

South Dakota Correctional Rehabilitation Task Force

Preliminary Program Assessment Findings

April 22, 2026

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Justice
Center



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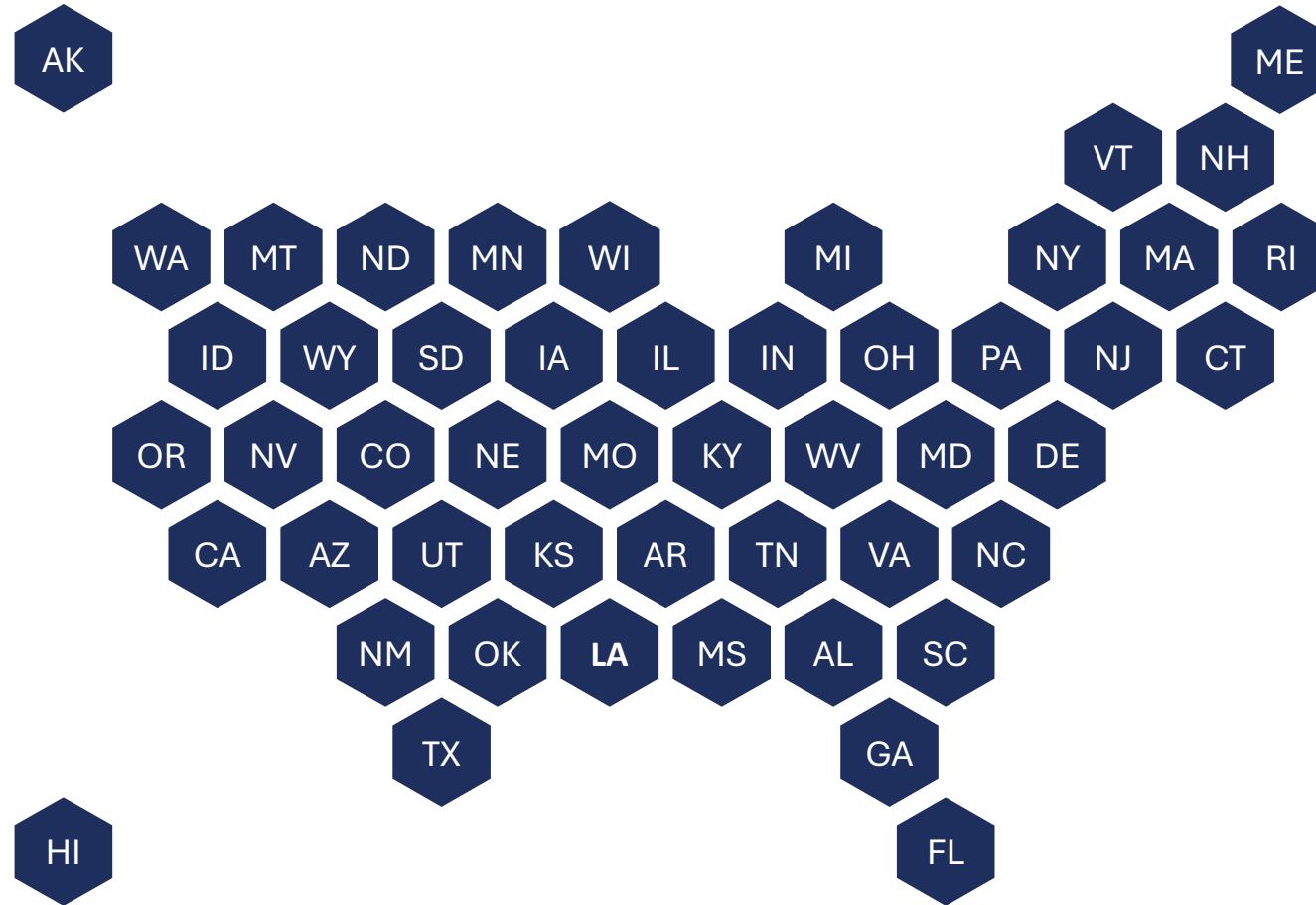
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Solutions for complex justice challenges

We help leaders in every state make communities safer and healthier.

- Trusted Data
- Practical Solutions
- Cross-systems collaboration

The CSG Justice Center has helped all 50 states develop tailored improvements to their corrections, reentry, and community supervision systems.



Agenda

- I. Background
- II. Preliminary Program Data Analysis
- III. Preliminary Program Assessment Findings
- IV. Potential Fixes and Discussion
- V. Next Steps

Background

2026 CRTF Roadmap

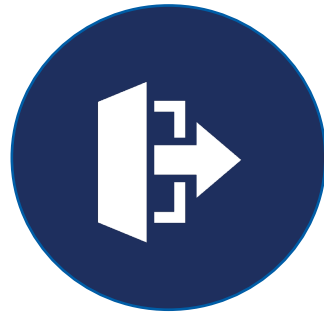
Institutional Programming



April 2026



Institutional Programming and Reentry Foundations



June 2026



Reentry Supports and Gaps



August 2026



Finalize Programming and Reentry Recommendations



October 2026

CSG Justice Center Deliverables:

- Programming assessment: preliminary findings
- Final programming assessment with refined recommendations
- National reentry models overview
- Reentry needs assessment findings
- Suggested policy options and implementation priorities
- All recommendations reviewed and finalized at meeting
- Written summary for implementation

CSG Justice Center CRTF Support

Consensus building

- Continue to engage all 30 CRTF members for input and consensus
- Attend subcommittee meetings as needed
- Help develop agendas and present content at each meeting
- Synthesize meeting outcomes

Impartial Assessments

- Conduct two assessments (programming and reentry). For each assessment:
 - Analyze DOC data
 - Visit facilities and meet with service providers
 - Align findings with evidence-based practices and examples from other states
 - Suggest recommendations and potential policy options

Wrap-up and sustainability

- Draft short- and long- term recommendations for CRTF discussion
- Document CRTF results
- Help DOC create implementation plans for key changes
- Serve as a resource during the 2027 legislative session

CRTF Member Activities:

- Meet 4 times in 2026
- Hold targeted subcommittee discussions
- Review data and assessment findings
- Gather testimony
- Agree on short- and long- term recommendations

Program Assessment Activity Progress: January–April

- ✓ Reviewed DOC policies
- ✓ Conducted 25 interviews with 45+ DOC staff and volunteers
Engaged education, reentry, behavioral health staff across all facilities
- ✓ In-prison observations at the Hill and Jameson
- ✓ 1 focus group with people in prison (another planned for tomorrow)
- ✓ 130,000 data records analyzed

Preliminary Program Data Analysis

**Data analysis in this section has not been finalized. Analysis will be validated prior to the June CRTF meeting and is subject to change.*

South Dakota increased access to programs in prison from 2023–2025.



416

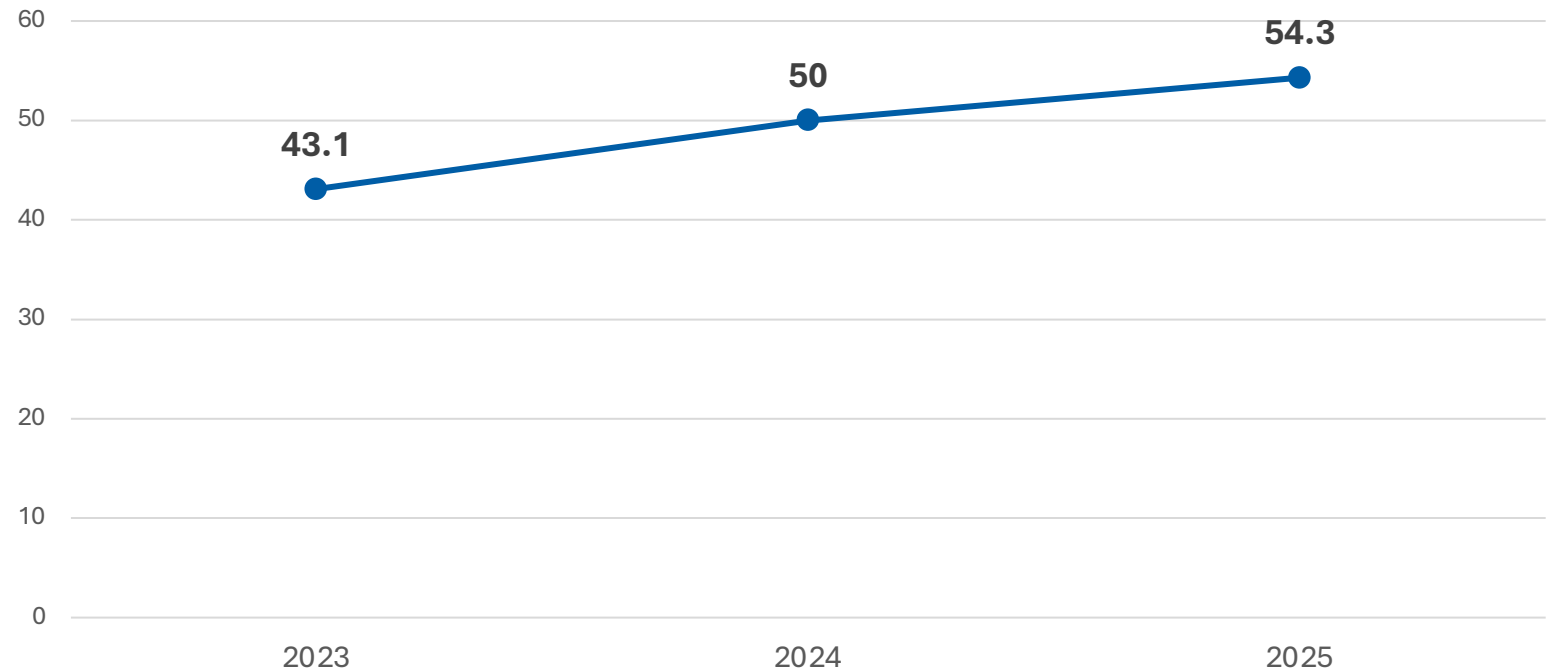
more people in prison received programming in 2025 than 2023



25%

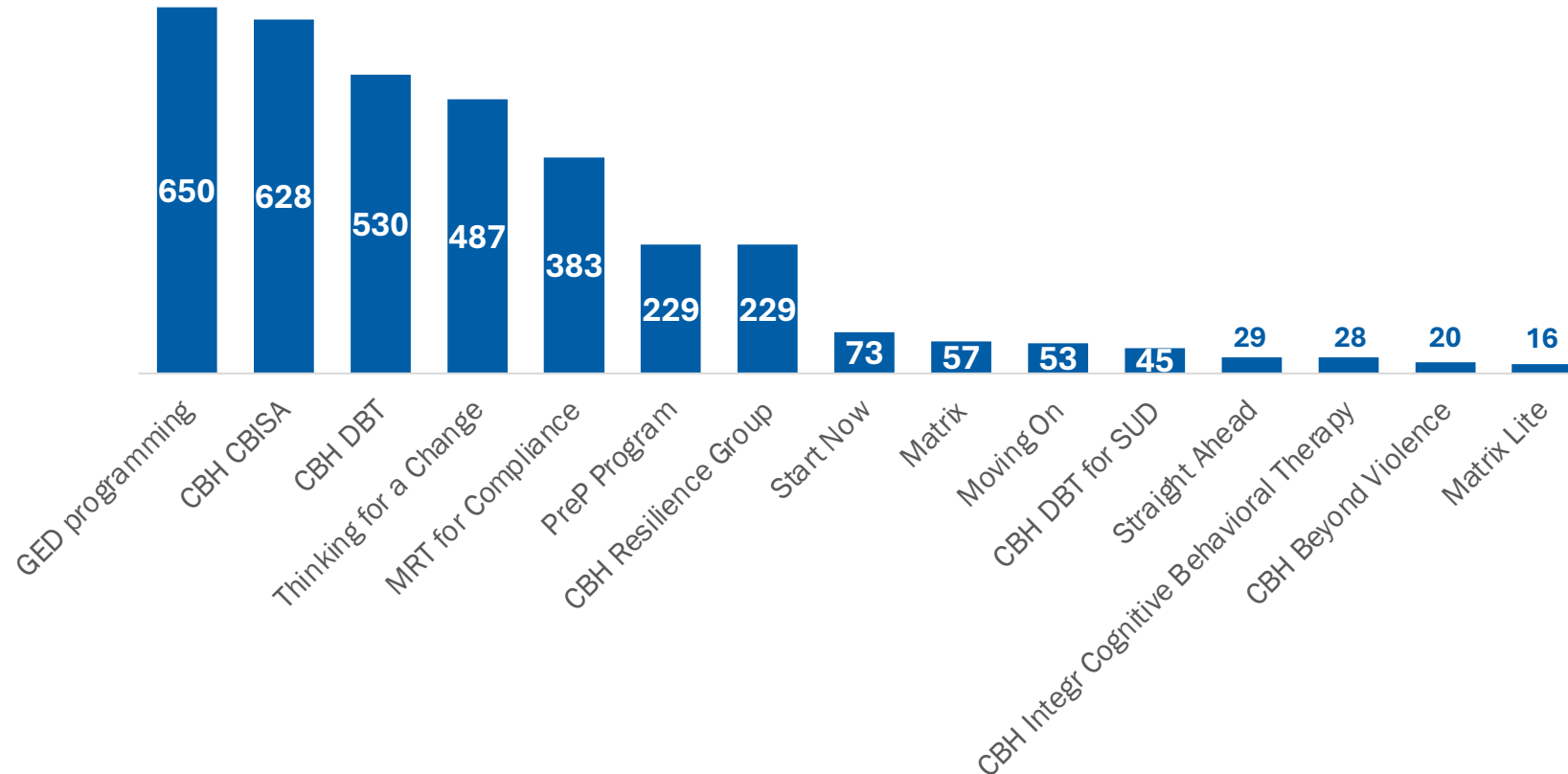
increase in people in prison receiving programming

Percent of People in Prison at Year End Who Received Any Programming that Year, Statewide, 2023–2025



GED programming and CBISA substance use treatment are the most accessed programs.

2025 Top 15 Programs by Number of Starts



This assessment focuses on programs facilitated by DOC staff, including educational, vocational, evidence-based, and behavioral health programs.

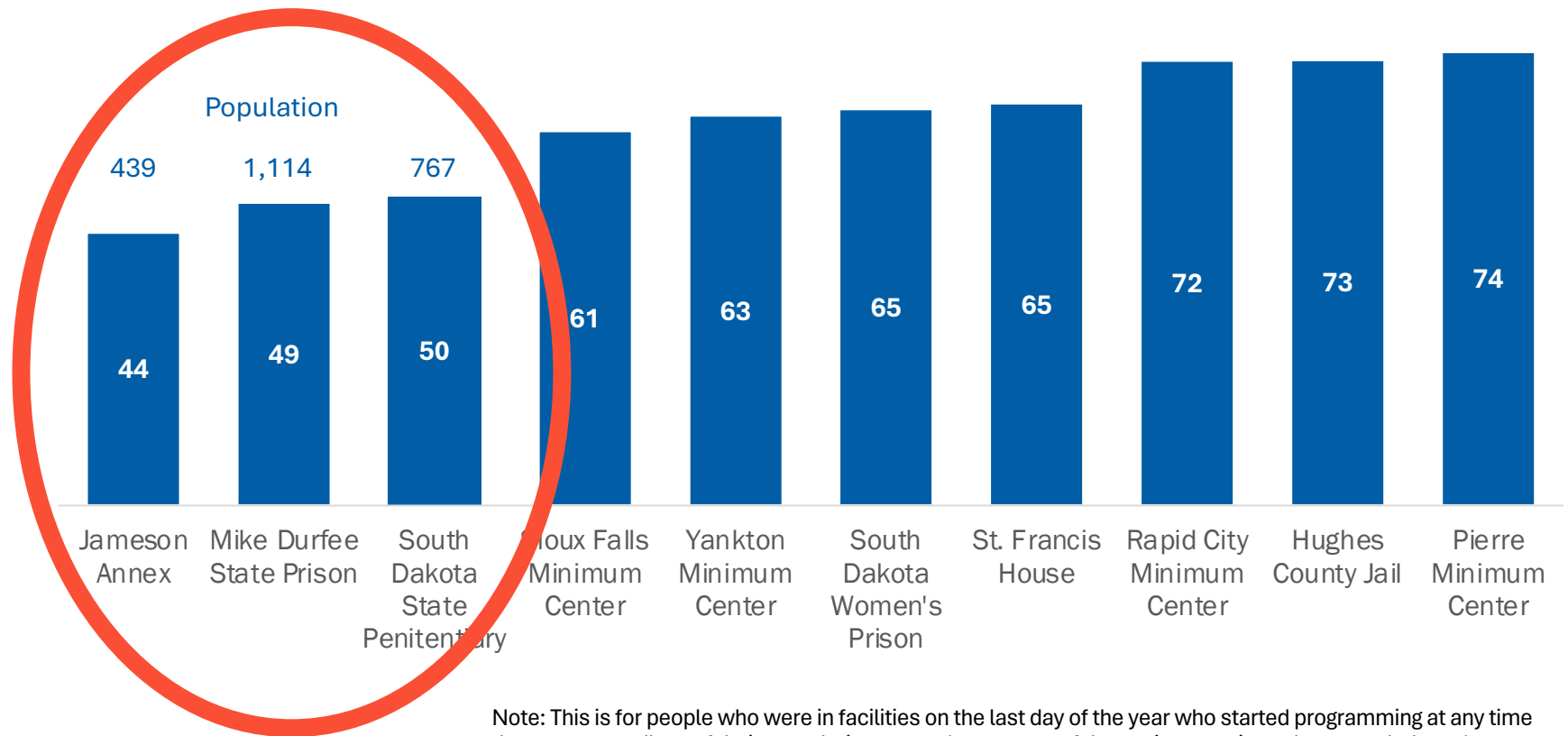
It does not include work release, Pheasantland Industries, facility work assignments, or volunteer and religious programs.

Note: This shows number of times program was started in a year for people who were in a facility on the last day of that year. An individual may be counted more than once if they attended more than one program or started a specific program more than once.

South Dakota's 3 largest prisons have the lowest rates of program participation.

Percent of People Who Received Any Programming by Facility, 2025

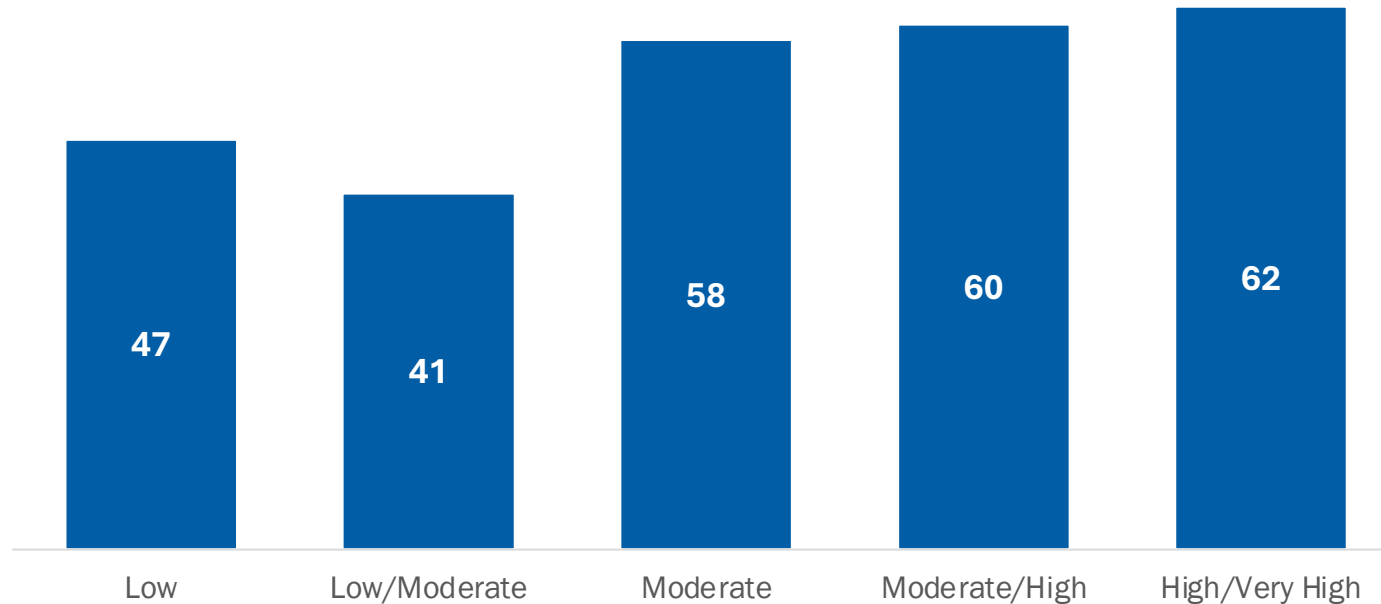
50% or less of people in Jameson, Mike Durfee State Prison, or the SD State Penitentiary received programming in 2025.



Note: This is for people who were in facilities on the last day of the year who started programming at any time that year, regardless of their completion status (e.g. successful, ongoing, terminated, suspended, etc.)

Proportionally, people who are assessed as high/very high risk have the most program access.

Percent of People Who Received Any Programming by Risk Level, 2025



62% of people assessed as high or very high risk accessed at least one program in 2025.

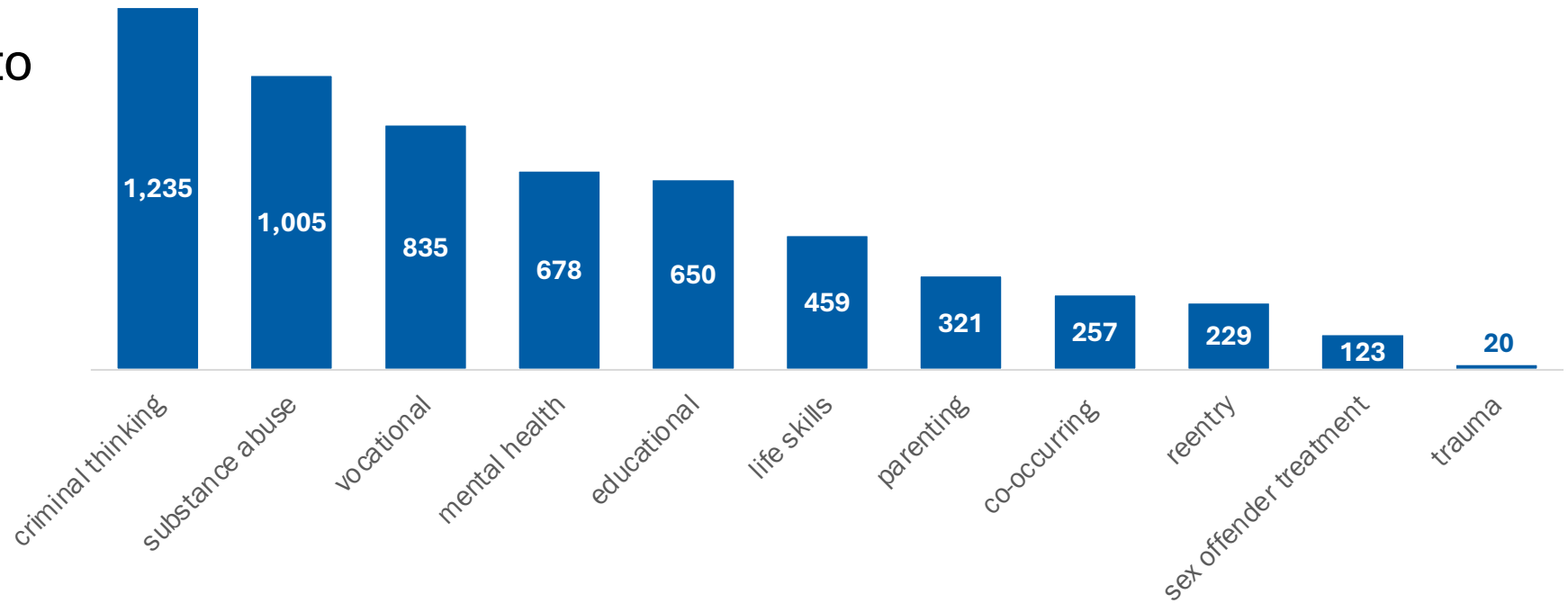
Note: This is for people who were in facilities on the last day of the year who started programming at any time that year, regardless of their completion status (e.g., successful, ongoing, terminated, suspended, etc.)

Criminal thinking programs initially reach the most people, which demonstrates DOC is targeting the right needs.

21% of program starts were in programs designed to address criminal thinking.

17% for substance use.

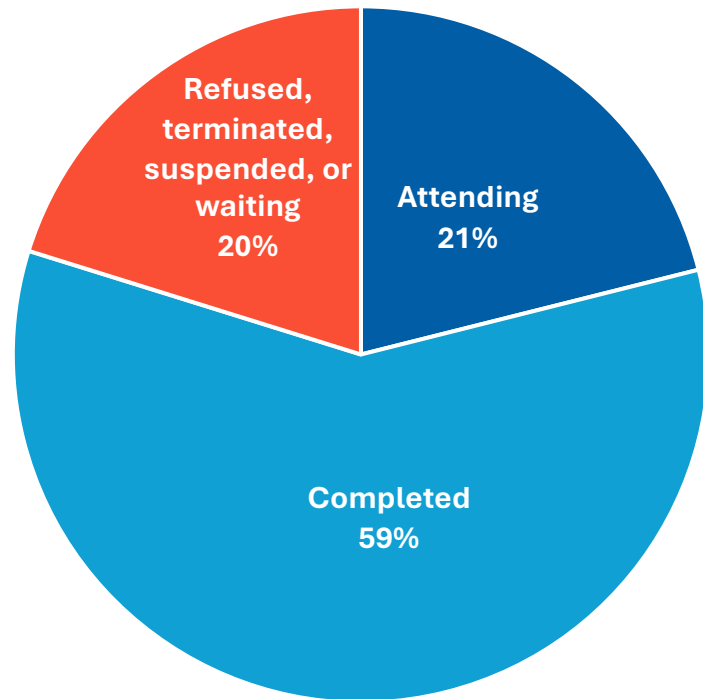
Total Starts by Primary Focus Area, 2025



Note: This shows number of times program was started in a year for people who were in a facility on the last day of the year. An individual may be counted more than once if they attended more than one program or started a specific program more than once.

End of year program completions and active enrollments increased 51% from 2023.

End of Year Status for All Programs Started in 2025

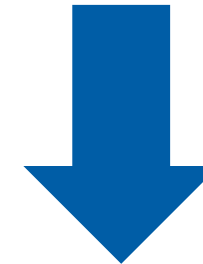


From 2023 to 2025:



1,576

more program completions and active enrollments at the end of the year

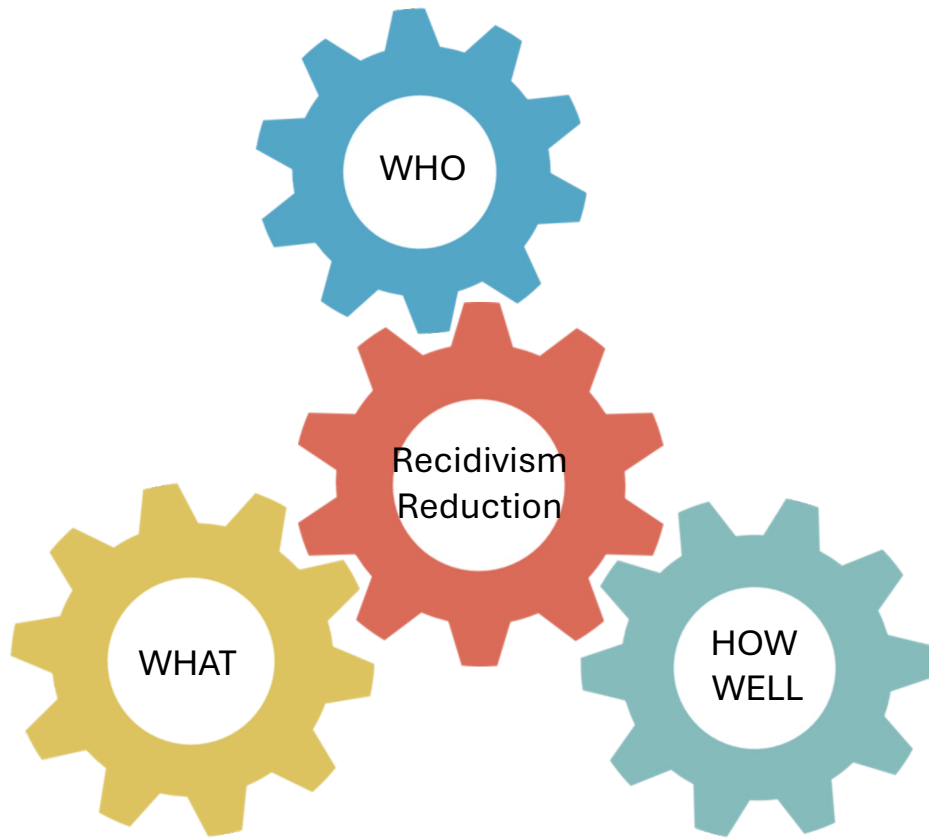


Negative program outcomes decreased from **25% to 20%** of program ends

Note: This shows all program ends throughout 2025 for people who were in a facility on the last day of the year. An individual may be counted more than once if they attended more than one program or started a specific program more than once.

Preliminary Program Assessment Findings

Research shows three elements determine whether programs reduce recidivism.



Target the right people based on risk (Who)

Rely on effective programs (What)

Implement with quality and fidelity (How Well)

Reduce recidivism (Action)

Are the right people accessing the right programs?

Goal: Prioritize programming resources for individuals who are most likely to reoffend.

What's working: Strong foundations are in place.

- Intake screening identifies mental health and substance use needs at entry.
- Risk and needs assessment tools guide some program placements.
- Waitlist management at some facilities considers release date and clinical need.

Current challenges: Programs aren't consistently reaching those most likely to benefit.

- For many programs, Institutional Earned Discharge Credits (IEDCs) are shaping who participates more than assessed need.
- Long waitlists demonstrate program demand is higher than availability.
- Certain populations (like women, people with serious mental illness, people with long sentences, low literacy learners) need more targeted programming.

Are programs evidence based and aligned to needs?

Goal: Rely on programs with demonstrated impact on recidivism and/or a research-driven approach.

What's working: South Dakota uses well-regarded evidence-based programs.

- Program catalog relies on evidence-based curricula that are well regarded nationally.
- Core cognitive behavioral programs are evidence based and liked by staff.
- Strong, new evidence-based curricula have been added in recent years.
- GED program outcomes are strong and tracked in detail.
- Vocational partnerships are producing industry-recognized credentials.
- Volunteer-led programs like AVP have published evidence of effectiveness in other states.

Current challenges: What's offered doesn't fully align with what's needed.

- South Dakota offers a broad array of curricula—more than national best practice suggests is sustainable.
- While the overall portfolio is broad, certain categories of programming are missing (e.g., pre-GED or ESL instruction, higher education or post-GED coursework, structured employment readiness, tribally responsive programming, options for people serving long sentences).

Are programs set up to succeed?

Goal: Ensure programs are implemented with high quality and track outcomes.

What's working: Staff are deeply committed and skilled.

- Program facilitators are incredibly committed to improving outcomes and show remarkable initiative—proactively seeking training, developing new approaches, and building resources independently.
- Program staff support one another and often work together to get around system roadblocks.
- Pre- and post-assessment tools are used for most clinical groups.
- GED data is tracked with precision through a dedicated federal database.

Current challenges: Without significant changes here, gains from other improvements won't stick.

- Program staff are stretched extremely thin across service areas, and administrative burden competes with direct services.
- The current structure for program staffing undermines impact and limits staff critical support.
- Inconsistent training and lack of quality assurance mechanisms is counterproductive to reducing recidivism.
- Operational disruptions reduce programming time.
- Data quality issues make it difficult to understand real program outcomes.

Potential Fixes and Discussion

Simplify IEDC credits and target programs to need.

- Simplify earned credit calculations: Consider a model where people earn credits by default through sustained program participation, with credits removed only for non-compliance, which reduces administrative burden while maintaining accountability.
- Alternatively, revise IEDC calculations so credits reflect program intensity and duration.
- Build a structured programming pathway from intake to parole readiness involving assessment, behavioral health, education, and case management as a team.
- Ensure program enrollment is consistently driven by assessed risk and need.

Discussion: How would a simplified IEDC credit structure work in South Dakota?

Strengthen program offerings and unify oversight.

- Streamline the program catalog: Where multiple programs target the same need, select the strongest program rather than spreading staff across too many curricula.
- Create a single Rehabilitation and Reentry division—modeled after states like North Carolina and Michigan—to oversee all programming, education, case management, and behavioral health under one leadership structure.
- Expand education and job readiness offerings.

Discussion: What opportunities or concerns do you see in bringing all programming under one division?

Give staff the tools to deliver programs well.

- Ensure staffing patterns (both facilitators and security) support programming and increase staffing where needed.
- Establish a training and quality assurance function with authority across facilities.
- Enhance training pathways for program facilitators and mandate recidivism-reduction training content for security staff.
- Strengthen and streamline data collection and begin using pre/post results that are already being gathered to understand impact.

Discussion: Many of these would require an investment. What information do you think the legislature needs to support these changes?

Next Steps

Next Steps

- In-person facility observations and additional focus groups with people in prison tomorrow and in May
- Ongoing conversations with DOC staff
- Full findings and policy options in June
- Reentry assessment findings in August
- Finalized CRTF recommendations in October

Thank You!

For more information, please contact Sara Friedman at sfriedman@csg.org.

Solutions for justice challenges.

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Appendix

Jameson Annex 2025 Key Program Metrics

439

December 31, 2025 population

44%

people in prison on December 31 who received any programming in 2025

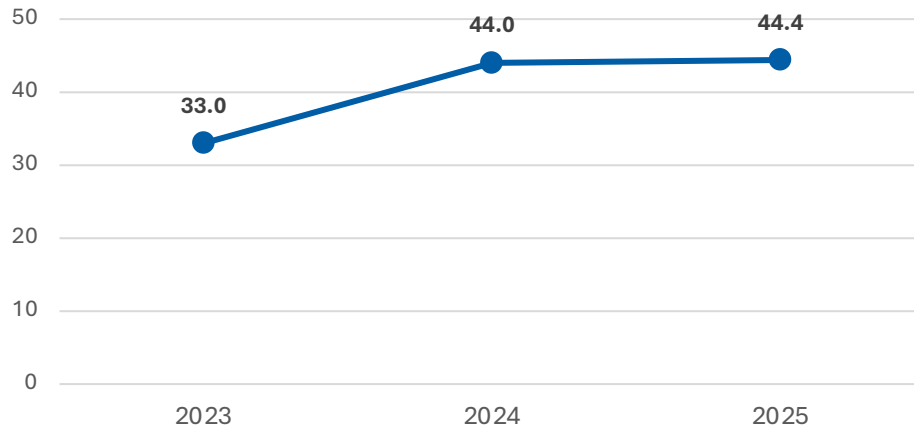
+14%

people who received programming, 2023–2025

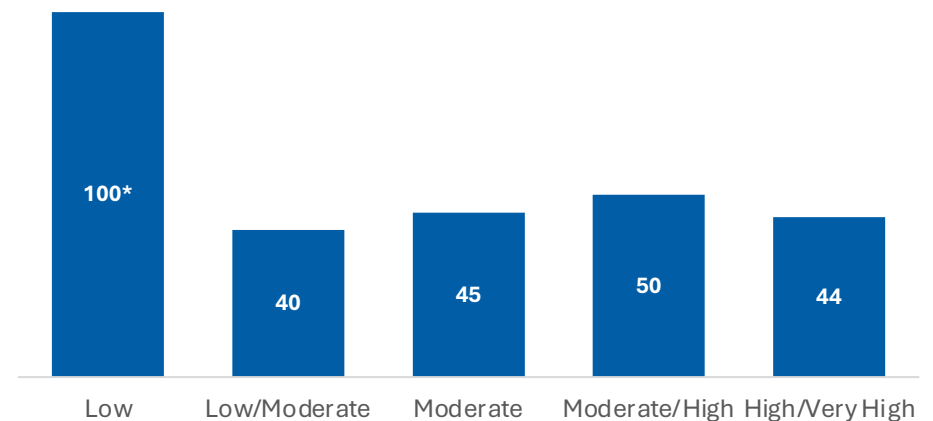
44%

high or very high risk received programming

Percent of People Who Received Any Programming, 2023–2025



Percent of People Who Received Any Programming by Risk Level, 2025



Metrics reflect people in a facility on the last day of the year. All metrics except 2025 population include anyone present on that day who accessed programming at any point during the year, regardless of completion status.

**Note: Only 1 low-risk person is housed at Jameson, and they received programming in 2025*

South Dakota State Penitentiary 2025 Key Program Metrics

767

December 31, 2025 population

50%

people in prison on December 31 who received any programming in 2025

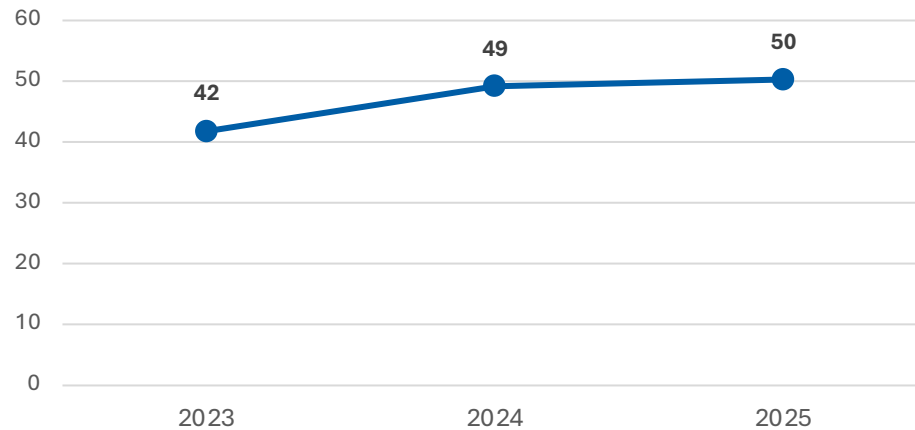
+18%

people who received programming, 2023–2025

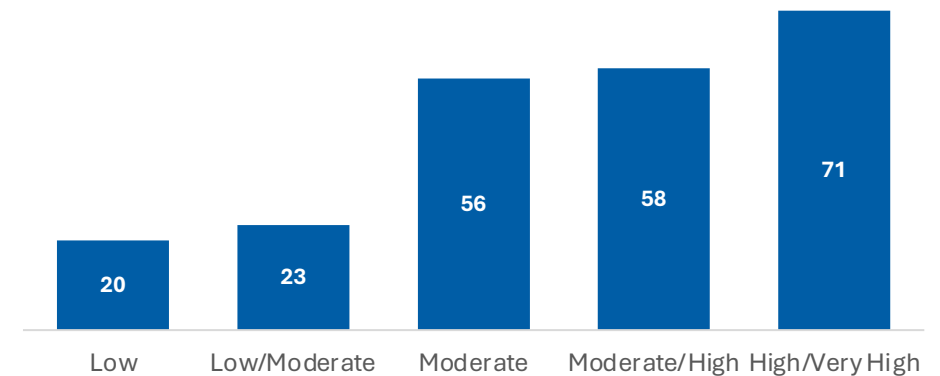
71%

high or very high risk received programming

Percent of People Who Received Any Programming, 2023–2025



Percent of People Who Received Any Programming by Risk Level, 2025



Metrics reflect people in a facility on the last day of the year. All metrics except 2025 population include anyone present on that day who accessed programming at any point during the year, regardless of completion status.

Mike Durfee State Prison 2025 Key Program Metrics

1,114

December 31, 2025 population

49%

people in prison on December 31 who received any programming in 2025

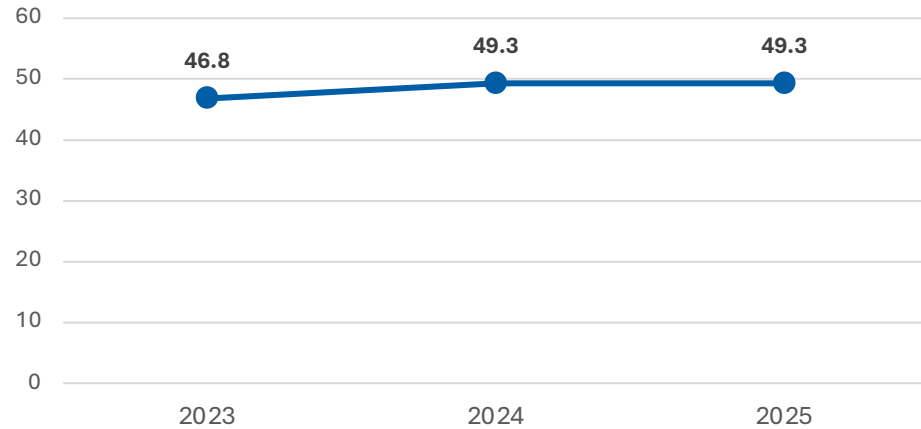
+13

people who received programming, 2023–2025

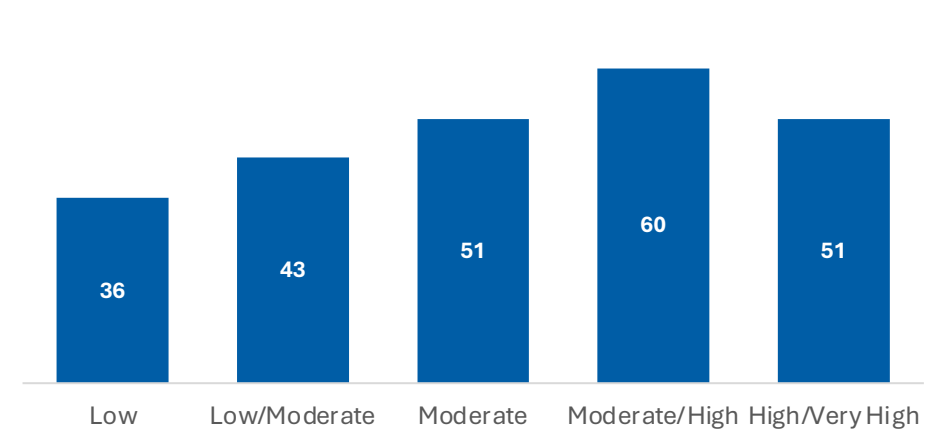
51%

high or very high risk received programming

Percent of People Who Received Any Programming, 2023–2025



Percent of People Who Received Any Programming by Risk Level, 2025



Metrics reflect people in a facility on the last day of the year. All metrics except 2025 population include anyone present on that day who accessed programming at any point during the year, regardless of completion status.

South Dakota Women's Prison 2025 Key Program Metrics

296

December 31, 2025 population
(combined Main + Unit E)

65%

people in prison on December 31 who
received any programming in 2025

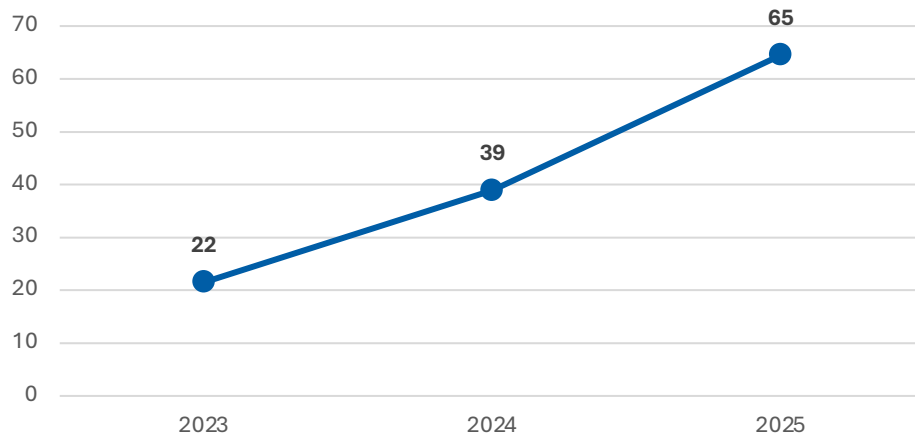
+194%

people who received programming,
2023–2025

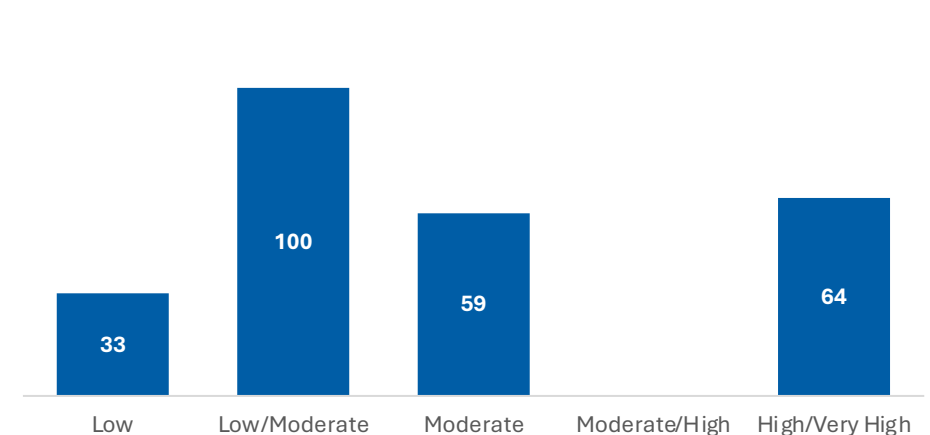
64%

high or very high risk received
programming

Percent of People Who Received Any
Programming, 2023–2025



Percent of People Who Received Any
Programming by Risk Level, 2025



Metrics reflect people in a facility on the last day of the year. All metrics except 2025 population include anyone present on that day who accessed programming at any point during the year, regardless of completion status.