

# Reentry Challenges During a Pandemic: An Examination of NJ S2519 from the Perspectives of Community Organizers

*Julia Bowling*

*Anthony M. Azari<sup>1</sup>*

*Colleen M. Berryessa<sup>2</sup>*

*Rutgers University, School of Criminal Justice<sup>3</sup>*

**THE COVID-19 PANDEMIC** has had significant effects on those incarcerated in U.S. prisons. Incarcerated people have more comorbidities and less access to healthcare compared to nonincarcerated people, making them particularly vulnerable to illness and death associated with the virus (Hawks et al., 2020). As the pandemic has progressed, people in U.S. prisons have found it difficult to effectively socially distance (Henry, 2020), increasing their risk of contracting COVID-19 in custody and making it more difficult to control the spread, leading to reported outbreaks in prisons and jails across the country (Hawks et al., 2020).

The disparate impact of COVID-19 on incarcerated populations has led many

<sup>1</sup> Authors Bowling and Azari share first authorship and made equal contributions.

<sup>2</sup> Correspondence should be addressed to Dr. Colleen M. Berryessa, 123 Washington Street Room 579G, Newark, NJ, 07102; Phone: 973-353-3456; Email: colleen.berryessa@rutgers.edu

<sup>3</sup> *Acknowledgements:* The authors would like to thank the interview participants for sharing their perspectives, as well as Todd Clear and Chase Montagnet for their invaluable input and comments on the final draft of this paper. The authors would also like to extend thanks to the New Jersey Department of Corrections, New Jersey State Parole Board, and Office of New Jersey Governor Philip Murphy for their comments, which were integrated into the writing of this manuscript. Finally, the authors would like to extend our deepest gratitude to Arnold Ventures for funding this research.

jurisdictions, including the state of New Jersey, to take unprecedented steps to reduce the number of those incarcerated in their prisons in an attempt to curb infection and fatality rates (Heiss et al., 2020). According to the office of New Jersey Governor Phillip Murphy, the COVID-19 death rate in New Jersey prisons was the highest in the country (State of New Jersey, 2020). In response, Governor Murphy signed bill NJ S2519 into law in October 2020, which has allowed certain individuals incarcerated in the New Jersey prison system to be released up to eight months early through “public health emergency credits.” The bill applies to anyone with one year or less on their sentence, including juveniles, but excluding people incarcerated on charges of murder, aggravated sexual assault, and repetitive compulsive sex offenders.

The first major release resulting from NJ S2519 was on November 4, 2020, when 2,088 individuals were immediately released from incarceration. Of the 2,088 released, 965 were discharged to parole. An additional 1,450 individuals were also discharged from parole. Representing one of the largest mass release events in U.S. history, thousands of people reentered New Jersey communities after years or even decades behind bars, encountering an unfamiliar world shaken by a global pandemic.

Even in pandemic-free times, reentry has traditionally posed significant logistical

challenges for releasees as they begin to navigate life outside prison (Petersilia, 2003). Prior research has found that they often face problems ranging from the immediate need to determine where to sleep on the night of release and how to access necessary medication and stay well despite heightened mortality rates in the first two weeks post-release, to such long-term needs as finding permanent housing and employment (e.g., Binswanger et al., 2007; La Vigne et al., 2008; Pager, 2003; Petersilia, 2003; Roman & Travis, 2006; Travis, 2005; Wilson, 2009). Challenges often stem from individuals’ struggles to gain access to services and essential tools to operate in society after release, such as not having a valid government-issued identification card or access to prescribed medications (Chang et al., 2016; La Vigne et al., 2008; Moschion & Johnson, 2019; Roman & Travis, 2004).

Preparation services inside prisons often assist with issues surrounding reentry (Pager, 2003; Petersilia, 2003). In the current context, correctional authorities in New Jersey have long recognized the importance of release preparation; over the years, they have developed a prerelease protocol that integrates the most pressing needs related to housing and health care, as well as providing basic documents required for entering the job market. The protocol, which involves coordinated efforts with state agencies external to the correctional system umbrella, begins as much

as six months prior to a scheduled release date. Experience has shown that a prerelease system, in order to be universal, must be flexible enough to deal with frequent changes in release dates and conditions that occur in a typical prerelease correctional population (for information on release preparation in New Jersey, see NJ DOC Office of Transitional Services, 2021).

Unsurprisingly, the pandemic put unprecedented pressure on the release systems developed by the state. Health care partners in New Jersey have been stretched thin by the demands of the pandemic. State offices handling routine services closed, and state employees stopped working from offices. Procedures that used to be regularized around a predictable schedule were disrupted by delays and reduced capacity. The pandemic proved a catastrophic challenge to correctional program resources already strained by the internal pressures caused by the pandemic. In New Jersey, already sorely stressed, a prerelease planning function used to release a few dozen people each week was overwhelmed by the impending release of more than 2,000 people on a single day. Correctional authorities employed unprecedented strategies to try to coordinate the multiple state agencies involved in release planning, but their ability to do so faced enormous constraints (for more information on COVID-19 and the Department of Corrections in New Jersey, see NJ DOC COVID-19, 2021).

When the state releases people from incarceration under such constraints, those that work at community organizations often step in to provide assistance as they reenter the community (Pager, 2005; Pager, 2003; Petersilia, 2003). Community organizers who provide reentry services can help releasees gain employment, obtain government identification, sign up for healthcare and benefits, and access housing (Victor et al., 2021; Visher et al., 2017). Community organizers are acutely aware of the pressing challenges of returning individuals because they work directly with them to address their needs; through their work, organizers are known to acquire nuanced knowledge of released individuals' priorities for release and the potential barriers they face in achieving these goals (Petersilia, 2003). Ultimately, community organizers are considered an immensely useful resource to better understand reentry issues and the needs of individuals returning from incarceration (Petersilia, 2003).

On the November 4 release day, community

organizers from around New Jersey collaborated to assist the 2,088 individuals reentering their communities from incarcerated settings. Given their roles as critical support mechanisms, these community organizers represent valuable sources of information about reentry challenges that presented on release day and beyond. The current study examines reentry under NJ S2519 from the perspectives of a sample of these New Jersey-based community organizers who met with and provided services to individuals during this mass release. Researchers conducted interviews with them to gain an understanding of how community organizations assisted those returning home from prison as a result of NJ S2519, as well as the types and nature of release day challenges and reentry issues that they encountered as part of reentry service provision.

This article is limited to community organizers' perspectives on needs of releasees, and therefore does not provide a comprehensive overview of the preparation efforts made by other system actors, including state agencies. Instead, these interviews highlight a series of "lessons learned" those being released under these circumstances to help inform future decisions about release planning and preparation.

## Methodology and Analysis

Researchers conducted semi-structured interviews with 16 New Jersey-based community organizers affiliated with 9 organizations located geographically throughout the state. Some interviewees were reentry service providers, while others primarily advocated on behalf of incarcerated persons, but all interviewees provided services to releasees on the November 4 release day. After securing a list of community organizers who provided services on November 4, the research team emailed each organizer a request to take part in the study, resulting in a response rate of 100 percent. As incentive for participation, each community organizer was offered a \$25 gift card. Anecdotally, most interviewees noted that they intended to pass the gift card along to a recently released person or purchase items to support reentry work. Interviews took place in December 2020 and early January 2021.

Initial questions asked interviewees broadly about the services and supports that they provided to releasees on November 4. The interviews then became more targeted, with questions pertaining to challenges that released individuals faced on release day and how to best support those returning.

Researchers also asked community organizers about long-term reentry challenges that they have seen or foresee this population encountering, as well as their opinions of the NJ S2519 legislation.

Each interview was audio recorded, deidentified, saved on a secure server, and later examined using thematic analysis (Lofland et al., 2006). Once all interviews were completed, researchers reviewed each interview to identify emergent themes across interviews. Emergent themes included key reentry issues and release day challenges. To ensure inter-rater reliability and consistency in interpretation, researchers conferred using dialogic engagement as they reviewed the interviews (Guba, 1981). After researchers identified key issues and challenges, they reviewed their interviews as well as selected interviews that the other researcher had thematically analyzed to confirm the identified themes were representative across the interviews. Once emergent themes were confirmed, researchers used themes to frame study findings and returned to interviews to select quotations that identified each reentry issue or challenge.

Finally, we should note that the relationship between many community service providers who deal with people in reentry from prison and the state officials responsible for preparing them for release is not always a good one. Service providers typically tend to act as advocates for the formerly incarcerated, potentially seeing all the ways that state correctional officials fail to prioritize release readiness for their clients. State officials, for their part, might feel that the unceasing, day-to-day demands of running institutions are undervalued by those who do not share in that responsibility. Ultimately, our analysis is offered with that understandable tension as a backdrop, and with the recognition that what respondents conclude about the implementation of NJ S2519 is, in part, a product of their role in dealing with its consequences.

## Results

Interviews began with community organizers describing the events of the November 4 release day and their interactions with releasees. From early morning until late evening, community organizers were stationed at transit centers and halfway houses to provide coffee and homemade masks. Volunteers also provided information about a reentry hotline that had been created to support individuals returning home. Some releasees needed additional assistance, and organizers provided specific

support, which included helping them find their destinations on unfamiliar transit systems and explaining how to operate a smartphone. Volunteers also helped releasees contact loved ones and answered their questions about the COVID-19 pandemic. In addition, community organizers helped reduce the fear and anxiety surrounding reentry and welcomed releasees home by celebrating their release and reassuring them that they have caring people “in their corner.” Overall, community organizers recounted that releasees expressed appreciation for the help and, perhaps more importantly, the human outreach.

In the interviews, community organizers described the issues that released individuals faced on November 4, how preparation could have alleviated those issues, and reentry needs that they expected would continue to pose challenges to those recently released. Five main issues emerged from the interview analysis: identification cards, prescription medications, housing, accessing services, and communication. The issues, as well as related successes, are detailed below. Several community organizers noted that these challenges were consistent with problems faced by those leaving prison at any given time and were not unique to the November 4 releasees. Community organizers stated that they hoped that this research will bring attention to long-standing reentry issues and create demand for them to be addressed, both during and outside of a pandemic.

### *Issue I: Identification Cards*

Many of the community organizers expressed frustration that most November 4 releasees were released from prison without proper identification that is necessary for “life outside.” Several community organizers stated that government-issued, non-Department of Correction (DOC) identification (ID) cards were promised as a key part of the NJ S2519 release day planning, and a few hundred releasees were indeed provided with proper identification prior to release. The fact that some releasees received valid IDs was a marked improvement from the normal release protocol, in which releasees have only a DOC ID that is not considered valid or accepted in most settings. However, the majority of November 4 releasees left prison with only a DOC ID card. Community organizers commented about the serious problem the lack of correct identification can pose upon release.

Valid identification is necessary to obtain temporary and long-term housing, cash

a check, open a bank account, and prove employment eligibility; it also unlocks access to healthcare, health insurance, and other benefits. For example, with only a DOC identification, releasees are most often unable to access whatever little funds they have upon release. The remainder of releasees’ commissary balances were provided to them in the form of a check, but they were unable to cash the check at a bank without appropriate ID. Some people received their commissary balance in a prepaid debit card, which also proved difficult to use without proper ID. Some community organizers also noted that a DOC ID would necessarily announce one’s status as a formerly incarcerated person. As one community organizer stated: “It [the DOC ID] is like one of those scarlet letters.... It identifies for the social services people, you are working with someone who is coming out of prison, who has been convicted of a crime.... That identification card [the DOC ID] is worse than nothing.”

Finally, community organizers noted that the challenges associated with not having a government-issued, non-DOC identification card are likely underestimated by those on the outside who already possess necessary identification (a common refrain: “you need ID to get ID”). The difficulty of navigating bureaucratic requirements can be compounded when a pandemic slows government operations.

Recognizing these barriers, some interviewees expressed the opinion that they believed the state should have provided valid identification that can be used outside prison. The need to provide proper identification appeared to be a recognized concern of the state as well, since it had been promised as part of the planning process. Community organizers expressed frustration that valid identification cards were an “unkept promise,” leaving releasees to navigate procuring identification and to experience the difficulties of not having proper identification, all during a pandemic.

### *Issue II: Prescription Medications*

Community organizers also expressed concerns about releasees’ access to prescription medications. Access to proper medication, especially for individuals managing chronic physical or mental health conditions, is a baseline need associated with successful reentry. According to community organizers, a one-month supply of prescription medications was promised to all releasees. In the end, however, many people reported that they were released

with only two weeks of their prescription medications, instead of the larger supply that they were expecting. Organizers thus noted that medication, like government-issued, non-DOC identification cards, was another case of a “promise not delivered.”

As is often the case upon release, it was not always clear to releasees how they would be able to secure prescription refills when their supply ran out. Community organizers emphasized that releasees have a higher risk of death during the first few weeks after release from prison compared to later on in their reentry trajectory, and therefore providing only a two-week supply may have disrupted releasees’ health and well-being at a crucial time.

Interviewees expressed frustration that an administrative oversight added to the reentry issues awaiting releasees and potentially compromised their physical and mental health. Continuity of medical care is a problem for recently released people, who may not be fully enrolled in Medicaid or other health insurance. In addition, a lack of proper identification can make enrolling in health insurance an uphill battle. Navigating reentry without identification and while balancing other priorities, such as food and shelter, may lead to weeks or months of delays in obtaining the documentation necessary to secure essential healthcare services, such as prescribed medications to manage chronic health issues. From the organizers’ point of view, the promised supply of prescription medications should have been relatively easy for the state to provide. As one community organizer stated, “The drivers’ licenses and the prescriptions are some of the ways that we could have made this mass release much less painful.”

### *Issue III: Housing*

Community organizers also noted that released individuals often had difficulties securing both immediate short-term shelter and long-term permanent housing. Housing had been a concern for releasees long before their November 4 release date, but interviewees agreed it was not adequately addressed preceding the mass release. Almost all community organizers referenced this issue, stating that government actors did not adequately prepare for the housing needs of releasees.

A common sentiment was that government actors knew that housing was going to be a key concern, and took steps to provide temporary housing, but still neglected to acknowledge the full scope of the issue and

take action to alleviate the potential challenges that releasees might face. The lack of preparation to meet expected housing needs led to complications on release day and beyond. As one community organizer stated: “There were a couple individuals who had nowhere to go. They were like, I found out I was being released and they told me to pack my stuff and I’m just here now.”

Community organizers noted that the pandemic has made housing a more crucial need than before. Interviewees noted that housing is critical in reducing the spread of COVID-19, and that a reliance on shelters increased the risk of contracting COVID-19 among releasees, given the close quarters. In addition, organizers pointed out that shelters were operating at reduced capacity to conform with social distancing guidelines and did not have enough space for those in need. Unfortunately, the reduced capacity left releasees with fewer housing options.

To address the critical need for housing, the state provided temporary housing assistance, for example, paying for short-term hotel stays for some releasees. While transient housing may fill the need to find a place to sleep on the night of release or for a short time after, many organizers felt that it may have only prolonged the problem of securing more permanent housing. For example, one community organizer expressed frustration that paying for hotel rooms selectively would leave individuals unsheltered when rooms were no longer provided:

*If you are going to buy a hotel room for 30 days, I think it would be better just to... put some money toward a first month's rent or security deposit or to show good faith to a family member that you have a starting place.... It's really hard for people to then transition from nothing to nothing.*

Organizers noted that it might be better if the state instead applied funds to help releasees secure long-term permanent housing. Permanent addresses allow individuals to access services and to “start their lives on the outside.” Yet, they did appear cognizant that policymakers may be averse to providing cash assistance in good faith that it will be used to address housing needs, given the potential for releasees to use cash for other reasons (e.g., buying alcohol or personal goods) and logistical issues with providing checks (i.e., they are difficult to cash without valid identification).

Even still, organizers lamented that despite the advantage of purchasing hotel rooms—making it easier to ensure funds are used for housing—doing so leaves releasees without options when their hotel stay expires.

#### *Issue IV: Accessing Services*

In addition to accessing healthcare and housing services, community organizers noted that recently released individuals experienced difficulties accessing employment services, social services, and other programs. One major concern was the sheer number of releasees. To streamline a system to address releasees’ challenges, several organizations collaborated to create a “welcome home” reentry hotline. Upon arriving at the train station on release day, released individuals were given a flyer with the hotline number.

The hotline was a useful tool because releasees could access the hotline as needed to obtain information and connect to services. One community organizer noted that the hotline has been used quite frequently and has proved useful in getting releasees connected to resources, such as employment services. However, helping releasees acquire work proved difficult. Organizers noted that the massive influx of releasees needing employment services was a challenge not only because of their numbers but because the number of jobs available was far fewer than normal due to the negative economic impact of COVID-19. As one community organizer stated: “The most hard thing right now is employability... You have to come out and navigate a world where everything is shut down...how do you search for a job during a pandemic...where are the jobs?”

Due to the pandemic, many office locations, including social services and employment offices, had gone remote, become “by appointment only,” or were unavailable. One community organizer noted that many services were operating at reduced capacity, which delayed the distribution of services. As many released individuals rely on these critical services, delayed access exacerbated many of the issues they were already facing. Last, community organizers noted that recent releasees had difficulty trusting government and other service providers. Mistrust and reluctance to services may have been exacerbated by service delays.

During a pandemic and in an era of remote service provision, organizers stated that being at the train stations and providing in-person direct services was meaningful.

One community organizer noted that they provided homemade face masks, and another organizer said they provided cigarettes and coffee. Others described showing individuals who have been in prison for decades how to navigate a smartphone. Organizers described explaining the transit system and directing releasees to their destinations. Community organizers articulated that they served as essential tools in distributing information and sending people in the right direction to meet their loved ones or to catch the bus. In their eyes, the ability to disseminate information, provide support, and greet releasees with a smile was essential.

#### *Issue V: Communication*

One recurring theme expressed by community organizers in this study was communication difficulties that left service providers uninformed of some of the individuals being released. According to interviewees, DOC met with some community organizations, but not with all organizers who provided services on release day and who were interviewed for this study. Community organizers suggested that the DOC may have been more forthcoming with organizations with whom the agency had a more formal relationship; however, organizations unaffiliated with DOC had little to no contact from DOC, and organizers expressed the feeling that their efforts were not supported by the department.

Community organizers also felt that, prior to and on the day of release, the DOC did not provide enough information to families and communities, which created unnecessary emotional distress. Days before the release date, some families remained confused about whether their loved ones would be released. The lack of communication also made it difficult for community organizers to prepare for release day, leading to inefficient use of resources and exacerbating existing challenges for releasees, families, and organizers.

Community organizers found it difficult to get information about who would be released and where to show up on release day to best support them. Community organizers noted that they were prevented from connecting directly with releasees before release day and therefore unable to provide reentry preparation, even though they felt best positioned:

*Giving advocacy groups like ours who are actually connected to the family members and who have a proven track record of grassroots...that is important if we stop*

*seeing this as an adversarial issue and we start seeing this as a community effort.... Most people who go into prison are coming back into our communities.*

Ultimately, community organizers felt that release day was “unnecessarily unorganized,” and attributed the disorganization to a lack of communication and collaboration. As one community organizer stated, “They [DOC] were overwhelmed. They were swamped. But they [DOC] were only overwhelmed and swamped because they did not want to sit down and talk to people like us.... It was that lack of collaboration.”

## Discussion

Capitalizing on community organizers’ unique proximity to the releasees, the current study explored reentry issues and release day challenges during a pandemic through interviews with organizers who provided much-needed support on the November 4 release day. Community organizations are known to be key support mechanisms during reentry and are well attuned to releasees’ needs and challenges (Victor et al., 2021). Consistent with the literature, community organizers provided essential services and supports to those individuals released from incarceration during the pandemic under NJ S2519.

While the legislation was successful at addressing prison overcrowding, it also highlighted many long-standing problems associated with reentry. Aligned with previous research, data indicate that identification cards, prescription medication, housing, and accessing services were top-of-mind for both community organizations and individuals leaving prison on November 4. Organizers also expressed that communication difficulties related to release day impeded effective reentry planning that might have addressed many of these other top-of-mind issues.

Overall, as release day challenges can exacerbate barriers and affect the capacity of released individuals to be successful in reentry (Petersilia, 2003), community organizers expressed concern that the immediate needs of releasees on day one of reentry were not addressed. Indeed, individuals with access to stable housing, healthcare, financial support, and family ties are more likely to be successful in reentry (Travis, 2005; Petersilia, 2003). As many individuals released on November 4 had no or little access to these support mechanisms, findings suggest that they may face an uphill battle to both short-term and long-term

successful reentry. These issues, as described by organizers, appear to be exacerbated by the pandemic and the issues it has caused across social services, health care, and other resources across New Jersey.

Released individuals might also be better equipped to enter a world that has likely substantially changed during their incarceration. Findings indicate that appropriate preparation might include training on use of smartphones, resources on navigating the transit system, and in the current world, preparation for unique challenges that they may encounter due to the pandemic. Further, in order to maximize success, releasees must have their basic needs met, as well as the identification and healthcare requirements necessary in order to “get by” in contemporary U.S. society. Finally, data also highlight that reentry planning in New Jersey fell short under NJ S2519 and, even when the health care emergency is declared over, that many of the problems experienced during reentry should be further explored and addressed.

Yet it is important to note the many successes that community organizers observed on release day as well. For example, small acts of assistance such as providing a smile, a coffee, and helping to navigate a smartphone appeared to make a significant difference to newly released individuals. To interviewees, welcoming the releasees home and providing human connection at a critical moment was an important role as well as a fulfilling experience. While they were happy that the release was happening and that they were able to provide support, organizers remained concerned about the unmet immediate needs and long-term well-being of releasees.

This study has limitations. Particularly, the data and views presented here are confined to the perspectives of community organizers. Other voices, including those of formerly incarcerated people released under the bill, will be essential to fully understanding the impact of legislation that results in mass releases. Future research aiming to evaluate the challenges and successes of legislation like NJ S2519 should incorporate perspectives from formerly incarcerated people released under the legislation, policy makers involved in the crafting of this legislation, and institutional actors involved in implementing such policy changes. Currently, funding sources are supporting such research aiming to incorporate these varied perspectives to better understand release issues and strategies to improve reentry outcomes in the long term.

Ultimately, as individuals are released back into their communities, whether their needs are met makes a significant difference to their reintegration as well as to those living and working in the communities they reenter. This research suggests that coordination and policies to prepare individuals for release and meaningful support in reentry likely can maximize positive release outcomes and prevent future incarcerations, preventable deaths, and other adverse outcomes both during and outside of a pandemic setting.

## References

- Binswanger, I. A., Stern, M. F., Deyo, R. A., Heagerty, P. J., Cheadle, A., Elmore, J. G., & Koepsell, T. D. (2007). Release from prison—a high risk of death for former inmates. *New England Journal of Medicine*, 356(2), 157-165.
- Chang, Z., Lichtenstein, P., Långström, N., Larsson, H., & Fazel, S. (2016). Association between prescription of major psychotropic medications and violent reoffending after prison release. *JAMA*, 316(17), 1798-1807.
- Guba, E. (1981). Criteria for assessing the trustworthiness of naturalistic inquiries. *Educational Communication and Technology*, 29(2), 75-91.
- Hawks, L., Woolhandler, S., & McCormick, D. (2020). COVID-19 in prisons and jails in the United States. *JAMA Internal Medicine*, 180(8), 1041-1042.
- Heiss, J., Hinds, O., Schattner-Elmaleh, E., & Wallace-Lee, J. (2020). The scale of the COVID-19-related jail population decline. New York, NY: *Vera Institute for Justice*.
- Henry, B. (2020). Social distancing and incarceration: Policy and management strategies to reduce COVID-19 transmission and promote health equity through decarceration. *Health Education & Behavior*, 47(4), 536-539.
- La Vigne, N., Davies, E., Palmer, T., & Halberstadt, R. (2008). *Release planning for successful reentry: A guide for corrections, service providers, and community groups*. Washington, DC: The Urban Institute Press.
- Lofland, J., Snow, D., Anderson, L., & Lofland, L. (2006). *Analyzing social settings: A guide to qualitative observation and analysis*. (4th Edition). Wadsworth.
- Moschion, J., & Johnson, G. (2019). Homelessness and incarceration: A reciprocal relationship?. *Journal of Quantitative Criminology*, 35(4), 855-887.
- “NJ DOC Office of Transitional Services.” (2021). Department of Corrections, State of New Jersey. Retrieved from: <https://www.state.nj.us/corrections/pages/ots.html> “NJ DOC COVID-19.” (2021). Department of Corrections, State of New Jersey. Retrieved

- from: [https://www.state.nj.us/corrections/pages/COVID\\_Rev2.html](https://www.state.nj.us/corrections/pages/COVID_Rev2.html)
- Pager, D. (2003). The mark of a criminal record. *The American Journal of Sociology*, 108(5), 937-975.
- Pager, D. (2006). Evidence-based policy for successful prisoner reentry. *Criminology & Public Policy*, 5(3), 505-514.
- Petersilia, J. (2003). *When prisoners come home: Parole and prisoner reentry*. Oxford University Press.
- Roman, C. & Travis, J. (2004). Taking stock: Housing, homelessness, and prisoner reentry. *Urban Institute*.
- Roman, C., & Travis, J. (2006). Where will I sleep tomorrow? Housing, homelessness, and the returning prisoner. *Housing Policy Debate*, 17(2), 389-418.
- State of New Jersey (October 19, 2020). Governor Murphy signs legislation requiring public health emergency credits to be awarded to certain inmates and parolees during a public health emergency. *Official Site of the State of New Jersey*. Retrieved from: <https://www.nj.gov/governor/news/news/562020/20201019c.shtml>. Accessed 26 May 2021.
- Travis, J. (2005). *But they all come back: Facing the challenges of prisoner reentry*. The Urban Institute.
- Victor, G., Sights, E., Watson, D., Ray, B., Bailey, K., Robison, L., Fears, G., Edwards, R., & Salyers, M. (2021). Designing and implementing an intervention for returning citizens living with substance use disorder: discovering the benefits of peer recovery coach involvement in pilot clinical trial decision-making. *Journal of Offender Rehabilitation*, 1-20.
- Visher, C., Lattimore, P., Barrick, K., & Tueller, S. (2017). Evaluating the long-term effects of prisoner reentry services on recidivism: What types of services matter?. *Justice Quarterly*, 34(1), 136-165.
- Wilson, A. (2009). It takes ID to get ID: The new identity politics in services. *Social Service Review*, 83(1), 111-132.