

THE 'OLYMPIC HURDLES' OF OBTAINING

**The 'Olympic Hurdles' of Obtaining Federal Benefits for Incarcerated Individuals
with Disabilities: A Study at two Massachusetts County Jails**

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Abstract

An overwhelming number of incarcerated population in jails are people with disabilities, mental health issues or co-occurring disorders who often leave jails without the proper support or the ability to find employment. Cash benefits of SSI/SSDI for those eligible can be a pathway to housing, healthcare and improved living arrangements. However, complicated application procedures and prolonged approval times often leave applicants without support for extended periods of times which exposes them to returning to their previous lifestyle. This project explores the policies of two of Massachusetts's county jails and their ability to apply for SSI/SSDI while incarcerated through interviews.

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“It's awful hard for an addict in recovery who's depressed, homeless, broke, miserable and hungry and tired from being in a shelter and everyone loud all night to stay sober. There's so many hurdles, you'd have to be like an Olympic hurdler to get through that maze and still be positive and stay sober and have career goals and do stuff. Then you run into all the pitfalls if you apply for SSI. What's the chance of somebody like that staying sober while he's waiting for his claim to be processed?”

–Rasoul*

*Given that confidentiality of the participants is paramount in this study, all participants' names have been replaced with pseudonyms.

Introduction

Snow and Briar (1990) called jails “modern day asylums, housing the mentally ill, public inebriates, drug addicts, developmentally disabled and people with various medical problems” (p.147). While that description may not apply to jails in 2019, research within several Massachusetts county jails has revealed that jails and houses of correction are still considered “the largest mental health facilities” in the counties (personal communications, 2018; Fisher, Packer, Simon & Smith, 2000; Torrey, Kennard, Eslinger, Lamb & Pavle, 2010; Lamb & Weinberger, 2005). Reports by the Bureau of Justice Statistics have consistently placed prisoners and specifically people incarcerated in jails at significantly higher risk of disability and mental health issues than the general public (Bureau of Justice Statistics, 2006; Bureau of Justice Statistics, 2011-2012).

For many ex-offenders with disabilities, mental health issues and other co-occurring disorders, the steady income provided by Supplemental Security Income (SSI) and Social Security Disability Insurance (SSDI) presents a possible pathway to housing and health insurance, decreasing the risk of recidivism (Dennis, Lassiter, Connolly & Lupfer, 2011; Dennis, Ware & Steadman, 2014). However, slow processing times and low approval rates among first time applicants to federal benefits jeopardize the chances of successful integration into society, placing these returning citizens at a greater risk of homelessness and subsequently re-offense (Dennis et al., 2014).

The Social Security Administration (SSA) recommends utilizing the correctional pre-release setting to link individuals with its disability programs (Dennis et al., 2014).

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However, a study by Morrissey, Cuddeback, Cuellar & Steadman (2007) revealed that county jails across the United States do not have a standardized policy for re-entry services to incarcerated individuals with disabilities (IIWD). This means that people incarcerated in jails have vastly different experiences of services depending on the facility they are housed in (Steadman & Veysey, 1997; Osher, Steadman & Barr, 2003).

This study addresses the lack of a standardized policy for pre-release disability services in county jails by seeking to identify the barriers to accessing SSI and SSDI for individuals with disabilities from inside two Massachusetts county jail facilities. This study explores the policies of the SSA and each of the county jails through interviews with residents of these two facilities who identify as having one or more type of disability.

Background and Research Questions

Despite the optimistic self-perceptions of many incarcerated individuals preparing to leave prison, the issue of financial security and the risks that follow a life of financial uncertainty, namely re-offense, remain some of the main concerns of ex-offenders upon re-entry (Kazura, 2001; Visser & O’Connell, 2012). Cash benefits of SSI for those eligible get suspended upon incarceration of a full calendar month, and the benefits of SSDI-recipients get suspended after 30 continuous days of conviction and confinement. Both benefits may be reinstated at a local Social Security Administration office upon re-entry with evidence of release documents (Social Security Administration, 2017). However, IIWD receiving SSI lose their eligibility for benefits after 12 continuous calendar months of incarceration, effectively terminating their benefits application (Social Security Administration, 2017). Unlike suspension, formerly-incarcerated individuals with disabilities (FIIWD) must reapply for benefits and reestablish their disability status upon release.

The loss of SSI eligibility over prolonged incarceration periods, the disabling conditions of incarceration, and the long processing times often result in ex-offenders going months—sometimes years—without the support of benefits. This increases the probability of exposure to their previous lifestyle involving criminal activity (Evans Cuellar & Cheema, 2012). The incarceration environment itself can have lasting effects on mental and physical health functions that may exacerbate existing disabling conditions

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or create an eligible profile for disability benefits for previously non-disabled individuals (Evans Cuellar & Cheema, 2012; Massoglia, 2008). Given this, the number of people with disabilities is increasing in the correctional system. Alongside this increase, the inadequate or disconnected re-entry planning practices place FIIWD and mental health disorders at a greater risk of homelessness and re-arrest, which consequently complicates their benefits application process (Steadman & Barr, 2002).

FIIWD who are homeless recognize that obtaining SSI or SSDI is a crucial first step to securing health care and housing for an improved lifestyle. However, the combination of disabilities and the co-occurring circumstances of a life on the streets pose additional challenges for this population to receive benefits from these services (Dennis et al., 2011; Kauff, Brown, Altshuler, Denny-Brown & Sama Martin, 2009).

This study seeks to understand the barriers to obtaining SSI and SSDI for IWD from inside jails by asking two questions: (1) Do the two Massachusetts county jails in this study have an organized system in place of implementing SSA’s available programs at their facilities? (2) How do IWDs navigate the “Disability Determination” process of SSA to gain eligibility for federal benefits? I will examine the accessibility of these cash-assistance programs for this population by studying the following two institutions: Facility 1, one of the state’s most overcrowded and under-resourced county jails and Facility 2, which is considered the state’s best county facility for reentry programs. By studying these questions in these facilities, I contribute to the state of knowledge by evaluating the accessibility and availability of SSA’s federal benefits for some of the most marginalized groups of the disability community.

Assisting IWDs to obtain federal benefits to pay for medical and housing bills is an important step in a successful transition as they prepare to leave correctional settings (Conly, 2005). The Substance Abuse and Mental Health Services Administration (SAMHSA) sponsored the SSI/SSDI Outreach, Access and Recovery (SOAR) program in 2005 to support individuals who are homeless or at risk of homelessness navigate the SSA’s benefits application and to promote approval rating for those eligible. Due to the high numbers of individuals who are homeless in correctional settings, the SOAR model has been used in some jails across the country. One of the main functions of SOAR is assisting states in strategic planning for the establishment of cross-agency collaboration,

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which in correctional settings signifies facilitating communications between key stakeholders in the benefits application process and connecting IWD with providers in the community (Kauff, et al., 2009; Dennis et al., 2014). In a pilot study in two county jail facilities in New Jersey, SOAR-trained staff screened participants for SSI/SSDI eligibility and linked eligible candidates to community providers who were made aware that SSI approval equates healthcare (Medicaid) access (Dennis, et al., 2014). Both Dennis et al. (2014) and Conly (2005) emphasized the importance of connecting IWD to community providers before they leave correctional settings. However, Conly (2005) goes further to say that securing a provider in the community is only one part of an effective integration process. A study by White, Saunders, Fisher & Mellow (2012) suggests that incarcerated individuals in jails who completed their pre and post release support programs had fewer and slower rates of recidivism. However, the same study points to a gap in our understanding of the individual barriers and the motivation indicators for program nonparticipants suggesting there are underlying reasons that impact the individuals’ access to services.

Bland and Bolas (2014) identify the high level of investment of SOAR-trained case managers in individual’s SSI/SSDI applications as one of key elements of SOAR. Considering the overwhelming representation of individuals with mental health and co-occurring disorders in jails and the under-resourced state of these facilities, it is natural that the success of the pilot studies in jails was contingent on the intervention of a group of trained professionals from outside the facilities (Peters & Bekman, 2007). While the SOAR model has had a consistent high success rate raising SSI/SSDI initial allowance rates from 29 percent in 2017 to 65 percent in 2018 (SOARworks, 2018) the two county jails in the study had not been successful in implementing the model at their facilities. Despite their awareness and interest in the SOAR model, the facilities were unable to implement the program due to the model’s training format, which requires staff to complete the online training in their own free time. The time-consuming, labor-intensive and complex nature of SOAR’s implementation has deterred some of the most under-resourced facilities most in need of these services from successfully applying SOAR’s principles.

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SSA’s Approach to Disability Assessment

SSA has a strict set of regulations that determine whether a person is eligible for disability benefits, based on their medical and/or mental health condition. Fulfilling the eligibility criteria requires compiling necessary medical documents and/or, in the absence of medical documents, attending consultative examinations (CE) with SSA-contracted medical providers (Kauff et al., 2009). These pre-requisite steps make eligibility determination a cumbersome process that puts ex-offenders with severe disabilities, and specifically those who are homeless, at a great disadvantage (Bilder & Mechanic, 2003).

Research shows that formal and informal social connections during and after incarceration promote chances of re-entry success (Kazura, 2001). Families and social connections have proven helpful in assisting ex-offenders to navigate the SSI/SSDI application procedure (Kauff, et al., 2009). This study seeks to examine the SSA’s policy for disability assessment, considering a holistic approach for the array of factors that determine an individual’s vulnerability such as the degree of their impairment and their ability to work, their social connections, financial situation and their knowledge of the system.

Methods and Setting

Relatively few studies have explored the success of programs intended to facilitate the process of reentry by seeking the insight of inmates still in incarceration (White et al., 2012). Considering the fact that the National Institute of Justice (2014) places recidivism rates at 76.6 percent, there are many repeat offenders incarcerated at any given time whose insights on the pitfalls of such programs could be extremely beneficial to improving jail policies.

Site Selection

This study took place at two of Massachusetts’ men’s resident county jail facilities. The facilities were chosen based on their differing agreement statuses with their local SSA office. One facility in the study has an agreement with its local SSA office; the other does not. The table below shows the comparable characteristics of the facilities, and the differences in their annual budget and resources. However, regardless of their different resources, currently neither jail has the ability to offer pre-release SSI/SSDI applications for their residents.

Table 1: Comparison of population, resources and ability to submit pre-release SSI/SSDI applications between County Jail 1 and County Jail 2

	Agreement with SSA	Fiscal Year 2018 Budget	Average Daily Population	Ability to Submit pre-release SSI/SSDI Applications
County Jail 1	Yes	81 million dollars	1,195	No
County Jail 2	No	51 million dollars	989	No

Participant Recruitment

The data cited in this paper comes from voluntary, semi-structured interviews with participants at both facilities. Participants were interviewed privately for 30 minutes to an hour. Questions focused on the process of applying to SSI/SSDI and the respondents’ ability to re-apply or reinstate their benefits while incarcerated. I conducted in-depth interviews with a total of 22 people: 10 at one facility and 12 at the other. Oral consent was obtained for the study and all interviews were recorded with the participants’ permission. University of Massachusetts Boston’s Institutional Review Board (IRB) approved the study, and additional permission was obtained from each of the facilities to conduct interviews.

All participants had reported at least one form of disability and had applied, been approved for and/or initiated a claim for SSI/SSDI. The personal profile of the participants in the study varied on a multitude of factors. They ranged from individuals in their 20s, to their early 60s, first time offenders, to repeat offenders with 11 or more past incarceration experiences. The education level also varied, from illiterate, to possessing two master’s degrees. The average education level, however, was about eighth grade. Disability types also ranged from physical to mental health issues as well as developmental and intellectual disabilities, with the majority of participants reporting the diagnosis of mental health issues (anxiety disorders and depression) as their disability.

Interviews were transcribed and the data was then entered into the ATLAS.ti software for analysis and coded for themes. Minor details in the quotes have been changed to protect the participants’ confidentiality (Morse & Coulehan, 2014). Analysis began with identifying certain words or themes in the transcribed text with the intention

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of understanding the contextual use of the words (Hsieh & Shannon, 2005). A certain amount of interpretation was used in discovering the underlying meanings of the words. For example, participants used the word *support* and follow up questions revealed that the word meant different things to different participants. So, while the category *the importance of social support* applies to many participants, the implications might vary depending on the individual (Joffe & Yardley, 2004).

During the data analysis process, the findings suggested barriers on an institutional level beyond the inmates’ individual characteristics that inhibited their access to federal benefits. In order to learn more about these institutional barriers, I interviewed one county jail administrator at County Jail 1 and two administrators at County Jail 2, taking an iterative approach to data collection (Srivastava & Hopwood, 2009). I inquired about the jail’s relationship with their local SSA office and their ability to implement the SOAR program at the jail to assist eligible individuals to obtain SSI/SSDI.

Findings

This project began with the assumption that, due to SSA’s policy for pre-release procedures, jails allow SSI/SSDI applications to be submitted 90 days prior to release. However, neither jails nor their local SSA offices were familiar with the pre-release procedure. The lack of the pre-release procedure program in the jails indicated communication barriers among agencies that work on re-entry issues. This finding changed the course of the study and allowed me to explore the ways the system failed the inmates and the larger entities that housed them, in this case the jails.

The themes in the data identified several barriers on an individual level for inmates with disabilities on their path to obtaining federal benefits. Field observation, participant data and personal correspondence pointed to barriers on a different level that had impaired the jail’s ability to implement the SSA’s pre-release procedure. Here I take each barrier by turn.

Individual Barriers

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Four factors emerged outlining the most prominent challenges in obtaining federal benefits that inmates face. These factors are: 1. disability 2. risk of homelessness 3. lack of social support 4. exposure to criminal activity.

Disability

Regardless of their disability type, almost all participants criticized the inaccessibility of the SSI/SSDI's application process. Some applicants described the application as a complicated and lengthy process, while others recounted abandoning their applications after getting confronted with the crowds at their local SSA office. Ali is a long-term recipient of federal benefits; however, his frequent incarcerations and the subsequent termination of his benefits mean that he often has to reapply for SSI and reestablish his disability status. While he is confident that he is eligible for benefits, his disability is a barrier against continued support.

I left [the SSA office] due to anxiety. There was a lot of people around. A lot of noise and stuff like that so I ended up leaving due to that. – Ali

Another IIWD pointed to the overwhelming amount of documentation required:

They [counselors] started helping me out, but when it came down to the paperwork and everything, I was doing it [the SSI/SSDI application] on my own. It was why I never got finished. – Ned

In the cases above, disability of the applicants is both the basis for their claim and the obstacle that limits their access to the benefits. Bilder & Mechanic (2003) describe the process of gaining SSI/SSDI eligibility as “guided by the extent of a person’s disability, financial need, and access to information and assistance.” (p.3). They further explain that the “success in gaining benefits depends on the extent of a person’s impairments and on access to sophisticated help in navigating the application and adjudication process.” (p.3). Bilder & Mechanic’s description of benefits-applicants’ interaction with the eligibility process underlines the importance of accessibility as a foundation for a system that is intended to assist people with disabilities who have limited access to information and external assistance. Participants described discouraging

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interactions with SSA caseworkers or CEs that often resulted in abandoned or unfinished applications. If the cash benefits of SSI/SSDI are considered an accommodative measure of the federal government for people with disabilities who are unable to work at a substantial gainful level, the means of accessing them should also be accessible.

Homelessness

Over 50 percent of study participants had experienced homelessness at some point in their lives. Some foresaw homeless shelters as their only option for housing after release. Homelessness presents clear challenges toward a successful SSI/SSDI application such as a lack of a mailing address, limited means of transportation and communications and limited access to belongings (medical records). All of these things are substantial practical barriers; however, many participants described the environment of homeless shelters and “the streets” as the greatest challenge of homelessness.

Those places [homeless shelters] are ... It's like a *homecoming of addicts*. – Rasoul

Rasoul's analogy highlights how the lack of support in the environment of homeless shelters contributes to the cycle of recidivism. Without additional support, homeless ex-offenders' plans after release are limited to homeless shelters, which send them back to their lifestyle before incarceration.

I left here after doing seven years with one month of pre-release, and I got a room at the YMCA. I was all for it. I'm good, I got my own place, I got a job, I'm ready. I wasn't [ready], you know? Then I started noticing that I really needed that help, but it was too late for me, you know? I was already in too deep where I couldn't ... I either had to keep on going that way, or stay homeless, or, you know. –Ned

Ned's story illustrates a case of relapse back into an old lifestyle despite his initial determination to choose a different path after incarceration: *I was all for it*. Ned's involvement with drugs at the time prevented him from seeking the help he needed. For individuals experiencing homelessness, the cash benefits of SSI/SSDI can offer independence and distance from their previous network and friends, which in many cases is associated with their old lifestyle. Ned has unsuccessfully tried to apply for SSI prior to release to secure housing.

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Even at the shelter in Worcester they only let you stay there for two days if you haven't had a permanent residence in Worcester in the last two years or something like that. You have to have it [mailing address] for anybody when you're getting a job if they need to contact you, send literature to you, you have to have a permanent address. –Rodrigo

These cases demonstrate that some of the major challenges of individuals at risk of homelessness are relapsing back into the old lifestyle, limited communications and re-arrest. A study by Chamberlain & Johnson (2011) discovered five different pathways to adult homelessness: youth to adulthood, housing crisis, substance abuse, mental health and family breakdown. They recommend individualized interventions be adopted based on the need of each group. Whether direct or indirect, the cash benefits of SSI/SSDI can be used to access the appropriate services for individuals at risk of homelessness towards better living arrangements (Dennis et al., 2011).

Lack of Social Support

Families, friends and other forms of social support greatly influence ex-offenders' reentry success and help in their social security benefits applications. Many participants expressed gratitude in the support of their community network for their assistance in transportation to the SSA's doctor's appointments and filling out applications. Moreover, social support can act as a motivator for many individuals to seek the cash benefits of SSI/SSDI as ways to improve their living situations after release. One respondent said:

I know that my mother, she's going to push me and I'm just going to stay focused on the task of everything, that she's always there and encouraging me to do the right thing and go forward and follow through on everything I start, which is another issue. That's why I couldn't keep a job or wouldn't go to my appointments and stuff like that. She's just always followed through, follow through because I'd start it, get it started and then it's just like given up once I get in my state of mind with depression or feeling down or bad or you know, about myself. – Ali

For Ali, his mother's influence is a critical piece of maintaining accountability. Another respondent added:

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...as soon as you go out then you see your old friends, or anybody for that matter using, you're gonna wanna do that. You're gonna ... I've been clean for a while. One it'll be okay. You know? That's the mindset. Versus having the right support. As soon as you think about even stepping out that door. Make that phone call or go to that family member whoever it may be. Your mother, your father, if they're available. A close relative. Just reach out to them. Like in my case *I had a lot of pride* and it took me many many years to really sit across from a person and tell them, "Hey, this happened to me." Or, "I'm going through this." –Alex

Alex's example distinguishes between the right and the wrong kind of social support and emphasizes that in some cases the path to help-seeking can be a complicated and lengthy process in itself. Petersilia (2003) asserts that ex-offenders without family members have decreased chances of living crime-free lives and many have families who are unwilling to resolve past conflict and establish meaningful relationships. Alex is hopeful about his future after release. He plans to apply for SSI/SSDI benefits with the support of services in the community and has plans to move out of Massachusetts to get reacquainted with his newly-mended family ties.

Exposure to Criminal Activity

Previous criminal activity also became a barrier for many inmates in their SSI/SSDI applications. The process of gaining eligibility for SSI/SSDI is a difficult procedure for many individuals, but what sets the inmate population apart from the rest of SSI/SSDI applicants is their exposure to criminal activity. One inmate explains that when job hunting becomes difficult, criminal activity becomes a steady flow of income:

Because if we don't have no income, what are we gonna do for income? It was being difficult to get a job, which means revert back to what we know to make ends meet, and that's not always legal. –Li

All cases of recidivism in the data described resorting to criminal activity as a quick source of money or involvement in substance use in lieu of counseling services. A long time SSDI recipient explained that he ends up in jail every time his benefits get

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suspended for missing doctor's appointments. Another inmate describes self-medicating when things became difficult in his personal life:

I decided to work at the time because all of my conditions, I took all my medication, but after me and my girlfriend split up in Massachusetts then all this depression came back, and I was involved in drugs. That's when I started hearing voices and all that. That's one of the things that caused me to come back here [jail] again because I was let out of control. –John

Despite a general sense of optimism for change, many current inmates struggle with the idea that their criminal records, limited job experiences and education compounded with their disability leaves criminal activity as their only option for income or therapy. All participants in this study initiated an application to SSI/SSDI as a last measure. In many cases, the barriers to applying to federal benefits had discouraged them to complete the application or reapply.

Institutional Barriers

Despite a willingness to participate, jails in this study encountered significant barriers to setting up the SSI/SSDI pre-release procedure program at their facilities. This section will describe situations in which jail officials described their attempts to contact the Social Security Administration and were met with barriers to implement the pre-release program and facilitate the inmates' access to federal benefits. In other words, some of the barriers to access to federal benefits are not as a consequence of individual characteristics of inmates, but rather of the inter-organizational struggles between jails and the SSA. In these cases, the lack of inter-agency collaboration, under-resourced facilities and inaccessible programming produce institutional barriers.

County Jail 1 has had a written agreement with their local Social Security office for years to issue Social Security cards for inmates prior to release. In 2018, the facility was approached by a third party, contracted with SSA to update their agreement to include the pre-release procedure program; the ability to submit SSI/SSDI applications 90 days prior to release for inmates. However, members of the County Jail 1 administration told me that they were unable to implement the pre-release procedure at that time, citing

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the local SSA's office's lack of knowledge of the program. Jail administrators credited my study for sparking new conversations around the implementation of the pre-release and SOAR programs at their facility. The conversations are projected to happen in May 2019 with their local SSA officials. Officials at County Jail 2 had similar experiences of lack of information roadblocks with their local SSA office. County Jail 2 administrator recalls completing a training at the SOAR project in New York City a few years ago, only to be informed that Massachusetts was one of two states without a SOAR program coordinator. Following their training in New York, he contacted their local SSA office.

After numerous, numerous attempts to try to talk to a live person, once I believe we talked to an assistant office supervisor that had no idea what the SOAR program was and I asked to have that message relay that I would like to talk to someone in that office about the SOAR program and I never got a call back.

These past attempts at establishing agreements with the SSA office had resulted in a strained relationship between the two entities. The following vignette, which happened during the data collection process further illustrates the nature of the problem.

During the data collection process at County Jail 2, I had several conversations with jail officials on ways to improve the re-entry services for jail inmates. They appeared open to any suggestions that would enhance the quality and breadth of services for their population and were specifically interested in establishing agreements with the SSA. However, they had found the local SSA office unresponsive to their requests of collaboration (not answering calls, responding to emails, and the like) and asked me to make the connections with the SSA program coordinators. This put me in an unusual position because as a researcher, I was there to collect data not to resolve conflict. However, following conversations with trusted colleagues, I decided to connect County Jail 2 officials to the SOAR program Project Associate in the hopes that it would facilitate the collaboration of key stakeholders in the process of accessing federal benefits as is the promise of the SOAR model. Despite a prompt response from the SOAR associate, County Jail 2 officials did not respond to her offer of assistance and the facility's re-entry services remain unchanged.

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The case above forces us to think beyond the policy pitfalls within each county jail system; it instead asks us to envision each jail as an entity that navigates a larger system with a set of institutional challenges. This outlook shifts our perspective on the lack of a standardized SSA program implementation system in county jails and introduces different stakeholders to the scene like the local SSA offices in each county and other organizations working on re-entry efforts.

Recommendations, Implications and Conclusion

The analysis of the individual and the institutional barriers among IIWD concludes that this population are among the most vulnerable groups of eligible SSI/SSDI applicants, and jails as their primary support centers do not have the adequate resources to accommodate their needs. While investing in implementing the successful SOAR model might address some of these barriers, the complicated nature of the program has created additional challenges for county jail facilities. To start a SOAR initiative in a criminal justice setting, the model recommends working with local SSA and Disability Determination Services (DDS) offices on initiating a pre-release agreement. The lack of collaboration barrier among agencies can be addressed by implementing policies that standardize re-entry practices regarding pre-release SSI/SSDI procedures in all correctional facilities. This ensures that all IIWD eligible for benefits returning to society have access to some form of financial support in the community. However, the data also showed that many inmates expressed unrealistic expectations of SSI/SSDI that indicate a lack of preparedness for the reality of re-entry (Braucht & Bailey-Smith, 2006). Recall that even Conly (2005) and other advocates of the pre-release procedure program in jails have also championed the cause of mental health and other support services during and post incarceration (Dennis et al., 2014) emphasizing that SSI/SSDI is not enough. The increase of financial and social support in and outside of incarceration points to the shift in the care of individuals with mental health issues from patients in hospitals to criminals in jails and prisons (Lamb & Weinberger, 2005). Many of the people with disabilities represented in jails do not belong in the correctional justice system and the support of SSI/SSDI assists their integration back into society. First time offender, Lee characterizes

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the benefits of social security as his last hope, “When I asked for help, the American way screwed me and then the only thing that was left was Social Security. Social Security was the last thing. Everything else failed.”

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