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**AFC MISSION STATEMENT**

AFC supports those with a sexual offense and their families by:

- Advocating for change in sexual offense laws and policies, and for the adherence to constitutional rights;
- Educating the public, lawmakers, and the judiciary;
- Promoting the successful treatment and reintegration of those with an offense into the community, thus reducing victimization and enhancing the safety of all.

**DISCLAIMER**

AFC's newsletter is The Advocate. The So Ready For Change (SORFC) newsletter is written by inmates and others and is not affiliated with AFC.

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**Fall Greetings to Our Many Sponsors!**

This fall has been so exciting for AFC. We have so many irons in the fire that it’s almost hard to keep up with the activity. Of course, the most exciting thing at the moment is the outside evaluator interviews that are taking place. There seems to be a very objective analysis taking place which gives everyone hope for an effective and humane treatment program in the future. Another very positive activity was AFC’s attendance at the RSOL Conference in New Mexico.

In early September five members of AFC drove to Albuquerque to attend the annual RSOL (Reform Sex Offender Laws) Conference being hosted by RSOL New Mexico which “seeks to empower citizen-driven law reform groups to better understand the complexity of current thinking on sex offender registration issues and find workable options for change”. The team in New Mexico is very committed to changing the laws that affect the people of New Mexico and the United States in general.

The theme of the conference was “Catch the Dream of Reform” and included notable speakers from around the United States and Canada. Some of the topics covered at the conference were: From the Grass-Roots Upward, (Mis)educating the Public about Sex Offenders, National Registry Reform, Hope for Legislative Change and many other topics over the three day conference. The conference was a wonderful opportunity for groups and individuals to come together to meet one another and learn from each other. While RSOL focuses largely on the registry which is seen as an enormous control system over the lives of too many, RSOL also instructs on advocacy, meeting legislators, educating the public, effective communication, interactions with the media, and residency restrictions. Pulling the plug on the registry could help to unravel federal law.

Meeting with other people from around the country with the same challenges we are all facing helps to strengthen AFC for the battles ahead. The same sense of community exists within our group. We come together for support, emotional comfort, and a real sense of purpose. And we hope that sense of community is extended to people who are confined or are too far away to be able to attend our general meetings. Our newsletter is that mechanism for bringing each of us together even if we can’t meet face to face.

Many things are happening that give us the hope for which we all long. The DOCCA lawsuit is ongoing, the outside evaluators are meeting with both inmates and advocates, the Ohio Justice and Policy Center is doing a study of Colorado laws and prison issues and AFC is working toward more opportunities to meet with DOC officials and legislators.

There are many AFC advocates working to find the right combination of words and actions to help make the changes needed right here in Colorado. Know that we’re doing all we can every day to right this ship that legislators have unwittingly weighted with unintended consequences. It’s hard to imagine that many legislators don’t know what’s been created in years past but we’re doing all we can to educate them about the problems with the laws as they stand today. AFC is a force that people in government weren’t expecting and many are surprised by what they have learned from the advocates at their door.

Ann Harris, Chair
Advocates for Change
DOCCA Lawsuit Update

By G.L. Rosencrans

The DOCCA Lawsuit is progressing as expected. The legal team has received initial disclosures and the first round of depositions has been completed.

The depositions completed so far are as follows:

Monday, October 22, 2012 at 9:00 a.m.: Cheri Drennon
Tuesday, October 23, 2012 at 9:00 a.m.: Christine Tyler
Tuesday October 23, 2012 at 1:30 p.m.: Renee Thacker
Wednesday, October 24, 2012 at 9:00 a.m.: Chelsea Beck
Thursday, October 25, 2012 at 9:00 a.m.: Yvette Cousins
Thursday, October 25, 2012 at 1:30 p.m.: Michel Davis
Friday, October 26, 2012 at 9:00 a.m.: Ray Chavez
Friday, October 26, 2012 at 1:30 p.m.: Jeff Jenks
Tuesday, October 30, 2012 at 9:00 a.m.: Dr. Danielle Looney

What the DOCCA Legal Team would like everyone to know is that any time there is a lawsuit of this magnitude, it is important to understand that it is a long and slow process. Patience is something that is absolutely required. It can take years to develop and to settle. The wheels of justice have never moved swiftly, and that has never been more true than it is in this case!

We know that there are many men, women and families in various stages of this process. It is critical that you all understand that we cannot solve all the problems in the system with this lawsuit. There are many issues and challenges regarding the way the system is structured, and in the way that treatment is carried out and interpreted by others. The only purpose of this lawsuit is to ensure that CDOC follows through with their legislative mandate to treat those in prison, so that they can receive a favorable recommendation for parole.

This lawsuit cannot directly address issues with the parole board. Unlike California, for example, in Colorado, offenders cannot sue the parole board and ask for judicial review of the decision not to grant parole. Anything you may have heard to the contrary is simply not true. We realize that there are some of you who have done research, and may be using case law from other states to file your own lawsuit. Anything concerning the parole board that you may find from another state has absolutely nothing to do with Colorado, and you would not be successful filing a case based on research pertaining to another state. Ultimately, any suit you file could also be extremely detrimental to this lawsuit!

We know that you are anxious. After all, there have never been so many things going on in the area of sex offense laws and changes as there have been in the last several years. This cannot, however, happen OVERNIGHT. The legal team is also anxious and wants to see results, but the results may not be as hoped for if everyone gets overly excited, and files their own lawsuits. THERE IS NO SHORTCUT – in spite of what you may be hearing from others. We strongly encourage you to have faith in this incredibly talented legal team, and refrain from filing any lawsuits of your own at this time. Very bad case law has been created in the past because of some pro se cases. Again, we know it is most difficult, but please be patient!
Recent Research Review on the Polygraph: What Does it Show?

Reported by Susan Walker

Information for this review came from two recently published articles on the validity and efficacy of the polygraph in post-conviction work with those who have sexually offended. The second author on one of these articles is Dr. Anthony R. Beech, who is part of the outside evaluators’ team currently reviewing the CDOC/SOTMP treatment program. Each article is discussed below, with the authors’ conclusions regarding the efficacy of the polygraph based on currently available studies. These two articles are of great interest here in Colorado, as much of the pro-polygraph literature in the United States has come from our state, specifically from Peggy Heil and Kim English. Since the articles are both lengthy, this discussion provides a summary only of some of the questions raised by the authors. Here are the references:


1) Does the instrument have validity? I.e. does it measure what it purports to measure? Most everyone agrees that the polygraph measures blood pressure, breathing, heart rate and perspiration. However, not everyone agrees that when polygraphers find that a subject shows a response that they believe may be related to deception during the exam, it means that the person is deceptive. Rosky states that it takes “a logical leap to assume that the response is due solely to deception because this response can also be attributed to fear, anxiety, anger, and many medical or mental conditions”.

2) Result and study designs can be criticized on several levels from the perspective of methods: subject and selection bias, social desirability bias and self-serving answers can compromise findings.

3) Claims of accuracy that proponents make regarding the post-conviction polygraph are not supported by research that is methodologically rigorous.

4) While false positives in post-conviction polygraph testing do not threaten public safety, they do increase the cost of supervision and incarceration. They are also troubling from a constitutional perspective, as offenders who shouldn’t be punished are being punished for offenses and violations they did not commit. Because the base rate of deception is unknown, beyond scenarios, there is no way to measure false negative or positive rates or to fully assess their impact.

5) With the mounting fiscal pressure on departments of corrections, how many people are unnecessarily sent to prison or higher custody levels secondary to false positives? Additionally, given a false negative on a polygraph and minus information from other methods of supervision, how much more criminal activity, deviance, and victimization are we allowing to happen?

6) Heil and English (2009) claim, without empirical support, that different polygraphers should be utilized from polygraph to polygraph to reduce the likelihood of habituation. It has been shown by Vacek (1985) and Hui and Walter (1980) that even a minor impact of a prior test, can affect polygraph accuracy negatively and in a significant way.

7) While not discussed in post-conviction polygraph literature, it is clear from other research that having certain physical and mental disorders such as metabolic syndrome, hypertension, thyroid disease, early obstructive pulmonary disease, bi-polar disorder and depression can affect polygraph accuracy. “Hence, diseases directly related to the measures used in polygraph testing introduce variability in these measures and can decrease accuracy” (from Rosky).

(Continued on page 4)
(Continued from page 3)

8) Studies by post-conviction polygraph proponents such as Ahlmeyer et al. (2000), Emerick and Dutton (1993), English et al. (2000), Heil et al. (2003) and Hindeman and Peters (2001), when reviewed by Gannon, Beech and Ward (2008) were found wanting because of: small sample sizes, lack of randomization, lack of adequate comparison groups, poor or missing experimental controls, or an inability to remove confounding variables such as treatment effects apart from polygraph testing itself. Additionally, there is nothing in this evidence base that suggests that these disclosures help to reduce offending behavior.

9) Gannon (2006) and Gannon, Keown and Polascheck (2007) argue that the usefulness of the polygraph is only in its placebo effect. “It is more important for patients to believe the polygraph is valid than for the test actually to be valid (Willis and Smith et al. 2004, pg 8).

Gannon, Beech and Ward end their paper with the following: “Presently, we are concerned that continuing to conduct naturalistic polygraph studies – in which treatment confounds are clearly present – may seriously jeopardize the value of the resulting data. Thus if the value of the resulting data is of poor empirical quality, can researchers really justify engaging in a general violation of offenders’ rights, or perhaps irretrievably damaging the bond of trust between therapist and clients? Using the polygraph within treatment sounds appealing, and is indeed current practice in many US states. Yet carefully designed studies should be at the forefront of this decision to use the polygraph within treatment, since other more damaging results could be lying in wait. It is of paramount importance, then, that if the polygraph is to be used at all, it should be used in conjunction with a range of other methods before reaching a risk-related conclusion concerning sexual offenders”.

“...Abel et al.’s study – which is over two decades old – showed us some time ago that it is possible to get sexual offenders to cooperate and disclose previously unknown victims and crimes if they are granted offense immunity. In other words, it may not be necessary for professionals to use the polygraph to gain more accurate risk descriptors. Thus, in the interests of best practice, we believe that researchers should turn their focus upon developing a more water-tight research program involving the polygraph. Only then should we make decisions about the overall value of the polygraph in assessing and managing sexual offenders’ risk”.

EDITORIAL POLICY

The Advocate newsletter is published by Advocates for Change, providing information on efforts of this group to affect change in legislation, treatment, and re-integration into the community, primarily for those who have been convicted of a sexual offense.

Submissions from inmates/offenders and parolees are encouraged. Articles should be no longer than 300 words. Content should be about a single issue, be original, and accurate, citing sources if appropriate. Contributors will be identified by first name only if requested.

Readers should know that AFC makes no representation as to the accuracy of any submission and does not necessarily endorse the opinions of any author. Nothing offered by AFC is intended to be legal advice, and any information provided should never be a substitute for obtaining counsel and/or conducting your own research.

The editor reserves the right to publish all, part or none of the contributions submitted. Send contributions for publication and/or comments on the newsletter to: Advocates for Change, Newsletter Editor, PO Box 351032, Westminster, CO 80035-1032.

Editor: Susan Walker Publisher: Mark Walker
As a result of a recent meeting the SOMB invited AFC to submit a list of ten proposed changes to the SOMB Standards and Guidelines. We have reproduced an abbreviated version of this list below. AFC is currently awaiting a written response to our proposals from the SOMB.

– Mark Walker, AFC Research Coordinator.

STANDARDS & GUIDELINES PROPOSED REVISIONS
Advocates for Change

1. Guiding principles 1-3, Standards & Guidelines p. 5

The legislature in HB 11-1138 has rejected the “no cure” philosophy encoded in the first guiding principle. This should, therefore, be changed to reflect the legislature’s updated and refined approach to sex offense issues (Advocates for Change, 2009). To accomplish the true goal of the SOMB and its Standards & Guidelines, these guiding principles must incorporate the fundamental truth that humane treatment and successful rehabilitation and restoration of the offender to a healthy, self-governed life in society is also ultimately the best way to enhance community safety and protect victims and potential victims.

2. Managing Sex Offenders in Denial – 3.500, Standards & Guidelines pp. 46-49

This section of the Standards should be revised in light of the following: Denial has been shown not to be significantly related to recidivism (Hanson & Morton-Bourgon, 2004). The idea that people who have been victimized cannot work toward their own recovery if the offender is denying the behavior re-victimizes them and allows the offender’s behavior to continue to control their lives. Offenders in denial can and should be treated effectively. “To deny a crime is natural; to deny treatment to those who deny is a crime itself.” (Marshall W. L., 2011). In the alternative, many treatment systems which value disclosure of previous offending behavior offer immunity from prosecution for individuals who disclose prior crimes. If the SOMB intends to continue to insist on “full disclosure” in spite of the lack of evidence that it contributes to treatment effectiveness, immunity should be offered.

3. Lifetime Supervision Criteria

A large percentage of these criteria are described in vague and subjective language which makes it impossible for an individual’s compliance with the criteria to be measured by any objective standard. Thus, the criteria lend themselves to arbitrary and discriminatory enforcement based on treatment providers’ individual perspectives, agendas, and personal prejudices. All criteria should be objectively stated, and compliance should be capable of independent measurement by verifiable objective standards. The criteria for successful progress in treatment should be completely redesigned in light of current research and best practices, including, but not limited to, the following:

- For AFC’s objections to “reduction in denial” criteria, see #2 above.
- The requirement of a relapse prevention plan is not in accordance with current research and emerging best practices, which indicate that a positive strength-based approach (such as the “good lives” model) is more effective than the deficit-based, restriction-focused relapse prevention model (Marshall W. L., 2011).
- The requirement that an individual recognize and acknowledge “lifelong risk” is an embodiment of the discredited and rejected “no cure” model, and should be eliminated.
- Criteria requiring “full disclosure” of sexual history do not represent current research or best practices, and should be discarded (Marshall W. L., 2011).
- Criteria requiring individuals to have at least one “approved support person” are impossible for such individuals to meet, particularly if they have no family or acquaintances in Colorado. Many individuals currently in prison meet all the progress criteria except this one, which prevents them from obtaining a recommendation for parole. It is improper to require an individual to meet a criterion when it is beyond such individual’s power to do so. This criterion should be eliminated.
- The polygraph is incapable of detecting deception, and any criteria which are dependent upon polygraph results should be eliminated (see #6 below).

4. Successful Completion of Legally Mandated Treatment – 3.200, Standards & Guidelines pp. 43-44

Indeterminate treatment duration is not supported by current research, and is ultimately damaging and counterproductive. Overtreatment has been shown to increase recidivism in low risk offenders (Marshall W. L., 2005). States utilizing time-limited treatment modalities are in the vast majority… The success of the sex offender treatment programs in these states is a testimony to

(Continued on page 6)
the viability and practicality of time-limited treatment modalities (Colorado Department of Corrections, 2000). Treatment length should be limited and clearly defined. The SOMB should develop mandatory, standardized objective criteria for successful completion of treatment prior to the end of supervision by probation or parole. For incarcerated individuals, the ideal design would be completion of Phase I of treatment while incarcerated, which qualifies the individual for a parole recommendation, followed by a time-limited Phase II program in the community.

5. No Contact with Minor Children – 5.720-5.740, Standards & Guidelines pp. 93-105 (also Appendix C, pp. 156-168)

This criterion is counterproductive in that it needlessly disrupts the offender’s family support system & housing for no legitimate purpose if children have not been victimized. While this may be an appropriate condition for certain individuals, its wholesale application to everyone convicted of a sexual offense cannot be validly supported. It should be a condition only if the appropriate assessments of a particular individual so indicate. The only apparent justification for this blanket condition is the so-called “crossover” study (which has been criticized for having poor methodology), the results of which have not been sufficiently confirmed or reproduced. Advocates for Change is hoping to issue a more detailed evaluation of the research in this area in the future.

6. Standards of Practice for Post-Conviction Sex Offender Polygraph Testing – 6.000, Standards & Guidelines pp. 115-128

It is the position of Advocates for Change that the polygraph is incapable of detecting deception and serves no valid purpose in the context of sex offense supervision. Its use results in undue emotional and financial stress, as well as unfair treatment and unfounded allegations of wrongdoing against individuals in treatment (Rosky, 2012). Moreover, the sex history polygraph and insistence on full history disclosure has not been shown to be helpful or necessary for effective participation and engagement in treatment (Marshall W. L., 2011). It should, therefore, not be required. For further discussion of the problems involved in ongoing use of the polygraph in the sex offense context see Gannon, Beech & Ward (2007).

7. ADD Mandatory Ethical Standards for Treatment Providers

There is currently no binding code of ethical behavior for sex offense treatment providers in Colorado. The SOMB Standards of Practice for treatment providers (3.000) are minimal and provide virtually no accountability for unethical behavior. The SOMB should add a standard requiring approved treatment providers to abide by the ATSA Code of Ethics, and allowing for complaints to be filed against providers who violate said Code. Moreover, background requirements for individual therapists should be more stringent, particularly with regard to past sexual victimization. Careful screening of each applicant should be required for this purpose.

8. ADD Offender Liaison (see Responsibilities of the Victim Representative within the Team – 5.500, Standards & Guidelines pp. 86-88)

The SOMB should add a standard permitting the existence and involvement of an individual or group liaison which would act as the offender’s equivalent of the victim representative, to give individuals under supervision a line of two-way communication for access and influence within the Community Supervision Team (CST). Effective communication and representation for supervised individuals within the CST will increase such individuals’ compliance and ability to succeed under community supervision.

9. ADD Proactive Prevention, Education, & Family Support

Most sexual offenses are committed by individuals with no previous convictions for sex offenses. The SOMB is expending the majority of its resources in the wrong place: on convicted offenders, who according to research have one of the lowest recidivism rates of any type of crime (Advocates for Change, 2009). Meanwhile, little or nothing is being spent on prevention, education, family treatment and support, etc. No one interviews, liaises with, or informs families of offenders about the criminal justice system, the treatment system, or the functioning of probation or parole. The SOMB should add standards requiring treatment providers to establish systems of open communication and support for offenders’ families, and directing resources to community education and prevention.

10. GENERAL: Submit Standards & Guidelines to independent evaluation and review of structure, content, and evidential basis to assess conformity of Standards to current widely accepted best practices and research

The SOMB should submit its Standards & Guidelines to be evaluated by an independent expert to determine their legitimacy and effectiveness in light of current research and best practices.
THE BOOKSHELF
By an AFC Board Member

UNPRECEDENTED:
How Sex Offender Laws are Impacting our Nation
Authors: J. B. Haralson and J. R. Cordeiro

Unprecedented is written by two men, previously convicted of sexual offenses, who have been successfully rehabilitated through effective treatment, their own resolves to overcome their mistakes and change their lives, and their faith. Although the authors have a decidedly Christian slant on their stories, there is much in the book to inform anyone looking for clarity in the sex offender laws in our country today.

The book includes comprehensive lists of the different laws, some by name, such as Jessica’s law, Megan’s law, Adam Walsh Act, etc. It explains the events that led to the writing and passage of these laws. It expounds on the persons that have been convicted of sexual offenses, real or not, and how the laws affect them, their families, and the communities in general.

It spells out the numerous unhelpful laws which cause more harm than their intended prevention and security. It speaks to the difficulty these laws present to persons convicted of a sexual offense in returning to society and attempting to turn their lives around. This book will take you through what you need to know if you are accused of a sexual offense, from the initial arrest, through the court proceedings, prison, electronic monitoring, probation and parole, sex offender registration, civil commitment and even castration.

There is a section on treatment and related issues. One thing to note is that they are fortunately (for them) not in the state of Colorado. The first topic they discuss, and call the most important thing about treatment, is to make sure you choose a treatment provider that uses methods that will help you learn and grow. Since Colorado chooses treatment providers for you, this most important element of treatment is lost in this state.

The book finishes with possible alternative solutions to the problem of a broken system. Overall, it is a very informative reference book regarding sexual offense laws and issues. If you are not a Christian, it is possible to avoid the religious speak if you want to do so.

HAPPY HOLIDAYS!!
From Your Friends at AFC
**AFC Calendar Information**

Because this is a quarterly newsletter only the AFC meeting dates that occur on a regular basis will be posted. Other dates will be available by email (make sure AFC has your current email address) and on the AFC website.

**Calendar for AFC Meetings:**

Denver area general meetings are the 3rd Tuesday of the month from 7:00 pm to 9:00 pm at St. Paul's Lutheran Church, 16th and Grant St., Denver, CO. The AFC Holiday Party will be Tuesday December 4, 2012. Please bring a dish to share. The Party starts at 6:00 p.m., and features success stories of those affected by the system.

Colorado Springs General Meetings are on the 2nd Tuesday of the month from 7:00 pm to 9:00 pm. This meeting is held at 3615 Roberts Road (ComCor Building-next to the power plant). These meetings are a cooperative effort between the Southern Chapter of CURE and AFC.

Fort Collins meetings are also in conjunction with the Northern Colorado CURE meetings and are held on a quarterly basis. The next Fort Collins meeting is to be announced. This is a much smaller venue and you are required to contact us ahead of time if you would like to attend.

AFC also holds its BAG (Breakfast Action Group) meetings every Monday morning at 7:00 am – 9:00 am at the Perkins on I-25 and Colorado Blvd. The first BAG meeting of each month is now a combination BAG/Board meeting.

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**Quips & Quotes**

“When you come to the end of your rope, tie a knot and hang on.”  
- **Franklin D. Roosevelt**

“People who are crazy enough to think they can change the world, are the ones who do.”  
- **Apple Computers**

“Life is 10% what happens to us and 90% how we react to it.”  
- **Dennis P. Kimbro**
Ellen Toomey-Hale, an attorney who works full-time with CCJRC, spoke at the AFC Meeting on Tuesday, November 20, 2012. Ellen has been working with the SOMB and a myriad of parties from the community, the Colorado Department of Corrections, as well as with Dr. Robin Wilson, Canadian Founder of the Circles Program, to put together the Colorado Circles of Support and Accountability (CCoSA). CDOC had tried previously to bring this program to Colorado from Canada, where it has been very successful, in helping to lower recidivism for higher risk people who had committed sex offenses. Due to limited response by stakeholders in law enforcement, parole, probation, the SOMB and the community in general, the program did not take off in Colorado when it was first introduced. CDOC was, however, given a grant to start the program, and with much greater interest this time around as well as robust involvement from the advocacy community, CCoSA appears to be off to a great start in 2012-2013! A not-for-profit corporation called CCoSA is being formed at this time, and hopes to receive the grant previously given to CDOC but not utilized. Dr. Wilson is involved, and is helping to guide the process forward.

There are Circles already established in Colorado. Curt Douglas in Colorado Springs has been successfully running 15 – 20 circles for some time now. Parole and probation often call on Curt to assist them with people coming out of CDOC or on probation who have no support or minimal support in the community. A similar program is badly needed in the Denver Metropolitan Area, as well as around the State of Colorado. AFC receives letters daily from those incarcerated with this offense who have no-one to support them. Because a “support person” or “persons” are required as one of the criteria for eligibility for parole and eventual release from prison, there is a great deal of urgency related to getting this program started. While some organizations, like Curt’s, are related to Christian Ministry, CoSA sites can be started and run by a variety of types of organizations, as long as they subscribe to the CCoSA guidelines and philosophy.

An example of a program that is already underway in the Denver area is run by Where Grace Abounds. Under the direction of Mary Heathman, the organization’s Founding Director, there are two people already receiving beginning level Circle services. Very soon, the call will go out from Where Grace Abounds CoSA Program to organizations and individuals in the community to hear about the mission of CCoSA, and to begin engaging and training volunteers. Circle volunteers are asked to commit to one year, the average length of formal Circle engagement for a person with an offense. Of course, a bond has usually formed between the Circle Members and the “Core Member” by the time a year has gone by, and friendship and support are likely to continue informally.

Other areas around the state have also expressed interest in forming Circles. It will take some time to get volunteers on board and trained, but the process is definitely underway. An issue still to be resolved with the CDOC is an Administrative Regulation which says that support people can only support one person at a time. There are those of us who have loved ones out of prison who would like to be able to support another person on probation or coming out of prison in a Circles environment – we are not 100% sure at this time that we will be able to do that. Hopefully, this issue will be resolved in the near future. Stakeholders from a variety of disciplines will be on an advisory board for CCoSA, but actual CCoSA Policy and day to day operations are completely up to CCoSA’s not-for-profit Board of Directors.

AFC is excited about this program, and hopes to be involved on a variety of levels with many others in the start-up and ongoing Circles operations around the State of Colorado! Where many of you have not had hope for support in the past, you can now be positively hopeful that a Circle is going to be there for you in lieu of a family/friend support person in the very near future!
JOIN US

Sponsorship Fee is $20 per year for family sponsorship, $5 per year for returning citizens and 8 stamps for those on the inside. Any additional donations are gratefully accepted.

Today's Date: ______________________
Name: __________________________________ Phone: __________________________
Address: __________________________________________________________________________________________________________________________________________
___________________________________________________________________________________________
Email Address:_______________________________________________________________________________________

Call 720-690-7125 if you have any questions or comments.
Please feel free to share an application with a friend or a family member.