

S. 2910. A bill to amend title XVIII of the Social Security Act to permit the expansion of medical residency training programs in geriatric medicine; to the Committee on Finance.

#### SUBMISSION OF CONCURRENT AND SENATE RESOLUTIONS

The following concurrent resolutions and Senate resolutions were read, and referred (or acted upon), as indicated:

By Mr. LOTT:

S. Res. 341. A resolution authorizing the printing of certain materials in honor of Paul Coverdell.

#### STATEMENTS ON INTRODUCED BILLS AND JOINT RESOLUTIONS

By Mr. BIDEN:

S. 2908. A bill to authorize funding for successful reentry of criminal offenders into local communities; to the Committee on the Judiciary.

##### THE OFFENDER REENTRY AND COMMUNITY SAFETY ACT OF 2000

Mr. BIDEN. Mr. President, today I am proud to introduce the Offender Reentry and Community Safety Act of 2000. I am introducing this legislation because all too often we have short-term solutions for long-term problems. All too often we think about today, but not tomorrow. It's time that we start looking forward. It's time that we face the dire situation of prisoners re-entering our communities with insufficient monitoring, little or no job skills, inadequate drug treatment, insufficient housing and deficient basic life skills.

According to the Department of Justice, 1.25 million offenders are now living in prisons and another 600,000 offenders are incarcerated in local jails. A record number of those inmates—approximately 585,400 will return to communities this year. Historically, two-thirds of returning prisoners have been rearrested for new crimes within three years.

The safety threat posed by this volume of prisoner returns has been exacerbated by the fact that states and communities can't possibly properly supervise all their returning offenders, parole systems have been abolished in thirteen states and policy shifts toward more determinate sentencing have reduced the courts' authority to impose supervisory conditions on offenders returning to their communities.

State systems have also reduced the numbers of transitional support programs aimed at facilitating the return to productive community life styles. Recent studies indicate that many returning prisoners receive no help in finding employment upon release and most offenders have low literacy and other basic educational skills that can impede successful reentry.

At least 55 percent of offenders are fathers of minor children, and therefore face a number of issues related to

child support and other family responsibilities during incarceration and after release. Substance abuse and mental health problems also add to concerns over community safety. Approximately 70 percent of state prisoners and 57 percent of federal prisoners have a history of drug use or abuse. Research by Justice indicates that between 60 and 75 percent of inmates with heroin or cocaine problems return to drugs within three months when untreated. An estimated 187,000 state and federal prison inmates have self-reported mental health problems. Mentally ill inmates are more likely than other offenders to have committed a violent offense and be violent recidivists. Few states connect mental health treatment in prisons with treatment in the return community. Finally, offenders with contagious diseases such as HIV/AIDS and tuberculosis are released with no viable plan to continue their medical treatment so they present a significant danger to public health. And while the federal prison population and reentry system differs from the state prison population and reentry systems, there are nonetheless significant reentry challenges at the federal level.

We need to start thinking about what to do with these people. We need to start thinking in terms of helping these people make a transition to the community so that they don't go back to a life of crime and can be productive members of our society. We need to start thinking about the long-term impact of what we do after we send people to jail.

My legislation creates demonstration reentry programs for federal, state and local prisoners. The programs are designed to assist high-risk, high-need offenders who have served their prison sentences, but who pose the greatest risk of reoffending upon release because they lack the education, job skills, stable family or living arrangements, and the substance abuse treatment and other mental and medical health services they need to successfully reintegrate into society.

Innovative strategies and emerging technologies present new opportunities to improve reentry systems. This legislation creates federal and state demonstration projects that utilize these strategies and technologies. The projects share many core components, including a more seamless reentry system, reentry officials who are more directly involved with the offender and who can swiftly impose intermediate sanctions if the offender does not follow the designated reentry plan, and the combination of enhanced service delivery and enhanced monitoring. The different projects are targeted at different prisoner populations and each has some unique features. The promise of the legislation is to establish the demonstration projects and then to rig-

orously evaluate them to determine which measures and strategies most successfully reintegrate prisoners into the community as well as which measures and strategies can be promoted nationally to address the growing national problem of released prisoners.

There are currently 17 unfunded state pilot projects, including one in Delaware, which are being supported with technical assistance by the Department of Justice. My legislation will fund these pilot projects and will encourage states, territories, and Indian tribes to partner with units of local government and other non-profit organizations to establish adult offender reentry demonstration projects. The grants may be expended for implementing graduated sanctions and incentives, monitoring released prisoners, and providing, as appropriate, drug and alcohol abuse testing and treatment, mental and medical health services, victim impact educational classes, employment training, conflict resolution skills training, and other social services. My legislation also encourages state agencies, municipalities, public agencies, nonprofit organizations and tribes to make agreements with courts to establish "reentry courts" to monitor returning offenders, establish graduated sanctions and incentives, test and treat returning offenders for drug and alcohol abuse, and provide reentering offenders with mental and medical health services, victim impact educational classes, employment training, conflict resolution skills training, and other social services.

This legislation also re-authorizes the drug court program created by Congress in the 1994 Crime Law as a cost-effective, innovative way to deal with non-violent offenders in need of drug treatment. This is the same language as the Drug Court Reauthorization and Improvement Act that I introduced with Senator SPECTER last year.

Rather than just churning people through the revolving door of the criminal justice system, drug courts help these folks to get their acts together so they won't be back. When they graduate from drug court programs they are clean and sober and more prepared to participate in society. In order to graduate, they are required to finish high school or obtain a GED, hold down a job, and keep up with financial obligations including drug court fees and child support payments. They are also required to have a sponsor who will keep them on track.

This program works. And that is not just my opinion. Columbia University's National Center on Addiction and Substance Abuse (CASA) found that these courts are effective at taking offenders with little previous treatment history and keeping them in treatment; that they provide closer supervision than other community programs to which