



Oregon CURE

Citizens United for the Rehabilitation of Errants
A Newsletter for Families and Friends of
Incarcerated Individuals

Winter 2009
Volume 35

International CURE Board Meeting Denver, COLORADO October 9th – 12th, 2009

The International CURE Board Meeting convened on Friday October 9th at 7:00 p.m. Everyone in attendance had an opportunity to explain how he or she became involved with CURE and to offer highlights of their experiences. The majority of people came to CURE because of a loved one entering the prison-system. Although accomplishments varied from successful legislation to furthering relationships with their state's Department of Corrections, it was clear that for most attendees, it's all about the people inside the system and outside who believe that people err; but change is possible and probable given an appropriate environment to change.

Co-Founder of International CURE, Charlie Sullivan, opened the meeting on Saturday with a review of legislation pertinent to our advocacy work that "has legs" (will move) in the 111th Congressional session which began in January 2009 and will end in January of 2011. Several of the bills would actually repeal laws passed 15 years ago that focused on retribution as opposed to rehabilitation. Please see page 4 for a brief description of some of the Senate Bills (preceded with an S.) and some of the House of Representative bills (preceded with an H.B.).

Ari Zavaras, the Director of Colorado Department of Corrections provided an update on Colorado state Corrections and praised Colorado CURE Chapter leader Dianne Tramutola-Lawson as the conduit to families with a loved one in the Colorado prison system. Mr. Zavaras offered to pave the way for other CURE chapters to work with their state DOC's. Prison wardens from throughout the state attend quarterly CURE meetings. Colorado Governor Ritter increased funding for people to be transferred into mental health beds/units prior to release; and initiated programs that make an investment now to ensure positive long term results by preparing people to be successful upon release. Colorado has expedited release from prison to parole for all persons convicted of a class 3-6 felony within 6 months of release. The funds saved by this early release are utilized in finding jobs, housing and ensuring medication for people coming out of prison. Their statistics show that there is a 3-6 month window where people will recidivate. In order to make prison programs effective, states need a governor who can stand up and take the political flack from those who do not understand the necessity. Sentencing and parole continue to be problematic for Colorado lawmakers.

Wayne Bowers discussed the reform of sex offender laws; including registration and residency requirements. Recidivism rates are among the lowest for people sentenced for sex offenses. There is a need to build communities of concern that will provide a circle of support by sponsoring people in the prison system and helping them find housing and employment when they are released.

Claudia Whitman presented information on workshops and training families involved in capital punishment cases. NDRAN educates juries to choose life without parole as an option when faced with imposing a death sentence. To date, there have been 138 exonerations from the Death Penalty. There are currently 3300 people on death row. At this time, only six countries impose the death penalty: China, Iran, Iraq, Yemen, Pakistan and the United States of America.

Kevin Estep, Director of the Cheyenne Mountain Reentry Center (private prison in Colorado) discussed how this facility helps people in acquiring the skills and tools necessary for a positive re-entry. Typically, in a prison setting, infractions are met with disciplinary sanctions; at CMRC; incentives are offered for meeting program expectations. Staff training for counselors and correctional officers is an important segment for CMRC employees to build a positive peer community, where men are addressed as "Mr.". There is a communal mentoring aspect that encourages people to be responsible and reinforces positive behaviors.

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THE LIST: or How To Do His "TO DO LIST" and Stay Sane by Becky Smith

I made the decision to stand by my loved one who was in prison. I knew it wouldn't be easy juggling my life, work, and kids and still maintain a relationship with the one inside. I made a commitment to be there, to help in anyway I could. I expected to be his eyes and ears to the outside world, trying to help him stay abreast of the world and all of its changes. But no one told me, until it was too late, about his "TO DO LIST".

If you have an incarcerated loved one you already know what the proverbial "TO DO LIST" is all about. For those of you who don't, it's that never-ending list of things you are asked to do for "him", the one without the phone, Internet, or access to information. And it can become your worst nightmare quicker than you think.

My own experience was quite the eye opener. At first, naively, I thought, "No problem, this won't take long." But then the list grew, and then it grew some more. I found myself doing things not only for **my** guy, but for his buddy, then another buddy, and another! Suddenly, what I thought would be a few minutes of research had ballooned into hours of Internet searching, cutting and pasting pictures, articles and sports stats not to mention the expense of making copies. So what started out as a few harmless favors had morphed into the now dreaded LIST.

Even a single search which on the surface appeared to be a simple inquiry, such as "Honey, could you check out this website for me, or business, or get these prices for glasses?" became a monster! Often the answer turned out to be 40 pages long, or had over 2,000 hits or contained hundreds of pictures to choose from. Now I was stuck trying to figure out if what I found was what they really wanted. It might take two or three phone calls to narrow down the choices. Then I took my best guess. Finally, I struggled to get it all printed on as few pages as possible in order to reduce waste and cost. When all was said and done this seemingly innocent request took hours of work.

Then, if that wasn't enough, I had to gather all the information together to be mailed. Much too often there was so much that I needed a large envelope or even two which, of course, required a trip to the post office for weighing and mailing. Try to work this all out in between work, home, school, kids, etc. Did I mention this can become a nightmare?

Why didn't someone warn me about the "TO DO LIST"? It didn't take long for this to get out of control fast. I had to do something or I would go insane! After 5 years of working on his TO DO LIST, I have developed 10 hard fast rules that I would like to share with you. These rules have greatly helped me keep my sanity as well as keep the peace between my loved one and me. They are:

1. I WILL GET THINGS DONE AS SOON AS I CAN – it may take a while, but I have a life out here that has its own demands on my time. PLEASE be patient.
2. No more than 10 things on the list at a time.
3. Absolutely **no research** for BUSINESS START UPS – (this is perhaps one of the most time consuming things I have ever done – and I only did it once!)
4. Without exception **NO PEOPLE SEARCHES**. You never know who the victim is. The last thing you want is to become involved in anything that might border on something criminal.
5. NO OUT-OF-COUNTRY CALLS. (Too expensive. I learned this one the hard way)
6. Make only ONE attempt to call/email an inmate's family or friend. If no one answers leave a message. Now it is up to them to call/email back if they choose to do so.
7. If I don't answer the phone the first time you call please consider it could possibly be that I'M BUSY. Call back in 20 – 30 minutes to give me a chance to finish what I am doing so I can give you my undivided attention.
8. All printing, for anyone other than my loved one, is done in black and white, fast draft/economy. Anything more will cost.
9. Don't be afraid to ask an inmate to help with the cost of excessive (5 pages or more) printing and mailing.
10. Make only 1 trip to the post office a week.

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**Oregon CURE Community Events for Adult Family Members and Friends of the Incarcerated:
If You're Attending for the First Time, Please Phone the Contact Person to Confirm the Location**

Intake Orientations:

Portland 2009:

6:30pm – 8:30pm
Hillsdale United Church of Christ
6948 S.W. Capitol Hwy
Register: (503) 977-9979
2010 Dates:
February 18
April 15
June 17
August 19
October 21
December 16

Salem 2009:

6:30pm – 8:30pm
Jason Lee United Methodist Church
820 Jefferson St NE
Register: (866) 357-CURE
2010 Dates:
January 21
March 18
May 20
July 15
September 16
November 18

Quarterly Release Orientations:

Washington County

5:30 – 7:00pm
2010 Dates:
February 3
May 5
August 4
November 3
Beaverton Community Center
12350 SW 5th, Ste 100
Beaverton, OR
(503) 846-3739 Eli (Washington County)
(503) 350-0236 Gretchen (Oregon CURE)

Marion County

6:30 – 8:30pm
2010 Dates:
February 9
May 11
August 10
November 9
Marion County Work Release Center
3950 Aumsville Hwy SE
Salem, OR 97317
(503) 540-8029 Lacey (Marion County)
(503) 350-236 Gretchen (Oregon CURE)

Monthly Support Groups:

Beaverton

1st Wednesday, 7-8:30pm
Beaverton Community Center
12350 SW 5th, Ste 100
(503) 350-0236 Gretchen

Central Oregon

Position Open for a
Group Facilitator

Eugene

1st Thursday 7-8:30pm
Private Residence
4745 Brookwood
(541) 935-1182 Ken
(541) 344-7612 Dave

Salem

1st Saturday 11am – 12:30 pm
The Christian Center of Salem
1850 45th Avenue NE
(503) 930-0330 Alicia

Medford

2nd Monday, 6:30-8pm
United Methodist Church
607 W. Main
(541) 944-3304 Sam
(541) 772-9680 Adelia

N. Portland (Site Change!)

4th Monday 6:30-8pm
Bureau of Environmental Services
Water Pollution Control Laboratory
6543 N. Burlington Avenue
(503) 350-0236 Gretchen

NE Portland

Coming Soon!

John Day

2nd Tuesday 6:30 – 8
Presbyterian Church of Mt.
Vernon

SE Portland

Coming Soon!

171 # Main St

(541) 932-4446 Julie

Community Resource Events Update

If your loved one will be released to Multnomah or Deschutes County, we're really happy to announce that release orientations are anticipated to begin within the first quarter of 2010.

We are close to beginning support groups in N.E. and S.E. Portland, we're working out the details at this time and hope to have these locations finalized within the next few weeks.

Our Central Oregon support group is in need of a facilitator. If you've attended this group or live in the area and would be able to volunteer for a couple of hours each month, please contact Oregon CURE at (503) 977-9979 or (866) 357-2873. The support groups in Eugene, Medford, John Day and Central Oregon are incredibly valuable to friends and families of Oregon's prisoners since Intake Orientations can be a logistical challenge!

Juvenile Life Without Parole - Is It Constitutional?

On November 9, 2009, the United States Supreme Court began hearings on two cases, *Sullivan v. Florida* and *Graham v. Florida* to decide if it is constitutional to sentence teens to life in prison without parole. According to a New York Times article from November 8, 2009, there are over 100 people in the world serving sentences of life without parole for crimes committed as juveniles in which no one was killed. All of these people are in the United States and seventy-seven are in Florida.

In 2005, the U. S. Supreme Court made the decision to stop the execution of juvenile offenders, "saying that people under 18 are immature, irresponsible, susceptible to peer pressure and often capable of change."

Lawyers for the two juvenile offenders from Florida, whose cases are being appealed, cited international law, according to "the United Nations Convention on the Rights of the Child, which prohibits sentences of life without parole for juveniles" as reported on May 5, 2009 in the New York Times.

In that same article, it stated that Human Rights groups report that there are more than 2,000 prisoners in the United States serving life-without-parole sentences for crimes committed when they were 17 or younger.

Research presented at the International Cure Conference in Geneva, Switzerland, this past summer, stated that there are currently 2,400 juveniles serving life sentences in the U.S. The only other country to have children serving such sentences is Israel, which recently changed sentencing to include the possibility of parole. Although eight other countries do not consider it against the law, there are no known cases where the sentence is imposed. The United States is therefore, the only country in the world to sentence children to die in prison.

At the end of the Geneva presentation by Anita Colón, the Pennsylvania State Coordinator, for the National Coalition for the Fair Sentencing of Youth, it was stated that if you support parole opportunities for juvenile offenders sentenced to life without parole you can write letters, send emails and make calls to your State Representatives, Senators, Governor, local media and religious leaders.

If you would like additional information or ways to get involved, you may contact Ms. Colón, at P.O. Box 5364, Springfield, PA 19064. She may also be reached at: anita_colon@activist.com.

Alternative Incarceration Programs

Alternative Incarceration Programs (AIP) are intensive prison programs offered by the Oregon DOC to selected persons in prison who are at risk of re-offending due to untreated addictions and criminal thinking. In 2003, the Oregon Legislature approved additional alternative incarceration programs that focus on alcohol and drug treatment along with cognitive behavioral change. Each person entering the DOC receives an individual corrections plan to address seven key criminal risk factors. Among those factors is alcohol and drug abuse. Eligible people are prioritized based on these risk factors and admitted into the appropriate program as space permits.

Qualified persons must apply to be accepted into any of the four AIPs: Men's cognitive restructuring, Women's cognitive restructuring, Men's alcohol and drug treatment and Women's alcohol and drug treatment.

Although other criteria may apply, basic qualifications to enter one of these programs are:

1. A judgment order that allows alternative incarceration programs
2. A qualifying offense (no mandatory minimum sentences or sentencing under another disqualifying law)
3. Classification level 1 or 2
4. Enough time remaining to complete the 270-day program
5. No open detainer that would still be in effect at the time of transitional leave
6. Ability to grasp the fundamental components of the program

Persons may be removed from AIP at any time for rule infractions, lack of effort or motivation, poor program progress or lack of positive change. People who fail any phase of an AIP or who voluntarily request to be removed from the program will return to regular incarceration to serve the balance of their sentences.

"The List" Continued from Page

Besides these 10 simple rules there are also a few pointers that could possibly make phone calls less stressful and hopefully more successful. They are:

1. Arrange for a convenient time for his call when you know you can give him your complete attention (see rule 7).
2. Always have pen/pencil and paper ready.
3. Keep **one** notebook to write the list in, so you can always easily find it. Keep it in the same place. Too many pieces of paper and post it notes create confusion and get lost easily.
4. If possible, be near, or better yet, already at a computer with an Internet up and running.
5. If you, like most of us, are on a tight budget, put a maximum dollar amount you are willing to spend a month on the "TO DO LIST" expenses.

It's not always easy juggling your time between all the demands you have at home with the additional demands of his TO DO LIST, nor is it easy setting these boundaries. Your loved one will frequently insist on knowing why this or that hasn't been done, and might even go so far as dump a guilt trip on you with "I must not be important to you any more." He frequently will not understand the impact his list has on you, your time, your energy and most importantly your finances. Nor will he realize that much of what he is requesting is not always as easy or convenient as one might think. But believe me, without mutual respect and boundaries your relationship can, and most likely, will suffer irreparable damage as anger and resentment are allowed to fester; all because of a little list. Though you understand his limitations to outside information and resources, the last thing you want is the LIST to become a heavy burden that constantly brings you down and becomes a point of contention between the two of you during every phone call.

Remember, that healthy boundaries help make healthy relationships. It's the one place where respect and courtesy have the opportunity to shine and sanity has a chance to become your reality. Good luck with your new adventure – the TO DO LIST.

Call For Volunteers

Oregon CURE is a volunteer-driven organization and we are looking for volunteers from all walks of life to fill positions in Outreach and Research. A few hours a month can make a difference to so many people who have been adversely affected by Oregon's criminal justice system. If you would like more information on our Volunteer Opportunities, please call CURE at (503) 977-9979.

From the Treasurer:

Through the generosity of our donors and the women at CCCF, we are able to continue mailing our newsletters and publications to any indigent inmates as requested.

We thank you greatly for your on-going support, which allows us to continue this important work.

To ensure you receive your copy of the Oregon CURE Newsletter, please remember to send us your change of address so we can update our database.

Oregon CURE asked our support group facilitators to speak with their members about what Oregon CURE and the support groups have meant to them. Here is a sampling of those letters we were so fortunate to receive. A very big thank you to our contributors and our compassionate facilitators.

"Cure meetings mean so much to me. When our young grandson was handed his sentence of 16 years, by a judge we felt was so partial and unfair we were devastated and alone with no place to turn for help. Cure has helped so much by giving us that place for support and understanding of what we were feeling. Also it gives us a chance to communicate with other families who are also dealing with the same feelings. It has helped us to realize how our legislature can make laws that don't work as intended. I feel so strongly that "measure 11" has got to be revised. I'm so grateful to those of you who give so much of your time and work so hard to help make the changes we need in our criminal justice system. Thank you again!!!!"

Dale and Mary

"I would like to say that I have found a lot of support from the CURE Meetings. Especially when I first started going. I have to say that my first meeting I was angry and looking for answers. Well, they couldn't really help with the angry side, but they listened. They understood. They really do care. In these meetings people pass on some wonderful information and helped me to understand how to deal with some of the issues. What to expect, how to deal with it, who to talk to about it, etc. Some examples of how they help: how to send money to our loved ones, how to be able to receive phone calls, how to and who to talk to about specific issues.

The people at these meetings understand that we are all going through a sense of grieving. They want to help. We need the help. We need the understanding. No judging, just support."

Thanks Oregon Cure, Sherri

"I believe that CURE made a huge impact on my life. It was such a comfort to hear and know others going through the same trials as we are. I could hardly wait to get to the meetings and it is hard for us to stop, as Alicia will testify to. I learned so much it is hard to know where to start. Since I was the mother and not the wife, I was not notified as to different situations such as the orientation meeting. I heard of it at CURE and then attended and found a great deal of information.

I took a brochure on CURE from Snake River when I went to visit my son. I then called and I was so pleased. I wish I had known about it sooner. One of the things I learned at CURE was that I was sending way too much money to my Son each month. I just figured that he needed this for supplies. There is no end to the amount of information I was given, numbers to call, places to contact, how to help and how not to help.

I could go on and on. My son was released Sept. 14th and is now in college trying to start a new life. He was able to be released to another County, which was his earnest desire. I can only pray that all will go well. They face many challenges but with Gods help I believe he will continue to make progress."

Thanks Cure, Donna

International CURE Continued from Page 1

Sylvester Uhaa, executive director of CURE Nigeria informed the attendees of how he came to work for criminal justice reform (by trying to build a church within a prison) and how this effort led him to working with prisoners. It is common for Nigerians to choose a prison sentence of 2-3 years as an alternative to paying fines of \$20.00 to \$30.00. Nigeria is in the heart of Africa; it is a rich nation that unfortunately has a huge population of the poor due to corruption within the country's government. The 5th International CURE convention will meet in Nigeria in February of 2011.

Each state chapter gave updates on their work with their legislators and their respective Department of Corrections. There is significant movement throughout the country to re-evaluate sentencing guidelines, with a close look at early releases in an effort to align the prison population with state corrections budgets.

Highlights of House and Senate Bills Before the 111th Congress:

S. 714 Establishes the National Criminal Justice Commission to undertake a comprehensive review of the criminal justice system; sponsored by Senator Webb. CURE is submitting a list of ex-offenders to serve as one of the eleven commissioners who would evaluate the current system. There are 35 co-sponsors and it is anticipated that this bill will be voted on, in the senate, before Christmas of this year. CURE also recommends that one of the commissioners should be someone concerned with sex offender issues.

S. 495 / H.R. 1412 The Justice Integrity Act of 2009 is supported by Vice President Biden and is designed to help restore public confidence and eliminate any bias in our criminal justice system. Returns equal protection under the law to the U.S. Justice system.

H.R. 3245 Sponsored by R. Scott and 47 co-sponsors, eliminates any distinction between penalties for crack and powder cocaine. This legislation passed in committee on a voice vote, without a request for a roll call vote.

H.R. 2979 Sponsored by Danny Davis and 27 co-sponsors, providing help to incarcerated fathers to become a responsible parent. Oregon CURE will send information on the parenting programs available to people in Oregon's prisons to International CURE.

H.R. 69 Sponsored by Jackson-Lee; reforms eviction from public housing in regard to those with felony convictions. This would most likely fall within S.714, the Webb commission.

H.R. 2138 / S. 902 Establishes Veteran treatment courts where veterans will be diverted from incarceration if they are willing to seek treatment in the community. This alternative would need the cooperation of prosecutors to view PTSD as an illness and would allow for appropriate treatment.

H. R. 738 Sponsored by R. Scott passed the House on 407-1 on 2.4.09; is up for re-authorization. State and federal prisons would need to report prisoner deaths or lose federal funding.

H. R. 1064 / S. 435 Sponsored by R. Scott; the Youth PROMISE Act provides evidence based practices of prevention and intervention relating to juvenile delinquency and gang activity.

H.R 1475 Sponsored by D. Davis restores former system of good time allowances for federal prisoners. The federal system is running at 140% of capacity and with an estimated 13,000 less staff members. Flexibility would be given to the Bureau of Prisons, 1475 would not open the floodgates, it would instead be a gradual implementation of legislation and would not damage their current structure. The process could include a release to a halfway house; and Second Chance Act funds could be utilized for re-entry use. Federal CURE will partner with the Bureau of Prisons to help in writing the criteria for the approval process and also to determine what the program would look like.

H.R. 2209 Sponsored by Hastings currently has 23 sponsors; continues Medicare, Medicaid and SSI for those in jail awaiting trial. Prisoners need to be included in the health care bill, and also need to be enrolled in Medicaid prior to release (should be added to each person's release plan). This is a common sense approach that will ensure that those who have been receiving medical treatment will continue.

H.R. 1133 Sponsored by Rush directs the Federal Communications Commission to consider prescribing rules regulating prisoner telephone service rates. CURE has been working on the Equitable Telephone Connections Act since 1999. The majority of states now offer less expensive phone calls from prisons to families and friends; we are hopeful Oregon will join in!

S. 650 Sponsored by Feingold abolishes the federal death penalty.

H.R. 329 Sponsored by Lee repeals denial of food stamp eligibility to people who are ex-felons.

H.R. 3328 / S. 1468 Sponsored by Senator Webb reauthorizes the Workforce Investment Act with a section on increasing access to correctional education programs and added accountability.

Continued on Page 5

If you have an interest in helping to move any of these bills forward in this Congressional session, please write to your state senators and representative. It would be helpful if you would reference the bill number that you are writing about – and tell your lawmakers why the passing of these bills is a common sense approach to promoting a more effective criminal justice system.

Oregon's Senators:

Ron Wyden	Jeff Merkley
1220 SW 3rd Avenue	121 S.W. Salmon Street
Suite 585	Suite 1400
Portland, OR 97204	Portland, OR 97204

Oregon's Congressional Representatives:

Earl Blumenauer 3 rd District	Peter DeFazio 4 th District	Kurt Schrader 5 th District
729 N.E. Oregon Street	405 East 8 th Avenue	494 State Street
Suite 115	#2030	Suite 210
Portland, OR 97232	Eugene, OR 97401	Salem, OR 97301

Greg Walden 2 nd District	David Wu 1 st District
1051 NW Bond St.	620 S.W. Main Street
Suite 400	Suite 606
Bend, OR 97701	Portland, OR 97205



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If you would like to take advantage of this opportunity, please phone the branch at 503-257-6511.

Sincerely,

The Staff at West Coast Bank
122nd & Airport Way Branch
5083 NE 122nd Ave
Portland OR 97230
Tel 503 257-6511
Toll Free 800 895-3345
www.WCB.com

Cost of Care Reimbursement:

In the Summer 2009 edition of the Oregon CURE newsletter, we published an article co-authored by Oregon CURE and Oregon DOC; in which we outlined and explained the Cost of Care Reimbursement passed by the Oregon Legislature in 2001. The Cost of Care Reimbursement will be assessed in those instances where the inmate or the inmate's representative has cash assets or liquid reserves in excess of \$55,000 or the current cost of care for two years, whichever is greater.

The DOC notified stakeholders of a Notice of Intent to Amend; based on need; that would allow a released person 3 months transitional support or \$5,000. Oregon CURE requested an increase to 18 months transitional support. **We received notification on September 29, 2009; that the transitional support would be increased to 6 months or \$10,000.** The DOC also stated that part of their mission is to help offenders successfully transition back to their communities and that the offender's ability to live and work in that community is a critical element of that transition. The department will do their best to ensure that the balance between that need and the need to be responsible stewards of the taxpayers' dollars – is met.

We have been contacted by several families who had specific questions pertaining to cash assets and liquid reserves, and as we were advised by the DOC, there are many variables that affect the determination of charges, many variables of what would be considered for deductions and each set of circumstances is different for every individual. ORS 179.640(5) and (6) states:

(5) At any time during the person's stay at the state institution or within 36 months from the date the person is released, if the agency receives new financial information that shows a change in the person's financial circumstances, the agency shall consider the changed circumstances and issue a new ability-to-pay order.

(6) Orders issued after the person is released may not require the person to make payments toward the cost of care for more than 36 consecutive months following release. However, the agency may collect beyond the 36-month period any payments that became due but were not paid within the 36 months following release. Any remaining balance of full cost of care shall be collected as provided in ORS 179.740.

As we stated in our Summer 2009 newsletter, if you have questions or concerns regarding your personal situation, you may wish to contact an attorney to help you better understand the ruling.

From the Inside Out Continued from Page 9

This also includes these 5 components:

1. Education
2. Prevention
3. Early detection treatment
4. Continuity of care
5. Data

The jail health care needs are mostly drug and alcohol abuse; suicide; and acute trauma and at the prison level are geriatric care; emphysema; coronary care. The information shared that morning was extensive and in an effort to keep you informed we will continue this subject matter in our March, 2010 newsletter. We will provide more information from this forum and interview people who have been incarcerated and have first hand experience with health care within the prison/jail systems, in addition, we will provide information from advocacy organizations that assist those people releasing from prison into the community and where to go to obtain health care. The gist of the morning inspired us to have more community involvement to reduce recidivism; partner to educate; willingness to share information that will be beneficial within our own organizations and those in the community. We hope you found this first segment informational. We wish to thank Max Williams for giving us his presentation to share with you, Vanetta Abdellatif, Robert Fentress, Rodney Holliman and David Rogers for their insight and commitment to correctional health care.

From the Inside Out: Correctional Health Care and Public Health

Each month, Oregon Health Forum gathers the leaders in health care to discuss a salient health policy topic. We were able to attend November's breakfast forum topic, which was the first ever, forum they have conducted on correctional health care. It was encouraging to see a diverse group of over 75 people in attendance, from doctors, law enforcement, insurance companies' community health centers and advocacy organizations. The response was very positive and in speaking with the Interim Director of Oregon Health Forum, Jennifer Smith, another session might be planned for the future.

The session was moderated by *Max Williams*, the Director of the Oregon Department of Corrections and comprised of four distinguished panelists. They included *Vanetta Abdellatif*, Director of Integrated Clinical Services for the Multnomah County Health Department, *Robert Fentress*, Housing Rapid Response Case Manager for Central City Concern, *Rodney Holliman*, President of Community Corrections for Prison Health Services, Inc. and *David Rogers*, Executive Director of Partnership For Safety and Justice. A significant portion of our state's budget is devoted to corrections, and within that, health services are a major component. Their discussions were about not only the cost drivers of these services, but their efficacy and connection to public health, after a brief presentation by each, a Q and A portion of the program gave the audience an opportunity to ask questions.

In Brief:

The Department of Correction's budget for 2009 - 2011 for Health Services equates to \$192,075,761.00. Mr. Williams stated that Mental Health services are a growing population as well as the age 60 and over group, which has tripled since 2005. In 2001, the average DOC population was 11,642 and in 2009, it is 13,781. The Department of Corrections currently employees 528 full time health care professionals. He further explained the top seven health service needs of the DOC and their role in providing not only primary medical care but also pharmacy services; dental care; specialty medical care; renal dialysis; infirmary care and licensed hospice.

Partnering with the community extends the services the DOC is able to provide. These services include specialty consults; emergency room services; admitting patients to the hospital and having an attending physician for hospitalized inmates as well as liaisons between hospitalized patient and tertiary/referring facilities. It was interesting to see the medical needs of the DOC outlined in this discussion and where they fall in terms of need by the inmate population they serve.

Medical Needs:

1. Mental Illness
2. HIV/AIDS
3. Respiratory Disease
4. Cardiovascular Disease
5. Dialysis
6. Diabetes
7. Over age 50 Care

Mr. Williams stated that he is part of the Governor's Re-entry Council, which address such issues such as continuity of care, health pre-screenings, and hand-off, which basically means, preparing the inmate for release with the proper medications they need before leaving prison. This usually means giving the inmate a 30-day supply of medications until they can be seen by a private doctor or community health center.

Partnering with the community is a vital role in seeking care for inmates as explained by Vanetta Abdellatif who stated that, "Jail inmates are part of our community; they are an extension of the Public Health System". Ms. Abdellatif oversees 3 correctional health sites (2 adult, 1 juvenile facility) within Multnomah County, which provides health care 7 days a week, 24 hours a day. The sites are comprised of 1,367 beds serving 34,000 adults and 5,000 juveniles of which 80 % male, 20% female. Their approach to health services is slightly different because 80% of the inmates are released within less than 30 days; or have terms one year or less; serve time close to home; multiple "admissions/discharges" of hundreds of mentally/medically unstable inmates daily. Unfortunately, 85% are repeat offenders with a recidivism rate of 49%. Public health in corrections includes nursing evaluation and treatment, medical services, behavioral health services, dental care, dialysis/IV therapy, referrals to hospitals and specialty care.

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Publication Notice

This newsletter is a publication of Oregon CURE. Oregon CURE is a 501 (c) (3) organization whose goal is to reduce crime through criminal justice reform.

The opinions and statements contained in this newsletter are those of the authors and do not necessarily reflect the views of Oregon CURE.

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2009 - 2010 Board of Directors

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Oregon CURE is an all volunteer organization. We appreciate the letters you send and do read them and we will make every effort to answer them all in a timely manner. Oregon CURE is not a service organization. Do not send us any legal documents. We do not offer legal services or provide legal advice.

Letter from the President

By Gretchen Vala

Dear Readers:

Thanksgiving is behind us; and yet we can all continue to be thankful for the generosity and kindness of people inside and outside of the prison system. Oregon CURE was the recipient of handmade jewelry from four women currently in custody with the DOC at Coffee Creek Correctional Facility. Melanie Schmid, Sharon Halstead, Suzanne Miles and Tammy Traxtle donated their supplies and time to design and make jewelry that Oregon CURE offered for sale at our annual meeting last September. We sold almost \$300.00 of earrings, bracelets, beaded bags and key chains. These funds will be earmarked to continue mailing our newsletters to indigent folks in Oregon's prison system.

I also wish to thank the staff at SRCI who took part in the planning and logistics of their 3rd "all day" visiting session on November 13th, 2009. My sister, Maureen and I juggled our work schedules and were able to attend this spectacular visiting opportunity and spend the day with my son. The "All Day" visit is the brainchild of Julia Baysinger, one of the case managers at SRCI. The morning visit begins at 7:50 a.m. and ends at 10:40 a.m.; and the afternoon visit begins at 12:15 p.m. to 3:45 p.m.; however, with the all day visit, people who have been signed up and paid \$2.00 for each persons lunch (by their loved one at SRCI) stayed in the visiting room, and received a PLENTIFUL bag lunch. Superintendent Nooth was available to meet with families as well as each of the counseling team. Although we never forget where we are, it is truly a golden opportunity to have the day ahead of you, spend quality time without watching the clock and eat a meal that is actually nutritious and so much better than the offerings available from the vending machines. My sincere gratitude and thanks go out towards the staff at SRCI who makes this event possible.

The holiday season is before us; and for those of us who have a loved one in prison or jail, it's a difficult time of year for all. There is always that special someone who is missing from our festivities on the outside; whether it be a family dinner, a school program or assisting with holiday preparations such as putting lights up and hauling ornaments and decorations down from the attic; or up from the basement! If your loved one is in driving distance, you are fortunate indeed; for those of us who make the trek to WCCF, SRCI, TRCI or EOCl, winter driving conditions may force us to forgo our visits till the weather in the mountain ranges is more conducive to a safer and less stressful drive. Please remember your loved ones during this time and stay in contact with them, letters and cards are precious and confirm that the person inside is in the thoughts and hearts of those on the outside.

Our annual appeal was recently mailed, if you have already responded with a donation, THANK YOU! We appreciate your support during these difficult economic times.

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We're on the Web!
Visit us at:
www.oregoncure.org

A Special Thank You !!!
On behalf of the Board of
Directors of Oregon CURE, we
would like to extend our
gratitude to all of our donors for
your generous support in 2009.
Your contributions continue to
help us all advocate for an
effective criminal justice system.
We appreciate your continued
interest.

I DO WANT TO HELP *OREGON CURE* CONTINUE ITS WORK IN 2010

Here is my tax-deductible contribution:

<input type="checkbox"/> \$3 Prisoner	<input type="checkbox"/> \$50 or more Organizations
<input type="checkbox"/> \$15/yr Individual	<input type="checkbox"/> \$ Other
<input type="checkbox"/> \$25/yr Family	

I would like to volunteer my services!!! My skills are:

Name:_____

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City/State/Zip:_____

Email:_____ Phone:_____

(Optional)
Name of Incarcerated Loved One:_____

SID # and Address:_____