

III. PROGRAMMATIC INITIATIVES

The administration of George W. Bush put in place a number of targeted federal initiatives to provide services through new partnerships with religious groups. Often these efforts were made in the context of broader programs and in concert with other sorts of service providers, such as the Healthy Marriage and Fatherhood initiatives, Supplemental Education Services and the expansion of Community Health centers. Of particular note were new programs involving global outreach on HIV/AIDS, building the capacity of social service groups, mentoring children of prisoners, providing new approaches to substance abuse treatment, and easing the way for former prisoners to return productively to their communities.

A. GLOBAL AIDS RELIEF

The President's Emergency Plan for AIDS Relief (PEPFAR), described as the largest international health initiative ever established by one country, is considered by many to be the most lasting and successful accomplishment of the Bush presidency. Bush announced the effort in the beginning of his first term, calling for \$15 billion for AIDS treatment, care and prevention in 15 countries in Africa and the Caribbean. It was authorized by Congress through the United States Leadership Against HIV/AIDS, Tuberculosis and Malaria Act of 2003.

The initiative got off to a somewhat slower start than intended. The House appropriated \$2 billion rather than the expected \$3 billion in the first year, with one-third of the money to be allocated for programs that taught abstinence as a preventive method. Rep. Jim Kolbe, R-Ariz., said then he was confident that Congress would fund the \$15 billion Bush had promised over the next five years to fight AIDS abroad but that the projected level was unrealistic at a time when the program was just beginning.

Speaking in Uganda in July 2003, Bush said, "Over the next five years, my country will spend \$15 billion to fight AIDS around the world, with special focus here on the continent of Africa. We'll work with governments and private groups and faith-based organizations to put in place a comprehensive system to prevent, to diagnose and to treat AIDS. We will support abstinence-based education for young people in schools and churches and community centers. We will provide comprehensive services to treat millions of new infections."

By late 2008, PEPFAR had provided drug treatment for more than 1.4 million people infected with HIV, 30 million people had received counseling and testing, and 6.7 million had received other care. The extension of the program in 2008 authorized nearly \$50 billion in additional funding over five years and provided money for tuberculosis and malaria programs, in addition to those addressing HIV/AIDS. Bush had requested \$30 billion for HIV/AIDS prevention and treatment, double the initial U.S. commitment in 2003. Congress estimated the new funding would support prevention of 12 million new HIV infections and provide treatment and care for 15 million infected people. It added 14 Caribbean countries to the 15 nations that had previously received PEPFAR assistance.

Despite its successes, PEPFAR was criticized by some religious and AIDS activist groups because of a requirement that one-third of its funding for prevention efforts be spent on programs that promote sexual abstinence until marriage. Religious groups played a large role in providing the abstinence message.

Compromise legislation was approved at the close of Bush's tenure – the Tom Lantos and Henry J. Hyde United States Global Leadership Against HIV/AIDS, Tuberculosis and Malaria Reauthorization Act of 2008, signed into law on July 30 of that year. That law authorized the program for another five years – through the end of 2013 – and provided up to \$48 billion more to combat global HIV/AIDS, tuberculosis and malaria.

The new law also eliminated the one-third abstinence-only funding requirement. Instead, the act provided “balanced funding” for abstinence, behavior-change and condom prevention approaches without a fixed funding proportion for any single focus. The measure required programs to report to Congress if, in countries that have generalized HIV epidemics, they spent less than 50 percent of funding for abstinence and behavior-change interventions.

The increased spending was intended to move the PEPFAR program beyond the emergency phase and make it sustainable by strengthening health systems and nutrition programs, among other things. The measure included \$4 billion for programs that benefit orphans and vulnerable children, \$9 billion for bilateral programs that address tuberculosis and malaria, and \$4 billion for Global Fund programs for these diseases. Of the total funding, \$37 billion was directed to AIDS programs.

The PEPFAR reauthorization law also specifically called for a strong continued partnership with faith-based and community organizations (FBCOs) in providing nutrition and food support; child health services; HIV/AIDS prevention and treatment services; and medical, social and legal services for victims of violence. The law stipulated that technical assistance about U.S. foreign programs had to be made available on a regular basis to FBCOs, especially indigenous organizations new to partnering with government.

Bush's PEPFAR initiative found an important fan in the administration of Barack Obama – the new president himself. In a campaign appearance sponsored by a group of religious leaders in April 2008, then-Sen. Obama said referring to Bush: “I actually think that the PEPFAR program is one of the success stories of his administration.”³¹

B. COMPASSION CAPITAL FUND

The Compassion Capital Fund (CCF) was established in 2002 by appropriation to the Department of Health and Human Services (HHS) and operated under the HHS secretary's discretionary authority. It had originally been included in the Community Solutions Act of 2001, but that attempt at comprehensive faith-based legislation failed to win congressional approval. The CCF represents the most extensive capacity-building program and the most significant funding stream set up expressly as part of the Bush administration's Faith-Based and Community Initiative.

The CCF provided grants along with intensive training to build the capacity of FBCOs by increasing their effectiveness, enhancing their ability to provide social services, expanding their organizations, and creating collaborations to better serve those most in need. Since the program began in 2002, according to numbers reported by the Bush administration, more than \$349 million was awarded to over 5,000 organizations in all states as well as the U.S. Virgin Islands and Puerto Rico. The CCF incorporates three components:

- **CCF Targeted Capacity-Building Program**

Under the Targeted Capacity-Building Program, competitive grants of up to \$50,000 were provided directly to grassroots FBCOs engaged in service to distressed communities. Organizations with a range of programmatic emphases, including at-risk youth, homelessness, healthy marriage and social services for rural communities, were eligible to apply. The grants did not fund client services directly, but rather supported the service capabilities of the organization through focused development in at least one of five areas: leadership development, organizational development, program development, revenue development strategies or community engagement.

From fiscal 2003 to fiscal 2007, nearly 1,000 competitive grants were awarded under this program for a total of more than \$48 million. In fiscal 2007, the Administration for Children and Families provided more than \$10.3 million to 219 organizations. No funding was available for new mini-grants in fiscal 2008. A 2008 retrospective, HHS-financed study of this program conducted by Branch Associates, a research and evaluation consulting firm in Philadelphia, found that 66 percent of FBCO respondents indicated that the CCF support enabled them to serve more clients. More than half of the respondents used the funds to start new programs, nearly 90 percent of which were sustained after the grant ended. The study also found that almost all FBCOs reported improvements in important capabilities such as financial management systems, outcomes tracking and long-term planning as a result of the technical assistance and training they received along with the grant funding.³²

- **CCF Demonstration Program**

The objectives of the CCF Demonstration Program were similar to the Targeted Capacity-Building Program. However, the Demonstration Program provided grants to “intermediary” organizations that, in turn, made competitive sub-awards to grassroots FBCOs. Grantees selected at least one social service priority area of need to address, such as at-risk youth, prisoner reentry, homelessness, or families in transition from welfare to work.

A large portion of the FBCOs that received sub-awards from intermediary organizations would not have been capable of winning or managing even the modest-sized Targeted Capacity-Building grants. For many, the sub-award represented their first receipt of federal funds. The intermediary organization had primary responsibility for handling compliance issues, accounting, data reporting and other burdens that could be overwhelming to first-time grantees. As a result, this “intermediary model” allowed the program to reach out to the smallest front-line organizations. The intermediary organizations also provided extensive technical assistance and

training, both to their grantees and to other FBCOs from the community to help improve their programs.

For example, in 2004 the Ohio Governor's Office of Faith-Based and Community Initiatives became the first government entity to receive a federal CCF Demonstration Program grant as an intermediary organization. The purpose of this program was to assist FBCOs throughout Ohio in increasing their effectiveness and enhancing their ability to provide social services to people and families in need. All of the grant funds were used to support either training, technical assistance or mini-grants to Ohio FBCOs. Over the course of the federal grant period, the Ohio Compassion Capital Project awarded more than \$1 million in 100 sub-awards and trained more than 2,000 FBCOs in 11 key areas of capacity-building.

Similarly, the Black Ministerial Alliance of Greater Boston, an alliance of 83 FBCOs with a 40-year history of serving the black community in Boston, received three CCF Demonstration Grants between 2002 and 2008. The grants supported activities such as delivering workshops annually to as many as 200 local FBCOs; providing technical assistance to 25 organizations; and distributing \$200,000 per year in mini-grants. The alliance calculates that, along with its partners, it has reinvested \$7,400,000 in the community since 2002 through these activities.

The OneStar Foundation in Texas, a private organization that serves as the state's faith-based initiatives office and liaison to the White House, received a CCF Demonstration Program grant in collaboration with the Texas Workforce Commission to build the capacity of FBCOs in four urban counties. With state funds, OneStar also implemented the Rural Texas Demonstration Project in the Council of Government regions of Central Texas, Heart of Texas and Brazos Valley. OneStar reported that through these two projects it had strengthened 37 diverse FBCOs through strategic training, coaching and networking opportunities, benefiting more than 1,000 FBCO staff members and volunteers.

From fiscal 2002 to fiscal 2007, 112 awards totaling \$154.8 million were made to intermediary organizations. These organizations, in turn, competitively awarded funds to more than 4,100 grassroots groups in 47 states and the District of Columbia. In fiscal 2008, the Administration for Children and Families provided more than \$17.5 million in continuation awards to 37 intermediary grantees under the Demonstration Program. No funding was available for new awards.

A 2007 HHS-financed evaluation of this program by Abt Associates, a research and evaluation consulting firm, revealed that 88 percent of FBCOs receiving sub-awards and training reported improved outcomes for their clients, and 90 percent reported an increased level and/or improved quality in the services they deliver.³³

- **CCF Communities Empowering Youth Program**

The CCF Communities Empowering Youth (CEY) Program was created in 2006 to strengthen existing coalitions of nonprofits working together to combat gang activity, youth violence, and child abuse and neglect in local communities. CEY capacity-building grants were awarded to a

“lead organization,” which provided both financial support and capacity-building training to their coalition of FBCO partners.

CEY grantees were to assist their collaborating partners in addressing gang involvement, youth violence, and child abuse and neglect and generally to foster positive youth development, primarily through technical assistance and training. From 2006 to 2008, approximately \$90 million was awarded via competitive grants to 131 projects. In fiscal 2008, no funding was available for new awards.

C. MENTORING CHILDREN OF PRISONERS

An estimated 2 million children and youths in the United States have at least one parent in a federal or state correctional facility and often struggle with the economic, social and emotional burdens of the incarceration. Mentoring programs seek to provide these children with opportunities to develop a trusting relationship with a supportive, caring adult and a stable environment that can promote healthy values and strong families.

A successful program in Philadelphia, called Amachi, recruited mentors from churches and other faith-based organizations (FBOs) for children of incarcerated parents, with the volunteer mentors trained and organized in concert with Big Brothers/Big Sisters. Former Philadelphia Mayor Wilson Goode and University of Pennsylvania Professor John DiIulio, the first director of the White House Office of Faith-Based and Community Initiatives (FBCI), helped bring the Amachi program to the attention of Bush. As a result, he visited the program twice in his first years in office and used it as a model for a Mentoring Children of Prisoners program announced in his 2003 State of the Union address.

Congress established the Mentoring Children of Prisoners (MCP) program through the Promoting Safe and Stable Families Amendments. HHS began funding mentoring projects in 2003. In 2006, Congress reauthorized the MCP program for a second, three-year period under the provisions of the Child and Family Services Improvement Act of 2006. The MCP program dedicated \$50 million annually to mentoring children of prisoners. Grants were awarded to faith-based and community organizations that provided children and youths of incarcerated parents with mentors. The goal of these programs was to ensure safe and trusting relationships for these children; healthy messages about life and social behavior; appropriate guidance from a positive adult role model; and opportunities for increased participation in education, civic service and community activities.

The program directed grantees to recruit a diverse group of mentors who would commit to spending at least one hour per week with their assigned child for a period of at least one year, and required the grantees to screen volunteers extensively through appropriate reference checks, criminal background checks, and child and domestic abuse record checks. Outcomes for each participating youth were measured by such factors as academic achievement and avoidance of risky behaviors.

In fiscal 2008, HHS awarded \$58.6 million in funding to support 215 mentoring programs. Under the New Service Delivery Demonstration Program, MCP also began a new three-year

initiative in 2008 that uses program vouchers. The voucher program is administered by MENTOR, a national nonprofit resource organization. MENTOR's role includes certifying organizations eligible to receive the vouchers; working with mentoring organizations to identify children in need of mentors; and establishing a national call center to help families and caregivers choose a mentoring program best suited to their needs. Funded at \$5 million in its first year, the voucher portion was slated to increase to \$10 million in the second year and to \$15 million in the third year. The money, authorized by Congress, came with a requirement that HHS report annually to congressional appropriations committees on the progress of the voucher program.

Under law, government money cannot be paid directly to FBOs for inherently religious activities. But vouchers may allow clients to choose religious programs, provided they have a genuine, independent choice among providers and services are intended for a secular, public purpose. Critics have said vouchers improperly expand government-funded services to faith-based programs by circumventing laws that prohibit proselytizing when receiving direct government aid. With mentoring vouchers, critics are particularly concerned about the ability of vulnerable young clients to choose among programs and the chance that youths will be exposed to unwanted religious messages.

Other aspects of the Mentoring Children of Prisoners program were controversial as well. In 2005, a U.S. district judge found that an MCP grant to a faith-based mentoring organization in Arizona was unconstitutional because the group sought Christian mentors intended to introduce children in the program to Christ and nurture them with Christian messages. The program also was criticized by some of its strongest, early supporters – including David Kuo, the former deputy director of Bush's own White House Office of FBCI – for being too slow in delivering on its promise on the number of matches.

D. ACCESS TO RECOVERY

In his 2003 State of the Union address, Bush proposed spending \$600 million over three years on a new drug treatment voucher program, Access to Recovery (ATR), as part of his Faith-Based Initiative. The proposal sought to enable people to use vouchers to choose a substance abuse treatment program, a system of indirect funding that permits the government to fund services, including those with a religious element, provided by FBOs. The plan followed a late 2002 Supreme Court decision that upheld the use of education vouchers in Ohio at religiously affiliated schools. The court ruled that such funding was constitutional as long as the program served a secular public purpose and beneficiaries had genuine, independent choices between religious and secular providers.

The Bush proposal would have allowed more religious organizations to provide drug and alcohol rehabilitation services and generated criticism from some health care professionals and civil liberty groups, who were concerned that drug rehabilitation treatment by faith-based groups could diminish the quality of care. But National Drug Czar John Walters countered that vouchers, linked to client choice, reward programs that work and provide a format through which other federal money may be routed for effective social service programs.

The Office of Drug Control Policy and the White House Office of FBCI also teamed up to announce Pathways to Prevention, a faith-based marijuana prevention program for teens. The program encouraged more faith communities to participate in youth drug prevention programs by using faith as a deterrent to substance use. “Faith plays an important role when it comes to teen marijuana prevention,” Walters said in announcing the effort. “We are urging youth ministers, volunteers and faith leaders to integrate drug prevention messages and activities into their sermons and youth programming.”³⁴ Walters cited a 1998 National Congregations Study that said only 2 percent of congregations surveyed had participated in or supported substance abuse programs in the past year.

Walters’ enthusiasm for new faith-based partnerships in drug treatment was not universally shared. The announcement drew immediate fire from opponents of Bush’s faith initiative. “The Bush administration seems to think there’s a ‘faith-based’ solution to every social and medical problem in America,” said Rev. Barry Lynn, executive director of Americans United for Separation of Church and State. “The project is one very small part of a larger crusade that raises troubling constitutional concerns.”³⁵

Access to Recovery aimed to expand on the availability, methods and effectiveness of drug treatment programs administered by states. As its central feature, the program provided an incentive for states to deliver services through the use of vouchers that enabled clients to exercise “genuine, free and independent choice” among eligible treatment programs, including those administered by FBOs. The grant announcement quoted the Supreme Court’s criteria for using public funding to pay for religious school vouchers.

Three-year grants were awarded in 2004, subject to annual appropriations, to 14 states and one tribal organization for ATR programs: California, Connecticut, Florida, Idaho, Illinois, Louisiana, Missouri, New Jersey, New Mexico, Tennessee, Texas, Washington, Wisconsin, Wyoming, and the California Rural Indian Health Board. Congress appropriated \$100 million in both the 2004 and 2005 budgets to launch the ATR program, half the amount requested by the White House.

The Bush administration requested an increase to \$150 million for fiscal 2006, but Congress instead moved funding from ATR to the Substance Abuse Prevention and Treatment (SAPT) Block Grant, which all states receive for substance abuse treatment and prevention programs. The SAPT block grants represent 40 percent of total state spending on treatment and prevention, according to the House Government Reform Committee, and the block grant funds more than 10,500 faith-based and community organizations. A statement from the Senate Appropriations Committee said: “The committee is redirecting a portion of the proposed funding for the voucher incentive program to the SAPT Block Grant to ensure that all states and territories are afforded adequate resources for addiction treatment and prevention.”³⁶

That brought strong objection from supporters of ATR, including the chairman of the House subcommittee responsible for authorizing funding for the nation’s drug control efforts. In a statement Rep. Mark E. Souder, R-Ind., chairman of the Government Reform Subcommittee on Criminal Justice, Drug Policy and Human Resources, said:

“I am very disappointed that the Appropriations Committee has not included an extension of the Access to Recovery drug treatment voucher program in its 2007 budget. For years, before ATR, individuals in need of drug treatment were unable to select the programs that they believed would be most effective in helping them stop abusing drugs once and for all. With ATR, individuals have been empowered to select the program of their choice. For some that might be a secular, traditional program; but for others it might be a faith-based program. Yes, more evaluation needs to be done, just as it needs to be done for traditional drug treatment programs. But at this critical juncture in our society – with drug abuse rampant and the ATR program only a few years old – it would be a step backwards to stop funding the program that shows immense promise for truly changing people’s lives. ATR is a model for how many social service programs should operate, and I am hopeful that we can restore and expand the program. If we want to truly make a difference in the lives of our citizens, I think we should let them have a choice in their treatment.”³⁷

Consolidating ATR with the state block grant, in the view of another advocate, risked stopping the program in its tracks before it could gain traction or prove its worth in helping patients overcome addiction. “This misses the whole logic of Access to Recovery,” said Stanley Carlson-Thies, founder and president of the Institutional Religious Freedom Alliance, a nonpartisan think tank, and an advocate of vouchers as a way to indirectly channel government money to FBOs. “The idea was to create a different program from the existing ones under the block grant program, and you can only do it if you agree to set up this system. This just goes back to the status quo.”

However, Wesley Clark, HHS director of the Center for Substance Abuse Treatment at the Substance Abuse and Mental Health Services Administration (SAMHSA), said: “It is premature to reach a conclusion that the issue has been resolved to the detriment of the Access to Recovery program. The president stands behind Access to Recovery, the voucher concept, the individual choice concept and the recovery concept.” The Bush administration believed there was a need for professional treatment but also a need to extend contact to the client from the community and that FBOs were important in that pursuit, according to Clark. “SAMHSA is still committed to emphasize that aspect of the program,” he said. “Nothing in the existing legislation keeps states from using vouchers.”³⁸

Critics of ATR said the program expanded government-funded services to faith-based programs, many of which did not meet licensing requirements or medically sanctioned standards of state-approved services. FBOs receiving government money through vouchers are allowed to use religiously based curriculum in treatment, and that raised concerns among religious liberty groups.

“The administration has invested much effort in attempting to alter the delivery mechanism for drug treatment services with its Access to Recovery voucher initiative and this year’s proposal to ‘voucher-ize’ treatment services delivered with Substance Abuse Prevention and Treatment Block Grant funding,” said Democratic Rep. Cummings. “But it has failed to make significant progress in closing the gap between the number of people needing treatment and the woefully inadequate volume of accessible treatment services.” According to Bush administration figures:

in 2004, 23.5 million people age 12 or older needed treatment for an alcohol or illicit drug use problem while an estimated 2.3 million of these people received treatment at a specialty facility.

The ATR program was slow in getting started in part, according to observers, because of resistance by the conventional systems to faith-based providers and because of the ongoing need for clarity about permitted activities in their partnerships with the government. There were also complications with FBOs meeting licensing or other requirements of the clinical treatment model for block grant-funded services.

E. PRISONER REENTRY INITIATIVE

Launched in 2004, Bush's Prisoner Reentry Initiative linked ex-offenders with religious and secular nonprofits that provide mentoring and other programs. This new program was an attempt to address growing rates of return to prison that have concerned law enforcement and justice officials across the country in recent years. More than 650,000 prisoners are released from the nation's corrections institutions each year, according to the federal government. Half of them are expected to return to prison within three years for committing new crimes or violating conditions of their release.

The administration highlighted the prisoner reentry program as a key feature of its Faith-Based and Community Initiative and supported the Second Chance Act in 2005. The measure was enacted in 2008 and authorized \$165 million annually over two years to support mentoring programs, substance abuse treatment, literacy classes, job training and other assistance intended to help ex-offenders pursue productive, crime-free lives after their sentences were up. The law authorized grant funding for fiscal years 2009 and 2010 for state and local governments to launch or continue programs to improve ex-offenders' return to society. It also allocated competitive grants to faith-based and community nonprofits to offer programs linking ex-offenders with mentors or helping them seek and keep jobs.

The Second Chance Act included funding authorization, at \$55 million per year, to continue state and local government demonstration projects aimed at promoting the successful reintegration of ex-offenders. The funds could be used for programs that help released prisoners find homes and jobs, overcome addictions, strengthen their families, and improve literacy and other skills.

The act also authorized funding for creation of new programs at the state and local level to improve prisoner reentry, at an annual amount of \$45 million. The grants would fund: "reentry courts" that would monitor offenders and provide access to reentry services; qualified drug treatment programs as alternatives to imprisonment; family-based substance abuse treatment for parent offenders; technical career training for prisoners; and evaluations of educational methods at correction facilities. Another \$15 million was authorized annually for grants to nonprofit organizations, including faith-based and community groups to provide mentoring and other transitional services to former inmates. Another \$20 million annually was included in the act for grants to nonprofits to assist ex-offenders in obtaining and retaining employment in coordination with the Labor Department's One-Stop Career centers.

The Second Chance Act also called for inmates to receive information on health, employment, personal finances and community resources upon their release. And it authorized the Justice Department to conduct research on the best practices available through prisoner reentry programs.

Bush had praise for the work of small religious and other nonprofit groups when he signed the Recidivism Reduction and Second Chance Act into law. “Our government has a responsibility to help prisoners to return as contributing members of their community. But this does not mean that the government has all the answers,” Bush said in a bill signing ceremony April 9, 2008. “Some of the most important work to help ex-convicts is done outside of Washington, D.C. in faith-based communities and community-based groups. It’s done on streets and small town community centers. It’s done in churches and synagogues and temples and mosques.”³⁹

Though the Second Chance Act had bipartisan support, it took three years from its initial introduction to pass, due to a debate over hiring rights for the religious groups that would provide services to ex-convicts. A provision to allow faith-based recipients of Second Chance Act funding to prefer members of their own religion in employment was periodically inserted into the bill by legislators who believed religious groups should retain such a right as a way of maintaining their identities. But, like debates over similar provisions in other legislation during the Bush administration, opponents said such religious hiring rights would amount to publicly funded employment discrimination and a violation of civil rights laws. In the end, the provision was removed in order to secure passage of the bill.

Along with employment nondiscrimination requirements, federal law mandates that groups that provide programs with public funds to offer those services to all eligible beneficiaries, regardless of their faith. Service organizations are also prohibited from using funds they receive directly from the government for religious activities. Consequently, Second Chance Act service providers – be they religious groups or other nonprofits – are required to offer only secular programs to assist former prisoners.

According to the White House, more than 12,800 ex-offenders enrolled in the prisoner reentry program, and 7,900 of them were placed in jobs. Eighteen percent of participants were arrested again within a year – less than half the estimated national average for recidivism.

A forerunner of the Prisoner Reentry Initiative, a demonstration project known as Ready4Work launched by the Labor Department and Public/Private Ventures, a respected private research organization based in Philadelphia, showed promise in reducing repeat offenses and improving prisoners’ ability to find jobs. Ready4Work operated in 17 sites over three years, linking adult and juvenile ex-offenders with faith-based and community organizations for mentoring, job training and placement, and referrals to housing, health care, drug treatment and other programs.

A May 2007 report by Public/Private Ventures on the 11 adult Ready4Work sites found that just more than half of the program participants connected with a mentor, much lower than the 90 percent matching rate that had been anticipated. But it found that ex-offenders who had mentors were more likely to find and keep jobs, which could be attributable to differences in

levels of motivation. Ready4Work sites relied on religious organizations to supply volunteer mentors.

More than half of Ready4Work participants held a job for at least one month while in the program, with 60 percent of that group holding the job for at least three months and 33 percent remaining employed for six months or more – results that Public/Private Ventures found to be “impressive given the many barriers to employment these ex-prisoners face.”⁴⁰

This research also found Ready4Work participants to be less likely to commit a repeat offense than non-participants. According to Public/Private Ventures, 2.5 percent of Ready4Work participants returned to prison within six months – compared to 5 percent nationally, as reported by the Bureau of Justice Statistics – and 6.9 percent were back in jail after a year – compared with 10.4 percent nationally.

The study by Public/Private Ventures also found that the program was cost-effective, with an annual price tag of about \$4,500 per participant, compared with the \$13,000-\$45,000 cost of keeping someone in prison. Public/Private Ventures President Fred Davie – who was present at Bush’s signing ceremony for the Second Chance Act and now sits on President Barack Obama’s Council on Faith-Based and Neighborhood Partnerships – called the legislation “a promising step forward to ensure the safety and economic viability of many of America’s communities by investing in our nation’s most precious resource: its people.”⁴¹

The day after Bush’s signing of the Second Chance Act, the Labor and Justice departments announced prisoner reentry grants totaling nearly \$3 million to criminal justice agencies for funding of faith-based and community groups to provide ex-prisoners with employment services. Twenty-three agencies in 22 states and the District of Columbia were awarded grants of \$130,434 each. States receiving grants were: Alaska, Arizona, California, Colorado, Florida, Hawaii, Indiana, Iowa, Kansas, Maine, Michigan, Minnesota, Nevada, New Jersey, North Carolina, Ohio, Pennsylvania, Rhode Island, Tennessee, Virginia, Wisconsin and Wyoming.

State and local governments also created their own efforts to draw on the resources of local FBOs in prisoner reentry. Ohio Gov. Ted Strickland, for example, signed into law an act encouraging faith-based groups and volunteers to provide reentry services in that state. In Alabama, Gov. Bob Riley appointed an advisory council of government and religious leaders to develop a statewide prisoner reentry strategy. The communities of Boston, Minneapolis and Durham County, N.C., are among those with their own prisoner reentry programs that engage faith-based groups.

In part, these programs resulted from increased attention to the issue of reentry, fostered both by growth in the numbers of returning prisoners and federal initiatives in the area. But pressure also is being felt on the fiscal side to reduce prison populations for budgetary reasons. In Ohio, the push to engage religious groups in reentry programs came as the state’s Department of Rehabilitation and Correction faced \$74 million in budget cuts in 2008, according to press accounts. In an attempt to close growing budget gaps, at least eight states were reported to be considering proposals that would permit an early release of convicts from prisons, including California, Kentucky, Michigan, Mississippi, New Jersey, Rhode Island, South Carolina and

Vermont. And that was *before* the current, now-still-deepening national recession pulled the floor out from under state revenue systems.