

Community Justice CBAC

Office of Citizen Involvement

To: Chair Deborah Kafoury and County Board of Commissioners 7 pages
FROM: Lawrence Betcher, Community Justice CBAC Chair
DATE: April 27, 2015
SUBJECT: DCJ Citizen Budget Advisory Committee (CBAC) Report & Recommendations

INTRODUCTION

Our committee commends the exceptional efforts of DCJ staff to incorporate new ideas into their practices and to seek out additional training and team-building activities. In particular, the committee was extremely impressed with DCJ's collaborative efforts with other agencies designed to reduce minority contact with the justice system. Our committee was also thrilled to witness the work that DCJ has done with other agencies and professionals that has led to the extremely positive results in implementing HB 3194. We were impressed that parole and probation officers, judges and DCJ clients all view this work so favorably.

Our committee has been consistently impressed with all of the presenters throughout the year and has the utmost respect for the efforts of DCJ staff in serving a diverse group of clients with often very different profiles and needs. Our committee commends DCJ's efforts to self-evaluate and improve its activities, even when programs are already successful. The committee has felt extremely honored to learn more about the work of DCJ and to meet and listen to presentations from DCJ's hardworking, compassionate and innovative staff.

PROCESS

The first meeting of the Department of Community Justice (DCJ) Citizen Budget Advisory Committee (CBAC) for FY15 was held on May 5, 2014. The committee met eight times to familiarize themselves with departmental activities and review FY16 budget proposals and changes.

During this period the committee met with program managers and staff to become familiar with DCJ programs and funding streams. DCJ staff members included:

- ✚ Jeff Snyder, ASD, Forensic Lab Community Justice Manager
- ✚ Craig Bachman, JSD Custody Confinement Practices, Senior Manager
- ✚ ReGina Guion, ASD Formal Supervised Misdemeanor/Monitored Misdemeanor Probation Supervision Community Justice Manager
- ✚ Christina McMahan, JSD Assistant Director, Racial Ethnic Disparity/Capstone Gang Project
- ✚ Brian Detman, JSD Community Justice Manager
- ✚ Joyce Resare, Business Services Manager
- ✚ Scott Taylor, Director
- ✚ Ginger Martin, Deputy Director

The committee welcomed two new members and lost two members for a core group of seven members.

Members: Lawrence Betcher (Chair), Joanne Burke, Ruth Jones, Jordan Ritchie, Teresa Walton, Zoe Wyse, Jordan Granet, **STAFF:** Karen Rhein

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MAJOR CHANGES from FY2015

1. **Multnomah County Justice Reinvestment Budget (HB 3194)**: The committee believes that it is imperative that the Justice Reinvestment Budget is used for community justice projects, and we support all actions by DCJ and Multnomah County to ensure that this budget is fully funded by the state legislature.

Our committee has reviewed the recommendations made by DCJ for allocating the funds from the justice reinvestment budget and our committee strongly supports DCJ in these priorities. We believe that these items will enable DCJ staff to better support clients in their growth and in leading positive lives. The diversity of the initiatives in the DCJ reinvestment budget reflects the wide variety of clients that DCJ currently serves and reflects the efforts that DCJ makes to meet the needs of and improve the lives of all clients and to build a safer community.

2. **Early Intervention and Diversion Program/Racial and Ethnic Disparities (RED) Work**: Our committee reviewed the priorities of DCJ staff and was impressed that DCJ staff are so supportive of increasing countywide efforts to limit minority over-representation in the justice system. We are particularly impressed by the Capstone pilot project, which proposed an early intervention and diversion program, created by the multi-disciplinary team who participated in last year's RED certificate program. We look forward to the assessment of that pilot, and, if deemed successful, we will favor its expansion.

The committee recommends that a variety of efforts be undertaken to decrease minority contact with police and with the justice system in general. The committee recognizes that people from minority groups have a disproportionate amount of contact with the justice system. We believe this is a very serious social justice issue. The committee commends the efforts that DCJ and other departments are already undertaking in this area, and fully supports the continuation of these efforts.

3. **Mental Health Diversion Funding**: Our committee supports DCJ's decision to fund mental health housing services for people who are at risk of continued justice system involvement. We also support the continuation of funding for mental health staffing in the jails in order to assist people in mental health crisis and continued funding for the mental health assessment center. Our committee is pleased to see that DCJ considers these programs to be so supportive of DCJ's mission that it is incorporating these one-time only funding items from the last budget cycle into its current budget.

We understand that having adequate housing resources available is a potential obstacle for the continued expansion of these kind of supportive services for clients who suffer from mental health issues or other challenges. While we find DCJ's current efforts in this area very commendable, we also support the larger goal of improving availability of supportive housing and associated services for people with a variety of mental health and substance abuse challenges.

We recognize that this will require a larger conversation that needs to include other agencies and professionals besides DCJ, but we feel that discussing how to scale up creation of housing resources for people with a variety of issues is essential to supporting clients. We want all clients to have a safe, stable space so that they can work on their recovery. We believe that it would be very unfortunate if clients were to find themselves in a position in which they end up returning to prison or jail simply because there are not adequate housing resources in our community tailored to their needs. We recognize that this is a conversation that needs to happen in a collaborative way, and is not something that DCJ can accomplish singlehandedly, but we hope creating more safe and supportive housing for especially vulnerable clients will make our community more inclusive, accepting and safer for everyone.

EMERGING ISSUES

1. **Forensic Lab:** Our committee recognizes the importance of the work done by the DCJ forensic lab and recommends that it be funded at an adequate level to continue its current activities, which the committee feels support the mission of DCJ. The committee would like to have the department look at additional resources to support the program efforts.
2. **Veterans' Issues:** Many men and women return from their military service and are stable, productive and inspiring members of our community. Unfortunately, some men and women who are veterans of our military may experience a variety of problematic issues, including PTSD, other mental health challenges, anger management issues (which can lead to domestic violence and general aggression), substance abuse challenges, and general reintegration issues. These issues may bring some people into contact with the criminal justice system. Traumatic brain injury (TBI) is especially prevalent among veterans returning from the wars in Iraq and Afghanistan. Issues associated with TBI are often long-standing and difficult to treat, and may lead to poor judgment, memory issues, and a multitude of other challenges. Impairment from TBI can be profound.

This issue will therefore require engagement with medical providers, veterans' groups, housing services groups, and other stakeholders, as well as with police, corrections staff, and judges, etc. Some people with these issues may behave in ways that are dangerous and difficult to deal with. However, we believe it is vital to remember that many of these issues are biological and medical in nature, and they require appropriate medical and psychosocial treatment. This is a diverse population that requires a flexible, thoughtful and individualized approach.

3. **Londer Learning Center:** Londer Learning Center provides GED preparation services for clients on probation and parole. The committee recommends that parole and probation officers increase referrals for their clients to Londer Learning Center when it would meet a client's learning needs. Education is an essential element in improving prospects for employment and increasing overall life opportunity for many clients. Increasing opportunities for individuals held in the jails to access education should also be a priority for DCJ.

We also believe it is important to actively work to improve community attitudes and policies towards employing individuals with a history of involvement with the justice system. We welcome changes in policies that recognize that many people are able to make meaningful life changes. We hope that as a community we can support them in their efforts to focus on their education, gain housing in safe neighborhoods where they can focus on their recovery, have access to important social safety net benefits if these would be useful, and be productive members of companies, schools, organizations and of our community.

When clients have hope of meaningful employment, housing options in safe neighborhoods, access to safety net benefits that they would be qualified for, and full integration into the fabric of our community, we believe they will be more likely to feel hopeful about their future. We believe their hope for their future will then empower them to engage more constructively in the positive recovery efforts that will lead them to be able to contribute to our community in ways that will inspire us and that will make our community safer and stronger for everyone.

4. **Title IV-E:** DCJ has received funding to work with youth and their families in order to support youth staying in their homes rather than being incarcerated. We believe this is very positive work, and we are excited to continue to hear updates on the progress of this initiative. Enabling youth to remain in their normal communities, while developing positive ways of interacting and contributing to the community is an extremely worthwhile goal, and we believe it is much better for young people to be part of their community whenever possible, rather than living in jails and prisons. We hope to continue to learn more about similar projects.

RECOMMENDATIONS/CONCERNS

1. **Full Spectrum of Mental Health and Substance Abuse Treatment:** Implementation of the Affordable Care Act has led to significant changes in the way that substance abuse and mental health services for clients are funded. Many clients who previously relied on funding from DCJ to meet their substance abuse and mental health treatment needs are now able to secure funding through their health insurance. This shift in funding creates opportunities for a redirection of DCJ money. DCJ's initial predictions that 70% of clients would be eligible for health insurance coverage under ACA appear to have been remarkably accurate.

Although many DCJ clients qualify for health care, including substance abuse and mental health services, there are still some challenges in providing adequate access to these services in our community. It will likely be less expensive, less demeaning and far more productive for these clients if they can access appropriate resources in an outpatient setting in our community than if clients are unable to access these services and end up returning to prison or jail. Ensuring that a spectrum of therapeutic options exists, consistent with the idea that clients should be provided with the "least restrictive alternative" to meet their needs, is necessary for ensuring continued progress in this area.

The committee supports the continuation of the efforts already underway by DCJ and other stakeholders to improve substance abuse and mental health treatment for clients. In addition, our committee is impressed with DCJ's efforts to provide the medication Vivitrol to individuals attempting to overcome addiction issues.

There is a need to provide services for individuals currently served by DCJ, but also to collaborate with other agencies and professionals to incorporate preventive services so that clients do not end up being involved in the justice system in the first place. The committee supports a conceptualization of mental health and substance abuse issues as fundamentally medical and psychosocial issues that may in some cases lead to behavior that is not acceptable to society.

In spite of the potential for this behavior to occur, the committee recognizes that these issues fundamentally require a medical and psychosocial approach, rather than a criminalized approach, to intervention. We support utilizing the "least restrictive alternative" to help clients address these challenges, and recognize that a major obstacle to this is in creating an adequate infrastructure of programs and resources in our community to meet client needs. Addressing these issues effectively will likely require a creative, collaborative, sustained and individualized approach.

- Gang Involvement Prevention and Response Efforts Needed:** The committee is concerned that there is a great deal of gang involvement and resulting gang violence particularly in MidCounty and in Gresham. We would like to see efforts continued to prevent gang involvement and to reach out to those who are involved in gangs using increased community policing. The committee recognizes that efforts to target services to those involved in gangs will likely be more effective if service providers and outreach workers in the police and in our community can build rapport with clients and can understand the variety of cultural and social backgrounds of clients. The department should build on the Community Healing Initiative (CHI) model, which brings culturally-responsive case management and pro-social programming together with referrals to needed services (health care, counseling, therapy, etc.). This creates stronger connections between police, youth and communities, which was a theme of the OJJDP Gang Assessment Report.

The committee would like to see increased prevention efforts so that there will be less violence in our community and also less criminal justice system involvement for these people. We believe that efforts to increase community policing, in which police know the people in their neighborhoods, understand the relevant social dynamics, and can intervene in positive ways before problems escalate, could be very helpful in addressing these issues. Our committee also supports an effort to utilize the wisdom and life experience of former gang members who understand these issues in order to prevent others from entering gangs. The committee also recognizes that promoting active engagement in education and encouraging school policies that focus on the inclusion of all students (even if they have learning or behavior challenges) will also likely be helpful in preventing young people from finding their meaningful social connections in gangs.

3. **Victim Services:** Though commitment to crime victims is one of DCJ's strategic goals, past actions in this area have largely been left to the DA's office. While the DA's office has an obvious and important interest in engaging with crime victims, it should also be clear that some level of victim support should continue beyond the trial and incarceration of offenders. The offers in the FY 2016 budget specifically benefiting victims are a good step toward fulfilling the DCJ goals. The committee expects concrete deliverables in this area.

4. **Isolation/segregation practices in correctional institutions for clients:** The committee recognizes that practices in correctional institutions affect clients who subsequently come under the supervision of DCJ. Isolation practices in prisons reliably lead many people to have a decreased ability to function well in society. These practices often lead to decreased positive social behavior (which is needed for healthy integration into our community) and in some cases very seriously harm clients' mental states (e.g. isolation can lead to psychosis, catatonia, increased rage and aggression, inability to concentrate, tiredness and apathy, depression and mental disintegration, etc). Brain research has demonstrated that people who are held in conditions of solitary confinement experience observable adverse brain changes after as little as one week, and that in some cases the effects of solitary confinement can be as injurious as traumatic head injuries.

Experts have recognized solitary confinement as a form of torture. A national bipartisan committee on Safety & Abuse in America's Prisons in 2006 recommended eliminating the use of solitary confinement (isolation) in prisons due to its harmful effects. This commission recommended using any segregation as a last resort approach, but specified that segregation should still involve regular human contact for segregated people. Our committee believes that DCJ should work with staff at the Department of Corrections and with other stakeholders to collectively address these issues. Putting people in a situation in which they have no opportunity for regular discussion and normal human contact with other people is very harmful to them.

ADDENDUM

Isolation NS Segregation Practices

We believe that all people need to have the opportunity to regularly interact with others, and we believe that the failure to provide this (even though it is often very well-intentioned) is a serious human rights violation. Research has shown that people who are consistently deprived of regular human contact (in various settings) do poorly, and while the manifestations of this vary from person to person, with some people being more resilient than others, and the exact effects differing from person to person, it is never an acceptable practice.

We further believe that this is not a question of whether or not this is an evidence-based practice, although it is clearly an extremely ineffective practice which is not supported by good evidence, since it tends to make some people significantly angrier and more aggressive, while making others increasingly mentally unstable. Neither of these are productive outcomes for our community. This is a question of whether we are choosing to continue a practice that is fundamentally morally abhorrent to what our

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community stands for and is profoundly hurtful to others, or whether we are willing to move in the direction of interventions that are oriented towards healing, rehabilitation, and recovery.

The British have been very effective at working with high-risk individuals by providing smaller community structures for them, allowing them more choices and input about their day, giving them education and work to do, and making them feel socially connected and treated with dignity. We believe this is a very solvable problem. It is a question of generating the necessary political will to make these changes.