



# Blount County Community Justice Initiative

## Mission Statement

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



## Objectives: *"Targeting Appropriate Interventions"*

Enhance the quality of life of all Blount County citizens.

Help ensure the safety of the public, staff, inmates, and program participants.

Minimize victimization and help repair harm caused by crime.

Achieve cost efficiencies and effectiveness throughout the system.

Provide appropriate facilities and programs based on individual needs and risks.

Decrease the rate at which people return to jail for committing new crimes.

Provide programs that address factors that contribute to criminality, including substance abuse, addictions, and mental illness.

Use innovative and evidence-based programs and design principles.

Make time in the justice system effective by fostering accountability and encouraging positive life changes.

Maximize staff effectiveness and job satisfaction.

Accommodate growth and change in populations, programs and operations over time.

# Challenges

## Jail Challenges

The Blount County Adult Detention Center (Jail) opened in 1999 (September I believe)

It is certified for 350 beds and has exceeded its rated capacity for more than half its life

The ADP (Average Daily Population) for 2017 was 524 (More about this later)

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

So, what must be done about it?

Who should?

Who can?

Who will?

## Workforce Development Challenges

Interconnected needs discussed at the Roundtable in January “each one impacted by a job...each job impacted by one”

Transportation, Homeownership, Education, Crime, Health, Money (each a potential factor in recidivism)

So, what must be done about it?

Who should?

Who can?

Who will?

## Commonality

Both challenges above are all about people, some needing help and some capable of helping

Unique challenges and opportunities surround reentry from local jails as well as workforce development

## Public Perception

We need to impact public perception of addiction and mental health away from a “shameful secret”?

We need to agree that it’s not a jail problem, it’s a criminal behavior problem?

We need to agree that it’s not a drug problem, it’s a substance abuse problem?

As Government and Employers, lets inform and engage our community on these issues that we all need to own and address

AN ECONOMIC REPORT  
TO THE GOVERNOR  
OF THE STATE OF **TENNESSEE**

THE STATE'S  
ECONOMIC  
OUTLOOK  
JANUARY

**2018**

AN ECONOMIC REPORT  
TO THE GOVERNOR  
OF THE STATE OF **TENNESSEE**

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IN COOPERATION WITH THE

Tennessee Department of Finance and Administration  
Tennessee Department of Economic and Community Development  
Tennessee Department of Revenue  
and  
Tennessee Department of Labor and Workforce Development

THE STATE'S  
ECONOMIC  
OUTLOOK  
JANUARY **2018**

# **From the - ECONOMIC REPORT TO THE GOVERNOR OF THE STATE OF TENNESSEE**

Prepared by the Boyd Center for Business and Economic Research  
Haslam College of Business, The University of Tennessee

**Tennessee had the second-highest opioid prescription rate in the nation in 2012**

**Alabama & Tennessee had approximately 1.43 prescriptions per person**

**Assuming an average opioid prescription contained 60 doses**

**That is equivalent to more than 85 prescription opioid doses**

**for every man, woman, and child in both Alabama and Tennessee**

**In 1999 - Prescription opioids were involved in 30 % of all U.S. drug overdoses**

**By 2015, this figure more than doubled to 63.1 %**

**In 1997 – 670,000 OxyContin prescriptions were dispensed**

**Only 5 years later, in 2002 – 6,200,000 OxyContin prescriptions were dispensed**

**Hospitalization costs in Tennessee associated with opioids alone are estimated at \$422.6 million per year**

**Additionally, TennCare in-patient hospitalization costs amounted to \$76.9 million in 2015**

**Substance abuse generally leads to a 1% reduction in the number of individuals in the labor market**

**Resulting in a loss of over \$1.3 billion in private sector income**

**Which in turn leads to the loss of \$239.5 million in foregone sales tax revenue. \*\***

**\*\* <http://www.tennessean.com/story/money/industries/healthcare/2017/12/04/drug-alcohol-abuse-saps-2-billion-tennessee-annually-under-the-radar-impact-opioid-epidemic/909253001/>**

# Population Projections

## General Population & Incarcerated Population

General Population			Adult Incarceration		
Year	General Population	Source	Projected ADP	Bed Need Projection	Note
2017	129,929	U. S. Census Est.	See Note ->		524 ADP -Actual from TDOC
2020	139,297	BL&A Estimate *	562	674	
2030	139,297	BL&A Estimate *	713	855	
2040	183,913	BL&A Estimate *	806	967	
2050	208,034	Extend BL&A Est.	912	1094	

\* Prepared by Bernadin, Lochmueller & Associates, Inc. for the Knoxville Regional Transportation Planning Organization, Knoxville Regional Travel Model Update, 2012 Socioeconomic Control Total Report, 2012, pages 17 and 28.

### A Challenging Fact

Projected 2018 ADP is 536 - Daily jail head-count has exceeded that most all of 2018 so far  
 The count was at or near 600 for 2 weeks in June - it was 576 Monday & 580 yesterday

# Hope

**A Transition Center has great potential to reduce jail overcrowding and address the many underlying issues, especially opioid (and other substance) abuse**

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

**Incarceration in a Transition Center could include a variety of programs such as GED, budgeting, life skills, job skills, AA, NA, faith based programs, employment readiness, behavioral counseling, self respect and respect for others, etc.**

**The benefits are to individuals, families, employers and all aspects of the community as a whole**

**Research has conclusively demonstrated that:**

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

**If half of yesterday’s ADP could successfully “transition” from an incarceration cycle to the workforce, that would be 290**

**But consider this...in 2016, more than 4500 people were arrested by Blount County, Maryville & Alcoa alone**

**That’s more representative of the real “cycle”**

**What if half of them (or more) could make the transition to a more responsible life?**

# Final Thoughts

The CDC reported that in 2016:

**42,249** people died in the U.S. due to opioid-related overdoses

That's 66% of the 63,632 total drug overdose deaths reported (174 a day)

Total drug overdose deaths increased 21% from 144 a day in 2015

**40,200** deaths were attributed to auto accidents that year – FEWER THAN OPIOIDS!?!

## THREE PILLARS TO AGREE ON

- 1) Change our mindset from “good drugs & bad drugs” to “healthy & unhealthy relationships with drugs”
- 2) An unhealthy relationship with drugs often conceals frayed relationships with loved ones, the world around a person, and with himself or herself
- 3) The total eradication of all drugs is an impossible goal

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