

# SYSTEMIC BARRIERS TO SUCCESSFUL REENTRY IN TOMPKINS COUNTY: HOUSING

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Prepared by:

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In collaboration with:

# EXECUTIVE SUMMARY

This qualitative research study, commissioned in 2018 by Ultimate Reentry Opportunity (URO) initiative, examines systemic barriers to effective reentry in Tompkins County. After being awarded an Engaged Research grant in the amount of \$18,000 from Cornell University to pursue this study, co-principal investigators Jamila Michener, Joe Margulies and Paula Ioanide, obtained IRB approval and trained approximately 40 students at Cornell University and Ithaca College in human subject research with vulnerable populations in Fall 2019-Spring 2020. The study conducted 54 interviews with individuals living in Tompkins County who were 18 years or older and previously involved with the criminal justice system (prison and/or jail).





# CHARACTERISTICS OF FORMERLY INCARCERATED PEOPLE INTERVIEWED



Of the total 54 individuals interviewed who were living in Tompkins County and were previously incarcerated in jail and/or prison, some broad characteristics emerged that are worth noting. As not all participants wished to disclose information about the characteristics outlined below, the numbers attached to the characteristics below do not always match the total sample size (n=54).

The gender breakdown of the total sample size was 17 women and 37 men (with 0 participants identifying as gender non-conforming or transgender). Of the 39 participants who self-identified their race/ethnicity, 22 identified as white, 14 as Black/African American, and 3 as Hispanic/Latinx.

# CHARACTERISTICS OF FORMERLY INCARCERATED PEOPLE INTERVIEWED

The vast majority of participants (n=41) indicated that they were currently enrolled in a benefit program, such as DSS emergency housing, Medicaid, Section 8 vouchers, SSI, SSD, SNAP. Of the 15 participants who disclosed that they were homeless at the time of the interview, 8 were staying at St. John’s Homeless shelter and 7 elsewhere (including the homeless encampment called “the Jungle”).

## Participants by Gender

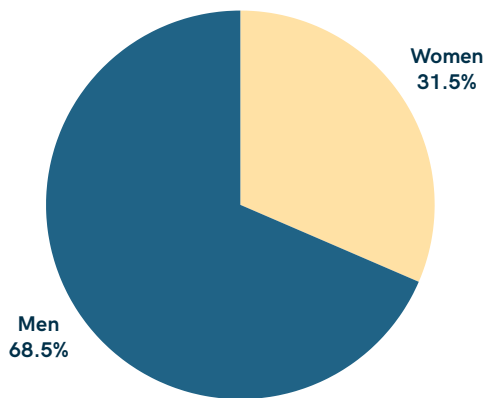


Figure 1: Of the 54 participants, 17 identified as women and 37 identified as men. There were no participants who identified as gender non-conforming or transgender.

## Participants by Race

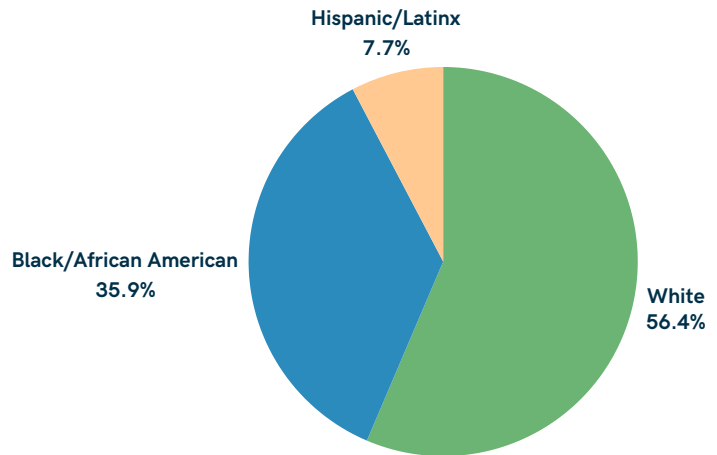


Figure 2: Of the 54 participants, 17 identified as women and 37 identified as men. There were no participants who identified as gender non-conforming or transgender.

## Participants by Age

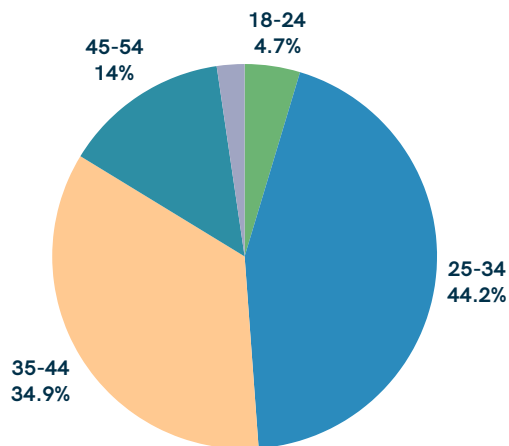


Figure 3: Of the 43 participants, the majority of students were ages 25 - 32, while no participants were ages 55 - 64.

## Participants by Education Level

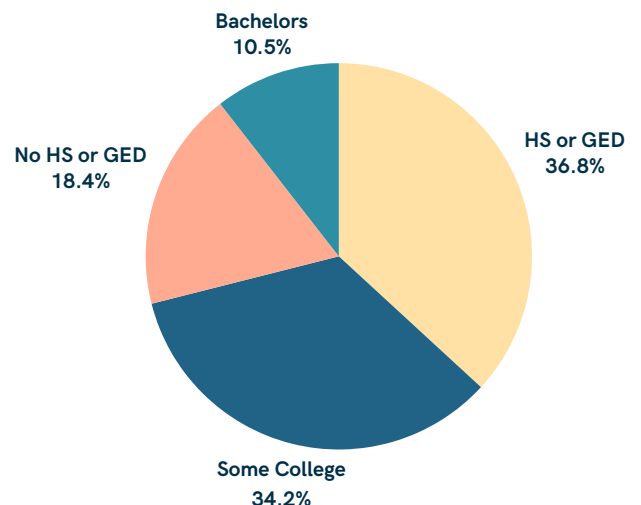


Figure 4: Of the 38 participants, the majority of participants had their high school degree or GED. It was the least common for participants to have their Bachelors degree.



# HOUSING: THE CORE CHALLENGE

Among all issues mentioned by participants, housing availability and access was the most frequently discussed issue when asked to describe systemic barriers to successful reentry.

## Issues Mentioned Most Frequently by Participants

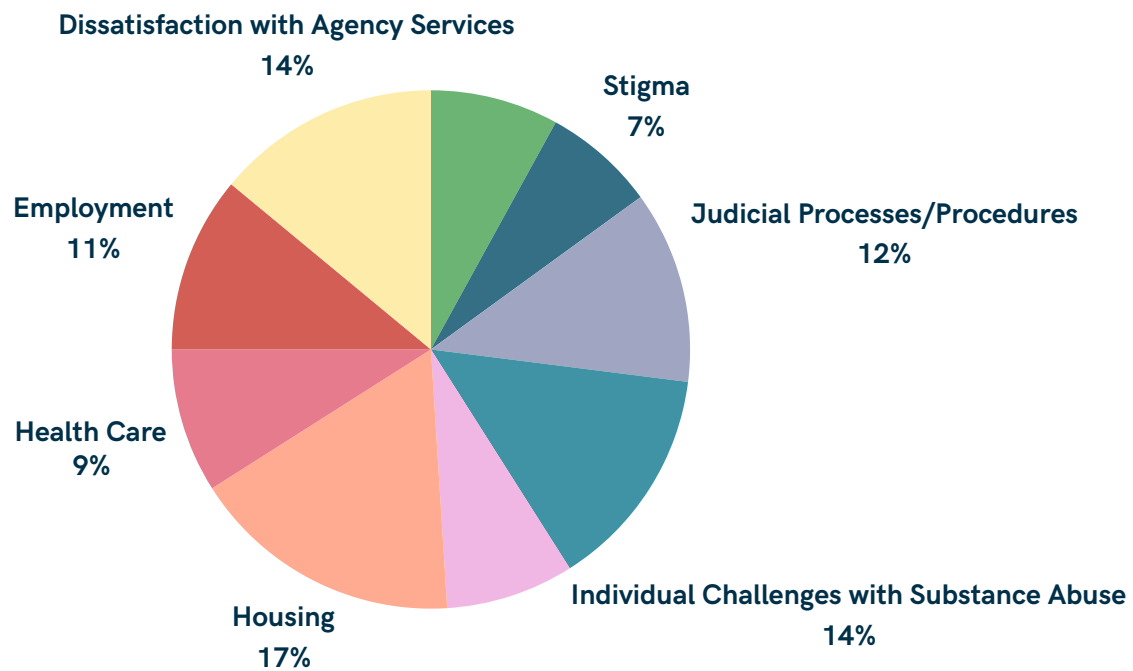


Figure 5: Of the 54 participants, the majority of participants mentioned housing, individual challenges with substance abuse or dissatisfaction with agency services

Significantly, among the 42 participants who mentioned housing availability and accessibility issues, Black/African American participants discussed these issues more extensively than their white and Hispanic/Latinx participants. Housing was almost always mentioned in relation to other barriers and stressors. For example, participants who emphasized mental health and/or substance use struggles invariably tied these issues to specific spaces (e.g., Norfe apartments, the homeless shelter) and the social influences of those geographies. Similarly, participants spoke about the catch-22 cycle of needing stable housing to obtain employment but being unable to obtain housing without employment. Many spoke of having to travel to downtown Ithaca for social services and court-mandated appointments but not being able to access affordable housing in the City of Ithaca. Thus, the study's findings indicate that a number of interlocking problems produce recurring outcomes. URO's collective impact model reflects this intersectional approach to understanding systemic barriers to reentry in Tompkins County and to making recommendations that will help to eliminate them. In the sections below, we outline core themes related to housing.

## THE AFFORDABLE HOUSING LANDSCAPE IN TOMPKINS COUNTY

According to the 42 participants who discussed housing, the lack of affordable, available, attainable, and safe housing in Tompkins County consistently acts as a barrier to those attempting to successfully reintegrate into the community after a period of confinement. Currently, the key entities that connect people in reentry to housing options are the Department of Social Services (DSS) and Coordinated Entry of the Human Services Coalition (HSC).

The Human Services Coalition's housing inventory count states that there are 235 year-round supportive housing,<sup>1</sup> transitional housing, and emergency shelter beds, 16 seasonal beds, and 40 overflow beds in Tompkins County (see Appendix A). The homeless point in time (PIT) snapshot for 2020<sup>2</sup> was 133 people living in emergency, transitional, and unsheltered conditions.

Homelessness in Tompkins County cannot be self-declared but requires verification by DSS or Coordinated Entry of HSC. Examples of verification include: 1) having an outreach worker writing a verification on behalf of the applicant; 2) exiting an institution such as a



prison, hospital, or jail and having homeless status when entering that institution and staying in that institution for less than 90 days. Caseworkers often use the Homeless Management Index System (HMIS) to verify prior homelessness status. In the DSS eligibility interview, caseworkers ask a series of questions meant to find possible diversion solutions away from the emergency homeless shelter. For example, a caseworker might ask, "Is there any other place you could stay other than the shelter?" If a person admits that they have a friend who is allowing them to couch surf, and that friend is contacted to say that the applicant has been staying with them, the applicant can be denied homeless verification. This presents a core issue to people in reentry who may lose housing options due to fear of stigmatization and/or because they rely on a loose network of people who allow them to stay at their places temporarily.



Another important distinction is between homelessness and chronic homelessness as defined by HUD.<sup>3</sup> Those who meet the chronic homelessness criteria are likely to be eligible for more housing options, such as supportive housing units, because they fall in the Empire State Supportive Housing Initiative's (EESHI) target populations. A person who was homeless at entry to jail maintains their homeless status if they are still homeless when they are released from jail. However, if a person is confined to jail longer than 7 days, the clock stops on the amount of homelessness time required by HUD to establish chronic homelessness status.

To be designated “chronically homeless,” a person must have been continuously experiencing “literal homelessness”<sup>4</sup> for 12 months and be designated “disabled.”<sup>5</sup> Another way to be designated “chronically homeless” is to have four episodes of literal homelessness in the preceding three years. Under these definitions, a person who is incarcerated in a state prison for three years is unlikely to retain their chronically homeless status, but they could still be designated homeless upon release from prison. The person is still considered homeless and eligible for services at an emergency shelter or other projects serving people experiencing homelessness.<sup>6</sup> The significance of these distinctions between “chronic homelessness” versus “literal homelessness” are important because people who are designated “chronically homeless” often are prioritized in supportive housing units, such as TCA’s Chartwell and Magnolia units.

The key organizations that operate affordable housing units at 0-30% Area Median Index (AMI), where the majority of people in reentry’s income falls, can be found in Appendix A. In 2021, the AMI was \$0-\$18,850 for a single person in Tompkins County.<sup>7</sup> When a person is released from prison or jail, they often have to wait a period of 30-45 days for a temporary assistance case to open (i.e., TANF or general assistance). This is important because research shows that often the first 72 hrs upon release are critical periods that influence successful reentry.<sup>8</sup>

Once determined homeless, applicants are eligible to stay at the homeless shelter and may be eligible for a Total Needs Grant that offers up to \$400/month (usually \$380). Total Needs Grant recipients must stay in compliance with DSS regulations, such as attending required appointments with DSS, meeting work requirements, and adhering to substance treatments. DSS can place a sanction on an individual’s case (e.g., if the person did not attend required substance treatment). The recipient must then wait out the period of the DSS sanction and remedy the issue they were sanctioned for (e.g., adhere to the substance treatment).



The DSS Total Needs Grant is far below the 2021 fair market value \$980/month for an efficiency/studio unit in Tompkins County. As a result, the vast majority of DSS Total Needs Grant recipients stay in privately owned and operated housing complexes that are often substandard, unsanitary, and unsafe. If the homeless shelter is full and/or there are no housing options available, many people in reentry end up staying in homeless encampments like the Jungle or they couch-surf among family and friends while they await better housing options.



In the past two years, people in reentry or who are court-involved have also been eligible for emergency solutions grant (ESG) vouchers through Coordinated Entry of HSC, which offer an allowance up to \$900/month for a single person for up to two years. While these vouchers make it much more likely that people in reentry can afford more suitable housing options in Tompkins County, many renters with the ESG voucher continue to face major challenges finding private landlords who will rent to them due to past criminal histories and/or unwillingness to accept ESG vouchers as rental payment.

A majority of supportive housing units and landlords that accept Section 8 vouchers give priority to parents with children, pregnant women, elderly people, or people with disabilities. Thus, a person in reentry who is single or a parent who does not have custody of their children is highly unlikely to obtain Section 8 subsidized housing units and/or supportive housing units in Tompkins County. Importantly, because Ithaca Housing Authority (IHA), Tompkins Community Action (TCA), Ithaca Neighborhood Housing Services (INHS), and HSV/Section 8 application processes include criminal background checks, people in reentry can be deemed ineligible as a result of discretionary decisions made by case workers and/or internal policies on criminal backgrounds that are not publicly available to applicants.

Tompkins County is adding 125 affordable housing units at 0-30% AMI that fall under New York State's supportive housing initiative (ESSHI) in the next three years (2021-2023). While these housing units aim to offer housing options for vulnerable populations, they do not identify formerly incarcerated and/or court-involved people as an explicitly eligible population.



# STUDY'S KEY HOUSING THEMES

Among the 42 participants that discussed housing access and availability, the core themes that emerged were 1) housing unaffordability due to high market rents; 2) long waits for public housing units operated by the Ithaca Housing Authority or supportive housing units (e.g., Amici House); 3) unsafe, unsanitary conditions in housing units that participants could afford using the DSS Total Needs Grant of \$400; 4) difficulty of committing to sobriety or substance use recovery in housing units that people could afford to live in and/or at homeless shelter; 5) frustration with DSS requirements for obtaining and maintaining housing.

## LACK OF AFFORDABLE HOUSING OPTIONS

Upon release from prison and jail, most study participants attempted to secure housing through the Department of Social Services (DSS). However, they relayed that their encounters with DSS rules, policies and regulations were fraught with frustration.

A central issue is that Tompkins County's DSS Total Needs Grant covers a maximum of \$400/month. To be eligible for the grant, recipients must have

"I just feel like there's no help for people to get into a place and get started."

their "homeless" status confirmed by DSS, a verification process that itself can take a long time. Additionally, if applicants self-declare past histories of substance use and/or alcohol, irrespective if at the time of application they are sober, DSS may require them to adhere to substance recovery treatments before granting their housing eligibility. Such requirements often entangle applicants in numerous bureaucratic processes that sometimes makes applicants give up.

Once they receive the Total Needs Grant, the number of places that will rent a single room at \$400/month or less are severely limited. As Participant 15 indicated with frustration,

"And DSS, they try to help everybody, but they're like, we'll give you an allotted amount of \$350, \$400. It doesn't even touch the rent and just I don't -- Section 8, there's a huge waiting list and that can be very tricky. I just feel like there's no help for people to get into a place and get started."

Participant 29 articulated a similar assessment when they stated, "\$400 a month for rent... [but] what place in this town is \$400 a month? I mean, even if you triple that, you're not getting first, and last, and security. Most places around here, a small apartment probably starts at 7[00] or 8[00]... And a decent one is \$1,500."



For people who are recipients of the Total Needs Grant but cannot find housing options on their own, DSS refers them to places that contract with DSS and accept Total Needs Grant payments. For example, landlord Norfe Pirro's apartments, two of which are located at Plain St. & MLK/State St, one at W. Seneca St., and one in Groton, came up repeatedly in participant interviews as one of the few options for housing for the houseless reentry population. Participants can refuse to accept a room at the places DSS refers them to once; after that, their Total Needs Grant eligibility is voided. As Participant 24 articulated,

"DSS, they want you to look for housing. But they always want to stick you in housing that's either way out of town and that's a you know, slumlord housing... Because they [DSS] give you a certain amount of time that they want you to be kinda looking for a place to get it somewhere. And so if you can't really find anything, they kind of direct you to these other slumlord places. It's a room and yes, it's a place to stay whatever. I don't think that you should be directed to these places. **And you're are not given a real choice because they tell you well, here's the place and it's open for you now. Here's the key; basically take it or leave it.** And if you say well, I'm not going to stay here, well then maybe [inaudible] they'll cut you off from everything else and you are almost forced [inaudible] --"

Participant 33 similarly confirmed that their refusal to live in the housing offered by DSS led to their being kicked out of the homeless shelter.

"Like say DSS says, oh this place is in your budget and they said that you can move in and you're like, oh, I don't want to live there they can kick you out. They did that to me in 2017. **They actually kicked me out because I told them I didn't want to go to a drug house and they -- that's where they had put me.**

I: They kicked you out of the housing or they -- DSS [inaudible]?

R: They kicked me out of the shelter, so I had no choice but to either go to that housing or be homeless. Because I couldn't even go back to the shelter after that."

Due to the lack of affordable housing options for people entirely reliant on DSS

housing vouchers, many

"...you're are not given a real choice..."

formerly incarcerated

people are forced to endure

houselessness. Many, like Participant 8, have had to "Couch surf, stay in stairways of hotels, sleep under the bridge." Participant 23 stated that they had to "sleep outside... in a blizzard, snowstorm... in a treehouse. No heat. Just a bunch of blankets and body heat."

New York State has a cold weather policy for homeless people commonly referred to as "Code Blue." If the weather outside is 32 degrees (including windchill), homeless people are eligible to stay in motels between the months of December and April. DSS contracts with three motels on Route 13, paying a rate of \$106/night via funding subsidized by New York State. DSS can house up to 120 people in these DSS contracted motels during Code Blue periods.

## LONG WAITING PERIODS FOR SUBSIDIZED OR SUPPORTIVE HOUSING UNITS

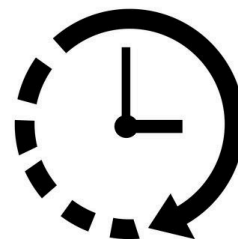
Those who qualify for Section 8 vouchers administered by Tompkins Community Action or IHA public housing face long waiting periods with few options in the interim. As Participant 29 stated,

"I think we've used all [the resources within Tompkins County surrounding housing] and none of them seemed to have helped.. I've gone through TC Action. I've gone through Ithaca Housing Authority. It's just the waiting lists are so long...It's two years or longer, they said. And there's so little housing in Ithaca. And if you get outside of Ithaca, you have to have transportation."

Similarly, Participant 34, who was working in the restaurant industry and staying at the homeless shelter at the time of the interview stated,

"I've signed up for Section 8, I've gone through rehousing and all that stuff. I tried to sign up for the STEP program to help you get your own apartment but pretty much everything is a waiting list due to the fact that it's considered higher priority for somebody that has a more serious problem than somebody like myself. So pretty much you just wait it out."

Participant 15 confirmed that, "there's a huge waiting list and that can be very tricky. I just feel like there's no help for people to get into a place and get started." The Human Services Coalition and Tompkins Community Action have confirmed that the average waiting period for certain units is 12-36 months.



As a result of these extremely limited single-occupancy housing options at \$400/month or below, the vast majority of people in reentry who do not have

It's just the waiting lists are so long...It's two years or longer, they said.

family support end up living at St. John's homeless shelter for at least a period of time after being released from jail or prison. To stay at the homeless shelter, participants are



required to attend a weekly check-in with DSS. Participant 54 described these check-ins as follows:

“Interviewer: And what are they doing at these check-ins?”

Participant 54: Absolutely nothing. You will stay there -- I've been there sometimes from nine o'clock in the morning till five o'clock at night when they are turning the lights out. And then they call you in. And then, what's going on? Nothing. Okay, you're good. Good-bye. One minute, but you will sit there all day.”

While such DSS requirements are likely meant to ensure regular contact with recipients, participants indicated that they often felt frustrated with the unreasonable and time-wastefulness of the requirements.

## STRUCTURALLY UNSAFE, UNSANITARY HOUSING CONDITIONS

At the places that recipients of the DSS Total Needs Grant can afford, participants described structurally unsafe and unsanitary housing conditions. Participant 23 painted the following picture of these rooming houses:

“Because the rooming houses around here are scumbaggish and some of them are actually unlivable. I've lived in some of them, and it's horrible. There's -- like, the walls itself are cracking and stuff inside the walls is falling out. There's cockroaches, bedbugs. People don't clean up after themselves. There's dirty needles all over the place. I mean, me, myself, when I lived in the one, I went down to the needle exchange and put the canisters throughout the whole place.”

Participant 34 confirmed similarly unsanitary and overcrowded housing conditions.

“Okay. Say if DSS... they -- they stick you in these places around here full of bedbugs, full of roaches. You can't -- drug dealers in and out of there all day. You can't be comfortable.

You share a bathroom with 10 other people and then they expect you to stay there and be happy for two, three weeks and get your stuff together and then go get an apartment. But what apartment am I going to get for \$350? You can't even get a studio. I can't even rent a bathroom and a toilet fan. How am I going to get a full apartment and then by the time I do want to get an apartment, I'm in this bedbug infested place -- they stick you in. That's what they do here. They -- oh, your coat here, go here for the night and the next thing you know you're in a drug house.

Like 90 percent of these places around here, DSS send people are no good. Even on the outside of town. You can't even go to the little small towns like Dryden, Freeville, Lansing

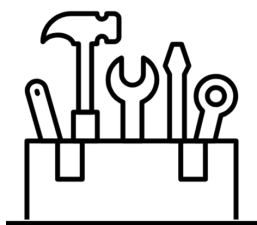
But what apartment am I going to get for \$350? You can't even get a studio. I can't even rent a bathroom and a toilet fan

and be okay because they got the same thing. Who wants to live with 10 people and share this one toilet?"

Participant 7 equated the conditions in the available housing options to prison or jail. "And when -- or when you open your door, you look at your room and it's nothing but - it's dark, it's old, it's nasty, it's not modern. They're looking at it like, shit, this is the same spot I just came from, the housing. Or they send you to a shelter. What type is that? Now, that's making me go back into the mode where I just came from. You've got to -- it's not you've got to hold your hand -- hold a person's hand, but you've got to show them a different light. You've got to show them something different than what they just -- the current program they just came from."

Efforts to hold landlords accountable for unsafe or unsanitary housing conditions or building code violations seem to have largely failed. An Ithaca Times article describing unsafe or illegal apartment conditions articulated why the City of Ithaca has difficulty enforcing building standards. "Ultimately if the landlord does not want to resolve, and the problem is serious enough, we have to order the apartment or even the building vacated," Niechwiadowicz said. "That can be pretty good leverage, because the landlord loses the rent. However, on the other hand, it puts the poor tenant out on the street. So there are times when the tenant will say 'No, don't go that far, let's give the landlord more chance to repair the place,' or bring it up to whatever minimum standards. And frankly the standards are pretty minimal."<sup>9</sup>

## DIFFICULTY COMMITTING TO SOBRIETY OR RECOVERY DUE TO LIMITED HOUSING OPTIONS



Another central theme that emerged among the 42 participants that discussed housing availability and access was the difficulty of maintaining sobriety or substance recovery commitments in the social and spatial geographies that were available to them: St. John's homeless shelter; Norfe, West Village and Chestnut Hill apartments, the Jungle. Here it's important to note that Housing First principles maintain that there should be as few barriers as possible to obtaining housing for people who fall under the definition of "homeless" or "imminent homelessness." Imposing regulations such as "drug free" housing and/or regular testing to ensure drug free housing would invariably render a large number of people ineligible for housing that is already extremely limited for people in reentry. It may be important, however, to create or designate certain housing units (e.g., motels during Code Blue) for people who are sober or in recovery.

Participants routinely mentioned the presence of drug use and/or drug trade in all the housing options that were available to people in reentry. Many tied this presence to

the likelihood of recidivism, particularly for people on parole. For example, Participant 19 stated,

"And those are the places they put you and I'm sorry, but I've either done drugs, shot heroin, smoked crack or sold drugs out of all those places or known people that have sold and done drugs out of all those places and that's all it is.

And they're putting people that are on parole or homeless in these places, you know? Like so it's a setup for failure. You know, I think if they really wanted to do something, they would make their own affordable housing."

Living in the Jungle, among the many other hardships associated with homelessness,

"Like so it's a setup for failure."

poses great substance use risks for people in reentry who want to commit to sobriety or recovery from substance disorders. When Participant 14 was released from jail, they "had an apartment, but I was being evicted. I was losing my Section 8. So I couldn't even get another place if I wanted to. And I ended up sleeping in a tent in the Jungle. I applied at every place that I could... I applied at DSS, but it didn't really -- I ended up relapsing because I was living in the Jungle with a bunch of druggies."

As a last resort, Participant 21 lived in the Jungle, a place they describe in which one is,

"in all kinds of trouble... I was in a house -- apartment for five years out in Freeville. But then, the rent kept going up, and I couldn't afford it no more. Because I didn't have consistent help... So when I left there was when I went to the Jungle. That was about six years ago, seven years ago. Because I've been homeless ever since then because I can't find a cheap enough place for my money I get a month."

The St. John's homeless shelter was frequently described by participants as a difficult environment to live in and as a barrier to successful reentry. Participant 12 shared that,

"[The shelter] pick[s] and choose[s] who they want to help and what applies to who. I was struggling. My uncle had physically abused me and he tried making me go back there. They said that they couldn't help me even though they had beds open... I hate being there, it's not a good place, especially for people trying to be sober. It's not a good place."

Participant 25 reiterated the issue of widespread drug use in the shelter and their desire to avoid it.

"When you go into the shelter it's drugs, nothing but drugs. I'm not trying to live in that environment. I have three kids, who wants to take their kids to a shelter?"



Participant 25 goes on to describe how living in the shelter increases their chance of recidivism:

"I wouldn't... want to go to the shelter where there's nothing but a whole full of drugs. Because then you're putting yourself at risk of going back into jail. And I have three children and I have custody of them and I need them... I wouldn't put myself into a shelter that's making myself at risk for failure."

## FRUSTRATION WITH DSS REQUIREMENTS TO OBTAIN AND MAINTAIN HOUSING

Another issue identified was that if people self-identify themselves as having engaged in substance use at some point in the DSS interview intake process, they are then required to attend rehabilitative services before their eligibility for housing is approved. Perceptions among participants was that DSS caseworkers often stigmatize recovering addicts. This delay in determining eligibility may increase periods of homelessness for people in reentry. As Participant 12 stated, "DSS refused to help me unless I went to inpatient rehab, but I was sober at the time. So I didn't need to go to in-patient and they just weren't willing to work with me." Because DSS refused to help Participant 12, they were forced to return to living at the homeless shelter, which they described as a difficult residence for those trying to remain sober. This same time gap in determining eligibility for housing if individuals refuse or are delayed in engaging rehab services often led participants to live in the homeless camp called "the Jungle." Several participants linked not being able to attain housing through DSS to increased risk of relapsing for people in recovery precisely because the most common default living scenarios--the shelter or the Jungle--are social geographies where drug use is prevalent.

## PARTICIPANTS' PROPOSED SOLUTIONS

When asked what success in Tompkins County for people who are reentering would look like, Participant 27 stated that there is a need for, "More places to stay. I know the shelter, there really aren't that many rooms at the shelter. A lot of them are apartments that you have to rent, actually." According to study participants, there is a deep and urgent necessity for helpful resources that formerly incarcerated people can rely on to find housing; for conditions in available housing to be more sanitary and structurally safe; for vouchers to be match fair market prices so that people in reentry can be financially capable of obtaining housing; and a way out for those who are living in homelessness or shelters. Participants also articulated a need for housing options that

are drug-free for those who are sober or in recovery.

Appendixes B and C outline research on effective housing first and reentry models across the United States. This background research may be useful to Tompkins County and the City of Ithaca as they consider how to create successful models for people returning back to their communities after incarceration.



The Data Development Working Group of the Ultimate Reentry Opportunity (URO) initiative commissioned a qualitative study to assess systemic barriers to successful reentry for formerly incarcerated people in Tompkins County. Co-principal investigators Paula Ioanide, Jamila Michener and Joe Margulies began the qualitative study by obtaining Institutional Review Board (IRB) approval for human subject research through Cornell University. Inviting students at Cornell and Ithaca College to participate in the qualitative study, they trained approximately 20 undergraduate students in human subject research (all students were required to obtain approval via Cornell University) and interviewing methods for vulnerable populations.

Recruitment for participant participation took place by posting flyers in locations frequented by people in reentry: OAR, Day Reporting, DSS, Homeless Shelter. The criteria for participating in the study included: 1) must be residing in Tompkins County, 2) be 18 years or older, and 3) have been previously involved with the criminal justice system (prison and/or jail). The flyer included information that participants would be given \$100 Visa gift cards for their time and participation. A phone number operated by co-principal investigator Joe Margulies was listed on the flyer. Students conducted interviews in pairs, with one person asking questions and a second as notetaker. Students met participants in public places like the Tompkins County Public Library or Gimme Coffee.

Participants were given their \$100 Visa gift cards prior to beginning the interview. After being read an informed consent statement, each participant was asked to verbally consent to participating in the study. Participants were also asked to verbally consent to being recorded. Interviews were audio recorded on digital voice recording devices owned by Cornell University or Ithaca College. Interview questions were open-ended but focused on asking participants to speak to their experiences post-incarceration in relation to finding a place to live, securing a job, accessing transportation, receiving health care, and negotiating judicial oversights like probation, parole, and drug court.

Once the 54 interviews were completed, the audio files were submitted to a professional service for transcription. Six undergraduate research assistants reviewed all transcribed interviews for identifying information; co-principal investigator Paula Ioanide then redacted any information that could reveal the identity of the participant from all transcribed interviews.



A group of 10 undergraduate assistants, under the supervision of Jamila Michener and Paula Ioanide, used Dedoose software to code the transcribed interviews. Codes and subcodes were developed by identifying key areas and factors that have been identified by research to be important components to successful reentry: housing, employment, transportation, health, education, judicial/court processes, stigmatization, impact of trauma prior, during and post incarceration, and availability of social resources and non-profit based services. After all interviews were coded in Dedoose, interviews and memos were reviewed for descriptor data such as gender, race/ethnicity, age group, veteran status, marital status, homelessness status, parental status, whether participants were receiving public benefits, highest education completed, employment status, self-declared substance use disorder, number of arrests and convictions, date of most recent incarceration, amount of time spent in most recent custody, and time elapsed since last custody. We imputed the descriptor data into Dedoose, allowing us to see trends across qualitative and quantitative dimensions.

Dedoose was used to determine the most frequently discussed barriers to reentry across all interviews. We cross checked the most prominent barriers mentioned with descriptors like race, gender, and age to assess whether certain groups mentioned certain issues disproportionately. By reviewing all interviews that mentioned housing, a group of six undergraduate students under the supervision of co-principal investigator Paula Ioanide were able to determine thematic patterns related to housing.



# APPENDIX A: AFFORDABLE HOUSING INVENTORY IN TOMPKINS COUNTY (0-30% AMI)

Table 1: Tompkins County Housing Inventory Count 2020

Row #	Year	Proj. Type	Organization Name	Project Name	Geo Code	Inventory Type	Bed Type	Target Pop.	Veteran Beds HH w/ Children	Youth Beds HH w/ Children	CH Beds HH w/ Children	Veteran Beds HH w/o Children	Youth Beds HH w/o Children	CH Beds HH w/o Children	CH Beds HH w/ only Children	Year-Round Beds	Total Seasonal Beds	Overflow Beds	PIT Count	Total Beds	Utilization Rate
412592	2020	ES	Advocacy Center	Advocacy Center	369109	C	Facility-based beds	DV	0	0		0	0			9	0	0	4	9	44%
412593	2020	TH	Catholic Charities Tompkins-Tioga	Place to Stay	369109	C		NA	0	0		0	0			4			1	4	25%
412585	2020	PSH	Lakeview Mental Health Services	Lakeview SROs	369109	C		NA	0	0	0	0	0	1	0	8			7	8	88%
412584	2020	TH	Learning Web	Housing Scholarship Program	369109	C		NA	0	0		0	14			14			13	14	93%
412587	2020	TH	OAR Housing LLC	Endeavor House	369109	C		NA	0	0	0	0	0			5			5	5	100%
412586	2020	OPH	Rescue Mission	Court Street Place	369109	C		NA	0	0		0	0			10			10	10	100%
412594	2020	OPH	Second Wind Cottages	Second Wind Cottages Phase 2	369109	C		NA	0	0		3	0			18			16	18	89%
412595	2020	ES	St. Johns Community Services	Emergency Shelter	369109	C	Facility-based beds	NA	0	0		1	1			20	0	0	20	20	100%
412597	2020	ES	St. Johns Community Services	Overflow Beds	369109	C	Other beds	NA	0	0		0	0			0	16	40	56	56	100%
412596	2020	PSH	St. Johns Community Services	SRO Beds	369109	C		NA	0	0	0	0	0	15	0	15			13	15	87%
412966	2020	PSH	Tompkins Community Action	Amici House	369109	C		NA	0	9	0	0	16	0	0	33			31	33	94%
412590	2020	PSH	Tompkins Community Action	Chartwell House	369109	C		NA	0	0	0	1	1	3	0	12			11	12	92%
412591	2020	PSH	Tompkins Community Action	Corn Street Apartments	369109	C		NA	0	2	0	0	0	0	0	16			16	16	100%
412588	2020	PSH	Tompkins Community Action	Magnolia House	369109	C		NA	0	1	0	1	0	0	0	22			22	22	100%
412589	2020	RRH	Tompkins DSS	STEPH-RRH	369109	C		NA	1	1		1	0			42			42	42	100%
422040	2020	PSH	VA Tompkins	HUD-VASH	369109	C		NA	0	0	0	7	0	0	0	7			6	7	86%
									Sum : 1	Sum : 13	Sum : 0	Sum : 14	Sum : 32	Sum : 19	Sum : 0	Sum : 235	Sum : 16	Sum : 40	273		

Source: Human Services Coalition of Tompkins County, <https://hsctc.org/point--in-time-count/>

## Affordable Housing Options in Tompkins County

### Emergency Shelter Providers

To be housed in the homeless shelter in Tompkins County, one must have their homeless status verified by a DSS or Coordinated Entry caseworker.

- St. John’s Homeless Shelter operates 20 year-round beds and is one of the central places where people in reentry live. To live in the shelter, individuals must be screened by DSS for eligibility and obtain verification of homelessness.
- The Advocacy Center offers 9 emergency shelter beds for people fleeing domestic violence. Applicants must connect with the Advocacy Center through their hotline.

### Transitional Housing Providers

- OAR’s Endeavor House offers 5 beds for short-medium length stays for men in reentry. They take referrals from Coordinated Entry and have an internal application process. Importantly, people with sexual offense convictions are eligible to live at Endeavor House.
- Catholic Charities Tompkins/Tioga “A Place to Stay” offers 4 beds for short-medium length stays for women experiencing homelessness. The housing units are drug/alcohol free and there is an internal application process. The organization takes referrals from Coordinated Entry of HSC.
- The Learning Web’s “Housing Scholarship Program” offers 10 apartments to youth aged 16-24 experiencing homelessness, for up to 24 months of supported independent living. They use Coordinated Entry for admissions.

### **Permanent Supportive Housing Providers**

Permanent supportive housing units in Tompkins County are funded by the Empire State Supportive Housing Initiative (EESHI). To be eligible for supportive housing units, a candidate must be homeless and in one of the target populations defined by EESHI. Applicants are screened for by a Coordinated Entry casework to determine their “vulnerability index score.” When there are openings in supportive housing units, those who have the highest vulnerability index score are prioritized for the housing units. Preference for those who face chronic homelessness as defined by HUD. Because of this, a majority of people in reentry in Tompkins County do not tend to have the highest vulnerability index scores.

- **Tompkins Community Action (TCA)** operates 55 supportive housing units that are at or below 30% Area Median Index (AMI), which in 2021, was \$0-\$18,850 for a single person in Tompkins County.<sup>10</sup>
  - 23 studio style apartments for single or parenting youth aged 18-25 experiencing homelessness at Amici House;
  - 12 single room occupancies for men in recovery experiencing homelessness at Chartwell House;
  - 6 full sized apartment for pregnant or parenting youth experiencing homelessness prior to entry at the Corn Street Project;
  - 14 units for people in recovery experiencing homelessness and parenting at Magnolia House. TCA uses Coordinated Entry for admissions.
- **Lakeview Health Services** offers 8 single-room occupancy units for people experiencing chronic homelessness with a severe mental health diagnosis. Lakeview uses Coordinated Entry for referrals.

### **Public Housing**

- **Ithaca Housing Authority (IHA)** operates 341 public housing units located throughout the City of Ithaca. Qualified applicants must go through a criminal background check and meet income eligibility criteria. Priority is given to families living in Tompkins County or family members who are working or have been accepted for a job in the county. IHA does not list clear criminal background eligibility criteria or exclusions publicly but adheres to a federal ban on accepting applicants who are “lifetime registrants as sex offender” and those “convicted of methamphetamines charges while living in federally funded housing.” When units become available, IHA pulls approximately 25 candidates from their wait-list and engages in a secondary eligibility review, which includes the criminal background check for the two federal crimes excluded and all other crimes, including misdemeanors. Any agency that is administering state or federally-funded housing is required to have a fair hearing process. Thus, IHA applicants who are denied can request a fair hearing. Law New York can assist people with sealing records as well as with fair hearings. Wait lists are 12-36 months long. Eligible participants must be at or below 30% Area Median Index (AMI).

## **Voucher Services**

- **Housing Choice Vouchers (HCV)/Section 8** are administered by IHA (1048 vouchers) and TCA (1120 vouchers). A family that resides in Tompkins County, or includes a family member who works, or has been notified that they are hired to work, in Tompkins County will receive preference over non-local applicants. Families who are elderly or disabled will be offered housing before other single persons/applicants. Seventy-five percent (75%) of new admissions must be at or below the 30% AMI. Criminal background inquiry for all members of the household age 18 and over are required. Clear criminal background eligibility criteria or exclusions are not publicly available but units accepting Section 8 vouchers must also adhere to the federal ban on accepting applicants with "lifetime registrants as sex offender" and those "convicted of methamphetamines charges while living in federally funded housing."
- **Ithaca Neighborhood Housing Services (INHS)** generally operates their rental units at income levels that are above the 0-30% Area Median Index (AMI). Thus, they are generally not a housing option for the large majority of people in reentry in Tompkins County. INHS similarly runs criminal background checks for all applicants, but does not publicly state their criteria or guidelines for acceptance or denial for applicants with criminal records.

### **Future Affordable Housing in Tompkins County**

New affordable housing options at or below the 0-30% AMI are currently under construction or due for completion. TCA will operate 40 supportive housing units with ESSHI rental assistance at the Ithaca Arthaus on Cherry Street for young people (18-25 yrs old), singles, couples or parenting who are experiencing homelessness prior to entry beginning in October 2021. TCA will also operate 40 supportive housing units at Ithaca Asteri on Green Street for chronically homeless individuals at or below the 30% AMI and experiencing homelessness prior to entry beginning in 2023/2024.

Notably, recently incarcerated individuals will not fall under the categories of "chronically homeless" due to HUD's exclusion of people in jail/prisons from this classification if they spend more than 7 days in jail. Moreover, recently incarcerated people will not be classified as "experiencing homelessness prior to entry" because their release from jails/prisons would not have yet met the DSS criteria of being classified as homeless.

## APPENDIX B: EFFECTIVE HOUSING FIRST MODELS

Nationwide, formerly incarcerated people are almost ten times more likely to be homeless than the general public (Couloute, 2018). Prison Policy Initiative assessed homelessness rates in the United States among formerly incarcerated peoples by sex, race, age, prior history, and time since release to provide the first estimate of homelessness among the 5 million formerly incarcerated people living in the United States (Couloute, 2018). Their findings showed that homelessness rates were particularly high amongst women (260 per 10,000), black people (240 per 10,000), people aged 45 and over (260 per 10,000), people incarcerated more than once (275 per 10,000), and those who had been released from incarceration less than 2 years ago (250 per 10,000). In this nationwide study, the Prison Policy Initiative demonstrated that people who have been to prison just once experience homelessness at a rate nearly seven times higher than the general public; and people who have been incarcerated more than once have rates 13 times higher than the general public (Couloute, 2018).

The alarming national rates of homelessness and housing security lead to devastating side effects even beyond the lack of access to safe and stable housing, including reduced access to healthcare services (including addiction and mental health treatment), difficulty securing a job, and prevention of formerly incarcerated accessing educational programs. Therefore, the Prison Policy Initiative urges local reentry organizations to make housing a first priority and implement the "Housing First" initiatives. "If formerly incarcerated people are legally and financially excluded from safe, stable, and affordable housing, they cannot be expected to successfully reintegrate into their communities" (Couloute, 2018).

Housing First, as defined by the National Alliance to End Homelessness (NAEH), "prioritizes providing permanent housing to end homelessness first; this housing will serve as a platform from which people can pursue personal goals and improve their quality of life" (National Alliance to End Homelessness [NAEH], 2016). The NAEH states that Housing First is, "guided by the belief that people need basic necessities like food and a place to live before attending to anything less critical, such as getting a job, budgeting properly, or attending to substance use issues" (NAEH, 2016). Typically, Housing First is different from other homeless or reentry approaches because it does not require people to attend health or service programs before they are allotted housing access. Benefits of implementing a housing first model include people being rapidly rehoused, meaning they exit homelessness quicker and remaining housed. Rapid rehousing is "offered without preconditions — like employment, income, absence of criminal record, or sobriety — and the resources and services provided are tailored to the unique needs of the household" (United States Interagency Council on Homelessness, 2018). As the National Alliance to End Homeless notes, people who have been rapidly re-housed and [have] an increase in perceived levels of autonomy, choice, and control," as well as a greater likelihood of participation in job training programs, attending school at higher rates, greater discontinuance of substance use, fewer instances of domestic violence, and fewer days spent hospitalized (NAEH, 2016).

Housing first is also cost effective, "because housed people are less likely to use emergency services, including hospitals, jails, and emergency shelters, than those who are homeless" (NAEH, 2016). One study, conducted by the Denver Housing First Collaborative



of the Colorado Coalition for the Homeless, which serves 150 people, found an average cost savings on emergency services of \$31,545 per person housed over the course of two years (Perlman & Parvensky, 2006). Pre-entry into this program, the average cost per person was \$43,239 (Perlman & Parvensky, 2006). Due to the decrease in detox needs, incarceration, emergency room visits, impatient, and shelter living, average post-entry costs per person decreased \$11,694 (Perlman & Parvensky, 2006). "The projected net cost savings for all 513 chronically homeless persons, if provided access housing first programs, would be \$2,424,131" for the City of Denver (Perlman & Parvensky, 2006, p. 2).

### ***Housing First Case Studies***

Two Housing First case studies that have proved successful in the United States can be found in the states of Utah and Colorado. In the case of Utah, the Director of Utah's Homeless Task Force, Lloyd Pendleton, decided to tackle the problem of chronic homelessness in Salt Lake City and expanding the model to the rest of the state. Chronically homeless individuals are defined as individuals who have either been living on the streets for more than a year, have been homeless four or more times within a past year, and/or have a "disabling condition." Within a decade (2005-2015) of adopting housing first, Utah successfully reduced the percentage of the chronically homeless by 91%.<sup>11</sup>

According to an interview with National Public Radio (NPR), the housing first initiative in Utah was able to identify four main points that led to their successes. First, Utah is a small state; before their Housing First implementation, they had about 2,000 chronically homeless individuals living on the streets. For comparison, the state of New York had over 7,000 chronically homeless individuals in 2018. Second, Utah had a massive political and social support system. The Church of Jesus Christ of Latter-Day Saints supports Housing First methods, and their sway of Utah's way of life cannot be ignored in such a political situation. Third, Utah had Lloyd Pendleton as their Director who deeply believed in the ideas of Housing First and was willing to push the idea with politicians and advocates. Finally, since Utah is a small state, the advocate agencies knew each other well and were able to work closely.

In Colorado, the Colorado Coalition for the Homelessness's (CCH) 2020-2023 Strategic Plan focuses on expanding housing opportunities for families and individuals experiencing or at-risk of homelessness (Colorado Coalition for the Homelessness [CCH], n.d.). In 2019, CCH published an annual report which documented their successes and donors for the year (CCH, 2019). Focusing specifically in housing, CCH constructed a 60-unit permanent housing facility and they converted a former hotel into micro apartments which, in turn, ended homelessness for 139 residents. While they received quite a bit of funding from private estates and organizations, CCH also partnered with the Colorado Department of Veterans Affairs and the U.S. Department of Veterans Affairs to gain support.

Within CCH's 2019 annual report, the organization provides an exact breakdown of expenses and revenues that the organization faced throughout the year (CCH, 2019). Housing accounted for approximately 44% of the organization's expenses at \$33,413,291 for the year.

Housing in addition to health care, property management, education and advocacy, management, and fundraising brought the annual expenses to \$75,378,050. However, CCH was able to bring in a 2019 revenue of \$85,325,405 through their incomes of contributions, governmental agency contracts and grants, program income, interest and investment income, gain from acquisition of partnership interest, and other, unspecified, revenue forms (CCH). From this exhibited surplus stand-point, CCH has been able to set up the organization so that each dollar donated provides \$12.60 in program support.

Formerly incarcerated persons face many barriers upon release to their communities that significantly increase the chances of recidivism. Research has indicated that access to housing, employment, education, food, health services and support are essential in preventing re-incarceration. Most importantly, this population needs programs that have been proven to be successful in reducing recidivism and helping people with criminal records be a part of their communities again.

Qualitative studies on effective reentry programs range from analyzing the significance of the length of a program to different characteristics that encourage effective community reintegration. The models discussed in this section should be considered when developing new reentry initiatives. Most programs follow either two of the leading models, Critical Time Intervention (CTI) or Forensic Assertive Community Treatment (FACT). Both models use a practical and problem-solving approach to issues around reentry. The CTI assists in the transition from an institution to a community using a short-term case management service. This model helps participants build connections with the community to establish more long-term support. The connections could include treatment programs and extensions of their social network. By contrast, FACT offers ongoing resources and support to participants without any time limit. It focuses on the individual needs of the client by building a multi-disciplinary team. (Angell et al., 2014, p. 492).

### ***Distinguishing the Phases in Reentry Programs***

There are typically three reentry phases, institutional, structured reentry and community reintegration. In the institutional phase, the target population is presented with various internal programs aimed at preparing offenders for their transition into the community (Byrne & Taxman, 2004, p. 55). This is where incarcerated people receive training and/or workshops in life skills, managing conflicts, counseling, vocational training and more. According to the "Targeting for Reentry" research study, reentry should begin at the start of an offender's sentence (Byrne & Taxman, 2004, p. 55). However, in most carceral institutions, reentry begins a few months to a year prior to release. The second phase requires a collaborative approach between the community, institution and service providers to help the offender make the physical transition from jail/prison into the community (Byrne & Taxman, 2004, p. 56). There are usually two different stages within this phase, the in-prison and in-community stages. The structured reentry phase is also where treatment, housing, employment and social services becomes a focus. In the community reintegration phase, formerly incarcerated persons are connected to different resources and programs in the community (Byrne & Taxman, 2004, p. 56).

The study found that the programs it assessed failed to clearly distinguish all three phases, making it unclear when each stage began and ended (Byrne & Taxman, 2004, p. 59). This type of trend is often seen in the institutional phase, where programs do not distinguish or differentiate regular internal programs from others targeted towards reentry. The significance of these findings is that reentry initiatives need to be developed clearly thinking about the different phases of reintegration and ensuring that the stages are distinct from each other. People in reentry must be receiving help and support in each phase.

Additionally, Byrne and Taxman (2004) concluded that program developers tend to exclude the population who needs assistance in reentry the most, high risk offenders (p. 59). This suggests that programs need to be significantly expanded and made more inclusive. Finally, the article recommended that programs attend to the needs of offenders who face multiple reentry problems. Their case management should be created based on the specific needs of the participant.

### ***Participant Engagement Process***

An important aspect of successful reentry programs are approaches that encourage its participants to build meaningful connections. The research study conducted by Beth Angell and others assessed qualities of engagement programs that are significant in developing successful strategies for reducing recidivism. Side-by-side assistance using engendered trust and non-hierarchical relationships was found to be a distinguishing factor in successful reentry programs (Angell et al., 2014, p. 499). An example of this approach is to encourage staff members to advocate and accompany their clients in seeking employment, housing and social benefits.

The study by Angell et al. (2014) focused on mental health reentry programs and also emphasized the need for a public health approach to reentry services (p. 490). It found that housing and employment services were often prioritized over physical and mental health services. In addition, a second study also found this to be true. "The ability to obtain basic needs often overshadow substance abuse treatment needs" (Grommon et al., 2013, p. 303). It is important that reentry programs consider health care as a priority that should be made accessible to all formerly incarcerated persons upon release.

Another study by Sacha Kendall and others (2018) investigated different methods for engaging formerly incarcerated persons in reentry programs. This particular qualitative study analyzed offenders with mental health and substance abuse issues (Kendall et al., 2018, p. 2). The research found three important factors of successful reentry programs, including structural context, supportive relationships and continuity of care. Their findings support previous research that finds housing and employment to be critical resources needed for successful reentry. However, these resources need to be matched with emphatic support as well. "The combination of both resources and emphatic support provide by caseworkers produced positive relational and psychological outcomes for participants in the short and long term, including reconnection with family, improved interpersonal relationships, improved self-efficacy and formation of pro-social identity" (Kendall et al., 2018, p. 7). The study identified that case managers who have interpersonal, advocacy and advisory skills can significantly contribute to the success of the program. Relationships between case managers and participants should include trust, support, open and respectful communication and finally solidarity.

### ***Housing***

As shown in this report, Tompkins County has few housing units that directly target formerly incarcerated or court-involved persons. A housing model to consider is the Burlington Housing Authority in the state of Vermont. Within its program, Burlington has



an initiative geared towards offender-reentry housing. It collaborates with correctional facilities, probation/parole officers and local landlords to help formerly incarcerated persons transition into housing (Burlington Housing Authority [BHA], n.d.). The initiative also provides its participants with help in lease agreements and workshops on tenant rights and responsibilities. The goals of the program are to increase housing options, reduce stigma and lower recidivism rates (BHA, n.d.). This initiative is unique in its approach because it is aimed towards finding permanent housing by collaborating with local landlords that are open to working with this population. The Burlington Housing Authority is a great example of building initiatives within an existing service provider to address the specific issues that formerly incarcerated persons face.

Another model housing initiative is the Ex-Offenders in Transition Program (EXIT) contracted by the Ohio Department of Rehabilitation and Correction and operated by NISRE, Inc. This is a 90-day independent living program managed by a faith-based organization (NISRE, Inc., n.d.). According to their website, they have successfully helped transition over 1,000 formerly incarcerated individuals since the initiation of the program in 2006 (NISRE, Inc., n.d.). EXIT is also a certified sex-offender program, therefore demonstrating its use of inclusive reentry practices. EXIT is one of the few programs that allow sex-offenders to participate. Including high-risk offenders in reentry programs are extremely important to proving success in reducing recidivism because they are often the most restricted in their housing options.

The Maine Coastal Regional Reentry Center offers temporary housing in a residential home for men who are considered to be "high-risk" for recidivism (Restorative Justice Project Maine, n.d.). The program is six to twelve months long and uses a restorative justice approach to reentry (Restorative Justice Project Maine, n.d.). Like many other programs, this one also provides skill-based workshops, education and mentorship for its participants. During the beginning of the program, members attend classes, do community service and work throughout the residential home (Restorative Justice Project Maine, n.d.). The reentry center places much emphasis and importance on mentorship with the purpose of allowing its participants to build relationships with people who can support them. These mentors are extremely helpful in providing guidance to dealing with seeking employment, housing, social services, etc. A former resident speaks about his time at the center stating that, "part of the reason why I committed crime was that I felt no connection to the community I lived in. Walking on my own two feet alongside my mentor has given me the room to forge connections supported by empathy, respect, trust and compassion" (Restorative Justice Project Maine, n.d.). This quote speaks to the type of support the center lends to its participants to encourage them to feel like a member of their own community. The center has two unique qualities that have been proven to significantly reduce recidivism: restorative justice and focusing on high-risk offenders. The work of this residential center is supported by earlier research that programs must be inclusive by targeting high-risk offenders, in addition to using supportive positive relationships with people in the community.

## **Employment**

In Tompkins County, there are several service providers that offer employment resources to different populations in the community. The Tompkins County Jail in particular has an internal program that assists people in developing tools and skills for securing employment. Ready Set Work is a New York state program that collaborates with several state departments (New York State Division of Criminal Justice, Office of Probation and Correctional Alternatives, and New York State Department of Labor) and county probation offices to assist probationers in finding jobs (New York State Division of Criminal Justice Services, n.d.). The program trains Probation Officers (PO) to become certified Offender Workforce Development Specialists (OWDS). Although Tompkins County participates in this program, it is not listed as a county that has certified OWDS. It is important that Ready Set Work looks into the certification process to determine if the state's training program could improve how Tompkins County POs are able to serve and support their target population. It would help ensure that the officers are prepared and educated in the area of employment.

The Mayor's Office in the City of Chicago offers a specialized program that works with the Department of Human Resources to improve guidelines on reviewing criminal records for individuals looking to work with the city (Chicago, City of, n.d.). According to the website, "this ensures that individuals who have been convicted of criminal activity are placed into and/or occupy City positions that are suitable and appropriate for the individual" (Chicago, City of, n.d.). Essentially, the City of Chicago is actively working to include people from this population into its network of employees. This is an example of using equitable and inclusive hiring guidelines to give people with criminal records the opportunity to secure meaningful employment. The Mayor's Office also offers a transitional job program that provides training in job-readiness skills and support services (Chicago, City of, n.d.).

Another program initiated by a city's mayor's office is the Philadelphia Reintegration Services (RISE). RISE follows a CTI model and identifies itself as a "first stop" agency (Philadelphia, City of, n.d.). It works to connect formerly incarcerated persons with different resources in the community, including linking this population to local employers that understand the challenges associated with re-integration. In addition, the program offers case management and training in life and practical skills.

Overall, Tompkins County lacks programs that are specifically targeted towards formerly incarcerated persons. The initiatives established by the mayor's offices in the cities of Chicago and Philadelphia are examples of local governmental entities who work to reduce recidivism by offering a set number of transitional employment jobs to people in reentry. Although the City of Ithaca does not share the same size, demographics, or resources as Chicago and Philadelphia, it is important to re-evaluate what the local city government is doing to improve the rate of successful reentry in the community. This type of program could work to further connect formerly incarcerated persons to employers who use an equitable and inclusive hiring process. Additionally, this initiative would be a powerful example of leaders in the community working to improve issues around

recidivism.

### **Education**

In the area of education, Tompkins County offers several services that encourage education during and after incarceration. For those in custody, there is the Cornell Prison Education Program (CPEP), which offers college credits. CPEP reported that education can reduce the probability of recidivism by more than 60 percent (Veneziano, 2018). Post-incarceration, Tompkins County has the Day Reporting program, which offers GED classes and the College Upstate Initiative that works as an extension to OAR. The initiative works with individuals in the Tompkins County Jail by offering help in academic counseling, college application process, student loans, tutoring and more (OAR, n.d.).

The New Jersey Scholarship and Transformative Education in Prisons Consortium (NJ-STEP) is a program that creates a partnership between several higher education institutions in the state, the Department of Corrections and the State Parole Board to give incarcerated persons courses and help in transitioning to college after their release (New Jersey Scholarship and Transformative Education in Prisons [NJ-STEP]. (n.d.). It allows for this population to not only take college classes while incarcerated, but to also continue that education after their release in one of the affiliated universities (NJ-STEP, n.d.). At the moment, only associative degrees are offered but the program will soon expand to offer a BA. People involved in the program can even maintain their credits when being transferred to different facilities within the state of New Jersey. Once released, various Rutgers University campuses offer residential communities called the NJ-STEP's Mountainview Communities. They are intended to help promote inclusivity and provide resources to ensure their success. This program follows a prison-to-college pipeline that reverses the transition from schools to prisons. There are currently nine institutions in the program including Drew University, Rutgers University, The College of New Jersey, Princeton University and several community colleges (NJ-STEP, n.d.).

The NJ-STEP program uses an extremely unique and innovative approach to reducing recidivism. It allows formerly incarcerated persons to reside in a special on-campus housing community, with resources that can enhance their academic, social and professional lives. The former president of Ithaca College, Shirley M. Collado was a part of the committee that initiated and expanded the program. The colleges and universities in the local area should collaborate to expand the conversation on reentry and contribute to reducing recidivism in Tompkins County.

<sup>1</sup><https://www.hud.gov/hudprograms/supportive-housing>

<sup>2</sup><https://hsctc.org/point-in-time-count/>

<sup>3</sup>HUD adopted the Federal definition which defines a chronically homeless person as “either (1) an unaccompanied homeless individual with a disabling condition who has been continuously homeless for a year or more, OR (2) an unaccompanied individual with a disabling condition who has had at least four episodes of homelessness in the past three years.” This definition is adopted by HUD from a federal standard that was arrived upon through collective decision making by a team of federal agencies including HUD, the U.S. Department of Labor, the U.S. Department of Health and Human Services, the U.S. Department of Veterans Affairs, and the U.S. Interagency Council on Homelessness.

<sup>4</sup>Literal homelessness is defined by HUD as living in a place not meant for human habitation (e.g., living on the streets) or in an emergency shelter.

<sup>5</sup>An individual with a disability is any person who has a physical or mental impairment that substantially limits one or more major life activities. The term physical or mental impairment may include, but is not limited to, conditions such as visual or hearing impairment, mobility impairment, HIV infection, developmental disabilities, drug addiction, or mental illness. In general, the definition of “person with disabilities” does not include current users of illegal controlled substances. However, individuals would be protected under Section 504 (as well as the ADA) if a purpose of the specific program or activity is to provide health or rehabilitation services to such individuals.

<sup>6</sup>Information provided by Liddy Bargar, Coordinated Entry of Human Services Coalition, Tompkins County

<sup>7</sup>[https://www.huduser.gov/portal/datasets/home-datasets/files/HOME\\_IncomeLmts\\_State\\_NY\\_2021.pdf](https://www.huduser.gov/portal/datasets/home-datasets/files/HOME_IncomeLmts_State_NY_2021.pdf)

<sup>8</sup>[https://www.ccano.org/blog/ending-recidivism-re-entry-72/;](https://www.ccano.org/blog/ending-recidivism-re-entry-72/)  
<https://www.abc.net.au/news/2019-09-14/the-home-for-prison-lifers-reentering-society/11452788>

<sup>9</sup>[https://www.ithaca.com/news/ithaca/slumlords-on-notice/article\\_5462a5b4-0594-11ea-83d9-778d90e36a90.html](https://www.ithaca.com/news/ithaca/slumlords-on-notice/article_5462a5b4-0594-11ea-83d9-778d90e36a90.html)

<sup>10</sup><https://www.cityofithaca.org/540/Income-Guidelines>

<sup>11</sup><https://www.npr.org/2015/12/10/459100751/utah-reduced-chronic-homelessness-by-91-percent-heres-how>



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# BARRIERS FOR HOUSING BY RACE IN TOMPKINS COUNTY





# Housing by Race

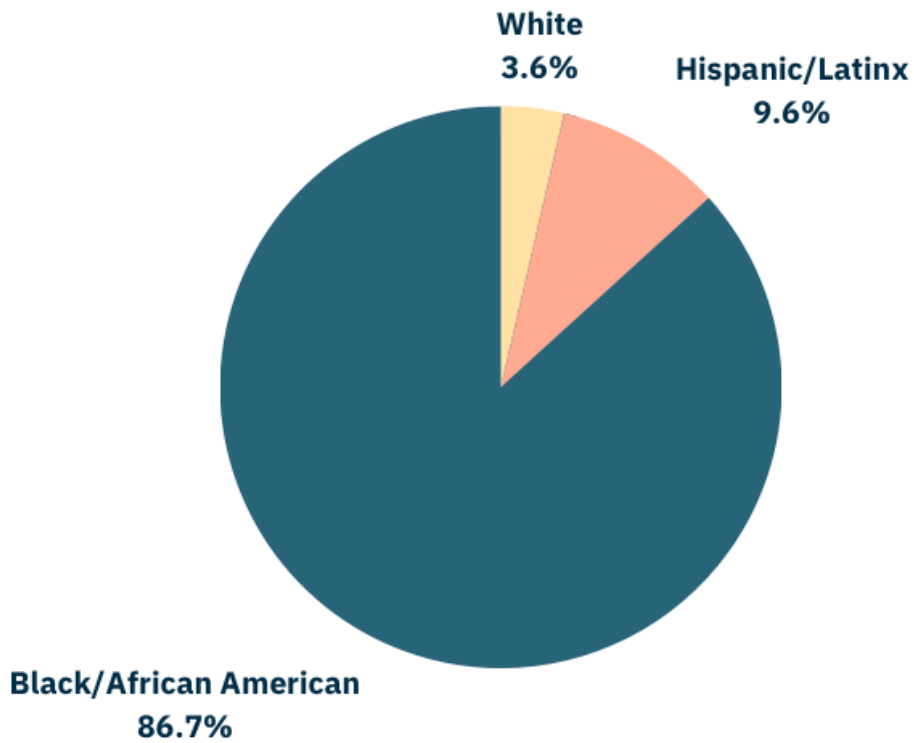


Figure 5: Of the 133 participants...

# Housing Availability and Access by Race

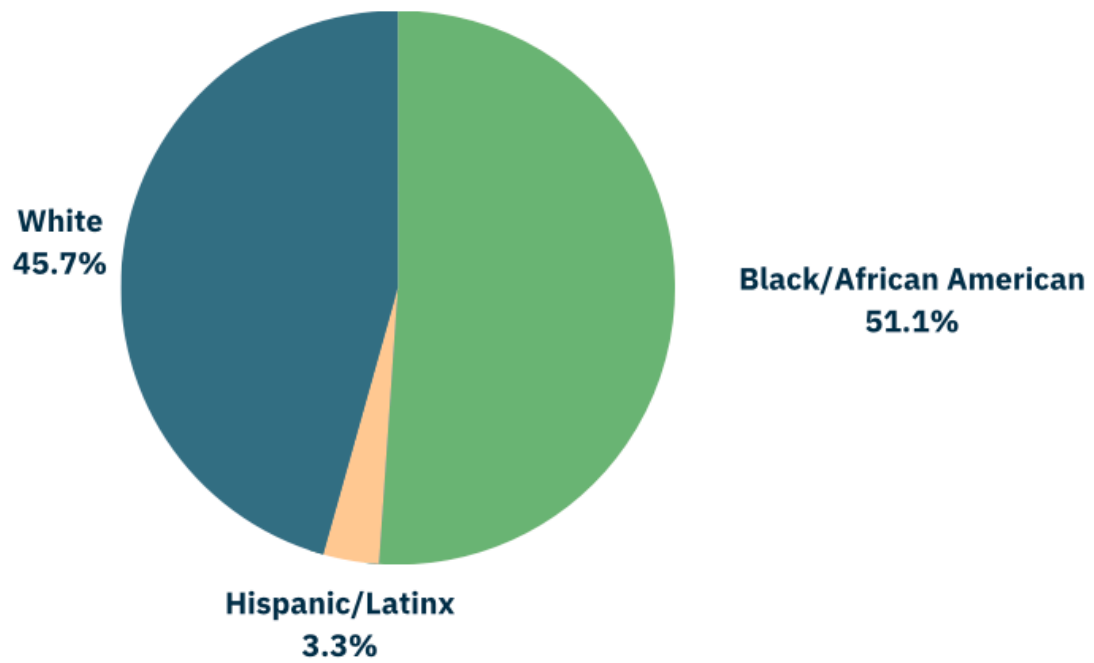


Figure 6: Of the 92 participants...

Figure 7: Of the 13 participants...

## Eviction/Repossession by Race

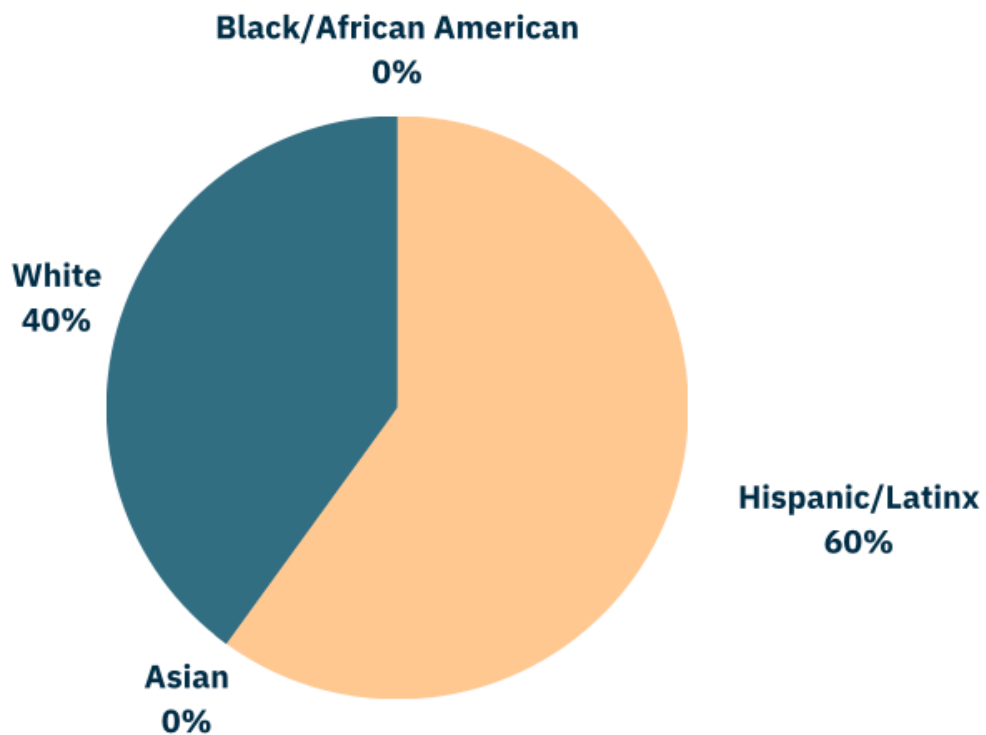


Figure 8: Of the 3 participants...

# Government Assistance by Race

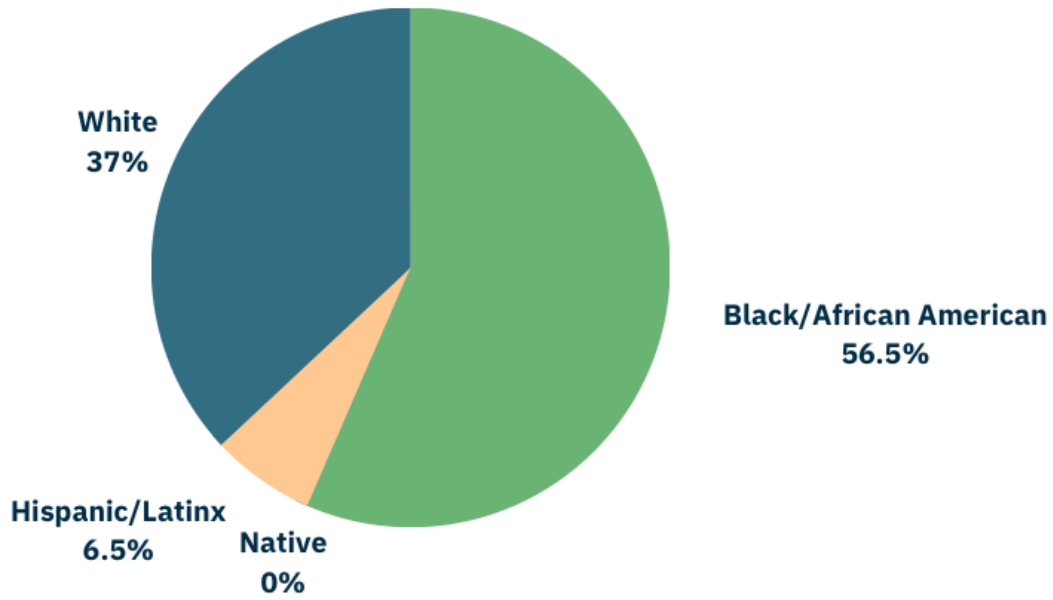


Figure 9: Of the 46 participants...

## Rent by Race

Figure 10: Of the 3 participants...