INTRODUCTION

One of my very first cases as a public defender involved a violation of federal supervised release, and I have been drawn to such cases ever since.¹ I agreed to cover the case for one of my colleagues during my first few days in the office. My colleague handed me the file, assuring me that there was no way for me to mess anything up. Ms. Collins had been convicted of a nonviolent crime and was on supervised release after serving a short prison term.² The probation department had filed a petition to revoke her supervised release because she did not go to her mental health treatment appointments. My colleague promised me that the judge assigned to Ms. Collins’ case would not do anything to hurt her at the hearing. This particular judge did not send people to prison for missing appointments.

The next day, I was a bundle of nerves as I waited for Ms. Collins in the imposing federal courthouse. I pored over her file and stayed up late to hone my arguments that she should be allowed to stay out on bail. I was anxious to prove to Ms. Collins that I could be a polished advocate for her, despite my lack of experience.

Nothing in my legal education or training prepared me for what came next. Ms. Collins was desperately ill. Her hands shook as she walked toward me. Her body hurt. Her clothes were disordered. She had no money to get home, even if we won the hearing. The arguments I had prepared from the case file did not come close to capturing her vulnerability in that moment.

I felt overwhelmed by the incongruity of the situation as I walked into the plush federal courtroom to defend Ms. Collins. The fact that she had missed some appointments when she did not have the money to travel to those appointments was a nonsensical reason to threaten her with prison. The claim that she could have applied for bus passes to make it to her treatment appointments seemed like a farce.

¹ Supervised release is a form of post-incarceration supervision that replaced parole in the federal system. See Fiona Doherty, Indeterminate Sentencing Returns: The Invention of Supervised Release, 88 N.Y.U. L. Rev. 958 (2013).

² All identifying details, including the client’s name, have been changed to protect confidentiality.
after meeting with her. The revocation petition took the contradictory view that Ms. Collins’ mental health needs were so serious that she should be imprisoned for failing to go to treatment, but not serious enough to excuse her failure to keep track of appointments and organize her bus fare in advance. A condition of release aimed at supporting Ms. Collins was now being weaponized against her.

This federal case was my introduction to the many ways that broad conditions of supervision can make people easy targets for prison. Although Ms. Collins did not go to prison for missing her treatment sessions, the outcome of her case could have been different under another judge. Each year, thousands of people go to prison for violating the conditions of their supervised release. A recent analysis showed that federal judges impose prison terms over alternative sanctions for the vast majority of the lowest grade violations.3

Supervision violations also help keep state prisons full. In 2019, the Council of State Governments reported that forty-five percent of state prison admissions nationwide are attributable to violations of probation and parole.4 About half of this figure is due to technical violations, like the missed treatment appointments in Ms. Collins’ case.5 But even when a violation is criminal, it is much easier to imprison a person who is already on probation, parole, or supervised release. The proof standards at a revocation hearing are low and the system is stacked toward conviction in ways that are both legal and cultural. Contesting guilt can be seen as a failure to get with the rehabilitative program.6

The data on supervision violations underscores the importance of studying the day-to-day dynamics of revocation. The supervision mechanisms that were developed as alternatives to incarceration have instead opened pathways into prison. These mechanisms also magnify the inequality of sentencing outcomes along lines of class and race.7 Efforts to reform the system will require a much deeper

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5 Id. A technical violation is a failure to abide by a non-criminal rule of supervision, such as a requirement to report to a probation officer or a requirement to pay a supervision fee. See Vincent Schiraldi, Explainer: How ‘Technical Violations’ Drive Incarceration, THE APPEAL (Mar. 23, 2021), https://theappeal.org/the-lab/explainers/explainer-how-technical-violations-drive-incarceration [https://perma.cc/59E5-FZPZ].
6 I have explored these issues in other work. See, e.g., Fiona Doherty, Testing Periods and Outcome Determination in Criminal Cases, 103 MINN. L. REV. 1699 (2019). For an illustration of the problematic dynamics that can emerge when judges impose and enforce broad conditions of supervision, see Serial, You’ve Got Some Gaults, SERIAL PRODS. (Sept. 26, 2018), https://serialpodcast.org/season-three/2/youve-got-some-gaults [https://perma.cc/E4KY-P5HR] (when a judge believes he knows you better than you know yourself).
7 See, e.g., Michelle S. Phelps, Mass Probation and Inequality: Race, Class, and Gender Disparities in Supervision and Revocation, 2 HANDBOOK ON PUNISHMENT DECISIONS: LOCATIONS OF
understanding of the ways that “community supervision” mechanisms (supervised release, probation, and parole) have failed to keep people in the community.

It is in this context that I describe a clinical project on parole revocation conducted by the Jerome N. Frank Legal Services Organization (LSO) at Yale Law School. The project started as a discrete research study aimed at shining a spotlight on a low visibility corner of the criminal justice system. But it grew into something much larger. The findings of the study sparked an intensive effort to reshape the parole revocation system in Connecticut. This article describes the stages and dimensions of that project.

I. THE DECISION TO INVESTIGATE PAROLE REVOCATION

The opportunity to study parole revocation first emerged in 2015. The governor of Connecticut launched an initiative to lower the state’s incarceration rates and facilitate the reintegration of prisoners.8 To support this initiative, I agreed to look into the state’s parole revocation system.9 I decided to do so in part because I understood so little about it; the Board of Pardons and Paroles (BOPP) administered parole revocation hearings behind closed doors, and none of the experienced lawyers I approached could tell me much about how the process worked in practice. All I knew was that lawyers rarely appeared at these hearings.

The governor had made parole revocation a priority because of its role in increasing the prison population in Connecticut. Incarceration figures resulting from parole revocation had been going the “wrong way” in the state’s efforts to close prisons. A 2015 analysis revealed that nearly fifty percent of people who had been discharged to special parole status in recent years had been revoked (returned to prison) within twelve months of their release.10 Technical (non-criminal) violations

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9 Governor Malloy met with Yale criminal law faculty to request research support for his initiative.

accounted for seventy-five percent of these returns to prison. State leaders wanted to understand why so many parolees were going back to prison and what could be done to reverse this trend.

In agreeing to the study on parole revocations, I hoped that it would offer a rich learning experience for the students in my clinic at Yale Law School. The clinic would have to come up with a plan for studying a system that operated largely outside the purview of lawyers. In conducting the study, moreover, the clinic would need to navigate a challenging insider-outsider role, particularly when interacting with the hearing examiners and other employees of the BOPP. As we learned from our earliest interactions with BOPP staff, not everyone shared the enthusiasm for reform that was expressed at the top levels of state government.

II. A MONTH OF HEARING OBSERVATIONS

To get our arms around the parole revocation system, the clinic decided to watch every parole revocation hearing in Connecticut for a month to see what we could learn. This strategy required travelling to BOPP’s headquarters in Waterbury to watch forty-nine parole revocation hearings over the course of the month. We took detailed notes at each of the hearings and talked at length with the hearing examiners and board members administering the hearings. Because parolees attended the revocation hearings by video link from prison, we were not able to talk to any of the parolees directly in the first part of the research study.

The forty-nine hearings we observed included a representative mix of charges. Fifty-one percent involved technical violations, while thirty-seven percent involved at least one criminal violation. Eleven percent were classified separately as “absconder cases,” which meant that the person was accused of failing to report to a supervising parole officer. The supervising parole officers worked for the Department of Correction (DOC), which was a separate agency from BOPP.

After we completed the month-long study, the governor’s advisors convened a meeting at the State Capitol to allow the students to share the clinic’s findings with state leaders. The students divided up the issues, negotiated over which cases to

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11 Id.

12 Michael Lawlor, the Undersecretary for Criminal Justice Policy, and Eleanor Michael, Associate General Counsel to the Governor, first approached me about the need for the parole revocation study. They then facilitated the study and served as critical partners in all stages of the ensuing reform efforts. For an account of the state’s efforts to rethink parole and a portrayal of the challenges facing parolees, see Frontline: Life on Parole (PBS television broadcast July 18, 2017), https://www.pbs.org/wgbh/frontline/film/life-on-parole [https://perma.cc/8CA9-U4B4].

13 This project began in the Samuel Jacobs Criminal Justice Clinic (CJC). Over time, it involved many students and professors in CJC, including Celina Aldape, Asli Bashir, Reginald Dwayne Betts, Chrysanthemum Desir, Corey Guilmette, Rachel Shur, Theodore Torres, Senior Liman Fellow Sarah Baumgartel, and Professor Orihuela. Later stages of the project were carried out in the Advanced Sentencing Clinic, which I taught with Professors Orihuela and Gohara.

14 The hearing observations occurred during the month of November 2015.
highlight, and mooted their remarks internally. They then presented the results of the study to an audience that included BOPP’s Executive Director, BOPP’s Chairperson, the Commissioner of DOC, the head of DOC’s parole supervision unit, and the governor’s general counsel and deputy general counsel.

Our main worry in designing the study was that we might not learn enough in a month of hearings to draw any meaningful conclusions. But the findings of the study were stark:

- BOPP decided to revoke parole in 100% of cases;
- BOPP imposed a prison sanction in 100% of cases;
- Every single parolee was incarcerated for at least three months before receiving a revocation hearing;
- Almost every observed parolee had waived a preliminary hearing (an opportunity to contest probable cause and/or the need for continued detention within fourteen days of remand);
- No parolee appeared with appointed counsel, even though many appeared to meet federal constitutional standards for the appointment of counsel;
- Only three parolees, all white men, appeared with retained counsel;
- All the other parolees waived the right to request the appointment of counsel.  

The students told stories about individual hearings to give context and texture to what they observed. They described seeing a number of parolees take responsibility for a violation at the start of a hearing only to dispute the facts of that violation down the line. The parolees in these cases did not seem to understand that the hearing examiners would rely on an upfront admission of responsibility as conclusive evidence of guilt, no matter what else the parolee might say at the hearing. In other cases, parolees did not accept responsibility and instead provided their own detailed accounts of what had happened, but there was no investigation of their claims. The hearing examiners simply relied on the preponderance of the evidence standard to find guilt based on the written violation reports that DOC parole officers had submitted in advance of the hearings. Because the DOC parole officers did not attend any of these revocation hearings, they could not be cross examined. Without counsel or other forms of outside assistance, incarcerated parolees had no way of developing the kinds of evidence necessary to meaningfully contest the allegations against them.

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15 ASLI BASHIR, RACHEL SHUR, THEODORE TORRES & FIONA DOHERTY, PAROLE REVOCATION IN CONNECTICUT: OPPORTUNITIES TO REDUCE INCARCERATION 5 (2017).

16 In the hearings the clinic observed, BOPP responded to disputed facts by adopting the allegations made by the DOC parole officer without any independent investigation. BOPP staff told the clinic that BOPP was responsible for the adjudication process, not the investigation process. See BASHIR ET AL., supra note 15, at 13.
After the students presented their findings, the collected state leaders agreed that the clinic should try to interview the parolees whose revocation hearings it had observed. In these interviews, the clinic would try to find out why so many parolees had waived their right to request an attorney and a preliminary hearing. It also would ask parolees about their individual experiences of the revocation process and gather data about the practical consequences of revocation.

The results from the hearing observations prompted BOPP leaders to initiate a series of reforms. Most importantly, BOPP began to hold automatic preliminary hearings in all cases involving technical violations. This change in policy allowed BOPP to review the strength of the evidence against parolees within two weeks of remand in order to decide if continued detention was justified. BOPP also tightened its evidentiary standards and refined its hearing timelines to prevent delays.

III. INTERVIEWING PAROLEES

For the second stage of the project, the clinic designed a survey instrument for interviewing the parolees whose hearings it had observed. The students then navigated the Institutional Review Board at Yale and negotiated with DOC for access to its facilities, as most of the parolees remained incarcerated. After clearing these hurdles, the clinic was able to meet with thirty-four of the forty-nine parolees. These meetings ensured that the views of parolees were taken into account in the reform process, while also allowing the clinic to visit nearly every prison, jail, and halfway house in the state.

The interviews revealed a wealth of information that helped push the reform project forward. In conducting the interviews, for example, we learned that a majority of the parolees had waived the right to a preliminary hearing without understanding what a preliminary hearing was. More than eighty percent of the interviewees did not realize that the regulations permitted BOPP to release them at a preliminary hearing. A majority reported that they had waived the preliminary hearing under the instructions or advice of a DOC parole officer. Many also reported that DOC parole officers had counseled them to waive their right to request an appointed attorney.

After hearing similar stories from parolees, the clinic examined the waiver forms that were filed in the parole revocation hearings that the clinic observed. The students located markings on the waiver documents that were consistent with the parolees’ accounts. Some parolees indicated, for example, that their parole officer had marked the waiver provisions with an x and instructed them to place their initials by the x. The students found these marks on the forms.

The interviews also created a record of the costs of the revocation process for individual parolees. Seventy-nine percent of the interviewees lost their jobs as a result of being remanded. Forty-seven percent permanently lost their housing. Many also lost all their property when they lost their housing.

Once the clinic analyzed the results of the interviews, the governor’s advisors convened a second meeting at the Capitol so that the students could report their
findings to state officials. The meeting ended with the clinic agreeing to work closely with BOPP and DOC officials to implement a host of reforms.17

IV. PUBLIC REPORT AND REFORM IMPLEMENTATION EFFORTS

As a next phase of the project, the clinic met repeatedly with BOPP leaders and concluded that a public report of the clinic’s findings would help ensure that reforms were implemented swiftly. The clinic released its report, Parole Revocation in Connecticut: Opportunities to Reduce Incarceration,18 in September 2017 and created a chart of the proposed reforms.19 These documents then became the focus of regular implementation meetings at the Capitol between the clinic, BOPP, DOC, and the state’s policy and statistics experts.

Over the next year, the clinic and BOPP worked in close collaboration and had many candid discussions about the viability of possible reforms.20 BOPP asked clinic students to draft new scripts for its hearing examiners to use in preliminary hearings to help ensure that the procedures were consistent with the relevant legal guidelines. After extended discussion, BOPP agreed not to solicit an “admit or deny” from parolees at the beginning of a hearing, given an established culture that encouraged parolees to admit to violations upfront so as not to appear argumentative or adversarial. BOPP also invited students to conduct trainings for its hearing officers to help inaugurate the revamped procedures.

During this period, the clinic got to know the DOC leaders who oversaw the supervising parole officers. These leaders conducted trainings aimed at ensuring that parole officers were not directing parolees to waive their rights in the revocation process. They also met with the clinic on systemic issues like the use of incarceration as a response to positive drug tests to discuss the possibilities for a different approach. They invited clinic members to attend internal meetings on DOC’s addiction treatment programs and allowed the students to provide input on new procedures. These exchanges gave the clinic a much deeper understanding of the competing pressures that parole officers face in responding to the problem of addiction.

17 The clinic also conducted other research for the state, including a December 2016 study analyzing which courthouses were imposing special parole at the highest rates. This analysis helped inform state efforts to reduce the number of people on special parole.

18 BASHIR ET AL., supra note 15.


20 Professor Miriam Gohara and I co-supervised this phase of the project through the Advanced Sentencing Clinic. Illyana Green, Saúl Ramirez, and Theodore Torres led this work as students in the clinic.
V. RIGHT TO COUNSEL AND CLINIC PILOT

During our initial study of revocation hearings, the clinic learned that BOPP was using a strict competency standard to decide whether someone qualified for the appointment of counsel. BOPP would not approve a request for counsel as long as the parolee was capable of communicating with the board. In practice, this meant that anyone who could talk in coherent sentences was not going to get a lawyer appointed to assist them. At that time, BOPP staff made clear that BOPP would not pay for a lawyer to develop a parolee’s factual or legal claims.

Improving access to counsel therefore became an early focus of the clinic’s advocacy. When the students first presented their findings to state leaders, they emphasized that BOPP’s policy on the appointment of counsel did not meet federal constitutional standards. Although indigent parolees do not have an automatic right to counsel in all revocation proceedings, they do have a presumptive right to counsel under the U.S. Constitution when they have made a colorable claim that: (1) they have not committed the alleged violation; or (2) there are substantial reasons which justify or mitigate the violation that make revocation inappropriate, and these reasons are complex or otherwise difficult to develop or present. The students pointed to specific cases they had observed that fell into each of these categories. In response, BOPP began to rework its standards on the appointment of counsel, focusing on parolees with mental health issues.

There was still strong resistance, however, to the idea of making lawyers more generally available to parolees—not least because of how much this would cost. To help develop a practical menu of options, clinic students researched the parole revocation process in other states to better understand how these states handled decisions about when to appoint counsel. The students presented these findings to BOPP and other state leaders.

These efforts culminated in the clinic agreeing in 2018 to run a pilot for the state in which students and faculty would represent people in parole revocation hearings. We agreed to take cases at different stages of the process: some at the preliminary hearing stage and some at the final revocation stage. In handling these cases, we would conduct factual investigations, file motions, and submit legal briefing to protect parolees’ rights and improve the integrity of decision-making. We would highlight any structural impediments that we encountered with the goal of making BOPP more generally accessible to lawyers. As part of the pilot, BOPP and the governor’s staff agreed to help us trouble-shoot problems as they arose to help build the infrastructure necessary for the broader representation of parolees.

22 Professor Orihuela, Professor Gohara, and I dedicated the docket of the Advanced Sentencing Clinic to handling these cases for the pilot. The students who represented parolees in the pilot and/or led the related legislative advocacy and policy reform agenda included: Kristen Bourgeois, Nicole Brambila, Salil Dudani, Alexandra Eynon, Eli Feasley, John Gonzalez, Catherine Logue, Destiny Lopez, Danielle Makarsky, Felisha Miles, Blake Neal, Bina Peliz, Saul Ramirez, Isadora Ruyter-Harcourt, Kyra Schoonover, Madeline Silva, and Samantha Smith.
Running the pilot required the clinic to overcome many logistical challenges. To avoid creating delays, we first needed to collaborate with BOPP and DOC on a process for ensuring that eligible parolees knew about the pilot in a timely manner (i.e., shortly after their remand to prison for an alleged violation). Once we had a pipeline for getting cases, we worked with BOPP to create a discovery process for obtaining the DOC evidence against our clients and other important documents. We also negotiated with DOC about getting access to rooms inside prisons that were large enough for us to attend the remote hearings alongside our clients. At the same time, we pushed BOPP and DOC to experiment with holding revocation hearings inside a prison so that the parolees could participate in-person.

The clinic handled a variety of cases over the next year and broke significant ground in improving the fairness of the process. In one case, for example, students represented a client on a criminal violation and persuaded the hearing examiner to reinstate parole based on the extensive mitigating evidence the clinic had uncovered. When a BOPP panel subsequently rejected the hearing’s examiner’s decision, the clinic won an appeal because the panel had relied on claims outside the record. In another case, clinic students demonstrated that revoking a client’s parole for the failure to pay halfway house fees violated the U.S. Supreme Court’s decision in Bearden v. Georgia. In a different case, the students represented a client who was charged with testing positive for drugs and leaving a halfway house. Because this client’s parole had been revoked repeatedly for similar charges, the students consulted with a DOC leader about options for a more individualized treatment placement. This leader then submitted a letter to BOPP guaranteeing the client a spot in an approved treatment program if BOPP decided to release the client from prison. In this way, the collaborative relationships developed through the research arm of the project helped identify solutions for cases in the pilot.

VI. THE CREATION OF A PUBLIC DEFENDER PAROLE REVOCATION UNIT

After the success of the pilot program, the clinic worked to convince state leaders of the need to create a broader access-to-counsel program for parolees in revocation proceedings. Ultimately, after extended discussions, the state agreed to develop an entirely new unit of the Connecticut Public Defender’s Office to handle

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23 Two students and I found ourselves crammed into a maintenance closet with our client, for example, at one of our earliest hearings. DOC officials put up a screen inside the closet to allow us to connect by video link with the BOPP panel.

24 As a result, BOPP and DOC agreed to hold an entirely in-person parole revocation hearing in the gym of the New Haven Correctional Center. Professor Orihuela supervised the law student team at this in-person hearing.

25 Bearden v. Georgia, 461 U.S. 600 (1983) (holding that a probationer cannot be imprisoned for the failure to pay a fine unless the court makes a finding that the failure to pay was willful).
these cases. The clinic helped push for passage of the legislation that funded this unit.26

The Connecticut Public Defender’s office opened its Parole Revocation Unit (PRU) in September 2019, roughly four years after the clinic’s initial month-long study. Since that time, the PRU has represented hundreds of parolees at both preliminary and final revocation hearings, and it has succeeded in getting the charges dismissed in a significant percentage of cases.27 In a recent review, the new unit was lauded for reducing incarceration in Connecticut and raising the professionalism and integrity of the parole revocation process.28 The head of DOC’s Parole Division reported that providing legal representation to parolees had raised the credibility of revocation hearings, and made “our staff better parole officers as well.”29 To help embed the reform efforts, the clinic has continued to take on discrete cases and policy initiatives in support of the PRU.30

CONCLUSION

A key lesson from the clinic’s parole revocation project is the extent to which a rudimentary study can spark wide-ranging reform. The project began with a set of hearing observations that produced simple, but illuminating, data. This data laid the groundwork for our interviews with parolees, our policy-oriented conversations with BOPP and DOC, our decisions about which cases to handle in the pilot, and our collaborative reform agenda with state leaders. The hearing observations led to insights and understandings that created the momentum needed to develop and implement policies that were aimed at lowering incarceration rates and raising the safeguards for parolees in the process.

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27 In March 2021, for example, the PRU reported that roughly 12% of cases were dismissed at the preliminary hearing stage for a lack of probable cause. Public Act 19-Implementation: Parole Revocation Unit, CONN. PUB. DEFS. (Mar. 25, 2021), https://portal.ct.gov/-/media/OPM/CJPPD/CJcipac2021_ALL/03-2021-DOCs/CJPAC-March-25-2021-presentation_DRAFT.pdf [https://perma.cc/9H7F-V3TH].


29 Id.

30 In 2020, for example, Professor Orihuela worked with a team of law students, Patrick Liu, Phoenix Rice-Johnson, Madeline Silva, and Becca Steele, to shorten BOPP delays for incarcerated parolees charged with criminal violations.