



Restorative Justice in Prison and Community Settings in Detroit

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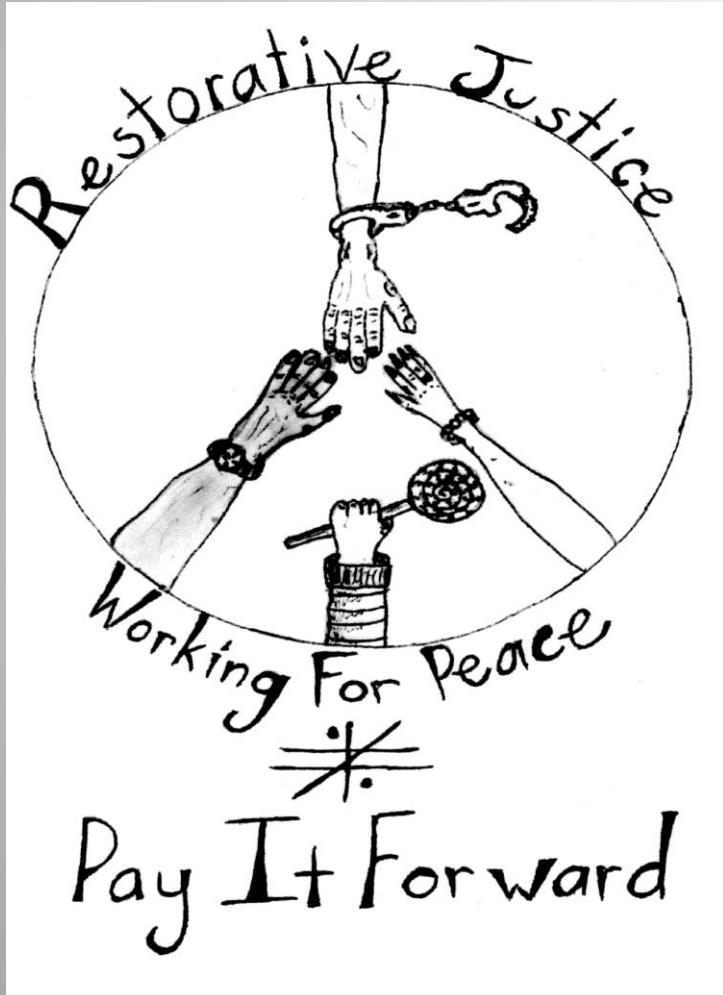


What is Restorative Justice?

- Restorative Justice (RJ) emphasizes repairing the harm caused or revealed by criminal behavior. It is best accomplished through cooperative processes that include all stakeholders.
- Practices and programs reflecting restorative purposes will respond to crime by:
 - identifying and taking steps to repair harm,
 - involving all stakeholders, and
 - transforming the traditional relationship between communities and their governments in responding to crime.

SOURCE: [RJ ONLINE](#)

What is the Michigan Theory Group?



- Grew out of Inside-Out Prison Exchange classes at UM-D, formed in 2008, consisting of both "inside" and "outside" members.
- **Organized series of public events**
 - Confined Minds: Incarceration Education Transformation 2010
 - Restorative Justice: From Theory to Practice February 2011
 - Restorative Justice: Working Together for a Safer Michigan, November 2011
 - RJ Summit at MRF, April 2015
 - Restorative Justice Training, 2013, 2016
 - Restorative Justice Classes at MRF, 2014-2016
 - RJ Summit II held November 2016

Background: RJ as Community Health

- A disproportionate number of incarcerated individuals come from poor urban areas, and many of these individuals return to the same neighborhoods. This may have a devastating impact on children (Clear 2008; Turney 2014)
- “The cycling of people between jails, prisons, and poor communities is a likely contributor to population health disparities” (Cloud, Parsons and Delany-Brumsey 2013, p. 389)
- “Case studies illustrate both how a restorative justice approach to drug abuse can be a catalyst for the confrontation of a profound community injustice and how confronting injustice can help tackle drug abuse” (Braithwaite 2001)

Restorative Justice, Restorative Practices and Public Health

From a public health perspective, Schmitz said, **restorative justice can be equated with “tertiary prevention,”** the aspect of public health that is a reaction to illness that currently affects a population. Likewise, restorative justice responds to crimes that have already occurred. **From this viewpoint, restorative practices correlate to primary and secondary prevention:** health programs that help to prevent disease and even make populations more resilient and healthy before sickness can strike. Restorative practices build social capital and relationships before harm occurs and reduce the number and severity of crimes, which hopefully makes it easier for people to heal.

[Restorative practices improve outcomes and relationships in criminal justice and education settings across Latin America](#)

Posted by Joshua Wachtel on May 27, 2014 in *Justice*

RESTORATIVE POCKETS

in Michigan

- Grand Rapids Juvenile Justice System
- Detroit Schools and Communities
- Detroit Area Restorative Justice Center
- Detroit Police Department & CeaseFire Program
- Teen Courts, Drug Courts, Community Courts

But what about the elephant in the room?

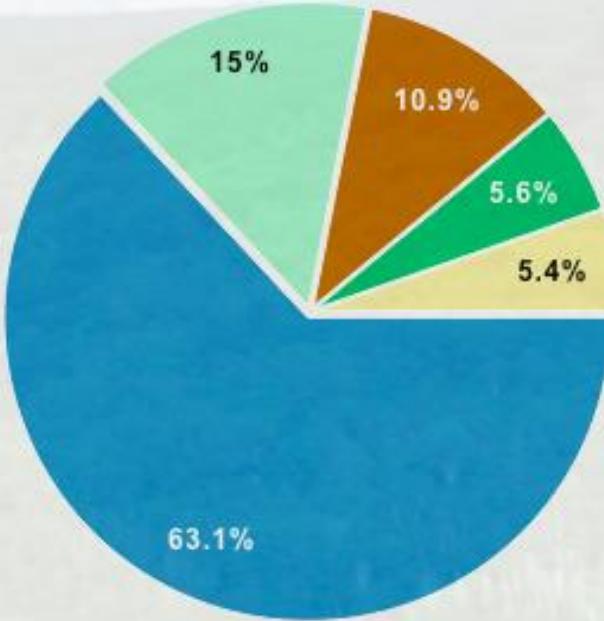


Michigan Department of Corrections (MDOC)

- Annual budget=approximately \$2 billion (2,040,521,700 in 2014)
- Persons incarcerated= 45,000
- Under correctional control (in the community)=60,000

Source: [Michigan Senate Fiscal Agency Report 2014](#)

Department of Corrections
FY 2015-16 Year-To-Date Gross Appropriations
by Program Area



Total Gross Appropriations: \$1,962,226,000

[Click to show/hide pie chart data table](#)

Program Areas	Dollar Amount	Percent
Correctional Facilities and Administration	\$1,237,550,400	63.1%
Prisoner Health Care	\$294,405,800	15.0%
Parole and Probation	\$214,633,700	10.9%
Prisoner Reentry and Community Support	\$110,400,300	5.6%
Other Programs	\$105,235,800	5.4%

MDOC RJ efforts

- 1. **RJ Effective Process Improvement & Communication team (EPIC)**
- 2. **RJ Research Consortium**
- 3. **Data Collection Efforts**
 - a. Victim awareness programs
 - b. Prison Fellowship Faith-based
 - c. Dog programs
 - d. Macomb Correctional
 - e. Inventory of elective programs/practices

Restorative Reentry Pilot Project: Community & Institutional Partners

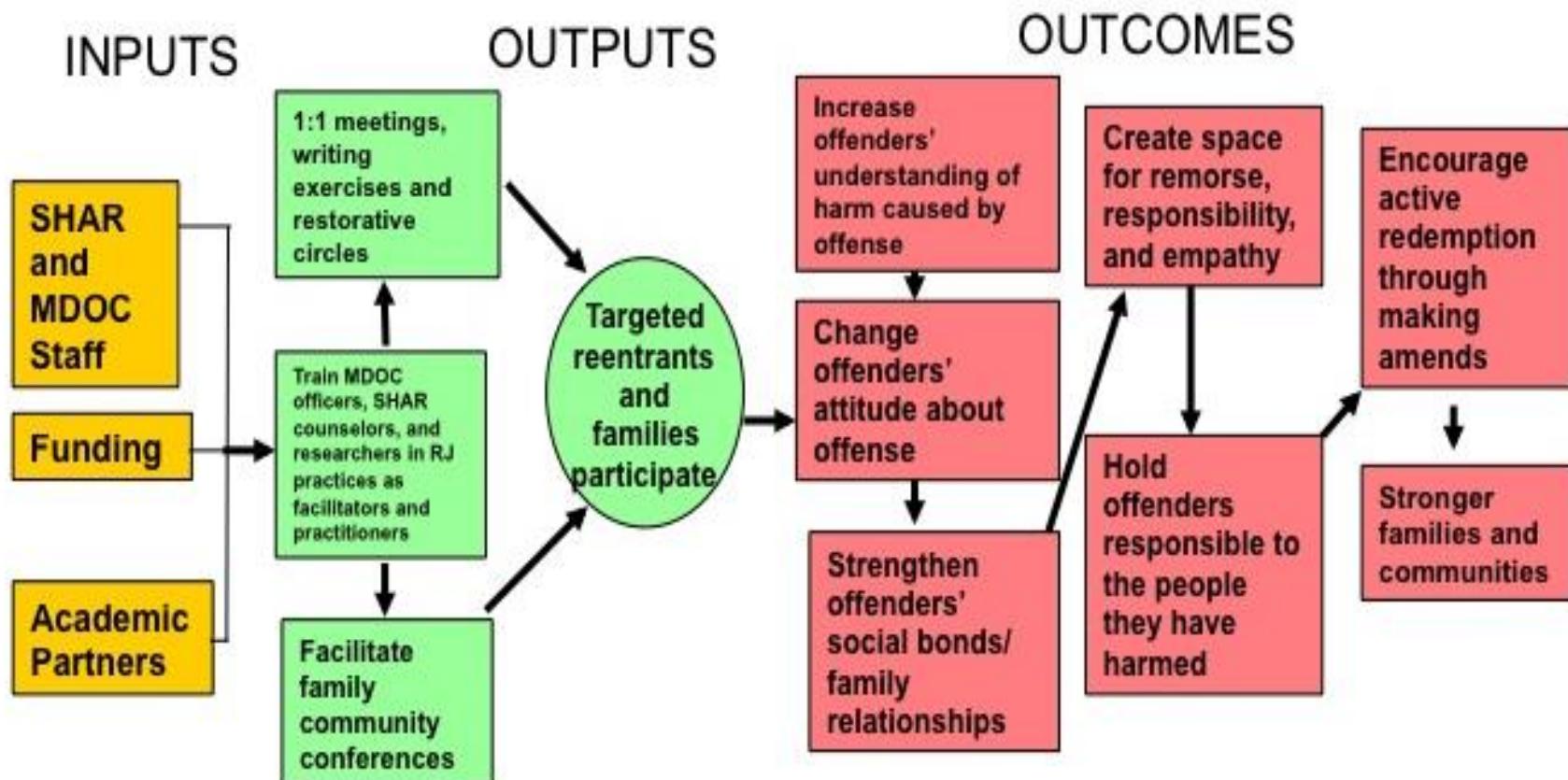
- University of Michigan-Dearborn (UM-Dearborn) faculty and students
- Michigan State University (MSU) Faculty
- Michigan Department of Corrections (MDOC)
 - Has had an existing relationship with involved faculty
 - Directors of MDOC have participated in three consecutive RJ summits
 - MDOC also had an EPIC committee that is focused on RJ
- Self Help Addiction Rehabilitation (SHAR)
 - A substance abuse treatment center and therapeutic community (TC)
 - Has expanded their mission to include reintegration of ex-offenders
 - Has also moved to address social determinates of addiction beyond its own facility and into local communities

Pilot Program Overview

- MDOC, SHAR and researchers teamed up to integrate Restorative Practices (RP) into SHAR programming that included MDOC-funded clients.
- Originally targeted SHAR residents returning to Detroit communities who had young children were initially recruited
- Later expanded to include all interested men and women at Detroit Reentry Center (DRC)

SHAR/UM-D Restorative Justice Impact Model

SITUATION: Combine the resources of SHAR, UM-Dearborn, UM-Ann Arbor, Michigan Department of Corrections, MSU Criminology Department and the Technical Assistance Center to address prisoner reentry and family reunification in the city of Detroit.



Preparing for the Program

- UM-Dearborn sponsored four RJ trainings, focused on facilitating restorative conferences
- Participants included:
 - MDOC administrators, parole & probation officers, supervisors & psychologists
 - SHAR treatment staff
 - Students and volunteers
 - Incarcerated men

Table 1 - WHOQOL-BREF domains

Domain	Facets incorporated within domains
1. Physical health	Activities of daily living Dependence on medicinal substances and medical aids Energy and fatigue Mobility Pain and discomfort Sleep and rest Work Capacity
2. Psychological	Bodily image and appearance Negative feelings Positive feelings Self-esteem Spirituality / Religion / Personal beliefs Thinking, learning, memory and concentration
3. Social relationships	Personal relationships Social support Sexual activity
4. Environment	Financial resources Freedom, physical safety and security Health and social care: accessibility and quality Home environment Opportunities for acquiring new information and skills Participation in and opportunities for recreation / leisure activities Physical environment (pollution / noise / traffic / climate) Transport

Participants Quality of Life

- Hawthorne, Herrman and Murphy (2006) found “that general norms for the WHOQOL-Bref domains were 73.5 (SD=18.1) for the Physical health domain, 70.6 (14.0) for Psychological wellbeing, 71.5 (18.2) for Social relationships and 75.1 (13.0) for the Environment domain.”

Participant	Overall QOL	Domain 1: Physical Health	Domain 2: Psychological Health	Domain 3: Social Relationships	Domain 4: Environmental Health
1	12	56	56	69	63
2	N/A	N/A	N/A	N/A	N/A
3	7	63	69	44	75
4	5	69	69	75	81
5	9	81	44	6	88
6	8	75	56	50	63
7	N/A	N/A	N/A	N/A	N/A
8	7	75	75	50	63
9	7	81	81	50	75
AVERAGE	7.9	71.4	64.2	49.1	72.6

Participant Responses during Initial One-on-Ones and Group Circles

The initial one-on-ones and RP circles consisted of standard restorative questions

- **What happened?**
 - “Not being there for [my] kids, not there for birthdays”
 - “My drug use, I don’t think it was fair”
- **What were you thinking about at the time?**
 - “I wasn’t thinking about nothing but myself”
- **What have you thought about since?**
 - “It irks me now. My kids. That’s all that be on my mind.”

Notes: (use back side of paper as well)

What happened

He remembers "I swear to god that
I wish you were dead"

What were you thinking

He felt he didn't have anyone's support
& he didn't care about his own life. \Rightarrow
& he didn't care how it would end
up.

What have you

What have you been thinking since

He shouldn't be able to say things like
that to his mother. He's your son \Rightarrow

I don't want anything to happen to her bad
~~I want to tell her that I'm sorry~~ I cherish
her"

Participant Responses during Initial One-on-Ones and Group Circles

- Who has been affected by your actions and how?
 - “There is a lot of guilt and shame, going to prison and going through this program....It put a lot of stress on my Mom. I can bet some of her health issues today are due to that stress. She doesn't eat right and she's dealing with these headaches every day. Its to the point now where she can't work and that's put a financial burden on the family. It creates problems in the family with my step Dad and little brother fight.”

Family Conferencing and Program Completion

- The process concludes with a family group conference (FGC), and establishment of restoration agreements between SHAR or DRC residents and their families
- Some of agreements made with families:
 - Abstinence from drugs and alcohol
 - Seeing children as much as possible
 - Staying away from bad people, changing surroundings
 - Volunteering or gaining and holding employment
 - Asking for help, building trust, admitting mistakes instead of hiding them
 - Maintaining involvement with children, i.e. calling on phone, being present at kids birthdays, etc

Impact of the Pilot Program

“I think it was cool. You know, it gave me a different view on how to, you know, problem solve with my family, with my immediate fiancé and me and the kids, you know what I’m saying? And you know, its not just play the blame game and stuff, and shift the blame on each other. Just really just sit and listen to what—they think and feel before I act on something.”

Impact of Family Group Conferences

Interviewer: Okay. So what aspects of that program did you find to be the most beneficial? Was the best part?

Interviewee: Basically uh hearin' they side of the story and want—and what they want outta me. That was the most, you know, profound. What they want me to do. And they willin' to sacrifice things in they life for me.

Follow up interview, 10/16

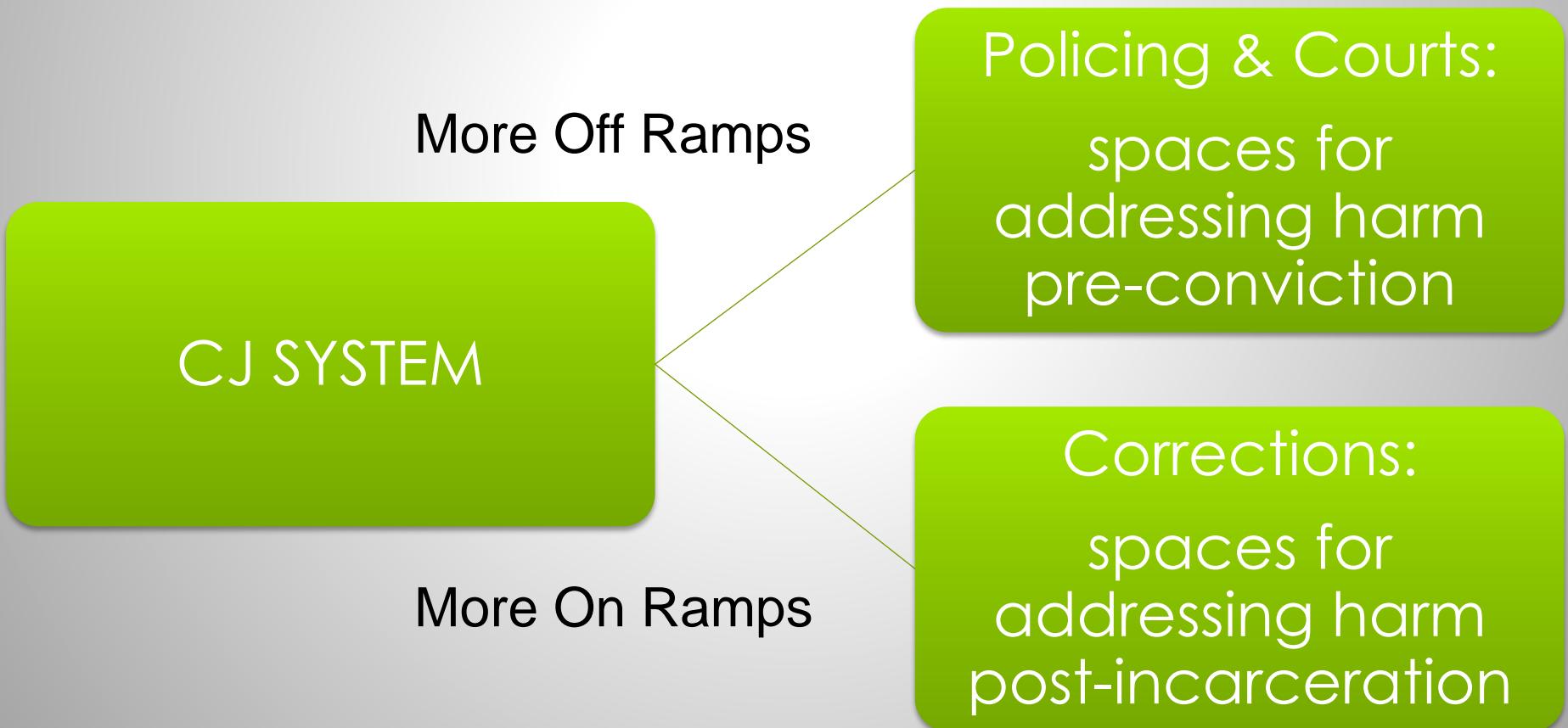
Impact of Family Group Conferences

Interviewee:

We have stuck to this contract to the T...I mean it. And that was the best decision I think I've ever made with them ever. Only for the fact, because like how we were talking in the conference, if there is a problem, we don't talk about it. We just ignore each other, throw it under the rug if we do reconnect, and never talk about it.

That was an opportunity for them to get out how I affected them with my addiction and how, you know, some of the things that they have made have affected me in a healthy way without putting hands on each other. You know, um, I think we're just kind of grown up now, you know.

Does RJ address Mass Incarceration?



POTENTIAL RESTORATIVE SPACES in CJ system

OFF-RAMPS

- Youth Deterrent & Prison Prevention Programs at Detroit Reentry Center (DRC)
- CeaseFire Program in Detroit
- Community Court and Street Outreach Court

ON-RAMPS

- Restorative Justice classes at Macomb Correctional Facility and Cooper Street
- Family Conferencing for Returning Citizens at SHAR Main, SHAR Macomb, and DRC



Participants in Inside-Out Prison Exchange Restorative Justice class
at Cooper Street Correctional Facility

LONG-TERM GOAL: align restorative practices to improve health, justice and quality of life CITYWIDE



“Making sure children are safe in their communities and successful in school....”



QUESTIONS?



Acknowledgments

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