

Role of community corrections in addressing the needs of special populations



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Community corrections have been developed to manage non-violent offenders. The persons under the community program are supervised outside the prison setting in which they are expected to deliver some services to the community. Parole officers have the duty of monitoring the behavior of the persons placed under community corrections. The special populations – usually comprising the mentally ill, women, drug abuse addicts, the elderly and those with medical issues – are placed on community corrections to rehabilitate them rather than incarceration. However, there has been a rise in the number of people being placed under community corrections in the recent past. Community corrections play a critical role in addressing the needs of special populations.

First, community corrections have been shown to help a particular population in effectively integrating back into society (James, 2014). Violent offenders are often incarcerated and taken through a rehabilitation program; those who show progress in changing their behavior are usually placed under community corrections. Special populations such as drug abusers are often placed under community corrections under strict supervision from the parole officers. During the monitoring, such special people are randomly tested for drugs. The close monitoring of drug abusers enables them to avoid the intake of drugs contributing to the successful completion of community correction program. Studies show that more than 68% of special populations placed under community correction remained crime-free for more than two years after release from the community correction programs (James, 2014). This shows that the offenders get to follow the community norms and rules upon completion of the program.

Moreover, community correction among the elderly is essential in helping the elderly to reduce chances of committing an offense. Studies show that many elderly persons often have medical needs that cannot be addressed by the prison department (James, 2014). Under such instances of special needs among the older adult, they are often placed under community corrections to allow them to access the medical needs while serving correction term at home with close supervision. The older person is a group of the population that needs to be handled with care because of their health condition, such as deteriorating memory status. Under the community corrections, the elderly is well taken care of while correcting their behavior. Also, the offenders with unique medical issues who are not in the elderly age bracket are often placed under community correction. The persons with special medical needs have been protected by the constitution where they are entitled to fair and quick medical treatment (James, 2014). The cost of medical provision of specific medical issue poses a challenge to prison department due to limited funds. Therefore, offenders with unique medical problems are placed on community correction so that their medical needs may be gathered by the family members while the offender serves the correction term. Therefore, community correction plays a central role in protecting the health of offenders with special medical needs.

Additionally, community corrections are essential among the mentally impaired persons. Studies show that many people under incarceration facilities usually develop mental health issue due to the conditions of the prison, such as lack of freedom (Begun, Early & Hodge, 2016). A person who develops mental challenges is often placed under community correction to

help them in recovery. Placing the mentally ill person in jail only serves to worsen their situation than correcting it. Studies show that person with mental health issue recidivates after two years of completion of the community correction program (Begun, Early & Hodge, 2016). It is due to the nature of the mentally ill person that community corrections serve to allow them to adapt to social rules and therefore, be considered as less of a threat to the society. Mentally impaired person undergoes significant changes while under the community correction program, which is efficient for their change of behavior and mental health.

Furthermore, special populations have developed a remarkable change in character following placement in community correction. For example, women placed under community programs have been shown to develop characters that are desirable to society (El-Bassel et al., 2017). Studies show that the female population is the most significant part of offenders under community correction programs with more than one million females under probation program (El-Bassel et al., 2017). The female people are a critical part of a family who helps in mentoring children. Many females are usually charged with a drug addiction problem that leads them to prison and their children placed under social service. Having drug abuse females take care of young children poses a threat to the children. As a way of helping the female population unite with their children after the release from prison, many of them are placed under the community corrections. The community corrections work by placing the offenders on community service as punishment, programs that require them to work and pay fines as a way of influencing change in the character of the offenders. The programs are part

of the rehabilitation programs that ensure that the offender avoids recidivism while protecting the safety of the public.

In conclusion, the community correction program is vital in helping offenders in transitioning back to society while developing the acceptable behavioral changes needed for proper code of conduct. The community corrections programs help the special population in addressing their needs, such as medical treatment while offenders such as females reunite with their children. It is through the community correction programs that many offenders have reformed and avoided a repeat of crime while enhancing the safety of society.

References

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