



OREGON CURE

Citizens United for the Rehabilitation of Errants

The mission of Oregon CURE is to support the incarcerated and their families and friends by advocating for effective criminal justice policies and procedures.

Winter 2023, Volume 71

A Newsletter for Incarcerated People and their Families and Friends
P.O. Box 80193, Portland, OR 97280 | (503) 844-9145

ANNOUNCEMENTS

NEWS FROM THE INSIDE

Two AICs (AS and TA) housed at Oregon State Correctional Institution (OSCI) are preparing a voluntary evidence-based Sex Offender Treatment Program (SOTP). The SOTP is in the pre-pilot stage, and they are reaching out to the community for important input. For decades, treatment in Oregon has diminished into mandated work assignments and human warehousing. Recently, especially at OSCI, there has been an important shift in what defines incarceration. According to the Oregon Department of Correction website roughly 40% of all AICs are serving sentences for a sex-based offense. This equates to 5,000 of the total 12,000 currently incarcerated in our state. This underserved population does not receive any direct treatment while serving their sentences. Domestic violence, alcohol and drug-based offenders are offered exclusive access to state provided services. This allows for rehabilitation, earned time credits (ETCs), and various alternative incarceration programs (AIPs) upon completion. It is time under the “Oregon Way” to bring vital services to the underserved majority of those in need.

Mr. AS and TA have been working to cut through the red tape and help gain ODOC support for this pilot SOTP. They are turning to our community for contacts with experience in the field of treatment. They need outside resources that can help them procure and structure a voluntary program based on compassion and accountability. Anyone with knowledge in the treatment profession or legislative/judicial contacts and are interested in becoming a vital part of rehabilitation history, should send information to s63881768@gmail.com. If any of our humble readers have suggestions or thoughts about how this SOTP could be administered, please feel free to reach out. We know change can happen from the inside. Our hope is to help AICs with addiction and poor decision making which lead to incarceration. We believe society deserves something better for AICs while serving their prison sentences.

LIKE & SUBSCRIBE

Oregon CURE is excited to announce that we have a new Facebook page that is updated frequently. Please LIKE our page: facebook.com/groups/oregoncure AND subscribe to the free “News Inside” newsletter published by The Marshall Project specifically for incarcerated individuals.

NEWSLETTER AVAILABLE IN PDF

Oregon CURE now has the capacity to email you the newsletter. If you would like to receive your newsletter in PDF format via email (and save us a little postage) please email oregoncure@gmail.com, and we'll fix you right up. Although there is no postage or printing fees associated with our emailing of the newsletters, we would appreciate a subscription donation to help offset the cost of printed newsletters that are sent to incarcerated individuals.

HELPFUL FORMS INCLUDED IN THIS NEWSLETTER

Notice that you will find on pages 5 and 6 two forms that can be used when you are incarcerated. You can tear out one page and have both forms, you can make copies of the forms, you can request copies of the forms from the prison that you are incarcerated in, you MAY find the forms available in the prison library. These forms when completed allow your loved one on the outside to be given important information about you that ODOC will not otherwise share. Be sure that you submit the completed form to ODOC and that you send your loved one on the outside a copy. If you are the loved one on the outside, you can send this form to your incarcerated loved one on the inside and inform them of the above. We hope that many of you find these forms to be helpful.

BECOMING A DELIBERATELY DEVELOPMENTAL DEPARTMENT OF CORRECTIONS

by Scott Spencer-Wolff, Ph.D.

We are all damaged, wounded people. The difference between us lies in the degree of our damage, how our woundedness manifests itself, and how our woundedness allows us to navigate the schizophrenic outside world. Imagine the brain and its capacity for perception as a rose trellis, with layers of interconnecting slats that, put together, comprise the filters through which we see the world. For most of us in the western culture, those interconnecting slats are what we identify as the "norms" of our culture and the cultural agreements we have not to hurt, victimize or endanger others.

For those with severely damaged systems, we might use the word "criminals," (although that is a circumstantially, culturally, and statutorily defined label). Putting those trellis slats back into some kind of order is possible except in the relatively rare cases of severely damaged neurological systems. That is a significant part of what prison is supposed to do. So much of our behavior is contextual. This is not to diminish the damage of murder or other serious crimes but to remind us that all behavior is complex. Repairing those slats of interconnected perception takes more than locking someone up for 20-30 years in a system rife with inconsistencies.

During the recent Oregon gubernatorial election, an ad released by Christine Drazen mentioned Governor Brown's 'dangerous offenders' released. I thought that was a serious slap in the face to the Department of Corrections. What do we believe the Department of Corrections does, if not correct? Make better? Rehabilitate? If, after long periods, the norm is for people to be released the same or worse than they were when they went in, what is being "corrected?" Do so many believe that the Department of Corrections does no correcting? If so, should the name be changed to the Department of Prisons or the Department of Criminal Warehousing? Is putting people "on ice" for a decade or more, doing nothing to facilitate their emotional and psychological development, really the best we can do? We are collectively confronted with several questions. Do we believe that people change? Do we believe that damage and woundedness can be "fixed"? What would that look like? Is such a transformation possible within the context of incarceration? If we believe in these potentials for transformation, are we actively creating a system where this is possible? Change for anyone is complex - and especially difficult for those with severe emotional and mental damage.

So where are we? American Prisons have developed along various strains of sociological theory. The only cohesive theme has been "custody" - focusing on job one of keeping people inside. And in line. This isn't unreasonable, although 95% of incarcerated individuals will be released to the community. Should there be an expectation that those who, in time, will be released will have developed in some way as human beings simultaneously with their incarceration? And what about the collateral emotional damage to the prison staff who supervise these people? Is there an expectation that they will become better, more insightful people because of their daily contact with the most challenged among us? Is there an expectation that in working with people with a variety and degrees of dysfunction, we will develop the skills to navigate our dysfunctions better?

These are questions that some academics may ask but are rarely, if ever - at least in the United States - reflected in cultural changes in our prison communities. With the crisis facing our own Oregon prison system, where it seems clear that not a lot of "corrections" is going on. Where employees are becoming more difficult to find - some thinking about re-tooling our thoughts about prisons might be a timely endeavor. At a recent meeting where the AFSCME (Correctional Officer's union) was represented, representatives explained that Oregon had lowered the standards and requirements for hiring correctional officers because of severe staff shortages. It made me wonder how lower standards could possibly be a good idea at a time when mentally ill inmates and a steadily increasing *senior* population were represented in significantly higher numbers within the prison population. That doesn't make sense.

Has the militaristic hierarchy model of corrections officers & staff run its course? Is it time to rethink the entire shell of what we call incarceration or the prison system? Is it time to rethink the various us/them models we are accustomed to? (Staff/Inmate, Upper Management/Line Staff just to name a few). One of my favorite quotes from Lisa Lahey and Dr. Robert Kegan in their book *An Everyone Culture* is:

"In an ordinary organization, most people are doing a second job no one is paying them for. Within organizations large and small; in government agencies, schools, hospitals, and churches; most people are spending time and energy covering up their weaknesses. They are manipulating other people's impressions of them, showing themselves to their best advantage, playing politics, hiding their inadequacies, uncertainties, and limitations. This may be the most significant loss of resources that organizations suffer daily."

What would happen if Department of Corrections staff, from the top down, were to begin taking steps towards shifting from the model of spending our days figuring out how to get promotions? Or figuring out how to move to other positions based on the length of time in a particular job or some other criteria. What if our criteria for promotion was the definable deepening

insight into ourselves and our targeted clientele, all delineated by specific areas of progress? What if we were to rethink pay scales in other models than rank? Many workplaces claim to be committed to fostering the personal growth of their employees. But few are deliberately organized to put employee growth at the very center of their mission. What would happen if you were to talk several times a day about your progress on personal-improvement goals? To undergo a formal review with colleagues (who discuss your performance with total honesty) or to recognize that leaders may be demoted by their peers at any time? What if this process were applied to both staff and Adults in Custody? Individually and together? Even if we started small?

Isn't the essence of being a "Correctional Officer" about role modeling pro-social and developmental behavior? "Here's the situation and how I would handle this." Or, "Here's what happened, here's what I did, and here's what I feel I could have done better." Shouldn't the fundamental goal of the incarcerated be to become better people? People with a level of emotional intelligence further developed at the end of their sentences than at the beginning. That's either not going to happen in our current system or so infrequently as to be rare. Can you imagine if your colleagues were excited to celebrate your developmental accomplishments? If your supervisor was eager to make your personal and vocational development one of their top priorities? If Department of Corrections management leaders prioritized policies that fostered growth and trust? If management and leadership (not necessarily the same folks) held themselves to the same standards as others, and everyone in the workplace was fully committed to the success of the DOC, each other, and the inmate population? Based on *An Everyone Culture* [Kegan & Lahey], this model lays out a new definition of what it means to *be* at work. In the process, they broaden the notion of a "learning organization," making the case that any workplace — prisons included — can be a site of deep learning and personal growth. Organizations that have adopted this kind of model, or even moved in the direction of being a deliberately developmental organization, have demonstrated improved employee retention, better communication, reductions in employee downtime, less interdepartmental strife, and faster solutions to challenging problems. These organizations have become more adaptable in anticipating crises (without scripting those crises as is the case now) and laterally (rather than vertically) identifying creative possibilities.

What kind of practices encourage growth?

1. **Practices that shed light on internal struggles.** The invitation to employees and Adults in Custody alike to share challenges and goals that, typically, might be considered irrelevant to the correctional milieu. By helping everyone overcome internal or personal struggles, the organizations helped them address longstanding limitations in how they approached their work and lives.
2. **Practices that connect professional and personal work.** What if this same focus on surmounting personal challenges was not a separate part of the workday but integrated throughout? The greatest teaching comes from shared lived experience. Prison staff has a great deal to offer AICs in how they model their capacity to address their issues.
3. **Practices that shift the focus from outcomes to the processes generating those outcomes.** *What if we were less concerned with correcting unhelpful behavior than changing the mindset that created that behavior?* This perspective helps emphasize the importance of achieving long-term goals above short-term ones
4. **Practices that give staff and the incarcerated a common language.** Prison is a microsome of the outside world. Whether people admit it or not, it is a community. I have often heard prison officers say, "This is my prison." No, no, it's not. If anything, it's our prison. We're all in this together. We must begin to think that way and create policies that reflect that attitude. Along with a common language, what if all programs were available for all - anyone interested, staff, or AIC could participate together in any program? Again, an opportunity for staff and the incarcerated to achieve common ground. An opportunity for staff and the incarcerated to learn and grow together.
5. **Practices that exist every day, at every level.** Personal development, progress and growth would to always be the essential goal — for an entry-level new hire, for departmental directors, and for those incarcerated deemed to have a level of cognitive skills to participate in this process. Admittedly some are not, but those folks offer an amazing learning opportunity in patience and understanding. If we structure the process right, those folks can be our greatest teachers about ourselves and our ability to respond instead of react. At the beginning of the day, *everyone* asks, "How am I going to be better today?" At the end of the day, *everyone* asks, "How am I better today?"

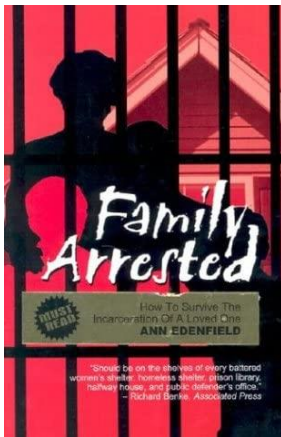
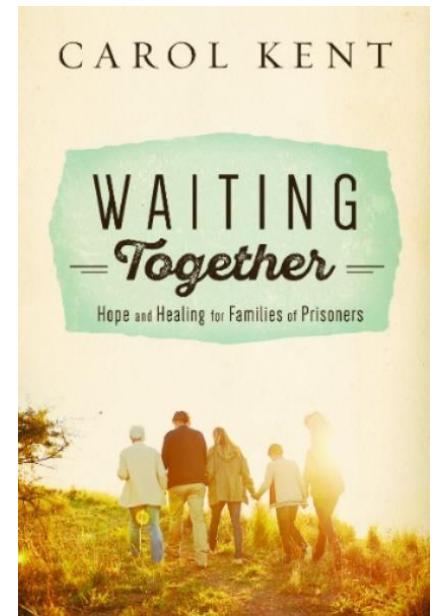
There will be lots of "But what about...?" thoughts about this. Clearly, something needs to be done to improve the system and the quality of life for both staff and inmates and the process by which we prepare people for a more pro-social participation in life post-incarceration. The emotional toll that prison takes on staff is well documented. Divorce, addiction, and other challenges are rampant. Getting bodies into staff positions, shortcuts will be taken in assessment and training, which will either get someone killed, end up in lawsuits - or even be counterproductive to the "rehabilitative" or (habilitative) effort. We touted the "Norway Model" for a couple of years. Some of that is not workable in the Oregon Department of Corrections or the American system in general. But one possible aspect of the Norway Model that is possible, is a "cognitive restructuring" for everyone. Insiders, staff - from the top down and side to side. Questions about this, feel free to email drscottwolff@icould.com.

BOOKS OF INTEREST

WAITING TOGETHER: HOPE AND HEALING FOR FAMILIES OF PRISONERS PAPERBACK by Carol Kent

Due to events beyond your control, you find yourself with a loved one in prison. What now? Carol Kent has been there and knows what it's like to have life flipped upside down. She writes *Waiting Together* from a heart that understands what it's like to navigate a new normal, offering hope and healing from a Biblical perspective. This 90-day guide, filled with devotions, prayers, and Scripture, comforts hurting hearts and shows how God can bless families in similar situations.

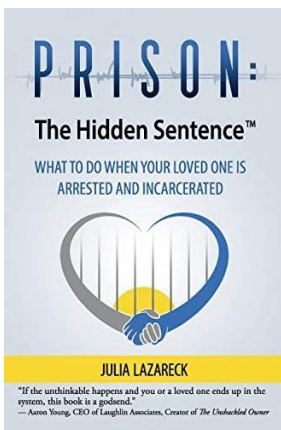
Carol Kent is a best-selling author and sought-after public speaker who weaves humor, hope, and faith into every presentation. Carol's only child is serving a life sentence in the state of Florida, and she is passionate about helping inmates and their families adjust to their "new normal." She and her husband, Gene, founded the nonprofit organization *Speak Up for Hope*, with the goal of helping inmates and their families through resources and encouragement.



FAMILY ARRESTED: HOW TO SURVIVE THE INCARCERATION OF A LOVED ONE by Ann Edenfield

The author's life was devastated when her husband was arrested for a federal tax crime and given a fifteen-year sentence. During the six years he served, she learned about the prison system, which she tells about in this book. Edenfield reads the painful events of those years in a factual way, distancing herself from the emotional pain of being left to raise four young children on little income.

This stoicism requires listeners to engage their imaginations to envision what her life must have been like. Since this audiobook demands work from the listener, it can be draining to process the graphic material.



PRISON: THE HIDDEN SENTENCE™: WHAT TO DO WHEN YOUR LOVED ONE IS ARRESTED AND INCARCERATED by Julia Lazareck

Julia Lazareck is an advocate for change for family members who have loved ones in the criminal justice system. Through her blog, podcast, publications and presentations, she provides information on the prison family journey. Julia also works with non-profits that offer support to families and children.

“If you want to know what to expect when you or a loved one gets arrested, 'Prison: The Hidden Sentence' breaks it down for you so you don't break down. This book will give you the clarity and strength that will see you through adversity.”

— Dave Austin, Founder, Extreme Focus, International Bestselling Author

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**OREGON DEPARTMENT OF CORRECTIONS
RELEASE OF CONFIDENTIAL INFORMATION
CONSENT FORM**

I, ____, SID # ____, authorize the Oregon Department of Corrections to disclose information to:

List Name and Title of Person(s) or Organization(s)

- 1) _____
- 2) _____
- 3) _____

THE FOLLOWING INFORMATION FROM MY RECORDS (SPECIFY EXTENT OR NATURE OF INFORMATION):

THIS INFORMATION WILL BE USED FOR THE FOLLOWING PURPOSE (SPECIFY REASON FOR REQUESTED INFORMATION):

THIS CONSENT TO DISCLOSE MAY BE REVOKED BY ME AT ANY TIME EXCEPT TO THE EXTENT THAT ACTION HAS BEEN TAKEN IN RELIANCE THEREON.

THIS CONSENT (UNLESS EXPRESSLY REVOKED EARLIER) EXPIRES UPON:

SPECIFY DATE, LENGTH OF TIME, EVENT, OR CONDITION

Inmate Signature

Date

Witness Signature

AUTHORIZATION TO USE AND DISCLOSE HEALTH INFORMATION

I authorize _____
(Name and address of facility/health care provider you wish to release information)

To release information requested for (either DOB or SID is REQUIRED to identify record):

(Name of person making request) D.O.B. _____ S.I.D. _____
(Date of Birth)

To: _____ For the purpose of _____

By **INITIALING** the spaces below, I specifically authorize the release of the following records, if such records exist:

- All hospital records (including nursing records and progress notes)
- Transcribed hospital reports Pathology reports Other (Explain Below)
- Medical records needed for continuity of care Diagnostic imaging reports _____
- Most recent five year history Clinician Office Chart notes _____
- Laboratory reports Dental records
- Emergency and Urgency care records
- Please send the entire medical records (All information) to the above named recipient

I authorize the information listed below to be used, disclosed, or received by placing my **INITIALS** next to the information:

- *HIV/AIDS – related records (Copies will not be released to inmates while incarcerated)
- *Genetic testing information
- * Mental Health-list specific info requested _____
- **Alcohol and Drug information

****PROHIBITED RE-DISCLOSURE:** This information has been disclosed to you from records protected by Federal Confidentiality Rules (42 CFR Part 2). The federal rules prohibit you from making any further disclosure of this information without the specific written consent of the person to whom it pertains or as otherwise permitted by 42 CFR Part 2. A general authorization for the release of medical or other information is NOT sufficient for this purpose.

** Must be initialed to be included in other documents. Records will not be released without your initials specifying that you have granted this specific release authority.*

This authorization is limited to the following time period: _____

This authorization is limited to a worker’s compensation claim injuries of: _____

My signature indicates that I authorize the disclosure of the above information and understand the following:

I understand that I may choose not to sign this authorization and that my choice not to sign will not be a basis to affect my ability to obtain treatment or my eligibility for health care benefits.

I understand I can cancel permission to use and disclose my information at any time in writing. The only exception is when action has been taken in reliance on the authorization. Unless revoked earlier, this consent will expire 180 days from the date of signing, or shall remain in effect for the period reasonably needed to complete the request.

I understand this change will not affect information that has already been shared.

I understand that federal and state law protects my health information. However, my information could be shared with agencies or businesses that may not be covered by this law. They could then share my information with others. I understand that they cannot share information regarding HIV/AIDS, mental health treatment, alcohol and drug treatment or genetic testing unless I give them permission by initialing this permission above or as otherwise permitted by law.

(Signature of Patient)

(Date)

(Signature of legal/personal representative authorized by law)

(Date)

MEMBERSHIP RENEWAL

Your membership renewal date is on the address label of this newsletter. If your renewal date is expired, we ask that you please renew today to continue to receive this newsletter and to continue to support our organization.

You can also make a donation for someone you know to become a member. Your support is important to our mission and your donation is tax-deductible.

Send your membership tax-deductible donation to Oregon CURE, PO Box 80193, Portland, OR 97280.

Please fill out the member donation form below to receive our newsletter. Adult in custody subscription donation is \$3 and Individual Non-Incarcerated subscription donation is \$15. **All tax-deductible donations are greatly appreciated and can be made in any amount. Visit our website at oregoncure.com.**

Name: _____

Address: _____

Email: _____
(optional)

City/State/Zip: _____

Name of incarcerated loved one / SID & facility: _____

PUBLICATION NOTICE

This newsletter is a publication of Oregon CURE. Oregon CURE is a 501 (c)(3) organization whose goal is to reduce crime through criminal justice reform. The opinion and statements contained in this newsletter are those of the authors and do not necessarily reflect the views of Oregon CURE.

Contributions of articles, letters to the editor, notices, etc. are welcome but may be edited or rejected for space. Articles may be copied in their entirety with credit to the author or to the publication. Oregon CURE is an all-volunteer organization that is not a service organization. Do not send us any legal documents, we are not a legal service. We are not qualified to assist you with legal matters.

RELEASE ORIENTATIONS

Release Orientations are co-facilitated by Community Corrections and Oregon CURE. Find out how you can help your recently or soon-to-be-released loved one successfully re-enter our communities. Before attending, please phone one of the county coordinators' departments listed below to confirm the date, time, and location.

Washington County Dates

Contact: Marcus Ford (503) 846-3494

Multnomah County Dates

Contact: (503) 988-3081 press "0" for TSU

Marion County Dates

Contact: Kayla Thompson
(503) 540-8017 (call to confirm)

INTAKE ORIENTATIONS

Intake Orientations are co-facilitated by the Oregon Department of Corrections and Oregon CURE. Find out about Oregon's prison system, the intake process, phones, mail, and visiting requirements. You will receive a packet of informational brochures. There will be opportunities to ask questions and learn how you can get through your loved one's incarceration.

Portland Metro Dates

Location: Varies - please call Oregon CURE to confirm:
(503) 844-9145

or email oregoncure@gmail.com

Salem Dates

First Christian Church in Salem
6:30-8:30 PM on 3rd Thursdays Quarterly
(503) 378-0050 (call to confirm)

Oregon CURE
7805 SW 40th Ave.
PO Box 80193
Portland, OR 97280

ATTENTION:

Your address label has printed your renewal-date, below your name. This will be your last newsletter if your renewal date has passed. **Renew today to remain informed!**



SUPPORT GROUPS

Oregon CURE support groups are intended for adult family members and friends only. Some topics of discussion may not be suitable for small children or pre-teens. Attend a support group and network with family members who have “been there”.

Some of these support groups meet via zoom and some meet in person. Please reach out with the contact information given below as you are planning to attend, or if you have any questions. There is no limit to which of or how often you attend a support group, nor is there a location requirement, if you are interested in attending a support group, we welcome you to do so.

Each meeting offers different insights and valuable information, and you are not required to share anything it all, if you do not wish to, simply listen and learn from other attendees.

Portland East Side Support Group

Varies & flexible – please call if interested.

Please call Ray at (503) 421-0269.

RayAllenFox@gmail.com

Eugene Support Groups

1st Thursdays: 7:00-9:00pm

Please call to confirm location.

Dave (541) 344-7612 or Don (541) 342-6817

Zoom Support Group

1st Wednesdays: 7:00-8:30pm

Please email for Zoom link prior to meeting.

oregoncure@gmail.com or admin@oregoncure.com

Salem Support Group

1st Saturdays: 9:30-11:30am

The Keizer Senior Center

930 Plymouth Drive NE, Keizer, OR 97303

Wayne (503) 409-3329