

CHAPTER THREE

MODELS AND CRITICAL MANAGEMENT ASPECTS OF COMMUNITY CORRECTIONS RESIDENTIAL CENTRES

3.1 INTRODUCTION

To contextualise the relevance of models for community corrections residential centres (CCRCs), it is important to understand who qualifies for such alternative forms of sentencing. The following scenario may happen to anyone:

Experimentation with drugs caught me up into a web of lies, theft and fraud. I am a clever young male, intelligent with a bright future ahead of me. I do not have a criminal record and I am not a violent type of person. Unfortunately, I have a drug problem. I have tried to come free of this habit but could not escape. I needed money, and a lot of it, to pay the Nigerians who sold the drugs to me. I was caught up in this web



of deception. This is where I started to make a plan. I worked out a whole system to defraud my employer to embezzle his money to pay for my drug habits. Nobody knew about this until one day, all of a sudden, my lies, theft and fraud caught up with me. People started talking and in the end my employer found out about everything. I wondered whether I will go to prison and how I am going to cope in prison? I am afraid of the gangs in prison. Will they rape me or take me further down into the downward spiral of drugs? If I go to prison, I would have a record with no hope for job satisfaction in future. That is if I will find a job with my kind of record. I think that I deserve a second chance in life. On the other hand, the victim, my employer also needs to get his money back. How am I going to pay him back if I am in prison? Would it not be better if I receive an alternative sentencing option in the community? I am prepared to undergo specialised programmes to set me free of my drug habit. If I was sentenced under community corrections I would be able to work and pay back my employer. Is this a reasonable request given my problem?

In chapter three the discussion on community corrections, that was initiated in chapter two, is pursued further. The focus of this chapter is on the three models of community corrections, namely diversion, advocacy and reintegration (Smykla, 1981:14). The "*rehabilitative component*" of the reintegration model falls within the medical and adjustment models and hence these models will also be briefly discussed.

Within the reintegration model, Latessa and Allen (1982:156) distinguish between three alternative models that are based primarily on referral services, i.e. the standard, pre-release and parole violator models. These three models will be discussed in this chapter.

CCRC and DRC models can only be effective, if they are well managed. The latter part of the chapter will discuss the critical aspects of these models that impact directly on the management of CCRCs, including the following:

- managing agencies
- funding
- selection criteria
- size of CCRCs

- gender of residents
- average length of stay
- problems experienced
- community support and
- explicit identification of CCRCs.

In this chapter's discussion, the findings of the qualitative research of this study, i.e. the visit to CCRCs and DRCs in Denver, Colorado, will be integrated appropriately with the literature review.

3.2 MODELS

Bailey (1987:317) defines a model as *"a representation of a system that specifies not only its parts or components, but also the relationships among the components"*.

Bailey states that a model differs from the genuine object in some way. Latessa and Allen (1997:352) agree with Bailey and define a model as *"A picture or representation showing the parts of a system"*. These authors make it clear that models are ways of explaining the different segments of the criminal justice system, how they fit together and relate to each other.

This implies that when change takes place in one segment, it affects the rest of the system.

According to Smykla (1981:14) community corrections is based on three models, namely diversion, advocacy and reintegration. The models of diversion and reintegration will be discussed in more depth because of their relevance to the development of CCRCs, whilst the model of advocacy will be discussed more briefly.

3.2.1 Model of diversion

Latessa and Allen (1997:436) define diversion as follows: *"The official halting or suspension, at any legally prescribed processing point after a recorded justice system entry, of formal criminal or juvenile justice proceedings against an alleged offender, and referral of that person to a treatment or care programme administered by a non-justice agency or a private agency, or no referral"*.

In support of this view, Clear and Dammer (2000:414) define diversion as *"a strategy that seeks to avoid formal processing of the offender by the criminal justice system"*.

Diversion is thus a way of bypassing the criminal justice system at any time before an offender is sentenced, and is

accompanied by certain conditions, or no conditions. For the researcher, it is within this context that community development provides the theoretical framework for community corrections as a sentence where programme design should be holistic and comprehensive in order to ensure complete reintegration into society.

The diversion model's premise is that prison should only be for serious criminals. Diversion is a way to keep petty crime offenders out of prison and treat them in the community. This treatment which then takes place in the community should be without the threat of imprisonment. However, this is not always the case according to Smykla (1981:15), as accused persons are often coerced into participation in corrections programmes.

McShane and Krause (1993:17) mention that a person could be diverted at various points before charges are brought against him/her, namely before arrest, before charges are laid, or before trial. What is important, according to these authors, is that neither the adult, nor the juvenile is convicted or judged. Offenders, who are diverted, bypass the criminal justice system and do not have criminal records, provided they comply with the stipulated conditions.

Allen and Simonsen (1995:658) discuss three basic models emerging from the model of diversion categorised according to the agencies initiating the action for diversion, namely community-based, police-based and court-based diversion programmes. These are now explained.

3.2.1.1 Community-based diversion programmes

Allen and Simonsen (1995:658) are of the opinion that programmes linked with intervention and services in the community not only avoid incarceration, but also eliminate the criminal label. This diversion process does not replace probation services, but serves those offenders against whom charges can be dropped and who are not eligible for probation. Nevertheless, these authors are convinced that diversion should be accompanied by formal agreements with offenders, in return for the removal of their criminal arrest records. A range of services and residential settings should be made available to these diverted offenders in order to help them to solve their problems.

Clear and Dammer (2000:91) state that formal diversion differs in that the offender has to attend certain programmes as a condition of the diversion. The criminal process is suspended in favour of a non-criminal process. If the offender

completes the programme successfully, the original case is closed. In this way the offender is given a second chance in life.

3.2.1.2 Police-based diversion programmes

The police may intervene in the case of children in conflict with the law by diverting them from the criminal justice process. However, their responsibility does not end with the children. Through an intervention approach, they also need to help the families who are in crisis when family violence occurs. The police should have "*trained family crisis intervention officers*" available, who can respond appropriately to family violence (Allen and Simonsen, 1995:659).

Clear and Dammer (2000:91) refer to "*informal*" as well as "*formal*" diversion strategies. Informal diversion is, for example, where the police decide to warn an offender instead of arresting him/her for some or other minor offence. In the formal diversion process, criminal proceedings are suspended in favour of non-criminal proceedings (Clear and Dammer, 2000:92).

3.2.1.3 Court-based diversion programmes

According to Allen and Simonsen (1995:659), "*pre-trial intervention programmes*" are aimed at dropping charges against the offender, based on the outcome of participation in the intervention programme. If performance was not according to expectations, a further extension of programme time may be given. The offender may also be returned to court, "*without prejudice, because of unsatisfactory performance in the programme*".

Austin, Bloom and Donahue (1992:16-19) mention that one hundred existing community programmes were evaluated in the U.S.A. of which 83 percent were managed by non-profit organisations. Sixty-two of these programmes offered residential care to females. The authors refer to pre-trial diversion programmes and court sentenced programmes. In the pre-trial diversion programmes, female offenders are diverted from the criminal justice system and prosecution is halted if they complete programmes successfully.

In the case of court-sentenced programmes, the courts order and sentence offenders to take part in these programmes as a condition of their diversion from prison or jail (Austin *et al.* 1992:16-19). In the U.S.A. prisons refer to "*facilities reserved*

for the confinement of persons convicted of serious crimes" (Clear and Dammer, 2000:416), whilst jails are "*facilities authorised to hold pre-trial detainees and sentenced misdemeanants for periods longer than forty-eight hours"* (Clear and Dammer, 2000:415).

Allen and Simonsen (1995:26) are convinced that diversion should be utilised for those who are arrested for being drunk in public and those who use drugs for the first time. However, it may then be necessary to send them to detoxification centres, depending on their condition.

Clear and Dammer (2000:93) mention that the main goal of diversion is to make services available to offenders, with the specific intention of rehabilitating them, instead of sending them to prison.

A second goal of diversion, according to Clear and Dammer (2000:93), is that rehabilitation is promoted by taking away the stigmatisation consequences of the criminal process. An offender, passing through the criminal justice process, is left with a great deal of damage. The offender is "*labelled*" as a criminal and this, in turn, may lead to further criminal behaviour, whereby the offender acts out the role that is expected from her/him.

Clear and Dammer (2000:93) assert that a third goal is possible in diversion programmes. The offender can rehabilitate because of the fact that specific services that are needed may be provided in order to address the offender's problems, i.e. alcohol, drug or family counselling.

Further benefits mentioned by Clear and Dammer (2000:93) that may be reaped through the diversion process are as follows:

- The financial aspect. It is cost effective. The offender does not need to be represented by lawyers in court.
- The offender can keep his/her job in the community.

Bartollas (1985:89) states that the main characteristic of diversion is that sub-divisions of the Department of Justice maintain power over the offender. Diversions are frequently utilised with youth offenders. This author evaluates the use of diversion programmes and comes to the conclusion that the value of diversion programmes is that they keep youthful offenders out of the juvenile justice systems. He adds, however, that in recent years, diversion is not so readily accepted because of a number of reasons, such as:

- The widening of the web of the juvenile justice system;

- not taking into consideration the "*due process rights of juveniles*"; and
- the stigmatisation of those who take part in these programmes.

In South Africa, diversion is the responsibility of the Department of Social Services according to Brown (2002), the provincial probation co-ordinator of Gauteng Social Services. However, she stated that this Department does not have the capacity for the diversion of adults although this is included in their future planning. The current focus is more on the child under eighteen years of age in conflict with the law. Coetzee (2002), Assistant Head of Community Corrections, Department of Correctional Services, Pretoria, informed the researcher telephonically that adults who qualify for diversion are referred, at this stage, to social workers at the Department of Correctional Services (Community Corrections in Pretoria), for participation in diversion programmes. If they complete the diversion programmes successfully, the charges are dropped against them, leaving them with clean records. Important to note, however, is that there should be an agency that is responsible for co-ordinating the diversion of adults if the Department of Social Services does not have the capacity to

do so. Coetzee (2002) is of the opinion that adult diversion services could be outsourced to the private sector.

Diversion offenders normally remain at home whilst attending specified programmes as part of the stipulated conditions. However, it may well be that a sufficient support system does not exist at the home of the offender, and it is then advisable to refer such an offender to a residential facility specialising in the needs of the diverted offender.

During the researcher's visit to Denver in Colorado, it was observed that many diversion clients are served not only in CCRCs, but also at Day Reporting Centres (DRCs). According to the programme directors of CCRCs, those on diversion are difficult to work with, compared to pre-release or transitional residents. The transitional offender comes directly out of prison and is pre-released before the due parole date to the CCRC. This type of offender accepts the CCRC more readily because of its informal nature, compared to prison. On the contrary, diversion clients have never experienced prison due to having been diverted from the criminal justice system right from the start and therefore perceive CCRCs as more problematic. It is thus clear that the model of diversion has its own specific challenges that must be met.

Clear and Dammer (2000:94) assert that although diversion may appear to be a wise option, there are often disagreements with regard to this option. These programmes are sometimes seen as too lenient, whilst neglecting the needs of the victim. They may also encourage "*net widening*", which in essence means "*when some programme or form of social control is given to an individual who otherwise would not be part of the system*" (Clear and Dammer, 2000:415). These authors explain that successful diversion programmes are cost-effective, improve the lives of offenders, suit victims and also provide services to the community. However, Clear and Dammer (2000:94) admit that it may be true that the criminal justice system neglects the feelings and needs of the victim whilst focussing on the offender's needs and cost saving. They propose, though, that the baby should not be thrown out with the bath water, but rather that the victim should be involved in the diversion process, without the necessity of closing the diversion programme. Victims of offences should, according to them, be present at court hearings to make an input on the decision whether the offender should receive a diversionary sanction.

The researcher realises that the ordinary South African citizen may feel that the law should take a harsher stand against criminals because of the fact that they unfamiliar with

the benefits of these programmes and hence would not support them. It is therefore important that the design, development and implementation of the diversion model incorporate a focus on community involvement and education.

In summary, the diversion model's value lies in the fact that the offender is diverted from prison and, in this way, receives a second chance in life by escaping from a criminal record.

3.2.2 Model of advocacy

This model claims that it is the community that should be changed, as opposed to the client. Resources should be improved or developed by the responsible agencies for utilisation by the client (Smykla, 1981:16).

The National Advisory Commission on Criminal Justice Standards and Goals (1976:494) explains how the causation theory of crime developed in the 1960s with a social as opposed to an individual causation. The focus is thus on the social milieu and not on the individual offender. Although structural changes to the social milieu are important, they can only have meaning and relevance if undertaken in interaction with offenders. The reintegration model provides this link.

3.2.3 Model of reintegration

In order to reduce crime, Smykla (1981:16) indicates that reintegration focuses both on the individual offender as well as the community. This model's premise is that individuals do crime because of undesirable conditions at home and in the community. Resources should thus be found in the community to help the offender to take on new and desirable roles in the community. CCRCs, work-release programmes, study-release programmes, group homes, and pre-release centres are programmes that are included under this model (Smykla, 1981:16).

During 1968 the researcher listened to a programme that was broadcast on Springbok Radio with the title "*The Broken Link*". This programme reported about the "*youth revolt against the Establishment*". Rose and Chilvers captured this broadcast programme in a book in 1969. The broadcast was about the strong generational gap between parents and children, especially teenagers and young adults, the abuse of drugs and alcohol and sexual deviancy. At the end of the programme it was concluded that South Africa had no facilities for the treatment and aftercare of drug users. Thirty four years ago, that programme suggested CCRCs should be established and

managed on the same basis as the international models which the researcher refers to in this study.

It was further suggested in the broadcast that a person should stay in a CCRC for no longer than six months before being further reintegrated into society. This, however, did not imply an end to such a person's association with the CCRC, but attendance of aftercare and follow-up programmes. It was already proposed at that time that a CCRC should be a community project, and that everyone in close association with the delinquent person should have access to the head of the CCRC (Rose and Chilvers, 1969:173-4).

According to the Annual Report of the Department of Correctional Services (2000/01:112), an amount of R51, 4 million was allocated in the 2000/01 budget for the reintegration of offenders. This report discusses the fact that reintegration is an ongoing process that begins after admission to prison. In essence, reintegration prepares the offender for his/her role as a law-abiding citizen in the community after being released from prison. Involvement of the community in this regard is of paramount importance.

Bartollas (1985:25) links the rehabilitative component of the reintegration model with that of the medical and adjustment models which will be briefly discussed next.

- **The medical model**

The main premise of the medical model is that the causes of crime can be identified and treated successfully. Offenders should not be punished, as it will not help to resolve their already negative self-image but will rather reinforce it. This model defines that the offender is unable to use freedom of choice and advocates that more use should be made of mental health facilities. Therefore, persons trained as experts in counselling techniques should preferably be in charge of decision-making in both the juvenile and adult justice systems (Bartollas, 1985:26).

- **The adjustment model**

Supporters of the adjustment model, in the same way as the medical model, believe that offenders differ from non-offenders and that they are in need of treatment and can be cured. However, they also believe that these offenders still have freedom of choice. According to this model, offenders should not be punished, as this tends to reinforce negative

behaviour. According to Bartollas (1985:27), four assumptions underpin the adjustment model:

- Offenders are in need of treatment in order to conform to the expectations of society.
- Offenders are able to live a crime-free life. The emphasis of intervention should be that offenders are accountable for their present actions, despite a possible history of emotional and social deprivation.
- Interaction between the larger society and the offender is important in the understanding of antisocial behaviour.
- Offenders can be trained in new alternatives enabling them to live crime-free lives. Various therapies are available such as *"reality therapy, transactional analysis (TA), guided group interaction (GGI), positive peer culture (PPC), milieu therapy, [and] the therapeutic community and behaviour modification"* to help offenders cope with various aspects of their lives (Bartollas, 1985:27). The proponents of this model do not emphasise individual pathology, as in the case of the medical model. Instead, they help offenders to make a better adjustment to society. They also do not advocate the primary use of imprisonment for offenders (Bartollas, 1985:27).

From the above discussion it can be concluded that the medical and adjustment models, situated within the reintegration model, reflect the view of affecting change within the offender and society.

The researcher is of the opinion that South Africa will be able to identify closely with the model of reintegration because of the vast numbers of families living in undesirable conditions in the community, which could well be regarded as a strong breeding ground for crime. Many long-term offenders are without support in the community and are therefore in need of CCRC facilities when pre-released from prison.

Smykla (1981:16) discusses three rationales in support of the reintegration model that the researcher will mention briefly:

- The detrimental effect of life inside prison as well as the status of sentenced offenders.
- Modern life with its diversity, which gets proportionally more difficult each day.
- The disapproving attitude of the community.

Smykla (1981:16) concludes that the goal of reintegration is *"to provide equal access to opportunities and to reduce class, sexual, and racial biases toward offenders"*.

The researcher agrees that it would be very difficult to change the negative attitude of the community towards criminals in South Africa. Crime has reached crisis proportions and citizens are no longer safe in their own homes, vehicles, and communities. One can rather expect on the one hand, the community to take a "*get tough*" attitude and the state, on the other hand, to take the so-called "*soft options*" with criminals by placing them in the community either as diversionary measures or under correctional supervision as probationers. Matthews and Francis (1996:1) report that countries, such as America and Britain as well as a number of other countries, take a harsh stand towards crime and criminals. These authors also comment on the high costs of incarceration as well as the effect which isolation has on both offenders and their families. For this reason, they state that policymakers have been forced to search for new alternatives other than incarceration (Matthews and Francis, 1996:2).

The education of communities regarding the establishment of CCRCs is therefore of utmost importance. The advocacy model could be utilised to institute change within the community. For community reintegration programmes to be successful, it is necessary to form a close partnership with the community. Networking should take place and services should be delivered

that benefit the offender as well as the community. Smykla (1981:16) warns that CCRCs, group homes, as well as work-release centres can easily be utilised only as a replacement of one institution (i.e. prison) for another in the community. In this regard, the same author states that reintegration, with its classification of CCRCs, group homes, as well as work-release centres should, however, not be accepted per se as community corrections. In this context, CCRCs is a replacement of one institution by another. Smykla (1981:17) argues that if a person cannot leave a CCRC freely as s/he wishes without threat, the concept of custodial coercion still applies.

Lewis and Darling (1990:100) point out that community corrections is not really an alternative to traditional methods, but rather an extension. They state that although a new relationship has developed between the state and the private sector, this relationship is not easily distinguishable and an extended system has developed with the result that the boundaries have become undetectable. In turn, it has become complicated to know who is in charge at any time as well as to discern the experiences of the clients who are treated (Lewis and Darling 1990:103).

Smykla (1981:9) alludes to three common errors with regard to community corrections:

- The location of the programme. A programme is not community-based simply because it is located in the community.
- The perception that less control makes it community-based.
- That the operation of programmes by private agencies is community-based. Smykla (1981:10) concludes that these three errors commonly fail to see how important meaningful ties are with the community.

In summary, the basic philosophy of the reintegration model is that the criminal behaviour of the offender should be resolved in the community where it started and that the community should solve its own problems (Bartollas (1985:27). Meaningful ties with the community are also advocated in order to achieve the objectives of the reintegration model. The proponents of this model argue that change is most likely to take place in community-based programmes than in institutions such as prisons.

According to Bartollas (1985:28), the reintegration model utilises internalisation as a means through which change takes place in the individual. In order to reach this ideal, it is necessary to provide the offender with various options such as education, employment, recreation and whatever else is

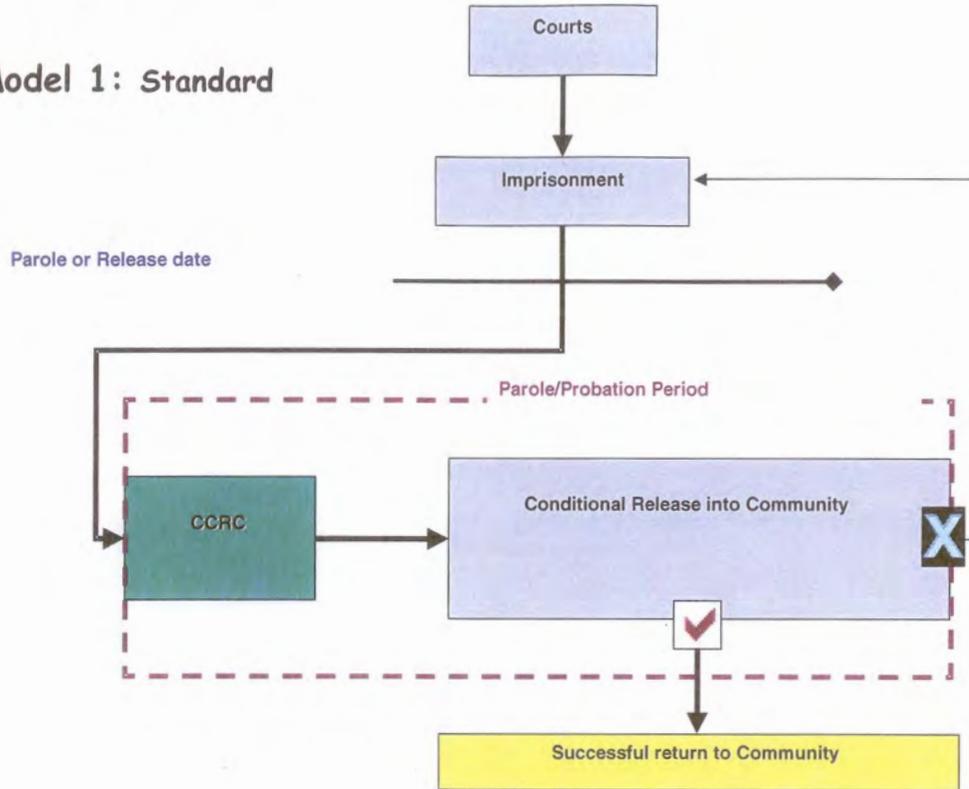
necessary to help him/her to reintegrate successfully into the community. These provisions link with the goal of reintegration "*to provide equal access to opportunities and to reduce class, sexual and racial biases toward offenders*" (Smykla, 1981:16). This ideal will, according to the philosophy of reintegration, only be reached through community-based corrections (Bartollas, 1985:28). The researcher supports the view of the reintegration model because the offender has the opportunity to be accountable for his/her behaviour in the community while rehabilitation and upliftment takes place. This is not always the case when offenders are incarcerated.

The reintegration model provides a more balanced approach to community corrections since it takes both the offender and the community into account. Three alternative models, according to referral services, fall under the reintegration model and will subsequently be discussed.

3.2.3.1 Alternative models to the reintegration model

The three alternative models grouped under the reintegration model of corrections, are outlined in Figure 3, according to Latessa and Allen (1982:156) on the following three pages:

Model 1: Standard



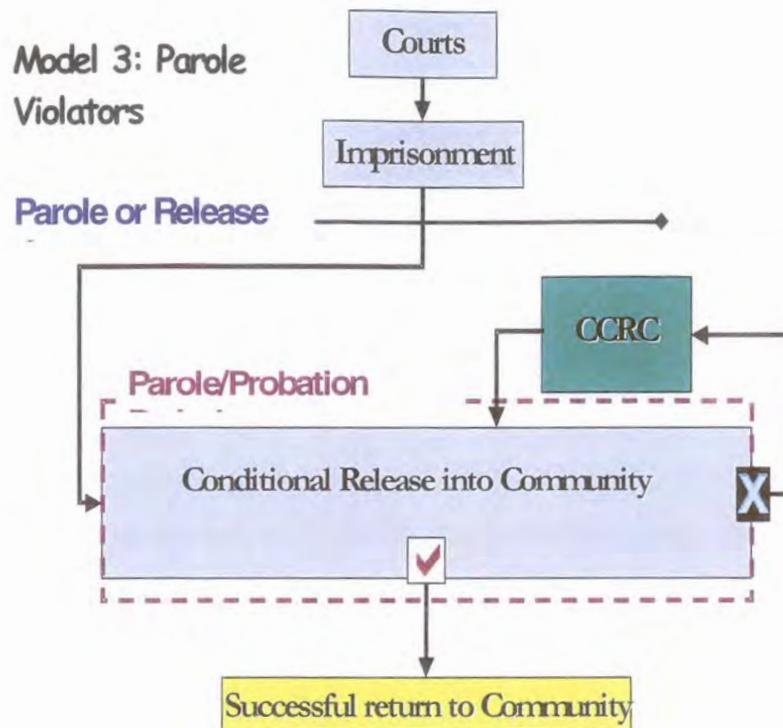


FIGURE 3: ALTERNATIVE MODELS TO THE REINTEGRATION MODEL, BASED ON REFERRAL SERVICES. Source: Latessa and Allen (1982:156)

Model One: Standard

According to Latessa and Allen (1997:353) the standard model has the following focus:

- The sentenced offender receives a conditional release.
- S/he enters the CCRC in the "initial stage of parole".
- The CCRC provides services to support "parolees" in need.

The parolee will still be on parole supervision after completion of the CCRC period.

Knapp, Burke and Carter (1992:1-25) re-analysed 647 CCRCs in the U.S.A. which were surveyed in 1989, followed-up by eight case studies of such facilities in 1991. For the purposes of their study they defined a CCRC as a facility where -

- Residence is provided for adult offenders.
- Federal, State or local criminal justice authorities refer at least 70% of the residents to a CCRC.
- It operates independently from a jail, prison or other corrections institution.
- Residents normally leave the CCRC during the day for work, education or community programmes.

With reference to model one, Knapp *et al.* (1992:6) also describe '*backdoor referrals*'. These are offenders referred to a CCRC from a state prison by a parole board, with the classification of parolees.

Model Two: Pre-release

Latessa and Allen (1997: 353) discuss how model two functions:

- The prisoner is also in the CCRC in the "*initial phase*". However, CCRC placement occurs "*before the granting of parole*".

- These residents receive a definite parole release date before their placement in a CCRC.
- They retain the status of sentenced offenders while residing in the CCRC, where they serve the balance of their sentence.
- The CCRC provides a transitional service to these clients.
- These pre-release clients return to prison if problems arise.

Latessa and Travis III (1992:170) describe transitional clients under the term "*pre-release*." These "*pre-release*" sentenced offenders usually reside in large CCRC facilities in the months before their release on parole or before they are eligible for release on parole.

According to the draft policy document of the Department of Correctional Services in South Africa (undated: 2), a pre-release centre is defined as follows:

"A Pre-release Centre is a correctional institution, which accommodates selected offenders for skills training and exposure to development programmes with the aim to ensure the successful re-integration of the offender into the community".

Pre-released offenders at CCRCs are known as Department of Corrections (DOC) clients in the U.S.A. They are under the supervision of the Colorado Department of Corrections, and have the status of sentenced offenders. At the Tooley Hall CCRC, these sentenced offenders can only leave the CCRC when granted parole, or if they enter the Intensive Supervision Programme (ISP), or when they are discharged by the Department of Corrections (Carst, 2000).

In conclusion, a pre-release, or a transitional facility serves sentenced offenders, a few months before they are due for parole. During this time the offender is prepared by means of pre-release programmes to successfully reintegrate into society.

Knapp *et al.* (1992:6) comment that these "*backdoor referrals*" still have the legal status of a sentenced offender when referred to the CCRC from a state prison. They indicate that this kind of referral focuses on a transitional service with residential placement, as well as employment. Knapp *et al.* (1992:6) also mention that the referral source for almost half of the CCRCs they surveyed, came from "*backdoor referrals*". They refer to Southern Arizona Correctional Centre as an example of a "*back-door*" facility for transitional offenders. This facility houses 144 males, although they also serve a small

proportion of "halfway-back" parolees who lost either their employment or place of residence.

Transitional facilities thus refer to pre-release centres where the resident has the status of a "sentenced offender".

Model Three: Parole violators

Latessa and Allen (1997:353) emphasise the following aspects of model three:

- Allocation of probationers and prisoners granted parole takes place within the community without residing in a CCRC during the initial period.
- When the client experiences problems and needs to participate in certain programmes, the CCRC may be a solution.
- The ideal is that these clients should return to a lower supervision level as soon as they are ready.

Knapp *et al.* (1992:6) refer to this model as a "front-door" referral where post-conviction placement takes place.

McShane and Krause (1993:235) discuss what they call the "halfway in". This type of centre provides services for parole violators. The parole violator is at this point more intensively

monitored. This then serves as an intermediate step with the potential of returning either to lower supervision in the community, or to prison. This type of CCRC serves to monitor violators who cannot succeed in their own home settings.

The problem in South Africa is that if CCRCs are not in place, a parole violator may be sent back to prison, due solely to a technical violation such as losing his/her place of residence, despite the serious overcrowding of South African prisons. This is also not a fair deal for parolees.

Up to now in this chapter, models for CCRCs have been discussed primarily from the literature perspective. The following discussion will focus on how the three CCRC models apply to CCRCs in Denver, Colorado.

3.3 COMMUNITY CORRECTIONS MODELS UTILISED BY CCRCs IN DENVER, COLORADO

To contextualise the discussion in this section the CCRCs and DRCs visited in Denver, Colorado, are again briefly listed:

- Independence House South Federal serving both males and females and combined with a DRC. Programme Director: Ms. L. Sullivan.

- Independence House Fillmore Street serving males and females who are Federal clients. Programme Director: Mr T. Everett.
- Independence House, Pecos Centre, serves males only. Programme Director: Mr D. Carrigan.
- Tooley Hall Incorporated, serving females only. Programme Director: Ms S. Carst.
- Williams Street Centre is a centre for males only and is combined with a DRC. Both centres are incorporated with Tooley Hall CCRC. The Programme Director, Ms Carst of Tooley Hall, took the researcher on a visiting tour of Williams Street CCRC.
- BI Incorporated DRC. Programme Director: Mr A. Maglia.

Whilst the following discussion will focus on CCRC and DRC models, brief reference will be made to the linkages between models and programmes. However, chapter four will focus particularly on the programmes relevant to CCRCs and DRCs.

The CCRCs visited in Denver, Colorado, mostly utilise the pre-release reintegration model of community corrections, namely Model 2, in combination with the diversion model of community corrections in serving their CCRC clients. Those offenders

referred from the "State" are usually referred to as transitional or pre-release offenders, whereas those who are diverted from the criminal justice system are referred to as "city" clients.

As a non-residential facility, BI Incorporated DRC serves those on parole or probation as well as those on pre-trial release. Although these offenders are not served in a CCRC, the same reintegration and diversion models of community corrections are utilised to reach the goals of this DRC.

All the CCRCs visited in Denver, Colorado serve both transitional and diversion clientele simultaneously at the same centre. However, all the directors of the CCRCs, as well as the programme director of BI Incorporated DRC, complained about the difficulties diversion offenders experienced in adjusting to the community corrections programme. Apparently, this is not the case with transitional offenders.

There is a correlation between findings in Denver, Colorado and models utilised in Ohio. According to Handwerk (2001), the Ohio Department of Rehabilitation and Corrections contracts with twenty-three private non-profit agencies. In Ohio, the following models are used in providing services to offenders:

- Diversion (according to the diversion model of community corrections)
- Transitional (model two of the reintegration model, i.e. pre-release)
- Offenders who violate post release supervision requirements (model three of the reintegration model, i.e. parole violators).
- Other offenders stay at CCRCs after a prison or jail sentence, referring to the standard model (model 1) of the reintegration model.

The above-mentioned CCRCs include services for parolees and probationers after their release from prison or jail, and serve women in a pre-release status. This group includes parole violators. Models one, two and three of the reintegration model are applicable in this instance (Austin *et al.*, 1992:16-19).

Although the above-mentioned models refer to either the reintegration or the diversion models of community corrections, specialisation may also take place according to clients or to a treatment modality. Allen and Simonsen (1995:127) comment that if the CCRC for instance, treats females or males only, they specialise according to clients. If

the CCRC, for example, specialises by taking in alcohol or drug abusers only, it is according to the treatment modality.

In summary, the researcher has described the three alternative models of the reintegration model, according to referral services (Latessa and Allen, 1982:156). The models utilised by the CCRCs in Denver, Colorado were mostly linked with the diversion model and the reintegration model of community corrections. BI Incorporated DRC also utilises the same models, namely the reintegration and diversion models of community corrections, but does not supply residential services. The models discussed and utilised internationally, function either according to type of offenders or treatment modality.

CCRC and DRC models can only be implemented successfully if they are well managed. This raises the questions of who should manage (state / private organisations) and what should be managed (critical aspects).

In the discussion that follows, these questions will be answered by means of an integration of literature and the findings of the researcher's visit to Denver, Colorado.

3.4 MANAGEMENT OF CRITICAL ASPECTS OF COMMUNITY CORRECTIONS MODELS

In this section, critical aspects impacting on the management of community corrections models will be discussed, namely agencies, funding, size of centres, gender, length of stay, problems encountered, community support and explicit identification.

3.4.1 Agencies

According to McShane and Krause (1993:232), the following types of agencies usually manage CCRCs:

- Private non-profit agencies
- Private for-profit agencies
- The State or local government

These authors state that if the government runs the CCRC, either the Commissioner of Corrections or the County Department of Human Services will supervise the facility.

Knapp *et al.* (1992:17) indicate the difference in the percentage of operating agencies when they re-analysed the survey data of 647 CCRCs in the U.S.A. and compared it with

data from eight case studies of residential facilities as indicated in Figure 4:

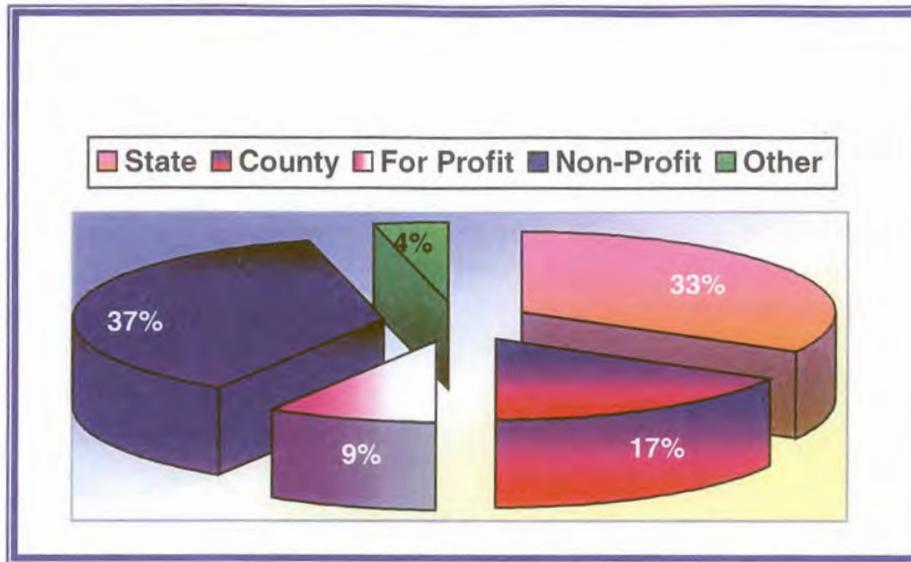


FIGURE 4: OPERATING AGENCIES Source: Knapp *et al.* (1992:17).

The above Figure 4 clearly shows that it is the non-profit agencies in the U.S.A. that operate the largest number of programmes, followed by the State. Latessa and Travis III (1992:170) observe that traditional “*halfway houses*” are still operating with direct services delivered to residents. These authors point out, however, that where more recent programmes are operated by Corrections Departments, the impression is more that of a “*minimum-security prison than a rehabilitative community*”.

When the State therefore, manages CCRCs, it moves away from a rehabilitative community to that of a minimum-security prison. The following example shows how the Department of Correctional Services manages the Atlanta Transitional Centre in Georgia on such a basis, that can be described as military.

The Resident Rules and Regulations Handbook of the Atlanta Transitional Centre in Georgia, (undated: 11) states that a "*military protocol will be observed on a twenty-four hours a day basis*" (undated: 11). The document also states that the "*military protocol will be strictly enforced by all staff*". This includes, although is not confined to, the following:

- Residents must stand to attention when a staff member is present and greet them specifically.
- When there is a group of residents, the first resident should call "*attention on deck*" and then the group should greet the staff member together.
- When a staff member is passed or approached, residents should move away, halt and come to the attention position while a proper greeting is extended.

The above discussion leads to the conclusion that it is not advisable that State departments should manage their own

transitional centres because they do not project a rehabilitative atmosphere and this is to the disadvantage of sentenced offenders utilising the facility. Management should rather be left to non-profit private agencies that manage most of the CCRCs as evident in the two research studies undertaken by Knapp *et al.* (1992).

In South Africa, a new draft policy document exists for pre-release centres. As already mentioned in chapter one, the Department of Correctional Services established such a centre in Devon, Gauteng Province with its official opening that took place on 7 March 2002. The centre only admits sentenced offenders from prisons in South Africa, whereas no intake takes place from the South African Police Services or the courts (undated: 7).

The researcher is of the opinion that this pre-release centre still leaves a gap in terms of the management of other categories of offenders in the community. Marketing of CCRCs should take place at the Department of Justice as alternative forms of sentencing options. More sentencing options should be available to the Department of Justice to sentence non-violent offenders in the community whilst the more violent and dangerous offenders should remain in prison. However, if the necessary funds are not available to support CCRCs in the

community, it will only erode and devastate them. Financial resources must be carefully planned and used. As a result, the funding challenges should be taken into consideration when planning for CCRCs in South Africa.

3.4.2 Funding

According to Allen *et al.* (1978:10), funding is the most critical aspect of CCRCs on an administrative level. Problems include the following:

- Insufficient funds to render services;
- the uncertainty of grants;
- cash flow problems; and
- adjustment of programmes with less money available from grants.

Austin *et al.* (1992:28) regard funding and its stability as a critical aspect in the successful functioning of CCRCs or DRCs. They warn about the fact that when non-profit organisations rely too heavily on a few sources of income this could lead to a crisis in sustaining services. Austin *et al.* (1992:28) suggest that the more projects receive an income from various sources such as public funds, private and corporate grants, and

donations from individuals as well as organisations, the more sustainable they become.

The CCRCs visited in Denver are all for-profit, privately driven and have contracts with the City/State, the Federal Government and the U.S. Department of Justice.

Tooley Hall CCRC makes use of other referral agencies such as the Denver drug court, city and county, respectively. They have no problems with finances due to the funding received from contracts with various referral agencies. The centre operates at full capacity in terms of bed occupancy. Carst (2000) explained that at times offenders had to wait from one to three months in prison before an opening becomes available at the Tooley Hall CCRC.

All the CCRCs visited in Denver, Colorado, only had contracts for a certain number of offenders. Over and above these contracts, residents pay for services received. Federal clients pay 25 percent of their gross income. However, 25 percent from the billing is deducted to the Federal Government. City and State clients pay \$13 per day. This aspect of offenders paying rent to the CCRC might pose a serious problem in South Africa because of the high unemployment rate. Pro-active

thinking and planning on a national and inter-departmental scale, should be a high priority.

For the private for-profit CCRCs in the U.S.A. it is a matter of managing a business and making a profit in the process. However, according to Carrigan (2000) for-profit CCRCs such as the Independence House, Pecos Centre, are not allowed to accept donations from the community because of their for-profit registration.

Nevertheless, the non-profit agencies also make money, according to Handwerk (2001). In her view, the only difference is that disbursement of profits does not fall to stockholders as in the case of for-profit companies, but rests with the non-profit agency that also earns tax breaks. In addition, non-profit agencies may receive donations from the community.

The Report on Consultations (www.sgc.gc.ca) noted that the funding per diem (per day) allocated to the four CCRCs in Ontario who deliver services to women, was so low that needs could not be met. In order to stay open for services, other resources outside corrections have to be utilised. A careful consideration of the allocation of funds is therefore necessary

before embarking on the establishment of CCRCs in South Africa.

Clearly, the employment of offenders in the community affects the funding of CCRCs and DRCs. If offenders are employed in the community, they must be accountable to the CCRC and pay for services which they receive. As already mentioned, a serious problem exists in South Africa because of the high unemployment rate. The demand for jobs is far greater than their availability. The researcher acknowledges that South African economic conditions are not as stable as in Denver, Colorado. According to Everett (2000), programme director of Independence House, Fillmore Street, the unemployment rate in Colorado was below 4 percent in 2000. The directors of the various CCRCs visited in Denver, Colorado all reported that if an offender resident did not have a job within one month, it was because they did not want a job or were retarded. The picture in South Africa is completely different. This specific aspect of employment would be one of South Africa's greatest challenges when embarking on the establishment of CCRCs. The researcher envisages that all CCRCs should have job creation projects on the premises to counteract the problem of unemployment, especially for those offenders who will never qualify for the open labour market.

The funding issue relates directly to the selection criteria for CCRCs and DRCs.

3.4.3 Selection criteria

Donnelly and Forschner (1992:349) note that the CCRC Cope House did not accept certain types of offenders, namely, *“chronic violent offenders, rapists, severe drug and alcohol users, clinically diagnosed arsonists, psychotics or the severely retarded”*.

Austin *et al.* (1992:35-37) discuss thirteen promising CCRCs for females. All of these applied various selection criteria before accepting females at their centres. Offenders with any of the following characteristics or history are not accepted: Mental disabilities, convictions for serious, violent offences, arson, crimes against children, child molestation, violence against the elderly, use of psycho-tropic medications, physical disabilities, women who failed in the programme previously. The offender's criminal history is therefore an important criterion for selection.

All the CCRCs visited in Denver, Colorado utilised selection criteria for the admission of offenders, including the following:

- no violent offenders

- no arsonists
- no sexual offenders
- no persons with histories of escaping
- no persons with mental health problems
- age
- criminal history
- geographic area
- availability of family in the recovery of the offender
- behaviour and attitude
- the ability to manage the offender in the community
- failure of probation
- parole pattern
- criminal activity

Although the above selection criteria state that no persons with mental health problems will be selected at CCRCs, Sullivan (2000) had a small therapeutic community with mentally ill offenders as a pilot project at Independence House, South Federal. According to her, it was doubtful whether the

project was successful with mentally ill offenders who were also abusing substances. She added that they also had very long criminal and violent histories. According to Sullivan, she would not have admitted them were it not for the pilot project. She informed the researcher that State funded psychiatric hospitals did not exist in Denver. However, Denver has a psychiatric prison with only 250 beds. This accounts for the fact that only 15% of those in prison are mentally ill. She stated that there are high numbers of mentally ill offenders being kept at diversion centres in the community. She would rather send a psychiatric offender back to prison where s/he can at least get psychiatric help and medication. If one of these mentally ill patients escapes, the whole centre is in a state of panic because of the risk to the safety of the community.

South Africa differs from Denver, Colorado, as there is a number of State funded psychiatric hospitals available to the mentally ill. However, according to Korkie and du Preez (2002), only Weskoppies and Sterkfontein Psychiatric Hospitals have "*halfway houses*" (CCRCs) available for the mentally ill, which leaves a great gap in primary services available to this group of special needs clients. Again, the demand is greater than the supply of these services.

According to Korkie and du Preez (2002) some of the psychiatric hospitals helping patients are the following:

- Bopolong, North West province
- Weskoppies and Sterkfontein, Gauteng province
- Valkenburg and Lenteguur in the Western Cape province
- Oranje-Hospital, Free State province
- Fort England, Eastern Cape province

The above discussion described selection criteria of CCRCs in Denver, Colorado and the specific problems of the psychiatric offender who is managed in the community. It is obvious that a violent or potential violent offender should not be selected for placement in a CCRC.

Everett (2000), programme director of the Independence House, Fillmore Street, recommended that anyone who is reviewing cases for placement in CCRCs should take a course in the assessment of potential for violence in order to be skilled in determining whether someone will be violent or not.

The Independence House, Pecos Centre limits the intake of violent offenders to the minimum, according to Carrigan (2000). However, Carrigan (2000) was of the opinion that most

people have the potential to be violent. According to him, drug sellers are sometimes more dangerous than murderers. He also stated that through a sifting system certain offenders would never reach the level of CCRCs. Regarding this statement, Sullivan (2000) of the Independence House, South Federal agreed. Carst (2000) of Tooley Hall, reported that their own case managers selected sentenced offenders in prison or jail. After the preliminary selection, offenders go to Denver Community Board where final selection takes place by the Board. However, the CCRC still have the choice to accept the selected offenders or not.

The researcher is of the opinion that in South Africa this is where the Parole Boards could play an important role in deciding which offenders will qualify for community corrections. However, the researcher agrees that the CCRC should have the final decision on whether an offender qualifies for the centre or not.

From the above discussion, it is clear that it is important to apply selection or admission criteria before admitting offenders to a CCRC. The size and space of the CCRC, however, also influence selection and the final intake.

3.4.4 Size of a CCRC

Keller and Alper (1970:15) are convinced that CCRCs should be small in size with the aim of furthering the idea of informal and close interaction between residents. At many CCRCs this is still the case. Austin *et al.* (1992:17) indicate that the one hundred female residential programmes they surveyed, the populations were generally small with a daily average of less than 20 females. On the other hand, Latessa and Travis III (1992:170) report that large facilities now exist with hundreds of residents. This is typical of pre-release centres where offenders stay before their release on parole or in the final months before release. It is also the case at Devon Pre-release Centre in Gauteng, South Africa. This centre can house up to 600 sentenced offenders at a time. However, at Weskoppies Hospital only a few mentally ill prisoners reside in the "halfway house" (CCRC).

Everett (2000), programme director of the Independence House, Fillmore Street stated that size should be related to profit making. He argued that if CCRCs are too large, adequate services cannot be delivered. He suggested an optimum number between 40-85 in order to be able to provide the services required and also to survive and be profitable.

In conclusion, it is clear that CCRCs will meet different needs and those needs will determine the size of the facility. Size is directly related to the gender of residents since bigger facilities will be required if a centre serves both males and females.

3.4.5 Gender of residents

Robinson (1992:255) refers to "*Our New Beginnings - A model for Women's Sanctions*". Our New Beginnings (ONB) serves as an alternative to incarceration in Portland, Oregon. The founder member, an ex-prisoner, established this CCRC to provide services according to the needs of women offenders.

A point of great importance made by Robinson (1992:258) is that state departments of corrections must address the individual needs of women offenders and that they should recognise that differences exist in race and class. If they do not consider these differences, it may hinder programme success.

The researcher already referred in this chapter to what Smykla (1981:16) states in this regard. He mentions that the goal of reintegration is "*to provide equal access to opportunities and to reduce class, sexual, and racial biases toward offenders*". The researcher agrees with the above

statement of Smykla (1981:16) and would like to suggest that recognition should rather be given to the diversity of people in order to accommodate each person uniquely, in contrast to a view based on prejudice and discrimination.

Robinson (1992:258) also makes the interesting point that community safety does not only refer to the protection of the community. He argues that one also has to look at the contributions which the women offenders can make to the community after receiving the necessary services to better their own and their children's lives. This author unequivocally states that *"the development of individual programme plans tailored to individual women, comprising treatment components responsive to their particular life-course characteristics, present the strongest model for intermediate sanctions for female offenders"* (Robinson, 1992:259).

The Advanced Recovery Centre (ARC) in Delray is an example of a CCRC that provides gender specific programmes (www.arc-hope.com/). Males and females attend separate meetings, where possible, although they stay together at the treatment centre in separate sections. ARC tries to keep a healthy balance regarding mixed and gender-specific educational and therapy groups. They hold the view that males and females have different issues to discuss in recovery and therefore

they need to separate the groups where each can address gender sensitive issues. Whilst the programme(s) addresses issues separately according to need, it also makes provision for joint sessions where issues justify it. Gender specific programmes include mother-and-infant- or mother-and-baby-programmes. Mothers with their infants live in seven small, community-based facilities, with the objective to promote the relationship between mother and child while the mother is serving her sentence. These facilities provide a home-like atmosphere within a stable, caring environment, whilst the mother learns certain skills. To qualify for this programme, a mother must not have more than six years to serve and must have been the primary caretaker of her children before incarceration. In addition, children must be under six years old and pregnant mothers are allowed. These programmes are operated by the private sector with State contracts. Mother-Infant Programmes are found in six Californian cities namely, Oakland (2), Sante Fé Springs, Pomona, Bakersfield and Salinas (www.cdc.state.ca.us/).

With regard to South Africa, the Annual Report of the Department of Correctional Services (2000:01-76) reports that young children are allowed to stay with their mothers in prison until they are five years of age. Mother and Child units

function in eight of the nine provinces, in South Africa. The following Table 4 compares the infants and children in prison in South Africa as at 31 March 2000 and 31 March 2001.

TABLE 4: INFANTS AND CHILDREN IN PRISON AS AT 31 MARCH 2000 COMPARED TO 31 MARCH 2001

	31 March 2000	31 March 2001
Born in detention	2	3
Admitted with mothers	231	221
Total	233	224

Source: The Annual Report of the Department of Correctional Services (2000/01:76).

A recent workshop was held in Johannesburg Prison on 25-26 September, 2002 regarding *"Babies behind bars"*, hosted by the Finlore Trust and Zantie Swanepoel (Ms UN International and Ms SA 2001). It was decided that for the present time in South Africa, babies and infants would stay with their mothers inside prison, but that it should not continue in the future. Various speakers attended this workshop, for instance Prof. Pat Carlen of the UK. Her paper referred to various options for *"Mother and Baby Units"*. One was a transitional prison (pre-release centre) namely, the Parramatta Transitional Prison in Australia. Offenders are allowed to serve the last part of

their sentences at this transitional facility. They work in the community and are also allowed to let their children attend nurseries in the outside community (Carlen, 2002:2).

The researcher is of the opinion that Mother and Baby Units could successfully be managed by CCRCs in the community, provided the mothers are carefully selected and do not have violent histories. This is in order to intervene in the lives of these children to save them from harm and criminal lives in the future. The slogan which says "*prevention is better than cure*", is applicable here. In the interests of children, they should be accompanied by their offending mothers and receive the best possible solutions for their lives outside of prison. Prof. Pat Carlen referred to the slogan "*the future of a society is the future of all its babies*" (2002:8).

Two of the CCRCs visited in Denver, Colorado, cater for male residents only, namely Williams Street CCRC and Independence House, Pecos Centre, whereas Tooley Hall caters for women only. Carst (2000) stated that the reason for catering for women only in Tooley Hall, is that they have an all-male centre at the Williams Street Centre. They also have a mixed facility for both males and females, although they stay in separate wings. Both genders, however, come together in the cafeteria and the smoking section. From her experience, she was of the

opinion that it is not good to mix males and females in a residential setting but also stated that it is sometimes good to have mixed therapy sessions.

Carrigan (2000) of the Independence House, Pecos Centre which caters for males only, is convinced that there are fewer management problems if CCRCs cater for either males or females. Independence House, Fillmore Street and Independence House South Federal cater for males and females at their centres.

Sullivan (2000), programme director of Independence House South Federal, agreed that it is very difficult to manage both males and females at one centre. She stated that they have many problems with residents meeting each other for sexual reasons which means that staff must watch them closely most of the time. To address the problem of intrusion by the opposite sexes at the Independence House, Fillmore Street, Everett (2000) informed the researcher that they use closed circuit television systems to monitor the rooms. This makes management of the centre not only more expensive but also more problematic.

According to Korkie and du Preez (2002), males and females are not allowed in the opposite gender's rooms at Weskoppies Hospital in South Africa.

From the above discussion, there is ample evidence showing that CCRCs should rather manage either males or females, as opposed to both sexes at the same centre. If, however, they are mixed at the same CCRC, it should be in different wings. It is also clear that a mix of gender leads not only to management problems, but is also more expensive as already mentioned.

Since there is a waiting list for CCRCs in general and particularly a scarcity of CCRCs for females internationally, the decision on the average length of stay of offenders at facilities is a crucial one.

3.4.6 Average length of stay at a CCRC

According to the literature, the average length of stay at a CCRC ranges anywhere between eight to sixteen weeks (McShane and Krause, 1993:230), three to four months (Latessa and Allen, 1997:332) and four months to one year (Austin *et al.*, 1992:17). The various CCRCs visited in Denver, Colorado, reported as follows:

According to Carst (2000) of Tooley Hall, the average length of stay is six months. She reported that some offenders stay two months, others stay for more than a year whilst the Department of Corrections's (DOC) offenders stay the longest. The majority of offenders leave on intensive supervised parole (ISP), although if they do not do well they are brought back to the CCRC. Carrigan (2000) of the Independence House, Pecos Centre, indicated that a person might stay at the CCRC for two and a half years. At the Independence House, South Federal, different type of offenders, such as the DOC transitional offenders, diversion and Federal offender stay for different periods of time at the centre (Sullivan, 2000). It is obvious that the diversity of the offenders at a CCRC has an impact on the length of their stay.

This diversity is also evident at the Independence House, Fillmore Street, where Everett (2000) reported that the length of stay could vary anything from three weeks to a year and a half. This is due to the fact that offenders released from the Federal boot camps stay at the CCRC for one and a half years before they are eligible for release.

With regard to psychiatric patients or mentally ill prisoners, Korkie and du Preez (2002) are of the opinion that a six-month stay at a psychiatric facility is too short because of these

patients' various and unique problems. Two new "*halfway houses*" were opened at Weskoppies Hospital recently (2002). The Department of Social Services expects the hospital to keep their clients in the CCRC for not longer than six months.

In summary, the above discussion makes it clear that the average length of stay varies according to the special needs of offenders and that the length of stay should therefore be flexible and only general guidelines should be in place. The CCRCs visited in Denver, Colorado all reported their unique problems and these will be subsequently discussed.

3.4.7 Problems at CCRCs in Denver, Colorado

The various programme directors of the CCRCs visited in Denver, Colorado reported the following problems:

- Security level problems. Dismissal of residents takes place because of substance abuse.
- Males and females at the same centre are problematic (as already discussed in this chapter).
- Serving different jurisdictions' clients (Federal, city and state).

- Chronically mentally ill offenders are a danger to the safety of the community.
- Highly affiliated Hispanic teenager gangs in the community near the CRC, shooting at each other as well as at the CCRC's buildings.
- Problems in living in harmony with each other amongst the female offenders.
- Some offenders smuggle and deal in drugs or alcohol at the facility, whilst others engage into fights with each other.

All these CCRCs had solutions for the problems encountered such as good relationships with the community, case managers who facilitate solutions to problem solving, using the "zero tolerance" approach and removing disruptive offenders permanently from the facility. In South Africa, psychiatric offenders at Weskoppies "halfway house" do not get a second chance if they are found with alcohol and/or drugs on them. For problems such as these they are permanently removed from the facility. For lesser problems, offenders receive a warning and are sometimes temporarily removed from the centre. Psychiatric offenders sign a contract at Weskoppies Hospital where they undertake to submit themselves to the house rules.

It can be concluded from the above discussion that problems are to be expected at CCRCs and that careful planning of how they will be managed is essential to counteract such problems.

As indicated, the CCRCs in Denver, regard good relationships with the community as important to address the problems they encounter. Community support is therefore not only critical in the initial phase when a CCRC is planned, but should be an ongoing process after the CCRC has been established.

3.4.8 Community support

Doeren and Hageman (1982:208) argue that the success of the CCRC is dependent upon the support of the community. Rachin (1976:574) agrees that it is bad strategy not to take into consideration the support of the community. Both the community's acceptance of the CCRC as well as their involvement are of cardinal importance.

Most of the programme directors interviewed were not in their position at the start of the CCRC. According to Everett (2000) of Independence House, Fillmore Street, (2000), the laws in the U.S.A. require CCRCs to gain community support because it is in the centre's own interests. To achieve community support, he advised that a community advisory board should be formed. Politicians, persons of the police

department, someone from the district attorney's office as well as someone from the public defender's office should serve on such a board. The criteria for establishing the board is to find people that can work together and who understand what is going on in the community. He stated that reintegrated offenders are a benefit to the community and in this way, the CCRC serves the community. Long-term offenders who are directly released from prison into the community do not have the same chances of reintegration as those served by CCRCs (Everett, 2000).

Community support from the initiation phase is possible, according to Carrigan (2000), who reported that Independence House, Pecos Centre, had had the support from the community from the beginning and he confirmed its importance and value. Also Sullivan (2000) witnessed that the Independence House, South Federal, networks with the surrounding community and the community supports the centre tremendously in many ways. Carst (2000) mentioned that the community supported the Tooley Hall centre by providing jobs to residents.

Closely related to the issue of community support at the initial phase of the CCRC project, is the decision of whether the CCRC should make its identity known to the community, by means of a name sign outside the building.

3.4.9 Identity explicitly known

According to McShane and Krause (1993:230), most CCRCs prefer to keep a low profile in the communities in which they function. Rachin (1976:575) suggested that CCRCs should function quietly with no signs and flags that can distinguish them. This was also the trend that the researcher observed in Denver, Colorado.

The CCRCs visited in Denver, Colorado, preferred to call their CCRCs after the name of the street in which they function. Tooley Hall had no visible identification on the outside of the building. The researcher enquired about this and Carst (2000) stated that they preferred it this way, as they do not want to advertise that there are many women at the CCRC situated in the industrial area where mostly men are employed.

In conclusion of the discussion on the management of critical aspects of CCRCs, it is clear that literature and the experiences from Denver, Colorado can be utilised as guidelines when South Africa embarks on the design, development and implementation of CCRCs.

3.5. CONCLUSION

In chapter three the three models of Community Corrections, namely, diversion, advocacy and the reintegration model were discussed. The alternative models to the reintegration model, i.e the standard, pre-release and parole violators based on referral services were also highlighted.

The discussed models for CCRCs from a literature perspective were used to compare the CCRCs which the researcher visited in Denver, Colorado. It was concluded that these CCRCs make use of the diversion and reintegration models respectively.

Critical aspects of the management of CCRCs were identified and discussed within the context of literature, research findings of visits to CCRCs in Denver, Colorado and where applicable, in South Africa. When a CCRC model is designed, developed and implemented, the following critical aspects should be taken into consideration from a management point of view: Managing agencies, funding, selection criteria, size, gender, length of stay, problems encountered, community support and explicit identification.

In chapter four the focus is on programmes and partnerships for CCRCs with reference to job creation and the contracting of services to the private sector and public/private



partnerships. Further aspects of discussion will be the role of social workers as case managers, accountability, multi-disciplinary teams and advisory boards.