Mission Statement

The Community Justice Initiative strives to ensure public safety by effectively addressing criminal behavior and its many underlying causes for the benefit of the citizens of Blount County.
CJI Objectives

“Targeting Appropriate Interventions”

- Enhance the quality of life of all Blount County citizens.
- Help ensure the safety of the public, staff, inmates, and program participants.
  - Minimize victimization and help repair harm caused by crime.
  - Achieve cost efficiencies and effectiveness throughout the system.
- Provide appropriate facilities and programs based on individual needs and risks.
  - Decrease the rate at which people return to jail for committing new crimes.
  - Provide programs that address factors that contribute to criminality, including substance abuse, addictions, and mental illness.
- Use innovative and evidence-based programs and design principles.
- Make time in the justice system effective by fostering accountability and encouraging positive life changes.
  - Maximize staff effectiveness and job satisfaction.
- Accommodate growth and change in populations, programs and operations over time.
Tennessee had the 2nd highest opioid prescription rate in the U.S. in 2012.

Alabama & Tennessee had +/- 1.43 prescriptions per person.

The average opioid prescription contained 60 doses.

That’s more than 85 doses for every man, woman & child in both AL & TN.

1999 - 30 % of U.S. drug overdoses involved prescription opioids.

By 2015, more than double to 63.1 %.
In 1997 - 670,000 OxyContin prescriptions were dispensed
5 years later 2002 - 6,200,000
Hospitalization costs due to opioids +/- $422.6 million per year
Plus, TennCare hospitalization costs +/- $76.9 million in 2015

Substance abuse = +/- 1% reduction in people in the workforce
Resulting in a loss of over $1.3 BILLION in private sector income
That leads to the loss of $239.5 million in sales tax revenue
In 2015
Total drug overdose deaths in the U.S. amounted to 144 a day

In 2016
That increased by 21% to 174 a day (63,632 total)
66% of those (42,249 people) died due to opioid-related overdoses

40,200 deaths were attributed to auto accidents in 2016
FEWER THAN OPIOIDS
Challenges

Jail Challenges

Our Jail opened in 1999 - Certified for 350 beds
2017 ADP (Average Daily Population) was 524

A shortage of programs (and facilities) that can help people break cycles of recidivism

There are many needed renovations
Kitchen, Laundry, Medical, HVAC, Intake & Booking, etc.

High incidence of substance abuse and mental health issues
Challenges

Workforce Development Challenges

Shortage of quality workers

Housing - Transportation - Education - Money - Health - Drugs - Crime

Each need is impacted by a job...each job is impacted by these needs

The same needs impact (& are impacted by) recidivism

So, what must be done about these challenges?
Who should? Who can? Who will?
Challenges

Commonality
Both Jail & Workforce challenges are all about PEOPLE
Some people needing help   some people capable of helping

Unique challenges and opportunities surround reentry from jail
Unique challenges and opportunities surround workforce development

We need to change public perception of addiction & mental health away from a “shameful secret”

Change mindset - it’s not a drug problem, it’s a substance abuse problem
Change mindset - it’s not a jail problem, it’s a criminal behavior problem
Challenges

To address these issues we must own them & inform ourselves & others about the issues underlying jail overcrowding.

We must engage passionate allies and partners for the CJI and develop solutions that address the issues.

Some say - just reduce the Jail population by various means.
Some suggestions I’ve heard are impossible to do.
Some suggestions are MUCH easier said than done.
NONE address the underlying issues (addiction & mental health).
NONE help the people needing help.
# Population Projections

## General Population & Incarcerated Population

<table>
<thead>
<tr>
<th>Year</th>
<th>General Population</th>
<th>Source</th>
<th>Projected ADP</th>
<th>Bed Need Projection</th>
<th>Note</th>
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</thead>
<tbody>
<tr>
<td>2017</td>
<td>129,929</td>
<td>U. S. Census Est.</td>
<td>See Note -&gt;</td>
<td></td>
<td>524 ADP - Actual from TDOC</td>
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<tr>
<td>2020</td>
<td>139,297</td>
<td>BL&amp;A Estimate *</td>
<td>562</td>
<td>674</td>
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<td>2030</td>
<td>139,297</td>
<td>BL&amp;A Estimate *</td>
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<tr>
<td>2040</td>
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<td>BL&amp;A Estimate *</td>
<td>806</td>
<td>967</td>
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<td>2050</td>
<td>208,034</td>
<td>Extend BL&amp;A Est.</td>
<td>912</td>
<td>1094</td>
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</tbody>
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## A Challenging Fact

Projected 2018 ADP is 536 - Daily jail head-count has exceeded that most all of 2018 so far
The count was at or near 600 for 2 weeks in June - it was 576 on 7/16 & 580 on 7/17
Hope for Now and the Future

A Transition Center has great potential to reduce jail overcrowding and address underlying issues we’ve mentioned.

In an environment conducive to improving self discipline and behavior, qualifying offenders could become more responsible citizens by the time they re-enter the community.

A Transition Center would expose residents to a variety of programs.

The benefits would be to individuals, families, employers and all aspects of the community as a whole.
Research has conclusively demonstrated that:

- Participation in a variety of programs that teach marketable skills helps to reduce recidivism
- Programs that emphasize recovery, personal responsibility, and respect can enhance “jail to community” reentry

In 2016, 4500+ people arrested by Blount Co., Maryville & Alcoa alone. This reflects Blount County’s incarceration “CYCLE”

What if half or more could make the transition to a more responsible and productive life?
Final Thoughts

THREE PILLARS TO AGREE ON

1) Change our mindset from “good drugs & bad drugs” to “healthy & unhealthy relationships with drugs”

2) An unhealthy relationship with drugs often conceals frayed relationships with loved ones, the world around a person, and with the person himself or herself

3) The total eradication of all drugs is an impossible goal

If not us, who? If not now, when?