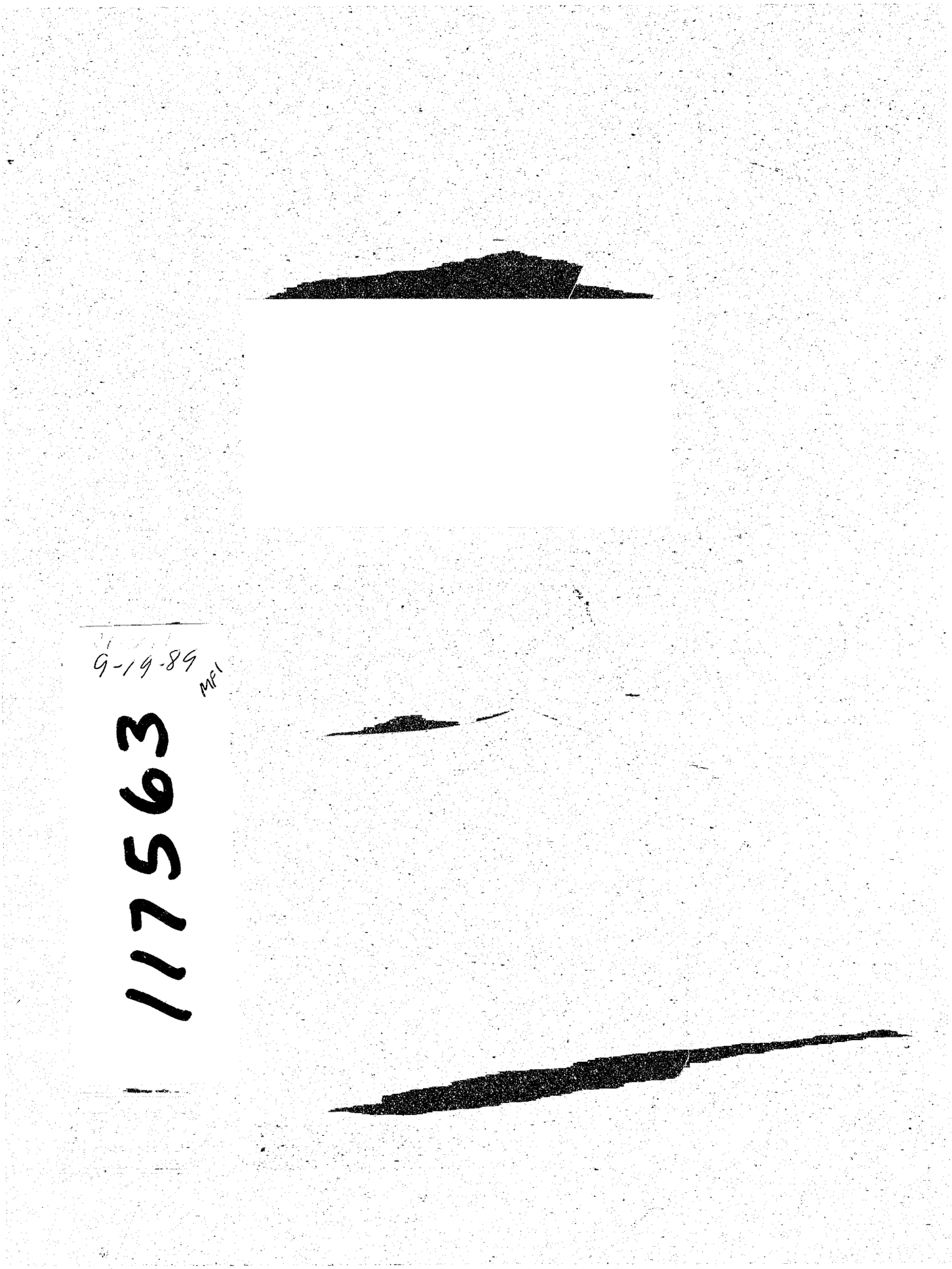

SUCCESS AND FAILURE ON PAROLE IN CALIFORNIA

A PRELIMINARY EVALUATION

Submitted by

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EXECUTIVE SUMMARY

This report was prepared by the National Council on Crime and Delinquency (NCCD) for the California Board of Prison Terms with funding provided by the National Institute of Corrections. NCCD was requested to complete a preliminary study of parole revocations--an area of increasing concern for California's criminal justice system as well as the general public.

This study is largely designed to better understand why so many parolees are not successfully completing their terms of parole supervision upon release from state prison. To address this issue, parolees from five parole units who were released in late 1985 and early 1986 were analyzed with respect to their social, criminal, and parole behavior. This report actually reflects phase 1 of what is expected to be a larger and more comprehensive analysis of parole outcome as additional funds are made available by NIC.

Although the study is not fully completed, the following preliminary findings are especially noteworthy:

- The proportion of CDC parolees failing to complete their period of parole supervision since 1975 has increased from 23 percent to 53 percent.
- Although the proportion of parolees being returned to custody for new felony crimes committed while on parole supervision has increased by five percent, the largest jump has occurred for parolees having their paroles administratively revoked by the Board of Prison Terms (from five to 35 percent since 1975).
- The dramatic increases in administrative revocations are due to (1) declining levels of financial assistance and narcotic treatment resources for parolees, (2) increases in parole supervision caseloads, (3) a shift in public and law enforcement attitudes regarding parolees and law violators in general, (4) jail overcrowding, and (5) a more efficient law enforcement/parole supervision system.

- Increases in these revocations over the past few years have accelerated growth in the CDC inmate population. As of June 1987, 32 percent of the 64,366 inmate population were parole violators. Approximately 15 percent were inmates pending a revocation hearing (3 percent) or serving a revocation term (13 percent).

- The primary reasons for the Board's revocations are indications that the parolee has become involved in property crimes (theft and burglary) and narcotics (both use and sale). A relatively low proportion are revoked for crimes of violence.

- Substantial variation exists among the individual parole units with respect to their parole revocation rates. These variations can be attributed to differences in the types of parolees assigned to the units and the levels of supervision provided.

- The vast majority of inmates released from prison to parole are unemployed and are classified as having a narcotics problem. They are also required to undergo periodic drug/narcotic testing by parole agents.

- The vast majority of parolees are classified as requiring relatively high levels of supervision and program services. However, the average number of contacts by parole agents is two per month. Routine contacts in the field (as opposed to office or phone contacts) are virtually non-existent due to parole agent high caseloads.

- A substantial number of parolees are either re-assigned to at least one other parole agent and/or transferred to another unit during the course of the parole supervision period. This lack of continuity may pose additional problems in the delivery of supervision and services.

A. INTRODUCTION

The issue of parole revocation has become increasingly important to state correctional systems, and, in particular, to the California Department of Corrections (CDC), Board of Prison Terms (BPT), and California jails. According to both national and California data, there has been a steady and alarming increase in the rate of parole revocations which can only have associated effects on public safety, jail and prison population growth. The number of parole violation admissions reported nationally has increased from 20,995 in 1977 to 39,003 in 1983 representing an 85 percent increase (BJS, 1985). This rate of increase far exceeds the 47 percent increase in court admissions for the same period of time.

In California, a similar phenomenon has also been occurring. As will be described later on in this report, the proportion of released inmates returning to prison has almost doubled.

Increases in parole revocations for both technical and new court sentences have important secondary effects on local jails and state prison populations. According to the Board of Corrections, a survey of the California jails on February 20, 1985 found a total of 46,785 persons in jail with 5,490 being CDC parole violators. Furthermore, CDC recently found that approximately 20,495 of its 64,366 1987 inmate population were classified as returned parole violators (See Table 1). Almost 15 percent (or 9,935) were administrative revocations.

Table 1

Prison Population
(June 21, 1987)

Total prison population:	64,366
percent of population	100%
"New" court commitments	43,871
percent of total	68.2%
Parole Violators	20,495
percent of total	31.8%
Pending Revocation	1,828
percent of total	2.8%
Serving Revocation Term	8,107
percent of total	12.6%
With New Term	10,560
percent of total	16.4%

Since then both the jail and prison populations have continued to grow at historic rates. The jail population at last count exceeded 57,000 inmates and is projected to exceed 75,000 within the next five years (California Board of Corrections, 1987). More significantly, the CDC population is rapidly approaching 65,000 and is projected to exceed 90,000 by 1991 and 120,000 by 1995. (See NCCD, 1986 and CDC, 1987).

An important component factor driving the CDC projections is the ever increasing rate of inmates being returned to CDC for failure to successfully complete their periods of parole supervision. If these rates continue to escalate, CDC estimates that there will be more parole violators entering prison each year compared to new court commitments. This, in turn, means that prison crowding will worsen and public safety will be increasingly endangered.

The alarming increase in parole violations and their associated impact on jail and prison crowding led to the development of a research proposal to the National Institute of Corrections (NIC) by the Board of Prison Terms (BPT). The Board is central to this issue as it determines, through its hearing officers, the existence of technical violations and the necessity to return parolees to custody. CDC also offered its support in terms of providing staff and data for the project. Their concern is equally obvious as high return rates exacerbate a worsening prison crowding problem and strain the entire parole supervision system. CDC has also implemented a classification system designed to assign parolees according

to risk and service needs. This kind of research can assist CDC in validating its own system and identifying other factors that should be incorporated in the classification system.

NIC subsequently awarded the BPT with a modest initial grant to launch a two phase study. The first phase was intended to design and implement a follow-up study of inmates released to six parole units located throughout the state. Specifically, samples would be drawn and basic data collected to describe the types of inmates released to these units, the levels of supervision provided, and some basic analysis of parole revocations. Phase 2, which will be dependent upon further funding from NIC, will allow BPT to collect more detailed criminal history and prison conduct data which, in turn, will permit a more sophisticated analysis of parole success and failure.

To assist the Board in this research effort, a contract was awarded to the National Council on Crime and Delinquency (NCCD) to complete phase one of the study. NCCD staff were responsible for working with the Board and CDC to finalize the overall methodology, including sampling procedures and manual data collection tasks. A major part of the phase one effort was an attempt to have CDC parole agents collect valuable follow-up data on parolees released to the respective parole units located throughout the state. This report represents work completed to date by NCCD with respect to phase one. While largely descriptive in its summary of the implemented research design implement, data collected, and preliminary analysis, some significant trends have been discovered which are reported below.

B. RESEARCH DESIGN AND OBJECTIVES OF THE STUDY

The basic design involves a 12 month follow-up survey of a stratified random sample of inmates released from CDC facilities to parole supervision in 1985. CDC's Research Unit already provides routine analysis of inmates released on parole for follow-up periods of 6, 12, 24 and 36 months. However, very little analysis has been done which describes at a micro level of analysis who is being placed on parole, what happens to them while on parole, and which factors can be associated with parole success or failure. By selecting a relatively small but representative sample of recently released inmates and assembling a wide array of data on each case, it will be possible to learn much more about these areas of concern.

The specific research questions which will guide the entire project can thus be stated as follows:

1. What are the rates of parolee failure/success while under supervision?

2. What levels of supervision and service are being applied to released inmates?

3. What are the reasons/criteria for revoking parole status and return to prison?

4. What factors (both inmate related and parole supervision related) contribute to the failure on parole?

5. What new policies and procedures could be tried to enhance public safety by reducing the rates of parole failure?

C. SAMPLING PROCEDURES

The original intent of the design was to historically re-construct from manual and automated records what happened to a small but representative sample of inmates released from prison to parole

in late 1985 and early 1986. The sample was not a pure random sample of all CDC prison releases in that only five parole units from three CDC parole regions were eventually selected (as described below) to participate in the study. Nonetheless, we do believe the sample represents the major categories of parolees supervised by CDC and the diverse array of communities found within California.

The initial design called for 750 inmates/parolees to be included in the sample selected from the following three parole regions: Bay Area, Los Angeles, and Redding. The two former regions reflect the major urban areas of California while the Redding region is primarily a rural/agricultural area in northern California. Within the Bay Area and Los Angeles parole regions, two parole office units were selected to base the sampling. This was necessary given the large volume of parolees handled by each of these two regions and associated data collection complications.

For example, in the Los Angeles area alone, there are several parole units. If we were to draw a random sample of all inmates released from prison to the Los Angeles units, we would be facing the very expensive and time consuming task of locating these inmate files across a number of parole office units. Such an approach would easily have exceeded the funding resources provided NIC.

In determining those units which are targeted as sites for the study, the Board and CDC wanted to ensure that a diverse array of parolees and communities would be captured by the research. Based on a number of meetings with BPT and CDC staff, it was finally agreed that the sample be limited to inmates released to the following

parole units: Richmond and Oakland (Bay Area); Lakewood and San Fernando West (Los Angeles); Redding and Modesto (Redding).

Cases were sampled from the Board's information system which, among other things, records each inmate released from prison to parole. As noted above, the project proposed to track approximately 750 inmates from the three CDC parole regions for a period of 12 months after release from prison. The sampling plan appeared to be rather straightforward.

For each region, we would request a list of approximately 250 inmates who had been released approximately 12 months prior to the date the sample was drawn. This list would then be used to have CDC parole agents collect the data necessary to complete the research. However, it was later found necessary to deviate from this approach for each region for the following reasons.

First, trying to locate a sufficient number of cases which were still active 12 months after release or for which CDC case files were still available proved to be far more difficult than originally envisioned. During our first experience with the Bay Area region units, it was quickly discovered that a large proportion of the sampled inmates had (1) been returned to prison or (2) transferred to another parole unit. It was not possible to collect data for all those who were returned to prison since CDC has a policy of destroying their case files within 90 days of termination. And, it was not possible to collect data for those who had transferred to other parole units as their case files had been shipped to the new unit.

Consequently, after our initial experience with the Bay Area units, we requested a much larger sample size for the Los Angeles and Redding units. This was anticipating the need to replace cases which could not be located for the above mentioned reasons. But, even with these larger samples it was still not possible to obtain our goal of collecting parole supervision data for the 750 cases as originally envisioned.

The second reason for departing from the original sampling procedure was due to problems in having CDC parole agents complete code sheets for the sampled cases. In many instances, the original parole agent who was assigned to the case was no longer working at that unit or had resigned. Consequently, it was not possible to collect valuable supervision data retained in the officer's field notes. And in some instances, staff simply did not respond to repeated requests to complete data requested for the code sheets on cases selected for the study.

For the Bay Area urban sites (Richmond and Oakland), cases were drawn from the Board's information system for all inmates released from prison to these units over a five months period from August through December 1985. This produced a list of 313 cases with 130 parolees from the Richmond unit and 183 from Oakland. Of the 313 cases, only 115 completed code sheets were eventually received by NCCD.

Because of problems encountered in the Bay Area units and an expected higher rate of transfers for the two Los Angeles units, a larger sample was requested from the BPT automated system. BPT

staff provided NCCD staff with 1,040 cases released from prison to the Lakewood and San Fernando units from October 1, 1985 through March 31, 1986. From this list, NCCD staff randomly selected approximately 150 cases for which parole files did exist at the unit and could be coded. We eventually received 134 completed code sheets.

For the Redding region a list of all inmates released from January 1, 1985 through March 31, 1986 was requested due to the much lower volume of cases handled by that rural area of California. This produces a list of 473 cases. Here again, we selected approximately 150 cases for which parole files still existed and eventually received 92 completed code sheets. A summary of the BPT generated lists and cases for which we received completed code sheets is shown in Table 2.

In essence, the study evolved into two separate samples. The BPT sample cases are representative of inmates assigned to the five parole units at the time of release from prison. The manual cases, however, only reflect those cases for which individual parolee case files could be located and/or parole agents were able to complete and return code sheets to NCCD for analysis. Clearly, the manual cases are not truly representative of the BPT generated cases for each unit. They tend to exclude cases which (1) were transferred to another unit and (2) were returned to prison during the early portion of their parole supervision period. Nonetheless, the manual data do permit a more micro and detailed picture, as described below, of how parolees are supervised by CDC parole agents.

Table 2

Sample Sizes by Parole Unit

	BPT	MANUAL
BAY AREA	313	115
Richmond	130	44
Oakland	183	71
LA AREA	1040	134
Lakewood	507	58
San Fernando	533	76
REDDING AREA	473	92
TOTALS	1826	341

D. DESCRIPTION OF THE DATA USED FOR ANALYSIS

Two sources of data were used by NCCD to produce this report. The first source which has already been referred to is the Board's existing automated information system. This system captures relevant sentencing, demographic and criminal history data for all offenders' sentences to state prison. When these offenders are released, the Board's data system also records relevant Board revocation hearings for those cases requiring such action at the Board's discretion.

Neither the Board nor CDC have any information system capacity to capture what happens to parolees while under the Board's and CDC's supervision. Although CDC does require a structured classification assessment for supervision level and program need assessment, and a written chronology of such events as drug testing and parole agent contacts, these data are not key entered into a data base file. Thus, very little, if any, analysis can be routinely done by either CDC or the Board.

A major effort was devoted toward the manual collection and automation of these kinds of data for the cases sampled for this study. NCCD staff developed a prototype code sheet for CDC parole agents to complete these kinds of data. This code sheet was reviewed and pretested several times before a final draft was deemed acceptable to CDC staff.

NCCD staff then proceeded to conduct on-site training and technical assistance to staff at each parole office for purposes of facilitating the manual data collection effort. As noted earlier,

our ability to collect these data for our sampled cases was severely hampered by (1) a significant level of transfer by parolees to other units and regions during the course of their parole period, (2) an increasing revocation and return to prison rate, and (3) CDC policy of destroying case file records for parolees who terminate parole supervision for whatever reasons.

It should be added here that during phase 2 of the study, two other sources of data will be collected for analysis. First, we will have access to CDC's automated classification data (Form 839) which provides additional demographic and criminal history data and also provides summary inmate disciplinary and housing movement data via the reclassification (Form 840) process.

Second, we intend to manually code and merge with these other data files each inmate's entire criminal history data using "rap" sheets as provided by the California Bureau of Criminal Statistics. These data will permit a far more detailed chronology of the inmate's misdemeanor and felony criminal history both before and after the most recent period of state imprisonment.

E. SYSTEM-WIDE TRENDS IN PAROLE OUTCOMES

As alluded to in the opening section of this report, parole revocation and other measures of parole failure are increasing on a national level. However, the recent and extremely dramatic increases in parole failure within the California Department of Corrections probably exceeds all other states.

In 1975, 9,801 male felons were released on parole with only 22.5 percent failing to complete 12 months of supervision. By 1985, the last year that a 12 month follow-up period is available, over 20,000 male felons were released and 53 percent had failed to complete the 12 month period of supervision. As shown in Table 3, the rate of "unfavorable" outcomes has been steadily increasing since 1975 with no evidence to date that the failure rate has reached a plateau.

To begin to understand why these rates have changed so dramatically, one needs to understand how a parolee's performance is measured by these data. As shown in Table 4, CDC employs various measures of "favorable" and "unfavorable". The two measures of the favorable outcome are as follows:

1. Favorable - Clean: No difficulties reported by CDC parole agents regarding the parolee's compliance with parole requirements, arrests or conditions.

2. Favorable - Other: Difficulties reported including arrest or technical charges; arrest and release, with or without trial; parolee-at-large (PAL) for less than six months; being convicted of new misdemeanor crime with a jail sentence of under 90 days or all suspended, or misdemeanor probation or fine.

Clearly, the "other" category includes behavior that is not wholly favorable although the crimes included here are generally minor misdemeanor offenses.

Three measures of "unfavorable" outcomes are used by CDC and are defined as follows:

1. Unfavorable - BPT Return to Custody (RTC): The Board of Prison Terms (BPT) may, at its discretion, order the parolee to be returned to CDC or local jail custody for behaviors the BPT feels warrants such action. These would

Table 3

One Year Outcomes for Felons
Released to Parole
1975-1985

Year	Number Released	Favorable	Unfavorable	Pending
	(N)	(%)	(%)	(%)
1975	9,801	74.4	22.5	3.1
1976	6,430	70.1	25.1	4.8
1977	8,573	68.0	28.6	3.4
1978	7,481	64.8	33.9	1.3
1979	8,693	61.8	37.2	1.0
1980	10,154	56.6	42.6	0.8
1981	10,338	52.0	46.8	1.2
1982	11,953	49.5	49.5	1.0
1983	16,669	50.4	48.7	0.9
1984	18,135	49.4	49.7	0.9
1985*	20,262	46.9	52.6	0.5
% Change 1975-1985	+106.7	-27.5	+30.1	-2.6%

* Based on a 50 percent random sample of 1985 releases.

Source: CDC Research Unit - April 28, 1987.

Table 4

One Year Outcomes for Felons Released to Parole By Type of Outcome Measure 1975-1985

	Favorable		Unfavorable		
Year	Clean	Other	BPT	Court	Misc.
1975	46.1	28.3	5.0	7.9	9.6
1976	45.1	25.0	5.3	8.2	11.6
1977	44.6	23.4	10.4	9.5	8.7
1978	46.7	18.1	18.1	10.8	5.0
1979	51.4	10.4	23.4	9.8	4.0
1980	47.2	9.4	26.7	11.5	4.4
1981	41.9	10.1	29.2	12.6	5.0
1982	38.6	10.9	30.1	14.1	5.3
1983	38.0	12.4	29.1	14.1	5.5
1984	37.6	11.8	31.0	13.4	5.3
1985*	35.2	11.7	34.5	12.9	5.2
% Change 1975-1985	-10.9%	-16.6%	+29.5%	+5.0%	-4.4%

* Based on a 50 percent random sample of 1985 releases.

Source: CDC Research Unit - April 28, 1987.

include arrest(s) and/or conviction(s) for new crimes or repeated violations of the conditions of parole status.

2. Unfavorable - Court RTC: Reflects those cases where the parolee has been convicted of a new felony during the period of parole supervision which results in a new prison sentence.

3. Unfavorable - Miscellaneous: Refers to a large number of miscellaneous events including being in PAL status for six months or longer; admitting to a felony charge and agreeing to provide restitution; being declared criminally insane; death in the commission of a crime; a jail sentence of 90 days or longer; being convicted of a new felony while on parole and being placed on felony probation for up to five years or receiving suspended prison sentence; being committed to California Rehabilitation Center (CRC).

In examining these five measures of parole success and failure since 1975, one is struck by the sharp decline in "other" favorable outcomes (from 28 percent to 12 percent) and an associated increase in BPT RTCs (from 5 percent to 37 percent). While the rates of Favorable - "Clean" outcomes have declined and Court RTCs increased, these declines have not been as dramatic as the other two measures of parole outcome. Miscellaneous unfavorable outcomes have declined as well, but they continue to reflect a very small percentage of all outcome measures.

Just what is going on here is difficult to tell at this stage of the study, but there are some clear historical factors which are fueling the higher parole revocation rates. The following excerpt from the California Department of Corrections (1987) provides a summary of these factors.

1. "There has been a clear shift in public attitude regarding law violators. During the 1960s and even into the early 1970s the public had a more tolerant attitude which allowed and even encouraged rehabilitative/treatment programs. Community programs for drug abusers, alcoholics, and mentally disturbed

individuals were available and there was a strong preference for keeping some offenders in their own communities. The Probation Subsidy Program was a clear indication of this preference. In the late 1970s, for a variety of reasons, the general public's attitude began to shift to one of "law and order," with a stated preference for tougher laws and more and longer prison terms. Probation subsidy was abolished, the Determinate Sentencing Law, which statutorily changed the purpose of prison from rehabilitation to punishment, was passed, and the taxpayer "revolution" began, resulting in a reduction in funding for community programs. CDC and the Board of Prison Terms' (BPT) decision making regarding parole violators has of necessity, shifted also to reflect the changing community attitude.

2. The reduction in the availability of community programs caused some minor parole violators, particularly substance abusers who previously would have been placed in a community inpatient or outpatient program, to be returned to prison in the interest of public safety.

3. During the 1970s parole resources have declined. The felon ratio of agent to parolee has increased from 35:1 (work unit) and 45:1 (regular) to the current 52:1; similarly, the non-felon ratio has increased from 35:1 to 45:1 and work furlough 35:1 to 44:1. This has resulted in less agent time available per case. Therefore, agents have less time available to locate community alternatives to reincarceration. Given the community concern regarding crime, we placed the majority of our resources in the control aspect of parole.

4. We increased our cooperation with law enforcement agencies to control parolee behavior. Under the requirements of Penal Code 3058.5 we provide law enforcement with a good deal of information including photographs, fingerprints, residences, etc. regarding parolees upon their release, and a Monthly Movement Report regarding parolees moving into and out of the county, being discharged, or returning to custody, etc. This, coupled with more cooperative investigative efforts, has resulted in the discovery of more parole violations and, therefore, more parolees returning to prison.

5. Under the Indeterminate Sentencing Law there was an assessment of parole readiness and, if an inmate was clearly not ready for parole, he or she was denied

release. Under the Determinate Sentencing Law, however, inmates are released on a statutorily determined date whether ready for parole or not. This factor has contributed to more individuals failing on parole.

6. Before the jails became so overcrowded the Department was able to house a large number of parolees in local custody pending investigation of parole violations and a decision to revoke parole. Jails would frequently house parole violators serving short revocation terms (60 days or less). Currently, we are unable to house or leave parolees in local custody and, therefore, the parole violators must be placed immediately in a prison bed. There are about 1,800 parolees in CDC facilities awaiting revocation hearing and about 8,100 parolees serving a revocation term. This obviously has been a major contributor to violators utilizing so many prison beds.

7. Reduced resources at the local level have influenced some district attorneys to drop prosecution of less serious charges knowing that parolees face a revocation hearing. Policy requires 45 days from discovery of parole violation to completion of the revocation process. For a variety of reasons, we were not meeting this time frame statewide. The result was the Cooperwood Decision that requires us to have a violation hearing conducted within 45 days of arrest. To meet this court decision we require our parole agents to conduct their investigations of the alleged violation and write their reports within five days. This short time frame does not always permit as complete an investigation as we would prefer and it often does not permit time to locate and arrange for alternative programs to return the parole violator to prison."

These developments, as cited by CDC officials, clearly suggest that the shift toward higher rates of administrative revocations are largely the result of shifts in policy by the Board and local law enforcement agencies. During our site visits to the five parole offices, it became clear that a new emphasis has been placed on enforcing conditions of parole supervision as evidenced by the requirement to take weekly and/or random drug tests to verify

abstinence. Such technology did not exist on such a widespread basis during the late 1970s and undoubtedly increases the rate of detection.

One is also impressed by the increasing numbers of inmates being released to parole each year. As the prison population continues to escalate, so also will the parole population grow. And, as the parole population increases, agents will be less able to provide the wide range of services that were previously available and could be delivered with more manageable caseloads.

These higher failure rates also have implications for local jail and prison crowding. As shown in Table 5, most RTCs (85 percent) are now being returned to CDC facilities rather than to local jails. This is in no doubt due to (1) recent increases in jail populations which have produced pressures on BPT and CDC to process parole violators faster and transfer them more quickly to CDC and (2) prosecutors' decisions to drop criminal charges in anticipation of parole revocation by the Board.

Finally, the sharp reduction in community resources which used to exist in greater amounts in the 1970s has made it more difficult to provide the necessary assistance parolees need. A previous study by Berk and Rauma (1981) showed that financial assistance provided to parolees had a clear impact on reducing parole failure rates. That program has since been discontinued. Also, studies by Speckart and Anglin (1985) and Anglin et al.,(1981) have found that provision of narcotic treatment services (methadone and residential treatment) have a pronounced impact on reducing recidivism. But as these

Table 5

Location of Time Spent In Custody for BPT Revocations - One Year Outcomes 1981-1985

Year	Local Jails	CDC	Total RTC
	(%)	(%)	(%)
1981	8.9	20.3	29.2
1982	6.5	23.6	30.1
1983	7.4	21.7	29.1
1984	9.0	22.0	31.0
1985	5.0	29.5	34.5

Source: CDC Research Unit - April 28, 1987.

narcotic and drug treatment programs become increasingly scarce, one can expect the rate of failure on parole to at least maintain its current rate and even possibly accelerate to higher levels.

F. ANALYSIS OF REVOCATION RESULTS FOR THE STUDY UNITS

Comparisons can be made on these CDC system wide RTC rates with the units selected for inclusion in the study to determine the extent to which their rates are comparable. As shown in Table 6, the two Bay Area units reported much higher 1986 rates (52 percent and 44 percent) compared to the 1985 CDC system-wide rates. Conversely, the Los Angeles and Redding units report significantly lower RTC rates. An immediate question to be addressed is whether these variations in RTC rates are the product of differences in parolee characteristics or parole management methods?

There are several indications that both possibilities explain the wide variation in RTC rates among parole units. Table 7 summarizes some key characteristics for parolees using the BPT automated system data. Oakland and Richmond units received a significantly higher proportion of parolees with prior jail and probation terms as well as a slightly higher proportion of prior probation revocations when compared to the other units. They also have predominantly black parolees (75-80 percent black). San Fernando and Lakewood have the largest Hispanic parolee populations (22-29 percent) while Redding is predominantly white (80 percent).

Table 8 summarizes the Board's actions in response to the revocations hearing. It should be remembered that these hearings do

Table 6

Comparisons of 1985 CDC System-wide and Sample Site 12 Month RTC Rates

Site	RTC Rate
	%
CDC - System-wide	34.5
Bay Area Region:	
Oakland	44.0
Richmond	52.3
Los Angeles Area:	
Lakewood	24.5
San Fernando West	23.8
Redding	27.5

* Based on 1985 data provided by CDC Research Unit - April 28, 1987.

Table 7

Comparison of Key Criminal History and Demographic Variables
By Parole Unit

	Lakewood	Oakland	Richmond	Redding	San Fernando
	(N=446)	(N=182)	(N=130)	(N=422)	(N=458)
# Jail Sentence					
0	50.22%	28.02	23.85	47.39	53.59
1	19.06	22.53	21.54	27.96	20.31
2	12.78	14.84	20.00	11.61	10.70
3	8.07	9.34	9.23	5.69	6.55
4	3.81	7.14	7.69	3.32	3.93
5+	6.05	18.13	17.69	4.03	5.02
# Probation Terms					
0	35.57	17.03	15.38	33.97	36.03
1	18.12	21.98	20.00	27.08	22.27
2	14.54	18.13	18.46	15.91	16.59
3	12.53	13.19	9.23	10.45	10.26
4	7.16	7.14	9.23	4.99	6.99
5+	12.08	22.53	27.69	7.60	7.86
Probation Revocation					
No	78.97	71.43	63.85	79.76	81.22
Yes	21.03	28.57	36.15	20.24	18.78
Race					
White	40.04	18.68	17.69	82.44	57.27
Hispanic	28.86	6.59	1.54	6.09	21.69
Black	28.86	74.18	80.77	6.32	13.23
Others	2.24	0.55	0.00	5.15	7.80

Source: BPT Parole Revocation and Sentencing Review Files

Table 8

Revocation Hearing Results by Parole Unit

	Richmond	Oakland	Lakewood	San Fernando	Redding
	%	%	%	%	%
RTC Hearing Held	52.3	44.0	24.5	23.8	27.5
% of Hearing Resulting in a Revocation	97.0	97.5	95.1	96.4	98.4
Reason for Revocation					
New Crimes					
Homicide	0.0	1.3	0.8	0.0	0.0
Robbery	7.4	3.8	5.7	8.7	1.6
Rape and Other Sex	1.5	0.0	3.3	1.6	1.6
Assault/Battery	10.3	11.3	16.3	12.7	12.4
Burglary	13.2	15.0	12.2	10.1	15.1
Theft and Forgery	27.9	22.5	14.6	16.3	20.6
Drug	32.4	33.8	28.5	25.6	27.8
Weapons Violation	0.0	1.3	0.8	1.6	0.8
Driving Violation	0.0	0.0	3.3	14.0	3.2
Misc. Violation	2.9	2.5	6.5	7.8	3.2
Special Conditions	1.5	0.0	2.4	4.7	1.6
Weapons Possession	1.5	3.8	2.4	0.8	2.4
Psychiatric Reason	0.0	0.0	0.8	0.0	0.0
General Condition	1.5	5.0	2.4	3.9	2.4
Avg. Time Revoked	244 days	236 days	232 days	236 days	219 days

Source: BPT Parole Revocation Hearing File

not require a revocation to be made. It is at the discretion of the Board as to whether the parolee's behavior is sufficiently serious to warrant a revocation and a return to custody. However, as shown in Table 8 almost all revocation hearings do, in fact, result in an official revocation of parole.

The primary reasons for such revocations appear to be for misdemeanor level property crimes of theft and forgery (15-28 percent), burglary (10-15 percent) and a variety of drug violations (26-34 percent). The most frequent crime against persons appears to be assault and battery (10-16 percent) followed by robbery (2-9 percent).

When revocations are made the Board then has the discretion to determine how long the inmate shall remain in custody. According to the Board's data system, the average period of time set by the Board for each revocation is about 7 to 8 months. What is particularly significant about these statistics is that inmates whose parole status has been revoked must serve all of the their time without the benefit of work or statutory credits. This explains, to some extent, the growing size of the CDC inmate population as a greater proportion of parolees are returned to custody.

Using the Board's data system, it was also possible to identify parolee characteristics associated with failure/success while on parole. For this analysis, we simply used the presence or absence of a parole revocation hearing as our dependent variable. This excludes those cases who were returned to prison with new felony court convictions. During the second phase of the study, we will be

able to incorporate those cases as well as collecting and processing the parolee's entire criminal history file.

The results of this preliminary analysis are shown in Exhibit A. These factors generally reflect the characteristics of the parolee at the time he/she was sentenced to prison and <u>not</u> at the time the person was placed on parole. Items shown to be statistically associated with parole revocations are:

1. Not Being an American Citizen
2. Not Being Employed at the time of Arrest
3. <u>Not</u> Having Supportive Family Relations
4. Having Served Prior Parole Terms
5. Having Served Prior Jail Terms of 90 Days or More
6. Having Prior Adult Probation Terms
7. Having a History of Prior Parole or Probation Revocations
8. Having Served Prior Prison Terms
9. Being Black
10. Being Male
11. Being Between the Ages of 16-29 at the Time of Sentencing

It should also be noted that many of the variables thought to be associated with parole revocations are not -- especially the measures of drug use. One of the reasons why this is the case has to do with the quality and completeness of data now being captured by the BPT sentencing review data. For many of the items in Exhibit A, 70-80 percent of the cases had missing data. This is apparently a result of declining resources appropriated for data entry within

Exhibit A

Background Factors Associated with Parole Revocation

Items Showing a Significant Relationship	Items Showing No Relationship
Citizenship*	Prior Drug Involvement
Employment at Arrest*	Educational Level*
History of Employment	Prior Escapes*
Supportive Family Relations*	Number of Charges
Number of Prior Paroles*	Alcohol Addiction*
Number of Prior Jail Sentences	Heroin Addiction*
Monthly Income Level*	Marijuana Use*
Number of Prior Probation Terms	Other Drugs*
History of Prior Parole or Probation Revocations	Number of Prior Prison Terms
Sex	Marital Status at Sentencing
Race	Prior Conviction for Same Crime
Age at Sentencing	Length of Residence in County*

* Variables with at least 70 percent missing data

Source: BPT Sentencing Review File

the information services division to maintain the data base. Should this decline continue in the future, it will be very difficult to use the Board's automated data system to conduct further research on both the characteristics of prisoners and those factors predictive of parole outcome.

G. A CLOSER LOOK AT PAROLE SUPERVISION

This final section summarizes the data collected by the CDC parole agents which offer a closer analysis of how parolees are classified and managed at the parole unit level. In so doing, these data also help explain why the various units have such disparate rates of success and failure.

In recent years the CDC parole division has implemented a classification system. This system is intended to assign parolees into various levels of supervision and services by using objective criteria to rank each offender. Special conditions of parole supervision are also imposed by both the Board and CDC based on a review of the offender's criminal and social history.

Table 9 summarizes the key classification characteristics of the parolees which are intended to guide CDC agents in their supervision of them in the community. The most noteworthy trends are as follows:

- The vast majority of parolees for all five units are identified as having a narcotics problem and are required to be tested as a condition of parole. The greatest concentration of drug problem parolees is found in the Richmond and Oakland units.

Table 9

Key Characteristics of Parolees at Release
By Parole Unit

	Richmond	Oakland	Lakewood	San Fernando	Redding
	(N=44)	(N=71)	(N=57)	(N=79)	(N=93)
I. Special Conditions of Parole					
Narcotic Testing Required	72.1	76.1	71.9	58.2	53.8
No Alcohol Condition	23.3	8.5	17.5	24.1	51.6
Out-Patient Clinic	4.7	12.7	10.5	12.7	18.3
II. Identified Problem Areas					
Narcotics	68.2	73.2	70.2	59.5	52.7
Alcohol	27.3	11.3	24.6	29.1	53.8
Assaultive	45.5	36.6	21.4	24.1	29.0
Property Crimes	75.0	50.7	42.1	50.6	47.3
Weapons	59.1	31.0	21.4	32.9	19.4
Gangs	2.3	8.5	12.5	10.1	1.1
Sex Crimes	11.4	11.3	16.1	8.9	16.1
III. Classification Level					
High Control	13.6	15.7	14.3	3.9	13.2
Control Service	86.4	82.9	78.6	90.9	84.6
High Service	0.0	0.0	0.0	1.3	1.1
Minimum	0.0	1.4	3.6	2.6	0.0
IV. Characteristics At Release					
Residence:					
Spouse	13.6	11.3	19.6	20.3	14.0
Parents	34.1	40.9	37.5	30.4	44.1
Other Family	22.7	16.9	10.7	10.1	16.1
Alone	18.2	8.5	10.7	8.9	17.2
Employment:					
Fulltime	16.3	11.3	24.1	27.6	10.9
Partime	9.3	5.6	6.9	10.5	13.0
None	74.4	83.1	69.0	61.8	73.9
SSI	0.0	0.0	0.0	0.0	2.2

- In addition to narcotics, substantial levels of these offenders are classified as having problems in the areas of alcoholism, assaultive behavior and weapon use.

- Approximately 14-16 percent of the parolees are classified as requiring extremely close supervision. Only a very small percentage (1-4 percent) is viewed as needing minimum supervision and services. Consistent with their background characteristics, the vast majority is classified as requiring relatively high levels of supervision and services.

- The vast majority (62-83 percent) of parolees is unemployed at the time of release from prison and will be residing with their spouse or other family members.

These data underscore some of the difficulties these offenders pose for parole agents. Given these concerns, the last remaining question is what kinds of supervision are provided to them?

Unfortunately, the data shown in Table 10, which summarizes the levels of supervision delivered to parolees as reported by CDC parole agents, suggest minimal supervision is being provided for substantial numbers of parolees. The most frequent form of supervision is accomplished via office contacts where the parolee visits the assigned parole agent on an agreed upon schedule. While there is considerable variation among the units, only one-third of the parolees received five or more contacts during their parole period. It is important to note that because a substantial number of offenders are returned to custody, the period of supervision is not 12 months. Indeed, when one considers the actual time of supervision less days in custody and on PAL status, the average period of true supervision is approximately six months. Nevertheless, the extent of office contacts seem to amount to a monthly visit and total contacts average about two per month.

Table 10

Characteristics of Parole Supervision
By Parole Unit

	Richmond (N=44)	Oakland (N=71)	Lakewood (N=54)	San Fernando (N=79)	Redding (N=93)
Parole Status At 12 Mos.					
Still on Parole	50.0	49.3	72.2	65.8	73.1
RTC	50.0	50.7	27.8	34.2	26.9
Employment at Follow-up					
Full-Time	13.6	10.5	35.9	29.0	23.3
Part-Time	15.9	7.5	17.0	14.5	22.2
None	70.5	82.1	47.2	56.6	52.2
SSI	0.0	0.0	0.0	0.0	2.2
Number of Parole Agents Supervising the Parolee					
1	43.5	19.1	25.5	34.3	78.3
2	50.0	60.3	51.0	34.3	21.7
3+	6.5	20.6	26.5	31.4	0.0
Number of Residence Contacts					
0	22.7	29.4	19.3	22.8	8.7
1-4	63.6	52.9	54.4	48.1	26.1
5+	13.7	17.7	26.3	29.1	65.2
Number of Employment Contacts					
0	86.4	91.2	91.2	83.5	84.8
1-4	13.6	8.8	8.8	15.2	10.9
5+	0.0	0.0	0.0	1.3	4.3
Number of Office Contacts					
0	6.8	5.9	14.0	22.8	34.8
1-4	56.8	61.8	35.1	44.3	37.0
5+	36.4	32.3	50.9	32.9	28.3
Number of Field Contacts					
0	100.0	100.0	100.0	100.0	78.7
1+	0.0	0.0	0.0	0.0	21.3
Number of Drug Tests					
0	31.8	33.8	21.1	40.5	40.2
1-4	36.4	42.7	19.3	24.1	14.1
5+	31.9	23.6	59.6	35.5	45.7
Number with Positive Tests					
1	15.9	26.5	19.3	12.7	6.5
2	4.6	7.4	10.5	6.3	4.4
3+	9.1	7.4	7.0	3.8	4.3
Number with a COP					
1	18.2	22.5	27.6	26.6	13.8
2	11.4	12.7	12.1	3.8	8.5
3+	6.8	8.4	10.3	3.8	0.0
Average No. of Total Contacts	13.2	12.0	18.3	12.0	21.8

Other forms of agent contacts are even less frequent. Field contacts are virtually non-existent while agent contacts with the parolee's employer occurred for only 15 percent of the cases. However, this latter statistic is understandable given that 55-75 percent of the parolees were still unemployed at the time of follow-up.

Among the five units, Redding does distinguish itself by (1) its use of residential contacts (i.e., contacts where the agent visits the parolee's home), (2) the highest average contact rate and (3) the lack of cases being transferred to another agent. The latter phenomenon is widely reported in the more urban units where agent turnover is higher and cases are more frequently transferred to other agents working in neighboring parole units. While it is premature to speculate on the effects of these transfers on parolee behavior, it may be one factor explaining Redding's lower RTC rate.

As expected, the majority of parolees received drug tests. Of those who were tested, large proportions tested positive at least once. While it was not possible to identify the types of drugs being detected via the testing program, it is clear that narcotics and the testing program are a major reason for the increasing revocation rate.

REFERENCES

Anglin, M. Douglas; William McGlothlin and George Speckart
1981 "The Effect of Parole on Methadone Patient Behavior." American Journal on Drug and Alcohol Abuse, 8(2)"153-170.

Berk, Richard and David Rauma
1981 An Impact Assessment of California Senate Bill 224. Santa Barbara, California: University of California, Department of Sociology.

Speckart, George and M. Douglas Anglin
1985 "Narcotics and Crime: An Analysis of Existing Evidence for a Causal Relationship." Behavioral Sciences and the Law, 3(3):259-282.