

**Committee Name:**  
**Senate Committee –**  
**Judiciary, Corrections and Privacy**  
**(SC–JCP)**

**Appointments**

03hr\_SC–JCP\_Appt\_pt00

**Committee Hearings**

03hr\_SC–JCP\_CH\_pt00

**Committee Reports**

03hr\_SC–JCP\_CR\_pt00

**Clearinghouse Rules**

03hr\_SC–JCP\_CRule\_03–

**Executive Sessions**

03hr\_SC–JCP\_ES\_pt00

# Hearing Records

03hr\_ab0000

## 03hr\_sb0518

**Misc.**

03hr\_SC–JCP\_Misc\_pt00

**Record of Committee Proceedings**

03hr\_SC–JCP\_RCP\_pt00



## Legislative Fiscal Bureau

One East Main, Suite 301 • Madison, WI 53703 • (608) 266-3847 • Fax: (608) 267-6873

March 4, 2004

TO: Senator Carol Roessler  
Room 8 South, State Capitol

FROM: Chris Carmichael, Yvonne Onsager, and Paul Onsager

SUBJECT: Senate Substitute Amendment (LRB 0424/1) to Senate Bill 518: Treatment Alternatives to Incarceration

This memorandum provides a summary and discussion of the fiscal effect of a substitute amendment (LRB draft 0424/1) to Senate Bill 518, which would create a grant program for counties to establish programs to provide alternatives to prosecution and incarceration for criminal offenders who abuse alcohol or other drugs. The substitute amendment differs from SB 518, as introduced, with respect to the funding mechanism and the start date for grants.

In addition, this memorandum describes a grant program the Department of Health and Family Services (DHFS) currently administers -- the treatment alternative program -- which has similar objectives.

### **The Treatment Alternative Program**

Under the treatment alternative program (TAP), DHFS awards grants to counties to provide alcohol or other drug abuse services, as a treatment alternative in lieu of imprisonment, for eligible individuals who need these services. DHFS currently allocates a total of \$937,600 (\$196,300 GPR and \$741,300 FED) annually in TAP grants to three counties -- Dane, Eau Claire, and Rock Counties. DHFS is required to make the grants so that the program serves a variety of geographic locations. The federal funding is available under the substance abuse prevention and treatment (SAPT) block grant.

By rule (HFS 66), participating counties must use TAP grants to provide certain services, including assessment and treatment services, to persons likely to benefit from those services who are referred from the courts, law enforcement agencies, probation and parole agents, and other parts of the criminal justice system. A person is eligible for treatment if he or she: (a) is involved with

the criminal justice system as evidenced by a formal charge or diversion agreement, is charged with or convicted of a misdemeanor or a felony, or is currently or has previously been determined drug dependent as evidenced by the client's own testimony, medical or social histories from treatment agencies, a physical examination or a urinalysis or other laboratory test; (b) has given informed voluntary consent to participate, as evidenced by the person's signature on a written agreement to participate and to comply with TAP requirements, including the release of information for monitoring client participation and progress, that are detailed in the written agreement; and (c) if a parolee or probationer, under supervision of the Department of Corrections, is recommended as appropriate for participation by his or her probation and parole agent. Clients enroll in the program voluntarily.

TAP is based on a national treatment alternatives to street crime (TASC) project and uses a case management model to serve participants. This includes identification, assessment, client monitoring (including urinalysis), and coordination of client-appropriate treatment services. TAP can divert eligible offenders from the criminal justice system at any stage in the legal process. Most participants receive treatment services for a period of between six and nine months. TAP participants who violate the conditions of their criminal justice mandate or their TAP agreement return to the justice system for continued legal processing or sanctions. The three TAP programs in Wisconsin are based on the same model, but are structured to meet the needs of each participating county.

The program's objectives include: (a) reducing crowding in jails and prisons; (b) providing the justice system with offender information germane to policy development, program administration, as well as disposition to individual cases; (c) supplying additional supervision of clients; (d) establishing linkage with appropriate substance abuse treatment providers, increasing communication between the criminal justice and health care systems; (e) maintaining continuity of care for those in community corrections; (f) reducing costs to the community; and (g) increasing public safety by reducing criminal recidivism of substance abusing offenders.

### **Senate Substitute Amendment to Senate Bill 518**

The substitute amendment to SB 518 would direct the Office of Justice Assistance (OJA) in the Department of Administration to make grants to county departments that provide mental health, substance abuse, and developmental disability services to enable the county department to establish and operate programs, including suspended and deferred prosecution programs and programs based on principles of restorative justice, that provide alternatives to prosecution and incarceration for criminal offenders who abuse alcohol or other drugs. OJA would be required to collaborate with DHFS and Corrections in establishing this grant program.

A county department would be eligible for a grant if all of the following apply:

- The county department's program is designed to meet the needs of a person who abuses alcohol or other drugs and who may be or has been charged with or who has been convicted of a crime related to the person's use or abuse of alcohol or other drugs;

- The program is designed to promote public safety, reduce prison and jail populations, reduce prosecution and incarceration costs, reduce recidivism, and improve the welfare of participants' families by meeting the comprehensive needs of participants;

- The program establishes eligibility criteria, which would prohibit violent offenders from participating in the program. A violent offender would be defined as a person who has: (a) been charged with or convicted of an offense in the pending case and, during the course of the offense, the person carried, possessed, or used a dangerous weapon, the person used force against another person, or a person died or suffered serious bodily harm; or (b) one or more prior convictions for a felony involving the use or attempted use of force against another person with the intent to cause death or serious bodily harm;

- The program is consistent with the best practices in substance abuse and mental health treatment and provides intensive case management;

- The program uses graduated sanctions and incentives to promote successful substance abuse treatment;

- The program provides holistic treatment to its participants and provides them services that may be needed, as determined under the program, to eliminate or reduce their use of alcohol or other drugs, improve their mental health, facilitate their gainful employment or enhanced education or training, provide them stable housing, facilitate family reunification, ensure payment of child support, and achieve other objectives as determined by the local program;

- The program is designed to integrate all mental health services provided to program participants by state and local government agencies and other organizations. The program would require regular communication between a participant's substance abuse treatment providers and any probation, extended supervision, and parole agent assigned to the participant;

- The program provides substance abuse and mental health treatment services through providers that are certified by DHFS;

- The program requires participants to pay a reasonable amount for their treatment, based on their income and available assets;

- The program is developed with input from one or more circuit court judges, the district attorney, the state public defender, local law enforcement officials, the county department, other county agencies responsible for providing social services, including services relating to child

welfare, mental health, and the Wisconsin Works (W-2) program, Corrections, DHFS, private social services agencies, and substance abuse treatment providers; and

- The county department complies with other eligibility requirements established by OJA.

Grant recipients would be required to comply with state audits and to submit an annual report to OJA regarding the impact of the program on jail and prison populations.

Grants would be awarded on a calendar year basis, beginning on January 1, 2005. The grants would be supported with funding provided in the two new appropriations in OJA: (a) an annual general purpose revenue (GPR) appropriation for making grants to counties; and (b) a program revenue (PR) appropriation to receive funds from Corrections and DHFS to support the grant awards. The PR appropriation would be repealed on July 1, 2005.

The substitute amendment would authorize the Joint Committee on Finance to transfer funds in the 2003-05 biennium under s. 13.101 of the statutes from any PR or federal (FED) appropriation in DHFS or Corrections to the new PR appropriation in OJA. The substitute amendment would require OJA, by June 1, 2004, and in collaboration with Corrections and DHFS, to submit a request to the Joint Committee on Finance for the transfer of funds for the program. The proposal would specify the amounts that would be transferred for use as grants and for the administration of the grant program and the appropriations from which the funds would be transferred if the proposal were adopted.

The substitute amendment would require Milwaukee County to apply for a grant and, if the county's program meets the program requirements as stated above, OJA would be required to award a grant to Milwaukee County. When determining additional grantees, OJA would be required to give priority to counties that have the largest number of residents in state prison as a result of crimes or violation of extended supervision, parole, or probation relating to the abuse of alcohol or drugs.

Two or more county departments could jointly apply for, and receive a grant in which case they would include with their application a written agreement specifying each county department's role in developing, administering, and evaluating the program.

Under the substitute amendment, any county that receives one of these grants from OJA would be required to establish an oversight committee to advise the county department in the administration and evaluation of its program. The committee would include a circuit court judge, the district attorney or his or her designee, the state public defender or his or her designee, a local law enforcement official, and a representative from each of the following: (a) the county department and of each county social service agency, including child welfare, mental health, and W-2; (b) Corrections and DHFS; (c) private social service agencies; (d) substance abuse treatment providers; and (e) and other members as determined by the county department. If two or more counties jointly

receive a grant, representatives from each county department would be required to be on the oversight committee.

OJA would be required to assist a grantee in obtaining funding from other sources for its program. OJA would also be required to inform any county department that applies for a grant whether it meets the program requirements, regardless of whether the county department receives a grant.

Under current law, inmates in county jails are eligible to earn good time for good behavior. If an inmate violates any law or jail regulation or refuses to perform any duty lawfully required of him or her, the sheriff may deprive the inmate of good time. The substitute amendment would provide that good time would not apply to individuals who are confined in a county jail in connection with their participation in the substance abuse treatment program.

Under current law, if a person pleads guilty or is found guilty of possession or attempted possession of a controlled substance, the court must order the person to comply with an assessment of the person's use of controlled substances. However, an assessment would not be required by the court if the court finds that a person is already covered by or has recently completed an assessment or a substantially similar assessment. The substitute amendment would expand this exception to include a person participating in a substance abuse treatment program that meet the program requirements specified above, as determined by OJA. The program would not be required to be receiving a grant from OJA, but would need to be found by OJA to meet the program requirements.

The substitute amendment would specify that if a county department establishes an approved substance abuse treatment program and the program authorizes the use of electronic monitoring or day reporting programs, a court or a district attorney could require a person participating in an approved substance abuse treatment program to submit to electronic monitoring or to participate in a day reporting program as a condition of participation. An approved substance abuse treatment program would be defined as a program that OJA has determined meets the program requirements specified previously in this memorandum.

Under current law, a convicted offender is given credit toward the service of his or her sentence in prison for all days spent in custody related to the offense for which sentence was imposed. Days spent in custody include time spent while the offender is awaiting trial, being tried, awaiting imposition of the sentence, and/or being held as a result of a probation, extended supervision, or parole hold violation. If the offender is sentenced to the intensive sanctions program, sentence credit applies to the portion of the offender's sentence served in the community, and not to the imprisonment portion of the sentence. Under the substitute amendment, a convicted offender would be given credit toward service of his or her sentence for all days spent in custody as part of the substance abuse treatment program.

## **FISCAL EFFECT**

The substitute amendment would create an annual GPR appropriation and a continuing PR appropriation under OJA for grants for substance abuse treatment programs for criminal offenders, funded from moneys received from Corrections and DHFS. The PR appropriation would sunset on June 30, 2005. No funding is provided for the GPR appropriation, and no estimated expenditure authority is identified for the PR appropriation.

Since counties would be responsible for the size and design of the program, it is unknown how much funding would be needed for grants or how many counties would apply. However, the substitute amendment would require Milwaukee County to apply for a grant and require OJA to make a grant to Milwaukee County after ensuring that the grant request meets the statutory requirements. Further, in making grant awards, OJA would be required to give priority "to counties that have the largest number of residents in the state in prison as the result of crimes or violations of extended supervision, parole, or probation relating to the abuse of alcohol or other drugs." The number of counties that would receive grants and the size of the grants is dependent on the amount of funding that is available for grant awards.

In order to provide initial program funding, the draft would create a non-statutory provision under which OJA, in collaboration with Corrections and DHFS, would submit a proposal by June 1, 2004, to the Joint Committee on Finance for the transfer of funds from Corrections and DHFS to the grant appropriations. Further, the draft would authorize the Committee, during the 2003-05 biennium, to transfer funds from any PR or FED appropriation in Corrections or DHFS to the grant appropriation. GPR could be transferred to the new GPR grants appropriation under current law authority. Pursuant to the transfer, the Committee would not be required to make any of the findings specified under s. 13.101(3)(a), including: (a) an emergency exists; (b) no funds are available for such purposes; and (c) the purposes for which a supplemental appropriation is requested have been authorized or directed by the Legislature. Funds transferred to OJA, as approved by the Committee, would need to be expended by OJA during 2004-05. To the extent that other sources of funding are available to the counties for the grants and participants are able to pay for their treatment, the amount of funding transferred may be reduced and/or additional individuals may be able to participate in the treatment programs.

Initial funding for the program would be provided through the transfer of moneys from Corrections and DHFS. Grants would be provided on a calendar year basis, beginning on January 1, 2005. This start date for the program would allow the affected agencies time to determine amounts and sources of funding, develop and establish eligibility requirements, and review grant proposals. Given that the program would be established during the 2003-05 biennium, funding beyond June 30, 2005, would be addressed by the administration and the Legislature during the 2005-07 biennium budget deliberations. Based on initial grant experience, OJA, Corrections, and DHFS would be able to estimate future funding needs.

We hope this information is useful. Please contact us if you have any further questions.

CC/YMO/PO/sas



## WISCONSIN CATHOLIC CONFERENCE

TO: Members of the Assembly Committee on Corrections and the Courts

FROM: John Huebscher, Executive Director

DATE: March 5, 2004

RE: SB 518—Alternatives to prosecution and incarceration for drug and alcohol offenders

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On behalf of the Wisconsin Catholic Conference, I wish first of all to thank Senator Carol Roessler and other sponsors of this legislation. We are well aware of just how complicated it is to call for such a profound change in our correctional system.

The Conference strongly supports the changes proposed in Senate Bill 518 and its companion, Assembly Bill 923, because they are consistent with the principles outlined in 1999 by Wisconsin's Catholic bishops in their publication, *Public Safety, the Common Good, and the Church: A Statement on Crime and Punishment in Wisconsin*.

In their statement, the bishops posed the question, "is a policy of allocating so many resources to locking people up without reforming them good stewardship which furthers the common good?" The Department of Corrections estimates that it costs an average of nearly \$26,000 per person to incarcerate close to 22,000 men and women. The amount of money spent is all the more striking when one considers the high recidivism rate. Clearly the current system is largely unable to help ex-offenders pursue lawful and productive lives.

SB 518 offers better options to help offenders reform their lives, not only with their AODA needs, but also with their more comprehensive needs for mental health treatment, employment, housing, and family reunification.

This holistic, community-based treatment approach makes it possible to reunite the offender with the supportive institutions of churches, neighborhoods, and schools—all of which will help foster that sense of solidarity and common good that is so central to effective rehabilitation.

Let's be clear about what this bill does and does not do.

It does not provide a free ride to offenders. To the contrary, it provides graduated sanctions and incentives to hold offenders accountable and it mandates that participants pay a reasonable amount for their treatment, based on their financial resources.

SB 518 does make this treatment available to the poor, who all too often cannot afford good treatment programs. This is especially the case for minorities, who make up fifty percent of our state prison system.

Moreover, in most cases, it is only in successful treatment programs that drug and alcohol offenders truly come to grips with the harm they have inflicted on themselves and on others. In this way, treatment requires far more effort from the offender and is far more likely to be effective than incarceration.

As the bishops pointed out in their statement, "Reconciliation and restoration are not possible unless those rightly convicted of crimes accept the responsibility for what they have done and acknowledge that their crimes had consequences for others. Neither is restoration possible if law abiding citizens cannot set aside their pain and righteousness in favor of making the community whole again."

SB 518 takes the crucial step toward making offenders and the community whole again. We ask you to support it.

Thank you.

*Edward S. Friedrichs, M.D.*

INTERNAL MEDICINE

SLEEP MEDICINE – SUBSTANCE ABUSE

DIAGNOSIS & THERAPEUTIC PLANNING

March 5, 2004

8076 N. 64TH ST.  
BROWN DEER, WI 53223  
(414) 355-7100

Dear Chairman and Members of the Senate Judiciary Committee:

Thank you, Senate Chairman and members for this opportunity to support Senate Bill 518 which must be passed in this current session of the Legislature, in order to have an immediate impact upon our burgeoning Corrections budget and the medical/behavioral needs of thousands of our incarcerated, and to be incarcerated citizens, throughout the State.

I am a recently retired physician from Milwaukee County, who practiced Internal Medicine and taught with the Department of Psychiatry of the Medical College of Wisconsin (then Marquette University Medical School) since 1964. Because of my intense interest in the brain, behavior and substance abuse, for the final twelve years of my career, I practiced full time Addiction Medicine and am certified by the American Society of Addiction Medicine.

During those twelve years I served consecutively at the Zablocki Veterans Administration Medical Center, the Mental Health Center of Milwaukee County, DePaul Hospital and Bethesda Nursing Home for the addictions, and as a half-time medical doc at the Kettle Moraine Correctional Institution near Plymouth, as well as voluntary service at a Half-Way House on the near north side and a small office on Capitol Drive in Milwaukee. It was a profoundly absorbing and satisfying experience. Of those four Drug Treatment Programs in Milwaukee, only one, the VA drug treatment ward is still in existence. The others have been abandoned and closed. In these past eight years we have totally lost an essential government commitment to the welfare of thousands of uninsured human beings suffering from the disease of addiction, not to mention their families and children. To me it is incredible for Milwaukee and Wisconsin to neglect this world-wide public health problem. Our neighbor State of Minnesota is not nearly so cavalier, indeed stingy, in its commitment to the general welfare and health of its citizens.

It has been repeatedly scientifically proven that Addiction Treatment Works. It has never been proven, much less even suggested, that incarceration, punishment, separation from family and community, abandonment and humiliation by the greater society works to relieve the Diseases of Addiction and Brain Disorders and Mental Illness. It is high time to correct this naïve and short-sighted travesty.

The public, your constituents, must realize that while we are incarcerating hundreds of non-violence drug offenders each month, we are at the same time releasing hundreds back into society each month without providing enough treatment inside the prisons and jails nor offering, indeed, ensuring treatment once they leave prison. What do we expect to happen? One observation I made at Kettle Moraine, was that the more nearly healthy addicts, once incarcerated and caught up on their sleep, nutrition and physical health thought they had their “addiction” beaten, BUT once they step out the door, the whole

dynamic changes, stress and craving recur promptly, and relapse, the name of the game of the addiction process, can occur. Only the opportunity to continue a graduated Treatment Program can support sobriety and spiritual growth, for the great majority of these individuals. Only the re-adaptation to the family, community and everyday stress can perpetuate sobriety. The sooner that treatment process begins and the longer it lasts the better.

You do not help teach people to avoid substance abuse by using incarceration to prohibit exposure. As all of you know by worldly experience, substance abuse in any human society is here to stay. No society and culture has prevented experimentation with mind-altering substances. Indeed, our medical doctors and pharmaceutical houses are promoting "mind-altering" drugs every day in their offices and TV ads. Although substance abuse is "tried out" by 70-80 percent of the population, only 15-20 percent are at danger of the disease of addiction. Most healthy people find it unsatisfying and self-defeating. We need to identify that 15-20 percent early on, in our schools, hospitals, jails and prisons, before the stigmata of addiction destroy lives and families and the next generation. Government, and you and I as concerned citizens, must take a leading role in this identification and begin to ensure treatment opportunities early on.

While this group WISDOM held a generous rally on the steps of the Capitol last week, I was having lunch with a County Community Clinic drug treatment group in, begging for "their own addictionist," but denied by the Medical Director due to lack of funds. These dedicated practitioners of addiction treatment felt seriously neglected by their leadership.

This Bill #518 is a necessary beginning. It has the potential of providing moneys and expanding career opportunities for doctors, psychologists, social workers and addiction counselors profoundly interested in the phenomena of addiction to use their skills, learn more how to intervene in the addiction process successfully and teach society we are not willing to abandon those less successful in their battle for life, liberty and the pursuit of happiness. I ask especially that experienced and dedicated medical and neuropsychiatric doctors (I emphasize "neuro" because we have so much to learn about the susceptibilities to addiction by examining the brain) be professionally encouraged to have the facilities and time to thoroughly evaluate newly diagnosed addicts, in schools, treatment programs, jails and prisons, learning new ways of channeling addicts into proper, successful treatment avenues. There are many "kinds" of addicts and we need to learn the most effective, least expensive way to provide their needs to become sober citizens in our communities.

Thank you again for this opportunity to support Bill 518 and ask for its immediate passage. I would appreciate for any comments or questions you may have.

Sincerely and Respectfully submitted,

Edward S. Friedrichs, M.D.



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## MEMORANDUM

TO: Honorable Members of the Senate Committee on Judiciary, Corrections and Privacy

FROM: Sarah Diedrick-Kasdorf, Senior Legislative Associate *SDK*

DATE: March 5, 2004

SUBJECT: Support for Senate Bill 518

The Wisconsin Counties Association (WCA) supports Senate Bill 518 which creates a grant program for counties to provide alternatives to prosecution and incarceration for persons who abuse alcohol or other drugs.

Over the past several years, counties across Wisconsin have been dealing with the issue of jail overcrowding. In fact, the vast majority of counties have expanded their jail capacities to deal with an influx of inmates sent to county jails for a variety of offenses. All counties across the state have been attempting to find alternatives to incarceration for those inmates appropriate for community programming.

Counties study the characteristics of their jail populations for a variety of reasons, including programming, future expansion needs, etc. Counties have come to find that the majority of their inmates have issues related to substance abuse and/or mental illness. WCA has spoken with numerous county elected officials from across the state that wish to provide programs to assist jail inmates in coping with their addictions while in jail; however, in this current fiscal climate, it is difficult for counties to fund such programs at the local level. As a result, many of these inmates leave our county jails only to reoffend, and many eventually end up in the state prison system.

Senate Bill 518 will assist counties in creating programs that provide alternatives to prosecution and incarceration for persons who have alcohol or other drug addictions. The bill creates a new program, administered by the Office of Justice Assistance, that will provide grants to county departments which currently provide substance abuse treatment services.

It is our understanding that initially the grant program will be piloted in 3-5 counties,

Page 2  
WCA Memorandum  
March 5, 2004

including Milwaukee County, and provides flexibility to those counties participating in the program to tailor their programs to the needs of their county. The bill also requires counties that receive grants to create an oversight committee to advise the county department in administering and evaluating the program. Many counties have already created committees similar to the one required in the bill to study criminal justice issues at the county level, including an examination of alternatives to incarceration and treatment programs for offenders.

The only question WCA has related to Senate Bill 518 is the source of funding for the grant program. Again, it is our understanding that an application will be made to the federal government for monies through the Access to Recovery Grant program. Some counties are concerned that funding this program may reallocate dollars that could be utilized for individuals currently waiting for services at the county level. As the bill does not specify a particular funding source, this issue can be addressed at the time the Joint Finance Committee allocates dollars to the newly created appropriation.

WCA respectfully requests your support for Senate Bill 518.

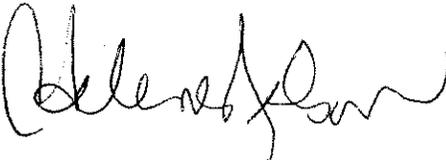
Thank you for considering our comments.



State of Wisconsin  
**Department of Health and Family Services**

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Jim Doyle, Governor  
Helene Nelson, Secretary

DATE: March 5, 2004  
TO: Committee on Judiciary, Corrections and Privacy  
FROM: Helene Nelson   
SUBJECT: Senate Bill 518

Thank-you for hearing Senate Bill 518, which creates a structure for grants to counties to provide alternatives to prosecution and incarceration for people who abuse alcohol or other drugs.

I commend Senator Roessler and other leaders who worked to develop this bill with bipartisan support and substantial input from a wide range of experts.

Before returning to state government this year, I spent nine years working for a county. During that time, I worked closely with our sheriff, judges, substance abuse treatment professionals, successive county executives and county board members to develop successful programs of community supervision and treatment in lieu of jail. From this experience, national research and other model programs around the state and country, I am firmly convinced that these programs can be successful and cost-effective.

We all want to keep our communities safe. I believe that these programs will help make communities safer by reducing the repeat cycle of crime and jail or prison time associated with people whose untreated substance abuse contributes to their criminal offenses.

In my current role as Secretary of Health and Family Services, I pledge my continued cooperation with legislators, counties and others to help design effective treatment and supervision programs as alternatives to incarceration. I will also work hard to secure federal or other grants, or to allocate existing resources, for this purpose.

Thank-you again.

**Wisconsin.gov**

Testimony before the Committee on Judiciary, Corrections and Privacy  
Wisconsin State Senate

SB 518

Re: LRB 3289/1, "The Substance Abuse Offenders Accountability & Public Safety Act," relating to grants to counties for providing alternatives to prosecution and incarceration for persons who abuse alcohol or other drugs, and making an appropriation.

Mr. Chairman and Members of the Committee:

My name is Fr. John Celichowski. I am currently Pastor of St. Benedict the Moor Parish in Milwaukee, where I also serve as the Chair of the Detention Committee of the Benedict Center, a member of the Community Advisory Board for the Milwaukee Secure Detention Facility (MSDF), and a volunteer chaplain at the Milwaukee County Jail and MSDF. In addition, as a member of the State Bar I have provided limited legal advice to members of MICAH and WISDOM who, over the past two years, have worked with members of the Senate on this legislation.

If you want to discover what's wrong with our current criminal justice system and why we need this legislation, I invite you to stand with me on the corner of 10<sup>th</sup> and State Streets in downtown Milwaukee, half a block from our church. On the Southeast corner is the Milwaukee County Jail, which currently holds roughly 1000 inmates. On the Northeast corner, on the site of what used to be St. Anthony Hospital—a place of healing and hope—is the Milwaukee County Community Corrections Center, a work release center that currently houses over 400 inmates. On the Northwest corner, where Marquette High School and later the St. Benedict the Moor School stood as institutions of learning and opportunity for over a half century, is the Milwaukee Secure Detention Facility. Like the Jail, it currently holds around 1000 inmates.

Within a half block of our church, then, we have three correctional facilities that are housing roughly 2400 inmates—including many nonviolent offenders who could probably benefit from this legislation—at a tremendous cost to the taxpayers of Milwaukee County and the State of Wisconsin. Currently, there are over 21,000 men and women in our state's prisons. Another 68,000 are on probation and parole; and many of them risk revocation and re-incarceration due to untreated substance abuse problems.

Lawmakers here in Wisconsin and throughout the nation are well aware of the benefits of appearing to be "tough on crime." In recent years, you and the citizens of this State have also begun to realize the tremendous and ultimately unsustainable costs—both human and financial—of those decisions. This legislation, The Substance Abuse Offenders Accountability & Public Safety Act, give us the opportunity to be not only tough but also *smart* on crime by addressing a significant factor in criminal behavior and by providing people with the opportunity to recover from their addictions, take personal responsibility for their conduct, and become productive citizens. I urge you to support this legislation.

March 5, 2004

Dear Senators,

We appreciate your commitment to justice in our state. Here is some supporting documentation for SB 518.

MN and WI have very similar populations (approx 5 million each) and demographics. The figures from the US Census Bureau 2001 WI - 5.4 million people and MN - 5.0 million people. They also have very similar rates of violent crime, see attached file 01-BJS Violent Crime WI MN. The prison and jail populations are fundamentally different:

#### WISCONSIN

22,000 in state prison  
11,800 in county jail  
Corrections Budget of \$ 1,000 million p.a.  
Highest African-American Incarceration Rate in Country > 4% of Pop (National Avg 2.2%)

#### MINNESOTA

7,000 in state prison  
5,500 in county jail  
Corrections Budget of \$ 400 million p.a.

THE DIFFERENCE BETWEEN MINNESOTA AND WISCONSIN IS COMMUNITY CORRECTIONS OF WHICH SB 518 IS AN EXCELLENT START.

Sources of data:

(1) 02-BJS Prison Pop WI MN shows the state prison populations in MN and WI from 1977 to 2001 - source Bureau of Justice Statistics and states own DOC websites

MN - <http://www.doc.state.mn.us/aboutdoc/statistics/adultprofile712002.htm>

WI - [http://www.wi-doc.com/index\\_adult.htm](http://www.wi-doc.com/index_adult.htm)

(2) County Jail Pop BJS shows the avg daily population of county jails in MN and WI in 1999 - source Bureau of Justice Statistics. 1999 is the most recent year I can find data for both states to compare them, WI actually had an average daily population of 13,600 in 2002/2003 but I have not found the corresponding figure for MN for this year.

(3) BJS Mid Yr Bulletin 2001- This Bulletin contains the information about WI having the highest incarceration rate for African Americans in the country. Refer to Table 16 on Page 13 of the report.

(4) Dept of Corrections budgets:

MN <http://www.doc.state.mn.us/aboutdoc/statistics/budget.htm>

WI [http://www.doa.state.wi.us/debf/doc\\_view2.asp?budid=11](http://www.doa.state.wi.us/debf/doc_view2.asp?budid=11)

I also address your attention to a study done by the Rand Corporation in 1994. It was commissioned by a number of agencies including the US Army. Attached is a summary of the study on the costs related to reducing drug consumption by means of different policies. I highlight the important finding of the study on page 4 - that \$1 spent on treatment has the same effect on reducing drug consumption as spending \$7 domestic law enforcement.

We appreciate your efforts in bringing justice to our city, county and state. Please contact me if you have any questions or if we can be of help in progressing this agenda forward.

Sincerely

Conor Williams  
Co-chair of WISDOM TIP Committee  
Cell: 262-442-4646

Violent crime total

Year	MN	WI
1960	1,435	1,261
1961	1,505	1,268
1962	1,674	1,174
1963	1,983	1,312
1964	2,601	1,762
1965	3,074	1,911
1966	3,691	1,984
1967	4,727	2,948
1968	5,111	3,400
1969	5,253	3,411
1970	5,782	3,792
1971	5,993	3,957
1972	6,798	4,358
1973	6,926	5,273
1974	8,119	6,411
1975	8,125	6,992
1976	7,492	6,345
1977	7,705	6,117
1978	7,601	6,184
1979	8,973	7,839
1980	9,250	8,546
1981	9,344	8,904
1982	9,062	9,077
1983	7,909	9,070
1984	8,802	9,367
1985	10,751	9,880
1986	11,991	12,339
1987	12,118	12,014
1988	12,490	10,414
1989	12,549	10,834
1990	13,392	12,948
1991	14,006	13,723
1992	15,144	13,806
1993	15,986	13,321
1994	16,397	13,748
1995	16,416	14,399
1996	15,782	13,039
1997	15,827	13,988
1998	14,656	13,009
1999	13,085	12,908
2000	13,813	12,700

Notes: When data are unavailable, the cells are blank or the year is not presented.

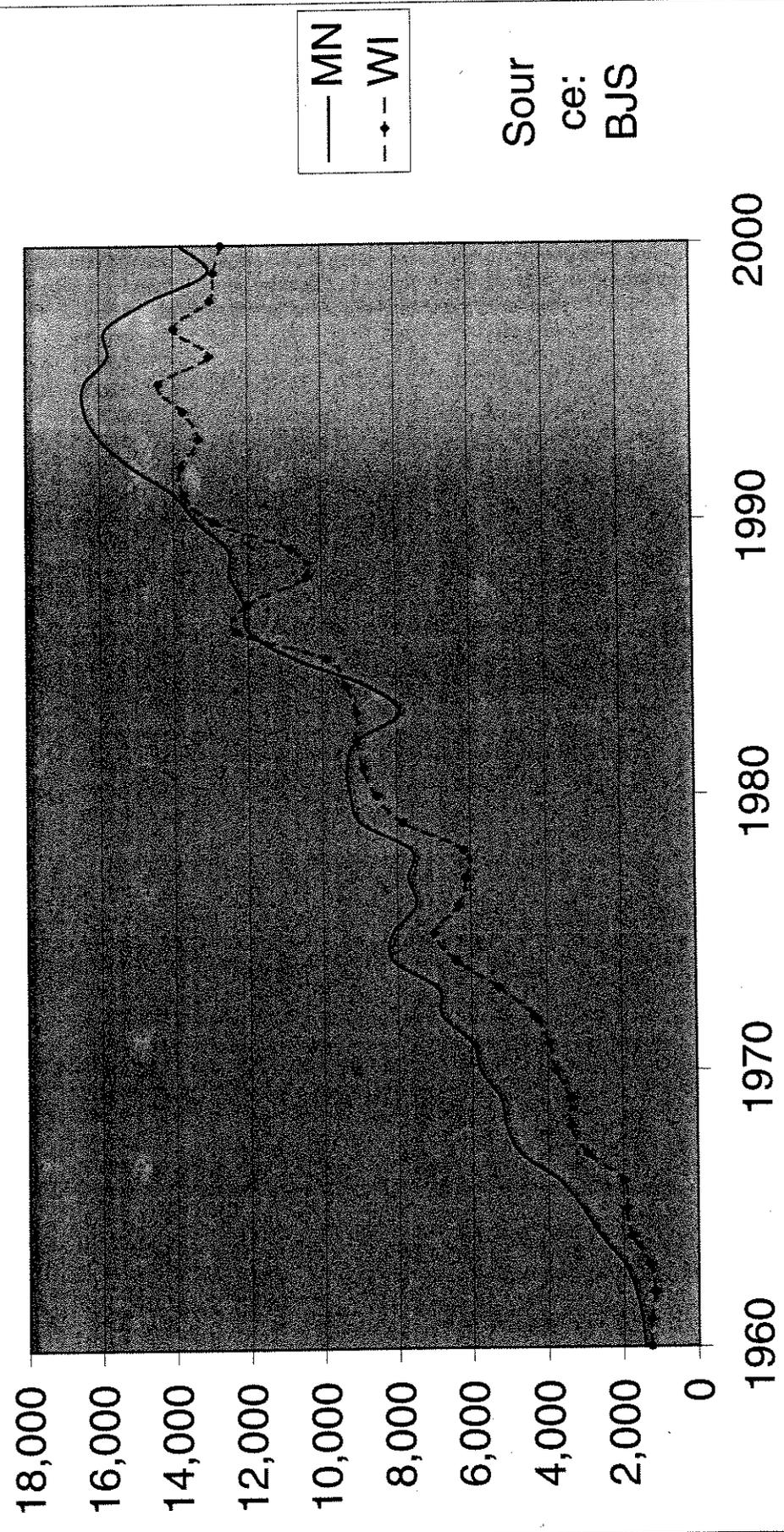
State offense totals are based on data from all reporting agencies and estimates for unreported areas. Minnesota - 1993 forcible rape figures furnished by the State-level Uniform Crime Reporting Program were not in accordance with national UCR guidelines. Therefore, 1993 forcible rape totals for Minnesota were estimated. 1999 and 2000 forcible rape figures for Minnesota are not comparable to previous years. Wisconsin - Complete data for 1998 were not available; therefore, it was necessary that Wisconsin crime counts be estimated.

Sources: FBI, Uniform Crime Reports, prepared by the National Archive of Criminal Justice Data

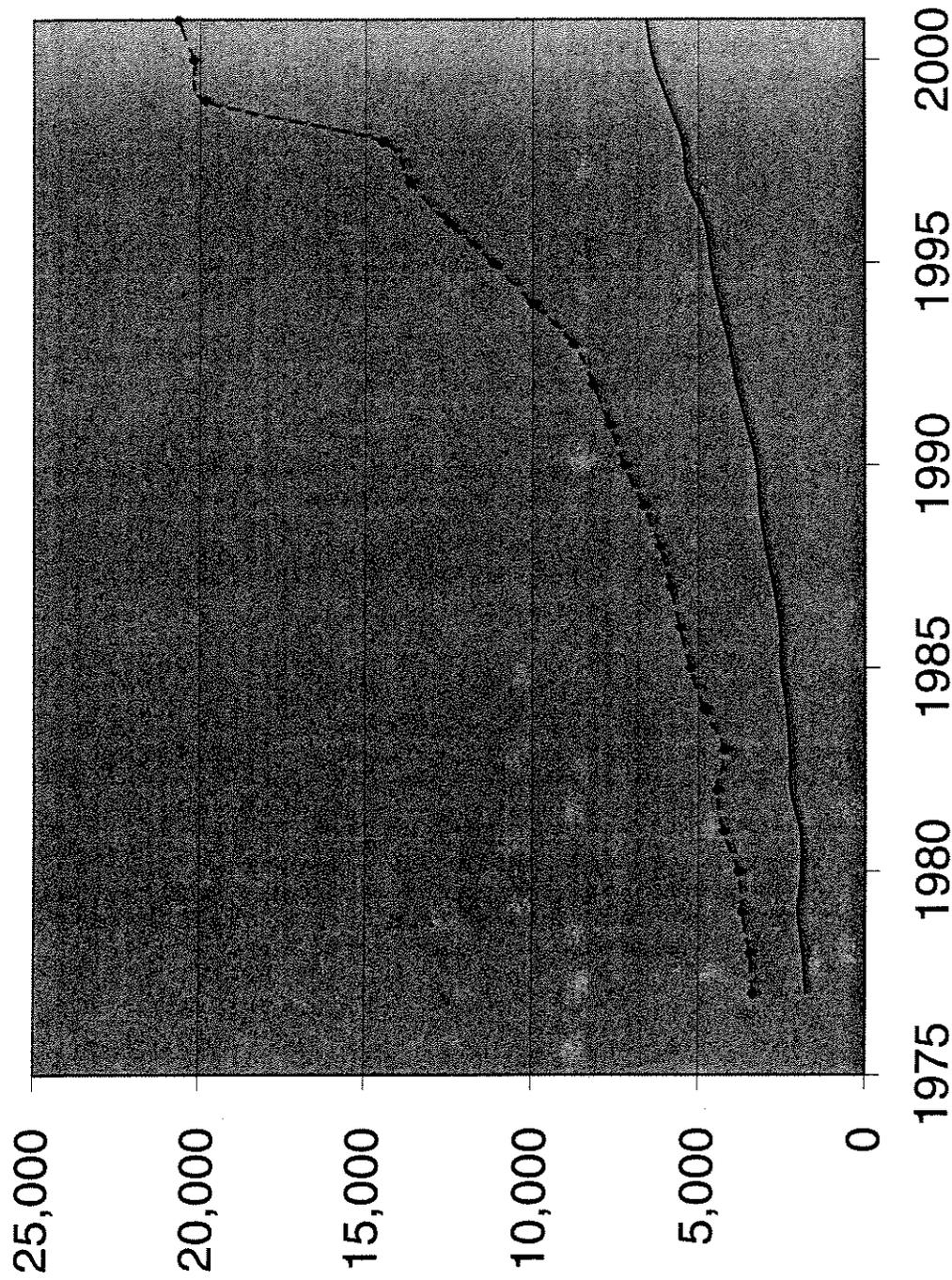
Date of download: Apr 17 2003

# Violent Crime - WI & MN 1960-2000

## Murder, rape, robbery & assault



# WI & MN Prison Populations 1977-2001



— Minnesota  
- - Wisconsin

Source:  
BJS 2003  
& State  
Info

Bureau of Justice Statistics -- Data Online  
<http://www.ojp.usdoj.gov/bjs>

Prison Populations		
Year	Minnesota	Wisconsin
1977	1,755	3,347
1978	1,837	3,432
1979	1,984	3,677
1980	1,884	3,788
1981	1,909	4,249
1982	2,197	4,441
1983	2,235	4,226
1984	2,331	4,845
1985	2,495	5,243
1986	2,515	5,554
1987	2,706	5,847
1988	2,942	6,159
1989	3,140	6,669
1990	3,215	7,247
1991	3,516	7,686
1992	3,849	8,191
1993	4,060	8,781
1994	4,372	10,022
1995	4,628	11,199
1996	4,804	12,530
1997	5,327	13,700
1998	5,480	14,512
1999	5,927	19,834
2000	6,352	20,193
2001	6,583	20,656

Figures for 1999 through 2001 are sourced  
from states own corrections department websites  
<http://www.doc.state.mn.us/statistics/statistics.htm>  
[http://www.wi-doc.com/index\\_adult.htm](http://www.wi-doc.com/index_adult.htm)

Bureau of Justice Statistics

filename: cj99at1.wk1

Appendix table 1. Jails and inmates, percent of capacity occupied, and inmates per 100,000 population, June 30, 1999

report title: Census of Jails, 1999 NCJ 186633

data source: 1999 Census of Jails

author: James Stephan

refer questions to: askbjs@ojp.usdoj.gov (202) 307-0765

date of version: 08/30/01

Appendix table 1. Jails and inmates, percent of capacity occupied, and inmates per 100,000 population, June 30, 1999

Region and jurisdiction	Number of jails	Number of jail jurisdiction	Persons under confinement June 30, 1999	Confined jail inmates, June 30, 1999	Average daily population/a	Rated capacity/b	Percent of capacity occupied/c	Under jail supervision per 100,000 U.S. residents/d
<b>U.S. total</b>	<b>3,376</b>	<b>3,084</b>	<b>699,182</b>	<b>617,152</b>	<b>619,046</b>	<b>660,361</b>	<b>93 %</b>	<b>256</b>
Federal	11	1	11,209	11,209	11,068	8,040	139	4
State	3,365	3,083	687,973	605,943	607,978	652,321	93	252
<b>Northeast</b>	<b>227</b>	<b>187</b>	<b>95,045</b>	<b>90,716</b>	<b>91,352</b>	<b>97,794</b>	<b>93 %</b>	<b>202</b>
Maine	15	15	1,291	1,113	1,132	1,220	91	104
Massachusetts	21	14	11,125	10,774	11,140	9,978	108	180
New Hampshire	10	10	1,705	1,592	1,513	1,812	88	142
New Jersey	24	21	18,349	16,830	16,943	15,349	110	225
New York	81	60	34,265	33,411	34,397	39,904	84	188
Pennsylvania	76	67	28,310	26,996	26,627	29,531	91	236
<b>Midwest</b>	<b>977</b>	<b>948</b>	<b>109,976</b>	<b>97,652</b>	<b>96,518</b>	<b>108,261</b>	<b>90 %</b>	<b>174</b>
Illinois	93	91	19,366	16,880	17,176	19,069	89	160
Indiana	93	92	14,270	12,787	12,014	12,553	102	240
Iowa	94	94	3,162	2,998	2,958	3,125	96	110
Kansas	97	96	4,524	4,378	4,545	5,565	79	170
Michigan	93	83	18,679	15,629	15,770	16,661	94	190
Minnesota	78	76	6,445	5,002	5,510	5,970	84	135
Missouri	129	126	7,490	6,940	6,941	8,924	78	137
Nebraska	65	63	2,368	2,189	1,528	2,728	80	142
North Dakota	23	23	668	588	585	918	64	105
Ohio	108	103	18,703	16,638	16,526	17,219	97	167
South Dakota	31	30	1,100	1,064	1,200	1,623	66	149
Wisconsin	73	71	13,201	12,559	11,765	13,906	90	252
<b>South</b>	<b>1,623</b>	<b>1,507</b>	<b>321,328</b>	<b>284,742</b>	<b>285,849</b>	<b>308,234</b>	<b>92 %</b>	<b>335</b>
Alabama	155	150	11,803	11,418	11,121	11,600	98	269
Arkansas	87	86	5,398	4,832	4,864	6,122	79	211
Dist. of Col.	1	1	1,660	1,653	1,660	1,378	120	322
Florida	108	70	57,685	51,080	50,863	55,493	92	381
Georgia	204	201	34,861	32,835	34,039	36,213	91	447
Kentucky	82	81	15,680	10,373	10,512	9,915	105	396
Louisiana	107	91	26,976	25,631	25,569	27,544	93	615
Maryland	29	25	21,363	10,945	11,370	11,821	93	413
Mississippi	102	93	9,018	8,886	8,878	9,778	91	325
North Carolina	104	97	14,315	13,279	13,433	15,456	86	187
Oklahoma	102	100	7,100	6,743	6,700	7,663	88	211
South Carolina	52	51	9,427	8,780	8,792	9,115	96	243
Tennessee	108	103	20,557	19,629	20,536	21,572	91	374
Texas	271	253	61,182	57,930	56,683	66,521	87	304
Virginia	82	76	21,482	18,235	18,371	15,514	118	314
West Virginia	29	29	2,821	2,493	2,478	2,529	99	156
<b>West</b>	<b>538</b>	<b>441</b>	<b>161,624</b>	<b>132,833</b>	<b>134,259</b>	<b>138,032</b>	<b>96 %</b>	<b>269</b>
Alaska	15	15	68	68	67	160	43	11
Arizona	28	17	10,737	10,320	10,620	12,629	82	224
California	145	77	94,136	77,142	77,851	75,088	103	284
Colorado	61	57	16,094	9,004	8,879	9,151	98	397
Idaho	41	39	3,102	2,809	2,586	3,203	88	248
Montana	42	42	1,550	1,521	1,432	1,791	85	176
Nevada	21	20	5,681	4,898	5,194	5,436	90	313
New Mexico	34	34	5,439	5,217	5,518	6,258	83	311
Oregon	41	34	7,528	6,283	6,320	7,210	87	227
Utah	26	26	4,514	4,024	4,159	5,904	68	211
Washington	62	58	11,691	10,542	10,656	10,004	105	203
Wyoming	22	22	1,084	1,005	977	1,198	84	225

Note: Five States -- Connecticut, Delaware, Hawaii, Rhode Island, and Vermont had integrated jail/prison systems and were excluded from the report. Except for 15 locally operated jails, Alaska has an integrated jail/prison system.  
a/The average daily population is the sum of the number of inmates in a jail each day for a year, divided by 365.

b/Rated capacity is the number of beds or inmates assigned by a rating official to facilities within each jurisdiction.  
c/The number of inmates divided by rated capacity times 100.  
d/Based on estimates of the U.S. resident population for July 1, 1999.



# Bureau of Justice Statistics Bulletin

April 2002, NCJ 191702

## Prison and Jail Inmates at Midyear 2001

By Allen J. Beck, Ph.D.,  
Jennifer C. Karberg,  
and Paige M. Harrison  
*BJS Statisticians*

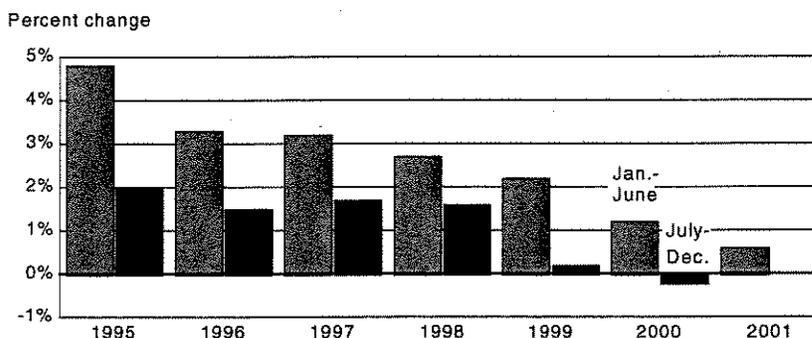
At midyear 2001 the Nation's prisons and jails incarcerated 1,965,495 persons. Prisoners in the custody of the 50 States, the District of Columbia, and the Federal Government accounted for two-thirds of the incarcerated population (1,334,255 inmates). The other third were held in local jails (631,240).

On June 30, 2001, 1,405,531 prisoners were under Federal and State jurisdiction, which includes inmates in custody and persons under the legal authority of a prison system but held outside its facilities. The number under State jurisdiction rose by 0.3% — the smallest annual growth rate in 28 years — while the number under Federal jurisdiction rose by 7.2%. West Virginia (up 8.7%) and Vermont and Nebraska (both up 7.7%) had the largest percentage increases. Twelve States had decreases, including New Jersey (-9.6%), Massachusetts (-3.7%), and New York (-3.5%).

At midyear 2001 local jail authorities held or supervised 702,044 offenders. Ten percent of these offenders (70,804) were supervised outside jail facilities in programs such as community service, work release, weekend reporting, electronic monitoring, and other alternative programs.

### Highlights

#### 6-month growth rates for State prisons have dropped sharply since 1995



#### From yearend 1995 to midyear 2001 —

- 6-month growth rates for all States combined dropped from 4.8% in the first half of 1995 to -0.1% in the last half of 2000.
- The rate of incarceration in prison and jail increased from 1 in every 166 U.S. residents to 1 in every 145.
- State, Federal, and local governments had to accommodate an additional 69,074 inmates per year (or the equivalent of 1,328 new inmates per week).

#### In the year ending June 30, 2001 —

- The number of inmates held in jail rose by 10,091, in State prison by 10,954, and in Federal prison by 9,245. In the largest State prison systems, the total number of inmates declined: Texas (down 3,661), California (down 525) and New York (down 2,553). Florida (up 774) became the third largest system.

#### On June 30, 2001 —

- Privately operated prison facilities held 94,948 inmates (up 4.9% since yearend 2000).
- Local jails were operating 10% below their rated capacity. In contrast, at yearend 2000 State prisons were operating between 100% and 115% of capacity, and Federal prisons were 31% above their rated capacity.
- A total of 3,147 State prisoners, down from 3,896 at midyear 2000, were under age 18. A total of 7,613 persons under age 18 were held in adult jails.
- An estimated 12% of black males, 4% of Hispanic males, and 1.8% of white males in their twenties and early thirties were in prison or jail.
- There were 113 female inmates per 100,000 women in the United States, compared to 1,318 male inmates per 100,000 men.

**Table 16. Number of inmates in State prisons and local jails per 100,000 residents, by gender, race, and Hispanic origin, and State, June 30, 2001**

Region and jurisdiction	Number of inmates per 100,000 residents in each group					
	All <sup>a</sup>	Male <sup>b</sup>	Female	White <sup>b</sup>	Black <sup>b</sup>	Hispanic <sup>c</sup>
State	639	1,208	105	366	2,209	759
<b>Northeast</b>	491	950	66	201	1,947	1,045
Connecticut	524	1,003	79	190	2,427	1,434
Maine	222	434	25	201	926	518
Massachusetts	359	707	39	206	1,562	1,309
New Hampshire <sup>e</sup>	325	629	42	286	2,649	1,747
New Jersey	503	966	75	161	2,117	693
New York	546	1,060	69	173	1,638	1,021
Pennsylvania	533	1,022	77	244	2,570	1,680
Rhode Island	315	619	40	198	1,672	657
Vermont <sup>d</sup>	226	433	31	218	1,794	270
<b>Midwest</b>	525	993	80	318	2,228	498
Illinois	512	973	76	251	1,889	381
Indiana	545	1,030	85	391	2,236	454
Iowa	376	698	65	284	3,302	816
Kansas	489	916	73	345	2,469	515
Michigan	644	1,238	79	369	2,247	568
Minnesota <sup>e</sup>	225	425	34	139	1,755	474
Missouri	623	1,179	104	430	2,160	481
Nebraska	349	646	61	229	1,973	803
North Dakota	265	480	44	189	1,321	1,214
Ohio	558	1,059	88	324	2,279	560
South Dakota	501	896	115	385	2,022	700
Wisconsin <sup>e</sup>	605	1,131	99	350	4,058	974
<b>South</b>	790	1,497	136	453	2,205	593
Alabama	792	1,512	125	417	1,877	276
Arkansas	597	1,125	102	393	1,759	333
Delaware <sup>e</sup>	895	1,700	162	427	2,799	807
District of Columbia	963	1,965	71	52	1,504	103
Florida	772	1,481	136	536	2,591	235
Georgia	952	1,823	154	519	2,149	290
Kentucky	569	1,070	97	429	2,392	517
Louisiana <sup>d</sup>	1,013	1,913	167	379	2,251	966
Maryland <sup>d</sup>	657	1,281	93	248	1,686	589
Mississippi	852	1,619	144	399	1,645	516
North Carolina <sup>e</sup>	560	1,079	79	265	1,612	395
Oklahoma	812	1,472	179	644	2,980	575
South Carolina <sup>e</sup>	756	1,456	113	349	1,740	297
Tennessee	647	1,211	124	392	1,991	363
Texas	966	1,808	180	640	3,287	800
Virginia	720	1,356	130	361	2,268	242
West Virginia	339	630	61	294	1,708	371
<b>West</b>	636	1,184	116	456	2,685	840
Alaska	667	1,207	107	464	1,864	439
Arizona	720	1,358	134	544	2,849	1,003
California	697	1,302	123	470	2,757	827
Colorado	597	1,109	111	394	2,751	1,069
Hawaii	416	750	87	455	609	215
Idaho	613	1,145	103	551	1,573	1,311
Montana	468	845	97	417	2,118	691
Nevada	734	1,369	156	646	2,769	587
New Mexico	605	1,113	120	344	2,666	819
Oregon	498	930	87	458	2,763	645
Utah	424	770	91	372	2,341	795
Washington <sup>e</sup>	457	841	91	374	2,141	748
Wyoming	521	930	109	443	2,477	1,049

<sup>a</sup>Based on the estimated number of U.S. residents on July 1, 2001, using the 2000 Census of Population and Housing totals and adjusting for population change since April 2000.

<sup>b</sup>Based on the number of U.S. residents by gender, race, and Hispanic origin on April 1, 2000, as enumerated in the 2000 Census of Population and Housing.

<sup>c</sup>Reported State prison custody counts for whites and blacks were adjusted to exclude Hispanics. (See *Methodology*.)

<sup>d</sup>State prison custody counts for Hispanics were estimated. (See *Methodology*.)

## Methodology

### *National Prisoner Statistics (NPS)*

The Bureau of Justice Statistics, with the U.S. Census Bureau as its collection agent, obtains yearend and midyear counts of prisoners from departments of correction in each of the 50 States, the District of Columbia, and the Federal Bureau of Prisons.

In an effort to collect comparable data from all jurisdictions, NPS distinguishes between prisoners in *custody* from those under *jurisdiction*. To have custody of a prisoner, a State must hold that person in one of its facilities. To have jurisdiction, a State has legal authority over the prisoner. Prisoners under a State's jurisdiction may be in the custody of a local jail, another State's prison, or other correctional facility such as a privately operated institution. Some States are unable to provide both custody and jurisdiction counts. (See *National Prisoner Statistics jurisdiction notes*.)

Excluded from NPS counts are persons confined in locally administered confinement facilities who are under the jurisdiction of local authorities. NPS counts include all inmates in State-operated facilities in Alaska, Connecticut, Delaware, Hawaii, Rhode Island, and Vermont, which have combined jail-prison systems.

### *Annual Survey of Jails, 2001*

In each of the years between the full censuses, a sample survey of jails is conducted to estimate baseline characteristics of the Nation's jails and the inmates housed in these jails.

Based on information from the 1999 *Census of Jails*, a sample of jail jurisdictions was selected for the 2001 survey. A jurisdiction is a county (parish in Louisiana) or municipal government that administers one or more local jails. The sample included all jail facilities (948) in 878 jurisdictions.