deserving of receiving sentencing credit through excellent behavior and work performance not getting any and staying incarcerated longer than is necessary or fair. Incarcerated people want their earned good time days and receiving them benefits IDOC and Illinois by allowing better allocation of scarce resources.

Women at Fox Valley appreciated the helpfulness of outside religious organizations and volunteer services at the facility. However, many noted that they would benefit from additional programming, whether provided by facility staff or volunteers. Administrators reported that there were 40 volunteers who provided myriad services at Fox Valley, and that while in 2018, 12 volunteers stopped providing services, 14 new volunteers were recruited. They report Volunteer Coordinators attend community networking sessions in an ongoing effort to recruit new volunteers. Some women noted that all volunteer spiritual programming was Christian, however, residents are allowed to have other group religious meetings or attend other services in the community. One resident was teaching others a meditation class, which seemed to be a positive for the facility. JHA was pleased to hear of particular staff and volunteer facilitated creative programming opportunities that were appreciated by the women, including programs facilitated by the social worker who reportedly went beyond her required duties, running a book club, a poetry night, and an art group, which were popular with the women. One woman stressed that a hardship had been the lack of “creative outlets” in prison.

While 70% of the Fox Valley survey respondents reported they had a basic understanding of financial tools, some of our conversations with women about various costs and barriers (such as for healthcare and court fees) further convinced us that more education and guidance is needed regarding financial literacy and budgeting education. JHA visitors noted a posting for an online budgeting class in the facility, and administrators explained that this is required for residents to progress to Level 2 and that although the residents do not have internet access at Fox Valley, they can use computers at community locations. Some women reported they needed additional help with this area and that they received little help with figuring out things like transportation budgeting. Further it was reported that some women needed more assistance with learning basic life skills such as literacy or hygiene practices, and other things necessary for day to day life at the facility, such as reading a transit schedule and learning how to use the bus or train. While
residents can learn from one another, the women who are the most successful at the ATC tend to have extremely full schedules with little time left to mentor others. Administrators responded that part of the facility orientation includes learning about the community resources, including transportation, and that orientation also includes budgeting, emotional regulation, healthy decision-making, coping skills, and daily selfcare.

The women also noted that they have little help with legal issues while at Fox Valley and that the legal resources at the facility library and community library are limited. In contrast they reported the IDOC prison libraries at Decatur and Logan were much better and more helpful. Administrators responded that residents can access law materials at the local community and college libraries, and are also able to go to legal clinics or meet with lawyers as needed.

Both the residents and JHA note that this facility does not have that many volunteers considering its proximity to Chicago and many people’s stated interest in working with incarcerated women. Residents observed that there were many more programs and services offered at Cook County Jail than anywhere in IDOC, including “incredible” programs in grief, loss, PTSD, substance abuse, parenting, and programs including such diverse activities as knitting, as well as a much broader range of religious representatives. JHA recommends that Fox Valley seek to partner with more community volunteers, particularly those who could be available periodically help women with financial literacy and legal issues. Increased outreach and communication by IDOC as well as community partners may reach community members interested in assisting reentering women at this facility, leading to an increase in volunteer programming that is meaningful and productive.

**INFORMATION AND COMMUNICATION**

Without a doubt, many of the people JHA spoke with felt that being at an ATC was a “blessing” and countless individuals we meet in prisons would do anything to have an opportunity to have a job and make some money prior to release. As one woman wrote in her survey response, “I’m very grateful for Fox Valley ATC.” A staff member also noted "We need more ATCs for both men + women. Need more programs that enable offenders to get ready to reintegrate to society."

ATCs represent some of the best opportunities that IDOC has to offer, but this does not mean the environments cannot be improved and subject to ongoing department and public oversight. Unfortunately, JHA continues to hear from several women that there was little or no preparation at Logan or Decatur for what Fox Valley would be like. One woman described that the Fox Valley staff person who drove her to the facility was the first person to really explain anything about the program to her. Women stated that most prisoners get information about the facility from the women who return to Logan from Fox Valley, and that information is often incomplete. For example, one woman said “they don’t tell you that you will be so incredibly tired,” from fulfilling all the program requirements, which may include work, school, treatment, and volunteer hours, but also, she noted that the structure and having no free time “can be good and bad.” Another woman agreed and observed that the program is exhausting, “You’ll be so tired it’s not even funny,” and “you’ll have no time for anything.”

JHA recommends that people at prisons (staff and incarcerated people) be given current detailed information regarding program rules and opportunities at other IDOC facilities. We appreciate
that counselors at most prisons have caseloads in the hundreds, but the Department must consider how to make uniform updated information about facilities available to incarcerated people so they can understand and make informed choices regarding their options. People who are incarcerated, as well as other stakeholders, must have current, accurate information regarding programming characteristics, opportunities, and consequences within IDOC. Increased communication remains necessary for success.

Fox Valley administrators acknowledged that they could improve upon communication; however, they reported they are in constant communication with the female prisons regarding resident issues and needs, and that to provide more information, they send the female prisons the Fox Valley handbook annually, and in the past Fox Valley counselors went to the prisons and made presentations to inmates quarterly, which reportedly will resume in 2019.

As ATCs are still carceral environments, IDOC must publicly report information about facilities as required for prisons to increase transparency. Currently, the Department frequently omits important information about work release facilities from the minimal information made regularly publicly available, including not always counting the approximately 900 residents in publicly reported IDOC population tallies. Additionally, ATC data is often left out of reports detailing other aspects of IDOC, such as educational programming participation, as set out in Quarterly Reports, as well as other information set out in Operations and Management Report data reports.²⁹

Another example of information that is not made publicly available for the work release centers is information about facility lock downs. At the time of JHA’s August 2018 visit, women at Fox Valley reported they had been “locked down” from the prior Friday to Tuesday without freedom of movement, including use of phones/contact with loved ones. There is currently no public visibility or tracking for such occurrences. Administrators stated that residents refer to restricted movement as “lock downs” and that movement is sometimes restricted at Fox Valley for staff shortages, staff/resident medical emergencies, egregious resident misconduct, and other safety/security issues. They report that during restrictive movement times residents cannot leave residential floors except for meal and visiting time, but that women can still leave for work and passes. The facility tracks data on restricted movement incidents that could be reported.

Similarly, there is no available public information regarding people’s successes and failures at ATCs. This would include things like details of sentence credits received and information about those incurring disciplinary transfers and being returned to prison. Knowing what the benefits and issues are can lead to more targeted direction of resources, e.g. if Fox Valley has a substantial uptick with drug relapse issues, it would seem to make sense to direct more treatment and preventative resources to the facility. Yet another missing piece of information is whether ATCs are more successful in reducing recidivism. This critical data tracking lapse likely led to closure of many work release centers throughout Illinois, which could not easily and clearly demonstrate their utility.

Again, JHA stresses that foremost, women within the prisons must be provided with more information about the reality and opportunities at the work release center prior to electing to participate. We were very concerned to hear that women did not feel that they had preparation
for placement at the work release center, as well as to hear that people did not feel the time at the center prepared them fully for the next step. The women felt it was important that others be able to make an informed choice about coming to Fox Valley and that the Department could do more to educate people about life at a work release center so they did not get the “wrong people,” as ATCs were observed by residents to be “not for everyone.”

OTHER ISSUES
JHA was concerned by some other reports in various topical areas that we received from Fox Valley. While we cannot confirm everything we hear, we believe it is important to hear the concerns of people who are directly affected.

Respectful Treatment
As administrators explained, work release centers sometimes have an identity crisis between being a prison and the community. One woman stated that Fox Valley is a “halfway point to freedom—residents don’t receive the same rights and respect as citizens.” However, some women reported that just the language change used at ATCs from being called an “offender” to a “resident” mattered to them. As an administrator put it, “residents feel like persons.” We were disappointed to hear from a few people that women who came to Fox Valley were told by staff that they were “numbers,” or depersonalized, and viewed as easily replaced. While it is true that there will always more women who will want a chance to participate at Fox Valley than there are bed spaces, staff should work to promote the success of each individual. Some women reported being yelled at, belittled, and threatened.

Administrators emphasized in draft review that they would want to address any such issues if they were reported. They further responded that staff attend annual and ongoing professional conduct training, and professional conduct is a set agenda item discussed at monthly meetings: “It is the expectation that staff treat residents, visitors, and one another in a courteous, respectful manner. Incidents of behavior that fails to meet that expectation is addressed through progressive discipline. Residents who experience nonprofessional treatment can tell staff they trust, they can write a grievance, they can leave an anonymous note, they can call inmate issues department, they can tell their family/employer/volunteer, etc.”

The facility supervisor reported that she personally conducts orientation with all new residents and informs them how to set up in person or phone appointments with her as needed, and in addition to contact with residents in daily facility walkthroughs, she meets with residents once a month to establish and maintain rapport, and encourage residents to share what is going well and what concerns, if any, they have.

While women at Fox Valley responding to JHA’s survey reported being treated respectfully by staff while in custody at that facility at a higher rate than women JHA surveyed in prisons, still only about 1 in 3, 35%, reported they felt there was respectful treatment. We were also concerned to hear from several individuals that women were instructed by some staff not to speak with JHA visitors and that some women feared retaliation from completing our surveys and chose not to participate for this reason. Again, in draft review, administrators stated that they would want to address this issue if staff names were provided.
JHA is hopeful that as more staff have increased training, they will improve communication skills. An administrator with a background working in male facilities noted that it had been helpful to learn in the gender responsive trainings that women are more likely than men to ask questions. Women are also more relationship focused and tend to perceive favoritism or bias in staff actions. One woman wrote, “I feel some staff are racist, most of them don’t care about us. We should have more opportunity to present things to our warden.” Other women affirmed that they had difficulty getting to see supervisory staff. Another stated about staff that when the women ask them questions “they make us feel like we are bothering them.” Other women agreed that they would be disciplined or threatened with tickets for inquiring regarding status. JHA has received reports that women have been told not to have their families contact Springfield with issues or to file grievances. Administrators thought that perhaps women had misconstrued staff stating that women should not have their families call Springfield about sentencing credit questions or send grievances directly to Springfield instead of following the required procedure.

At Fox Valley some women believed that people were disciplined in disparate ways and some stated that disciplinary investigations were not carried out properly, e.g. to give people proper notice, paperwork was lost, etc. Administrators responded that resident discipline is progressive and in accordance with set guidelines, and the facility supervisor reviews all recommended discipline to assure compliance and fairness. Without more transparency over disciplinary issues, it is impossible to know about fairness, and such concerns are common throughout IDOC. JHA has long advocated for more public reporting of this information and advocated for IDOC to use a staff person to try to enhance the integrity of use of discipline and uniformity throughout the agency among different populations, or for an agency Ombudsman as exists for the Illinois juvenile justice system who would be able to receive and review complaints.

One woman explained, “Most of the staff are firm but fair. Some are even compassionate. Not all of these issues are important to others, but they are important to the residents as they depend on the staff to do their jobs and depend on staff for all their needs.”

**Transportation**

Women continue to report that they struggled with transportation costs at Fox Valley and women will sometimes walk substantial distances to get to work. Administrators reported that the women will get free rides from the facility staff to work their first 30 days on the job and they felt that residents were prepared from this and orientation to arrange their own transportation. One woman reported that it could take staff upwards of 2 hours to pick them up. Another woman reported that some people pay upwards of $200 weekly for transportation, or more than an hour’s pay, $10, for a three-mile cab ride to Breaking Free. Administrators responded that women are only allowed $100 weekly to be budgeted for transportation and that the women’s expenses are tracked and checked every 2 weeks, although there is some use of an honor system. They report that most residents choose to take cabs though they are strongly encouraged to walk, ride a bike, take a bus, or arrange a transportation agreement to ride with a coworker. Residents are not allowed to drive but may get a transportation agreement approved to ride with someone else. As women did not have cell phones at the time of the visit, using ride sharing apps was not possible or allowed. While the male residents at North Lawndale had cell phones, they too were not allowed to use rideshares because of not being allowed to have credit or debit cards. However, men at North Lawndale were also not supposed to take cabs. Safer Foundation staff at North
Lawndale ATC thought that allowing use of rideshare apps would make sense because it is safer than having people rely on public transportation in the area of the facility, and they are also cheaper than taxis. JHA encouraged Fox Valley to review transportation budgeting and transit opportunities with the women and to find ways to expand commute capabilities for them. During draft review, administrators reported that they had begun allowing women in Honors Level to have their families arrange rides for them through rideshares.

**Housing Post Release**

One woman eloquently wrote when asked in the survey what she needed to succeed, “*More open doors, even doors to housing is closed to felons.*” No women in the reentry survey responses reported that they received help at Fox Valley with finding housing for after she was released, compared to one man at North Lawndale stating he received assistance. While most respondents reported they had a plan for stable housing post-release, many survey respondents also indicated they had critical family support systems intact. Fox Valley administrators reported about 85% of residents parole to a family or friend’s residence and do not need housing assistance, 14% parole to their own home, and about 1% parole to a group home or independent living facility. They also report that facility counselors, the social worker, and some of the previously mentioned area community agencies may assist residents in securing housing.

JHA received some reports from women at Fox Valley that they have been required to pay two months’ rent prior to release to hold housing so that they can have the site approved by parole. Administrators stated that this occurs, and that women will sometimes have to pay for a whole month’s rent when they have a release date at the end of the month to secure housing, in addition to other deposits, which depend on the landlord’s practices and they have no control over. JHA commonly hears that returning citizens have difficulty obtaining housing meeting parole conditions, which for more than a thousand individuals within IDOC leads to their ongoing incarceration.30 One woman wondered, “so where are we supposed to live at once released when rent is from $700 and up there’s the issues of transportation.” Housing instability and homelessness are well-documented problems and barriers for formerly incarcerated individuals.31

**Other Fees**

In addition to healthcare, state ID, transportation, and housing fees discussed above, JHA was concerned by several other practices involving fees that were harming people’s chances at reentry success. Some women reported lacking basic things, such arriving at the ATC and not having any money for things such as laundry while not receiving any state pay (which is $10 a month at prisons) while in orientation status or before their first paycheck. Administrators responded that women are offered use of a non-coin operated laundry machine until they get their first paycheck and are given a care package upon arriving at Fox Valley that includes laundry detergent. Further, administrators indicated that most residents have a support system who can assist them financially until they start working. About 60% of residents responding to JHA’s reentry surveys reported that their families or friends were financially supportive.

Other women reported seemingly insurmountable court fees. We heard several stories where it was clear people needed more help and guidance to avoid digging a hole of financial obligations that they may have no chance to repay. Often people will have to pay for court ordered fees and treatment in the community as a condition of their freedom. Concerningly, women repeated what
JHA 2018 Fox Valley ATC and Reentry

JHA hears commonly in facilities, that their attorneys did not fully apprise them of all of the actual consequences of pleas. JHA found that incarcerated people were not receiving enough direction regarding services that could help them avoid or modify expenses, e.g. no male respondents to our pilot reentry survey reported that they received information regarding child support modifications while incarcerated. This is vital information that can improve individual lives and system outcomes. Information sharing and communication must be enhanced to provide increased opportunities for success. Having a program available to provide relief does little to aid people if these programs are not made known to those who need them.

As noted above, we believe that the women at Fox Valley would benefit from having some more financial literacy training available. Residents are not really allowed to control their finances as all residents must submit their pay to the facility, and the facility collects 20%, or up to $100 a week for a maintenance fee. Residents are given an allowance and special dispensations can be approved, but the remainder of their earnings is held by the facility in savings for the individuals’ release. Currently residents are not able to have any sort of credit or debit card. While this makes sense in some regards, e.g. to avoid debt accumulation, it is somewhat of a barrier to learning how to acclimate to modern free society, in that transactions in the community are more commonly done without cash. In addition, from a safety and surveillance perspective having someone use a form of payment that can be tracked provides more information about spending and activity, e.g. transit cards can show when someone enters a particular bus. Administrators at Fox Valley reported that several employers issue payment via a card. Sometimes such methods of payment can have hidden fees. JHA reiterated during the August 2018 visit that it was unfair and bad policy for the women to have to pay fees to cash their paychecks, which was frequently the case. We were told residents would have to take two buses to get to a bank that would provide this service for free, which would cut into their limited free movement time and seems like an enormous burden. JHA continued to recommend that administrators work with the employers to put direct deposit practices in place for the women. Residents’ checks could also potentially be electronically deposited by uploading a photo, as is commonly available through cell phone banking apps. We continue to encourage the facility to work to make it easier for the women to save and learn. In draft review, administrators reported that as of the end of 2018, approximately 70% of the women were enrolled in direct deposit and not paying currency exchange fees.

JHA also encourages work release centers to track and report data on savings of residents when they leave the facility. Administrators often tell us of individuals who are very successful, e.g. a woman who left with $25,000 saved. It is important for earnings to be documented for several reasons, including an understanding of what is likely a more typical, lower, amount of savings. Administrators indicated that this information could be reported from information tracked at the facility. During the August 2018 visit, administrators reported that 15 residents (of 125) were “Honors Level,” meaning that they had saved at least $2,000, and had been on the highest level (4) for 4 months, were employed, and volunteering. One woman we spoke to reported that she works so much she is not able to level up because she does not have time for anything but her job, but her goal was saving.

Other costs that many people do not consider is that residents can only visit home sites on passes that have landlines to ensure that they can be monitored. This is also a common issue for people
on Mandatory Supervised Release (MSR), or parole, and electronic detention, discussed below. Many people in free society no longer have landlines and rely only on cell phones, which can track people’s locations. JHA recommends that IDOC rethink ideas of surveillance and technology to take advantage of modern usage, which would both reduce the prison population and save families unnecessary expenses.

**Electronic Detention**
JHA remains concerned to hear that women at Fox Valley were regularly electing to remain incarcerated at the ATC, filling beds where other women could better prepare for reentry rather than leave the facility to be placed on Electronic Detention, reportedly due to the overly restrictive nature of it. At the time of the August visit, administrators reported that over the prior 20 months, only 22 women had been released to electronic detention from the facility. Administrators said a third of women offered electronic detention refuse it. IDOC should review use of electronic detention to ensure it is being used in a manner that makes sense. Electronic detention provides an opportunity to reduce the prison population and should offer incarcerated individuals more opportunities for school and work, if it is working as intended.

**Physical Plant**
The Fox Valley building is an older, “vintage,” building, which is rented, and required some repairs, which were reportedly at times difficult to get addressed. As noted in the prior JHA Fox Valley report, only the first floor of the building is accessible by an elevator. Administrators reported that the building is in better condition and some improvements have been made since JHA’s 2014 visit. At the time of the August 2018 visit, administrators indicated that the rental contract for the building was coming up for renewal, which seemed to be a factor delaying the installation of cell phone lockers as discussed above. Notably, residents did not complain about issues with the building during the 2018 visit, other than one survey respondent expressing concern regarding bed bugs. However, JHA visitors noted many cosmetic issues, including age related issues such as peeling paint and rust. Visitors also wondered if there would be enough bathroom and shower facilities for the population. In the past year, JHA has received complaints about plumbing issues at the facility. The building’s age and general deferred maintenance was noted by one JHA visitor to be “shabby” but “homey” due to decorative touches throughout, as in a dorm or hostel. Some women requested curtains or blinds for their windows be supplied. One woman observed that she could try to forget she was incarcerated at Fox Valley, but the loud disruptive announcements throughout the facility and resident counts interrupt this illusion.

One woman observed that having more movement at Fox Valley, including in the community, helped, in contrast to her time at Decatur, which was “suffocating.” For cooling, the Fox Valley building has industrial fans and air conditioners at each end of the residential hallways and residents are allowed to have fans and cold air vaporizers in their rooms. Residents have access to a small gym with donated exercise equipment. However, at the time of the visit, women at Fox Valley who had days off and were at the facility without some sort of a pass for free time, were not allowed to go outside of the building. JHA recommended the facility implement some sort of opportunity to get fresh air. Administrators said they were considering this suggestion at the time of the visit, and during the draft review reported that now residents who are not working or have a day off are allowed outside patio time of an hour twice a day.
**Brunch**

Dietary services are provided by contractor Aramark at Fox Valley with use of permanent party resident workers. JHA received few dietary complaints at Fox Valley relating to the quality of the food (in contrast to North Lawndale). This may be due to the fact that most women can eat elsewhere when they are out in the community. However, we were concerned that some women stated that they are on a brunch schedule on weekends so that dinner may be served at 4:30 pm with the next meal being the next morning at 9:30 am, i.e. there is a very long 17-hour gap between meals. At the time of JHA’s August 2018 visit, about 10% of the women, 6 permanent parties and 5 women in orientation status at Fox Valley, were without ability to shop outside the facility. While there are vending machines available onsite, some women reported being without funds and women also reported not being allowed access during restrictive movement. Further due to some women’s schedules of activities outside the facility, it seems likely that with only two meals being offered on weekends she could end up missing multiple meals at the facility, while she may struggle with time, transportation, and funds to fend for herself in the community. JHA advised doing away with brunch in the prison system due to possible health concerns related to such schedules and likelihood of missed meals and long gaps between meals, particularly as many medications are to be taken more regularly with food, and we recommend Fox Valley evaluate whether this meal schedule is problematic for their population and ensure that individuals dietary/medical needs are accommodated.

**PREA**

The federal Prison Rape Elimination Act (PREA) mandates zero-tolerance for sexual abuse and harassment in custodial settings and under this law many technical rules have been established to promote sexual safety in facilities. Fox Valley, like most IDOC facilities, would benefit from increased camera coverage. During the visit, JHA observed that Fox Valley did not have the most up-to-date information provided by the department regarding PREA reporting available, which is to be provided with the orientation manual. We also noticed that a posting for a 2016 PREA audit was still up in the facility, which would no longer be relevant to the women. In draft review, administrators reported the orientation manual had been updated and they had toured the facility and removed outdated postings.

In publicly available PREA reporting, Fox Valley has not reported receiving any PREA reports for sexual abuse or harassment from 2015-2017 for any incidents occurring at the facility. Administrators in draft review also stated that they had received no reports during that period and noted residents have many various ways to report, at the facility and in the community, including anonymously. Although ideally no incidents of sexual abuse or harassment would occur, PREA seeks to create a “reporting culture” in which allegations will be brought to administrators’ attention to address. While Fox Valley residents do have greater access to outside supports, in 2017 alone there were more than 250 PREA reports recorded from IDOC’s other female facilities, Decatur and Logan. It is important to recognize that work release settings can be particularly challenging settings for enabling people to feel comfortable reporting issues, because residents often do not want to do anything that might result in being removed and missing out on the privilege of being at the facility and being sent back to prison, as may occur during an investigation. JHA was pleased that some staff reported that they would promptly remove women from an outside workplace if they reported sexual harassment. One woman commented in a survey response, that something that had been better than she expected was that
people were actually nice and she joked that no one tried to rape her during her incarceration within IDOC facilities.

**Additional Needs**

Staff at Fox Valley noted that it would help if there was a staff person who could serve as a link between Fox Valley and parole. JHA agrees that having this for more continuity and communication would be beneficial, as often people do not fully understand the availability of, and access to, services in the facilities or community. Administrators noted at the time of the visit, although they were better staffed than in prior years, including their full allocation of clinical counselors for the first time in years (3 counselors, with caseloads around 40 women, which is much better than counselor caseloads in the prisons), they had other staff vacancies, including a shift commander, some other security staff, and an important administrative role.

Staff noted that they would like some computer and software updates, staff reported using Office 2007. At the time of the visit, the facility’s employment counselor who connected women with outside employers did not have use of a computer. While technically she was not a state employee, as she was being funded through nonprofit Prisoner Release Ministry, having internet access is critical to employment search and application work. In draft review, administrators reported that the nonprofit lost funding for this position and the employment counselor’s duties were being taken over by facility counselors. JHA believes all ATCs would benefit from having more computer and internet access for residents and staff, as increased communication assistance was also a need noted by North Lawndale residents. Fox Valley administrators responded that facility counselors and the social worker have internet access onsite and can assist residents as needed. Additionally, residents can use the internet in the community, such as at the library and employment resource center, and residents have access to an onsite computer with word processing capacity.

IDOC faces many challenges and has limited resources, however, there are also several available opportunities to revise and implement changes to better serve Illinois. We recommend that people review the responses to JHA’s pilot reentry survey attached here as **Appendix B** to hear directly from those most affected where work remains to increase reentry success.
This report was written by JHA staff. Media inquiries should be directed to JHA’s Executive Director, Jennifer Vollen-Katz, at (312) 291-9555 or jvollen@thejha.org.

Incarcerated people may send privileged mail to JHA, P.O. Box 10042, Chicago, IL 60610-0042.

Since 1901, JHA has provided public oversight of Illinois’ juvenile and adult correctional facilities. Every year, JHA staff and trained volunteers inspect prisons, jails and detention centers throughout the state. Based on these inspections, JHA regularly issues reports that are instrumental in improving prison conditions.

JHA’s work on healthcare in IDOC is made possible through a generous grant by the Michael Reese Health Trust.

Preparation of this report was supported by the John D. and Catherine T. MacArthur Foundation.

The John Howard Association was the proud recipient of the 2015 MacArthur Award for Creative and Effective Institutions
1See http://thejha.org/sites/default/files/Fox%20Valley%20Adult%20Transition%20Center%20Report%202014.pdf. The IDOC page for the facility is https://www2.illinois.gov/idoc/facilities/Pages/FoxValleyAdultTransitionCenter.aspx. Encouragingly, IDOC population generally, and with women, is down significantly, about 20%, since the time of JHA’s 2014 Fox Valley report, when there were in total 2,917 women in IDOC custody. For a description of JHA’s Prison Monitoring Project’s method, see http://thejha.org/method. JHA reviewed a draft of this report with IDOC administrators prior to publication in December 2018 and January 2019.

2 At the time of the visit, the total female population composed about 5.8% of the total IDOC population (40,757), or 2,372 women. The 125 women housed at Fox Valley represented about 5% of the female population in IDOC custody. Men housed at ATCs made up less than 2% of the male IDOC population. The vast majority of women in IDOC custody, 1,706 women, were incarcerated at Logan Correctional Center (see prior JHA reports at http://thejha.org/logan), 494 at minimum-security Decatur Correctional Center (see prior JHA reports at http://thejha.org/decatur; Decatur also houses the Moms & Babies program, at that time involving 6 women, with a stated capacity of 8), 6 at the Dixon Springs Impart Incarceration Center (boot camp), 24 women were considered in IDOC custody while on Electronic Detention, 4 women were in federal or other state custody, a woman was housed at the Women’s Treatment Center (out of a stated capacity of 15), and 12 women were at the Elgin Treatment Center (Elgin, which opened with limited IDOC operated bedspace with a capacity for 22 men and 22 women in April 2018 in response to a settlement agreement in litigation regarding mental health treatment for prisoners. As of December 11, 2018, there were 13 women and 11 men housed at Elgin).

Fox Valley ATC Demographics: Population at Fox Valley pretty much holds steady at around 125; administrators stated that the facility’s capacity is 130 women. In August 2018, the resident population at Fox Valley was reported to be two-thirds white (85 women), 28% Black (36 women), 3% Hispanic (4 women) and one percent Asian (1 woman). At that time, 7 of the women (5%) were identified as Security Threat Group (STG), or gang, affiliated. About 5% (7 women) were under 25 years old, and about 22 percent (28 women) were over 50 years old. The geographic distribution, or committing counties, of the women at the facility were: 15.6% Cook, 8.6% Collar Counties, 14.1% other Northern Illinois, 2.3% Metro-East, 43% Central Illinois, and 16.4% Southern Illinois. As Fox Valley is the only female work release center, women are placed here from all over the state regardless of what community they will be released to. All the women at Fox Valley were identified as minimum-security and low escape risk. In addition, at the time of the visit all of the women were identified as being in disciplinary Grade A, meaning that they were entitled to all available privileges. It was reported there was one woman at Fox Valley with an offense conviction for murder, 9% had Class X convictions, 21.9% had Class 1 convictions, 28.3% had Class 2 convictions, 21.5% had Class 3 convictions, and 18.9% had Class 4 convictions. Only one woman had more than two years to serve, 37 (28.9%) had more than one year but less than two years left to serve, and 90 women (70.3%) had less than a year to serve. Administrators reported that at any given time, there are 4-6 women who are permanent parties who can come in with 2-2.5 years to serve. Note that these demographics can be compared to IDOC demographic information for all women in custody as of June 30, 2018 at https://www2.illinois.gov/idoc/reportsandstatistics/Documents/Female_Fact_Sheet_Data_FY2018.pdf. The Fox Valley population has a larger percentage of women identified as White than the general female IDOC population. JHA continues to encourage IDOC to make demographic information for facilities regularly publicly available.

The facility reported that of 23 IDOC employees at the facility, 57% (13) were female, and staff were identified as 57% Black (13), 26% Hispanic (6), and 17% (4) White. At the time of the August visit, administrators reported that there was a vacancy for the Executive Secretary position, which had been vacant for the prior six months; this position was filled in October 2018. An Account Technician position had been vacant since the start of 2018 but was not yet posted. The facility also had vacancies for five security positions.

3 See e.g. Lucius Couloute and Daniel Kopf, Out of Prison & Out of Work: Unemployment among formerly incarcerated people, July 2018, https://www.prisonpolicy.org/reports/outofwork.html. The Prison Policy Initiative has published several excellent and useful briefs relating to realities and outcomes of incarceration cited in this paper.

4 The IDOC page for the facility is https://www2.illinois.gov/idoc/facilities/Pages/NorthLawndaleAdultTransitionCenter.aspx.
Residents and staff do not wear uniforms. Residents may have clothing brought in or purchase items in the community, and women at Fox Valley are provided with an onsite clothing closet, which accepts donations. At the time of the visit the facility had recently received many pairs of new shoes donated from closing store. JHA recommends that Fox Valley explore a partnership with Dress for Success, which provides clothing for women rejoining the workforce in the Chicago area.

Administrators stated that a women’s health program is mandated for residents who become pregnant and if the woman does not comply with this program by missing healthcare appointments or engaging in unhealthy behavior, such as smoking, she may be returned to Logan.

One man also indicated that his ability to get care at the VA hospital in Chicago while at the ATC was a positive for him.
“bridge medication to those who had been receiving medication at the time of their release. Once in the community, people would need to fill their prescriptions at community-based pharmacies and use local health care providers for ongoing care. Halfway house staff reported that Medicaid enrollment or reactivation usually occurred during intake, though some residents arrived with coverage already established through DOC discharge planning efforts. (At the time of the study’s 2016–17 data collection, universal Medicaid enrollment before halfway house placement was not feasible because facility-based discharge planning staff were at limited capacity. DOC reported it has since reorganized its discharge planning services so applications are generated before release.) DOC and DSS, the state Medicaid agency, developed a process for checking each person’s Medicaid status and, if needed, facilitating enrollment upon entry to the halfway house. Halfway house staff faxed an inquiry form to a designated criminal justice–focused unit within DSS to determine if the person had existing coverage. Based on the person’s status, either DSS reactivated their coverage or the house staff assisted with applying for Medicaid coverage. This process was designed to ensure coverage within one to two business days. According to halfway house staff, most people had coverage activated within a week or two of halfway house entry. Further, DOC and DSS implemented a voucher system that allowed people to fill prescriptions in the interim. Residents generally described applying for and using Medicaid as easy. From an administrative perspective, halfway house staff in one district acknowledged that submitting Medicaid inquiries and applications for residents took time; however, halfway house staff in most districts perceived that, on balance, Medicaid enrollment saved staff time over coordinating medical appointments with DOC and transporting residents when needed. Further, staff identified broader system changes that facilitated timely enrollment. First, DOC had begun to ensure more often that people had state IDs, birth certificates, Social Security cards, and other critical forms of identification before leaving correctional facilities. Second, staff in three districts reported that having a DSS contact person familiar with reentry was helpful in troubleshooting problems and facilitating enrollment.”


23 See https://www.breakingfreeinc.org.


27 See e.g. Lucius Couloute, Getting Back on Course: Educational exclusion and attainment among formerly incarcerated people, October 2018, https://www.prisonpolicy.org/reports/education.html.

28 See http://www.thejha.org/statement091918. At the time of the August 2018 visit, administrators reported that over the prior 20 months, 107 women had received discretionary sentencing credits at Fox Valley under the prior, 2017 version of the law.

29 See https://www2.illinois.gov/idoc/reportsandstatistics/Pages/default.aspx.


32 See https://www2.illinois.gov/idoc/programs/Pages/PrisonRapeEliminationActof2003.aspx.


34 See http://www.prisonerreleaseministry.com/Index.html.
JHA Reentry Survey

John Howard Association (JHA) provides independent monitoring of correctional policies and practices. If you voluntarily choose to complete this survey, it will help us evaluate your experience in prison with reentry planning. **DO NOT WRITE YOUR NAME OR NUMBER ON THIS SURVEY** so it is anonymous. This survey will be collected by JHA representatives. To write JHA, you may send privileged mail to: JHA, PO Box 10042, Chicago, IL 60610 or you can visit our website for other contact information at www.thejha.org.

Please mark the box that best fits your answer. You may skip questions, or if a question does not apply to you, mark "N/A" for not applicable. You may ask JHA representatives if you need help.

**Race**

- [ ] White
- [ ] Black
- [ ] Hispanic
- [ ] Other

**Age**

- [ ] Under 26
- [ ] 26-35
- [ ] 36-45
- [ ] 46-55
- [ ] Over 55

**Did you leave prison with a resume?**

- [ ] Yes
- [ ] No

**Do you have a basic command of technology (computers, smart phone)?**

- [ ] Yes
- [ ] No

**Do you know how to use/set up financial tools, such as a banking account or credit?**

- [ ] Yes
- [ ] No

**Do you know that you can vote upon release?**

- [ ] Yes
- [ ] No

**Do you know that after leaving prison you can get a state ID without having to pay the fee?**

- [ ] Yes
- [ ] No

**During this incarceration, how long were you in prison?**

- [ ] Less than 2 years
- [ ] 2-4 years
- [ ] 4-6 years
- [ ] 6-8 years
- [ ] 8-10 years
- [ ] More than 10 years
What was your level of education prior to this incarceration?

- Less than 8th grade completion
- Some high school
- High school/GED completion
- Vocational Certification
- Some college
- College completion
- Some courses towards an advanced degree
- Advanced degree

What is your current level of education?

- Less than 8th grade completion
- Some high school
- High school/GED completion
- Vocational Certification
- Some college
- College completion
- Some courses towards an advanced degree
- Advanced degree

During this incarceration, while in prison, I received - CHECK ALL THAT APPLY

- Education
- Job skills/Employment Experience
- Substance abuse treatment
- Healthcare services
- Mental health services
- Birth certificate (that I had to pay for)
- Birth certificate (for free)
- Social Security card
- A verification form to bring to the IL DMV to get an ID for free
- State ID
- Child support modification
- Veteran's benefits information
- Disability benefits information
- Medicaid information
- Medicaid enrollment
- Other government support information
- Voter registration information/application
- Help finding a job I will keep after I am released.
- Help finding housing for after I am released.

Since I have been at the ATC, I received - CHECK ALL THAT APPLY

- Education
- Job skills/Employment Experience
- Substance abuse treatment
- Healthcare services
- Mental health services
- Birth certificate (that I had to pay for)
- Birth certificate (for free)
- Social Security card
- A verification form to bring to the IL DMV to get an ID for free
- State ID
- Child support modification
- Veteran's benefits information
- Disability benefits information
- Medicaid information
- Medicaid enrollment
- Other government support information
- Voter registration information/application
- Help finding a job I will keep after I am released.
For the following questions, please mark the one box that best represents your answer.

<table>
<thead>
<tr>
<th></th>
<th>Strongly Agree</th>
<th>Agree</th>
<th>Neutral</th>
<th>Disagree</th>
<th>Strongly Disagree</th>
<th>N/A</th>
</tr>
</thead>
<tbody>
<tr>
<td>I felt safe while incarcerated.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I was treated with respect by staff while incarcerated.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>There was at least one staff member I could ask for help.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I had adequate access to law library.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I had enough access to phones.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Helpful reentry info was provided by staff in prison.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Rehabilitative programming was adequate.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Educational programming was adequate.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I have received individualized reentry planning.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I feel prepared for reentry.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>My family/friends are emotionally supportive.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>My family/friends are financially supportive.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>My time incarcerated gave me skills to prevent me from returning to jail.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I understand the requirements of my MSR (parole) conditions.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I am satisfied with the reentry assistance I received.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
I have a plan upon release for the following:

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
<th>N/A</th>
</tr>
</thead>
<tbody>
<tr>
<td>Stable housing</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Reliable transportation</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Healthcare</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Mental health treatment</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Education</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Substance abuse treatment</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Employment</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Job skill training</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Family reunification</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Government assistance</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Child support payments</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Veteran's support</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Disability benefits</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Registering to vote</td>
<td>☐</td>
<td>☐</td>
</tr>
</tbody>
</table>

Please list the county jail(s) and IDOC facilities you were housed at during this incarceration


What is something that was positive, helpful, or better than expected during your incarceration?


What is something that would have made your reentry planning better?


What is the most important thing you think you need to succeed upon release?


Do you have any additional comments?


APPENDIX B

JHA Pilot Reentry Survey Responses

Fox Valley ATC

In total, JHA collected 23 surveys from the women incarcerated at Fox Valley during the visit or via privileged mail. This represented about 18% of the facility’s population (125) on the date of the visit, August 16, 2018. Some Fox Valley staff also completed staff surveys, which also informed this report; however, compiled 2018 IDOC staff survey results will be published at a later date, after the end of the year.

The demographics of the women at Fox Valley responding to the reentry survey as self-reported are set out as follows. The women identified as 69.5% White (16), 26% Black (16), and 0.5% Hispanic (1). Two women (8.6%) were under 26 years old, six were 26-35 (26%), six were 36-45 (26%) six were 46-55 (26%) and three were over 55 years old (13%). Of the female reentry survey respondents, eight women (35%) reported they had been incarcerated less than two years, eight women (35%) reported they had been incarcerated 2-4 years, six women (26%) 4-6 years, and one woman (4%) reported being incarcerated 8-10 years.2

The female reentry survey respondents reported their education levels prior to their incarceration as 9% some high school (2 women), 43% high school completion (10), 30% some college (7), 13% college completion (3), and 4% vocational certification (1). Only two women, both of whom reported they had been incarcerated more than six years, reported any increase in their educational levels while incarcerated, from high school completion to having completed some college classes.

The women responding to the survey reported having been incarcerated at 17 different Illinois county jails. Of the 23 female respondents 74% (17) reported they had been housed at Decatur Correctional Center in addition to Logan, where all women undergo IDOC Reception and Classification since March 2013. One woman reported she had been housed at Dwight Correctional Center, which closed in March 2013. Administrators confirmed that about 25% of the residents come in from Logan and 75% come from Decatur.

North Lawndale ATC

JHA collected 22 surveys from the men at North Lawndale, representing about 16% of that facility’s population (139) on the day of the visit, July 23, 2018.

The demographics of the men at North Lawndale responding to the reentry survey as self-reported are set out as follows. The men identified as 31.8% White (7), 40.9% Black (9), 13.6% Hispanic (3), and 9% Other (2). Three men (13.6%) were under 26 years old, ten were 26-35

---

1 Note that not all survey responses will add up to 100% as there is some rounding and not all questions were answered by all respondents.
2 Demographic information of the Fox Valley population, women, and general educational levels within IDOC can be reviewed at endnotes 2, 12, and 26 of the first part of this report.
JHA Pilot Reentry Survey Responses

(45%), four were 36-45 (18%) four were 46-55 (18%) and two were over 55 years old (9%). Of the male reentry survey respondents, 12 men (55%) reported they had been incarcerated less than two years, six men (27%) reported they had been incarcerated 2-4 years, two men (9%) 6-8 years, and one man (5%) reported being incarcerated 8-10 years.\(^3\)

The male reentry survey respondents reported their education levels prior to their incarceration as 9% less than 8\(^{th}\) grade (2), 27% some high school (6), 23% high school completion (5), 32% some college (7), 5% college completion (1), and 5% vocational certification (1). Four men, two of whom reported they had been incarcerated more than six years, reported an increase in their educational levels while incarcerated, with two reporting high school completion, one receiving a vocational certificate, and one advancing to having some college classes.

The men responding to the survey reported being incarcerated at 9 different Illinois county jails and 17 different IDOC facilities.

**Chart I: Additional Respondent Characteristics**

<table>
<thead>
<tr>
<th>JHA ATC Reentry Survey Additional Respondent Characteristics</th>
<th>♂ Yes</th>
<th>♀ Yes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Was Married</td>
<td>22% (5)</td>
<td>26% (6)</td>
</tr>
<tr>
<td>Had Minor Children</td>
<td>55% (12)</td>
<td>39% (9)</td>
</tr>
<tr>
<td>First Time in Prison</td>
<td>27% (6)</td>
<td>48% (11)</td>
</tr>
<tr>
<td>Received Visits in Prison</td>
<td>59% (13)</td>
<td>70% (16)</td>
</tr>
<tr>
<td>Was Lawfully Employed Prior to Incarceration</td>
<td>59% (13)</td>
<td>61% (14)</td>
</tr>
<tr>
<td>Gained Jobs Skills While in Custody</td>
<td>59% (13)</td>
<td>43% (10)</td>
</tr>
<tr>
<td>Left Prison with a Resume</td>
<td>23% (5)</td>
<td>22% (5)</td>
</tr>
<tr>
<td>Had a Basic Command of Technology</td>
<td>73% (16)</td>
<td>83% (19)</td>
</tr>
<tr>
<td>Knew how to use Financial Tools</td>
<td>91% (20)</td>
<td>70% (16)</td>
</tr>
<tr>
<td>Knew they could Vote upon Release</td>
<td>68% (15)</td>
<td>83% (19)</td>
</tr>
<tr>
<td>Knew upon Release they could get a State ID for free</td>
<td>36% (8)</td>
<td>30% (7)</td>
</tr>
</tbody>
</table>

\(^3\) Demographics of all men in IDOC at a similar time period can be reviewed at https://www2.illinois.gov/idoc/reportsandstatistics/Documents/Male_Data_Fact_Sheet_FY18.pdf.
### Chart II: Services Reported Received

<table>
<thead>
<tr>
<th>JHA ATC Reentry Survey Services Reported Received</th>
<th>♀ In Prison</th>
<th>♀ At ATC</th>
<th>♂ In Prison</th>
<th>♂ At ATC</th>
</tr>
</thead>
<tbody>
<tr>
<td>Education</td>
<td>17% (4)</td>
<td>0</td>
<td>59% (13)</td>
<td>50% (11)</td>
</tr>
<tr>
<td>Job Skills/Employment Experience</td>
<td>35% (8)</td>
<td>52% (12)</td>
<td>55% (12)</td>
<td>50% (11)</td>
</tr>
<tr>
<td>Substance Abuse Treatment</td>
<td>26% (6)</td>
<td>17% (4)</td>
<td>36% (8)</td>
<td>32% (7)</td>
</tr>
<tr>
<td>Healthcare Services</td>
<td>17% (4)</td>
<td>17% (4)</td>
<td>27% (6)</td>
<td>36% (8)</td>
</tr>
<tr>
<td>Mental Health Services</td>
<td>13% (3)</td>
<td>17% (4)</td>
<td>18% (4)</td>
<td>14% (3)</td>
</tr>
<tr>
<td>A Birth Certificate (that I paid for)</td>
<td>22% (5)</td>
<td>9% (2)</td>
<td>9% (2)</td>
<td>0</td>
</tr>
<tr>
<td>A Birth Certificate (for free)</td>
<td>4% (1)</td>
<td>0</td>
<td>23% (5)</td>
<td>0</td>
</tr>
<tr>
<td>A Social Security Card</td>
<td>39% (9)</td>
<td>22% (5)</td>
<td>32% (7)</td>
<td>36% (8)</td>
</tr>
<tr>
<td>A Verification Form to get a State ID</td>
<td>4% (1)</td>
<td>13% (3)</td>
<td>14% (3)</td>
<td>9% (2)</td>
</tr>
<tr>
<td>A Temporary State ID</td>
<td>17% (4)</td>
<td>NA</td>
<td>14% (3)</td>
<td>NA</td>
</tr>
<tr>
<td>A State ID</td>
<td>NA</td>
<td>74% (17)</td>
<td>NA</td>
<td>55% (12)</td>
</tr>
<tr>
<td>A Child Support Modification</td>
<td>4% (1)</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Veteran’s Benefits Information</td>
<td>0</td>
<td>0</td>
<td>9% (2)</td>
<td>5% (1)</td>
</tr>
<tr>
<td>Disability Benefits Information</td>
<td>0</td>
<td>0</td>
<td>5% (1)</td>
<td>5% (1)</td>
</tr>
<tr>
<td>Medicaid Information</td>
<td>0</td>
<td>4% (1)</td>
<td>41% (9)</td>
<td>41% (9)</td>
</tr>
<tr>
<td>Medicaid Enrollment</td>
<td>NA</td>
<td>4% (1)</td>
<td>NA</td>
<td>41% (9)</td>
</tr>
<tr>
<td>Other Government Support Information</td>
<td>0</td>
<td>0</td>
<td>41% (9)</td>
<td>14% (3)</td>
</tr>
<tr>
<td>Voter Registration Information/Application</td>
<td>9% (2)</td>
<td>9% (2)</td>
<td>18% (4)</td>
<td>9% (2)</td>
</tr>
<tr>
<td>Help finding a job I will keep post release</td>
<td>NA</td>
<td>9% (2)</td>
<td>NA</td>
<td>32% (7)</td>
</tr>
<tr>
<td>Help finding housing post release</td>
<td>NA</td>
<td>0</td>
<td>NA</td>
<td>5% (1)</td>
</tr>
</tbody>
</table>
### Chart III: Quality of Life Questions

<table>
<thead>
<tr>
<th>JHA Survey Quality of Life Questions</th>
<th>♂ in ATC Agreed</th>
<th>♂ in ATC Disagreed</th>
<th>♂ in Prison Agreed</th>
<th>♂ in Prison Disagreed</th>
</tr>
</thead>
<tbody>
<tr>
<td>I felt safe while incarcerated.</td>
<td>57% (13)</td>
<td>9% (2)</td>
<td>18% (4)</td>
<td>41% (9)</td>
</tr>
<tr>
<td>I was treated with respect by staff while incarcerated.</td>
<td>35% (8)</td>
<td>35% (8)</td>
<td>14% (3)</td>
<td>50% (11)</td>
</tr>
<tr>
<td>There was at least one staff member I could ask for help.</td>
<td>74% (17)</td>
<td>17% (4)</td>
<td>55% (12)</td>
<td>9% (2)</td>
</tr>
<tr>
<td>I had adequate access to law library.</td>
<td>52% (12)</td>
<td>22% (5)</td>
<td>14% (3)</td>
<td>45% (10)</td>
</tr>
<tr>
<td>I had enough access to phones.</td>
<td>52% (12)</td>
<td>30% (7)</td>
<td>36% (8)</td>
<td>27% (6)</td>
</tr>
<tr>
<td>Helpful reentry info was provided by staff in prison.</td>
<td>17% (4)</td>
<td>61% (14)</td>
<td>9% (2)</td>
<td>68% (15)</td>
</tr>
<tr>
<td>Rehabilitative programming was adequate.</td>
<td>22% (5)</td>
<td>61% (14)</td>
<td>14% (3)</td>
<td>45% (10)</td>
</tr>
<tr>
<td>Educational programming was adequate.</td>
<td>9% (2)</td>
<td>57% (13)</td>
<td>36% (8)</td>
<td>36% (8)</td>
</tr>
<tr>
<td>I have received individualized reentry planning.</td>
<td>9% (2)</td>
<td>74% (17)</td>
<td>18% (4)</td>
<td>41% (9)</td>
</tr>
<tr>
<td>I feel prepared for reentry.</td>
<td>52% (12)</td>
<td>35% (8)</td>
<td>59% (13)</td>
<td>18% (4)</td>
</tr>
<tr>
<td>My family/friends are emotionally supportive.</td>
<td>91% (21)</td>
<td>9% (2)</td>
<td>68% (15)</td>
<td>9% (2)</td>
</tr>
<tr>
<td>My family/friends are financially supportive.</td>
<td>61% (14)</td>
<td>13% (3)</td>
<td>64% (14)</td>
<td>14% (3)</td>
</tr>
<tr>
<td>My time incarcerated gave me skills to prevent me from returning to jail.</td>
<td>35% (8)</td>
<td>39% (9)</td>
<td>41% (9)</td>
<td>27% (6)</td>
</tr>
<tr>
<td>I understand the requirements of my MSR (parole) conditions.</td>
<td>52% (12)</td>
<td>35% (8)</td>
<td>55% (12)</td>
<td>5% (1)</td>
</tr>
<tr>
<td>I am satisfied with the reentry assistance I received.</td>
<td>26% (6)</td>
<td>39% (9)</td>
<td>27% (6)</td>
<td>36% (8)</td>
</tr>
</tbody>
</table>

---

4 Tallies combine JHA survey responses from JHA’s November 2017 Decatur and March 2018 Logan Correctional Center surveys of the facilities’ populations. See [http://thejha.org/prisonsurveys](http://thejha.org/prisonsurveys), some questions’ wording varied slightly.
Chart IV: Plans for Release

<table>
<thead>
<tr>
<th>JHA ATC Reentry Survey Plans for Release</th>
<th>♀</th>
<th>♂</th>
</tr>
</thead>
<tbody>
<tr>
<td>I have a plan upon release for the following:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Stable housing</td>
<td>87% (20)</td>
<td>64% (14)</td>
</tr>
<tr>
<td>Reliable transportation</td>
<td>78% (18)</td>
<td>59% (13)</td>
</tr>
<tr>
<td>Healthcare</td>
<td>65% (15)</td>
<td>68% (15)</td>
</tr>
<tr>
<td>Mental health treatment</td>
<td>17% (4)</td>
<td>36% (8)</td>
</tr>
<tr>
<td>Education</td>
<td>43% (10)</td>
<td>64% (14)</td>
</tr>
<tr>
<td>Substance abuse treatment</td>
<td>29% (7)</td>
<td>41% (9)</td>
</tr>
<tr>
<td>Employment</td>
<td>74% (17)</td>
<td>73% (16)</td>
</tr>
<tr>
<td>Job skill training</td>
<td>39% (9)</td>
<td>50% (11)</td>
</tr>
<tr>
<td>Family reunification</td>
<td>70% (16)</td>
<td>64% (14)</td>
</tr>
<tr>
<td>Government assistance</td>
<td>35% (8)</td>
<td>36% (8)</td>
</tr>
<tr>
<td>Child support payments</td>
<td>0</td>
<td>5% (1)</td>
</tr>
<tr>
<td>Veteran’s support</td>
<td>0</td>
<td>5% (1)</td>
</tr>
<tr>
<td>Disability benefits</td>
<td>13% (3)</td>
<td>9% (2)</td>
</tr>
<tr>
<td>Registering to vote</td>
<td>48% (11)</td>
<td>45% (10)</td>
</tr>
</tbody>
</table>

Additional Survey Comments

Fox Valley

“This place is really great for people who want to change their life.”

In response to the survey prompt, “What is something that was positive, helpful, or better than expected during your incarceration?” Several women commented that there was “nothing.” Although one woman cast idleness in a more positive light, as “A lot of time to reflect on my actions.” Another woman elaborated, “There has been nothing for women prisoners for many many years. Now for the men they still offer them everything – shame.”

However, most of the women who responded to the prompt specifically commented that the opportunity for work release was a positive; as one wrote, the positive aspect was, “The privilege to work and save some money while incarcerated;” while another stated, “Being able to go home on passes and be a part of my children’s lives;” such opportunities are coveted aspects of work release centers. Several mentioned that other incarcerated people and positive staff were a plus.

A few women also commented that a positive during their incarceration was the ability while incarcerated to work for Illinois Correctional Industries, which are typically the highest paying jobs available within IDOC prisons. A few others mentioned the substance abuse treatment programs they participated in while at prisons was helpful. Women also noted creative writing and school opportunities as positives. The importance of programming was also emphasized in a
comment that a positive was “being able to get days,” or good time sentencing credits to be able to get closer to being home.

The women offered varied responses to the question, “What is the most important thing you think you need to succeed upon release?” However, most noted need for ongoing external supports, including e.g., “employment,” “housing,” “education,” “staying sober/drug treatment,” “supportive people,” “family support,” “religion,” “moral support” and “Support all the way around the board.”

Others emphasized or encouraged their own fortitude, such as the most important thing being continuing with “the same positive attitude I have now,” “A different mindset,” or to “Stay focused and make good choices.” One woman wrote she was “Prepared for reentry – due to self-structure. I took the incentive to indulge in self skills and find superior outside support from Christian mentor.”

JHA believes that mentorship is an underutilized tool within IDOC, often due to prohibitions on staff and volunteers having any contact with formerly incarcerated people. We have been told such policies, which inhibit program evaluation and continuity of services that would be helpful, are under review.

Another woman soon leaving prison most valued for her success, simply “Independence.”

Several women expressed that family reunification was the most important thing to them; “Getting my kids back.”

When asked, “What is something that would have made your reentry planning better?,” the women commonly requested more help, e.g. “Someone to explain programs that are helpful,” consistency, and information from staff. Specifically, one woman mentioned need for information that is “current, correct, usable,” or as one woman stated, “Being given literally any resources – there NONE at Decatur.”

Women expressed frustration with lack of school, training, and treatment or the quality of what limited resources were available, e.g. “Education and more vocational trades that are actually needed in life [would have made reentry planning better], not sewing skills.”

Other woman noted need for “housing assistance,” which is a common issue for people who have been incarcerated.

Some recommendations for the work release center from the women included “More time at home,” and for “Fox Valley to have its own reentry summit and representatives to come out.” The reentry summit idea was also mentioned by staff, but it seemed at that time that they thought it was beyond their capacity. Administrators noted that residents were able to attend a community reentry summit in Aurora in April and one in Chicago in August. In the past, Fox Valley had job fairs at the facility; however, now such hiring is mostly word of mouth or informal promotion. For example, reportedly someone from the facility went to the area movie theater Hollywood Palms and this resulted in three women from Fox Valley working there.
Some women spoke about difficulties with other residents. One woman recounted that the first words she heard from a Fox Valley resident were “welcome to Hell.” Another woman commented that she would like to see “Less drama with women who don’t take Fox Valley seriously.” Another stated, “At Fox Valley ATC, individual responsibility is not promoted. Inmates are expected to get in others’ business and situations. When one messes up, all are punished.”

Another woman simply opined, “Nothing better than this.”

**North Lawndale**

“You need your family and a good job.”

Men similarly responded that positives of their incarceration had been “nothing,” “commissary,” or particular work or educational opportunities, such as welding, an opportunity unavailable at female facilities. Other states, such as Colorado, have welding programs for incarcerated women, recognizing the workplace demand. Some men acknowledged particular prisons and staff that had helped them, e.g. “Taylorville CC was the best prison – programs and people actually would help you.”

Men also felt positives were getting to come to the ATC, family support, and other positive incarcerated people and staff.

Some men noted that an aspect of their incarceration that was helpful was recognizing the need “to get my life in order” and “showing me not to come back and it’s not for me.”

Male respondents to the reentry survey wrote that some things that would have made their incarceration better were e.g.: “People who cared how we were,” “A better preparation at the beginning stage,” “Real help. Counselors that care. Realistic help that actually translates to an individuals’ needs,” “Better staffing,” “Better classes and info,” “Help from family,” “A reentry or prestart plan,” “Resources for veterans,” “Rehabilitation and education,” and “Better communication.”

Others also mentioned the need for more use of appropriate Departmental discretion, as for “Early release,” or “good time,” particularly discretionary good time for things other than school, which many people cannot get into, such as for work and good behavior. As one man wrote, “IDOC needs to figure out it’s good time situation so inmates who are eligible can actually get it!!”

Men also expressed concern about housing for release. Men repeatedly stressed the importance of this and getting a job. Many men noted things important for their success were e.g.: “Getting a good paying job and a place to live,” “A good family life,” “My own home, car, and job,” “Employment opportunities,” “Keeping a job,” “Stay drug free, crime free, and get a job,” “A good paying job and a place to live – that’s all I need to not come back,” “Not breaking the law,” and “I need a job, ASAP!” Others mentioned hopes for education or job training.
Residents responding to our surveys at North Lawndale recognized some of the challenges facing Illinois, e.g. “The jails are too crowded and the state is broke and under-resourced.”

However, as with the women, respondents observed there was room to improve respectful treatment and other basic quality of life issues within IDOC. Similar to what JHA hears throughout the system, men offered comments e.g. “Prison is horrible,” “The prison system is not fair, they treat you like an animal,” and “Staff is racist. Food is very bad. No AC.” Some noted that “Stateville needs to be shut down,” as men will transition through the Stateville minimum-security unit to work release, and many come into IDOC through the Stateville Northern Reception and Classification Center.5

Some other quality of life issues at North Lawndale ATC raised at the time of the visit were issues with staff shortages and movement, and physical plant concerns relating to air conditioning not working and windows not opening, quality of food, and broken vending and laundry machines.

As noted in this report, lack of access to technology access at ATCs made day to day life more difficult for these returning citizens. The men reported the payphones at the North Lawndale facility often were shut off or broken. One man shared that. “Being that this is an ATC Center I wish we had more access to our phones and computers (we have very very very little now!) and were treated with respect. I hope this survey impacts the decisions of those in position to make a change.” However, another man expressed skepticism and wrote, “I wonder if anyone genuinely cares about our world or is everything about the almighty dollar.”

5 See prior JHA reports at http://www.thejha.org/NRC.