Community Reentry Workbook

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Community Reentry Workbook

Introduction

This workbook is designed to help you focus on life issues you should address, as you prepare to return to the community. We urge you to complete the exercises thoughtfully to gain a greater understanding of your behavior, your skills and abilities. By taking these steps you can avoid reoffending and have a successful life.
What You Need to Know About
The Pennsylvania Department of
Corrections

What is the Reentry program?
More than half a million people leave America’s prisons each year. In Pennsylvania, approximately 10,000 individuals will eventually return to the community. This is often a difficult transition.

To improve your chances for success and to increase public safety, the Department of Corrections provides the opportunity and support for you to constructively change your life and successfully return to the community, your families, friends and neighbors.

State Correctional Institutions and Reentry
Preparation for your return to the community began when you entered the State Correctional Institution. When you arrived at the Diagnostic and Classification Center you were tested and evaluated to determine what standardized and specialized programming may be offered to you during your stay at the institution. Each state correctional institution offers educational, treatment and living skills programs to assist you in preparing for a successful return to the community. Many programs have certain guidelines that must be met for you to qualify for participation. Specialized programs may be available for substance abusers, sex offenders, inmates with mental health issues, older inmates, etc. Upon your arrival to the state institution you will have met with an assigned Corrections Counselor to discuss a Correctional Plan. This plan will assist you in setting goals and monitoring your progress for successful reentry into the community.

Your Correctional Plan and Community Corrections COR Plan
Your Institutional Corrections Counselor and your Community Corrections Counselor complete a report on your participation throughout your stay with the Department of Corrections. Unless indicated otherwise, this report is updated with periodic reviews to describe what you have done between reporting periods.
As you approach the time of your release your corrections counselor will enroll you into the Community Orientation and Reintegration (COR) program. COR has two phases designed to address the adjustment period between incarceration and returning to the community. Phase I is offered inside the institution and provides instruction and refresher information to promote community linkages; enhance employability and job readiness; and promote healthy family and interpersonal relationships.

Phase II of COR takes place at the Community Corrections Center (CCC). Upon your arrival to the CCC a Community Corrections Counselor will meet with you to discuss the programs you completed while residing in the State Correctional Institution. During this assessment your counselor will determine what areas of programming, resources, assistance and/or training you may need for your successful reintegration into the community.

Community Corrections Center
The Bureau of Community Corrections directly operates a network of 14 state Community Corrections Centers and manage contracts with private organizations to operate nearly 50 private facilities throughout the Commonwealth. These are typically referred to as "half-way houses." Some are licensed by the Pennsylvania Department of Health as in-patient alcohol and other drug programs.

Community Corrections provides:

- A continuation of life skills training and rehabilitation counseling, which begins in the institution
- Safe and supervised transitional housing
- Personal and family counseling by trained staff
- 24-hour supervision and administrative support
- Individualized treatment services for mental health problems and substance abuse
- Referral for employment counseling, job search and medical services
- Liaison with the Office of Victim Services to assure that victims are aware of significant changes in an inmate’s status
- Help with developing plans for one’s eventual full return home
Who may participate?
The Community Corrections Centers accept eligible offenders, who are incarcerated in state correctional institutions, and demonstrate a desire and commitment to actively participate in the program. Acceptance is also based upon approval by the committing court, the Department of Corrections and, for those nearing parole status, by the Pennsylvania Board of Probation and Parole.

Are the Community Corrections Centers like prison?
No. They are residential facilities of various types located in small and large communities across the state. But, they are staffed twenty-four hours a day, seven days a week to monitor the activities of residents and to provide guidance as you re-enter life in the community.

You, the resident, with staff approval, have the freedom to work at regular jobs and to have more frequent contact with your families and greater leisure time. However, you are held accountable for your actions and all privileges must be earned. Participants are supervised within the center and are held accountable in the community.

The use of alcohol or drugs is strictly forbidden. Because many residents have a history of drug and alcohol abuse, all must submit to random, frequent urinalysis tests. A positive urinalysis or violation of center rules will result in immediate disciplinary action, including possible return to prison or to intensified treatment programming. On the other hand, constructive behavior earns greater levels of freedom and movement toward your full return to the community.

How does the program help residents?
The Community Corrections program provides a variety of support services designed to help participants overcome the behavior, which caused your incarceration, and to successfully re-enter the community.

Employment is required by all residents who can physically work. You are also expected to assist with housekeeping responsibilities in the Center. In addition, you are expected to pay rent, court costs and restitution - 50% of which goes to the victims of your crime(s).

Each resident is assigned to an on-site counselor, who helps residents to work through issues of daily living and to deal with your post-criminal behavior. You are expected to become aware of the impact your behavior had on your victims and the community.

When appropriate, residents participate in mental health and drug abuse counseling with professional therapists and support groups - at the centers and in the community. You are assisted in making contact with employment counseling and other services. Staff also communicate with employers to help resolve job-related issues and to verify work attendance.
How does the program help the community?
The program presents an opportunity for you to constructively change behavior and to reunite with your family, friends and the community.

You will pay rent while at the Center based on a percentage of your income. You will also pay taxes, make regular payments for restitution, court costs, fines and child support. You will also be expected to perform community service, as your work and counseling schedules permit.

Through these efforts, residents begin to become productive citizens and to make an attempt to repair the disharmony caused by your criminal behavior.

How can the community help?
We welcome volunteers to participate in support groups, to serve as mentors, and to provide other volunteer services. Volunteers can also help by providing employment opportunities for residents and encouraging a positive community atmosphere.

For further information, we invite you to talk with your counselor.
What You Need to Know About Probation & Parole

Understand the impact of parole on your daily life.

How has (or will) being on probation or parole will affect your daily life?

How has incarceration affected your life?

List some of the benefits of parole versus incarceration:
1. ____________________________
2. ____________________________
3. ____________________________
4. ____________________________

Remember:

• The importance of having a working relationship with your assigned parole agent.
• Your personal responsibility and accountability in the parole process.
• To have a good release plan.
• To set achievable personal goals and remain focused on achieving those goals.
• To focus on the relationship between decision-making and success on parole.

The parole agreement you will sign is a contract with the Pennsylvania Board of Probation and Parole (PBPP), and by signing parole release papers, you agree to all the general and special conditions of your parole in order to finish your sentence in the community under supervision.
General Conditions of Parole

You will be under the supervision of a district office or sub-office and will not be able to leave that district without prior written permission of the parole supervision staff.

You must:

• Obtain prior written permission of your parole officer (agent) in order to change your residence.

• Maintain regular contact with your parole officer (PO) by:
  1. Reporting regularly as instructed and following written instructions from your PO,
  2. Notifying your PO within 72 hours of an arrest, summons, citation or offenses punishable by imprisonment,
  3. Notifying your PO within 72 hours of a change in status including employment, on-the-job training and education.

• Comply with state, county, local and federal laws, regulations, ordinances, the vehicle code (driving rules) and liquor laws.

• Abstain from the unlawful possession or sale of narcotics/drugs and from the use of controlled substances without a valid prescription.

• Refrain from owning or possessing firearms or other weapons. This includes all firearms whether functional or not and facsimiles, muzzle loaders, archery equipment, etc.

• Refrain from assaultive behavior, including physical and verbal abuse.

• Make continuing payments on fines, costs and restitution imposed by the sentencing court.
The Parole Plan
The Parole Plan consists of two parts – your proposed living arrangements (home plan) and your proposed place of employment.

The plan is viewed by the Board of Probation and Parole as the foundation for you to rebuild ties with the community and to be successful on parole.

Before you can be given consideration for parole, you must submit proposed home and employment plans that will be investigated to determine if they will be appropriate for you.

A parole agent or parole investigator will obtain input from people in the community and local police, conduct reference checks and confirm the availability of resources that will support you while you are on parole.

The Home Plan
A parole agent or investigator will obtain the following information, as well as any other information he or she thinks is necessary, to help determine what is a suitable living arrangement for you while you're on parole.

- Name and relationship of the person offering you a home
- Location of the home, including directions on how to get to the home. Also include a description of the neighborhood
- Name and phone numbers of people interviewed
- Proximity to employment and availability of transportation
- Sleeping arrangements
- List of occupants and their relationship to you, their ages, sources of income, criminal records and feelings toward you
- Potential sources of conflict
- They will emphasize your responsibilities, as the offender, regarding rent, room and board, and rules.
- Determine if there are any weapons in the home
- Ask if a telephone is available
- Discuss any history of domestic violence with members of the household, and
- Confirm that they are aware of your criminal record
The investigating parole agent will provide you with the following information:

1. Agent’s role, responsibilities and contact information
2. Parole conditions and their impact on those residing in the home
3. Moving and travel restrictions (You cannot move or leave the district without permission from your parole agent!)
4. The no weapons policy - no weapons are allowed in the home
5. The agent’s ability to conduct searches and to make unannounced visits

The Employment Plan

Prior to your release from the State Correctional Institution, Parole required you to send letters to five prospective employers prior to parole release. List below information for the five prospective employers:

Name of Prospective Employer:___________________________________________
Address:________________________________________________________________
Phone Number: __________________________________________________________
Contact Person:___________________________________________________________
Type of Employment:_______________________________________________________
Wages:__________________________Hours:______________________________
Employer Response:________________________________________________________
_____________________________________________________________________

Name of Prospective Employer:___________________________________________
Address:________________________________________________________________
Phone Number: __________________________________________________________
Contact Person:___________________________________________________________
Type of Employment:_______________________________________________________
Wages:__________________________Hours:______________________________
Employer Response:________________________________________________________
_____________________________________________________________________

Name of Prospective Employer:___________________________________________
Address:________________________________________________________________
Phone Number: __________________________________________________________
Contact Person:___________________________________________________________
Type of Employment:_______________________________________________________
Wages:__________________________Hours:______________________________
Employer Response:________________________________________________________
_____________________________________________________________________

Name of Prospective Employer:___________________________________________
Address:________________________________________________________________
Phone Number: __________________________________________________________
Contact Person:___________________________________________________________
Type of Employment:_______________________________________________________
Wages:__________________________Hours:______________________________
Employer Response:________________________________________________________
_____________________________________________________________________

Name of Prospective Employer:___________________________________________
Address:________________________________________________________________
Phone Number: __________________________________________________________
Contact Person:___________________________________________________________
Type of Employment:_______________________________________________________
Wages:__________________________Hours:______________________________
Employer Response:________________________________________________________
_____________________________________________________________________

_____________________________________________________________________

12
The primary concern of the Board is that your job is legitimate and adequate to afford you with the opportunity to earn a wage that will allow you to meet your personal and family needs.

If you have not obtained employment, your family support will be investigated to determine the source and expected length of the support. In addition, during any period of unemployment, you will be expected to seriously look for other employment.
Not all jobs are suitable for all offenders. People with certain criminal convictions are prohibited from some types of employment while under supervision. This is determined on a case-by-case basis by your agent in consultation with you and your support group.

**The agent will want the following information:**

- Potential employer's name, address and contact person
- Name, title and phone number of people interviewed
- If there is a definite offer of employment and for how long
- The proposed type of work, wages, hours, temporary or permanent status, travel requirements

The agent will also discuss your background, record, qualifications, parole conditions, the agent’s responsibilities and contact information.
RESOURCES FOR INFORMATION, SERVICES & SUPPORT

Probation & Parole

My probation/parole goals

1. 

2. 

3. 

4. 

My parole officer:    Address:    Phone:

My parole requirements

1. 

2. 

3. 

4. 

5. 

6.
Community Reentry Workbook

Victim Awareness
Responsibility: Your Positive JOURNEY Into The Future

Jump start a positive release by respecting your victim(s)
Obtain employment and pay your restitution
Utilize your parole agent if you have any questions about your conditions
Respect you victim(s) by focusing on your positive reentry into the community
Never forget the impact your crime has on others
Encourage your family, friends, parole agent, and your victim by complying with ALL of the conditions of your release
You have the power to make a positive change for your future

*WHAT I NEED TO KNOW ABOUT VICTIM AWARENESS*
Your Responsibility to Your Victim:

This portion of your workbook is designed to help you recognize and accept responsibility for your crime. Hopefully, by understanding the following, you will contribute to your community in a way that will prevent future victims.

Below are several questions that will test your knowledge in order to facilitate everything you have learned about your crime and your victim.

1.) Your Parole Release Conditions

-In your efforts to comply with conditions of parole release, which condition poses the greatest challenge to you?

________________________________________________________________
________________________________________________________________
________________________________________________________________

-What steps and actions are you taking to address that challenge?

________________________________________________________________
________________________________________________________________

________________________________________________________________

2.) Contacting Your Victim?

-Describe what “no contact” with your victim means?

________________________________________________________________
________________________________________________________________
________________________________________________________________

________________________________________________________________
-What steps or actions are you taking to address the "no victim contact" issue?

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

3.) Payment Of Your Restitution, Fines, and Costs

-How much restitution did the Court order you to pay your victim?

________________________________________________________________________

-Do you know where to make payments toward your Court ordered restitution, fines, and costs?

________________________________________________________________________

________________________________________________________________________

-What is your payment plan?

________________________________________________________________________

________________________________________________________________________
Review Of What You Have Learned:

1.) Abide by your Conditions

What are some conditions that could be imposed on me when I get released from prison?

- Travel Restrictions; You may not be allowed to travel to certain towns, counties or out of the state
- Alcohol Restrictions; You may not be allowed to consume any alcoholic beverages or enter bars and restaurants that sell alcoholic beverages
- Drug and Alcohol Treatment; You may have to enter a drug and alcohol treatment facility as well as adhere to random urinalysis
- Having A Curfew; You may have to be in at a certain time each night (time can vary)
- Restrictions from Certain Establishments, i.e., bars, clubs, concerts, near schools, etc: You may not be allowed to into or near certain establishments

2.) No Contact With Victims

What does no contact mean?

- No contact means no phone calls, no letters, no face-to-face contacts, and no third party messages.
- This also means no cards and you may not ask the victim’s relatives or even your own to give the victim a message from you.

What should you do if you see your victim?

- Leave the area immediately
- Do not approach the victim
- By leaving you are respecting the victim’s rights to be in that area.
- Report this to your parole agent
What should you do if your victim approaches you?

- Explain that a condition of your parole is to have no contact with that person.
- Leave the area
- Report this to your parole agent

These responses may not be "win-win" situations for you. They are respectful responses but different victims will have different interpretations of your behavior. We feel that this is the best response for a difficult situation and the safety and security of all parties.

3.) Pay Your Restitution

Why do you have to pay your victim restitution?

- It's part of your Court ordered sentence
- It's a condition of your parole release
- Paying restitution helps victims with their financial recovery. It shows your victim and others that you are taking responsibility for the impact of your crime.
Community Reentry Workbook

Education & Employment
What You Need to Know About Education & Employment

Understand your employability and how you can improve it - Be honest with yourself about your skills, abilities, interest in work, and your reliability on the job. Be able to be honest with others about your work history, your goals for the future and your commitment to reaching them.

Career Portfolio - It is helpful to have a folder in which you can keep copies of your resume, cover letters, job applications, and any other documents that will demonstrate your skills and abilities.

Your Career Goal - You should be able to be clear about the type of work you would like to do in the near future and on a long-term basis. Do you want to continue doing the type of work you’ve done in the past, or do you want to try something new? What do you need to do to accomplish this? What can you do now that will help?

Three types of skills -

- **Self-Management skills** - how you manage your time, your ability to get to work on time, your honesty and integrity, etc.

- **Transferable skills** - ability to read and to understand instructions, computer skills, ability to manage others, etc.

- **Job-related skills** - your specific or technical skills such as carpentry, accounting, experience with particular computer software, etc.
DISCLOSING YOUR CRIMINAL RECORD TO AN EMPLOYER

Answer this question in three parts:

Explain briefly your conviction

Example: I was arrested for drug possession. This occurred during a very immature time in life. I now have direction, goals, and responsibilities that take priority over negatives like drugs.

Explain what you did to change your life while incarcerated

Example: During the time I was incarcerated, I realized that I needed to incorporate change into my life. I did this by educating myself, focusing on my rehabilitation through participation in therapeutic groups, and using inmate employment to help in my transition to working in the community.

Explain what you will do to ensure that relapse will not occur

Example: Because of the difficult times I've faced, I have positively changed my life. By conquering my weaknesses and helping others I have accelerated my healing process. I believe that meaningful employment, maintaining meaningful employment, and staying chemically free, will continue to help this healing process.

Do's and Do Not's

➢ Do let your prospective employer know that you take responsibility for your offense.

➢ Do maintain your pride no matter what the offense.

➢ Do practice answering these types of questions in a mock interview or aloud to yourself.

➢ Do not set yourself up to fail when disclosing your criminal record. Make sure your target job is not related to your offense.

➢ Do not make excuses or place blame.

➢ Do not go into graphic detail of your offense.

➢ Do not lie, deceive or be dishonest.
Assess Your Skills

1. What are your career goals? (List by priority)
   1. 
   2. 
   3. 

2. What are your primary skills? (List in ability)
   1. 
   2. 
   3. 

3. Where would you look for a job?

4. Are your career goals related to your skills and ability level?

5. Have you developed a resume?
   Yes ☐   No ☐   Need assistance? ☐

6. Have you developed a cover letter to go with your resume?
   Yes ☐   No ☐   Need assistance? ☐

7. Do you have experience in filling out a standard employment application?
   Yes ☐   No ☐   Need more training? ☐

8. Do you have experience in going through an employment interview?
   Yes ☐   No ☐   Need assistance? ☐

9. Have you developed a job search schedule?
   Yes ☐   No ☐   Need assistance? ☐

10. Have you learned the skills necessary to keep a job?
    Yes ☐   No ☐   Need assistance? ☐

11. What skills do you still need to develop?

12. How do you plan to develop these skills?

If you checked “need help” to any of these questions, now is the time to talk with your counselor or life skills instructors.
A word (or more) about applications

- Many employers require that you fill out their application form. Since there is no single, standard form, it is helpful if you have on-hand your prior employment information (such as: where you worked, when, and job titles), former home addresses, etc. This will help you to complete the form quickly and accurately.

Don’t sweat it! Be prepared.
Complete the enclosed Personal Information Worksheet and refer to it when filling-out an application.

- Follow the directions carefully. It can be helpful to read through the whole application before you start writing. This will help you avoid putting information (or too much information) in the wrong spaces.

- Be neat, accurate, complete and write clearly

- Avoid negative words and statements

- Emphasize your skills and accomplishments

- Fill in every blank (unless it instructs you not to)

- If possible, use an erasable pen. If not, think through your response before you start writing.

- Also, if possible, try to speak to the person doing the hiring - but, don't be pushy!

- Remember - applications are used to screen-out applicants as well as to screen them in. So, keep these guidelines in mind.
Personal Information Worksheet

Name (last, first, middle): __________________________________________

Street address: __________________________________ (Apt.) __________

City: ___________________________ State: _______ Zip: ___________

Phone number(s): _______________ Social Security number: _______________

Marital status: _____________ Gender: ________ Date of birth: __________

Driver’s license number: ___________________________ State: ___________

Who to contact in case of emergency (name, relationship, phone):

_____________________________________________________________

Previous addresses for past 5 years (with dates):

_____________________________________________________________

_____________________________________________________________

Do you have any disabilities that would require special accommodations or which would prohibit you from performing certain activities?

Yes ☐   No ☐   If “yes,” please explain:

_____________________________________________________________

Have you ever been arrested for anything other than a minor traffic violation? If so, please explain.

_____________________________________________________________

Education (high school, college, trade or technical, etc.)

<table>
<thead>
<tr>
<th>School</th>
<th>Address</th>
<th>Graduation Date</th>
<th>Degree</th>
<th>Certificate</th>
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</tbody>
</table>
Military Service
Branch: ________________________ Rank on discharge: ________
Years of service: ________ From: ___________ to: __________
Duties: _______________________________________________
Skills learned: __________________________________________
Schools attended: _______________________________________
Honorable discharge?    Yes ☐     No ☐

Employment History (List previous employment with most recent first)
Employer Name: ________________________________________
Mailing address: ________________________________________
Dates of employment: ________________ Position: __________
Supervisor’s name & phone number: ________________________
Your position title: ______________________________________
Tools or equipment you used: _______________________________
Skills you used: _________________________________________
Reason for leaving: ______________________________________

Employer Name: ________________________________________
Mailing address: ________________________________________
Dates of employment: ________________ Position: __________
Supervisor’s name & phone number: ________________________
Your position title: ______________________________________
Tools or equipment you used: _______________________________
Skills you used: _________________________________________
Reason for leaving: ______________________________________

Employer Name: ________________________________________
Mailing address: ________________________________________
Dates of employment: ________________ Position: __________
Supervisor’s name & phone number: ________________________
Your position title: ______________________________________
Tools or equipment you used: _______________________________
Skills you used: _________________________________________
Reason for leaving: ______________________________________
Employer Name: ________________________________________
Mailing address: ________________________________________
Dates of employment: ____________________ Position: _________
Supervisor’s name & phone number: __________________________
Your position title: ______________________________________
Tools or equipment you used: _______________________________
Skills you used: _________________________________________
Reason for leaving: ______________________________________

Employer Name: ________________________________________
Mailing address: ________________________________________
Dates of employment: ____________________ Position: _________
Supervisor’s name & phone number: __________________________
Your position title: ______________________________________
Tools or equipment you used: _______________________________
Skills you used: _________________________________________
Reason for leaving: ______________________________________

Volunteer Service

_________________________________________________________
_________________________________________________________
_________________________________________________________

Personal references:
Name: ______________________ Address: ____________________ Phone: __________________

_________________________________________________________
_________________________________________________________
_________________________________________________________

NOTE: Take this worksheet with you when you apply for jobs or use it as a reference at other times when completing job applications.
Steps to help assure good work attendance

1. Use a reliable alarm clock – and set it early enough.
2. Plan and double-check your work schedule with the boss.
3. Have reliable transportation.
4. Use reliable childcare.
5. Use a calendar.
6. Call your employer immediately if it appears that you will be late – be honest, don’t make inappropriate excuses.
7. Don’t abuse sick leave

Some other advice...

Be dependable & reliable

Be prompt to appointments and for work

Present yourself as a person you would want to employ

Use good grooming & dress appropriately for the job

Wear required safety equipment

Follow company policy carefully

Do more than they expect of you
My educational or training goals:
__________________________________________________________________
__________________________________________________________________
__________________________________________________________________

Schools or training programs to contact for information:
__________________________________________________________________
__________________________________________________________________
__________________________________________________________________

Who to contact for financial aid:
__________________________________________________________________
__________________________________________________________________
__________________________________________________________________

My employment goals:
__________________________________________________________________
__________________________________________________________________
__________________________________________________________________

**Employment Resources**

State Employment Office:

Address: ___________________________ Phone: _________________

Temporary Employment Agencies:

- _________________________________ Phone: _________________
- _________________________________ Phone: _________________
What You Need to Know About Housing

Key Points to Remember When Looking for Housing

1. You will need a place near your job or that is accessible by the transportation available to you. The expenses of driving or taking public transportation to and from work can be very expensive. If you need to drive, you must also consider the possible cost of parking, gas and maintenance.

2. Ideally, no more than one-fourth of your salary should be spent on housing. This includes rent plus the cost of utilities such as gas, electricity, water and possibly garbage collection. If these utilities are included in the rent, you will be able to spend more for rent. Before signing a lease, if there is one, you must be sure you understand all the costs to you.

3. How much will it cost to move in? It could cost as much as three or four times your first month’s rent. Read your lease carefully for possible moving-in expenses. Some of these hidden costs can be:

   a. Security deposit – This is usually equal to one or two month’s rent, and is held by the landlord to cover any damage to the apartment when you leave. Generally within thirty days, the landlord must return your deposit to you or send you an itemized list of the damages or costs.

   b. Utilities deposit – If you are responsible for paying your own electric, water, heat or garbage bills, you may be required by these companies to make deposits before they begin service. If these utilities are included in your rent, you will not need to make these deposits.

   c. Telephone deposit – Having a phone is required by Parole. If you have not previously had a telephone in your name, you may have to make a deposit plus installation charges. You can find out the exact charges by calling the telephone company. You will also need to make a selection of a long distance provider, if you want that service.

   d. Moving expenses – If you have furniture to move, you may be able to get friends to help and possibly borrow a truck. If not, you may need to rent a truck and be prepared to pay for it with cash. They usually charge by mileage or by the day. Other expenses may include an appliance dolly and pads.
e. **Renter’s insurance**: Your new landlord may require that you obtain renter’s insurance to cover the value of your personal property and liability for any damage you may cause. You may also want this coverage for your own peace of mind. You should also ask about coverage provided by the landlord.

f. **Having the right attitude can make all the difference**: Having a positive attitude always makes a difference. How you approach any task will affect the outcome. Be pleasant and positive when you approach potential landlords to ask about housing. You will want to have a positive experience and so will they.

Looking for an apartment can be exciting and frustrating. But, if you approach the process in an organized way and know your responsibilities, apartment hunting doesn’t have to be difficult.

1. **Know your rights and responsibilities**

   While Federal law prohibits housing discrimination based on your race, color, national origin, religion, sex, family status, or disability, you should expect that many people will be uncomfortable renting to you because of your record - not necessarily those other factors.

   Be polite and respectful - and try to put yourself in their shoes. Remember that you’re facing this challenge because of poor choices you’ve made in the past. When you do locate an apartment, remember that you have both rights and responsibilities. Be sure you know what’s expected of you - and what you can expect in return.

2. **Figure out how much you can afford**

   Some experts recommend that you budget 25-30% of your income on housing.

3. **Decide what you need**

   It’s a good idea to think through what you need in an apartment before you begin looking. How many bedrooms do you need? Do you need to be close to work? Do you need parking? Make a list before you begin, that will narrow down your search.

4. **Know where you can get help**

   HUD funds housing counseling agencies throughout the country, which can give you advice on renting, buying, defaults and foreclosures, and reverse mortgages. Just contact the housing counseling agency closest to you or call toll-free 1-888-466-3487.
The Federal government also provides the Housing Choice Voucher Program (Section 8), which allows you to find your own place to rent, using the voucher to pay for all or pay part of the rent. However, not every apartment owner participates in Section 8. Check with your local housing authority to determine if you qualify.

In rural communities, the Department of Agriculture provides rental assistance programs, home improvement and repair loans and grants, and self-help housing loans to low-income individuals and families. To apply, visit the Rural Housing Service web site or contact your local Rural Development office (check the Federal Government section of your local phone book).

5. **When you look for an apartment: these resources may help:**

- Word of mouth (family and friends, other center residents, etc.)
- The Classified section of your local newspaper
- Free community advertising newspapers
Housing

My housing goals:
____________________________________________________________________________
____________________________________________________________________________
____________________________________________________________________________

Parole requirements for my Home Plan:
____________________________________________________________________________
____________________________________________________________________________
____________________________________________________________________________

Resources to check for housing:
Newspapers (particularly Sunday issue), neighborhood shopping fliers, center residents and staff, my mentor
____________________________________________________________________________
____________________________________________________________________________

Utilities

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<tr>
<th>Utilities</th>
<th>Deposits</th>
<th>Due Dates</th>
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Housing Information

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<td>Other</td>
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Sources of Furnishings

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<th>Salvation Army</th>
<th>Goodwill:</th>
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<td>Volunteers of America</td>
<td>Other:</td>
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</tbody>
</table>
Community Reentry Workbook

Personal Finances
What You Need to Know About Personal Finances

What you should know when you transfer to the community corrections center:

• I will need money for food and other expenses when I arrive at the center - so don’t spend it on the way there.

• Give all checks and cash I receive to the center staff person assigned to handle resident financial accounts (including all funds I receive from the prison when I leave). This will keep my funds safe and I will have money on account when I need it.

• Don’t take out any more cash than I will need for the week, and keep that safe from the temptation to spend it, and from others who may want it.

• Understand that the center will regularly deduct court costs and a percentage for my lodging from my income. Other deductions, such as taxes and child support will be withheld by my employer.

• Prepare a budget and stick to it.

• Immediately put something into savings from every check, and save as much as possible toward the expenses I will need when I’m discharged from the center.

• It will take a while to develop financial stability - but, be patient and avoid the temptation to get quick cash illegally.

Community Corrections Rules

1. All INCOME MUST be submitted to the appropriate staff member immediately upon arrival at the Center, and whenever you receive money. This includes all checks such as income tax returns, gifts, earnings or any other income--whether it is cash or check. Failure to submit this income or cashing of your check will result in a misconduct.

2. You are not permitted to enter into a "charge account" or a financial agreement with any business.
3. Credit cards are strictly prohibited with the exception of the DPA debit card.

4. DPA withdrawals must be completed within twenty-four hours of the funds being deposited into your account. All money must be withdrawn at one time! The entire amount, minus the administration fee must be immediately turned into the Center staff for deposit. Cash must be accompanied by the transaction slip.

5. Residents are not permitted to open or maintain checking accounts. An outside passbook savings account is permitted once you have $500.00 in your Center account.

6. You must maintain a minimum of $25.00 in your account at all times.

7. Budget sheets are to be submitted each week to your counselor, regardless of whether you have any income, but no later than the established deadline. If there are any questions regarding your budget plan, your counselor will need to discuss them with you--so submit your budget sheets as early as possible. This will avoid unnecessary delays and ensure that you get your expense check on time.

8. Unapproved budget sheets or those submitted after the established deadline will not be processed. THIS MEANS YOU MAY NOT RECEIVE AN EXPENSE CHECK WHEN YOU WANT IT!

9. All cash or checks must be received by the appropriate staff member for deposit by the established deadline in order to be considered income for that week. Any checks or cash received after the deadline will go on the following week's budget sheet.

10. No one will receive his/her check before the established payday regardless of the reason!

11. Rent is paid by all residents with an income and is based on 15% of your net income when your earnings are $100.00 or more per week. Individuals earning $50.00 to $99.99 per week pay $12.00 for rent. Residents on Public Assistance are not required to pay rent nor are those individuals earning less than $50.00 per week.

12. Social Security, pensions and unemployment compensation are considered income.
13. You may be eligible for a reduction to a daily rent rate when you are within 3 weeks of your parole date and pay rent for your own residence. This reduction is at the Center Director’s discretion. It is your responsibility to request this reduction in writing through your counselor and to provide verification that you are paying for your own residence.

14. Court costs, fines and restitution will be paid every time you receive income. You will pay 10% of your net income towards these items until you leave the Center or they are paid in full.

15. Residents are required to pay the Act 27 parole fee prior to their pre-parole hearing.

16. It is your responsibility to ensure that your budget sheets are correct each week.

17. Residents may not leave work early to pick up their expense checks at the Center.

**Helpful rules to follow when I leave the center**

- Pay the rent and other bills on time - or early.
- Keep all financial information in a safe place. This includes bills, pay stubs, income tax documents, bank statements, insurance papers, etc.
- Always record bills and payments immediately on the budget sheet.
- Never borrow from friends and family.
- Buy the important things first, and buy luxuries only when I have the money.
- Don’t spend money on anything that is not good for me.
Personal Finances

My goals regarding financial matters

1. ______________________________________________________
2. ______________________________________________________
3. ______________________________________________________
4. ______________________________________________________
5. ______________________________________________________
6. ______________________________________________________

Money I will need immediately when I leave the prison:

Transportation to center ____________
Food until I get a job ____________
Clothing ____________
Transportation to work ____________
Telephone calls ____________
Other ____________
Total: ____________

Money I will need immediately when I leave the center:

Transportation home ____________
Food ____________
Rent ____________
Security deposit(s) ____________
Utility deposits ____________
Transportation to work ____________
Clothing ____________
Other ____________
Total: ____________
Bank & credit unions to contact to open checking and savings accounts when I'm discharged from the center:
_______________________________________________________
_______________________________________________________

Other sources of financial information:
_______________________________________________________
_______________________________________________________
_______________________________________________________
_______________________________________________________
_______________________________________________________
_______________________________________________________
_______________________________________________________
_______________________________________________________

Community Reentry Workbook

Health Care
What You Need to Know About Health Care

Living A Healthy Lifestyle
Learning to make small changes in your life can make a big difference in your health and how you feel.

What areas do you need to improve upon?

1. I am currently at a healthy weight? Yes □ No □
2. I exercise at least 3 times a week? Yes □ No □
3. I have my Blood pressure/Cholesterol checked regularly? Yes □ No □
4. I know how to relax and unwind? Yes □ No □
5. I eat 5 servings of fruit/vegetables everyday? Yes □ No □

Pay Attention to Your Personal Hygiene
These may be basic guidelines for personal hygiene, but notice how many people don’t follow them! Don’t be one of them!

- Wash your hands regularly - especially after using the bathroom and before eating
- Keep your fingernails trimmed
- Don’t bite your fingernails (they harbor germs) - and it looks disgusting!
- Brush your teeth at least twice a day - and floss regularly
- Cover your mouth and nose with a handkerchief or tissue when sneezing or coughing
- Wash and change your clothes regularly
- Don’t share your towel or washcloth with others - and, of course, your toothbrush and eating utensils.
- Avoid picking your nose and rubbing your eyes - otherwise, germs have easy access to invading your body
EAT A BALANCED DIET

From the U.S. Department of Agriculture

Important Questions to Ask Your Doctor

◆ What are my risk factors for heart disease?
  - Genetic/Family History
  - Age/gender
  - Race
  - Smoking
  - High Cholesterol
  - Diabetes
  - Obesity
  - Lack of activity
  - Diet
  - Stress
  - High blood pressure

◆ If I have any of the above risk factors what treatments should I consider? What are the options and their potential risks?
  - Do I need medications for my cholesterol and blood pressure?
  - Are there changes that I have to make regarding my diet?
  - What help can I obtain as far as quitting smoking?
  - What are some physical activities that could be beneficial for me?
  - Should I undergo hormone replacement therapy?
  - Should I take an aspirin every day?
  - Would taking a supplement like Vitamin E or CoQ10 be good for me?
If I am currently taking medication, I should know:

- How does this medication work to improve my condition?
- What are the side effects of this medication?
- Is there anything (foods, other drugs, sunlight, etc.) that I need to avoid while taking this medication?
- How often should my blood pressure/cholesterol be checked?
- Are there any other tests I should have to monitor the effects of this medication such as liver function tests?

Preventing Communicable Diseases

Diseases spread by airborne or direct contact with others

- Tuberculosis
- Influenza (flu)
- Upper respiratory track infections
- Chickenpox, mumps, rubella
- Hand, foot and mouth disease
- Head and pubic lice

To reduce the chance of catching these diseases:

- Maintain good indoor ventilation
- Keep hands clean and wash hands properly
- Dispose of used tissues properly
- Cover nose and mouth when sneezing or coughing
- Prevent head lice by keeping hair clean and avoiding contact with others who are infested
- Avoid pubic lice by not having sex with infected partners. They may not even know they have them. (P.S. - Condoms do not help prevent this Sexually Transmitted Disease!) Also see the section on blood-borne diseases.
Diseases carried in food include:

- Food poisoning
- Bacillary dysentery
- Hepatitis A

To avoid these diseases:

- Practice good personal, food and environmental hygiene
- Store food properly and avoid cross contamination between raw and cooked food
- Cook food thoroughly
- Wash hands properly before preparing food and eating
- Clean cooking utensils properly
- Flush the toilet after use and wash hands
- Keep kitchen clean, neat and dry

Blood-borne diseases include:

- Hepatitis B
- Human immunodeficiency virus (HIV) infection
- Acquired Immunodeficiency Syndrome (AIDS)

To avoid these diseases:

- Wear latex gloves when handling wounds, nose bleeding or other bodily fluids - and wash hands thoroughly afterwards
- Wipe contaminated surfaces with disposable towels soaked in diluted household bleach (1:49) and rinse with water 30 minutes later
- Never share toothbrushes or razors - or needles!
- The use of latex condoms will help prevent some, but not all, sexually transmitted diseases. When in doubt - use them!
- Avoid sex with potentially infected partners (and - remember - anyone can be infected and not be aware of it!)
Vaccine-preventable diseases include:

- Hepatitis B
- Measles, mumps, rubella
- Polio
- Pertussis, diphtheria, tetanus
- Tuberculosis

REMEMBER!

Good hygiene and good health are largely a matter of using good sense!
RESOURCES FOR INFORMATION, SERVICES & SUPPORT

Health Care

My health goals

___________________________________________________

My current health condition

Diagnoses/Conditions being treated:    Medication names and dosages:

___________________________________________________

___________________________________________________

___________________________________________________

Other health or physical problems

___________________________________________________

___________________________________________________

My health providers

Name: ________________________ Phone:  ____________________
Address:  ____________________________________________________
Medical doctor(s):

___________________________________________________

Dentist:

___________________________________________________

Eye doctor:

Sources for general & specific health information

State Health Department _______________________________________
County Health Department_______________________________________
Blue pages of the phone book_____________________________________
Other:______________________________________________________
Community Reentry Workbook

Family Responsibility & Parenting
What You Need to Know About Family Relationships & Parenting

What you need to remember when you return home

Because your family has functioned without you for a while, some things may have changed. Don't expect things to be the same as when you left.

Their relationships with each other may be different. Be sensitive to this and talk about the changes.

Don't expect your family to change to meet your former roles and relationships. Communicate! Communicate! Communicate!

Rejoining your family as a productive member is one of the greatest challenges you will face as you re-enter your community. It is helpful to realize that all family members are connected in a kind of invisible network—members of your immediate family and also the relatives who make up your extended family.

Many times, the actions, behaviors, and attitudes of each person in the network influence and impact the other people in the network. A good way to understand how a family functions as a network is to picture a mobile, a kind of decoration that frequently hangs above a baby's crib, consisting of figures or animals suspended by strings from an umbrella. When you move one figure, all the others dance on their strings in reaction to the movement of one. In a similar way, the actions and behaviors of each person in a family impact all the other family members.

It is also important to realize that patterns of communication between family members tend to be passed down from previous generations. People tend to learn to communicate, to relate, to interact, to parent, and to function from patterns developed and nurtured by their own parents, who acquired them from their parents. Sometimes, it can be important to examine these inherited patterns and make improvements on them where necessary.

The following pages give some hints about family relationships and parenting that may be helpful to you.
Hold a family meeting to discuss beliefs and expectations, set mutual goals, and work to gain a better understanding of how each family member perceives his or her role in the family. Some important things to discuss are:

- How are family disagreements handled? Perhaps new ways of dealing with disagreements might be tried, like using time outs or using mediators, individuals who trusted and respected by everyone involved in the disagreement. Sometimes, members of the clergy may be good mediators for family disagreements.

- What is the degree of trust that each family member expects from other family members and among each other as a group? Being clear on the expectations of others in the family network around the issue of trust can often help to prevent disagreements that begin as misunderstandings or differing expectations.

- Who has control of whom? Who has the right to control another? Who is responsible for whom? When all members of the family are clear on questions regarding control issues, disagreements may be prevented from occurring.

- Do family members share a healthy intimacy among themselves? Individuals may have very different notions of what healthy intimacy is, the important of expressing it, and the means to express it in their daily lives. Gaining a better understanding of how each person views this important issue will have a positive benefit on family relationships.

- Develop family goals and write them down. A goal not written is only a wish. Post the goals someplace in the home where all may see, read and review at leisure. Praise when a goal has been reached. Celebrate together when a group goal is achieved.
Tips for Reunification

1. If you have not seen your child in a long time remember:
   a. Young children are taught to be afraid of strangers and if your child does not know you or recognize you then you are a stranger - even though you are their parent.
   b. Young children are afraid of loud noises. So when you talk, speak softly.
   c. Do not run at a small child - walk slowly into a room and watch the child.
   d. Bend down to the child's level - it's less scary for the child.
   e. Do not expect your child to come to you, he/she will have to get to know you to trust you. Sit quietly and watch at first.

2. When bringing gifts sometimes toys are lots of fun, but they don't always get the reaction you hoped for. If you offer a gift, bend down, hold it out and encourage the child to come to you - if this does not work, then set the gift down and move away. A gift is a present given "with no strings attached", do don't insist on "love" in exchange. Love comes with time and trust.

3. Rules are important to children and while you were gone someone else made the rules. Learn the rules and follow them. You are now the intruder into their world. Rules can be changed, but first you need to adjust and give everyone a chance to adjust. Playing by "their" rules first will make the child more secure.

4. Your children see your absence as abandonment, and they are angry. Your family is angry and you may feel guilty and angry with yourself. FEELINGS AREN'T FACTS! TIME CHANGES FEELINGS.

5. Guilt is very destructive, if possible learn from experience, but leave it behind you. Let the pain work to change you, not to control you.

6. If you are trying to regain custody of your child, your social worker will have some very special rules for you to follow - do the things on that list. You may not "like" the social worker and the rules may not seem "fair", however the decision to return your child to you is based on how well you did what you were told to do. It is not important that you "like" the social worker, or that he/she "likes you". Getting custody of a child is important.
7. Your children need your time and your love, not a trip to Disneyland – so do NOT feel guilty if you cannot take them some place special - a day in the park to talk and swing is more important than anything.

8. If you will be taking the child home in the future, try to make many visits. Taking pictures can help the child remember you, leave pictures with the child. At first your child will need the security of the home he/she is happy with, later short walks are nice.

9. Routines give children security so you will want to stick with the established routines in the beginning.

10. Give yourself credit for small changes - others may miss seeing them but you know how hard you are working.

11. It’s NOT what you say - it’s what you DO!

12. Learn about your community and its resources, make new friends, you’re not alone.

13. Children need lots of love and support to live through a change in homes - so do you.

14. Trust takes time. The more you keep your word, the more others will trust you. Give yourself and others time to bond and rebuild. They want to know the “new you”!
Family Responsibility & Parenting

My goals regarding my family

1. 
2. 
3. 
4. 
5. 

My responsibilities to my family

1. 
2. 
3. 
4. 
5. 

Resources I can contact for help with family problems

___________________ Address: _________________ Phone: _________

___________________ Address: _________________ Phone: _________
Community Reentry Workbook

Getting Along With Yourself and Others
Helpful tips for establishing and maintaining positive relationships

1. Understand your feelings and honestly express them to others, being respectful of their feelings.

2. Ask others what qualities they want in their relationships with you, and explain what you want.

3. Communicate without trying to intimidate or threaten others.

4. If you feel anger or other negative emotions, think of the potential consequences before you act.

5. Seek out support groups and church or social activities that nurture healthy interests and bring you into contact with people you enjoy.

6. If you begin to feel alone or isolated, take a walk, ride a bicycle, call someone you know, exercise, or visit a museum, library or community event.

7. Ask a friend or loved one to join you in a walk, exercise, bicycle ride or other enjoyable constructive activity.

8. When communicating with others, listen with care and empathy. Let people complete their thoughts without interruption. Ask questions when you need clarification or when you are not sure what was said or intended.
My personal life skills goals

1.________________________________________________________
2.________________________________________________________
3.________________________________________________________
4.________________________________________________________
5.________________________________________________________
6.________________________________________________________

Reminder of the personal issues I need to work on

________________________________________________________
________________________________________________________
________________________________________________________

People or other resources that can help me with these issues

________________________ Address: _______________ Phone: _________

________________________ Address: _______________ Phone: _________
Community Reentry Workbook

Mentoring
What You Need to Know About Mentoring

The mentoring program was established to provide a linkage to community support by providing reintegrating offenders an opportunity to have a mentor that provides support, along with valuable advice and the development of an overall trusting relationship. Mentors can help participants rebuild bridges (linkages) to other support mechanisms, which can encourage offender behavior change.

The Community Corrections Center/Community Corrections Facility (CCC/CCF) will provide each resident an opportunity to obtain a mentor.

GUIDELINES FOR THE MENTORING RELATIONSHIP

The intent of these guidelines is to assist the resident in avoiding anti-social behavior and to promote pro-social behavior. If there are activities or events that either the mentor or resident are not sure about, they should consult a center staff member for the acceptable solution.

In order to develop a productive, meaningful relationship, the mentor and resident should remember the following rules:

- Mentors and residents should never exchange money for any reason; this includes loans or gifts of cash.
- Mentors are allowed to purchase meals while on outings.
- There should be no visits to the resident's or mentor's residence without approval.
- Avoid any variation from your pre-approved schedule.
- Establishments where alcohol is the primary business are off-limits.
- The resident or mentor should not drink any type of alcoholic beverage on any outing together.
- Other individuals should not join the mentor and resident on outings without pre-approval by center staff.
• Participation in any type of gambling activity is prohibited.

• Residents are not permitted to operate any type of motor vehicle without the center’s staff approval.

• Sexual relationships between residents and mentors will result in the termination of the mentor’s volunteer status.

• Resident's are not permitted to perform any type of labor for mentors.
Mentoring

My goals for working with my mentor

1. 

2. 

3. 

4. 

My mentor’s name: 

Phone: 

Guidelines for working with my mentor

- My mentor is a volunteer, giving freely of his or her time to help me return successfully to the community.
- Treat my mentor with the same respect that I expect of others.
- Be honest.
- Don’t be defensive when my mentor asks questions or makes suggestions.
- Follow-through when my mentor and I make an agreement.

Notes from our visits

________________________________________

________________________________________

________________________________________

________________________________________

________________________________________

________________________________________

________________________________________

________________________________________

________________________________________

________________________________________
Community Reentry Workbook

Specialized Treatment Needs

- Alcohol & Other Drugs (AOD) -
What You Need to Know About Alcohol & Other Drugs (AOD)

Without proper treatment and your active participation in a recovery program, the chances are very high that you will continue to use alcohol and drugs. This continued use will have increasingly serious consequences, such as repeated incarcerations and perhaps death. People who abuse AOD destroy their lives and their health, including placing themselves at increased risk for life-threatening diseases such as HIV/AIDS. AOD abusers also frequently play a major role in destroying the lives of their families.

The first step in recovery is to admit the extent of your problems related to AOD abuse, and to take responsibility for learning how to recover. You need to take an honest look at your behavior, own it, and make a personal commitment to yourself to do what is necessary to change.

The material in this section is designed to aid you in this process. Use the TCU Drug Screen II to assess the extent of your substance abuse problem. The next several pages ask you to examine your thoughts and feelings that may lead to relapse, and help you identify steps to prevent relapse from occurring. This section concludes with helpful hints to help you achieve and sustain recovery. Remember, your freedom and possibly your life may depend on the success of your recovery efforts!
Reasons for Relapse

This exercise will show why you have trouble with recovery. By knowing this, you will know more about what you need to change. When people have trouble staying sober and clean, it is because they are having trouble with one of four major areas of recovery:

1. **Acceptance of Their Disease**: They believe they can still use alcohol or drugs and learn to control their use.

2. **Unable to Stabilize**: Every time they try to stop using, they become sick, feel crazy, cannot think about anything except drugs, and have many problems. They use alcohol or drugs to feel better.

3. **Cannot Get Comfortable Sober**: When they stop using, they do not know how to change the way they live so they can enjoy being sober.

4. **Relapse**: They can get sober and clean, they attend Alcoholics Anonymous/Narcotics Anonymous/LifeRing Secular Recovery meetings and enjoy sobriety, but something happens. They become unhappy and start to use again.

Please answer the following questions with a check mark:

1. I believe I can learn to drink and drug and control it so that it will not hurt my life.
   
   True _____   False _____   Unsure _____

2. I should not use alcohol or other drugs at all, but every time I try to quit, I get so sick and feel so crazy, I use alcohol and drugs to feel better.

   True _____   False _____   Unsure _____

3. I know I cannot use alcohol or other drugs and quit for a while, but I always end up using again.

   True _____   False _____   Unsure _____

4. I know I cannot use alcohol and other drugs and I attend AA/NA or LSR and do everything I can to stay sober and clean. Sometimes I get very happy in recovery, but I still end up using again.

   True _____   False _____   Unsure _____
How to Know You Are Moving Toward a Relapse

Relapses don’t just happen overnight, or in a day or in a week. They usually tend to occur at the tail end of a period of distorted thinking and poor behavioral choices. Below are some signs that a person is moving towards relapse. Place a checkmark beside the ones that apply to you:

1. _____ I start to think that the straight and sober life is boring and I have thoughts of going back to the old lifestyle of using.

2. _____ I keep going through the motions of recovery but inside I knowing I am just playing the game and underneath it is all a con.

3. _____ I lie to myself that everything is going fine and at times I start to believe it myself.

4. _____ If people ask me about my problems, I pretend everything is all right.

5. _____ I start avoiding people and spending more time alone. I feel lonely and isolated and start to think that nobody cares.

6. _____ I start doing things compulsively to get my mind off my loneliness and my problems. I feel like if I don’t do everything right, I will fail.

7. _____ When people ask me what my plans are, I tell them what I think they want to hear. I don’t know what will happen and I don’t really care.

8. _____ I feel like nothing is going my way and nothing will ever be right.

9. _____ I start having problems sleeping or eating regularly.

10. _____ I find excuses for not doing things. I don’t look into jobs or other things that might help me. I don’t feel like maintaining recovery.

11. _____ I begin to get confused, not knowing why things are going wrong and losing my temper for no reason.

12. _____ I start to believe that my problems are caused by others and it is their fault that I am feeling bad.

13. _____ I stop following any regular daily plan. My life becomes confusing and chaotic and I don’t care.
14. _____ I start thinking about people I know who can still drink, use drugs, break the law, and get away with it, and I start to wish that I could do that.

15. _____ I start to hang around with people who use. I go back to my old hangouts or call people I was in jail or prison with. I assure myself that I am only doing this to find out how they are doing.

16. _____ I miss appointments with my parole officer or counselor. I stop attending scheduled appointments on my recovery program and make up excuses as to why I wasn't there.

17. _____ I start thinking about illegal things I can do to get what I want. I am willing to use and begin to use or commit other crimes to make me feel on top of things.

18. _____ I believe I have the right to get angry, threaten, hurt, or get even with other people because they don't understand me or do what I want.

19. _____ Soon I start drinking, using illegal drugs, and breaking the law on a regular basis. Sometimes the alcohol and drug use comes first and I use it an excuse to break the law. At other times, I plan to break the law and start using alcohol and drugs to get the courage to do it.

20. _____ I get caught. I get arrested, picked up on a probation or parole violation, or get hurt drinking or committing a crime. I feel caught by the system. At first I feel like a victim and then I realize that I am right back where I started.
Preventing Relapse

1. **Triggers** = People, places, things, situations, or behaviors that are reminders of previous alcohol and drug use, and that may act as cues or motivators to resume use.

   In the past, some of my triggers were:

   People: _____________________________________________
   ___________________________________________________

   Places: _____________________________________________
   ___________________________________________________

   Things: _____________________________________________
   ___________________________________________________

   Situations: __________________________________________
   ___________________________________________________

   Behaviors: __________________________________________
   ___________________________________________________

2. **Coping Skills** = Things that can be used to deal with triggers, which helps to prevent relapse.

   Pick one or two triggers from above and describe how you plan to deal with this person, place, thing, situation, or behavior once you return to the community:

   ___________________________________________________
   ___________________________________________________
   ___________________________________________________
   ___________________________________________________
   ___________________________________________________
   ___________________________________________________
   ___________________________________________________
Helpful tips for staying clean and sober

Below are some suggestions that have been proven to aid recovery and to help prevent relapse:

• The more time you invest in counseling, the better your chances are of staying out of prison.

• Remember your personal examples of powerlessness (loss of control) over your drug of choice. Remember, an alcoholic/addict cannot control his/her use. One is too many and a thousand is never enough!

• Go to a meeting my first day out! Don’t put it off. You must chase your recovery just like you chased your drug/drink.

• Stick with the winners at meetings and develop a social network of people in recovery and spend time with them, other than at meetings.

• Pick a sponsor and home group as soon as possible. Get their phone numbers and call them when you are tempted to slip.

• Work on your spiritual development, according to your own personal beliefs.

• Don’t give up! Millions before you have done it and you can to.
Drug Abuse & AIDS

- Behavior associated with AOD abuse is now the single largest factor in the spread of HIV infection in the United States.

- HIV is the Human Immunodeficiency Virus, which causes Acquired Immunodeficiency Syndrome (AIDS).

- AIDS is a defect in the body's natural immunity to disease. People who suffer from it are at serious risk for severe illnesses that are not usually a threat to anyone whose immune system is working properly.

- Although many people who have AIDS or carry HIV may live for many years with treatment, there is no known cure or vaccine. Treatment is also very intensive and expensive.

- Using or sharing unsterile needles, cotton swabs, rinse water, and cookers, such as when injecting heroin, cocaine, or other drugs, leaves a drug abuser vulnerable to contracting or transmitting HIV.

- Another way people may be at risk for contracting HIV is simply by using AOD, regardless of whether a needle or syringe is involved.

- Research has shown that AOD use interferes with judgment about sexual (and other) behavior, making it more likely that users have unplanned and unprotected sex. This places them at increased risk for contracting HIV from infected sex partners.

- AOD abuse treatment programs help reduce the spread of HIV and other blood-borne infections, including Hepatitis B and C viruses.

- Adequate medical care for HIV or AIDS and any related illnesses is also critical to reducing the spread of these illnesses.
RESOURCES FOR INFORMATION, SERVICES & SUPPORT

Specialized Treatment Needs For AOD Abuse

My treatment goals to avoid relapse:

1. 
2. 
3. 
4. 

Counseling/treatment resources:
Name: Address: Phone:


Support resources (AA, NA, LSR, etc.):
Name/Address: Phone:


Sponsor: Phone:
Community Reentry Workbook

Specialized Treatment Needs

- Sex Offenses -
What You Need to Know About Avoiding Sex Offenses

It is important to:

• Gain control over your deviant sexual urges and behavior
• Accept full responsibility for your sexual offenses and the consequences they had for others and for you
• Recognize your thinking errors and be able to correct them
• Identify your offense cycle and interrupt it when high-risk behavior begins
• Show empathy for your victims
• Express your thoughts and feelings in a healthy way
• Resolve issues from your childhood through therapy (such as past victimization and personal, emotional losses)
• Increase healthy social interactions with others close to your own age
• Control your anger in a healthy way
• Demonstrate and follow a good relapse prevention plan
• Be honest with those who supervise, treat, and otherwise care for you. Keeping secrets is a sign you are headed for trouble.
• Avoid getting over-confident to the point you view yourself as no longer needing treatment and/or supportive supervision. Even if you successfully complete parole, remaining in treatment will maximize your chances of not re-offending.

Guidelines for avoiding relapse

1. **Acknowledge your offense** and don’t make excuses

2. **Identify the high-risk situations** that could cause lapses

   ______________________________________________________

   ______________________________________________________

   ______________________________________________________

   ______________________________________________________
3. **Recognize the warning signals** (dynamics such as your feelings) that might test your self-control.

4. **Identify and remember the excuses** you used to justify my offenses.

5. **Develop ways to avoid or quickly get away from situations** that might place you and/or others at risk

6. Make sure that your close family and friends understand your dynamics and **ask them to help you avoid situations** that could put you at risk.

7. If old urges come back, **stop to remember the potential consequences** of re-offending - on others and yourself. A temptation to lapse doesn't mean you have to submit to it. Resist! **You are responsible.**

8. **Give yourself credit for changing your thoughts and your behavior.**
Sex Offender Treatment

CYCLE OF BEHAVIOR

Identify and discuss some of your thoughts, feelings and behavior that relate to the parts of your sexual assault cycle.

PRETEND NORMAL
  Thoughts
  Feelings
  Behavior

BUILD UP
  Thoughts
  Feelings
  Behaviors

ACTING OUT
  Thoughts
  Feelings
  Behaviors

JUSTIFICATION
  Thoughts
  Feelings
  Behaviors
RISK FACTORS

Review some of the risk factors that you have identified in your life.

What were your early life risk factors?

What are your ongoing risk factors?

What are your immediate risk factors?

RELAPSE PREVENTION PLAN

The two components of a successful relapse prevention plan.

1. Personal Accountability Network

2. Personal Risk Interventions

What are some of the situations you may experience when you return to the community that could temp you to reoffend?
My treatment goals to avoid relapse

1. 

2. 

3. 

4. 

Counseling/treatment resources

Name:                        Address:                        Phone:

Support resources (AA, NA, etc.)

Name:                        Address:                        Phone:

Parole Support

Name:                        Address:                        Phone:
Community Reentry Workbook

Specialized Treatment Needs

- Mental Health -
Helpful tips for maintaining good mental health

1. Make and keep appointments with your counselor or therapist.
2. Take your medication exactly as prescribed and keep appointments with your psychiatrist.
3. Eat three healthy meals every day; balance your portions and type of food.
4. Try to get 7 or 8 hours of sleep each night.
5. Maintain a regular (daily) exercise routine.
6. Ask for help if you don't understand or know how to do something.
7. Keep away from drugs or alcohol.
8. Call friends or family when you need to talk. Accept their help and consider their advice.
9. Cooperate with your case manager.
10. Attend any scheduled groups.
RESOURCES FOR INFORMATION, SERVICES & SUPPORT

Specialized Treatment Needs
For Mental Health

My treatment goals to stay mentally healthy

1. ______________________________________

2. ______________________________________

3. ______________________________________

4. ______________________________________

Counseling/treatment resources

Name: ___________________________ Address: ___________________________ Phone: ___________________________

_________________________________________________________________________

_________________________________________________________________________

Support resources (AA, NA, etc.)

Name: ___________________________ Address: ___________________________ Phone: ___________________________

_________________________________________________________________________

_________________________________________________________________________
Community Reentry Workbook

Community Service
Residents in Community Corrections Centers and contract facilities are expected to perform voluntary service as part of your reorientation to the community and assuming some responsibility as a citizen. This effort also helps to demonstrate your commitment to becoming a positive member of your community.

Providing service to others, not only helps them, but it helps you too - to recognize your skills and abilities in a different way and to feel satisfaction in knowing that you can make a positive difference!

Where do you begin?

Talk with your counselor about the Center’s expectations, rules and recommendations about where you could help.

With their guidance, contact local service organizations such as:

- United Way
- Chamber of Commerce
- Council of Churches
- Hospitals
- Blue pages of your phone book
- Action Vista or local volunteer center

Consider any special hobbies or other interests you may have (woodworking, painting, sports, reading, etc.). This may help you identify a kind of service you could offer.

**REMEMBER** - Treat your community service with the same kind of dedication and commitment that you should make to a paying job. People need to be able to depend upon you.
Why I should provide volunteer community service:

The kinds of help I think I can provide:

My community service goals:

1. 
2. 
3. 
4. 

Individuals or organizations I can contact to offer my help:

_________________ Address: ________________ Phone: ________
_________________ Address: ________________ Phone: ________
_________________ Address: ________________ Phone: ________
_________________ Address: ________________ Phone: ________
Community Reentry Workbook

Other Helpful Information
What Else Do You Need to Know?

When you return to the community, you may need to obtain information or documents in order to apply for certain jobs, or to obtain benefits. Here are a few examples of other resources you may need.

<table>
<thead>
<tr>
<th>Service</th>
<th>Local Phone</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Aging</strong></td>
<td></td>
</tr>
<tr>
<td>County Area Agency on Aging</td>
<td>_______________________</td>
</tr>
<tr>
<td><strong>AIDS</strong></td>
<td></td>
</tr>
<tr>
<td>AIDS Fact Line (toll free)</td>
<td>800-662-6080</td>
</tr>
<tr>
<td>State Health Center</td>
<td>_______________________</td>
</tr>
<tr>
<td><strong>Birth Certificate</strong></td>
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<tr>
<td>State-wide (toll free)</td>
<td>877-724-3258</td>
</tr>
<tr>
<td><strong>Driver's License</strong></td>
<td></td>
</tr>
<tr>
<td>Pennsylvania Department of Transportation</td>
<td>_______________________</td>
</tr>
<tr>
<td><strong>Health Information, Services &amp; Tests</strong></td>
<td></td>
</tr>
<tr>
<td>PA Dept. of Health State Health Center</td>
<td>_______________________</td>
</tr>
<tr>
<td>State Health Hotline (toll free, information only)</td>
<td>877-724-3258</td>
</tr>
<tr>
<td>County Health Department</td>
<td>_______________________</td>
</tr>
<tr>
<td><strong>Marriage License &amp; Divorce Records</strong></td>
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<tr>
<td>County Court House</td>
<td>_______________________</td>
</tr>
<tr>
<td><strong>Public Welfare</strong></td>
<td></td>
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<tr>
<td>Pennsylvania Department of Welfare</td>
<td>_______________________</td>
</tr>
<tr>
<td><strong>Social Security Card or Benefits:</strong></td>
<td></td>
</tr>
<tr>
<td>Social Security Administration</td>
<td>_______________________</td>
</tr>
<tr>
<td>To get an application (toll free)</td>
<td>800-772-1213</td>
</tr>
<tr>
<td><strong>Veteran’s Benefits:</strong></td>
<td></td>
</tr>
<tr>
<td>Veterans Administration</td>
<td>_______________________</td>
</tr>
</tbody>
</table>

**Other Services Information**

Blue pages (Human Services Guide) in your local phone book
References


Susan P. Byrnes Health Education Center, http://www.byrneshec.com/history.html
