IMPROVING REENTRY FOR EX-OFFENDERS IN SAN DIEGO COUNTY: SB 618 FOURTH ANNUAL EVALUATION REPORT

AUGUST 2011



Darlanne Hoctor Mulmat, M.A.
Elizabeth Doroski
Lisbeth Howard
Debbie Correia
Sandy Keaton, M.A.
Jessica R. Dunham. M.S.
Kristen Rohanna, M.A.
Cynthia Burke, Ph.D.



401 B Street, Suite 800 • San Diego, CA 92101-4231 • (619) 699-1900

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As of August 22, 2011

ABSTRACT

TITLE: Improving Reentry for Ex-Offenders in San Diego County:

SB 618 Fourth Annual Evaluation Report

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ABSTRACT: The United States has the highest incarceration rate in the world

with most prisons offering few or no rehabilitative programs. As a result, many of the issues faced by offenders upon entering prison, which may have been related to their criminal activity (such as substance abuse and illiteracy), go unaddressed during the confinement period. This situation decreases the chances of successful reintegration and increases the odds that they will return to prison. The Senate Bill 618 (SB 618) San Diego Prisoner Reentry Program was developed in order to close this revolving door to prison by providing tangible reentry support services. Key program components are based on best practices and include conducting screenings and assessments and providing case management and services to meet identified needs. The process begins before sentencing and continues through imprisonment, as well as up to 18 months post-release. As part of this effort, a process and impact evaluation is being conducted by SANDAG. This fourth annual report describes project implementation, outlines the research methodology, and presents preliminary findings from the process

and impact evaluation.

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Special appreciation is extended to all of the capable individuals who worked diligently to design and implement the SB 618 program, including staff from the California Department of Corrections and Rehabilitation (CDCR) (specifically, the Division of Community Partnerships, Richard J. Donovan Correctional Facility, California Institution for Women, and Division of Adult Parole Operations); San Diego County District Attorney's (DA) Office, including AmeriCorps*VISTA (Volunteers in Service to America) members; San Diego County Probation Department; San Diego County Sheriff's Department; San Diego County Public Defender's Office; San Diego County Defense Bar; San Diego County Superior Court; and University of California, San Diego. Their level of expertise and commitment to the program, as well as to the evaluation process, are greatly appreciated. This fourth evaluation report would not have been possible without the help of numerous individuals. Special thanks are extended to Jeffery ("JJ") Anderson from the DA's Office and Ken Worthington from Probation for their leadership and guidance. In addition, it should be noted that the San Diego SB 618 program would not have been possible without the leadership and vision of District Attorney Bonnie Dumanis, as well as Vaughn Jeffery, who authored the legislation. Fin Park and Marla LaRue at the DA's Information Systems Department are gratefully acknowledged for creating the project's database and providing information necessary for the evaluation and this report. Although anonymous, the SB 618 program participants who shared feedback about the program and allowed the researchers access to their data are greatly appreciated. Finally, the production of this report was made possible through the assistance of numerous SANDAG staff, including Jennifer Christian, Autumn Dinise, Grace Miño, Rogelio Nuñez, Pedro Ruiz, Janelle Sisting, and Becki Ward.

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EXECUTIVE SUMMARY

MAJOR FINDINGS

Since 2007, SB 618 has been fully implemented in San Diego County. Participants have had their needs more effectively assessed, received expedited prison services, enjoyed support from Prison Case Managers (PCMs), and engaged with Community Case Managers (CCMs), who are able to work with Parole to facilitate the referral process and complete service delivery upon a participant's reentry into the community.

Impact Evaluation:

- Significantly fewer full treatment participants (those who followed through with referrals to services in the community) were returned to prison relative to the comparison group.
- Residing in stable housing was a main predictor of desistance to crime apart from all other factors (e.g., employment, criminal history, or demographic characteristics).
- ▶ Full treatment participants tended to be older and scored lower on criminal thinking scales than partial treatment participants. These differences may help program partners identify strategies to engage participants who may need a higher level of motivation to follow through on resources that may keep them from recidivating.
- ▶ The comparison group was re-arrested sooner on average than full treatment participants, with the comparison group 1.8 times more likely to be re-arrested at any given point in time during the 12 months following prison release.
- SB 618 participants reported improved family relationships and association with peers not involved in antisocial activities.

Process Evaluation:

- Program implementation and management have met challenges, especially in regard to recent fiscal constraints and the economy. However, program partners have remained committed to the original program design and worked diligently to find creative ways of providing services within constraints.
- ▶ The typical SB 618 participant is a 35-year-old White or Black male in custody for a property-related crime with extensive prior involvement with the criminal justice system and in need of vocational training and substance abuse treatment.
- Consistent with the program's goals, participant needs are assessed within the expected timeframe, reducing time spent in the prison reception center.
- Almost all participants have contact with a PCM and CCM while in prison and four in five participate in prison programs that match their individual needs.
- During the year of community reentry, almost all participants have regular contact with a CCM, though this occurs during the critical three-day period after prison release for about half of participants. This may be due to some participants released directly from prison to residential treatment where there is a blackout period when no contact is allowed with anyone outside the facility.
- Program retention is high, with 90 percent of participants remaining in the program throughout their prison term and 84 percent successfully participating during the year following prison release.

INTRODUCTION

As historically high numbers of ex-offenders parole to California communities, the issue of reentry poses a significant problem to policymakers, public safety officials, and community leaders alike. Reentry is a key issue facing many communities because over the last 30 years, more individuals have been locked up than ever before, due in part to changes in many jurisdictions indeterminate sentencing to determinate sentencing (which mandates specific sentence type and length for many crimes) (Austin, Clear, Duster, Greenberg, Irwin, McCoy, Mobley, Owen, & Page, 2007). As a result, by 2008, the United States had the highest incarceration rate in the world with 1 of every 100 adults behind bars (The Pew Center on the States, 2008). Without a commensurate expansion of prison infrastructure, prisons have become overcrowded. In California, the response to these crowded conditions has been legal action, concluding with a U.S. Supreme Court ruling to reduce the number of prisoners. Efforts to comply with this ruling include transferring the responsibility for housing offenders completing sentences for lower level offenses to local jurisdictions and early releases to parole.

At the same time that more offenders have been locked up for longer periods of time, many in-prison rehabilitation programs have been cut back or eliminated completely due to budget constraints. Thus, many of the issues these offenders entered prison with and which may have been related to their criminal activity (such as substance abuse and few vocational skills) have gone unaddressed during the confinement period, decreasing the chances of successful reintegration (Travis, Solomon, & Waul, 2001).

With researchers and policymakers across the country noting these trends and their implications for communities, there has been

more attention paid to determining how this revolving door to prison can be closed for a greater number of individuals, thereby increasing public safety and ensuring best use of citizens' tax dollars. One program resulting from this increased focus is the Senate Bill (SB) 618 San Diego Prisoner Reentry Program. This report describes this effort, outlines the research methodology used to evaluate the program's effectiveness, and presents preliminary findings from the evaluation.

WHAT IS SB 618?

SB 618 (Speier), effective as of January 2006, is one of several efforts across California to reduce recidivism and increase the probability of successful reentry by addressing concerns about the State's correctional system cited by the Little Hoover Commission in 2003 and 2007. Authored by the San Diego County

SENATE BILL (SB) 618 ELIGIBILITY

All participants are selected from the DA's felony prosecution caseload. The opportunity to enroll in the program is offered to both male and female nonviolent offenders as space is available. To be considered, the candidate must be in local custody (i.e., not out on bail) to complete the assessment process, be a legal resident of San Diego County, and agree (or "stipulate") to a prison sentence for the instant offense of 8 to 72 months. Those with prior convictions for great bodily injury or murder are excluded, as are arson and sex offender registrants. Candidates with prior violent convictions over five years old are evaluated on a case-by-case basis. All SB 618 participants are housed at Richard J. Donovan either the (RJD) Correctional Facility or the California Institution for Women (CIW) and, therefore, also must meet any housing restrictions at these facilities.

District Attorney's (DA's) Office, SB 618 is based on evidence-based and best practices and the concept that providing tangible reentry support services will increase parolees' chances of successful reintegration into the community (as evidenced by increased parole compliance and desistance from criminal activity). The ultimate goal is to produce lawabiding and self-sufficient members of the community and enhance public safety.

Although SB 618 allowed for the possibility of three California counties to implement a program, San Diego County was the first and, at the time of this report, only jurisdiction authorized to create a multiagency plan and develop policies and programs to educate and rehabilitate non-violent felony offenders. The diverse group of program partners, led by the DA's Office. includes the California Department of Corrections and Rehabilitation (CDCR), San Diego County Probation Department, San Diego County Sheriff's Department (including a subcontract with Grossmont Union High School District to do educational assessments), San Diego County Public Defender's Office, San Diego County Defense Bar, San Diego County Superior Court, and the University of California, San Diego.

SB 618 KEY COMPONENTS

The local SB 618 program, which incorporates evidence-based practices, is unique compared to traditional California correctional practices in a number of ways, including the following.

- Participants' needs are assessed before the prison sentence begins and an individualized Life Plan is created by a multidisciplinary team comprised of program staff, in conjunction with the participant. The Life Plan is designed to be modified with participant input throughout the course of program delivery and is created to ensure services meet identified needs.
- Case management is provided both during prison and after release to ensure services are accessed to meet identified needs.
- ▶ Since SB 618 is a voluntary program, it is crucial that staff employ Motivational Interviewing techniques effectively to maximize participant retention and facilitate their entry into substance abuse treatment.
- Upon release, a Community Roundtable (comprised of the Community Case Manager, Parole Agent, and other individuals identified by the ex-offender) meets regularly to ensure reintegration challenges are addressed.

In contrast, traditional correctional practices are restricted to a pre-sentence interview with Probation, access to in-prison services, parole supervision, and access to community services.

PURPOSE OF THE EVALUATION

The Criminal Justice Research Division of SANDAG is conducting both a process and an impact evaluation of SB 618.

The purpose of the process evaluation is to determine if the program is implemented as planned, measure what system changes occur, and assess program operations. More specifically, research questions to be answered include the following.

- Was the program implemented as designed? What modifications were made and why?
- How many individuals were screened and agreed to participate in the program and what were their characteristics?
- Were participants' needs adequately assessed and were services provided to meet these needs during detainment and after release?

The purpose of the impact evaluation is to determine whether participation in SB 618 improves reintegration and reduces recidivism (i.e., return to prison) and to identify the conditions under which the program is most likely to accomplish these goals. Additionally, the impact evaluation will determine whether the reentry program is cost effective relative to traditional procedures and whether positive change is realized in other areas of participants' lives (e.g., employment). The following research questions will be answered.

- Were there any improvements in program participant needs and family and/or social bonds over time?
- Was recidivism reduced among participants relative to the comparison group?
- Was the program cost effective?

To answer the impact evaluation questions, the most rigorous research design possible, given programmatic constraints, is being used and compares SB 618 participants to individuals who would have been eligible to receive services but were not approached to do so. To help mitigate possible confounding factors between the two groups, statistical techniques are being used to ensure equivalency so the effect of receiving SB 618 services can be isolated to determine if goals are met.

To answer these process and impact evaluation questions, data are being collected from both archival (e.g., program assessment data, service data, and criminal history records) and original sources (e.g., follow-up interviews with participants).

PROCESS EVALUATION FINDINGS

Program Implementation and Management

Program implementation and management have involved numerous partners, who have dealt with many challenges.

The unprecedented collaboration between local and state agencies in SB 618 has included the San Diego District Attorney's (DA) Office; Public Defender's Office; Defense Sheriff's Department; Probation Bar; Department; the California Department of Corrections Rehabilitation and (CDCR) (Division of Community Partnerships, both prisons, and Parole); Grossmont Union High School District Adult School; and University of California, San Diego, Department of Psychiatry, Center for Criminality and Addiction Research, Training (UCSD): Application and and AmeriCorps*VISTA (Volunteers in Service to America).

These program partners have remained committed to the original program design and worked diligently to overcome obstacles, especially in regard to recent budgetary constraints. Specifically, a \$1.9 billion cut to CDCR's budget from FY 2008-2009 to FY 2010-2011 included a 27 percent reduction to funding for SB 618 in FY 2009-2010 and an additional 16 percent in FY 2010-2011. Many prison programs were eliminated and case management caseloads increased. Consistent collaboration among program partners (with meetings as frequently as weekly) has focused on finding creative ways of providing services with fewer dollars. For example, despite funding constraints starting in FY 2009-10, new components were implemented to further program goals, including a system of rewards for participants completing crucial "benchmarks." In addition, after years of persistence by program partners, the duplication of mental health screenings at RJD was discontinued, improving system efficiency and avoiding waste of scarce resources.

Participant Characteristics and Needs

As part of the evaluation design, 347 eligible individuals were assigned to the treatment group and 367 to the comparison group. The comparability of these groups was examined to identify any differences resulting from the lack of random assignment that could bias the study findings. The treatment and comparison groups were similar to each other with respect to age, gender, and prior criminal history. These research findings indicate that SB 618 targets individuals shown in the corrections literature to be at high risk for continued criminal activity (i.e., drug or property offenders with lengthy criminal records) (National Research Council, 2008).

While there were differences related to ethnicity (with a larger proportion of Whites in the treatment group and fewer Hispanics), this difference will be controlled through a statistical matching process to ensure that both groups are equivalent and eliminate any potential bias from study findings.

The typical SB 618 participant has the following characteristics.

- About 35 years of age, on average.
- Around four in five are male.
- About half are White and about onethird are Black.
- More than half are in custody for a property-related offense.
- Most have served time in jail or prison in the past.
- About nine in ten are assessed as high risk for re-offending due to previous non-compliance and prior criminal involvement.

- Almost all are assessed as having severe or significant vocational or substance abuse needs.
- Literacy is not an issue for most, but two-thirds still have limited educational achievement.
- About one-third have medical, mental health, or dental issues.
- Over half have criminogenic risks related to residential instability.
- Consistent with other research findings (Bloom, Owen, & Covington, 2003), female participants were significantly more likely to report being a victim of abuse (i.e., emotional, physical, or sexual abuse).

Based on assessed needs, SB 618 services should focus on vocational training, substance abuse treatment, and gender-responsive programming, which it has attempted to do within constraints previously mentioned.

Service Delivery

Service provision for SB 618 begins with the needs assessment process, completed in local custody (i.e., prior to sentencing) to facilitate the provision of rehabilitative services during the prison stay. Based on data collected for the evaluation (Table 1), participants were assessed within the expected window, reducing the period spent in the prison reception center (compared to inmates not participating in SB 618) so that prison time could be used for rehabilitative programming. As a result, nearly all participants received some type of program services while in prison. However, the match between needs and services received was less consistent due in large part to program availability, which is beyond the direct control of the SB 618 program, as the following discussion describes.

Overall, the majority participated in prison programs that matched their individual needs

(i.e., 82% in custody and 95% in the community), though there was variation between the two prisons. Treatment participants at RJD with a need for vocational programming were significantly more likely than those at CIW to receive vocational programming in prison. However, participants at CIW with needs for substance abuse treatment and educational services were significantly more likely to participate in these programs (not shown). These differences may be due to how areas of need are prioritized and service availability. For example, CIW prioritizes education over vocational training needs. In addition, program availability has been an issue at RJD, with delays in implementing new vocational programs, subsequent closure of some vocational programs, limited educational services depending on participant housing assignments, and closure of the Substance Abuse Program (SAP). Regardless, the level of participation in substance abuse treatment was higher than reported statewide, where 10 percent of those in need receive it (CDCR, no date)

With respect to services received in the community during the first 12 months following prison release, participants with substance abuse needs were most likely to be referred to and participate in substance abuse treatment. However, individuals with needs for education and vocational training were less likely to be referred to these services, probably due to the more immediate need for employment. Three-quarters of the SB 618 participants who had been out of prison for the 12-month post period utilized a service in the community (full treatment participants) and they tended to be older and score lower on criminal thinking scales than remaining one-quarter of SB 618 participants with no referral follow-up (partial treatment participants). Almost all of the treatment group had regular contact with Community Case Manager (CCM) after release, though this contact occurred during

Table 1
SB 618 MEETS AND EXCEEDS MANY PROGRAM DELIVERY GOALS

	Goal	Reality
In-Jail Assessments		
ASI	14 days	12.08 days
CASAS	14 days	10.58 days
COMPAS	14 days	15.83 days
TABE	14 days	10.56 days
Time in Reception Center	30 days	42.34 days
Prison Case Management (PCM) Contacts		·
Within first three months of prison entry	100%	76%
Six months prior to prison release	100%	96%
Community Case Management (CCM) Contacts		
In prison	100%	99%
Within three days after prison release	N/A*	52%
Within six months after prison release	100%	99%
In-Prison Services		
Any service related to need(s)	100%	82%
Education	100% of those with need	43%
Vocational Training	100% of those with need	50%
Substance Abuse	100% of those with need	60%
Community Services/Referral		
Any service related to need(s)	100%	95%
Education	100% of those with need	42%
Vocational Training	100% of those with need	66%
Substance Abuse	100% of those with need	94%

^{*}Participants released from prison directly to residential treatment are not available for this contact due to the blackout period in which no contact is allowed with anyone outside the treatment facility for 15 to 30 days.

SOURCES: SB 618 Database and PCM and CCM Official Records, SANDAG SB 618 Fourth Annual Evaluation Report

the critical three-day period after prison release for only about half of participants. This result may be impacted by the fact that some participants were released from prison directly to residential treatment, which includes a blackout period when no contact is allowed with anyone outside the facility.

Program retention was high, with 90 percent remaining in the program throughout the prison term and 84 percent continuing to participate throughout the 12 months following prison release. The primary reason for leaving the program while in prison or in the community was lack of compliance (e.g., rule violations in prison and parole violations or new offenses committed in the community).



Recidivism

Ultimately, SB 618 aims to assist ex-offenders in becoming productive law-abiding citizens, while protecting the public and saving precious taxpayer dollars. The impact of the program on offender behavior was assessed with respect to parole violations, arrests, convictions, and return to prison rates for the 12-month period following prison release. At the time data were compiled for this report, about one-third of the treatment and comparison groups had not been out of prison for the full 12 months and could not be included in the analysis. Therefore, any conclusion regarding program effectiveness should be deferred until the final report.

Preliminary results reveal that full treatment participants were significantly less likely to be re-arrested for a parole violation than the comparison group. This finding suggests that SB 618 may be assisting offenders with parole compliance. Given that California has historically had one of the highest technical violation rates in the country, this information may be valuable to stakeholders addressing the issue of reentry. It also has implications regarding new legislation

mandating non-revocable parole for non-violent, non-serious offenders.

Further, the full treatment participants were significantly less likely to return to prison or to be re-arrested compared to both the comparison group (Figure 1).

The SB 618 program was based on the philosophy that successful reentry is tied to understanding needs and service provision in prison, followed by support and services in the community. Based on this perspective, the analysis examined the relationship between receipt of services and success (i.e., desistance from crime). Receiving services in the community (i.e., utilizing the referrals provided by the CCMs) was related to, as well as predictive of, not being arrested, convicted, and/or returning to prison in the 12 months following prison release. Acquiring stable housing and employment were also protective against criminal activity. However, multivariate analyses showed that without housing, employment stable was predictive of success (not shown). Information about comparison group with respect to receipt of services in the community was not available so that group was not included in this analysis.

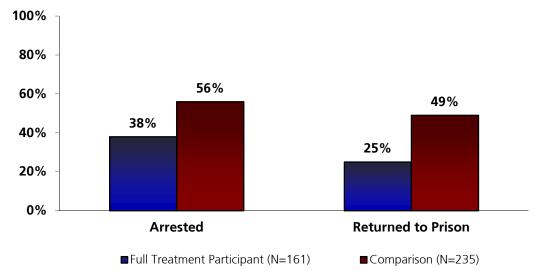


Figure 1
FULL TREATMENT PARTICIPANTS LESS LIKELY TO BE RE-ARRESTED OR RETURNED TO PRISON*

*Differences significant at .05 level.

SOURCES: San Diego County Sheriff's Department, SANDAG SB 618 Fourth Annual Evaluation Report

Risk Reduction

Addressing the needs of offenders (e.g., substance abuse, education, employment, and housing) has been found to facilitate the reentry process and relate directly to lowering recidivism rates. This process is referred to as risk reduction (Travis, Solomon, & Waul, 2001). For the treatment group, it appears that SB 618 is associated with risk reduction in terms of improved relationships with family members, secured stable housing, employment, and association with positive peer groups within the one-year period following release from prison. Participants reported improved family relationships and association with peers not involved in antisocial activities. Over four-fifths of the treatment group was living in stable housing and almost three-quarters were employed.

Program Satisfaction

An important measure of program impact is participant satisfaction, which can impact engagement in services and ultimately program effectiveness. Overall, treatment participants had a favorable opinion of the program. Specifically, aspects of SB 618 that appeared to have the strongest positive impact on participants included:

- developing an individualized Life Plan that included personal input;
- interacting with CCMs;
- participating in Community Roundtable meetings; and
- receiving services brokered through community-based agencies (e.g., education, housing, substance abuse treatment).

♦► SB 618 PARTICIPANT FOLLOW-UP INTERVIEW

"Sometimes I get sidetracked and [the Community Roundtable helps] me keep my focus, by asking me to come back to what my goals are and knowing my history and my plans. They ask me how my behavior is contributing to my focus and goals. I did not have a good understanding how my behavior was not pertaining to my goals. They helped me with that and really care about me."

LESSONS LEARNED

The accomplishments and challenges experienced through the implementation of SB 618 have provided valuable lessons to guide others considering implementation of similar prisoner reentry programs.

What Has Worked Well?

- Program partners have remained committed to the original program design and worked diligently to resolve constraints due to policies and practices with long histories and budgetary constraints that grew more significant over the course of the evaluation. As a result, evidence-based practices were implemented (e.g., system of rewards for completing crucial "benchmarks").
- Since program inception, a culture of open communication has been fostered among program partners across agencies. Operational Procedures Committee were first convened meetinas November 2005 and have served as one for communication. meetings are regularly attended by key individuals to discuss issues, brainstorm solutions. and come possible agreement on the best course of action.
- Though in-prison programming has been reduced and case management caseloads increased, SB 618 continues to differ from treatment as usual. For example, needs are assessed in a timely manner; a life plan is developed with participant input to address assessed needs starting in prison; services are received in prison sooner; and support is provided from PCMs and CCMs, who are able to work with Parole to facilitate the referral process and complete service delivery upon a participant's reentry into the community.

- Another method of communication utilizes a Web-based data management system designed specifically for the local SB 618 program. With frequent input from program partners, the DA's Office Information Systems experts created a user-friendly database that captures data each participant on from screening/assessment through program exit. The database includes automation of the Life Plan to allow it to be updated online and shared among Prison Case Community Case Managers and facilitating timely Managers, communication between everyone working with each participant.
- As part of SB 618, assessments are conducted locally, beginning before a participant is transferred to the prison reception center. During program development, partners thoroughly discussed which assessments should be conducted and agreed that additional information would be useful regarding participants' substance use and vocational needs. The information gained from these assessments is used in the creation of each participant's Life Plan. As previously mentioned, the relatively high proportion of participants receiving services matching their overall needs also suggests the effectiveness of these assessments.
- prisoner Research on reentry has highlighted the beneficial role collaboration in the provision of services through partnerships across systems (La Vigne, Davies, Palmer, & Halberstadt, 2008). The primary method collaboration used in the SB 618 program involves incorporating interdisciplinary team approaches at two key points in a participant's progress, both of which have received positive feedback from participants. The first of these is the MDT meeting held prior to participants' sentencing to review eligibility and discuss

screening and assessment results. These meetings are staffed by a Probation Officer, CCM, PCM, and a prison classification counselor. The second of interdisciplinary forums, these the Community Roundtable, is convened on an ongoing basis from the participants' release to their exit from the program. The Parole Agent, CCM, participant, and individuals other significantly involved in the participant's reentry effort attend these meetings.

- Program processes realized during the course of the evaluation could ultimately lead to systems change. Specifically, the treatment group spends less time in the reception center, an area of the prison where offenders are housed together regardless of risk level and rehabilitative services are not available. Expansion of this practice could potentially improve opportunities for rehabilitative programming for all prisoners.
- Even though around one-third of eligible individuals declined services when offered the program at sentencing, those who did enroll were actively engaged in the program while in custody and upon release into the community. Those who refused services were less likely than the treatment group to have prior criminal involvement two years before being offered SB 618.
- SB 618 reduced factors shown in the literature to be linked to recidivism, including social supports, employment, and stable housing.
- Full treatment participants were less likely to be returned to prison. By stopping the revolving door to prison, SB 618 has the potential to help California reduce its prison population and lower the historically high rate of technical violations.

What Issues Remain?

Despite the diligence of program partners, SB 618 has not been consistently implemented as initially envisioned during the course of the evaluation. Some challenges and issues which have remained priorities and focus areas for the partners include the following.

- While program partners were successful in negotiating the end mental health screening duplication at RJD, medical screenings are delayed until entry into the prison reception center because CDCR's medical system is under federal jurisdiction and administered by a courtappointed medical receiver. As a result, the length of time participants spend in the reception center is longer than intended, reducing the portion of the sentence spent in areas of the prison open to rehabilitative services.
- Achieving full prison case management staffing at the Richard J. Donovan (RJD) Correctional Facility has been an on-going challenge throughout the evaluation period.
- Closures of in-prison programming particularly with respect to substance abuse programs and vocational training negatively impacted the match between services and needs, which is directly related to the ability of participants to prepare for clean and sober lifestyles and employment upon release from prison into the community.
- ▶ Continued policy changes may have an effect on SB 618, including the opening of a specialized Reentry Court in San Diego County and passage of SB 18, which created Non-Revocable Parole (NRP), a strategy to reduce prison overcrowding and Parole caseloads by releasing eligible inmates directly to the community rather than assigning them to a Parole Agent.

PRELIMINARY RECOMMENDATIONS

The following recommendations are based on the research findings and are offered for consideration as program partners continue to strategize regarding creative ways to address constraints for fully implementing the original program design.

- Program outcomes may improve if contacts with friends and family members were increased through more consistent implementation of the Community Roundtables study findinas (since indicated that these meetings were not held as often as planned). Research studies indicate that the support of family members is key to reducing recidivism by providing financial and emotional support (La Vigne, et al., 2008; La Vigne, Visher, & Castro, 2004). More specifically, quality and positive relations have been found to be more predictive of the development of strong social networks, leading to positive outcomes (Wolff and Draine, 2004).
- Since individuals with a history of parole violations were more likely to recidivate, identifying this group through the assessment process and focusing to an even greater degree on related needs may improve outcomes.
- Given the relatively high proportion of participants with previous substance abuse treatment, outcomes may be improved by more strategically addressing factors that led to relapse.
- Continued focus on cognitive-behavioral programming in prison may improve outcomes by helping participants replace anti-social associations and behaviors with pro-social ones before release into the community.
- Based on assessed needs, SB 618 services should continue to focus on vocational

- training, substance abuse treatment and gender-responsive services.
- Within the constraints of current caseload size, consideration of ways to emphasize frequent and constructive contacts with participants may maximize client motivation, improve the connection between referrals and needs, and ultimately outcomes.
- Feedback from participants indicated a need for more employment assistance specifically related to ex-offenders and the local job market. In light of the economic downturn over the past few years, program partners may want to continue and expand current efforts to conduct outreach with felon-friendly employers and explore vocations suitable to this population with more equitable wages.
- With about one out of three individuals refusing SB 618 services when offered at time of sentencing, program partners may want to examine if refusal rates vary by court branch to help determine the factors holding people back from getting needed reentry assistance.

SUMMARY

Based on the preliminary research findings in this fourth annual evaluation report, the SB 618 Prisoner Reentry Program in San Diego County has accomplished significant goals, despite bureaucratic and fiscal constraints beyond the control of program partners. While needs have been assessed, the ability of the program to provide services to meet these needs has been a challenge. As a result, positive outcomes have been limited. Specifically, program participants significantly less likely to commit a parole technical violation or be returned to prison for a new offense. The factors found to be most significantly related to success are engagement in community services (i.e., utilization of referrals provided by the CCMs) and acquiring stable housing.

A final evaluation report will be completed in fiscal year 2012 and will document how services are delivered and further assess program impact. As the treatment and comparison groups will have longer periods in the community following release from prison, more long-term outcome data will be available for a larger number of participants.

NEXT STEPS FOR EVALUATION

As the evaluation reaches completion over the next year, a more refined assessment of program impact will be provided through the following:

- A statistical method will be employed to match the study groups to ensure that research findings are not biased;
- A robust analysis will be conducted as a larger number of participants will be out of prison for a longer period of time; and
- A cost-effectiveness analysis will be conducted.

Chapter 1: Introduction and Project Overview

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CHAPTER 1

INTRODUCTION AND PROJECT OVERVIEW

INTRODUCTION

As historically high numbers of ex-offenders parole to California communities, the issue of reentry poses a significant problem to communities. In addition, there are concerns related to public safety, as many individuals return to custody in the immediate years following release. One of several efforts across California to reduce recidivism and increase the probability of successful reentry is Senate Bill (SB) 618. This law is based on the concept that providing tangible reentry support services will increase parolees' chances of successful reintegration into the community (i.e., successfully completing parole conditions and desistence to criminal behavior). The anticipated results are that parolees will become law-abiding and self-sufficient members of the community and public safety will be enhanced. This chapter describes this effort and relates it to the status of reentry in California and the United States at the time the SB 618 program was designed; sets forth what experts in the field know about both evidence-based and best practices¹ shown to be effective in reducing recidivism; briefly discusses the SB 618 legislation; and gives an overview of the content of this fourth annual report.

REENTRY IN HISTORICAL CONTEXT

It is helpful to understand both the social and political environments in which SB 618 was developed. Provided in this chapter is an historical context to the issue of reentry in the United States and California over the past 30 years, including why incarceration and recidivism rates increased so drastically, what issues are unique to California, and "what works" to reduce incarceration and recidivism.

Incarceration and Recidivism in California and the United States

During the 1980s and 1990s, the number of individuals under criminal justice supervision grew considerably. Specifically, between 1987 and 2007, the number of sentenced prisoners under the jurisdiction of state and federal correctional authorities across the United States increased from 585,084 to 1,596,127, a 173 percent increase. In 2008, the United States had the dubious distinction of having the highest rate (not absolute number) of incarceration in the world, with more than 2.3 million people (or one in every 100 adults) incarcerated at the federal, state, or local level (The Pew Center on the States, 2008). This trend was particularly evident in California, which by mid-year 2007 had surpassed Texas in having the highest number of adults under state or federal correctional jurisdiction, a pattern which held true by the end of 2008 (with 173,670 in California compared to 172,506 in Texas) (Sabol, West, & Cooper, 2009).

¹ Evidence-based practices are a subset of best practices which have been scientifically validated through research, whereas best practices are those that are generally regarded to be effective by professionals in a particular field (Jannetta, Elderbroom, Solomon, Cahill, Parthasarathy, & Burrell, 2009).

A rise in the number of individuals returning to prison, either because of committing a new offense or a technical violation while under parole supervision, drove the significant increase in prison population over the past 20 years. In one analysis (Langan & Levin, 2002) utilizing 1994 discharge data from prisons in 15 states (including California), the researchers found that within three years of release from prison, 68 percent were re-arrested for a new offense, 47 percent were re-convicted for a new crime, and 52 percent were back in prison serving time for a new sentence or a technical violation.

Reasons for California's Prison Population Growth

In California, where the majority of prisoners are placed under a Parole Agent's direct supervision through mandatory release (as opposed to discretionary supervision or unconditional release with no supervision), the range of interventions for parole violators may be more narrow than is desirable (as reflected by high parole revocation rates). For example, the percentage of parolees returning to prison in California grew from 25 percent in 1980 to 71 percent in 2000 (Little Hoover Commission, 2003) and around two-thirds of all prison commitments in California were returning parolees versus one-third nationally (Petersilia, 2006). Thus, while crime rates across California are considerably lower than they were decades earlier (Petersilia, 2006), jurisdictions are spending large amounts of money on a system that, in the long run, may not be in the best interest of public safety or the community in general.

In response to the debate over prison overcrowding and parole effectiveness, California legislators passed significant pieces of legislation, beginning with SB 618 in 2006, which, as described more fully later in this chapter, focuses on assessment and case management to reduce recidivism. Three other bills, which were enacted and are currently in effect, and which focus on addressing prisoner reentry are as follows:

- Senate Bill (SB) 1453 enacted in 2007 allows CDCR to discharge eligible offenders (non-serious and non-violent) from parole once they successfully complete 90 consecutive days of in-prison drug treatment followed by 150 consecutive days of residential drug treatment in the community.
- Assembly Bill (AB) 900 enacted in 2007 sets 13 "benchmarks" CDCR must reach by 2017 in order to receive over \$7 billion for the construction of additional prison and jail beds. As of this report, CDCR has completed 9 of the 13 benchmarks.
- Senate Bill (SB) 18 enacted in 2009 significantly amended the statute regulating the placement of offenders on parole supervision. Within these amendments, CDCR is authorized to place certain eligible inmates and parolees on "non-revocable parole" (NRP), which is defined by CDCR (2010a) as:
 - "...a form of unsupervised community release pursuant to the provisions of Penal Code section 3000.03, wherein the parolee is not subject to placement of a parole hold, revocation, or referral to the Board of Parole Hearings for violation of any condition of parole."

What Works to Reduce Recidivism

CDCR estimates that nearly all (95%) of its prisoners are eventually released to the community (CDCR, 2008) and many of them face a myriad of challenges to remaining crime-free. A large body of research evaluating reentry programs offers direction to programs such as SB 618 regarding strategies that are evidence-based (scientifically proven) and those generally accepted as "best practices" in the field to reduce recidivism. When San Diego stakeholders began envisioning the SB 618 program, they based its design on the literature and incorporated many of these proven strategies. The following section outlines the literature, which includes findings to serve as a resource for SB 618 program partners as service delivery continues to evolve.

Service Provision

Assessment of an individual's needs and risks helps guide service provision both in prison and in the community. The following section describes some of the most common needs faced by ex-offenders (i.e., substance abuse, medical, mental health, education, employment and debt management, and housing) and summarizes the field's understanding of evidence-based and best practices.

Substance Abuse

The surge in the national incarceration rate was partially due to nearly seven million Americans having drug dependence issues (Mumola & Karberg, 2006). For example, of those incarcerated in United States prisons in 2004, 17 percent were in custody for committing crimes to get money for drugs (Mumola & Karberg, 2006). It stands to reason then, that if the demand for drugs could be reduced through substance abuse treatment both in prison and after release, public safety could be improved, and prison overcrowding alleviated.

In California, more than half (53%) of all prisoners in 2004 reported having a substance use issue (Mumola & Karberg, 2006). Based on this rate, it can be estimated that more than

90,000 California prisoners may be dealing with drug dependence. However, despite research that has found that the greatest benefits are realized when prisoners participate in prison drug treatment and aftercare services upon release (Andrews, 2006; CDCR, 2007a; Field & Karacki, 1992; Lipton, 1995; Matthews, Hubbard, & Latessa. 2001; Rosenfeld, Petersilia, & Visher, 2008; Taxman & Spinner, 1997), individuals may not always receive the

Receiving drug treatment in custody and in the community is critical for successful reentry among drug-involved offenders.

treatment in prison they need. For example, in California's state prisons, only around 10 percent of inmates needing drug treatment receive it while incarcerated, due in large part to budget cuts and overcrowding (CDCR, no date).

The literature states that to implement evidence-based practices, supervision upon release from custody should be treatment-oriented rather than focused upon violation detection. For example, community-based drug treatment that includes drug testing should be provided with responses to noncompliance consisting of increased treatment rather than incarceration time (Aos, Miller, & Drake, 2006; Burke & Tonry, 2006; Gerstein, Datta, Ingels, Johnson, Rasinski, Schildhaus, Talley, Jordan, Phillips, Anderson, Condelli, & Collins, 1997; Rosenfeld et al.,

2008). While in-prison drug treatment may reduce recidivism to some degree, treatment after release (combined with work release, mental health treatment, and aftercare) is more effective (Butzin, O'Connell, Martin, & Inciardi, 2006).

Medical

Medical care inside California's prisons has been facing a crisis for years.² This issue became increasingly urgent as the number of prisoners reporting medical problems began to increase (Maruschak, 2008), overcrowding forced prisoners to share close quarters (thus placing them at greater risk for infectious diseases), and the aging prison population became more prone to health issues. In the words of CDCR Chief Deputy Secretary Scott Kernan, "Housing inmates in nontraditional quarters presents serious safety concerns for both inmates and correctional staff. The overcrowding of CDCR facilities has led to increased numbers [of] infectious disease outbreaks and riots and disturbances system-wide" (CDCR, 2010b). However, the California Prison Health Care Services (CPHCS) reports that there has been an 18 percent drop in prisoner deaths since 2006. They credit this drop in part to filling medical staff positions and creating a database to streamline the state prison's medical records system (Kelso, 2008).

Research shows that prisoners are at higher risk than the general population for physical health problems including chronic diseases such as hypertension and asthma (Davis, Nicosia, Overton, Miyashiro, Derose, Fain, Turner, Steinberg, & Williams, 2009; Hammett, Roberts, & Kennedy, 2001). As mentioned earlier, many prisoners have a history of substance abuse, which has been directly and indirectly linked to health problems such as cardiovascular disease and an increased risk for AIDS and hepatitis C (National Institute on Drug Abuse [NIDA], no date). Considering that the mortality rate for ex-offenders is 3.5 times higher than the general population (Binswanger, Stern, Deyo, Heagerty, Cheadle, Elmore, & Koepsell, 2007), prisons and jails are part of and not separate from communities, and nearly all prisoners will come home at some point, it is clear that providing adequate medical care both in and outside of prison is important to the safety and well-being of the ex-offender, as well as the community at large.

In terms of best practices, research suggests that providing a continuum of medical care from prison to parole is most desirable, including utilizing community-based health care providers in custody to expand service options and increase the probability of aftercare (Reentry Policy

Council, 2005). However, this ideal is not easily accomplished due in part to issues related to logistics (i.e., distance between prison and community care facilities, releasing prisoners at odd hours of the night when no immediate care is available) and to more systemic challenges (i.e., inability or unwillingness by prisons and/or community-based organizations to collaborate and

Best practices suggest building collaborative relationships between corrections and local medical facilities to conduct prerelease healthcare planning.

exchange information and a lack of funding/resources). However, a few states have successfully traversed these barriers, including Rhode Island (which established a model of collaboration between corrections and a local hospital using staff to begin discharge planning in prison and

² The California state prison medical system has been under federal jurisdiction since 2006 due to the state's inability to provide prisoners with a constitutional standard of medical care (CDCR, 2006).

serving as the releasee's community medical provider after release) and Massachusetts (where prisoners with serious medical concerns are linked to health care teams in their own ZIP Code with care by these teams beginning in prison and continuing post-release) (Hammett et al., 2001).

Mental Health

Mental illness often correlates to drug dependence and medical problems. For example, nearly three-quarters (74%) of all state prisoners in the United States with mental health issues also are coping with substance abuse. Across the United States, more than half (56%) of state prisoners had some type of mental health problem (as defined by having either a recent history or exhibiting symptoms of a mental illness), with the more common mental disorders being mania (43%), major depression (23%), and some form of psychosis (15%) (James & Glaze, 2006).

Mental health providers who serve prisoners face significant challenges in treating these individuals, including the propensity of mentally ill prisoners to develop exaggerated adaptive behaviors to help them adjust to life in prison (i.e., being overly reluctant to provide information to staff or exhibiting an extremely intimidating demeanor). These behaviors can sometimes be misconstrued as noncompliance or as further symptoms of mental illness (Rotter, McQuistion, Broner, & Steinbacher, 2005).

Challenges to treating mentally ill offenders continue after release due to numerous systemic barriers, including lack of housing options, lack of competitive salaries for competent and trained professional staff, and fragmentation among various service systems (e.g., health,

substance abuse treatment, and housing agencies), all of which impede effective engagement and treatment of ex-offenders coping with a mental health condition (Reentry Policy Council, 2005). According to best practices, the greatest improvements can be realized when service delivery is coordinated, clients are included in the design of service plans, service providers are culturally competent, and case management is provided to ensure medication compliance (Byrne, Taxman, & Young, 2002; Reentry Policy Council, 2005). Other promising strategies that

Best practices in reentry and mental health recommend coordination of services, case management, and allowing clients to provide input in the development of their service plan.

can be used include building a relationship based on trust, firmness, and fairness; emphasizing problem solving to foster compliance rather than authoritarian communication and threats of negative consequences; and engaging in cross-agency collaboration and team building with treatment providers (Prins & Draper, 2009).

▶ Education, Employment, and Debt Management

Research suggests that recidivism can be reduced when inmates participate in educational programs (Hill, 2008; Steurer, Smith, & Tracy, 2001), receive vocational training, and find gainful employment after release (Aos et al., 2006; Baer, Bhati, Brooks, Castro, La Vigne, Mallik-Kane, Naser, Osborne, Roman, Rossman, Solomon, Visher, & Winterfield, 2006; La Vigne, 2008). Having a job that pays a decent wage can reduce the likelihood of turning to crime for financial support and, at the same time, alleviate the considerable debt many offenders accumulate during incarceration (e.g., fines, restitution, public cost recovery assessments, and child support)

(Levingston & Turetsky, 2007). However, many prison vocational programs, which were dismantled in the 1980s and 1990s, have not been fully replaced and many in-custody opportunities do not prepare inmates for skilled, well-paying jobs after release (Bloom, 2006).

Many parolees struggle with low educational levels, spotty work experience and the reluctance by many employers to hire individuals with a felony record (Solomon, Johnson, Travis, & McBride, 2004), as well as atrophied work skills and disrupted social networks (contacts helpful

in finding employment (The PEW Charitable Trusts, 2010). Some options for addressing these barriers include having the judge set realistic orders and suspend debt obligations during incarceration; providing pre-release services that help offenders identify their debt and create payment plan strategies; making the hiring of ex-offenders more lucrative

Education and vocational programming are critical to prepare ex-offenders for gainful employment in the community.

to the private sector by offering tax credits and other financial incentives; and eliminating the practice of asking job candidates whether they have a criminal background until after they have been screened and deemed qualified based on their skills and experience (Johnson, Fletcher, & Farley, no date; Levingston & Turetsky, 2007).

Housing

The first thing a parolee must do upon release is find a place to stay. Based on what is known about parolees and their likelihood of struggling with addiction, coping with physical and mental health issues, and having limitations in terms of education and employment, it stands to reason that finding safe, stable, and independent housing poses one of their most pressing challenges. In addition, many parolees have strained relationships with family and loved ones who may not be willing to have the parolee return home (Travis et al., 2001). Besides these personal challenges, there are also external barriers that prevent parolees from finding secure

and affordable housing. For example, as more parolees are released with little or no formal parole supervision, due to more jurisdictions adopting non-revocable parole policies, they will not have access to parole agents who could provide needed referrals and resources to find stable housing (Mellow & Dickinson, 2006). In addition, federal laws may

Experts encourage reentry advocates to learn more about federal housing laws, which may not be as restrictive as commonly believed.

bar ex-offenders with certain drug offenses from public housing (Bishop, 2008). These federal laws may also serve to restrict family members who reside in public housing from allowing an ex-offender to live in the home. Housing and Urban Development's (HUD) definition of homelessness (i.e., those who were homeless prior to incarceration or who were incarcerated for 30 days or less) prevents many parolees from qualifying for various homeless services (La Vigne, Solomon, Beckman, & Dedel, 2006). According to the National Housing Law Project, the intent of these federal rules and regulations may not be as restrictive as widely believed, allowing for case-by-case basis review. Reentry case managers are encouraged to learn more about the laws to be more effective in securing housing for ex-inmates. Another recommendation is for stakeholders to collaborate at the local level to influence the planning process for low-income housing development to ensure the inclusion of reasonable admission policies or "set aside" units for people with criminal records and their families (Bishop, 2008).

Strategies and Services

Release Strategies

According to the 2008 Stanford Executive Sessions on Sentencing and Corrections, the first 72 hours after an individual's release from prison is a critical time during which corrections and service providers should synchronize efforts to prevent common pitfalls associated with reentry

(Ball, Weisberg, & Dansky, 2008). As such, these experts acknowledge that while CDCR is limited as to the location of release (i.e., the transportation hub nearest the prison), they encourage CDCR to improve a parolee's chances for

The first 72 hours following prison release are critical to ensuring successful reentry.

success by adjusting the time of release to occur during daytime hours when service providers' offices are open and staffed, public transportation is most readily available, and it is most convenient for family and friends who are waiting for the parolee's arrival (Ball et al., 2008).

Intervention Services

Research provides examples of evidence-based and best practice approaches to delivering services that address ex-offenders' identified needs and maximize positive results. That is, interventions that encompass the following principles may be more successful than those that do not.

Evidence-Based Practices

- » Interventions should be highly structured, involving multiple treatment components that are skill-oriented (e.g., development of social, academic, and employment skills) (Matthews et al., 2001; Sherman, Gottfredson, MacKenzie, Eck, Reuter, & Bushway, 1997). Specifically, the focus should be on criminogenic needs (i.e., crime-producing factors) (Andrews, 2006).
- » Cognitive-behavioral therapy (CBT) has been found to have a larger impact on reducing recidivism than other treatment modalities, on average by 27 percent (Gaes, Flanagan, Motiuk, & Stewart, 1999; Lipsey & Landenberger, 2006). CBT programs are recommended to
 - help inmates replace anti-social associations and behaviors with pro-social ones by reinforcing clearly identified overt behavior. These programs should include structured social learning that teaches new skills while consistently reinforcing pro-social behaviors and attitudes; programs that address

Changing ex-offenders' cognitive processes is key to reducing recidivism.

- values, choice of peers, substance abuse, and anger; and family-based interventions that train families on appropriate behavioral techniques (Andrews, 2006; Aos et al., 2006; Latessa, no date; Lowenkamp & Latessa, 2005; Matthews et al., 2001; Reentry Policy Council, 2005; Sherman et al., 1997).
- Services outlined in the plan should be matched with learning style, motivation, aptitude, and needs identified through assessment (Andrews, 2006; Byrne, et al., 2002; Gendreau, 1996; Latessa, no date; Lowenkamp & Latessa, 2005; Lowenkamp, Latessa, & Holsinger, 2006; Matthews et al., 2001; Reentry Policy Council, 2005; Rosenfeld et al., 2008; Sherman et al., 1997).

- Cultural and gender compatibility between staff and the target population are important in order to facilitate cultural sensitivity and gender responsiveness (Campbell, 2005; Gendreau, 1996). To adequately meet the needs of female offenders and increase their chance for successful reentry, gender-specific programming should be provided acknowledging that the needs of female offenders are different than their male counterparts. Key components should include providing a safe environment and fostering dignity and respect, while addressing substance abuse, trauma, mental health, socioeconomic, and family reunification issues (Bloom, et al, 2003; Sydney, 2005).
- » Contact between program participants and staff should be frequent and interpersonally sensitive, as well as constructive to maximize client motivation and ensure services delivered are appropriate to the individual's risks and needs (Gendreau, 1996; Matthews et al., 2001; Sherman et al., 1997).
- » Program participation should be cultivated through positive reinforcement/incentives, with a structured hierarchy of sanctions for noncompliance that includes a 4:1 ratio of rewards to punishments; punishments that are meted out swiftly and consistently; and a process in which punishments are followed by instruction on pro-social alternatives (Gendreau, 1996; Byrne et al., 2002; Matthews et al., 2001; Reentry Policy Council, 2005; The Pew Center on the States, 2007).

Best Practices

- » To ensure program compliance, clients' trust can be cultivated by including them in the formation of their service plan, applying rules consistently without bias, acknowledging participants' rights, treating participants with dignity and respect, communicating honestly, and considering participants' concerns in program delivery (Campbell, 2005).
- » Informal social supports (e.g., family members, society, and peer groups) should be engaged in the pre-release decision-making process to ensure a seamless transition into a crime-free living environment (Backer, Guerra, Hesselbein, Lasker, & Petersilia, 2005; Burke & Tonry, 2006; Byrne et al., 2002; Matthews et al., 2001; Petersilia, 2007; Reentry Policy Council, 2005).

Research suggests that how services are provided is just as important as the type of intervention used.

- Relapse prevention strategies should be incorporated, including planned and rehearsed prosocial responses to situations potentially resulting in relapse; anticipation of problem scenarios; practice of new pro-social behaviors; reinforcement of pro-social behavior by significant others; and availability of support following program completion to refresh prosocial responses when needed (Gendreau, 1996).
- » For low-risk offenders, reentry plans should focus on returning individuals to the environments that made them low risk (Lowenkamp & Latessa, 2004). That is, strategies should build upon previously existing social supports and employment.

» With more than half (53%) of the nation's inmates being the parent of at least one minor child, correctional agencies should incorporate cross-systems reentry planning for imprisoned parents who will be reuniting with their child(ren) after release. These systems would include substance abuse and mental health treatment providers, as well as family and dependency courts (Glaze & Maruschak, 2008; Nickel, Garland, & Kane, 2009).

Staffing and Collaborative Partners

Finally, programs designed with components proven to effectively address reentry may still not succeed if issues related to unsuccessful partnerships and poor staffing exist. To reach the goal of reducing recidivism by improving the reentry process, partners must collaborate to develop a system of continuous care. With respect to these issues, the field offers the following practical guidelines.

Smooth collaboration and adequate staffing are critical to a program's success.

- **»** Objectives and goals should be concrete, attainable, related to community needs, and shared by all partners (Backer et al., 2005).
- » Membership in the partnership should be clearly defined and include an appropriate crosssection of the community of those directly affected (e.g., families of offenders, faith-based organizations, and victim advocacy groups). All members of the partnership should have the necessary skills and knowledge to participate in the collaboration (Backer et al., 2005) and be involved in all levels of implementation (e.g., policy development, operational practice, and staff decision-making) (Byrne et al., 2002).
- **»** The ideal partnership should be based on mutual respect, trust, understanding, ability to compromise, flexibility, adaptability, clear leadership, and frequent, open communication that utilizes both formal and informal methods (Backer et al., 2005).
- » A full-time project director should provide strong leadership; and there should be detailed plans regarding frequency of meetings, agendas, decision-making processes, and responsibilities (Byrne et al., 2002).
- >> There should be sufficient resources and a favorable political/social climate (Backer et al., 2005; Byrne et al., 2002).
- » Barriers to reentry that exist in the community should be identified, and support should be solicited from decision-makers who can advocate for far-reaching change and draft policies that eliminate or minimize roadblocks to parolees trying to make their way on the outside (Johnson, et al., no date).
- **»** Staff recruitment, hiring, performance reviews, and professional development all should focus on the skills and motivation necessary to deliver services and match the needs of the target population (Matthews et al., 2001; Gendreau, 1996).
- Staff should have at least an undergraduate degree or equivalent training in theories, prediction, and treatment of criminal behavior. Three to six months of formal and on-the-job/internship training should be provided in applying behavioral interventions (Gendreau, 1996).

SB 618 LEGISLATION

In response to California's high rate of recidivism and prison overcrowding, the San Diego County District Attorney's (DA) Office authored the SB 618 legislation in 2005. The bill was successfully steered through the legislature by State Senator Jackie Speier (D-San Francisco/San Mateo), passed into law in October 2005, and became effective January 1, 2006³. This bill is based on the concept that providing tangible reentry support services will increase parolees' reintegration into the community. It allowed for the possibility of three California counties to implement a program, and San Diego County was the first authorized to create a multi-agency plan and develop policies and programs to educate and rehabilitate nonviolent felony offenders. As part of this plan, male offenders sentenced to the Richard J. Donovan (RJD) Correctional Facility⁴ and female offenders sentenced to the California Institution for Women (CIW)⁵ would be eligible for the program. As of this report, there has been no expansion of the program outside of San Diego County; however, three other California counties (Napa, Riverside, and San Bernardino) have expressed interest in replicating the San Diego SB 618 model and have met with program partners and key staff to ask questions regarding the design and implementation processes and observe various components of the program.

Key Program Components

SB 618 was designed according to evidence-based and best practices identified through research in the field of prisoner reentry, and the program exceeds treatment as usual in several tangible ways. (See Chapter 3 for more detail on the differences between services received by SB 618 participants

and those not enrolled in the program.) For example, research finds that wrap-around services are most effective when provided through a team process consisting of shared goals, objectives, and strategies for monitoring results based on successes (Walker, 2008). The SB 618 program has incorporated these evidence-based and best practices learned from national models (Table 1.1) by providing case management services to facilitate participants' successful reintegration into their family and community. This level of care begins with the administration of several

SB 618 relies on evidencebased and best practices, including pre-sentencing assessment, multidisciplinary input into service plans, and ongoing case management from prison to the community.

standardized screenings and assessments prior to entering the prison reception center⁶ to identify primary needs. Program staff discusses participant eligibility based on the results from these screenings and assessments during weekly Multi-Disciplinary Team meetings (MDT). Level of risk and need are identified during the MDT to begin development of the participant's Life Plan which maps out the most appropriate services to ensure the participant's success. Services are facilitated by a

³ A copy of the legislation, as well as other SB 618 program documents can be accessed at http://www.sdcda.org/office/sb618/sb618-program-overview.pdf.

⁴ RJD is located approximately 24 miles south of downtown San Diego. According to CDCR statistics accessed on September 16, 2010, RJD had a total population of 4,470 and a design capacity of 2,200.

⁵ CIW is the nearest women's facility, located approximately 90 miles northeast of downtown San Diego in Riverside County. According to CDCR statistics accessed on September 16, 2010, CIW had a total population of 2,348 and a design capacity of 1,386.

⁶ All arriving prisoners are processed at one of CDCR's 14 reception centers where they are screened before being assigned to one of the state's 33 prisons. Both RJD and CIW have a reception center within their facilities. See Chapter 4 for data regarding average time spent in the reception center for all prisoners, as well as for SB 618 participants.

designated Prison Case Manager (PCM) and continue throughout the duration of participants' prison sentence. The PCM meets regularly with participants to ensure expedited access to programs (educational, vocational, and substance abuse treatment). The frequency of meetings between participants and PCMs varies throughout the prison term, similar to an hourglass, with fewer in the middle of the participant's sentence compared to more frequent meetings upon prison entry and six months prior to release.⁷

To prepare participants for reentry, the Community Case Manager (CCM) conducts an intake assessment at the prison, reviews the participants' Life Plan (a formal and dynamic document that charts their needs and progress from assessment to program completion), and discusses steps for transitioning to the outside world. CCMs meet regularly with participants in their final months of incarceration to maintain a high level of motivation and adjust reentry plans as needed. In addition, PCMs and CCMs meet as needed to discuss programming and staffing issues and troubleshoot resolutions. This process also involves the Parole Agent to ensure a smoother reentry transition for participants. Once released, participants continue to receive consistent care from the CCM, Reentry Employment Coordinator (REC), and Community Roundtable (comprised of the participant, CCM, Parole Agent, REC, and other individuals deemed useful to successful reentry like a family member, friend, or sponsor).

Table 1.1 SB 618 PROGRAM RELIES ON BOTH EVIDENCE-BASED AND BEST PRACTICES

Program starts at signing of letter of intent (at readiness conference when plea is taken)

Ongoing needs assessment conducted

A multidisciplinary team approach is utilized

Life Plan is created with input from the participant and builds on identified strengths

PCM and CCM provide advocacy and brokerage, both in prison and after release in the community

Custody time is focused on rehabilitation

Services are tailored to meet identified needs and risks

Services include drug treatment, vocational training, and education

Physical and mental health needs are addressed⁸

Intensive case management during the first 72 hours after release from prison with emphasis on ensuring stable housing

Treatment-oriented service provision continues after release from custody

Emphasis is placed on high-quality staff contact with participants as frequently as needed

Life Plan evolves with input from participants and individuals involved in their successful reentry

Staff roles are clearly defined and collaboration and community are emphasized

Services are gender responsive and culturally competent

SOURCE: SANDAG SB 618 Fourth Annual Evaluation Report

⁷ In addition to one-on-one meetings, CIW holds monthly PCM-led group meetings with all SB 618 participants to provide an opportunity to share information regarding the program and obtain updates on the progress of participants who have paroled into the community.

While offenders with mental health issues can be accepted into the SB 618 program, these offenders are often housed in prison where SB 618 services are not available. In the community, SB 618 links offenders to behavioral health services providers as needed.

ORGANIZATION OF THE REPORT

This chapter begins the report by putting the issue of prisoner reentry in historical context and provides a review of the literature outlining evidence-based and best practices found most effective in reducing recidivism. Chapter 2 discusses the research methodology used in both the process and impact evaluation and lists all research questions. Chapter 3 contains a full description of the original SB 618 program design, followed by each component's respective modifications and their impact, if any. Data collected and analyzed for the process evaluation are described in Chapter 4, including a description of members of both the treatment and comparison groups; assessment results; and dosage and intensity of services received in prison and the community. Chapters 5, 6, and 7 discuss results from the outcome evaluation, including what impact the program may have had on participant behavior and improving desistance to crime (Chapter 5); what social impact the program had on participants' lives (Chapter 6); and the level of participant satisfaction with each component of the program (Chapter 7). Chapter 8 summarizes key findings in the report, offers conclusions based on these results, and enumerates lessons learned to date and gives recommendations for program partner consideration. Previous reports include findings from surveys conducted with program partners and key staff which described their point of view about program design and implementation. The information from these surveys was of interest to the program while finalizing implementation goals.

SUMMARY

The San Diego County District Attorney's Office sponsored and drafted SB 618, which was signed into law in October 2005 and became effective January 2006. This legislation was designed to facilitate an ex-offender's successful reentry from prison to the community to prevent recidivism. While prison overcrowding continues to be an issue and more offenders are released into the community, the effectiveness of SB 618 remains of interest to policymakers as they strive to protect public safety. This chapter outlined the historical context for the design and implementation of SB 618, provided examples of evidence-based and best practices upon which the program was designed, and described the organization of this fourth annual report.

Chapter 2: Evaluation Methodology

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CHAPTER 2

EVALUATION METHODOLOGY

INTRODUCTION

The California Department of Corrections and Rehabilitation (CDCR) believes that a formal evaluation of the SB 618 program is warranted to show other interested parties how the program was designed, implemented, and whether or not it worked for participants. Discussions were held throughout 2006 with various researchers to provide expertise in developing a research design and offer insights into best practices learned from other jurisdictions. The Criminal Justice Research Division of the San Diego Association of Governments (SANDAG) was a regular participant at these early meetings and, in September 2006, was selected to conduct the independent process and impact evaluation.

SANDAG has a rich 30-year history serving as the Clearinghouse for crime data analysis for the San Diego region. Over the years, SANDAG has conducted various reentry-related research studies with a variety of populations (e.g., programs for adults, juveniles, and mentally ill offenders); collaborated with the San Diego County District Attorney's Office on the Reentry Mapping Network, part of a cross-site project managed by the Urban Institute and funded by the Annie E. Casey Foundation; and served as an active member of the San Diego Reentry Roundtable, since its inception in 2003.

The results from the process and impact evaluation² provide valid and reliable information to inform program staff and policymakers regarding what works to better meet the needs of non-violent ex-offenders returning to San Diego County. The research team also is documenting how limited resources can best be used in the interest of public safety. This chapter describes the methodology for the process and impact evaluation, including research questions, data sources and measures, and analysis plans.

RESEARCH OVERVIEW

The goals of the process evaluation are to describe program implementation and service delivery in order to highlight any systemic changes necessary to achieve this type of collaborative effort, as well as to determine if the program was implemented as designed. The goals of the impact evaluation are to determine if the program reduced recidivism (i.e., being returned to prison for a parole violation or new felony conviction) or resulted in other positive outcomes, as well as if it was cost effective. Multiple methodologies are being used to determine if the program is "producing

¹ The Reentry Roundtable is a local collaborative comprised of approximately 200 community members, private and governmental agencies, and formerly incarcerated individuals. Meeting monthly, the Reentry Roundtable serves as a forum to share information, discuss ways to provide integrated services, review existing policies and procedures, and recommend necessary changes.

² SANDAG's research protocol was developed with input from the California Department of Corrections and Rehabilitation's (CDCR) Office of Research.

the desired results... generating the greatest possible impact... and making the most efficient use of public funds" (Reentry Policy Council, 2005). The use of multiple methodologies addresses inherent weaknesses that would exist if only one method were relied upon (e.g., self-report, historical, etc.). As part of this impact evaluation, a research design³ was used which involved comparing 347 participants who received SB 618 services to 367 offenders who did not. Because random assignment to conditions was not possible (as discussed later in this chapter), the two groups were statistically compared for balance on characteristics related to recidivism.

PROCESS EVALUATION

The purpose of the process evaluation is to determine if the program was implemented as planned based on the underlying theories of offender reentry; measure what systemic changes occurred; examine the extent to which the program built effective partnerships between criminal justice, behavioral health, and social services systems; and assess program operations (e.g., staffing and participants served). This information provides a basis for program improvements and facilitates replication. Since this reentry program is the first SB 618 demonstration site in California, this analysis is essential as the program may be expanded to other jurisdictions. In addition, the process evaluation identifies any problems occurring during implementation, the source of these problems, and potential solutions.

Research Questions

Specifically, the process evaluation has two primary areas of focus: program implementation/management and service delivery. The research questions investigated in each area are as follows.⁴

Program Implementation/Management

1. Was the program implemented as designed? What modifications were made and why?

Service Delivery

- 1. How many offenders were screened for eligibility, and how many were found to be eligible? What was the program participation refusal rate?
- 2. What were the characteristics of eligible participants, including level of criminal involvement?
- 3. What was participants' level of need at program entry?
- 4. Did timing decrease in terms of identifying participant needs and providing appropriate services (i.e., time normally spent at reception centers)?

³ In order to protect the rights and welfare of the individuals under study, the research protocol for this project has been reviewed and approved by a local, nonprofit, independent Institutional Review Board (IRB).

⁴ During the first three years of the evaluation, additional research questions were investigated and reported in the annual reports. For the results from this portion of the study, see Mulmat, Doroski, Howard, Correia, Keaton, Rohanna, & Burke (May 2010). Other research questions were of interest (e.g., length of time to placement in in-prison programs); however, reliable data were not available from CDCR.

- 5. What types of services were provided to participants in prison? What was the dosage/intensity? Did the services relate to the participants' needs identified during assessment? If not, why?
- 6. What services were participants referred to after release? Which post-release services were accessed? What was the dosage/intensity? Did these services relate to the needs identified during assessment? If not, why?
- 7. How many participants completed the program? What was the average length of participant participation, and what participant characteristics were associated with completion? What was the program attrition rate in prison? For what reasons? What was the attrition rate upon release and during parole? For what reasons?

Data Sources and Measures

The following presents each data source, the measures included, and the research questions addressed for the process evaluation.

Meeting Attendance and Review of Meeting Minutes

Minutes from Operational Procedures Committee meetings are reviewed to document the progress of SB 618 implementation, as well as programmatic changes and issues. This qualitative information provides a context for data collected as part of the process evaluation. Additionally, these meetings allow the research team to meet with SB 618 staff on a regular basis, with the frequency increasing as needed to ensure reliable ongoing communication. These meetings also provide an opportunity for research staff to ask questions, obtain other qualitative information, share evaluation findings, and address any concerns related to the evaluation. Using content analysis, notes and minutes from these meetings are reviewed to break down the information into manageable categories in order to examine trends and patterns that reveal representation at the meetings, implementation issues, challenges, solutions developed, and other elements critical to program success. This information is used primarily to address the program implementation/management question.

Data Collection from Paper and Electronic Records

In order to answer service delivery questions 1 through 7, official records regarding each participant are being examined. As part of the development of the SB 618 program, a comprehensive database was designed by the Information Technology staff at the District Attorney's (DA's) Office with input from all program partners. Through weekly downloads from a firewall-protected server, this database provides the numbers of eligible participants, program refusal rate, demographic information, and dates used to measure timing of services. Regarding timing of services, the following variables are compiled from the SB 618 database: date of SB 618 offer/readiness hearing, date of exclusion, and date of program completion. Date of reception center entry and date of transfer to general prison population are obtained from electronic data maintained by CDCR in order to assess the length of time in the reception center. The length of time to SB 618 exclusion is examined for treatment cases as an additional illustration of the program implementation process.

The weekly availability of the data allows research staff to notice and capture missing data early in the process, providing an opportunity to request missing information from program staff in a timely manner.

Services documented by the Prison Case Manager (PCM)⁵ and the Community Case Manager (CCM)⁶ for the treatment group are collected from paper files by the research team in collaboration with program staff. Starting in 2010, information regarding these services is provided through the data files extracted weekly from the SB 618 database previously mentioned (September 2010 for services delivered by CCMs and December 2010 for PCM services).

Review and Analysis of Intake Assessments and Reassessments

As part of the evaluation, the research team is analyzing data collected for program purposes through the standardized assessment process (Table 2.1). All assessment information is obtained through the weekly data files extracted from the SB 618 database. Details regarding the assessed needs of participants are used to address study questions 3, 5, and 6 regarding service delivery. The assessments conducted as part of this process are described in Chapter 3.

Table 2.1
AVAILABILITY OF ASSESSMENT DATA

Addiction Severity Index (ASI)	Treatment group upon program entry and 30 days after prison release
Comprehensive Adult Student Assessment System (CASAS)	Treatment group upon program entry
Correctional Offender Management Profiling for Alternative Sanctions (COMPAS)	Treatment group upon program entry
Occupational Information Network (O*NET) & Myers-Briggs Type Indicator® (MBTI)	Treatment group upon program entry
Test for Adult Basic Education (TABE)	Treatment group upon program entry

SOURCE: SANDAG SB 618 Fourth Annual Evaluation Report

Follow-Up Interviews with Participants

As part of the research design, SB 618 treatment participants complete an Informed Consent prior to being involved in research activities. The consent asks for their willingness to participate in follow-up interviews 6 and 12 months after their release from prison. As an incentive to participate in these interviews, participants are offered a \$20 gift card to a local retail establishment. To ensure that research staff members are able to successfully locate the maximum number of participants for follow-up,⁷ detailed contact information (street addresses, telephone numbers, e-mail addresses, etc.) are obtained regularly from the CCM and directly from the individual (at the time of consent)

⁵ Dosage/intensity for Prison Case Management services is available for contacts only.

Oosage/intensity of community services is available for Community Case Management contacts and Community Roundtable meetings only.

⁷ A sample size of 256, which is approximately 80 percent of the treatment group, was selected to ensure that basic univariate statistics will be available for analysis throughout the 12-month follow-up, while also taking into consideration attrition rates, the overall project budget, and other tasks to be accomplished.

using a participant locator form. It is not uncommon with this population for contact information to change between program intake and prison release. In order to ensure accurate and up-to-date contact information, the research team conducts a quality control process for each form two weeks prior to prison release. If it is determined that there is not adequate contact information, the PCM is notified so that additional information can be obtained from the participant prior to release. As the interview date approaches (6 and 12 months following prison release), the research team uses this information in order to contact the participant. If these leads result in "dead ends," the CCM is contacted for updated information. In addition, a reminder postcard from the research team is given to participants by the CCM prior to the interview date so that they will anticipate and be prepared for the call from the research team. Further, numerous contact attempts are made to participants during weekdays, weeknights, and weekends.

All participants in the treatment group are selected for follow-up to maximize the number of follow-up interviews completed. Questions relevant to the process evaluation that are on the follow-up interview include opinions about services received through the SB 618 program, relationship with staff members, and service responsivity. These qualitative data address program implementation question 4 and service delivery question 6.

Analysis Plan

This process evaluation is based on data collected through follow-up interviews with the treatment group, intake assessments/reassessments, official records, and meeting minutes. Specifically, the process evaluation describes the theoretical framework, resources required and available, program components, sequence of activities, relationships between activities, and desired results. The purpose is to facilitate discussion and improve implementation through clarifying the connection between resources, program activities, and desired outcomes, as well as highlighting any necessary course corrections. The program description is modified as adjustments are made to the overall design. Further, the process evaluation validates this description to determine if service delivery goals are met with respect to reaching the intended population. In addition, the process evaluation follows best practices from the field using evaluation guidelines created by the Reentry Policy Council (2005), as well as standardized tools for assessing the program's consistency with the accepted principles of correctional intervention (e.g., the National Criminal Justice Treatment Practices Survey by Taxman, Young, & Fletcher [2007]).

With respect to content analysis, emergent coding is used in which categories are developed as the meeting minutes are reviewed. This system ensures that no themes or issues are overlooked. Participant characteristics are examined using frequency distributions and cross-tabulations. When comparisons can be made (i.e., to the comparison group), difference of means tests for ratio level data (e.g., time in prison reception center) and Chi-square statistics for nominal measurement (e.g., level of parole supervision) are used to determine if differences are significant. Significant differences are determined using the .05 significance level. That is, there is a 95 percent chance that the differences between the two groups are true for the entire population.

⁸ Participants are typically assigned to medium-level parole supervision (i.e., controlled supervision). It is not uncommon for individuals within this level of supervision to become a parolee at large (PAL), meaning that they cannot be located.

IMPACT EVALUATION

The purpose of the impact evaluation is to determine whether participation in SB 618 improved reintegration and reduced recidivism (i.e., increased desistance) and to identify the conditions under which the program was most likely to accomplish these goals. Additionally, the impact evaluation will determine whether the reentry program was cost effective relative to traditional release procedures. To determine what effect the program had on participants, the following impact evaluation questions are being investigated:

Research Questions

- 1. Were there any improvements in program participant needs over time?
- 2. Was recidivism (being returned to prison for a parole violation or new felony conviction) reduced among the treatment group relative to the comparison group? Did participants have fewer parole violations post-release?
- 3. What improvements were made in participants' family and/or social bonds following release from prison?
- 4. Did participants make improvements in other areas of their life? Did the participants create or resume healthy attachments to outside social institutions post-release (e.g., employment, substance abuse services, medication management, housing, support groups, and spiritual)?
- 5. What was the participants' level of satisfaction with services received?
- 6. What factors are associated with desistance from crime?
- 7. Was the program cost effective?

Data Sources and Measures

Review and Analysis of Intake Assessments and Reassessments

The assessments conducted by program staff help explain the needs of this population and answer the process evaluation questions previously described, and are used to understand change in need over time. These changes are assessed for the treatment group only and are based on the ASI. This information is used to answer impact evaluation questions 1 and 3.

Data Collection from Paper and Electronic Records

As previously described, electronic data are maintained by program staff through the SB 618 database. This database and other electronic sources are being used to answer questions 2, 6, and 7 for the impact evaluation. Data related to services received during incarceration are being collected from the PCM files for the treatment group. Details regarding parole violations for those who have been released from prison in both study groups are obtained from CDCR parole electronic files. In order to monitor the criminal history and recidivism rates (i.e., desistance) of individuals in both study groups, contact with the criminal justice system prior to and following selection for the evaluation is being collected from a variety of sources. The Automated Regional Justice Information System (ARJIS) (a computer system for information sharing among local justice agencies) is the source for arrest information, and the DA's computer system is the source for conviction and sentencing information. Booking information (i.e., another arrest measure) and local custody time are obtained from the Sheriff's computer system, while time in State prison is provided by CDCR.

Follow-Up Interviews with Treatment Participants

This research method was previously described in the process evaluation section. For the impact evaluation, the questions asked on the follow-up interview with the treatment group focus on current living situation, employment status, recent substance use, opinions about SB 618 in retrospect, and future prospects. These qualitative data will be utilized to provide another aspect to the effect of the program on participants that would otherwise be unavailable and will address impact evaluation questions 3, 4, and 5.

Cost Measures

A key component of this project is determining if the additional costs related to implementing and managing the SB 618 program are justified in terms of reduced recidivism. To answer question 7, the research team is working with the program partners to compile the justice system information required to estimate the cost per successful offender for both SB 618 participants and non-participants, including costs for arrest, court processing, confinement, and parole supervision, as well as costs associated with program delivery. This analysis will be conducted at the end of the study when all individuals in the treatment and comparison groups have been out of prison for the total follow-up period.

Research Design

To determine if SB 618 resulted in improved service delivery and reduced recidivism (or increased desistance), it is necessary to ask, "Compared to what?" For the current evaluation, four possible research designs were proposed. First, a true experimental, randomized design was proposed in which all eligible candidates who met program criteria and agreed to participate in this project would be randomly assigned to receive SB 618 services (the treatment group) or to receive "treatment as usual" (the comparison group). This research design would have been the strongest by ensuring that both study groups were equivalent starting out. In addition, if demand for the program was greater than capacity, it would have been more equitable; however, because this design requires flexibility that was not feasible in the number of assessments done per week

(because every eligible person should be able to be in either study group and staffing levels permitted only six assessments per week), an experimental design was not possible.

A second design option, pseudo-random assignment, also was proposed that would have entailed SANDAG's preparing random assignment procedures for a certain number of participants per week (10 for example) based on a pipeline study (which would track how many offenders were eligible each week); however, this design option also required more flexibility than was possible given staffing constraints. That is, workload did not allow for catch-up in one week for a smaller number of cases in a previous week.

A third option, a quasi-experimental research design aimed at preventing selection bias, was proposed in which the first six eligible candidates each week who met program criteria and agreed to participate would be assigned to receive SB 618 treatment services (the treatment group). The remaining participants who were deemed eligible and also agreed to participate, but were not enrolled in the program because of lack of space (e.g., first six slots that week were already filled), would be placed into the comparison group to receive "treatment as usual." However, due to concerns from program staff that it was not ethical to ask people to participate in a program in which they do not have a chance of actually participating, it also was not an option.

Given these constraints, the only practical option was a quasi-experimental, nonequivalent study group design with possible selection bias. As such, the first six eligible participants per week willing to participate after July 1, 2007, were assigned to the treatment group. This date was chosen to allow sufficient time for the program to become fully operational. The comparison group consists of individuals who have been eligible since the program began (February 2007), but were never asked if they would have participated. Those offered the program but who declined to participate since February 2007 also are tracked. Study group selection continued until at least 320 individuals were assigned to the treatment and comparison groups.⁹

Since this research design does not include random assignment, individuals in the treatment group may differ systematically from those in the comparison group, potentially biasing the results of the impact evaluation (i.e., it is unknown if the comparison group would volunteer for the program if it were offered). In an effort to account for this self-selection bias, the research team and SB 618 program partners met to discuss variables to use in a propensity score matching model. In order to have a valid propensity score matching model, variables that are related to why someone chose to participate (or not to participate) in the program need to be included. Ideally, the research team could solicit input directly from individuals declining to participate in the program, which is not feasible due to logistical and budgetary issues. The research team and SB 618 program partners discussed if there were any patterns (e.g., demographic, criminal history, or other) that influenced why someone chose to participate in the program or not. This discussion did not reveal any measurable factors influencing whether someone chose the program or not. Meeting attendees felt

⁹ This sample size was based on a power analysis, using a conservative measure of recidivism (50%) and a 20 percent estimated variance between the two study groups in recidivism (based on meta-analysis by Andrews, Zinger, Hoge, Bonta, Gendreau, and Cullen [1990] as summarized by Gendreau [1996]). Using a .05 threshold for significance (the alpha level), it is anticipated that 80 percent power will be achieved with the 320 target sample size each for the treatment and comparison groups. Statistical power is the probability one can detect a meaningful difference if one truly exists. This sample size will enable comparisons between the study groups (i.e., two sample tests), as well as examinations of changes over time to the treatment group only (i.e., pre-post, single sample tests).

that participants and non-participants (i.e., individuals declining SB 618 services) did not systematically differ on demographic or criminal history characteristics; however, they did speculate that the one factor potentially influencing whether someone participates or not could be their criminal system knowledge. This "system sophistication" would be hard to measure and could not be captured in a single variable. The group discussed possible proxy variables, but it was determined that there were not any that could be reliably documented. Prior criminal history was determined to be an inadequate measure because a large number of prior criminal offenses could be reflective of a drug addiction (e.g., property crimes to fund drug purchases) or an entrenched thief. Furthermore, the meeting attendees felt that program participants (or non-participants) were basing their participation choices on short-term reasons (i.e., what benefits they get in prison rather than after prison), suggesting that any unidentified self-selection bias may not be directly related to recidivism. For example, participants are not choosing the program because they want to make sure they do not re-offend in the future, but rather because they can receive benefits in prison that make their stay better. In addition to this process, the research team searched the literature for information regarding predictors of volunteerism related to criminal justice programs with similar results.

While the literature review and group discussion did not produce any measurable factors related to "volunteerism," potential bias will be minimized using propensity score matching to match similar cases between the two study groups and to remove dissimilar cases from the analysis. The groups will be matched on the California Static Risk Assessment (CSRA) score¹⁰ and ethnicity. Gender and age were already included in the CSRA model. The CSRA was developed as a tool to predict the risk of re-offending. It models a score by combining age at release, gender, and counts of prior felony and misdemeanor convictions by type. Matching on this score, as well as ethnicity, helps to balance the two groups in their propensity to re-offend (Rosenfeld, Petersilia, & Visher, 2008). These two matched study groups were used in the descriptive and regression analysis.

Study Group Assignment Methods

This participatory program evaluation involves data collection by practitioners, as well as the research team. The responsibilities of program staff begin at study group selection. Cases are screened for SB 618 eligibility on an ongoing basis until the treatment group slots have been filled each week. Anyone identified as eligible after that point is added to the comparison group (i.e., the "not offered" group). That is, as additional eligible cases cross the desk of the deputy district attorney (DDA) assigned to the program, they are put in the comparison group. The intention was to complete this process in a standardized manner so that the pool from which these cases were pulled could be described; however, the system of processing non-violent felony cases is not centralized and there is no way to know all potential cases eligible for SB 618 until data have been entered into the DA's Case Management System (CMS). To identify a larger number of cases for inclusion in the comparison group, a list of non-violent felony cases prosecuted in the Central and East County Divisions of the DA's office was compiled quarterly from CMS. This list includes cases meeting the following criteria described in Chapter 3:

¹⁰ The CSRA is an actuarial risk prediction tool using available automated data (including age and gender) developed for CDCR by Susan Turner at the University of California, Irvine.

¹¹ Any participants deemed ineligible through the assessment process during the same week are replaced with another individual.

EVALUATION METHODOLOGY

- assigned to the Central or East County districts of the DA's Office;
- not assigned to the following special divisions within the DA's Office: Gangs, Sex Crimes, Family Protection, Cold Case, or Special Operations;
- » readiness hearing date between March 2007 and November 2008;
- >> non-violent current offense as defined by Penal Code 667.5(c);
- » not diverted to drug treatment;¹²
- » sentence length of 8 to 72 months; and
- » not sentenced to life in prison or death.

Each case file in this group is individually screened by the DDA assigned to SB 618 based on the following criteria:

- in custody throughout judicial process;
- >> legal residence in San Diego County;
- » no prior convictions of great bodily injury or murder;
- prior violent felony convictions (defined by Penal Code 667.5(c)) over five years old are screened on a case-by-case basis;
- agree to a stipulated sentence;
- >> time to serve of no more than 36 months and no less than 4 months:
- » no mental health or medical holds;
- no holds by another jurisdiction;
- » no immigration holds;
- no arson registrants; and
- » no sex offender registrants.

All cases previously assigned to the program (i.e., signed the Letter of Intent) are kept in the treatment group.¹³ The remaining cases meeting these criteria are added to the comparison group (i.e., the "not offered" group). Cases not meeting any one of these criteria are put in the ineligible group and not tracked as part of the evaluation. The selection process is shown in Figure 2.1.

Variables available for the treatment group only (e.g., assessments) will be examined using a single-group, pre-test/post-test design (i.e., comparison of measures before and after program participation). The wide variety of measures used in this evaluation includes measures addressing many of the guidelines articulated by the Reentry Policy Council (2005). Specifically, some measures are linked to the goals of SB 618 (e.g., return to prison rates to examine the impact on recidivism) and some are specific to the program partners involved (e.g., ASI to examine the effectiveness of substance abuse services). Participant satisfaction also is measured.

¹² Proposition 36 and PC 1000 are the two types of drug diversion in California.

¹³ Upon prison entry, participants may be excluded from the program due to housing issues (e.g., HIV positive status for male participants), a previous history of maximum security housing (i.e., Level IV) in prison, prison gang affiliation, and extensive psychiatric needs and/or physical disabilities that preclude housing in areas of the prison eligible for SB 618 services.

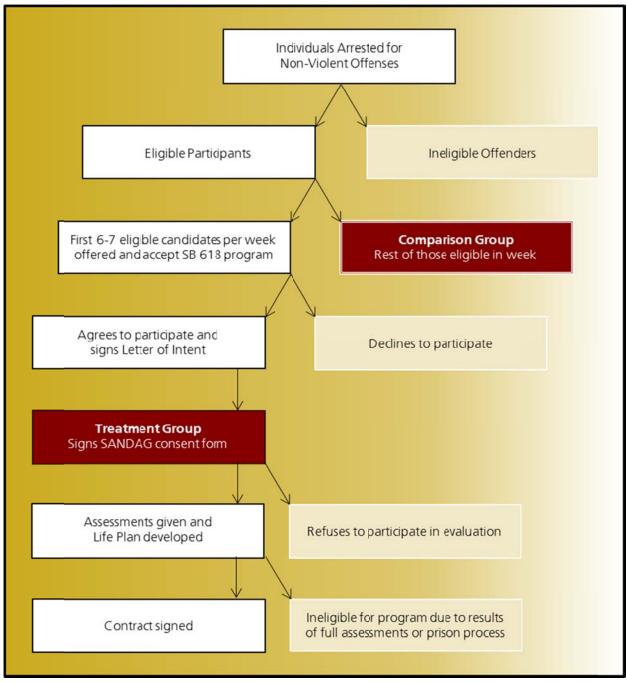


Figure 2.1 STUDY GROUP IDENTIFICATION PROCESS

SOURCE: SANDAG SB 618 Fourth Annual Evaluation Report

Analysis Plan

Comparability of Groups

While discussions between research staff and SB 618 partners suggested that there were no measurable volunteerism differences between the two groups, it was prudent to also check differences related to recidivism. The groups, including those that declined as a third group, were compared on the CSRA scores, categorized into risk levels. The treatment and refusal groups were similar on these scores, as were the treatment and comparison groups. Ethnicity comparisons showed a slightly higher proportion of Whites in the treatment group. The final report will use propensity score matching to adjust for this difference.

Recidivism

The overriding goal of SB 618 is to reduce recidivism. Therefore, using the study groups previously described, the first objective of the impact evaluation is to determine the effectiveness of the reentry program relative to traditional procedures in reducing recidivism (i.e., release from prison to parole with no reentry services) and to identify the factors of participants' success or failure. To measure program effectiveness, the treatment group will be contrasted to the comparison group using multiple measures of recidivism/desistance/relapse and a variety of analytical techniques. The dependent variables and statistical analyses planned are presented in Table 2.2.

While the SB 618 program seeks to reduce return-to-prison rates, the additional measures of recidivism/desistance/relapse listed in Table 2.2 are included in this evaluation in order to provide a more complete picture of the impact of SB 618 on offender behavior, as has been advocated in the literature since there is no "universally accepted measure" (Jannetta, Elderbroom, Solomon, Cahill, Parthasarathy, & Burrell, 2009). This information will be obtained from official records (i.e., arrest records and court records). All criminal activity will be collected in six-month intervals to facilitate reporting of intermediate results rather than waiting until cases have been in the community for three years, as well as to ensure that prior criminal history is comparable to post-release behavior.

Table 2.2
DEPENDENT VARIABLES AND STATISTICAL ANALYSES

Variable	Comparison	Significance Test
Parole violation (PV)*	Means (proportions)	t-test
■ Type of PV	Cross-tabulation	Chi-square
Number of PVs	Means	t-test
Days from release to PV	Means	t-test
Arrest for misdemeanor*	Means (proportions)	t-test
 Type of misdemeanor arrest 	Cross-tabulation	Chi-square
Number of new misdemeanor arrests	Means	t-test
Days from release to misdemeanor arrest	Means	t-test
Arrest for felony*	Means (proportions)	t-test
Type of felony arrest	Cross-tabulation	Chi-square
Number of new felony arrests	Means	t-test
Days from release to new felony arrest	Means	t-test
Arrest for new felony drug crime*	Means (proportions)	t-test
Arrest for new violent felony*	Means (proportions)	t-test
Number of arrests without convictions	Means	t-test
Misdemeanor conviction*	Means (proportions)	t-test
Felony conviction*	Means (proportions)	t-test
Prison term for new offense*	Means (proportions)	t-test
Time in jail (days)	Means	t-test
Time in prison (days)	Means	t-test
Parole length (days)	Means	t-test

^{*} yes = 1 / no = 0

SOURCE: SANDAG SB 618 Fourth Annual Evaluation Report

As the first step in isolating the effect of participation in SB 618, the following variables will be examined relative to recidivism using the statistics noted to identify correlations:

- age (means with t-tests);
- race/ethnicity (cross-tabulations with Chi-square statistic);
- y gender (cross-tabulations with Chi-square statistic);
- >> employment status (cross-tabulations with Chi-square statistic);
- » living arrangements (cross-tabulations with Chi-square statistic);
- » prior criminal history (cross-tabulations with Chi-square statistic and means with t-tests);
- » history of substance abuse (cross-tabulations with Chi-square statistic); and
- ASI assessment scores over time (intake versus program exit) (means with t-tests).

These bivariate comparisons will be followed with multivariate analysis (i.e., regression) in an attempt to isolate factors predictive of success. There are two goals of this regression analysis: 1) to determine which factors are predictive of success and 2) to control for other factors that might account for recidivism differences in an attempt to isolate the impact of the SB 618 program in San Diego (i.e., whether SB 618 contributes to reduced recidivism or increased desistance from criminal activity). The type of regression analysis will depend upon the nature of the dependent variable. Logistic regression will be used to analyze the dichotomous dependent variables (i.e., yes/no), and ordinary least squares (OLS) regression will be used to analyze the interval level variables (e.g., days to first arrest post-release). The previously mentioned variables will be controlled for in the regression analysis in order to build a model of factors related to success and to determine if SB 618 participation lowers recidivism and improves desistance.

One factor that logistic regression does not handle well is time. Therefore, Cox Regression survival analysis will be used to examine the impact of time on recidivism/desistance. The number of days until relapse or recidivism ("time to failure") is the focus of this analysis. The advantage of survival analysis is that recidivism during the beginning of the evaluation period is treated differently than behavior at the end.

Using these techniques, it will be determined whether program participants have significantly lower levels of recidivism (or higher levels of desistance) than offenders in the comparison group and if program participants recidivate at a slower rate than offenders in the comparison group. Finally, the factors that predict recidivism among program participants will be identified. This final analysis will determine the types of offenders most likely to benefit from the SB 618 program and quantify the specific benefits of program participation.

Risk Reduction

Another indicator of the SB 618 program's success is a reduction in the number and type of risk factors for recidivism, such as unemployment, homelessness, lack of education or vocational opportunities, and weak connections with family members and support groups. Therefore, the second objective of the impact evaluation is to determine whether the program was effective in reducing risk factors for recidivism. To measure this relationship, a single-sample, pre-test/post-test design is used because this information is not available for the comparison group. The social circumstances for the treatment group will be assessed using the previously mentioned analytical techniques measuring improvement (e.g., Chi-square statistics, difference of means tests, and measures of effect size). The dependent variables will include:

- stable housing (yes/no);
- length of time (in days) to stable housing;
- » new employment (yes/no);
- >> length of time employed (in months); and
- » changes in ASI scores over time.

Similar to the process evaluation, the .05 threshold of significance will be used.

Cost-Effectiveness Analysis

The purpose of the cost-effectiveness analysis is to determine if the SB 618 program is a worthy investment for the taxpayers by weighing the program costs against the benefits (i.e., individuals not recidivating) relative to the traditional approach with no services specifically designed to address reentry issues. Cost-effectiveness analysis is often used when the monetary amount of the benefit would be the same for both the treatment and comparison groups. For example, in this case, the cost offset (the amount saved) from an individual not re-offending would likely be the same regardless of which group they were in.

The costs will be based on the "taxpayer" perspective, which means it will take into account only the costs incurred by local and state government. Treatment (assessment and services) and criminal justice costs (incarceration, including prison, probation, parole, arrests, and convictions) will be collected and analyzed as part of the cost-effectiveness analysis. 14 The cost-effectiveness analysis will measure the monetary cost differences between the treatment and comparison groups. Benefits will be measured based on successful cases (those not recidivating, measured as not returning to prison) within 18 months of release from prison. Previous analysis will determine the recidivism differences between the study groups. The cost-effectiveness will build upon this analysis by comparing cost per successful case (i.e., those not recidivating). This efficiency measure will help inform whether SB 618 is having the expected recidivism impact compared to the cost of providing the program. This cost will be calculated by dividing total cost by total number of successful cases (previous analysis checked for statistically significant differences). Sensitivity analysis also will be conducted, which varies key assumptions to test if the results are robust. The following impact measures will be examined: costs to the County, costs to the State, and average cost per successful individual (not recidivating) for both study groups. Table 2.3 summarizes the cost-effectiveness analysis plan. The end result will be an estimate of the benefit returned for each dollar spent on the SB 618 program to ensure efficient allocation and expenditure of funds.

¹⁴ Start-up costs will be excluded from this study because they are not appropriate to add without also adding the start-up costs for the current system. Additionally, start-up costs were not part of the Public Entity Agreement and were minimal since local agencies used existing resources.

Table 2.3
SB 618 COST-EFFECTIVENESS ANALYSIS

Group	Costs (\$)	Benefits (Cases)	Impact Measures	
TREATMENT Initial arrest and conviction	▶ Initial arrest and conviction	▶ Individuals not re-offending	Costs to County	
GROUP	▶ Reception center time within 18 months of release	▶ Reception center time Within 18 months of release	within 18 months of release	Costs to State
	► SB 618 assessments		Average cost per	
	► SB 618 services (in prison and in community)		successful case	
	Incarceration			
	▶ Parole			
COMPARISON GROUP	▶ Initial arrest and conviction	 Individuals not re-offending within 18 months of release 	▶ Costs to County	
	▶ Reception center time		▶ Costs to State	
	Other services received in prison		Average cost per successful case	
	Incarceration			
	▶ Parole			

SOURCE: SANDAG SB 618 Fourth Annual Evaluation Report

SUMMARY

The Criminal Justice Research Division of SANDAG is conducting a process and impact evaluation of the San Diego SB 618 program. As described in this chapter, this participatory evaluation involves a variety of methods, including: meeting attendance; review of meeting minutes; examination of participant characteristics, assessments, and service delivery; collection of recidivism data; follow-up interviews with SB 618 participants; and cost-effectiveness analysis. The information gleaned through this ongoing evaluation will help policymakers refine the SB 618 program in response to funding fluctuations and eventual program expansion both locally and statewide.

Chapter 3:

Process Evaluation: Program Design and Modifications

CHAPTER TOPICS

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CHAPTER 3

PROCESS EVALUATION: PROGRAM DESIGN AND MODIFICATIONS

INTRODUCTION

The purpose of the process evaluation is to determine whether the SB 618 program was implemented as planned and highlight any modifications to the design. These analyses add context to the impact evaluation's findings, provide a basis for program improvements, and facilitate replication for other jurisdictions interested in implementing the program. This chapter describes the original design of the SB 618 program and addresses the following questions: "Was research the program implemented as designed? What modifications were made, if any, and why?" The chapter also seeks to describe what impact, if any, these modifications had on SB 618 implementation.

The discussion about SB 618 program modifications must first be put into context regarding the fiscal recession that hit California over the past few years. Facing a \$19.1 billion budget shortfall in Fiscal Year (FY) 2009-2010, California legislators turned to California Department of Corrections and Rehabilitation's (CDCR) budget (comprising 6.9% of the state's

MAJOR FINDINGS

- » The ability to implement SB 618 as planned is hampered due to significant budgetary and bureaucratic constraints, which resulted in reductions in prison programming, staffing, and increased caseloads for PCMs and CCMs.
- » Despite constraints, many best practices appear to have been implemented and new components were incorporated, including a system of rewards for participants who complete crucial program "benchmarks".
- » After years of persistent effort, program partners were successful in ending the duplication of mental health screenings at RJD, thereby utilizing limited resources more effectively.

General Fund) for cost-saving measures. As a result, CDCR's budget was trimmed by \$1.9 billion between FY 2008-2009 and FY 2010-2011, including cutting the SB 618 budget 27 percent in FY 2009-2010 and by an additional 16 percent in FY 2010-11. These funding cuts challenged the SB 618 program partners to find creative ways of providing services with fewer dollars; as a result, the program has faced reductions in prison programs, staffing, and post-release services. This chapter describes how the program was originally designed by the program partners, modifications that resulted from unavoidable constraints, and the many enhancements made to the program with the hope of continuing to provide services based on evidence-based and best practices.

PROGRAM DESIGN, SERVICES COMPARED TO "TREATMENT AS USUAL", AND MODIFICATIONS AND THEIR IMPACT

To facilitate reentry into the community following a prison sentence and to reduce recidivism, SB 618 provides a variety of services not otherwise available to offenders. Table 3.1 outlines the differences between services available to SB 618 participants and those receiving "treatment as usual" within the prison and parole systems. All prisoners complete a pre-sentence interview with Probation, have access to prison services, are eligible for parole supervision, and can access community services. This chapter describes the enhanced services provided by SB 618 beyond the traditional roles of probation, prison, and parole.

Table 3.1
SB 618 SERVICES COMPARED TO "TREATMENT AS USUAL"

	SB 618	Treatment as Usual
Prior to Entering Prison		as Osuai
Pre-sentencing interview with Probation	•	•
Screening and assessment	•	
Individualized Life Plan	•	
MDT meeting	•	
In Prison		
Prison case management	•	
Expedited entry into prison services	•	
Access to all prison services	•	
Vocational assessment in prison	•	
Post-Release		
Community case management	•	
Parole supervision	•	•
Vocational services	•	
Community Roundtable	•	
Access to community services	•	•

SOURCE: SANDAG SB 618 Fourth Annual Evaluation Report

Program Partners

One of the many positive aspects of the SB 618 program is the unprecedented collaboration between local and state agencies. In December 2005, stakeholder meetings were coordinated by the San Diego County District Attorney's (DA) Office and representatives from CDCR to begin the task of developing a forward-thinking, evidence-based and best practices approach to reentry. Since that

time, a core group of program partners – referred to as the Operational Procedures Committee – has met regularly to design, implement, and tailor the program and confront issues and challenges as they arise. In June 2006, the local SB 618 leadership submitted its multi-agency plan to the San Diego County Board of

Multiagency collaboration is included in the design and implementation of the local SB 618 program.

Supervisors, which unanimously approved it, paving the way for full implementation. Table 3.2 shows all of the SB 618 program partners and their function(s) within the program, including the DA's Office; Public Defender's Office; Defense Bar; Sheriff's Department; Probation Department; CDCR (Division of Community Partnerships, both prisons, and Parole); Grossmont Union High School District; and the University of California, San Diego, Department of Psychiatry, Center for Criminality and Addiction Research, Training and Application (UCSD); and AmeriCorps*VISTA (Volunteers in Service to America).

Modifications to Program Partnerships

The program experienced reductions in the number of program partnerships over the past four years. A significant change to the composition of the program partners occurred in July 2009, when budget cuts eliminated two key positions created by CDCR Department of Community Partnerships, namely the SB 618 Program Manager and the Assistant Program Manager (a position created in the second year of the program). The Program Manager played a key role in developing the SB 618 program from the ground up, while

While some staff
positions were lost due
to budget cuts, program
partners have been
diligent in maintaining
effective leadership and
service delivery.

the Assistant Program Manager represented the Program Manager in his absence and served as a liaison between the local agencies and CDCR when bureaucratic challenges arose. To mitigate the loss of these individuals' leadership, a representative from the DA's office and the Probation Department took over the duties of meeting with CDCR leaders in Sacramento to advocate for the program and provide a consistent leadership presence at Operational Procedures Committee meetings.

The original program design included a contract with Comprehensive Training Systems, Inc. (CTS), a community-based organization specializing in employment readiness services. CTS conducted the vocational assessments in prison and provided an array of post-release services to participants seeking assistance with employment, education, and vocational skills. Due to budget cuts, the program partners terminated CTS's contract in October 2009 and transferred a portion of these functions to UCSD's CCM program. This staffing and program modification is discussed in more detail later in this chapter.

Table 3.2 CURRENT PROGRAM PARTNERS AND THEIR SB 618 FUNCTION

CDCR - Division of Community Partnerships

Cooperates with staff from the DA's Office and Probation Department to provide leadership and oversee program activities.

San Diego County District Attorney's Office

Authored SB 618 legislation; coordinates committees to implement the program; provides leadership; pre-screens cases for eligibility; coordinates court process to facilitate program entry; developed and maintains SB 618 database; tracks new crimes committed by participants while still in program; supervises AmeriCorps*VISTA volunteers who provide services related to capacity building and sustainability (voucher process, SB 618 manual development, and meeting support).

San Diego County Public Defender's Office

Facilitates resolution to legal issues unrelated to the current case and potentially impacting reentry.

San Diego County Defense Bar

Confirms offenders' eligibility and willingness to participate.

San Diego County Sheriff's Department

Administrator of local jail facilities; transports participants from jail to prison; conducts dental, mental health, and educational screenings.

San Diego County Probation Department

Serves as the local SB 618 fiscal agent; provides leadership; conducts pre-sentencing interviews utilizing Motivational Interviewing techniques; administers the Correctional Offender Management Profiling for Alternative Sanctions (COMPAS)* and the Addiction Severity Index (ASI)*; coordinates and staffs the multidisciplinary team (MDT) meetings; and produces the Life Plan.

CDCR - Richard J. Donovan (RJD)

Prison for male offenders; conducts medical screenings; endorses all prisoners for housing status; provides prison case management and rehabilitative programs; administers the Test for Adult Basic Education (TABE)*; conducts pre-sentencing interviews and participates in the MDT.

CDCR - California Institution for Women (CIW)

Prison for female offenders; conducts medical screenings; endorses prisoners for housing status; provides prison case management and rehabilitative programs; administers the TABE*; conducts pre-sentencing interviews and participates in the MDT.

CDCR - Parole

Supervises participants post release; participates in the Community Roundtable; collaborates closely with the CCM to coordinate community services for participant.

Grossmont Union High School District

Correctional education services subcontractor with the Sheriff's Department; administers the TABE and Comprehensive Adult Student Assessment System (CASAS)*.

University of California, San Diego (UCSD)

Subcontractor providing community case management; prepares participant, family, and community for reentry; participates in the MDT and Community Roundtable; serves as SB 618 training coordinator; conducts vocational assessments (O*NET and Myers-Briggs Type Indicator*) in prison, employment referrals and outreach post-release.

SOURCE: SANDAG SB 618 Fourth Annual Evaluation Report

^{*} All standardized assessments are discussed in detail in Table 3.3.

Program partners have been able to create new partnerships and have shown diligence to ensure a broad spectrum of wrap-around services are provided in order to adhere to best practices. Over the past four years, program partners have negotiated working relationships with several local, state, and federal agencies, including the San Diego County Department of Child Support Services, California Department of Motor Vehicles, Veterans' Affairs, Social Security Administration, San Diego Workforce Partnerships, and Job Works, as well as a private consumer credit counseling organization. Additionally, partners entered into Memoranda of Understanding (MOUs) with the California Department of Rehabilitation (DOR),¹ the Urban Corps of San Diego,² and the Employment Development Department (EDD).³

Eligibility and Exclusion Criteria

All SB 618 participants are culled from the DA's felony prosecution caseload⁴ and all serve their prison sentences at either RJD or CIW. The opportunity to voluntarily enroll in the program is offered to both male and female nonviolent offenders. To be considered for the program, the candidate must be in local custody, a legal resident of San Diego County, and have previously agreed (or "stipulated") to a prison sentence of 8 to 72 months. Individuals with prior convictions for great bodily injury or murder are excluded, as are arson and sex offender registrants. Offenders with a violent conviction over five years old are evaluated on a case-by-case basis. Other eligibility criteria center around classification issues allowing a participant to serve time at either of the two prison facilities noted above. This is further discussed in the following section. The program is not offered after sentencing and participation in the SB 618 program does not affect the individual's prison sentence in any way.⁵

Modifications to Eligibility and Exclusion Process

Although the criteria dictating eligibility for the SB 618 program remained unchanged over the past four years, modifications have been made to processes that affected whether a participant would be retained in the program or excluded. For example, in August 2007, the program partners were

successful in reaching agreement with CDCR to allow inmates with mental health issues to be endorsed to prison housing where they could participate in the program and still receive treatment for their mental health needs. Additionally, as of April 2010, a new policy at RJD was implemented to improve population movement but which resulted in excluding participants with certain medical conditions. Specifically, inmates with relatively non-serious medical conditions, such as asthma, hypertension, and diabetes, had been previously endorsed to be housed in the Minimum

Although SB 618 eligibility criteria have not changed over the past four years, RJD imposed recent changes which resulted in a higher number of participants being excluded from the program due to medical reasons.

Security Facility (MSF). CDCR amended their policy to require inmates with these medical conditions to be housed in a higher-security unit because it provided a greater range of medical care than the

¹ The California DOR dedicates one vocational counselor to assist participants with employment resources.

² CCMs developed a working relationship with Urban Corps by providing referrals and sharing client information to assist Urban Corps staff with enrolling participants in programs.

³ The EDD certifies UCSD staff to process paperwork for Work Opportunity Tax Credit eligibility.

⁴ The DA prosecutes all felony and misdemeanor offenses occurring within the County of San Diego, with the exception of misdemeanors in the cities of San Diego and Poway.

⁵ Information regarding program eligibility can be found on-line at http://www.sdcda.org/office/sb618/sb618-Eligibility.pdf.

MSF, and medical devices (e.g., needles and inhalers) were capable of being used for nefarious purposes inside prison, therefore warranting a higher level of security to monitor inmates. These new criteria negatively impacted the flow of enrolling six participants each week and using resources unnecessarily by conducting services (e.g., assessments, MDT meetings, Life Plan development) prior to exclusion in prison.

Participant Enrollment Process

In the first four months of the program (February to May 2007), all potential participants were obtained from the San Diego Superior Court's Downtown branch, the largest of the County's four courts.⁶ As written in the Public Entity Agreement, the program began accepting up to six participants per week and focused on one courthouse in order to facilitate program start-up.

Modifications to Enrollment Process

In May 2007, the program expanded to the Superior Court East County branch in the City of El Cajon and increased enrollment to seven per week to make up for smaller than expected numbers during start—up. This increase, while only one per week, placed a strain on Probation and Sheriff's Department staff; and in January 2008 at the request of the Probation Department and with the agreement of all program partners, the number of participant enrollments was returned to six per week. This decision was in response to Probation's staffing constraints and the fact that the program's initial low numbers had been offset by the eight months of increased intake. While the program partners remain committed to eventually expanding the SB 618 program to the other two County courthouses (North County and South Bay) and providing the program to all eligible offenders, these plans have yet to be finalized due to budget constraints.

Screening and Assessment

Screening and assessment of all SB 618 participants prior to service delivery is one of the evidence-based practices included in the original program design. Program partners recognize the importance of accurately identifying risks and needs prior to creating a service plan and enrolling

participants in prison programs. A cursory screening of candidates is conducted by a trained Deputy District Attorney (DDA) in order to identify individuals who are potentially eligible based on type of current offense, criminal history, and stipulated prison sentence of 8 to 72 months. After defendants decide to plead guilty and agree to the stipulated sentence, they express their agreement to participate by signing a Letter of Intent (LOI) and Release of

SB 618 adheres to evidencebased practices by conducting a series of screenings and assessments prior to service delivery.

Information Waiver at the time the court takes the change of plea.⁷ At this point, a sentencing date is set for at least 20 court days from the date of the plea, during which time more formal screenings and assessments are conducted by the Sheriff's Department, Probation, and CDCR classification

⁶ A detailed diagram outlining how individuals are identified, screened, and enrolled in SB 618 can be found at http://www.sdcda.org/office/sb618/sb618-program-overview.pdf.

⁷ The Letter of Intent and Release of Information Waiver can be found at http://www.sdcda.org/office/sb618/sb618-Eligibility.pdf.

staff.⁸ Specifically, within 14 days of court referral, four standardized assessments are conducted to determine the level of risk of recidivism and the need for substance abuse treatment and other criminogenic needs, including life skills, basic education, and literacy training. The next section and Table 3.3 summarize the timing of these assessments, some of which go beyond what is traditionally completed when offenders are sentenced to prison. Along with the assessments, a probation officer conducts a thorough, pre-sentencing interview with participants to explore the facets of their criminal and personal history. At the sentencing hearing, the participant's defense attorney speaks directly with the participant to explain the sentencing terms, provide a general overview of SB 618 services, and ask the participant to sign the contract⁹ between themselves and the program indicating what is expected of both the participant and the program throughout SB 618 participation.

The following information provides details of the assessments utilized for the SB 618 program (also shown in Table 3.3) which demonstrates the program partners' efforts to broaden the assessment of criminogenic risk factors.

- Medical/Dental/Mental Health Screenings: The program's original design included the Sheriff's Department conducting screenings for medical, dental, and mental health issues in order to bypass lengthy stays in the reception center and streamline participants' entry into prison programming. However, as a result of lawsuits filed on behalf of California state prisoners, CDCR's medical system is under federal jurisdiction and administered by a court-appointed medical receiver. Consequently, medical screenings have never been conducted by the Sheriff, but rather upon entry in the prison reception center.
- Addiction Severity Index (ASI):¹⁰ The ASI is used to measure individual needs and improvements related to substance abuse, mental health, and trauma-related issues for SB 618 participants. The tool is administered by the Probation Department prior to imprisonment. This tool is not part of the traditional prison assessment process. Therefore, this assessment goes beyond treatment as usual.
- Comprehensive Adult Student Assessment System (CASAS):¹¹ Educational issues and life skills are assessed through a contract between the Sheriff's Department and the Grossmont Union High School District. This assessment goes beyond basic math and reading skills examined by the TABE (described below) to include listening, writing, and speaking skills. The CASAS also is used in the prison with inmates who have completed 15 hours of instruction.

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⁸ CDCR classification staff screens all prisoners to determine appropriate housing placement. For example, RJD does not accept offenders who are confined to a wheelchair because the prison is not equipped to meet these special needs. CIW is able to accommodate these special needs for females.

⁹ The Contract can be found on-line at http://www.sdcda.org/office/sb618/sb618-Eligibility.pdf.

¹⁰ Numerous studies have verified the validity and reliability of the ASI with different populations (Alterman, Brown, Zaballero, & McKay, 1994; Hendricks, Kaplan, Van Limbeek, & Geerlings, 1989; Hodgins & El-Guebaly, 1992; Kosten, Rounsaville, & Kleber, 1983; Leonhard, Mulvey, Gastfriend, & Schwartz, 2000; Stöffelmayr, Mavis, & Kasim, 1994), including prisoners (Amoureus, van den Hurk, Breteler, & Schippers, 1994) and the homeless (Joyner, Wright, & Devine, 1996; Zanis, McLellan, Cnaan, & Randall, 1994).

¹¹ According to the CASAS Web site (www.casas.org), the reliability and validity of the tool have been verified through "rigorous statistical procedures." SB 618 uses the CASAS 85R level C Reading Life and Work.

- ▶ Correctional Offender Management Profiling for Alternative Sanctions (COMPAS):¹²
 The COMPAS assesses criminogenic risk and needs and is administered one-on-one to SB 618 participants by Probation prior to sentencing.
- ▶ Test for Adult Basic Education (TABE): ¹³ The TABE examines level of education and is administered with participants while in local jail by the Grossmont Union High School District. In the prison reception center, educational staff conducts the reading portion of the TABE to inmates in groups to determine reading level. Once an inmate enters the general population, staff conducts the full battery TABE as a pre-test. For inmates participating in educational classes, staff administers subsequent TABEs every six months to any prisoner with an initial score of 9.0 or lower (indicating a ninth grade reading level).
- ▶ Vocational Assessments: Participants receive assessments for vocational aptitudes, interests, and abilities using the Occupational Information Network (O*NET) and Myers-Briggs Type Indicator® (MBTI) tools after prison entry. As with the ASI, vocational assessments are only available to SB 618 participants and go beyond treatment as usual.

Modifications to Screening and Assessment

» Mental Health Screening

CDCR recognized the Sheriff's mental health screening until August 2009, when the CDCR Regional Chief of Mental Health (responsible for overseeing quality assurance of mental health screening of male inmates) requested that this screening be duplicated upon an inmate's arrival at RJD's reception center. However, the program partners remained committed to minimizing the amount of time participants spent in reception center and made numerous requests to CDCR to honor the local mental health screenings. As a result of their diligence, the Regional Chief agreed that the duplication was not necessary and, as of August 2010, agreed to use the information from the local screenings.

» ASI and COMPAS

As originally designed, the program called for the pre/post administration of the ASI and COMPAS to allow for a comparative analysis between scores. UCSD's CCMs conducted the ASI 30 days after release and again at 12 months after release; and they administered a post- COMPAS at program exit. Due directly to budget cuts and subsequent CCM staffing reductions in October 2010, UCSD and program partners agreed to stop conducting the mid- and post-ASI and post-COMPAS assessments to allow CCMs more time to concentrate on their increased caseload. While these real world constraints are unavoidable, the lack of post data for these assessments will affect the

Northpointe Institute for Public Management, Inc. (the company that designed the COMPAS) indicates that all risk factor items were developed using standard factor analytic and psychometric procedures. In addition, validation studies have been conducted across the nation supporting the predictive and construct validity and generalizability of COMPAS (Austin & McGinnis, 2004; Farabee, Zhang, Roberts, & Yang, 2010), including across gender and race/ethnicity (Brennan, Dieterich, & Ehret, 2009). However, one study has found variation across racial/ethnic groups (Fass, Heilbrun, DeMatteo, & Fretz, 2008).

¹³ The TABE is a nationally-named test of adult basic education developed by CTB/McGraw-Hill. SB618 uses the TABE form 9.

evaluation's analysis of any change in participant need over time that could otherwise be useful to the program in making adjustments to service delivery.

» Vocational Assessments

Finally, there were modifications regarding the administration of the vocational assessments as a result of the termination of CTS's contract in October 2009 when UCSD assumed the role of conducting vocational assessments in prison. Although the program continued to use the same four assessment tools, UCSD decided to improve the process and administer the assessments five months prior to release, rather than 180 days after entry into prison as originally designed. The reasoning behind this change was to wait until participants enrolled in or completed prison vocational programs and had time to reflect on their vocational needs and aspirations. Chapter 6 of this report describes whether participants who found employment after release were able to enter vocations that matched their assessed abilities and interests.

Table 3.3
ASSESSMENT TIMING

Assessment	Pre	Mid	Post
Medical/Dental/Mental Health	Pre-MDT	None	None
ASI	Pre-MDT	None	None
CASAS	Pre-MDT	None	None
COMPAS	Pre-MDT	None	None
TABE	Pre-MDT	In prison	Every 6 months
O*NET ¹⁴ & Myers-Briggs Type Indicator [®]	In prison	None	None

SOURCE: SANDAG SB 618 Fourth Annual Evaluation Report

Multi-Disciplinary Team (MDT) and Life Plan Development

Research agrees that successful reentry is realized through collaboration across systems, not only to provide leadership, but also in the delivery of services (La Vigne, Davies, Palmer, & Halberstadt, 2008; Petersilia, 2004). One way that the SB 618 program incorporates best practices is by utilizing the MDT to discuss participants' eligibility and level of risk and need based on standardized assessments. The MDT is comprised of staff from

Decisions regarding service planning and delivery are made by consensus with input from program staff and participants.

¹⁴ The specific O*NET tools utilized for SB 618 focus on career interests, values, and abilities.

Probation, CDCR (PCM and Classification Counselor), and UCSD. MDT meetings are held within 14 days of participants' referral to the program by the court and before they are sentenced. The objectives of the MDT meeting are to discuss the results of the screenings, assessments, and pre-sentencing interview; agree on the participant's suitability for the program; and create a course of action for services and case management. These meetings take place at one of two local jails (Las Colinas Detention Facility for females and George Bailey Detention Facility for males) and allow participants to meet the MDT members, ask questions and provide input, learn the results of their assessments, and get information about the program and their role in it.

A key component of the SB 618 program is the creation of the Life Plan, ¹⁵ a formal and dynamic document that charts participants' needs and progress from assessment to program completion. Information maintained in the Life Plan includes personal demographics, screening and assessment results, and case management notes entered by the PCM and CCM. At no particular point in service delivery does only one program staff member make a stand-alone decision regarding participants' course of programming. Rather, decisions are made by consensus among program staff and participants. Three forums at which the Life Plan is formally discussed include prior to prison entry at the MDT meeting; during incarceration through discussions between the PCM and CCM; and post-release at the Community Roundtable meetings. The Life Plan is available to participants throughout their involvement in the program with the intention that it will be particularly useful as they reintegrate into their family and community.

Modifications to MDT and Life Plan Development

In April 2008, key staff refined the MDT system to give participants greater opportunity to identify their goals and provide input, as well as generate ownership in the Life Plan. For example, team members enhanced the MDT meeting by identifying three core issues (education, vocation, and substance abuse) and then providing participants with information about services available in prison and the community. At that point, participants are asked for input on services they feel would help them most in overcoming these issues and key staff make every effort to enroll participants in these programs. To streamline information sharing among program staff working directly with participants in developing the Life Plan, the program successfully automated the Life Plan into the DA's database in May 2008, which greatly enhanced the flow of participant information between key staff.

Prison Services

The SB 618 program was designed with an emphasis on giving participants an opportunity to engage in rehabilitative activities in prison. These activities include learning vocational skills, moving forward with education goals, and treatment of substance use disorder. The prison components of the SB 618 program, as originally designed, are described in detail below.

¹⁵ The Life Plan can be found at http://www.sdcda.org/office/sb618/sb618-life-plan.pdf.

Prison Case Management

One of the best practices utilized in SB 618 is ongoing case management during the participants' prison sentence. This component is believed to encourage participants to remain constructively engaged while serving their time. The role of the PCM is to advocate on behalf of the participants as they maneuver through the complex prison system and ensure that they are expedited into classes and programs relevant to their Life Plan objectives. In setting up this design, program partners believed the benefit of entering programs more quickly would be an enticement to program recruitment. SB 618 was originally designed for each prison to hire sufficient PCMs to maintain a caseload ratio of 60 to 1 and for the PCMs to be supervised by a Prison Case Management Coordinator (PCMC).

The first step in any therapeutic relationship is engagement, or building rapport and trust between the helping professional and client. The PCM engages participants by identifying their goals in prison, as well as after release; formulating an in-prison programming plan; and providing more information about the SB 618 program. At both prisons, once participants transition to permanent housing within the general population, PCMs meet regularly with participants to review and update the Life Plan and ensure that participants are expedited into appropriate programs. Chapter 4 of this report contains detailed analysis of the frequency of meetings between PCMs and participants at both prisons.

Modifications to Prison Case Management

The program partners originally anticipated that the program would utilize a social work model for the prison case management component. However, at the start of the program, RJD opted to use educational staff to fill these positions, while CIW hired LCSWs. However, over the course of program implementation, qualitative differences between the two prisons' case management

services became apparent;¹⁶ and program partners felt it would be in the best interest of the participants to maintain consistency in the PCMs' professional backgrounds at both prisons. As a result, RJD began recruiting LCSWs in May 2008 to replace the four existing educator PCMs and one PCMC. Since that time, RJD has struggled to fill these five positions

Achieving full prison case management staffing at RJD has been an ongoing challenge for the local SB 618 program.

due to budget constraints, hiring freezes, and recruitment and retention challenges, resulting in their PCM program never being fully staffed as intended. As of this report, there are two PCMs, both of whom were hired in July 2010, and prison administrators are in the process of requesting an exemption to CDCR's current hiring freeze to replace the two vacant PCM positions.

With regard to the supervising PCMC position, RJD opted in early 2010 to have an Associate Warden (AW) supervise the PCMs rather than maintaining the PCMC position as originally designed. The AW has a host of other administrative responsibilities throughout the prison unrelated to the SB 618 program and is not an LCSW as are the PCMs. In January 2011, CDCR transferred a social worker from outside San Diego County to fill the PCMC position at RJD. Also, for the first time since the

¹⁶ An example of differences between prison practices is that PCMs in RJD begin the engagement process while participants are in the reception center awaiting final classification and housing placement. In contrast, CIW's PCMs opted to begin the engagement process prior to prison entry by meeting privately with participants at the jail before the MDT meeting.

program began, the PCMs at RJD are considering implementing a type of "triage" system to ensure that they meet with participants who have high levels of need and motivation. The evaluation will continue to monitor any new procedures put in place by the prison to mitigate the PCMs' increased caseload. The impact that these staffing shortages have had on frequency of contacts between PCMs and participants is discussed in detail in Chapter 4 of this report. In comparison to RJD, the staffing at CIW has remained stable and unchanged over the past four years with one PCM and one PCMC.

Vocational and Education Programming

» Vocational

Research shows that having a stable job that a parolee wants to keep will reduce the likelihood of recidivating (Aos, Miller, & Drake, 2006). However, over the past few decades, many vocational training programs in California's prisons, including RJD, were dismantled as a result of overcrowding and the emphasis on "punishment" rather than "rehabilitation" (CDCR, 2007b). Since 2005, when CDCR shifted its focus to "rehabilitation," prisons have struggled to restore programs due to bureaucratic hurdles. For example, in 2002 RJD lost all 19 vocational programs because of overcrowding and found it necessary to remodel classrooms, install new equipment, meet safety standards, and recruit and hire new instructors in order to provide SB 618 participants with relevant vocational training. As a result of these efforts, RJD opened classes for Welding in August 2007, Machine Shop in February 2008, Cable Technology in April 2008, and Mill and Cabinet Making in January 2009. Unlike RJD, CIW's vocational programs were not negatively impacted to the same degree, with Prison Industry Authority (PIA) training continuing in Sewing and Construction.

» Education

Research indicates that individuals involved in the justice system are less likely to have completed higher education compared to those with no history of incarceration (Harlow, 2003). For example, around two in five (41%) prisoners and one in three (33%) probationers have not completed high school or obtained a General Equivalency Diploma (GED), compared to 18 percent of the general population. In addition, dropping out of school has been found to be negatively associated with employment (prior to incarceration) and positively associated with recidivism (Harlow, 2003). However, the relationship between educational attainment and an increased propensity for criminal activity is not necessarily a simple one. It is important to note that individuals who recidivate usually have criminal histories that began at an earlier age than non-recidivists; act out in more hostile and nonconformist ways; have suffered from abuse in the past; have mental health issues; and are often homeless, unemployed, and addicted to alcohol and other drugs. While not having the ability to read does not cause one to commit crime, it can be an important part of the equation (Newman, Lewis, & Beverstock, 1993).

With these findings in mind, it is clear that by improving prisoners' educational status, gains will be made to self-esteem and chances of obtaining gainful employment after release. Upon entering local custody, SB 618 participants are administered the TABE, which rates an individual's basic educational skills. Based on the TABE results, ¹⁷ SB 618 participants can enroll in level-appropriate classes in prison, such as basic literacy or GED coursework.

Modifications to Vocational and Educational Programming

State legislation passed in 2010 has affected an inmate's eligibility for rehabilitative programming. Senate Bill (SB) 18 allows CDCR to implement new policies to reduce both the prison and parole population by amending the California Code of Regulations governing inmate credit earnings. Inmates may receive day-for-day credits in both local custody and state prison, thereby reducing the

length of time spent incarcerated. This policy change affects an inmates' eligibility for education or vocational programs because the inmates must have at least one year left to serve on their sentence before enrolling in the program. With a greater number of time credits, fewer inmates have enough time left on their sentence to meet these enrollment criteria.

Budget cuts over the past year have resulted in the loss of vocational and educational programs at both RJD and CIW.

While this change will have a minimal effect on the evaluation (i.e., fewer than 20 treatment group members were still in prison at the time of this report), it may impact the program's ability to provide rehabilitative services in prison to participants.

In January 2010, RJD closed the Mill and Cabinet vocational program and in April 2011 the Cable Technology program also closed, leaving Welding and Machine Shop. Program partners were able to negotiate funds for an instructor for the Food Handler's Certificate program which re-opened on the Minimum Security Facility in April 2011. ClW closed one vocational program (Graphic Arts) but their Cosmetology program opened in May 2011. A new program, Project New Start, was introduced at RJD in September 2010 and is comprised of a four-week curriculum focusing on preemployment skills and financial literacy. The curriculum, which was created by the Sacramento Workforce Partnership, is taught by a community-based organization contracted through the San Diego Workforce Partnership. Classes are held daily on the Minimum Security Facility with tentative plans to expand to the Level 3 yard.

Also in January 2010, RJD closed its college-level classes but maintained Basic Literacy and Adult Basic Education classes. To augment the loss of college classes, SB 618 program partners reached out to Southwestern College, a local two-year community college, to explore opportunities for providing coursework to RJD participants. Unfortunately, due to limited resources at Southwestern College, this plan has not been fully realized. In the interim, Southwestern has made career counseling services available to SB 618 participants who have been released from prison.

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¹⁷ The initial assessment examines reading comprehension. Reassessments are administered only to those with reading levels below 9.0. These reassessments examine reading comprehension and math.

Substance Abuse Treatment

According to Petersilia's 2006 report, *Understanding California Corrections*, 21 percent of California's prisoners are serving time for a drug-related offense, 43 percent have a "high need" for alcohol treatment, and 56 percent are facing a "high need" for drug treatment (compared to the national prison average of 49%). Based on these statistics, as well as data from the DA's caseload, local SB 618 leaders expected that the majority of program participants would have serious substance abuse issues; and in fact, as described in Chapter 4, approximately four-fifths of participants enter the program with issues of alcohol and/or drug dependence. Prison Substance Abuse Programs (SAP) are administered by CDCR's Office of Substance Abuse Treatment Services (OSATS) (formerly the Division of Addiction and Recovery Services [DARS]). CDCR contracts with outside agencies to provide in-prison substance abuse programs and OSATS administers both inprison and community aftercare substance abuse treatment, which adheres to the therapeutic community model and provides gender-specific services for females.

Modifications to Substance Abuse Treatment

The SAP program at RJD has faced myriad challenges over the past few years which have precluded participants from receiving treatment in prison. The first challenge occurred between July and October 2008, when the SAP program was suspended due to breaches in security by contracted staff. As a result, CDCR gave the contractor the opportunity to remedy the problems that allowed

such breaches to occur. Steps taken by the contractor included the termination of 18 of the 36 employees and improved screening and training for new employees. Despite taking steps to remedy the security breaches, budget cuts forced CDCR to close SAP at RJD approximately one year later in October 2009, leaving no drug treatment services available to inmates in the prison. Program partners are concerned that the lack of in-prison drug treatment at RJD will jeopardize male participants'

While CIW continues to provide inprison drug treatment, these services have not been available at RJD since October 2009. Program partners remain committed to finding an alternative to ameliorate this significant loss in programming.

recovery efforts and their ability to enter aftercare treatment funded by Substance Abuse Services Coordinating Agencies (SASCA). SASCA is instrumental in placing parolees into community-based programs within the county to which they parole and requires that prisoners complete 90 uninterrupted days of SAP treatment immediately prior to release from prison in order to qualify for residential treatment services in the community.

Another loss of substance abuse treatment services occurred in September 2009 when CDCR announced the closure of all state drug treatment furlough (DTF) programs, including the two DTF facilities in San Diego county (the Lighthouse for males and Freedom House for females). The DTF program had allowed eligible inmates (i.e., non-serious, non-violent, and non-sex offenders) to complete their sentence in a community-based residential substance abuse treatment program. Although the Lighthouse no longer provided a DTF facility, they did agree in December 2009 to

¹⁸ In February 2007, the California Office of the Inspector General issued a report to the governor outlining myriad problems within CDCR's Office of Substance Abuse Program (OSAP). One result from this report was the restructuring and renaming of OSAP to DARS and which has since been renamed to OSATS.

¹⁹ In January 2010, SAP at CIW was available only to inmates deemed civil addicts by the court but was opened to SB 618 participants in April 2010.

enter an MOU with program partners and provide "fee for treatment" for SB 618 male participants. Though there is no comparable agreement with Freedom House, the program does have agreements in place for drug treatment for females ensuring that participants continue to receive services.

Program partners remain very committed to finding an alternative solution to SAP, including the possibility of adding a Cognitive Behavioral Therapy module focusing on substance abuse at RJD. In addition, discussions are underway between program partners and Solano State prison in northern California to explore the possibility of training suitable RJD inmates in Solano's Certified Offender Mentors²⁰ program to provide peer recovery treatment. Although this idea is still in the preliminary stages, it again illustrates program partners' ability to "think outside the box" in order to adhere to their original goal of evidence-based service delivery.

Post-Release Services

As the number of parolees returning to the community soars, it is clear that neighborhood leaders and public safety officials have a vested interest in exploring strategies to reduce recidivism and promote a productive way of life for ex-offenders. With this information in mind, SB 618 was designed to include a seamless transition of case management between prison and the community. In addition to being supervised by a Parole Agent, participants receive post-release case management and vocational services from the CCM. The Parole Agent, CCM, the participant, and any other individual(s) (i.e., family, friends, sponsors, and clergy) deemed helpful to reentry efforts meet regularly as the Community Roundtable to provide support and monitor progress. These post-release services are described in detail below.

Community Case Management

Research reveals that community-based services which include intensive advocacy are more effective in reducing recidivism than institutional programs alone (Andrews, 2006; Matthews, Hubbard, & Latessa, 2001; Sherman, Gottfredson, MacKenzie, Eck, Reuter, & Bushway, 1997). As such, UCSD's

Center for Criminality and Addiction Research, Training and Application (CCARTA) provides community case management to all participants for 12 months after release, followed by six months of aftercare if needed. The role of the CCM is multipronged and includes pre-release discussions with the PCM, Parole Agent, and participant to review and revise the Life Plan as necessary. As of this report, the CCM and participant discuss concrete plans for residential options immediately

Community case management begins prior to release in order to foster success during the participant's reentry into the community.

after release. This pre-release engagement strategy is rooted in the belief that by offering a helping hand on the other side of the prison door and creating a structured plan of action, participants will begin to see that successful reintegration can be a reality.

²⁰ The Offender Mentor Certification Program at Solano State Prison began in 2009 and offers long-term inmates (primarily "lifers") the opportunity to receive California Association of Alcoholism and Drug Abuse Counselors (CAADAC) certification. Under supervision of the Office of Substance Abuse Treatment prison staff, these offender mentors provide peer recovery services to other inmates (CDCR, 2009).

Furthermore, the CCM's role is to ensure a seamless transition by meeting participants at the prison gate and transporting them directly to the agreed-upon residential treatment facility. Paying mind to experts' claim that the first 72 hours after release are critical in a parolees' success (Ball et al., 2008), the CCM remains on call for 72 hours after the participants' release to answer any questions and continue the momentum of post-release engagement and motivation. Once in the community, participants meet with their CCM on a regular basis²¹ to receive referrals and services, including monetary assistance ("stabilization funds") to offset costs such as clothing for work, public transportation passes, and other amenities as needed.

Modifications to Community Case Management

The original program design called for UCSD to hire new full-time CCMs as more participants entered the program and maintaining a 30:1 caseload. However, budget cuts have significantly affected this original plan. In August 2010, UCSD was required to cut their operating budget by one-third, resulting in the lay-off of two full-time CCMs and leaving a total of four CCMs. At their most fully staffed in 2009, UCSD had 8 CCMs; however, with two consecutive years of budget cuts and lay-offs, the CCM caseload has increased from the original design of 30:1 to 55:1. To augment these staffing reductions, five college interns (four bachelor's and one master's level) were placed by local colleges at UCSD to assist CCMs. The interns share a caseload of six participants with one CCM and perform much of the same duties as the CCM. Beginning in December 2010, UCSD conducts reentry orientation groups giving a forum to participants to learn more about community services available, program expectations, and to have any questions answered.

Vocational Services

The original design of the SB 618 program included vocational specialists staffed by CTS, which subcontracted with Probation in September 2007. The vocational specialist's role began in prison by administering the O*NET and MBTI assessments within 90 days of the participant's entry into the general prison population. The results of these assessments were interpreted and explained to the participants. A follow-up visit with each participant by the vocational specialist further explored their employment strengths as demonstrated from the O*NET assessment in conjunction with past employment history. Beginning in April 2008, CTS began holding job-readiness workshops in prison in which participants learned soft skills (interviewing and résumé writing), as well as realities of the job market in San Diego County. This combined information was used to develop an Individual Employment Plan (IEP) to assist with post-release job search and employment placement or referral into vocational, education, or post-secondary educational opportunities. If, after release, participants required assistance with vocational readiness beyond what is currently offered in the community, the CTS vocational specialist assisted with job-readiness skills and resources, as well as creating positive linkages with prospective employers to maximize participants' vocational success.

²¹ The frequency of meetings between CCMs and the participant depends on needs of the participant. See Chapter 4 for detailed information regarding the frequency of these meetings.

Modifications to Vocational Services

As mentioned earlier in this chapter, CTS's contract was terminated in October 2009, and as of this report, vocational services are provided by UCSD's Reentry Employment Coordinator. As such, the Reentry Employment Coordinator administers the O*NET and MBTI assessments with participants 180 days prior to release from prison and meets with participants to interpret the results of these

assessments. The Reentry Employment Coordinator has also trained the PCMs and CCMs to interpret the scores of the assessments and discuss the results with the participants in custody and in the community. One benefit of this change has been that CCMs are more closely involved in a participant's referral for vocational services now that this component is part of UCSD. In addition, UCSD's Reentry Employment

Providing post-release vocational services is the responsibility of UCSD's CCM program, which is a diversion from the original design.

Coordinator has developed broader linkages with several local employment service providers, felon-friendly employers, and community colleges. In April 2011, UCSD developed "Community Check-in" workshops focusing on employment and education. Guest speakers from the community are invited to present on a variety of programs and services they have available, and participants are able to interact with program providers to ask questions and sign up for services.

Community Roundtable

Another best practices approach is the inclusion of informal social supports in the participant's reentry plan (Backer, Guerra, Hesselbein, Lasker, & Petersilia, 2005; Byrne, Taxman, & Young, 2002; Matthews et al., 2001; Petersilia, 2007; Reentry Policy Council, 2005). Specifically, research shows that the likelihood of a participant following through with their reentry plan increases when there is formal involvement by family members (Braithwaite, 2002). The SB 618 program has followed

that guidance by developing the Community Roundtable, a multidisciplinary group which formalizes regular meetings among the participant, Parole Agent, and CCM to discuss existing needs, review the Life Plan, and ensure that the participant is on the right path. In addition to the above-mentioned professionals, participants are encouraged to invite any individuals they feel are

Community Roundtable meetings provide participants with much needed emotional support, as well as offering a venue for program staff to monitor the participant's progress.

supportive of their success, including family, friends, sponsors, and clergy. The Community Roundtable is another example where decisions regarding the participant's Life Plan are made in concert with the participant and program staff.

Modifications to Community Roundtable

The program held its first Community Roundtable in January 2008, approximately two months after the first participant was released from prison. Using feedback from participants and key staff, program partners took steps to refine the process to make sure it was as productive as possible. An example of the collaborative effort among SB 618 staff was the agreement reached between the CCMs and Parole Agents to hold Community Roundtables the fourth Tuesday of each month at the Parole Agent's office to ensure consistency in scheduling and maximize attendance by all key stakeholders. To enhance accessibility of the CRT meetings and increase participant attendance, the CCMs and Parole Agents expanded the locations of CRTs to include community venues other than

the Parole office, such as residential treatment facilities and the participant's home. Chapter 4 of this report describes the frequency of CRTs attended by participants and program staff.

Aftercare

During the parole period (which is typically 13 months for those who successfully meet parole conditions), the parole and Parole Agent agree upon appropriate aftercare services, such as drug treatment and employment training. However, due to high caseloads, most Parole Agents are limited in the extent of case management they can provide. In response, SB 618 was designed to augment parole services by providing one year of post-release case management to strengthen the safety net and facilitate successful reentry. After this one-year period, participants can continue to receive assistance and support for up to six additional months (i.e., the aftercare period), with CCMs checking in on them on an as-needed basis regarding progress.

Enhancements Developed to Adhere to Evidence-Based and Best Practices

Behavioral Health Services

One of the original features built into the SB 618 program was pre- and post-release behavioral health case management to focus on participants' substance use and mental health needs. This service component not only adheres to best practices (Osher, Steadman, & Barr, 2003) but is

considered vital by program partners to serve the high number of SB 618 participants anticipated to be struggling with serious substance abuse and mental health issues. Despite program partners' best efforts to negotiate implementing behavioral health services into the SB 618 model, the program was unable to

Behavioral health services for SB 618 participants are provided by community partners.

operationalize this component due in large part to bureaucratic obstacles in procuring services. In order to honor their commitment to offer a range of individualized behavioral health services to SB 618 participants, in February 2009 partners developed Memoranda of Understanding (MOU) between UCSD and community behavioral health service providers to allow participants access to treatment on a fee-for-service basis. Of the 27 agencies with existing MOUs, about half are utilized on a regular basis by SB 618 participants who are referred by the CCM. Despite some additional administrative tasks required to provide these services, participants needing behavioral health treatment have utilized this program enhancement.

Cognitive-Behavioral Therapy

As described in Chapter 1, research shows that cognitive-behavioral therapy (CBT) is successful at reducing recidivism (Gaes, Flanagan, Motiuk, & Stewart, 1999; Lipsey & Landenberger, 2006). Since

the beginning of the program, PCMs at CIW have used CBT techniques in their case management, including journaling, reality testing, positive reinforcements, and modeling. The PCM program at RJD was not utilizing the tenets of CBT with participants but program partners remained steadfast in their commitment to providing a CBT curriculum at RJD. As a result, a voluntary class using

"Thinking for a Change" classes are offered at RJD due to the program partners' strong commitment to implementing a cognitive-behavioral therapy curriculum.

portions of "Thinking for a Change", an evidence-based CBT curriculum, was introduced in the prison in August 2010 but was discontinued in December 2010 due to a change in the instructor's workload.

The loss of both the Substance Abuse Program (SAP) and CBT classes at RJD has been a source of great disappointment to the SB 618 program partners. To mitigate the loss of these crucial rehabilitative services, program partners are exploring other avenues, including the addition of a CBT class with an emphasis on drug treatment and the use of Certified Peer Mentors to provide drug treatment to SB 618 participants. Chapter 4 of this report contains more detail regarding the impact on participants from the loss of substance abuse treatment in prison.

Benchmarks

Consistent with the literature on the value of using incentives to reward positive behavior, as well as consequences for violations (National Research Council, 2008), program partners developed a system of rewards to support treatment goals and facilitate program compliance by identifying program "benchmarks" deemed vital for participants to be considered actively engaged in the program. The program partners worked closely with a participant in developing the language for each benchmark. The participant expressed interest in seeing a formal accountability process put in place to make sure participants engaged in services to the fullest extent. The purpose of this benchmark system is to make clear to the participants what is expected of them and to promote engagement in the SB 618 program to maximize their chance for success. Examples of benchmarks that must be met include participation in pre- and post-release multi-disciplinary forums (i.e., the MDT meeting and Community Roundtable), completion of assessments, and completion of specific prison and community programs deemed appropriate as outlined in the individual's Life Plan. When benchmarks are fulfilled, the participant's success is recognized through a variety of rewards or incentives (i.e., certificates, movie passes, etc.).²²

Alumnae Participation

In March 2010, program partners invited a recent SB 618 graduate, or "alumnus", to regularly attend bi-weekly Operational Procedures Committee meetings to provide the consumer point of view. Based on direct observation, input provided by this individual was highly regarded by all partners who welcomed his unique perspective to discussions around program implementation. In October 2010, this alumnus was asked to present his experiences with SB 618 at a Board of Supervisors hearing to discuss a newly formed Reentry Court in San Diego County. The alumnus has expressed a desire to develop a video about SB 618 to expand potential participants' knowledge about what to expect from the program, as well as to identify an "Alumnae Center", a physical location where other SB 618 alumnae can gather and offer one another support in their reentry efforts. Program partners are providing support to the alumnus for producing the video but plans for establishing an "Alumnae Center" are on hold due to budget constraints.

²² A complete list of benchmarks and corresponding incentives/rewards can be found at http://www.sdcda.org/office/sb618/life-plan.html.

Other Policy Changes Affecting SB 618's Original Design

SB 1453 and SB 18

As mentioned in Chapter 1, California passed several pieces of legislation in recent years to address the problem of prison overcrowding. The first of these enacted in 2007 is SB 1453, which allows CDCR to discharge eligible offenders (non-serious and non-violent) from parole once they successfully complete 90 consecutive days of in-prison drug treatment followed by 150 consecutive days of residential drug treatment in the community. Program partners have expressed concern that individuals who participate in SB 618 and are also eligible for SB 1453 may choose not to continue with the full 18 months of SB 618 services once they are discharged from parole.²³

The second piece of legislation passed in 2009, SB 18, outlines various strategies to reduce prison overcrowding. One of these strategies is Non-Revocable Parole (NRP)²⁴ which was implemented in early 2010. The policy states that when an inmate who has been classified for NRP is released from prison, s/he is not assigned to a Parole Agent and does not need to satisfy conditions of Parole. The aim of this policy is to reduce Parole's caseload and allow the Parole Agent to focus on individuals at higher risk for recidivating. The NRP policy has direct implications for the SB 618 program since some participants meet the criteria for NRP classification. The loss of the Parole Agent's involvement in the post-release process is a significant deviation from the original program design, especially in regard to the program's commitment to a multi-disciplinary approach to service delivery. With participants coming out of prison on NRP, CCMs will not have access to the expertise of Parole Agents on the post-release case management team, including their attendance at the Community Roundtable. As of this report, Community Roundtable meetings must have the attendance of the participant, a CCM, and the Parole Agent, For NRP participants who have no Parole Agent, CCMs hold CRTs with the participant and at least one other person, usually a substance abuse counselor, friend, or family member. Another example of the Parole Agent's contribution to the multidisciplinary approach is their collaboration with the SB 618 DA representative in recommending appropriate sanctions to balance the needs of public safety with fostering a participant's overall success. There have been several examples in which the Parole Agent provided crucial input to the court to help tailor the judge's decision according to the participant's specific risks and needs.

Timing of Post-Release Drug Testing

In October 2010, Parole implemented a new drug testing process in which parolees with a California Static Risk Assessment (CSRA)²⁵ score reflecting a severe need for drug treatment would be tested weekly during the first 60 days of release. Chapter 2 of this report includes a greater description of the CSRA and how the scores were used in this evaluation.

²³ Though SB 618 participants have qualified for SB 1453, the total (31) is too small to analyze the impact on outcomes.

²⁴ As of September 9, 2010, there were 898 individuals on NRP in San Diego County. There are 19 SB 618 treatment group members and 20 comparison group members currently on NRP. More information regarding CDCR's criteria for NRP classification is available at http://www.cdcr.ca.gov/Parole/Non_Revocable_Parole/index.html.

²⁵ The CSRA is a validated instrument developed by the University of California, Irvine, which identifies static factors most predictive of recidivism and categorizes offenders as low, medium, or high risk. It is an integral component of the Parole Violation Decision-Making Instrument (PVDMI).

Reentry Court

In October 2010, San Diego County received \$1.5 million from the California Emergency Management Agency (Cal-EMA), a portion of which is used to implement Reentry Court²⁶ (the majority of the dollars will fund substance abuse and mental health treatment). The purpose of this new court is to divert parole violators who have committed non-violent, non-sexual offenses from incarceration to community-based treatment. Reentry Court began in January 2011 and is expected to hear approximately 250 cases over a two-year period. Since the eligibility criteria for SB 618 and Reentry Court are similar, the program partners anticipate that some participants who violate parole will be heard in Reentry Court. The evaluation will monitor developments regarding this new court and the impact on SB 618 participants.

MILESTONES

Since the passage of SB 618 into law in October 2005 and the enrollment of its first participant in February 2007, the local SB 618 program has accomplished many milestones attesting to its success. Table 3.4 outlines these key milestones between October 2005 and August 2010, when the program celebrated the first CBT class at RJD, the completion of the SB 618 Incentive and Accountability Program Benchmarks, and the on-line SB 618 Manual.

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²⁶ More information about San Diego County Reentry Court can be found at http://www.sdcda.org/files/Reentry%20Court%20News%20Release%2010-12-10.pdf.

Table 3.4 SB 618 PROGRAM MILESTONES

Time Frame		Action		
2005	Oct	SB 618 is signed into law by Governor Schwarzenegger		
2005-06	Nov-Jun	DA and CDCR coordinate ongoing meetings to finalize program design		
2006	Jun	San Diego County Board of Supervisors approves the Multi-agency Plan		
	Feb	First participant enrolls in program		
	Mar	Program officially begins with weekly intakes at Downtown Courthouse		
	May	Program expands to the El Cajon/East County Courthouse		
		SB 618 database is operational and program partners and key staff are trained to use the database		
2007	Jul	First participant signs Informed Consent formally enrolling him in the evaluation		
	Aug	First vocational program is re-established at RJD		
		One hundredth participant is enrolled in program		
	Sep	Vocational services contractor is hired		
	Nov	First participant is released from prison		
	Jan	First Community Roundtable is held		
	Feb	RJD implements second vocational program		
	Mar	Request for Program Expansion is submitted to State		
	Apr	RJD implements third vocational program		
2008	May	RJD hires four LCSWs to fill PCM role		
		Life Plan is automated in SB 618 database		
	Jun	San Diego County Probation receives the National Association of Counties Award for SB 618		
		SB 618 holds first Retreat		
	Jul	New modular classroom is installed at RJD allowing for expanded programming in prison		
	Apr	Employment symposium held for local employers, and an SB 618 presentation provided by program partners		
		Class B Driver's License class begins at RJD		
2009	Jun	Five hundredth participant is enrolled in program		
	Jul	Food Handler's Certification class begins at RJD		
	Sep	Community partners hold first retreat		
	Oct	First "Achievement Ceremony" is held for 35 participants who successfully completed aftercare		
	May	Second "Achievement Ceremony" is held for 40 participants who successfully completed aftercare		
2010	Aug	RJD begins Cognitive-Behavioral Therapy class		
		Program Partners finalize SB 618 Incentive and Accountability Program – Benchmarks		
		SB 618 Manual is completed and available on-line		

SOURCE: SANDAG SB 618 Fourth Annual Evaluation Report

SUMMARY

This chapter described the original design of the SB 618 program and addressed the following research questions: "Was the program implemented as designed? What modifications were made, if any, and why?" The chapter also described what impact, if any, these modifications had on SB 618 implementation. The program partners' ability to implement SB 618 as planned was significantly hampered by budgetary and bureaucratic constraints which resulted in program modifications, such as increased case management caseloads, and reductions in prison programming, most notably the closure of RJD's Substance Abuse Program. Despite funding constraints, new practices were implemented, including a system of rewards for participants who complete crucial program "benchmarks". After years of persistent effort, program partners were successful in ending the duplication of mental health screenings at RJD, thereby utilizing limited resources more effectively. Other policy changes that may have an effect on the local SB 618 program include the opening of a specialized Reentry Court in San Diego County and passage of SB 18, which created Non-Revocable Parole (NRP), a strategy to reduce prison overcrowding and Parole caseloads by releasing eligible inmates directly to the community rather than assigning them to a Parole Agent.

Chapter 4:

Process Evaluation Results: Service Needs and Delivery

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CHAPTER 4

PROCESS EVALUATION RESULTS: SERVICE NEEDS AND DELIVERY

INTRODUCTION

A key component of the process evaluation involves documenting program implementation related to identifying needs and service delivery. As part of this effort, data were compiled from program records to address six of the research questions posed in Chapter 2. Specifically, information is provided about the flow of eliaible offenders into either the treatment or comparison aroups. characteristics and needs of the two groups, prior involvement in criminal activity, and services received in prison and in the community, as well as treatment group attrition while in prison and during the first 12 months postrelease.

HOW MANY OFFENDERS WERE SCREENED FOR ELIGIBILITY AND HOW MANY WERE FOUND TO BE ELIGIBLE?

As part of the evaluation design, program staff assigned a total of 347 eligible individuals to the treatment group and 367 to the comparison group. Between February 2007 (program inception) and November 2008, individuals were screened by the San Diego County District Attorney's (DA's) Office and eligible offenders were given either an opportunity to receive program services or

MAJOR FINDINGS

- At program entry, almost all treatment participants have a significant need for vocational training and substance abuse treatment, while around two-thirds also need educational assistance.
- ▶ The most common risk factors for recidivism among participants at program entry include residential instability (59%), associating with criminal peers (51%), and financial problems (44%). In terms of factors associated with resiliency, most participants have family members with no criminal history.
- Program staff is successful in assessing participant need within the expected timeframe and reducing time spent in the prison reception center.
- ▶ Almost all participants have contact with a Prison Case Manager (PCM) or Community Case Manager (CCM) while in prison, and four in five participate in prison programs that match their individual needs or are employed in prison.
- ▶ The majority of participants receive referrals for services in the community from their CCM, including referrals to substance abuse services such as AA/NA (84%), inpatient drug treatment (62%), employment services (57%), and outpatient drug treatment (53%).
- Program attrition is relatively low with one in ten dropping out in prison and one in six dropping post-release from prison.

were not offered services and assigned to the comparison group.¹ Though the program officially accepted the first participants in February 2007, sampling for the treatment group began on July 1,

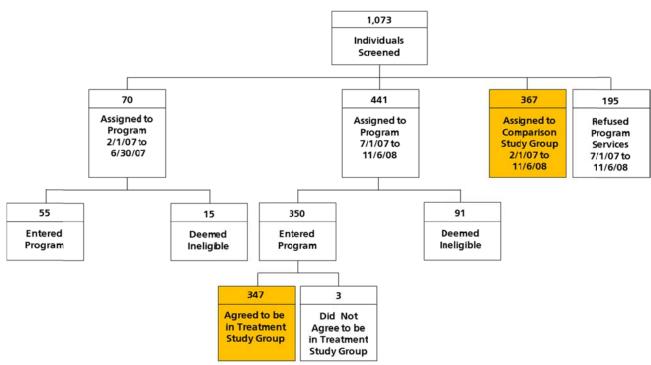
2007, to enable the program to refine the enrollment process and allow program start-up prior to formal evaluation activities. Therefore, the 70 individuals who were assigned to the program between February and June 2007 and individuals assigned after November 2008, when the treatment group was fully populated, were not tracked as part of this evaluation. Between July 2007 and

Study groups consist of 347 treatment group members and 367 in the comparison groups.

November 2008, a total of 347 individuals (an average of 6.3 per week, range of 1-10) were eligible for SB 618, accepted the offer of SB 618 services, and consented to participate in the program evaluation.²

The comparison group was comprised of 367 individuals who were eligible since the inception of the program in February 2007 but could not enter the program because all available slots for the week were filled.

Figure 4.1
OFFENDER SCREENING AND STUDY GROUP ASSIGNMENT
FEBRUARY 2007 TO NOVEMBER 2008



NOTE: Shaded boxes indicate study group individuals being tracked as part of the SB 618 program evaluation. SOURCE: SB 618 Database, SANDAG SB 618 Fourth Annual Evaluation Report

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¹ As described in Chapter 3, the general selection process was to offer the program to the first six eligible individuals who were processed through the DA's office per week. Individuals processed after the six slots were filled were assigned to the comparison study group.

² Three individuals from the treatment group who consented to participate in the program evaluation and one individual from the comparison group died after release from prison. All have been removed from the study and are not reflected in the total number of participants in this report.

WHAT WAS THE PROGRAM PARTICIPATION REFUSAL RATE?

Because participation in SB 618 is voluntary, it was of interest to consider how many individuals eligible for services declined them. As shown in Figure 4.1, during the time individuals were assigned to the treatment group (between July 2007 and November 2008), 195 individuals were offered and refused³ program services. Around two in every three individuals (64%) who were

offered the program accepted and approximately one out of three declined (36%). Reasons for declining participation were not available because individuals who refused were not asked to provide reasons for doing so.⁴ However, researchers conducted a survey with members of the criminal defense bar to get their perspective on possible reasons their clients refused program services. Fifty of these respondents had represented a client

Two in three individuals offered the program accept. Those who do not accept have less prior involvement in the criminal justice system.

eligible for SB 618 at least once and more than one-third (36%) reported that clients "always" or "sometimes" declined SB 618 services. Based on responses from those surveys, perceived reasons for why some clients declined SB 618 included that clients did not believe they needed help (47%), had a lack of trust of authority figures (47%), and did not think the program would do any good (33%). Other reasons for declining included the desire to keep sentencing options open (4), avoidance of increased supervision/scrutiny (2), and concerns about being housed separately in prison (1) (not shown). Respondents also perceived that clients who were most likely to decline were between 18 and 25 years old and/or associated with a gang (44% each) (Table 4.1).

Table 4.1

DEFENSE ATTORNEYS PERCEIVE YOUNG AND GANG-AFFILIATED

OFFENDERS MOST LIKELY TO DECLINE SB 618

Who is most likely to decline to participate in SB 618?		
Young (between 18 and 25)		
Associated with or a member of a gang	44%	
Dependent on drugs/alcohol	25%	
Unemployed	19%	
First-time offender	19%	
Without a General Equivalency Diploma (GED)	13%	
Not a parent of minor children		
Not in a committed relationship		
TOTAL		
If clients always or sometimes decline, what are some reasons why?		
They don't think they need help or have any problems	47%	
They don't trust authority figures		
They don't think the program will do any good		
TOTAL		

NOTES: Cases with missing data not included. Percentages based on multiple responses.

SOURCE: SANDAG Defense Bar Survey, 2009; SANDAG SB 618 Fourth Annual Evaluation Report.

³ Information was not available regarding factors (such as housing issues at the prison or prior prison gang membership) that may have later deemed individuals who refused to participate as ineligible for program services.

Because eligible individuals were offered the program by their defense attorney, it was not possible for program staff to coordinate with the large number of defense attorneys to get these data directly from their clients.

Analyses were conducted to compare the characteristics of the treatment group and the individuals who refused services to determine the comparability of the groups. Differences were examined between the treatment and refusal study groups to determine if volunteerism may have impacted the issue of comparability for the research design since the treatment group volunteered and the comparison group was never given the opportunity to volunteer.

Preliminary results show that the two groups were similar in terms of gender, race/ethnicity, and some measures of prior criminal justice system contact. Although, the average age for the refusal group was 37 and the average age for those in the treatment group was 35, there was no significant difference (not shown).⁵ Interestingly, the finding that the refusal group and the treatment group were not significantly different in age was inconsistent with the profile presented by the defense attorneys.

Examination of criminal history in the two years prior to intake into SB 618 revealed mixed results in regard to the criminal backgrounds of individuals in the two groups. Specifically, significantly fewer individuals in the refusal group had prior criminal involvement during the two years before the program offer date; however, of those individuals who had a prior history, the criminal backgrounds were similar to the treatment group. As Table 4.2 shows, the refusal group was significantly less likely to have a prior conviction (47%) or jail sentence (27%) than the treatment group (58% and 36%, respectively). However, further analysis of just those individuals who had been convicted found the two groups to be similar in the intensity (i.e., the number of convictions), level, and type of charges (not shown). These findings suggest that the refusal group may have had less exposure to the criminal justice system and were less aware of the challenges associated with reentry. The final report will use propensity score matching to adjust for any differences that may bias results.

Table 4.2
REFUSAL GROUP LESS LIKELY TO HAVE PRIOR CRIMINAL INVOLVEMENT
TWO YEARS BEFORE PROGRAM OFFER DATE*

	Treatment	Refusal
Prior Convictions	58%	47%
Prior Jail Sentence	36%	27%
TOTAL	347	195

^{*} Differences significant at .05 level.

SOURCE: San Diego County Sheriff's Department, SANDAG SB 618 Fourth Annual Evaluation Report

The remaining information presented in this chapter focuses on data available for the 347 treatment participants who consented to participate in the program evaluation and the 367 individuals who were not offered the program and assigned to the comparison group.

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⁵ As mentioned in Chapter 2, a significance level of .05 is used.

WHAT WERE THE CHARACTERISTICS OF ELIGIBLE PARTICIPANTS, INCLUDING LEVEL OF CRIMINAL INVOLVEMENT?

Because random assignment to each group was not possible, analyses were conducted to determine if the treatment and comparison groups differed in any systematic way. As Table 4.3 illustrates, the two study groups were comparable to each other with respect to age and gender. On average, individuals in the SB 618 program evaluation (treatment and comparison groups) were about 35 years of age and the majority (83%) was male.

However, there was a significant difference in terms of race/ethnicity, with a larger proportion of Whites (46%) and fewer Hispanics (19%) in the treatment group compared to the comparison group (38% and 23%, respectively). One possible explanation for this difference is that some

Typical SB 618 participants have the following characteristics.

- ▶ About 35 years of age.
- Around four in five are male.
- Almost half are White and a third are Black.
- More than half are in custody for a property-related offense.
- Most had served time in jail or prison in the past.

members of the treatment group were later deemed ineligible because of information not initially available (e.g., prison gang membership and housing issues) potentially changing the composition of that group. After the initial eligibility screening, no additional information about comparison group cases was available to determine if they had unknown issues that would later lead to ineligibility. The disparity in groups based on ethnicity also may be an issue of who was offered the opportunity to participate in SB 618, which might be related to eligibility criteria (i.e., Hispanics may be less likely to meet the eligibility criteria) or some other reason resulting in Hispanics being offered the program less often than Whites and/or Blacks⁶. As described in Chapter 2, once data are made available⁷ to the evaluator, a statistical technique matching participants with nonparticipants according to multiple determinants of program participation will be performed so that only comparison individuals who are actually similar to the treatment group will be retained in the study.

⁶ "The SB 618 program is currently not offered in the South Bay Superior Court branch. In 2009, SANDAG analyzed the ethnic breakdown of those offenders who would be eligible for SB 618 at all four San Diego County courthouses. This analysis revealed that Hispanics comprised more than half (58%) of all eligible offenders whose cases were handled in the South Bay court."

⁷ As outlined in Chapter 2, the analysis plan includes accounting for any comparability issues between the treatment and comparison groups through risk as a primary variable. The California Department of Corrections and Rehabilitation (CDCR) is compiling this information and the matching process will occur as soon as the data are available.

Table 4.3
SB 618 STUDY GROUPS ARE COMPARABLE ON AGE AND GENDER

	Treatment	Comparison
Age		
Mean	35.29	35.23
Range	19 - 65	20 - 70
Standard Deviation	9.97	9.65
Gender		
Male	83%	87%
Female	17%	13%
Race/Ethnicity*		
White	46%	38%
Black	31%	31%
Hispanic	19%	23%
Other	4%	8%
TOTAL	347	367

^{*} Differences significant at .05 level.

NOTE: Percentages may not equal 100 due to rounding.

SOURCE: SB 618 Database, SANDAG SB 618 Fourth Annual Evaluation Report

Data collected from San Diego County Sheriff's Department official records clearly showed that the SB 618 treatment group and the comparison group had extensive involvement in the justice system during the two years prior to program assignment. Overall, prior to the instant offense, the two groups were similar in their criminal history background. In the two years prior to SB 618 enrollment, more than half of the treatment (58%) and comparison (53%) groups were convicted for a new offense or violation of terms of supervision (not shown).

At the point of conviction, each group was comparable in the level and type of conviction charges. Approximately three-quarters (72% for the treatment group and 76% for the comparison group) of both study groups with a prior offense were found guilty at the felony level, followed by a misdemeanor conviction (27% and 23%, respectively), and less than one percent (.5% each) had an infraction as their high charge (not shown). Furthermore, there was no statistical difference between the two groups in the type of highest conviction offense. As Figure 4.2 shows, property (46% and 38%, respectively) and drug (33% and 41%, respectively) offenses were the most common prior high charges for the offenders, followed by other⁸ (18%, and 19%, respectively), and violent crimes (4% and 3%, respectively). The prior criminal history standards delineated in the SB 618 eligibility criteria consider convictions, which may explain this consistency across the study groups.

⁸ "Other" includes other misdemeanors and felonies, probation violations, infractions, and violent exceptions. Violent exceptions are violent felonies that are not considered violent according to PC 667.5(c), the penal code delineating violence for enhanced prison sentences (e.g., "three strikes") and the agreed-upon standard for determining SB 618 eligibility.

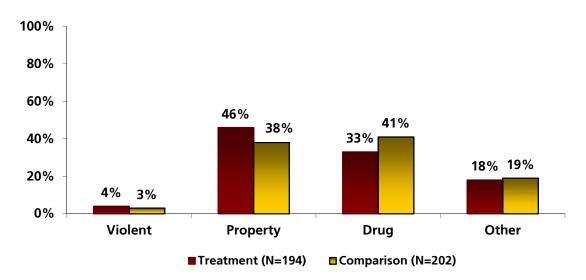


Figure 4.2
SB 618 STUDY GROUPS MOST COMMONLY CONVICTED OF PROPERTY AND DRUG OFFENSES

NOTE: "Other" includes other misdemeanors and felonies, probation violations, infractions, and violent exceptions. SOURCE: San Diego County Sheriff's Department, SANDAG SB 618 Fourth Annual Evaluation Report

Further analysis revealed that the two groups also were similar in the degree of their involvement in the criminal justice system over the past two years. Of those who had been convicted of an offense in the two years prior to group assignment, one-half or more (62% of the treatment group and 51% of the comparison group) served time in jail and about one-third (31% of the treatment group and 40% of the comparison group) received a prison sentence. Both groups, on average, had been sentenced to jail at least once (1.22, <u>SD</u>=.45 and 1.22, <u>SD</u>=.44, respectively) and served one prison sentence (1.02, <u>SD</u>=.13 and 1.00, <u>SD</u>=0.00, respectively) (not shown). They also had approximately two prior convictions, close to 250 days in jail, and had been sentenced to two years in prison (Table 4.4).

Table 4.4

SB 618 STUDY GROUPS HAVE LENGTHY INVOLVEMENT IN THE CRIMINAL
JUSTICE SYSTEM TWO YEARS PRIOR TO PROGRAM ASSIGNMENT

Convictions	Treatment	Comparison
Mean	1.87	1.87
Range	1-7	1-9
Standard Deviation	1.18	1.22
TOTAL	202	194
Jail Days Served		
Mean	265.21	226.55
Range	3-1,041	1-815
Standard Deviation	181.19	168.99
TOTAL	125	97
Prison Days Sentenced		
Mean	754.76	724.81
Range	480-1,940	240-2,190
Standard Deviation	324.27	363.19
TOTAL	63	78

SOURCE: San Diego County Sheriff's Department, SANDAG SB 618 Fourth Annual Evaluation Report

Overall, the two study groups had a similar level and length of involvement in the justice system during the two years prior to program assignment. The extent of their past criminal involvement suggests that the study groups were at risk for having problems with successful community reentry upon release and avoiding future criminal involvement. Therefore, these individuals were a good fit with the program's intended target group.

As anticipated, there were no differences between the two study groups in the conviction charges associated with the instant offense. All of the offenders were convicted of a felony-level offense (100%) (not shown) and the most common type of high charge was related to a property offense (55% for the treatment group and 48% for the comparison group), followed closely by a drug conviction (35% and 41%, respectively), and other (10% and 11%, respectively) charge (Figure 4.3).

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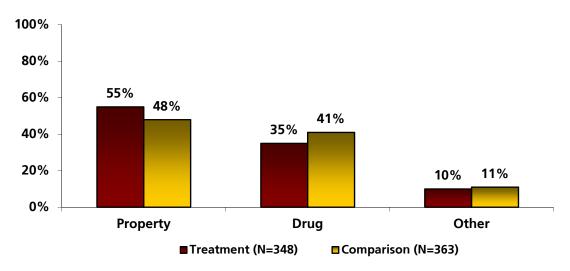


Figure 4.3
SB 618 STUDY GROUPS MOST OFTEN CONVICTED OF PROPERTY AND
DRUG CHARGES FOR THE INSTANT OFFENSE

NOTE: "Other" includes other misdemeanors and felonise, probation violations, infractions, and violent exceptions. SOURCE: San Diego County Sheriff's Department, SANDAG SB 618 Fourth Annual Evaluation Report

While there were no differences between the groups with respect to convictions, analysis of the time incarcerated for the instant offense reveals a longer jail detainment on average for the treatment group (82.94 days, <u>SD</u>=50.38) compared to the comparison group (59.67 days, <u>SD</u>=44.85). Given that the two groups are comparable in the level and type of conviction charge, this difference most likely reflects the time needed to conduct the SB 618 assessments prior to transfer to prison. Additionally, the average prison sentence for offenders in each study group is approximately two and a half years (932.03 days, SD=432.91 and 884.82 days, SD=451.14, respectively) (Table 4.5).

Table 4.5
SB 618 PARTICIPANTS SERVED LONGER JAIL TIME FOR INSTANT OFFENSE THAN THE COMPARISON GROUP

Jail Days Served*	Treatment	Comparison
Mean	82.94	59.67
Range	2 – 543	1 - 242
Standard Deviation	50.38	44.85
TOTAL	346	366
Prison Days Sentenced		
Mean	932.03	884.82
Range	240 – 2,190	240 – 2,400
Standard Deviation	432.91	451.14
TOTAL	347	366

^{*} Differences significant at .05 level.

NOTE: Cases with missing information not included.

SOURCE: San Diego County Sheriff's Department, SANDAG SB 618 Fourth Annual Evaluation Report

WHAT WAS PARTICIPANTS' LEVEL OF NEED AT PROGRAM ENTRY?

As mentioned in Chapter 3, several assessments were administered to treatment participants while still housed in local jail to determine their level of need at program intake. Program staff utilized this information to match participant needs with appropriate program services. Assessment results that were available and helped describe program participants are included in this chapter. Additionally, some information from official prison and program files that helps describe the needs of the treatment group is included.

Overall Participant Needs

Research has identified key issues that frequently challenge ex-offenders in successfully transitioning from prison to the

Assessment of treatment participants' needs reveals:

- almost all are assessed as having severe or significant vocational or substance abuse needs;
- literacy is not an issue for most, but two-thirds still have educational needs;
- almost nine in ten are high risk due to previous noncompliance and prior criminal involvement;
- females are more likely than males to report being a victim of abuse (i.e., emotional, physical, or sexual); and
- many also need help with housing, child support orders, and obtaining identification.

community. These issues include literacy, unemployment, drug and alcohol dependence, and physical and mental health problems (Travis, Solomon, & Waul, 2001). As part of SB 618, program staff was particularly interested in identifying participant needs as they related to the core program service elements that were critical to successful community reentry: substance abuse treatment, vocational training, and educational services. During the professional portion of the multidisciplinary team meeting (MDT) (prior to the team meeting with the participant), assessment results were reviewed and discussed and scores were assigned in each area that best reflected the information available. Scoring of these three areas ranged from "no need" to "moderate" to

"severe/significant need." The results revealed that the majority of the treatment group was in severe/significant need of services in all three areas. Specifically, almost all (95%) had a severe/significant need for substance abuse treatment and vocational services and more than two out of three (68%) scored at the severe/significant level for educational services (Figure 4.4).

Most participants are in need of vocational training and substance abuse programming, while two-thirds have education needs.

Overall, almost two-thirds (63%) of the treatment group were in significant/severe need for services in all three areas (vocational, substance abuse, and education), 33 percent in two areas, 3 percent in only one area, and the remaining 1 percent (5 individuals) scored in the "no need" to "moderate need" range for services (not shown). Thus, these results indicate that the program is reaching the intended population and illustrate the complexity of issues faced by participants, highlighting the importance of treatment coordination.

Results from the Myers-Briggs Type Indicator® (MBTI) and the O*NET are available. However, these assessments measure vocational preferences and job compatibility rather than need; therefore, these results are discussed in Chapter 6, Impact Evaluation, Risk Reduction.

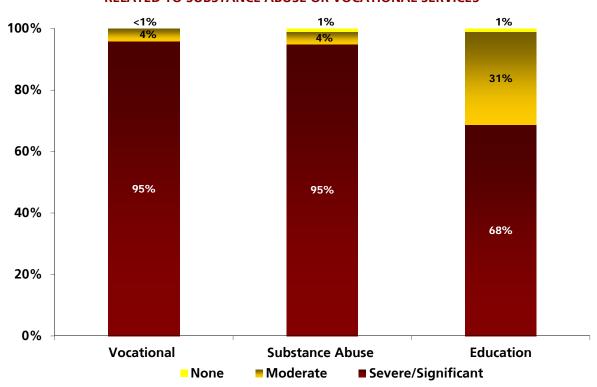


Figure 4.4
NEARLY ALL SB 618 PARTICIPANTS HAVE SEVERE/SIGNIFICANT NEEDS
RELATED TO SUBSTANCE ABUSE OR VOCATIONAL SERVICES

TOTAL = 344-345

NOTE: Cases with missing information not included.

SOURCE: SB 618 Database, SANDAG SB 618 Fourth Annual Evaluation Report

Criminogenic Risks and Needs

As mentioned in Chapter 3, the Correctional Offender Management Profiling for Alternative Sanctions (COMPAS) tool assesses criminogenic risks and needs, as well as protective factors of SB618, and individuals were ranked on a scale from "low risk" to "high risk" in 20 areas. The COMPAS was administered to each treatment participant while in local jail to inform development of the Life Plan.

Main areas of risk for future criminality are in criminal involvement and history of noncompliance with community supervision.

As Table 4.6 shows, more than four in five treatment participants fell

into the high risk level for factors related to: (1) history of noncompliance categorized by failure to appear, positive drug tests, and/or violation of sentencing conditions (86%); and (2) criminal involvement pertaining to number of prior arrests, incarcerations, and other interactions with the criminal justice system (82%). This finding was to be expected given that the target population included criminal offenders, and it was consistent with the extensive past criminal involvement of the treatment group as previously described. When considering the factors that are not directly related to an individual's criminal behavior, treatment participants were most likely to be at high risk in the areas of residential instability (59%) and financial problems/poverty (44%).

Table 4.6
SB 618 PARTICIPANTS AT HIGH RISK FOR RECIDIVISM

		Risk Level	
	Low	Medium	High
Overall Risk Potential			
History of noncompliance	3%	11%	86%
Recidivism	6%	34%	60%
Violence	37%	46%	17%
Criminogenic and Needs Factors			
Criminal involvement	2%	16%	82%
Criminal opportunity	9%	29%	62%
Residential instability	22%	19%	59%
Criminal associates/peers	16%	33%	51%
Financial problems/poverty	25%	30%	44%
Social adjustment problems	16%	41%	43%
Social environment	25%	36%	39%
Criminal thinking/attitudes/cognitions	18%	47%	36%
Social isolation	30%	34%	36%
Leisure and recreation	26%	39%	35%
Criminal personality	22%	44%	33%
Family criminality	42%	25%	33%
Socialization failure	35%	35%	30%
History of violence	46%	30%	24%
Current violence	88%	8%	4%
TOTAL		334-347	

NOTE: Cases with missing information not included.

SOURCE: SB 618 Database, SANDAG SB 618 Fourth Annual Evaluation Report

The areas in which the treatment group had the largest proportion of individuals at low risk included current violence (88%) and history of violence (46%), which is consistent with the program's criteria not to accept violent offenders. Additionally, two in five (42%) were at low risk for family criminality (e.g., had parents/guardians or siblings ever involved in the criminal justice system).

Analyses of COMPAS results were conducted to identify if any factors differed by gender. There were several areas where male treatment participants were *more* likely to be at high risk than their female counterparts, including criminal opportunity (e.g., spending time with high-risk individuals; entering into high-risk, high-crime opportunities; and having limited social ties) (48% for females versus 65% for males), criminal peers (35% versus 55%, respectively), and violence (i.e., calculated based on scores in the areas of history of violence and noncompliance and age at first arrest and at intake) (7% versus 19%, respectively) (not shown).

Education and Life Skill Level

To gauge the treatment group's level of aptitude and need relating to education, the Test of Adult Basic Education (TABE) was administered by staff from Grossmont Union High School District Adult School, which was contracted by the Sheriff's Department to conduct vocational and educational assessments with jail inmates. To evaluate TABE results, raw scores were translated using a norm

Treatment participants have educational and life skills sufficient for success in vocational programming.

table to determine grade equivalency of the individual's reading score (Table 4.7). For SB 618 purposes, a level of 9.0¹⁰ on the reading comprehension portion of this test was identified as a critical point for determining placement into educational and vocational services in prison. Approximately two in five (39%) treatment participants scored at or below that level. Conversely, almost one-third (31%) of participants scored at the 12.9 level (the highest possible grade on the test), indicating that their reading comprehension scores were at or above high school level (not shown).

Table 4.7
MORE THAN HALF OF SB 618 PARTICIPANTS READ AT OR ABOVE HIGH SCHOOL LEVEL AT INTAKE

Percentile Rank	Grade Equivalency Range	Percent Scoring In Range
Above 75 th to 99 th	9.2 - 12.9	61%
Above 50 th to 75 th	6.2 - 9.0	24%
Above 25 th to 50 th	4.0 - 6.0	11%
At or Below 25 th	0.7 - 3.8	4%
TOTAL		346

NOTE: Cases with missing information not included.

SOURCE: SB 618 Database, SANDAG SB 618 Fourth Annual Evaluation Report

The Comprehensive Adult Student Assessment System (CASAS) was a second tool used to evaluate program participants' level of reading and life skills. According to the program design, the CASAS was administered by the Grossmont Union High School District Adult School to each participant prior to the MDT. CASAS scores indicate an individual's ability within a particular category and fall along a fixed metric scale that ranges from under 150 to over 260, with higher scores indicating greater proficiency. As Table 4.8 shows, approximately one-third of the treatment group scored in the category of Advanced Basic Skills (31%). Similarly, around one-third also scored in the higher level categories of Adult Secondary (33%) and Advanced Adult Secondary (30%).¹¹

These CASAS scores indicate that most (94%) of the treatment group possessed the skills needed to participate in vocational programming. Specifically, the description of an individual scoring at the level equivalent to Advanced Basic Skills is as follows:

A reading score at this level indicates that the individual's reading comprehension is at a ninth-grade level. A score of 9.0 falls into the 75th percentile; namely, three-quarters of the general adult population scores are below and one-quarter of scores are above that level.

¹¹ CASAS scores increase from the Advanced Basic Skills level to the Adult Secondary and Advanced Adult Secondary levels as the individual's ability to interpret more complex information increases.

Can handle most routine reading, writing, and computational tasks related to their life roles. Can interpret routine charts, graphs, and labels; read and interpret a simple handbook for employees; interpret a payroll stub. Can handle jobs and job training situations that involve following oral and simple written instructions and diagrams. Persons at the upper end of this score range are able to begin GED preparation (CASAS, no date).

Since over two-thirds scored above the Advanced Basic Skill level on the CASAS, their skills exceeded the above description.

Table 4.8
SB 618 PARTICIPANTS' LIFE SKILLS LEVEL AT INTAKE APPROPRIATE
FOR VOCATIONAL TRAINING

Category (Score Range)	Percent
Advanced Adult Secondary (245 and Higher)	30%
Adult Secondary (235-244)	33%
Advanced Basic Skills (220-234)	31%
Intermediate Basic Skills (210-219)	5%
Beginning Basic Skills (200-209)	1%
Beginning Literacy/Pre-Beginning (150-199)	0%
TOTAL	346

NOTE: Cases with missing information not included.

SOURCE: SB 618 Database, SANDAG SB 618 Fourth Annual Evaluation Report

Substance Use and Treatment

To identify program participant need in the area of alcohol and other drug use, program staff administered the Addiction Severity Index (ASI). Although this assessment includes questions on lifetime substance use history, analyses were restricted to past 30-day substance use to measure the level of need immediately preceding SB 618 program entry.¹²

Substance use is an issue for most participants, with over four in five reporting drug and alcohol use in the 30 days prior to enrollment in SB618.

Analyses suggest that treatment participants had a significant level of need related to alcohol and other drug use. Specifically, when participants were asked about alcohol use, around one in three (37%) reported drinking alcohol to the point of intoxication¹³ at some point in the past 30 days. Those who reported drinking to the point of intoxication had done so an average of 13.37 days (SD=10.80) during that same period (not shown).

Additional questions regarding other drug use revealed about half (51%) of treatment participants had used multiple drugs (not including alcohol) and more than four out of five (84%) used alcohol

As mentioned in Chapter 3, the ASI is re-administered at 30 days following prison exit and again at program exit to measure change in treatment participants over time. Preliminary analyses of matched pre-post assessments are included in Chapter 6.

¹³ Drinking alcohol to the point of intoxication is defined as having five or more drinks of alcohol at one time.

to the point of intoxication or some other drug 30 days prior to program intake. As Table 4.9 shows, more than half of the treatment group reported using methamphetamine¹⁴ (meth) or marijuana (54% and 51%, respectively). Those who reported meth use in the past 30 days used an average of 20.94 days (<u>SD</u>=10.53, range 1 to 30), and marijuana users reported using an average of 15.56 days (<u>SD</u>=11.49, range 1 to 30) (not shown). Powder cocaine (24%) was the next drug most commonly reported, followed by heroin/opiates (18%). Analysis showed significant differences related to drug use. Specifically, males were more likely to report using at least one drug, as well as methamphetamine, in the past 30 days compared to their female counterparts (88% of males reported using at least one drug versus 69% of females and 57% of males were meth users versus 41% of females). Females were significantly more likely than males to report using sedatives during that same timeframe (12% versus 5%, respectively) (not shown).

Table 4.9
MAJORITY OF SB 618 PARTICIPANTS REPORT DRUG USE IN THE
30 DAYS PRIOR TO INTAKE

Substance Used	Percent
Any alcohol or drug use	84%
Methamphetamine	54%
Marijuana	51%
Multiple drugs	51%
Alcohol to intoxication	37%
Powder cocaine	24%
Heroin/opiates	18%
Other drug	9%
TOTAL	317

NOTES: Percentages based on multiple responses. The other drug category includes barbiturates, hallucinogens, inhalants, methadone, and sedatives.

SOURCE: SB 618 Database, SANDAG SB 618 Fourth Annual Evaluation Report

Information about involvement in previous drug and alcohol treatment also is collected as part of the ASI. As Figure 4.5 shows, almost half (48%) of the treatment group had previously received drug treatment services, with an average of 2.77 prior treatment episodes (<u>SD</u>=2.75, ranging from 1 to 25 times) (not shown). A much smaller proportion (9%) had received alcohol treatment, with an average of 3.20 prior treatment episodes (<u>SD</u>=5.69, range 1 to 25 times). Additionally, 19 percent had been in a detoxification program for drug abuse and 7 percent for alcohol. As discussed in Chapter 1, the literature is clear that individuals struggling with substance abuse are likely to relapse, and therefore recidivate, unless they receive appropriate aftercare. Further analysis showed that, of those treatment participants who reported using drugs and/or alcohol in the 30 days prior to intake, 57 percent had previously received some type of drug and/or alcohol treatment (not shown).

¹⁴ Although the term "amphetamines" includes several substances, such as amphetamine sulphate, dexamphetamine, and methamphetamine, in this report methamphetamine (meth) is used as a generic term to include all amphetamine-like substances because it is the most widely used amphetamine within San Diego County.

¹⁵ Specificity of treatment type (e.g., inpatient, outpatient) is not provided through the ASI.

100% 80% **57%** 60% 48% 40% 19% 20% 9% **7**% 0% **Alcohol Detox Drug Treatment Drug Detox** Alcohol Any **Treatment/Detox Treatment**

Figure 4.5
ALMOST HALF OF SB 618 PARTICIPANTS HAVE PREVIOUSLY RECEIVED DRUG TREATMENT

TOTAL = 316-317

NOTES: Cases with missing information not included. Percentages based on multiple responses. SOURCE: SB 618 Database, SANDAG SB 618 Fourth Annual Evaluation Report

Family and Community Ties

Research has shown that family and peer' support is important for successful reintegration during reentry. More specifically, quality and positive relations have been found to be more predictive of the development of strong social networks, leading to positive outcomes (Wolff and Draine, 2004). Based on results of the ASI, in addition to alcohol and drug addiction at the time of intake, participants lacked positive family relationships and social support. Part of the SB 618 goal of recovery and successful reintegration into the community is having strong support systems in place. To ensure participants have positive social support after being released from prison, the CCM and PCM work with participants and their families and peers to build positive, strong relationships, and encourage participants to affiliate with people who are supportive of their recovery. To explore family and social relationships, treatment participants were asked if they had close, long-lasting relationships with immediate family members, their partner or spouse, as well as with any of their friends. The scale for rating relationship closeness ranged from zero ("not at all") to four ("extremely"). 16 Although no participants reported not having a close relationship at all, only one percent to five percent rated their relationship with anyone other than their own children (i.e., friends, spouse, or other family member) as considerably/extremely close (Table 4.10), suggesting that participants would benefit from assistance with strengthening their support systems in the community and/or with family members to increase their social capital.

¹⁶ For the purpose of this analysis, the categories of "considerably close" and "extremely close" were combined.

Table 4.10
SB 618 PARTICIPANTS MOST LIKELY TO REPORT CLOSE RELATIONSHIPS
WITH THEIR CHILDREN

	Rated Level of Closeness		
	Slightly	Moderately	Considerably/ Extremely
Mother	27%	71%	1%
Father	54%	44%	3%
Siblings	23%	72%	5%
Partner/Spouse	24%	74%	2%
Children	14%	49%	37%
Friends	25%	73%	2%
TOTAL		314	

SOURCE: SB 618 Database, SANDAG SB 618 Fourth Annual Evaluation Report

When looking at family relations by gender, males were significantly more likely to perceive being considerably/extremely close to their children compared to their female counterparts (40% and 19%, respectively) and females were significantly more likely than males to report being only slightly close to their mother (41% versus 24%, respectively) (not shown).

Emotional, Physical, and Sexual Abuse History

Although this analysis has focused on past 30-day drug use, lifetime information on physical, emotional, and sexual abuse reported by program participants is included due to the lifetime impact these experiences can have on an individual. Females were significantly more likely to report being a victim of abuse in all three areas. Specifically, more than half of females reported being victims of emotional (67%) and physical abuse (58%) at some point in their life. Although males also reported emotional and physical abuse (30% and 22%, respectively), it was less prevalent than for females. In addition, slightly more than one-third (35%) of females reported being victims of sexual abuse compared to only four percent of their male counterparts (Figure 4.6). This disparity between female and male self-reporting of sexual abuse may be due to a tendency by males to underreport abuse, fearing that they would not be regarded as masculine or because they do not identify instances of abuse as such (Sorsoli, Kia-Keating, & Grossman, 2008).

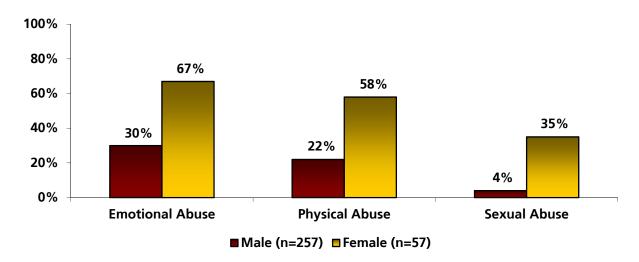


Figure 4.6
FEMALE SB 618 PARTICIPANTS MORE LIKELY TO REPORT PRIOR ABUSE*

*Differences significant at .05 level.

NOTE: Percentages based on multiple responses.

SOURCE: SB 618 Database, SANDAG SB 618 Fourth Annual Evaluation Report

SB 618 was designed to include gender-responsive services, especially as they relate to issues of abuse among female participants. To that end, the PCM and the Prison Case Management Coordinator (PCMC) at the California Institution for Women (CIW) have received special training by experts in the field of gender-responsive treatment to learn how to appropriately address the sensitive nature of sexual abuse. Based on the "relationship model" (Covington and Surrey, 1997) arguing that women change, grow, and heal through relationships and mutual connections with others, the PCMs at CIW held monthly meetings in a safe, supportive, women-focused environment designed to encourage participants to come together, learn to trust staff and each other, exchange ideas and information, and form relationship bonds. CIW also maintained a library of therapeutic material available as both professional references for staff, as well as a source of self-help reference for participants who have survived various types of trauma and abuse.

Severity of Need for Intervention and Services

The severity index is another measure of behavior and service needs (i.e., medical, vocational, drug, alcohol, legal, family and social, and psychiatric services) based on self-report information collected through the ASI. This standardized scoring system is conducted to assess the severity of need in each area. The ASI generates scores of zero to nine ("0" indicating no need for treatment and "9" indicating treatment is needed to intervene in a life-threatening situation). Participants with a score between five and six would benefit from treatment. A score greater than six suggests a considerable problem and that treatment is necessary. The ratings are based upon the participant's history and present condition in each area of interest. Analyses were conducted to measure what type of treatment or service was of greatest need at the time of program intake.

As Table 4.11 shows, drug treatment was the area of greatest need with four in five (82%) having a score of five or higher, followed by legal services (68%) (which is expected in an offender population), and vocational (63%). Around one-third had scores five or higher in the family/social services (30%) and alcohol treatment (26%) areas, suggesting a need for these services as well.

Table 4.11
DRUG TREATMENT IS THE GREATEST NEED FOR SB 618 PARTICIPANTS AT PROGRAM INTAKE

Service Provided	Percent in Need of Treatment*	ASI Average Severity Score
Drug treatment	82%	6.2
Legal services	68%	5.4
Vocational services	63%	4.7
Family/social services	30%	3.3
Alcohol treatment	26%	2.6
Psychiatric treatment	11%	1.5
Medical services	9%	1.5
TOTAL	313-314	

^{*} Severity score of 5 or higher.

NOTE: Cases with missing information not included.

SOURCE: SB 618 Database, SANDAG SB 618 Fourth Annual Evaluation Report

Other Areas of Need

The CCM documented information regarding the treatment group's needs with respect to their family situation. Analyses revealed that slightly under half (44%) of the treatment group was the

parent of at least one child 17 years old or younger. More than one-third (39%) of those who had children were ordered to pay child support. On average, these participants had 2.0 children (ranging from 1 to 8 children). Although more than half (56%) of those who had been ordered to pay child support were only ordered to pay for one child, the remaining 44 percent were ordered to pay child support for multiple children (not shown).

Participants' other areas of need include help with child support orders and obtaining identification.

One common obstacle faced by inmates being released into the community is obtaining valid identification necessary for everyday life, such as securing a place to live, employment, and getting a driver's license. Part of the CCM's role is to assist those participants who need to get identification cards. According to CCM records, 72 percent of the treatment group needed a driver's license upon prison exit, 64 percent needed a birth certificate, and 59 percent needed a social security card (not shown).

DID TIMING DECREASE IN TERMS OF IDENTIFYING PARTICIPANT NEEDS AND PROVIDING APPROPRIATE SERVICES (I.E., TIME NORMALLY SPENT AT RECEPTION CENTERS)?

The goal of SB 618 is to efficiently utilize time in prison to address needs related to community reentry upon release. To most effectively identify individual needs, assessments were completed while participants were in local custody (prior to prison entry) to expedite admission into needed services upon prison entry. As a result, program partners were particularly interested in the number of days from the time a participant could be assessed to the time the assessments were completed.

Participants are assessed within the expected timeframe so that program services can be utilized efficiently during custody.

Table 4.12 shows the percent of participants assessed within the desired timeframe, as well as the average number of days that elapsed until the different assessments were completed. For those assessments that were conducted while the participants were in local jail, the time that elapsed from the date participants were offered and accepted SB 618 services to assessment was within the expected 14-day period for about three-quarters or more of the treatment group for the ASI, CASAS, and TABE (ranging from 72% to 78%). On average, it took between 10.56 and 12.08 days to complete these jail assessments. COMPAS assessments were less likely to be completed within the 14-day period because, in practice, there was typically a seven-day delay in probation staff receiving information that new participants were enrolled, at which time they scheduled a visit with the participant to complete the assessment. As such, less than half (45%) of the treatment group completed their COMPAS within the 14-day period with the assessment being done approximately 15.83 days after the program was offered, which was only three days beyond the desired timeframe on average.

Table 4.12
SB 618 PARTICIPANTS' LEVEL OF NEED ASSESSED WITHIN THE EXPECTED TIMEFRAME

	Assessed Within 14-Day Target Period	Average Days to Assessment (Mean)	Standard Deviation
In-Jail Assessments			
ASI	72%	12.08	9.43
CASAS	78%	10.58	6.22
COMPAS	45%	15.83	6.70
TABE	77%	10.56	6.39

NOTE: Cases with missing information not included.

SOURCE: SB 618 Database, SANDAG SB 618 Fourth Annual Evaluation Report

According to program staff, housing was the main obstacle in completing assessments on time in the local jail. Specifically, when treatment participants were housed in areas other than the general population (e.g., medical, administrative segregation), staff who administered assessments were not permitted to meet with them because of security issues.

The greatest obstacle to completing assessments within the expected timeframe prior to entering prison is related to jail housing classification.

Further analyses were conducted to determine if there were any differences in the amount of time that elapsed before assessments were completed based on gender or race/ethnicity. There were significant differences by gender, with the CASAS being conducted within a shorter timeframe for female participants compared to males (8.78 days, <u>SD</u>=7.07, range 1 to 41, versus 10.95 days, <u>SD</u>=5.98, range 0 to 42, respectively) as was the TABE (8.63 days, <u>SD</u>=7.02, range 1 to 41, versus 10.95 days, <u>SD</u>=6.19, range 0 to 42, respectively) (not shown). This difference is likely related to lockdowns and guarantine issues that limited accessibility to the men's detention facility.

Part of the assessment process in jail includes the convening of the MDT to discuss the participant's individualized Life Plan that details which services are needed. As explained in Chapter 3, these meetings are held after risks and needs assessments are administered in local custody. The results of these assessments influence the Life Plan discussed during the MDT meeting. The length of time required to complete these assessments is reflected in the length of time from enrollment to MDT. On average, the MDT meetings were held 20.45 days (SD=5.65, range 10 to 52) from the time participants were offered and agreed to enroll in the program. Also, this average differed significantly by gender, with the time to MDT meetings being shorter for males (19.92 days, SD=5.08, range 10 to 52), on average, than for females (22.97 days, SD=7.39, range 14 to 51) (not shown). This difference was most likely because MDT meetings were held less frequently at the female facility since fewer females than males entered the program. MDT meetings were scheduled every Thursday at the local male facility and as needed on Fridays at the female facility.

As a cost-saving measure, program efforts focused on reducing the time treatment participants spent in the reception center compared to prisoners not in SB 618. Program staff made positive progress toward this goal, as the average time treatment participants spent in reception was 42.34 days (<u>SD</u>=33.20, range 13 to 331), which was significantly fewer days than the comparison group (76.71 days, <u>SD</u>=56.03, range 16 to 554). Efforts

Overall, participants spend fewer days in the prison reception center than the comparison group, which results in cost savings.

continue to be made by program partners to streamline processes to reduce time participants spend in the prison reception center.

WHAT TYPES OF SERVICES WERE PROVIDED TO PARTICIPANTS IN PRISON? WHAT WAS THE DOSAGE/INTENSITY? DID THE SERVICES RELATE TO THE PARTICIPANT'S NEEDS IDENTIFIED DURING ASSESSMENT? IF NOT, WHY?

Data were collected from various program files to determine what services treatment participants received while in custody and analyses were conducted to determine how individual needs matched services received.¹⁷ The ability to participate in programs while in prison is related to length of stay. For the 301 individuals (248 males and 53 females) in the treatment group released from prison and on parole, the average number of days spent in prison was 395.0 (SD=190.5, range 50 to 973 days). There was a significant difference by gender in the amount of time spent in prison with males spending 78 days more in prison than females (408.8 compared to 330.8). Males also were more likely to spend more time in general population than females (365.2 days compared to 288.4). There were no significant differences by gender in the time spent in the prison reception center (42.6 days, as mentioned previously). The difference in length of time in general population may be related to rule violations while in prison, which can extend the length of time served.

In-Prison Case Management

PCM In-Custody Service

Research shows that when a case manager in prison engages a prisoner in the development of their release plan, the individual tends to be more motivated to adhere to the terms outlined in the plan (La Vigne, Davies, Palmer, & Halberstadt, 2008) and therefore more successful. As described in Chapter 3, program participants are assigned to a PCM at prison entry to broker in-prison services to meet their needs previously identified during the assessment process. Research staff collected information from PCM files regarding PCM-participant contacts, as well as services received by treatment participants.¹⁸

As part of the program design, PCMs were expected to attend MDT meetings for each participant and meet with participants during their prison stay. Table 4.13 shows the frequency of meetings between the PCM and treatment participants with respect to these program goals, as well as other

Service provision for the treatment group in prison includes the following activities.

- All females and two-thirds of males meet with the PCM during the first three months of prison entry and more than nine in ten meet with the PCM during the six months before prison release.
- Nearly all meet with the CCM while in prison to plan for services in the community.
- Overall, 82 percent participate in prison programming.
- Nine in ten with a substance abuse need receive related services, as well as about half of those with vocational needs, and two in five with an educational need.
- ▶ Gender differences related to services received in prison include females meeting more frequently with the PCM than their male counterparts, males being more likely to participate in vocational training, and females participating more often in educational services.

¹⁷ Information about participant's satisfaction with in-prison program services is available in Chapter 7.

¹⁸ Dosage/intensity for in-prison services provided was available for Prison Case Management contacts only and not for inprison programming (e.g., vocational programming, educational programming, etc.).

face-to-face meetings that occurred prior to release (i.e., in jail, at the prison housing classification meeting, and at PCMC-led groups). As designed, nearly all treatment participants met with a PCM in prison one or more times (95% of males at the Richard J. Donovan (RJD) Correctional Facility and 100% of females at the California Institution for Women (CIW) [Table 4.13]). As described in Chapter 3, RJD staff did not meet with participants in jail. Male treatment participants at RJD were significantly less likely than females at CIW to have have PCM representation at their MDT meeting (72% versus 94%) or their classification meeting (28% versus 68%). These differences were due at least in part to the staffing shortages that RJD experienced throughout the evaluation period. PCMC-led groups were only available at CIW and were attended by eight out of ten female treatment participants (83%). During these group meetings, participants share information regarding the program and updates on participants who have been released into the community.

Table 4.13
NEARLY ALL SB 618 PARTICIPANTS MET WITH PCM WHILE IN PRISON

	% Treatment Who Had Contact	
Contact Type	RJD	CIW
Jail*	N/A	79%
MDT*	72%	94%
Prison classification meeting*	28%	68%
In prison	95%	100%
PCMC-led group	N/A	83%
TOTAL	212-213	53

^{*} Differences significant at .05 level.

NOTE: Cases with missing information not included.

SOURCE: PCM Official Records, SANDAG SB 618 Fourth Annual Evaluation Report

By design, the frequency of PCM meetings with participants varies throughout the prison term similar to an hourglass, with weekly meetings in the beginning, less in the middle, and weekly again six months prior to release. To explore the consistency between actual practice and this design, the number of contacts during the prison stay was analyzed for the first three months of imprisonment and for the last six months before prison release.

As Table 4.14 shows, all (100%) female treatment participants had contact with their PCM within the first three months of prison entry, whereas fewer than three-fourths (69%) of the males had contact during that same time period, which was a significant difference. Additionally, females who had met with their PCM during that same time did so significantly more often per month on average than males (9.55 contacts compared to 4.02, respectively). Females and males were equally likely to have had one or more face-to-face contacts during the six months prior to release (92% of females had contact and 91% of males), though females had significantly more contacts than males (12.53 contacts compared to 5.18, respectively). Institutional differences were related to these research findings. For example, participants in general population at CIW could walk to the PCM offices at will, while inmates in the RJD had to request written permission prior to the meeting (i.e., through the prison "ducat" process). Another factor that likely impacted these differences was PCM staffing shortages at RJD.

Table 4.14
CIW PARTICIPANTS HAVE GREATER NUMBER OF PCM CONTACTS ON AVERAGE DURING
THE FIRST THREE AND LAST SIX MONTHS OF PRISON STAY THAN THOSE AT RJD

Timeframe	RJD	CIW
Within first three months of prison entry		
Participant had PCM contact*	69%	100%
Average contacts per month*	4.02	9.55
Standard Deviation	2.74	3.43
Six months prior to release		
Participant had PCM contact	91%	92%
Average contacts per month*	5.18	12.53
Standard Deviation	2.99	7.74
TOTAL	120-171	43-47

^{*} Differences significant at .05 level.

NOTE: Cases with missing information not included.

SOURCE: PCM Official Records, SANDAG SB 618 Fourth Annual Evaluation Report

At CIW, Licensed Clinical Social Workers (LCSW) filled the role of PCM from the onset of program implementation. Initially, staff who had previously worked as educators performed PCM duties at RJD. By May 2008, RJD also had hired LCSWs to fulfill the PCM duties in place of the educators. Because of this shift in program staffing, program partners were interested in differences in service provision at RJD before and after May 2008. Overall, 7 percent of male treatment participants received PCM services from an educator only, 35 percent from a LCSW and an educator, and 60 percent from a LCSW only (not shown).

On average, females met with the PCM more frequently (27.72 contacts, <u>SD</u>=19.44, range 0 to 90), on average, than males (9.97, <u>SD</u>=7.87, range 0 to 42) (not shown) during their prison stay. To further examine the impact of the shift from educators to social workers at RJD, the average number of face-to-face contacts per month between PCMs and treatment participants was examined over time to see if there were any changes (Figure 4.7). Findings revealed female participants at CIW continued to have more frequent face-to-face contact with their PCM than did their male counterparts for all months.

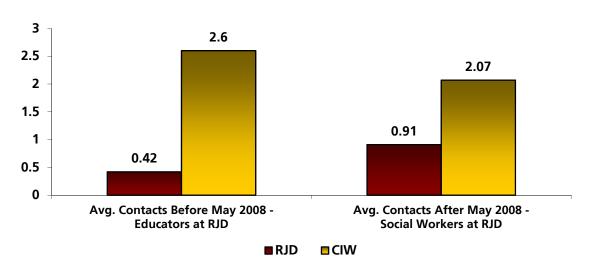


Figure 4.7
CIW PARTICIPANTS HAD GREATER AVERAGE NUMBER OF FACE-TO-FACE CONTACTS
PER MONTH WITH PCM REGARDLESS OF RJD SWITCH TO SOCIAL WORKERS

NOTE: Cases with missing information not included.

SOURCE: PCM Official Records, SANDAG SB 618 Fourth Annual Evaluation Report

CCM In-Custody Services

According to the program design, each participant begins meeting with an assigned CCM approximately six months (or 180 days) prior to their release from prison. CCM files were available for 194¹⁹ of the 213 treatment participants who had been released from prison 12 months or more prior to August 31, 2010 (end date for this report). Analysis revealed that the treatment participants were first seen by the CCM 131.8 days (SD=50.18, range 1 to 445) prior to prison release on average (not shown). Some factors that would affect the CCM's ability to make the first contact with participants at the six-month mark include a participant not being in prison for at least six months (which was the case with 12 treatment participants) and changes to a participant's estimated prison release date (EPRD). The CCM relies on the EPRD provided by CDCR and it is not uncommon for that date to change based on various circumstances (including behavior in prison and prison capacity). Therefore, the CCM contacts may not happen at the six-month mark as was the original program design.

During their time in prison, 99 percent of treatment participants met with their CCM to plan for service provision upon release. On average, CCMs met with treatment participants 5.5 times (SD=2.80, range 1 to 16) prior to release. During the prison stay, CCMs often meet with collateral contacts to provide comprehensive support for participants. CCMs made collateral contact on behalf of just under half (44%) of the treatment group while they were in prison. These collateral contacts were made with individuals (such as probation officers, PCMs, Vocational Specialists, and friends and family members) 2.5 times on average (SD=2.43, range 1 to 12) (not shown).

¹⁹ Nineteen individuals were dropped from the program before they were available to receive CCM services (17 dropped for noncompliance, one due to housing issues in prison, and one voluntarily dropped out of the program).

Prison Programs

Vocational Services

The types of vocational programs available varied by prison, with RJD offering cable technology/fiber optics, machine shop, welding, and mill and cabinetry, as well as warehouse training through the Prison Industry Authority (PIA).²⁰ CIW offered PIA sewing, office services, word processing, graphic arts,²¹ and PIA construction as part of the vocational services. According to program files, more than half (53%) of male participants and almost one-third (32%) of females who were released by August 2010 participated in vocational training while in prison, a statistically significant difference (not shown).²² (Information about how participation in vocational programming matched treatment participants' needs is provided later in this chapter.) About two-thirds (64%) of males who participated in vocational training were enrolled in the cable technology/fiber optics program, while females participated in PIA sewing more often than other vocational training (41%) (Table 4.15). At RJD, participation in a specific vocational program was related to program accessibility for treatment participants because of their housing assignments²³ and not necessarily a preference for the program.

Table 4.15
CABLE TECHNOLOGY AND SEWING ARE MOST COMMONLY
ACCESSED VOCATIONAL PROGRAMS

Vocational Services at RJD	Percent
Cable Technology/Fiber Optics	64%
Machine Shop	23%
Welding	16%
Mill and Cabinetry	3%
Prison Industry Authority (PIA) Warehouse	3%
TOTAL	113
Vocational Services at CIW	Percent
Prison Industry Authority (PIA) Sewing	41%
Office Services	35%
Word Processing	18%
Prison Industry Authority (PIA) Construction	12%
TOTAL	17

NOTES: Cases with missing information not included. Percentages based on multiple responses.

SOURCE: PCM Official Records, SANDAG SB 618 Fourth Annual Evaluation Report

The PIA is a State-operated agency providing work assignments for inmates in State adult correctional institutions. PIA does not receive funding from the State and instead is self-supporting from the sale of its products and services.

²¹ Based on data collected for this report period, no female treatment participants have participated in the graphic arts program at CIW.

Four male treatment participants and one female are not included because they were not available to participate in vocational services during their time in prison.

²³ Housing assignments at RJD are based on an inmate's security level. At RJD, cable technology/fiber optics and welding were available in the minimum security facility and machine shop and mill and cabinetry were available in the medium level facility (i.e., where inmates requiring level 3 security are housed).

Substance Abuse Services

As described in Chapter 3, substance abuse programming (SAP) was the only alcohol and drug service available to participants at both RJD and CIW. Treatment participants who were involved in substance abuse services while in prison first participated in SAP and then may have become eligible to serve a portion of their sentence in drug treatment furlough (DTF).²⁴ Almost two-thirds (59%) of the treatment group participated in SAP, with females significantly more likely than their male counterparts to participate (79% versus 54%). This participation rate is considerably higher than the 10 percent of inmates receiving substance abuse services while in prison in the State of California (CDCR, no date). One in four (25%) individuals who participated in SAP were determined to be eligible to serve the final portion of their sentence in DTF, and of those, 11 percent entered DTF (not shown). This result supports the fact that DTF beds were never filled to maximum capacity, which was the program goal, partially due to treatment participants not spending enough time in general population to complete the required number of days in SAP to be eligible for DTF. Another factor was the interruption in SAP services during the evaluation period, as described in Chapter 3.

Educational Services

Since research findings suggest that participation in prison educational programs has been found to reduce recidivism (Steurer, Smith, & Tracy, 2001), the program design includes assessing educational needs and providing services. Overall, two in five (43%) treatment participants received educational services while in prison, which significantly differed by gender with females receiving more educational services than males (59% compared to 39%) (not shown). Over half of males and females received educational services in the form of college courses (59% and 52%, respectively), indicating that many participants had already completed high school or their GED at a minimum (Table 4.16), which was consistent with TABE scores discussed previously. Another educational service utilized frequently by participants were GED (38% AT RJD and 32% at CIW) and adult basic education classes (32% at CIW).

Table 4.16
ABOUT ONE IN THREE OR MORE FURTHERED EDUCATION THROUGH
GED SERVICES AND COLLEGE COURSES

Educational Services	RJD	CIW
College Courses	59%	52%
GED	38%	32%
Adult Basic Education	9%	32%
Bridge	5%	3%
Independent Study	1%	3%
Literacy	0%	0%
TOTAL	82	31

NOTES: Percentages based on multiple responses. Cases with missing information not included. Bridge is an educational program in reception where homework is assigned to offer opportunity to work on skills independently; no instruction is given.

SOURCE: PCM Official Records, SANDAG SB 618 Fourth Annual Evaluation Report

²⁴ The Drug Treatment Furlough (DTF) process is more fully described in Chapter 3.

Match of Assessed Need to In-Prison Services Received

One of the PCM's goals is to help inmates get involved in prison programs that will enhance their successful reentry into the community. As such, four out of five (82%) treatment participants were involved in vocational, substance abuse, and/or educational services while in custody, and four percent were employed while in prison.²⁵ Female treatment participants were significantly more likely to be involved in one of the above prison programs compared to males in the same group

CIW participants with an identified need are more likely to receive substance abuse and education services, while those in RJD are more likely to get vocational programming.

(94% compared to 85%, respectively)²⁶ (not shown). At CIW, all inmates are required to participate in programs while in custody, which is not the case at RJD and may partially explain the gender difference in prison program participation by gender.

To examine the relationship between assessed need and programming, analyses were conducted on treatment group assessment scores and the actual program received. Overall, the services the treatment group received matched their needs, though all individuals with a need did not receive the necessary services. Specifically, 82 percent of participants with needs received some type of programming while in prison (not shown). Male treatment participants at RJD with a severe or significant need for vocational programming were significantly more likely than their female counterparts at CIW (54% versus 34%) to receive vocational programming in prison (Table 4.17). However, females with a severe or significant need for substance abuse treatment and educational services were significantly more likely to participate in a program to address these specific needs while in prison compared to males with the same level of need (84% versus 54% for substance abuse treatment, and 75% versus 43% for educational services). Differences by facility with respect to vocational and educational services are due in part to differences in how areas of need are prioritized and the availability of services. For example, CIW prioritizes education over vocational training needs. In addition, program availability has been an issue at RJD, 27 with the closure of some vocational programs, delay in starting up new vocational programs, existence of limited educational services depending on participant housing assignments, and elimination of SAP.

²⁵ Three of those who were not involved in prison programming or employed while in prison were females who voluntarily dropped from the program while in prison. The remaining 32 treatment participants who did not participate in any programming while in prison were male. Fifteen of these males had been dropped from the program due to bad behavior or a new prison term, which may have limited their availability to participate in programming, and one refused services citing poor health.

²⁶ Because not all prison programs were available during the entire reporting period from July 2007 to August 2010 as described in Chapter 3, the analyses factored in the timing of when programs were operational for each treatment participant.

²⁷ Program partners have been diligent in improving availability of prison programs at RJD. More detail regarding these efforts is described in Chapter 3.

Table 4.17
FEMALE PARTICIPANTS MORE LIKELY TO RECEIVE SUBSTANCE ABUSE TREATMENT AND EDUCATION, WHILE MALES PARTICIPATE IN VOCATIONAL PROGRAMS

	Participation by Facility			
	RJD		CIW	
	Percent	Total	Percent	Total
Vocational Programming				
Severe/significant need*	54%	105	34%	16
Moderate/some need	70%	7	25%	1
No need	N/A	0	N/A	0
Substance Abuse				
Severe/significant need*	54%	109	84%	36
Moderate need	60%	3	75%	6
No need	100%	1	N/A	0
Educational Services				
Severe/significant need*	43%	60	75%	21
Moderate need	30%	20	39%	9
No need	100%	4	100%	1

^{*} Differences significant at .05 level.

NOTE: Cases with missing information not included.

SOURCES: SB 618 Database and PCM Official Records, SANDAG SB 618 Fourth Annual Evaluation Report

WHAT SERVICES WERE PARTICIPANTS REFERRED TO AFTER RELEASE? WHICH POST-RELEASE SERVICES WERE ACCESSED? WHAT WAS THE DOSAGE/INTENSITY? DID THESE SERVICES RELATE TO THE NEEDS IDENTIFIED DURING ASSESSMENT? IF NOT, WHY?

A key element of the program design is providing seamless services to program participants in prison and after their release into the community. This design is implemented through case management and assistance accessing needed services (e.g., substance abuse treatment, employment, housing assistance, and clothing assistance) in the community. The following section describes the post-release services treatment participants received following release.²⁸ Upon prison release, 195 treatment participants were available to receive services in the community.²⁹

CCM Post-Release Services

Program participants continued to receive CCM services from release into the community until program completion (12 months post-release),

Services for treatment group in the community include the following.

- Substance abuse needs are most commonly met through referrals given by CCM and these services are accessed by the largest number of participants.
- ▶ Employment, clothing, and housing needs also are commonly addressed during this period.
- Almost all have regular contact with the CCM after release and this contact occurs during the critical three-day period after prison release for 52 percent.

finished aftercare services (up to 18 months post-release), declined further services, or dropped from the program. The CCM provided a range of services to program participants in the community, including post-release case management, service coordination, attendance at the Community Roundtable, stabilization funds, and referrals to aftercare services (e.g., substance abuse programs and mental health services).³⁰

As Table 4.18 shows, almost all (99%) treatment participants had contact with their CCM either face-to-face, by telephone, text messages, or e-mail during the 12-month period after prison release.³¹ The CCMs met face-to-face with treatment participants approximately 12.0 times (<u>SD</u>=6.2, range 1 to 45) and made other types of contact with 84 percent of the treatment group approximately 10.2 times (<u>SD</u>=10.68, range 1 to 47). The CCMs also contacted individuals who played supportive professional or personal roles in the successful community reentry of program participants.

²⁸ Information about participant's satisfaction with program services post-release is available in Chapter 7.

²⁹ An open-ended question on the follow-up interview asked if there were any services that were difficult to get in the community. Overall, services were accessible, with about three-quarters (76%) noting that services were not difficult to get. The 18 respondents who did find some services challenging to access specified the following areas: employment (5), basic necessities (e.g., food, clothing) and medical care (4 each), dental services and transportation (3 each), substance abuse treatment and medication management (2 each), and housing, financial assistance, obtaining identification documents, child support, and legal services (1 each).

³⁰ Dosage/intensity of community services is available for Community Case Management contacts and Community Roundtable meetings only.

³¹ Efforts were made by the CCM, though unsuccessful, to contact the two individuals who did not have any face-to-face post-release contacts with the CCM.

Table 4.18
CCM AND SB 618 PARTICIPANTS ARE IN REGULAR CONTACT
DURING THE 12-MONTH PERIOD AFTER PRISON RELEASE

	Type of Contact	
Contacts	Face-to-Face	Other
Treatment Participants		
Had contact	99%	84%
Average number of contacts	12.0	10.2
Range	1-45	1-47
Standard Deviation	6.20	10.68
Other Professional Individuals		
Had contact	71%	48%
Average number of contacts	2.2	5.9
Range	1-10	1-29
Standard Deviation	1.62	6.43
Friends and Family		
Had contact	7%	17%
Average number of contacts	1.8	3.6
Range	1-12	1-30
Standard Deviation	2.94	5.19
TOTAL	194	4

NOTE: Cases with missing information not included.

SOURCE: CCM Official Records, SANDAG SB 618 Fourth Annual Evaluation Report

Experts in reentry have concluded that the "moment of release" from prison, and specifically the first 72 hours, can be the most critical time for ex-offenders as they transition from a controlled environment to civilian life (Ball, Weisberg, & Dansky, 2008; National Research Council, 2008; Travis, et al., 2001). As such, part of the program design is for the CCM to be on-call 24 hours per day

during that time. Over half (52%) of treatment participants accessed this service and had some type of contact with their CCM within three days of their prison release and one-quarter (24%) had contact within the first 24 hours. These results may be impacted by the fact that some participants were released from prison directly to residential treatment, which includes a blackout period when no contact is

Over half of participants have contact with CCM during critical three-day period after prison release.

allowed with anyone outside the facility. On average, CCMs had their first contact of any type with treatment participants 9.0 days (<u>SD</u>=15.14, range 0 to 93) after prison release. Another service that CCMs provided involved meeting the participants at the prison gate upon release. Information obtained during follow-up interviews showed that 13 percent of the 135 respondents specified that the CCM was the person meeting them at the prison upon release. About one-quarter relied on family members for transportation (28%) or indicated they were on their own (22%). Fifteen percent reported being picked up by someone from a treatment or sober living facility and about one in ten (9%) had a friend pick them up (not shown).

Additionally, stabilization funds are sometimes provided by the CCM's as part of the wrap-around services. Almost half (46%) received an average of \$245.76 (<u>SD</u>=\$145.48, range \$9.00 to \$822.14) in funds through the CCM to pay for clothing for employment, identification (e.g., birth certificate or driver's license), and public transportation passes most often (not shown).

Research studies indicate that the support of family members is key to reducing recidivism by providing financial and emotional support. Best practices conclude that involving family members in the ex-offender's reentry plan will improve their successful integration into the community (La Vigne, et al., 2008; La Vigne, Visher, & Castro, 2004). As an evidence-based program, SB 618 incorporated the Community Roundtable, which is a multidisciplinary forum formalizing regular meetings among the participant, parole agent, CCM, and other individuals selected by the participant who are supportive of their successful reentry. The Community Roundtable meets to discuss existing needs, review the Life Plan, and ensure that the participant is on the right path.

Based on the data maintained by the CCMs, 66 percent of the treatment participants attended a Community Roundtable within the first six months on parole. The remaining 34 percent had no Community Roundtable meeting during this timeframe, and one possible explanation is that the process took time to develop. Another obstacle was participant attendance. The average number of meetings attended during this period was 1.4 (SD=0.93, range 1 to 7) per individual. By definition, at a minimum the parole agent and CCM must be present with the participant for the meeting to qualify as a Community Roundtable. Other than these representatives, attendees included the Vocational Specialists (14%), drug treatment counselors (11%), other individuals (8%), and family members (2%). Other individuals included parole agents from the Office of Substance Abuse Treatment Services (OSATS)³² and the early parole discharge program for substance abuse treatment participants (SB 1453), a parole intern, counselor, a psychiatrist, and staff member from the California Department of Rehabilitation (DOR)³³ (not shown).

Analyses were conducted to determine how well the referrals that the treatment participants received from CCM matched their assessed needs. Overall, 95 percent of participants with needs were referred to a service addressing these issues (not shown). Further, as Table 4.19 shows, referrals provided by the CCMs more appropriately matched the substance abuse needs of participants than the vocational or educational needs. Though CCM services were not the primary source for meeting the vocational needs of treatment participants, individuals with a severe/significant (95%) and/or a moderate (46%) need in the specific area received a referral for that dimension. (There were no significant differences on match of need and referral by gender.)

 $^{^{\}rm 32}\,$ Formerly known as the Division of Addiction and Recovery Services (DARS).

³³ DOR administers vocational rehabilitation programming to people with disabilities in California.

Table 4.19
SB 618 PARTICIPANTS' VOCATIONAL AND SUBSTANCE ABUSE NEEDS
MET IN COMMUNITY MORE OFTEN THAN EDUCATION

Level of Need	Percent Who Received Referral	Total
Vocational Programming		
Severe/significant need*	95%	183
Moderate need	46%	13
No need	0%	1
Substance Abuse		
Severe/significant need*	93%	187
Moderate need	63%	8
No need	66%	3
Educational Services		
Severe/significant need*	46%	122
Moderate need	36%	72
No need	100%	3

^{*}Differences significant at .05 level.

NOTE: Cases with missing information not included.

SOURCE: CCM Official Records, SANDAG SB 618 Fourth Annual Evaluation Report

Ninety-five percent of treatment participants who were served by CCMs received one or more referrals to services in the community. The average number of referrals received by these individuals was 6.8 (<u>SD</u>=3.13, range 1 to 16) and the average number of referrals used was 4.9 (<u>SD</u>=3.44, range 1 to 13) (not shown).

Table 4.20 shows detailed information about the percentage of treatment participants who were referred by the CCM and who accessed each type of service. The most common referrals received by treatment participants were to address substance use, including referrals to AA/NA (84%), residential drug treatment (76%), and outpatient drug treatment (59%). Referrals to employment services also were common (received by 65%). The services accessed by the largest number of treatment participants included AA/NA (65% or 95 individuals), inpatient drug treatment (64% or 93 individuals), clothing (79% or 76 individuals), employment services (53% or 56 individuals), and housing (58% or 44 individuals).

Table 4.20
CCMS MOST FREQUENTLY GAVE REFERRALS FOR DRUG TREATMENT AND EMPLOYMENT

Type of Service	Referred	Accessed Service
Alcoholics Anonymous (AA)/Narcotics Anonymous (NA)	84%	65%
Residential/Inpatient Drug Treatment	76%	64%
Employment	65%	53%
Outpatient Drug Treatment	59%	29%
Clothing	53%	79%
Sober living	47%	55%
Education	46%	43%
Housing services	40%	58%
Mental health services	40%	53%
General Relief/Food Stamps	42%	48%
Vocational classes	41%	22%
Food	41%	56%
Medical care	34%	53%
Department of Rehabilitation (DOR)	33%	38%
Dental services	28%	29%
Faith services	26%	63%
Department of Child Support Services (DCSS)	22%	71%
Credit counseling	19%	39%
Legal	15%	24%
Supplemental Security Income/Social Security Disability Insurance (SSI/SSDI)	15%	68%
Other	15%	43%
Veterans Assistance (VA)	8%	73%
TOTAL	191	14-161

NOTES: Cases with missing information not included. The other category of services includes tattoo removal, parenting, childcare, and grief and loss support group.

SOURCE: CCM Official Records, SANDAG SB 618 Fourth Annual Evaluation Report

Overall, 161 SB 618 participants utilized one or more services referred to them by the CCM and 52 did not. Analyses were conducted to determine if there were any differences between those who followed up on a community referral (full treatment participants) versus those with no referral follow-up (partial treatment participants). As shown in Table 4.21, differences did exist between the two groups. Specifically, the full treatment participants tended to be older and scored lower on criminal thinking scales than the partial treatment group counterparts. These differences may help program partners identify strategies to engage participants who may need a higher level of motivation to follow through on resources that may keep them from recidivating. Additionally, although full treatment participants spent a significantly greater number of days in the community

on average (332.0 days), the number of days partial treatment participants spent in the community (233.8 days) likely would have been sufficient to utilize a community service referral.

Table 4.21
SIGNIFICANT DIFFERENCES EXIST BETWEEN PARTICIPANTS WHO FOLLOWED THROUGH ON A
COMMUNITY REFERRAL COMPARED TO PARTICIPANTS WHO DID NOT*

	Full Treatment Participants	Partial Treatment Participants
Mean age (Standard Deviation)	35.98 (9.54)	29.83 (8.26)
Have severe/significant vocational need	80%	94%
Prior felony arrest	71%	90%
Prior property arrest	32%	48%
Criminal thinking/attitudes/cognitions (high risk)	31%	57%
Prior parole violation arrest	11%	23%
Needs alcohol treatment	23%	6%
Days in the community post-release (Standard Deviation)	332.0 (74.14)	233.8 (129.08)
TOTAL	161	49-52

^{*}Differences significant at .05 level.

NOTES: Cases with missing information not included.

SOURCE: CCM Official Records, SANDAG SB 618 Fourth Annual Evaluation Report

WHAT WAS THE PROGRAM ATTRITION RATE? FOR WHAT REASONS?

Prison Attrition

Program staff was able to retain almost all (90%) of the 271 treatment participants who had been released from prison during this evaluation period. One in ten (10%) dropped out of the program while in prison. The reasons for leaving the program included being excluded for noncompliance (21 individuals), voluntarily dropping out of the program (8), and being dropped from the

Program retention is high with nine in ten remaining in the program throughout the prison term and one in six participating during the 12 months post-release.

program because of a housing issue in the prison (1). The majority (39 out of 43) of those who dropped out did so while being housed in general population, with the remaining four individuals leaving the program while housed in the reception center. As expected, none of these individuals utilized referral services in the community since they were no longer receiving SB 618 services at the time of their release from prison. The average number of days spent in prison before dropping from the program was 166.63 (SD=120.53, range 19 to 454). Sample size prohibited determination of differences with respect to age, gender, or race/ethnicity.

Community Attrition

Sixteen percent (16%) of the 195 treatment participants who had remained in the program until their release into the community (and had been on parole for at least 12 months during this evaluation period) dropped from the program while in the community. Ninety-four percent (94%) of these treatment participants who left the program were kicked out of the program for noncompliance, including committing a new offense, violating parole, and/or receiving a new prison term; and 6 percent voluntarily dropped. Slightly more than half (54%) had utilized referral services in the community and while nearly half (46%) had not. Those who dropped while in the community spent on average 201.47 days (<u>SD</u>=85.52, range 59 to 356) in the community before being dropped from the program. Again, sample size prohibited determination of differences with respect to age, gender, or race/ethnicity.

SUMMARY

For this fourth annual report, six process evaluation research questions related to the SB 618 program evaluation were addressed with available data. Based on information for 347 treatment group individuals and 367 comparison group individuals, it appeared that the two study groups were comparable with respect to age and gender. The treatment group did consist of a smaller percent of Hispanics; this difference will be controlled through statistical methods when outcomes are analyzed in the final report. Individuals in both study groups have extensive past criminal involvement during the two years prior to program participation and are comparable on most measures of past criminal history, including number and type of previous charges with one exception, that treatment participants spent more days in local custody for the instant offense.

Program services were determined based on assessed participant need. Nearly all treatment participants had a severe/significant need related to vocational and substance abuse and two-thirds had educational needs. With respect to risk factors for future criminality, in addition to scoring in the high need level in areas related directly to past criminal behavior (e.g., history of noncompliance and criminal involvement), around half of treatment participants were at high risk for residential instability and financial problems. Further analyses of assessments administered with the treatment group at program entry were conducted and results suggest that treatment participants have a functional level of education and the life skills to successfully participate in vocational programming; however, these data also revealed that SB 618 participants have a high level of need in many areas, including vocational training, substance use, education, and housing.

Nearly all participants received some type of program services while in prison, including meeting with their PCM, though the frequency of meetings was greater at CIW despite the PCM staff change at RJD from educator to social worker. Likewise, nearly all participants met with their CCM in prison as was the design of the program.

Four in five participated in prison programs that matched their individual needs or were employed in prison. Half of males and nearly one-third of females in prison received training in a vocational program while in prison. Three in five received SAP and around one in four of those went on to participate in DTF. Additionally, slightly less than two in five received educational services in custody.

Nearly all had regular contact with CCM staff after release though only about half of participants had some type of contact during the critical three-day period after prison release. This result may be impacted by the fact that some participants were released from prison directly to residential treatment, which includes a blackout period when no contact is allowed with anyone outside the facility. Referrals given to participants during their first 12 months after release most commonly related to their substance abuse needs and these substance abuse programs also were the services accessed by the largest number of participants. Employment, clothing, and housing needs also were commonly addressed through referrals during this period. While nearly all participants received a referral from their CCM, only about two-thirds actually accessed the referral service. Examination of information regarding participants who followed through on referrals and accessed services in the community compared to those individuals who did not revealed that the full treatment participants tended to be older and scored lower on criminal thinking scales than the partial treatment group counterparts. Although the full treatment participants spent a significantly greater number of days in the community, the partial treatment participants were in the community almost eight months (on average) which would have been a sufficient period of time to take advantage of community service referrals. With respect to program attrition, one in ten participants dropped out of the program while in prison and another 16 percent were dropped post-release.

Information about program services received suggests that nearly all treatment participants received some type of service and/or referral in prison and post-release that matched one or more of their needs as identified during the assessment process. Additionally, program staff was successful in assessing client need within the expected timeframe for the majority of treatment participants and in reducing time spent in the prison reception center.

Chapter 5:

Impact Evaluation: Ex-Offender Behavior

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CHAPTER 5 IMPACT EVALUATION: EX-OFFENDER BEHAVIOR

INTRODUCTION

Ultimately, the goal of SB 618 is to support exoffenders' successful transition back to the community and to reduce the likelihood of their return to prison. With the budgetary challenges facing the State of California and the ongoing scrutiny the state's prison system has received, now, more than ever, solutions are being sought to stop the revolving prison door. This chapter examines outcomes related to criminal activity. Data pertaining to arrests, convictions, parole violations, and return to prison 12 months post-release have been gathered and analyzed for full treatment group participants who followed up on referrals provided by the Community Case Managers (CCMs), partial participants with no referral follow-up, and the comparison group. Analyses on possible factors predicting success also are presented. It is important to note that approximately one-third of individuals in the

MAJOR FINDINGS

- The full treatment group was significantly less likely to be re-arrested or returned to prison 12 months following prison release relative to the comparison group.
- Securing stable housing during the 12 months post-release significantly reduces the likelihood of full SB 618 participants being re-arrested, receiving a new prison term, and/or returning to prison.
- ▶ SB 618 participants who participated in services while in the community spend more days in the community before recidivating (295 days on average before first arrest) than the comparison group (239 days on average) during the 12-month post-release time period.

study groups had not yet been out of prison for 12 months at the time the data were compiled for this report and are, therefore, not included in the analyses. The final report will build on these analyses and offer a more robust picture of the impact of SB 618 based on a larger number of individuals who exit prison and transition back to the community.

METHODOLOGY

To document changes in participants' behavior and criminal activity, data were gathered from official crime records for those individuals in the full treatment, partial, and comparison groups who had been out of prison for at least 12 months by August 31, 2010. As previously mentioned in Chapter 2, while the SB 618 program seeks to reduce return-to-prison rates, the additional measures of recidivism also are included in this evaluation in order to provide a more complete picture of the impact of SB 618 on offender behavior, as has been advocated in the literature since there is no "universally accepted measure" (Jannetta, Elderbroom, Solomon, Cahill, Parthasarathy, & Burrell, 2009). The following measures of recidivism were examined: re-arrest, re-conviction, parole violation, and return to prison. The rationale for including each measure is as follows.

IMPACT EVALUATION: EX-OFFENDER BEHAVIOR

- Re-arrest depicts continued behavior not in compliance with the law. Of all the variables examined, this measure is the least tied to criminal justice system policies and practices.
- Re-conviction portrays proven criminal activity, since individuals are considered innocent until guilt is substantiated in court.
- Parole violations are important to consider because around two-thirds of all prison commits in California were returning parolees (Petersilia, 2006), suggesting that alternative interventions may be more cost effective.
- Receipt of a new prison term is an indicator of judicial practices which can impact costs.
- Return to prison for any reason is of interest due to the overcrowding and cost issues that continue to challenge corrections officials.

SAMPLE DESCRIPTION

At the time outcome information was compiled for this report, 12 month post-prison release data were available for 213 individuals in the treatment group (61% of this sample) and 235 in the comparison group (64% of this sample). Because a critical part of successfully addressing participants' assessed needs involves individuals following through on referrals in the community, whether or not a treatment client accessed services related to a referral they received in the community was also included in the analyses. That is, of the 213 treatment clients, 161 (76%) are considered "full treatment" participants because they utilized a service they were referred to in the community by their Community Case Manager (CCM) and 52 (24%) are considered "partial treatment" participants because they did not fully access service delivery. Thus, results presented here focus on comparing full treatment participants to the comparison group, with additional discussion regarding how the partial treatment group fared. The final report for this project will include information for a greater number of individuals in each of the three groups allowing for a more robust analysis and greater confidence in the conclusions that can be reached.

WAS RECIDIVISM (BEING RETURNED TO PRISON FOR A PAROLE VIOLATION OR NEW FELONY CONVICTION) REDUCED AMONG THE TREATMENT GROUP RELATIVE TO THE COMPARISON GROUP? DID PARTICIPANTS HAVE FEWER PAROLE VIOLATIONS POST-RELEASE?

As results here show, full SB 618 treament participants were less likely to recidivate than the comparison group. Specifically, 38 percent of full treatment participants were re-arrested compared to 56 percent of the comparison group individuals during the 12-month period after their prison release (Figure

Full treatment participants are less likely to be arrested and returned to prison than the comparison group.

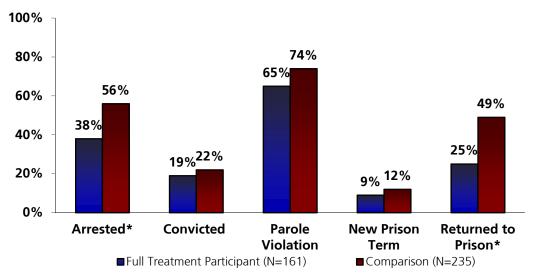
5.1). Additionally, one quarter (25%) of the full treatment group returned to prison, whereas about half (49%) of comparison group participants did so. This measure includes individuals reincarcerated due to parole violation arrests. Therefore, one possible explanation for this difference in parole violation arrests could be attributed to SB 618's graduated sanctions approach to community supervision. Specifically, when participants re-offend, the Parole Agent, Community Case Manager (CCM), and the Deputy District Attorney (DDA) coordinate to determine the most

¹ It is important to note that the comparison group may include both individuals who utilized services in the community and those who did not and inclusion of this information may have changed the pattern of results.

² Analyses of factors related to being a full or partial treatment participant are presented in Chapter 4.

appropriate response. For example, rather than sending an individual back to prison on a parole violation involving drug offenses, the individual is often ordered to participate in substance abuse treatment (not shown). The two groups were similar related to being re-convicted, receiving a parole violation that did not result in arrest, or receiving a new prison term.³ Factors related to these results are discussed later in this chapter.

Figure 5.1
FULL TREATMENT GROUP IS SIGNIFICANTLY LESS LIKELY TO BE RE-ARRESTED AND RETURNED TO
PRISON 12 MONTHS POST RELEASE



*Differences significant at .05 level.

SOURCE: Automated Regional Justice Information System (ARJIS), San Diego Sheriff's Department, California Department of Corrections and Rehabilitation (CDCR), SANDAG SB 618 Fourth Annual Evaluation Report

Analyses conducted to identify any differences in the level and type of arrest during the 12-month period after prison release revealed the groups were similar in the proportion of individuals whose highest level of arrest was for a felony (25% overall), misdemeanor (11%), or parole violation (12%). Examination of the type of arrests revealed that while the two groups were equally likely to have an arrest for a violent, drug, or property offense, full treatment participants were less likely than the comparison group to have had an arrest for a parole violation (10% compared to 21%, respectively) or an arrest in the "other" category (2% compared to 11%, respectively). As described earlier, this difference in the proportion of parole violations may be related to the graduated sanctions approach used by the SB 618 program. No differences existed between the two groups relative to the level or type of charge at the point of conviction.

WHAT FACTORS WERE ASSOCIATED WITH DESISTANCE FROM CRIME?

To better understand the effect SB 618 program participation had on success, as well as to determine if other factors (e.g., individual characteristics, criminal history, and/or employment) were related to these outcomes, multivariate analyses (i.e., regression) were conducted. As such, three

³ Analyses showed that partial treatment participants were more likely to recidivate compared to the full treatment and comparison groups.

logistic regression models were created with the dependent variable being the three definitions of success (as explained below) and controlling for factors that might contribute to lower recidivism after release. Since bivariate analysis above showed that the full treatment group and the comparison group varied with respect to re-arrest and return to prison in the post-release period these variables were included in the models. Additionally, although no differences by group were identified earlier in relation to receiving a new prison term and since this factor remains a critical outcome measure at the State level, this measure is also included here. So, for the purposes of analysis, success was defined as not having an arrest, not having a new prison term, and/or not being returned to prison for a new offense or a parole violation. The models included ten variables:

- participation in the SB 618 program (yes/no);
- gender;
- age;
- ethnicity;
- employed at least once during the one-year post period (yes/no);
- total arrests in the pre period (i.e., two years prior to program entry);
- felony arrest in pre period (yes/no);
- property arrest in the pre period (yes/no);
- drug arrest in the pre period (yes/no); and
- parole violation arrest in the pre period (yes/no).

Overall, the preliminary outcome results showed that relative to the comparison group, full participation in SB 618 (i.e., receiving services in the community) did protect an individual from being re-arrested and returned to prison within the 12-month period following prison release.

- Comparison group individuals were 2.0 times more likely to have been arrested in the post period.
- Comparison group individuals were 2.6 times more likely to have returned to prison in the post period.
- ▶ However, full treatment participants and the comparison group were equally likely to be returned to the prison for a new offense.

In regard to identifying possible individual characteristics that could contribute to success two factors were shown to have a significant impact on re-arrest and return to prison.

- Despite which study group an individual was in, females were 62 percent less likely to be re-arrested and 54 percent less likely to be returned to prison compared to men. This research finding may be related to the fact that program implementation in CIW was more consistent with the original SB 618 program design. The final report will analyze this issue further as more females will be available for analysis of outcomes one year following prison release.
- **Past parole violation**: Those individuals with an arrest for a parole violation prior to entering the program were 2.1 times more likely to be re-arrested and 3.4 times more likely to be returned to prison 12 months post-release (not shown).

Additional analysis was conducted to provide information to program partners regarding services that may have the greatest impact on SB 618 participant success. Because limited data on the comparison group were available, this additional analysis focused solely on the full treatment group. That is, the next set of analysis only examined the interventions received by the full treatment group since information about services received by the comparison group while in the community was unavailable. As with the previous analysis, this analysis focused on re-arrest, receiving a new prison term, and returning to prison.

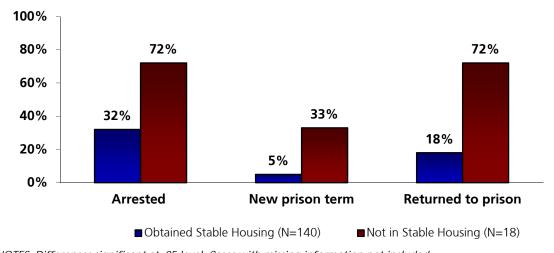
As noted in Chapter 2, several variables (such as employment, stable housing, and substance abuse) were examined to determine what, if any, factors were associated with recidivism. Bivariate

analyses demonstrated an important relationship between obtaining stable housing and employment with recidivism for full treatment group participants. Specifically, the majority of full treatment participants who had stable housing were less likely to be re-arrested (32%), receive a new prison term (5%), and/or returned to prison (18%) compared to those that did not find stable housing (72%, 33%, and 72%, respectively) in the

Having stable housing and obtaining employment is related to SB 618 participants remaining crime-free 12 months post release.

12 months post-release (Figure 5.2). Although not as large, a recidivism pattern relating to re-arrest also was evident for individuals who found employment after initial prison release. Specifically, a significantly smaller proportion who had found a job were re-arrested (30%) compared to those who were unemployed the entire time out of prison (48%) (not shown).

Figure 5.2
FULL PARTICIPANTS WHO OBTAINED STABLE HOUSING WERE LESS LIKELY TO BE ARRESTED, HAVE
A NEW PRISON TERM OR RETURN TO PRISON 12 MONTHS POST-RELEASE*



NOTES: Differences significant at .05 level. Cases with missing information not included.

SOURCES: San Diego County Sheriff's Department, CCM Official Records, SANDAG SB 618 Fourth Annual Evaluation Report

Additional multivariate analyses controlling for the demographic and criminal history characteristics, supported the above findings that securing stable housing and employment decreased the likelihood of re-offending, with housing stability being the primary factor (not shown).

Furthermore, understanding when an individual is most likely to recidivate, in relation to the time released from prison, is not only helpful from a programmatic point of view (i.e., determining time and intensity of service provision), but from a fiscal perspective, as well. That is, fewer days spent in prison equates to reduced cost to all systems involved. To assess this factor, a Cox Regression was used to explore differences in time to recidivating between the full treatment and comparison groups.

The initial analysis revealed statistically significant differences in time to arrest in the 12-month post period between the full treatment and comparison groups. The comparison group was re-arrested sooner on average than full treatment participants (arrested 239.1 days after prison release compared to 293.7 days, respectively). Regression analyses comparing the full treatment group and the comparison group revealed significant differences in the likelihood of arrest between the groups. Comparison group participants were 1.8 times more likely than full treatment group participants to be arrested at any given point during the 12-month post release period.

SUMMARY

A primary goal of SB 618 is to provide intensive services both in custody and in the community in an effort to reduce the likelihood of an ex-offender returning to prison. Not only is this a public safety issue, but also a cost-savings issue, especially during these budget-tight times. To ascertain the impact of SB 618 on an ex-offender's behavior, arrests, convictions, parole violations, receiving new prison terms, and return to prison were examined for the 12-month period post-prison release. At the time the data were compiled for this report, approximately two-thirds of the total sample was eligible for inclusion in the analysis. As such, any conclusion on program effectiveness should be deferred until the final report.

Full treatment participants who utilized services from a referral they received from their CCM were significantly less likely to be re-arrested or returned to prison during the 12 months following prison release relative to the comparison group. The comparison group was more likely to be arrested for a parole violation as would be expected given the graduated sanction approach of the program. This finding, that SB 618 may be assisting offenders adhere to their conditions of parole, is especially valuable in light of the new legislation mandating nonrevocable parole for nonviolent, nonserious offenders.

Further preliminary examination of those factors within SB 618 that may be associated with success (i.e., not re-offending) revealed that full participation in SB 618 (i.e., using referrals provided by the CCMs) was a protective factor in keeping an individual from re-offending. That is, fully participating in SB 618 was both related to and predictive of not being arrested, and/or returned to prison in the 12 months post-release. Furthermore, having stable housing also was found to be a protective factor, as was employment. However, multivariate analysis showed that without stable housing, employment was not as impactful. The importance of linking ex-offenders to services was highlighted in the survival analysis, which showed that comparison group individuals recidivated more quickly than the full treatment group who participated in services during the 12-month post-release time period.

As the evaluation results are finalized in 2012, data for a larger sample will be available for analysis. In addition, as described in Chapter 2, the treatment and comparison groups will be matched to ensure that research findings are not biased. As a result, the final evaluation report will offer greater insight regarding the impact of SB 618.

Chapter 6:

Impact Evaluation: Risk Reduction

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CHAPTER 6

IMPACT EVALUATION: RISK REDUCTION

INTRODUCTION

Addressing the needs of offenders (e.g., substance abuse, education, employment, and housing) has been found to facilitate the reentry process and relate directly to decreased recidivism. This process is referred to as risk reduction (Travis, Solomon, & Waul, 2001). With this information in mind, the impact assessment evaluates the results of SB 618 related to risk reduction, as well as recidivism (previously discussed in Chapter 5). This chapter describes the impact of the program on social outcomes related to risk for continued criminal activity, including changes in needs, family and/or social bonds, housing stability, and employment.

METHODOLOGY

A variety of data collection methods were used to answer the questions related to risk reduction. Changes in needs were examined through a comparison of the Addiction Severity Index (ASI) administered upon program entry

MAJOR FINDINGS

- Participants' needs related to alcohol and other drug use decrease from program entry to release in the community.
- Family relationships improve during SB 618 program involvement, resulting in open communication and a high level of satisfaction with the relationships.
- About two-fifths of participants are active with a faith community.
- Over four-fifths (85%) of the treatment group secure stable housing within one year of release from prison, a key factor in preventing recidivism.
- Almost three-quarters (71%) of the treatment group is employed during the 12 months following release from prison.

to the ASI conducted 30 days following prison release, as well as based on perceptions of participants shared during follow-up interviews at 6 months and 12 months after being paroled. These follow-up interviews also provided information regarding changes in family and/or social bonds, housing, employment, and substance abuse issues. This information is augmented by data from official records regarding employment. Chapter 2 provided more details regarding these research methods.

SAMPLE DESCRIPTION

Follow-up interviews are conducted at 6 and 12 months after release from prison with treatment group participants who have signed an informed consent to participate in the research study. Of the 244 treatment group participants who had been out of prison for at least six months (i.e., released from prison by February 28, 2010), 166 completed a follow-up interview by September 30, 2010, and 9 individuals were excluded due to inaccurate prison release dates, for a 71 percent response rate. This response rate is achieved through a number of efforts previously described in Chapter 2.2

The characteristics of participants completing follow-up interviews six months following prison release were compared to those not completing an interview (i.e., due to lack of response to repeated contact attempts or the inability to locate the potential respondent) in order to assess any potential bias in the interview results. As Table 6.1 shows, the two groups were similar with respect to gender, age, ethnicity, and highest conviction charge for the instant offense. ³

Table 6.1
SIX-MONTH FOLLOW-UP INTERVIEW RESPONDENT CHARACTERISTICS SIMILAR
TO NON-RESPONDENTS

Six-Month Follow-Up Interviews	Respondents	Non-Respondents
Age	35.77	34.33
Gender		
Male	80%	84%
Female	20%	16%
Race/Ethnicity		
White	44%	46%
Black	32%	28%
Hispanic	19%	22%
Other	5%	4%
Highest Conviction Charge		
Property	55%	65%
Drug	31%	28%
Other	14%	7%
TOTAL	166	69

SOURCE: SB 618 Database, SANDAG SB 618 Fourth Annual Evaluation Report

¹ These interviews included individuals still in the community, as well as those who re-offended and were in custody.

Nine individuals could not be located and 66 individuals did not respond to repeated messages attempting to schedule interviews. Ten attempts, on average, were made to contact each person. Only three individuals actively refused to participate in the follow-up interview.

As mentioned in Chapter 2, a significance level of .05 is used unless otherwise noted.

Individuals participating in the six-month follow-up interviews are contacted again six months later. Of the 122 treatment group participants who had been out of prison for at least 12 months and previously completed the 6-month follow-up interview, 84 completed a 12-month follow-up interview by September 30, 2010, for a 69 percent response rate. Again, the characteristics of respondents were comparable to non-respondents (Table 6.2), with one exception. Respondents were slightly older (37 years of age on average) compared to non-respondents (33 years old). With respect to utilization of community referrals the two groups were comparable (i.e., the majority took advantage of one or more services recommended by the CCM).

Table 6.2

12-MONTH FOLLOW-UP INTERVIEW RESPONDENT CHARACTERISTICS SIMILAR
TO NON-RESPONDENTS

12-Month Follow-Up Interviews	Respondents	Non-Respondents
Age*	36.99	33.26
Gender		
Male	76%	79%
Female	24%	21%
Race/Ethnicity		
White	42%	47%
Black	31%	29%
Hispanic	23%	16%
Other	5%	8%
Highest Conviction Charge		
Property	57%	58%
Drug	29%	26%
Other	14%	16%
Utilization of Community Services	93%	82%
TOTAL	84	38

^{*}Difference significant at .05 level.

NOTE: Percentages may not equal 100 due to rounding.

SOURCE: SB 618 Database, SANDAG SB 618 Fourth Annual Evaluation Report

WERE THERE ANY IMPROVEMENTS IN PROGRAM PARTICIPANT NEEDS OVER TIME?⁴

The primary measures regarding changes in need over time were based on ASI assessments. As described in Chapter 3, pre-test measures were collected as part of the pre-sentence assessment process for SB 618 and post-test measures were compiled 30 days following prison release, as well as upon SB 618 program completion in the community. There was not a sufficient number

Participants' needs related to alcohol and other drug use improve.

⁴ Additional information about the match between SB 618 participant needs and services received was previously discussed in Chapter 4.

of cases in the treatment group completing SB 618 for analysis at the time this report was prepared. Therefore, the analysis in this report focuses on the intermediate measure of change between initial and 30 days post-release in these critical factors related to reentry. Specifically, composite scores, calculated by giving equal weight to the dynamic elements assessed with the ASI (e.g., use in past 30 days, intensity of use over past 30 days, and current need for treatment) were used (McGahan, Griffith, Parente, & McLellan, 1986). A score of zero indicates no issues in the assessed area. Table 6.3 shows the average composite scores upon program entry compared to the same scores following release from prison. The difference between the average scores related to alcohol and other drug use indicates improvements over time (from 0.20 on average for alcohol use [range 0.00 to 1.00] and 0.22 for other drug use [range 0.00 to 5.00] each dropping to 0.06).

These changes were confirmed during follow-up interviews. Specifically, less than one-fifth shared that they drank more than five drinks in one day or used illicit drugs after being paroled. These findings are consistent with other reentry studies (La Vigne, Shollenberger, & Debus, 2009; Visher & Courtney, 2007). With respect to drug use, most of the participants admitting to using while in the community indicated that they had not used any illegal drugs within the 30 days prior to being interviewed (87% at 6 months and 85% at one year) (not shown).

Table 6.3
NEEDS RELATED TO DRUG AND ALCOHOL USE IMPROVED UPON COMMUNITY REENTRY

	ASI Average Composite Score		
	Entry	30 Days Post-Prison Release	
Alcohol Use	.20	.06	
Other Drug Use	.22	.06	
TOTAL		107	

NOTES: Cases with missing information not included. Differences significant at .05 level. SOURCE: SB 618 Database, SANDAG SB 618 Fourth Annual Evaluation Report

WHAT IMPROVEMENTS WERE MADE IN PARTICIPANTS' FAMILY AND/OR SOCIAL BONDS FOLLOWING RELEASE FROM PRISON?

Social supports (e.g., stable marriage/relationship and family and peer support) have been identified as factors related to desistance from crime (National Research Council, 2008; Rosenfeld, Petersilia, & Visher, 2008; Solomon, Osborne, LoBuglio, Mellow, & Mukamal, 2008). To measure changes in social bonds, the follow-up interview included questions regarding relationships with family and friends, as well as involvement with a faith community.

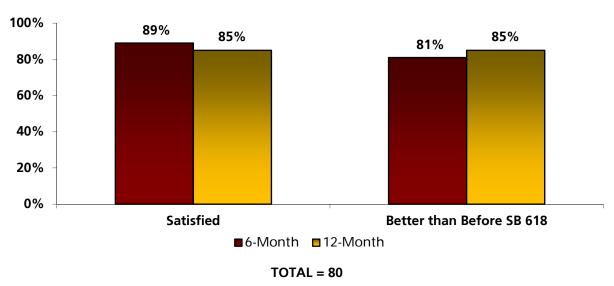
With respect to relationships with family members, respondents were asked to rate their level of satisfaction with this relationship overall

Family relationships improve for many participants following SB 618 program entry, resulting in open communication and a high level of satisfaction with the relationships.

on a five-point scale, with one indicating "very satisfied" and five indicating "not at all satisfied." Over four-fifths (89% at 6 months and 85% at one year) were at least "somewhat satisfied" with their family relationships (Figure 6.1). To examine changes in this relationship over time, respondents were asked if the relationship with their family was better than before they entered

the SB 618 program and over four-fifths agreed (81% after 6 months in the community and 85% after one year).

Figure 6.1
PARTICIPANTS REPORT FAMILY RELATIONSHIPS THAT ARE POSITIVE AND HAVE IMPROVED



NOTE: Cases with missing information not included.

SOURCE: Follow-Up Interviews, SANDAG SB 618 Fourth Annual Evaluation Report

To examine the level of support from friends and family members, respondents to the follow-up interview also were asked about their ability to talk honestly with these individuals. The majority (93% at 6 months and 89% at one year) shared that they were able to talk honestly with about a half dozen family members and/or friends on average (7.54 at 6 months, <u>SD</u>=7.02, range 1 to 30 and 6.43 at one year, <u>SD</u>=5.54, range 1 to 30).

Research has indicated that peer support (i.e., other ex-offenders who have transformed their lives in a positive way) can be an important factor in reducing recidivism (Solomon, et al., 2008). To examine the extent to which SB 618 participants become supportive of one another, respondents were asked if they get support from other program participants and about two-fifths (42% at six months and 38% at one year) indicated that they did (not shown). While SB 618 does not have a formal system for facilitating this process, program partners recognize the valuable role peers play in the reentry process.

To further explore the type of social influences participants have while in the community, a follow-up question was included to explore the types of friends in the participants' support network. As Table 6.4 shows, about three-quarters of the respondents indicated that their friends were employed (78% at 6 months).

Most participants indicate that their friends are not involved in anti-social activities.

and 75% at one year) and relatively few shared that their friends were involved in negative activities such as being incarcerated within the past year (15% and 7%, respectively), getting drunk

(4% at both points in time), committing illegal acts (2% and 4%, respectively), using street drugs (0% and 3%), and participating in gangs (0% and 2%).

Table 6.4
PARTICIPANTS REPORT THEIR FRIENDS GENERALLY AVOID ANTI-SOCIAL ACTIVITIES

	6-Month	12-Month
Employed, in school, or training full-time	78%	75%
In prison or jail during the past year	15%	7%
Frequently use alcohol to get drunk	4%	4%
Involved in illegal activity	2%	4%
Use street drugs	0%	3%
Involved with gangs	0%	2%
TOTAL RESPONDENTS	80-8	33

NOTES: Cases with missing information not included. Percentages based on those indicating most or all friends engaging in the activity.

SOURCE: Follow-Up Interviews, SANDAG SB 618 Fourth Annual Evaluation Report

The faith community has also been highlighted in the literature as a key player in preventing recidivism (Johnson, 2007; McRoberts, 2002). Based on information collected during follow-up interviews, over two-fifths (42% at 6 months and 43% at one year) were currently active in a faith community. A greater proportion of participants were involved for at least six months after one year in the community (61%, compared to 38% at six months). Attendance was frequent with over two-thirds (71% and 69%, respectively) participating in services or faith-related events at least weekly. Almost all (100% at 6 months and 92% at one year) of these respondents indicated that participation in a faith community was supportive. Specifically, these participants shared that it helps maintain focus on positive behavior, provides spiritual guidance, and offers a support network (not shown).

DID PARTICIPANTS MAKE IMPROVEMENTS IN OTHER AREAS OF THEIR LIFE?

Housing

Data regarding stable housing was available for 186 participants released to the community for at least one year as of August 31, 2010, from records maintained by the Community Case Managers (CCMs). Over four-fifths (85%) of these individuals were in a stable living situation⁵ (not shown).

This level of housing stability is relatively high. For example, the Urban Institute's longitudinal study of prisoner reentry found that, one year after prison release, about half (46%) of parolees considered their living arrangements temporary (Visher & Courtney, 2007). This stability was achieved immediately upon release for 66 percent of the participants according to CCM

Over four-fifths of participants secure stable housing within one year of release from prison.

⁵ Stable housing includes government supported and monitored accommodations, sober living, board and care, and residential treatment, as well as permanent housing (i.e., when an individual is responsible for paying rent/mortgage).

records. For the 51 individuals needing more time to achieve stability, 90 percent were stable within the first six months following release and the average number of days was 111.53 (<u>SD</u>=76.44, range 1 to 308).⁶

This housing stability was most likely related to housing referrals initiated while in custody. Specifically, about two-fifths (39%) of the treatment group were referred to housing assistance. This process began prior to leaving prison for 20 percent and over half of these individuals (57%) used the referral.

The research findings related to housing were also supported by data collected directly from participants during follow-up interviews. Almost all SB 618 participants interviewed (95%) had a place to live upon release from prison. All of the four individuals who did not have a place to live "crashed" with a friend or family member (not shown). As Table 6.5 shows, at the time of the follow-up interviews, participants typically lived in a house or apartment either with family (35% at 6 months and 38% at 1 year), with a friend (19% and 23%, respectively), or alone (2% and 5%). A greater proportion were living in a residential treatment center at the time of the 6-month follow-up interview (11%) relative to 12 months (4%), which is consistent with the typical stay in residential treatment. About one-third of participants interviewed indicated that someone helped them locate housing and the CCM was most frequently mentioned as providing this assistance.

Table 6.5
ONE IN TWO PARTICIPANTS LIVE IN A HOUSE/APARTMENT SIX MONTHS POST-RELEASE

6-Month	12-Month
2%	5%
19%	56% 23% 66%
35%	38%
0%	1%
11%	4%
27%	24%
5%	5%
1%	2%
_	84
	2% 19% 35% 0% 11% 27% 5%

^{*}Differences significant at .05 level.

NOTE: Percentages may not equal 100 due to rounding.

SOURCE: Follow-Up Interviews, SANDAG SB 618 Fourth Annual Evaluation Report

Satisfaction with these living arrangements (for those not in custody at the time of the interview) was high with over four-fifths (81% at 6 months increasing to 86% at one year) indicating that they were somewhat or very satisfied (not shown). This high level of satisfaction may be related to positive bonds with family/friends and housing stability.

⁶ The median was 149.

To examine residential stability, follow-up interview respondents were asked to specify the number of times they moved since release from prison. About one-third (32%) resided where they initially lived following release. Of the 57 people who did move, the average number of times was 2.63 (SD=2.07, range 1 to 13). The most common reasons for moving within the first six months of parole included completing a program (32%) and wanting more independence (11%), indicating that these moves are not necessarily negative (not shown). After one year, fiscal constraints (14%), finishing a program (11%), transitioning into sober living (11%), and improving accommodations (11%) were the most frequent reasons for changing residences.

Employment

The relationship between employment and desistance is well documented (National Research Council, 2008; Nelson, Deess, & Allen, 1999). With respect to employment, data were collected from files maintained by the CCMs. Almost three-quarters (71%) of the treatment group was employed at some point during the one-year period following prison release.

Employment is common for SB 618 participants within the one year following release, which is a key factor associated with reduced recidivism.

Additional information was available regarding full-time employment and wages based on CCM records. Of 110 treatment group cases employed at some point during the year following prison release, over two-thirds were employed full-time (67%), with a mean hourly wage of \$11.29 (SD=\$2.93, range \$7.00 to \$23.96). While this average is higher than the \$9 per hour median found in a longitudinal study of parolees in Illinois, Ohio, and Texas (Visher, Debus, & Yahner, 2008), it is lower than the local living wage. According to the San Diego Workforce Partnership (2008), the basic needs budget for a single person in San Diego is \$33,734 or about \$16 per hour. This research finding highlights the challenge of finding employment above a living wage in the current economic climate, which is beyond the scope of SB 618.

Given that these outcomes were for the first year following release from prison, it is not surprising that time spent in these positions was relatively short, with an average of 5.09 months employed (<u>SD</u>=2.96, range 0.23 to 12.00), which is consistent with other studies regarding parolees (Visher, et al., 2008).

The specific types of jobs obtained by participants during this period included positions as construction workers (47%), sales people (22%), drivers (15%), and food and beverage servers (14%). The top two occupations expected to have the most job openings in San Diego County from 2008 through 2018 (according to the California Employment Development Department [2010]) are for salespeople, waiters, and cashiers, though they are relatively low-paying positions (median hourly wage ranging from \$9.10 to \$10.06).

⁷ The median hourly wage was \$10.30.

⁸ A basic needs budget includes rent/utilities, food, transportation, healthcare, clothing/personal items, and taxes, with no money for entertainment, vacations, or savings for education or retirement (San Diego Workforce Partnership, 2008).

⁹ The positions related to driving and food and beverage service may be related to the training provided in prison (i.e., Class B driver's license and food handler's card classes available in the Richard J. Donovan (RJD) Correctional Facility). The number of participants obtaining these types of jobs was small, limiting the analysis.

More details regarding employment were provided through the follow-up interviews. Following a screening question regarding employment status, the average hours worked per week for the 56 employed respondents was 33.92. (SD=12.07, range 9 to 70). Very few participants indicated that this position was the same one they had before prison (9 individuals or 23% of those employed within the first six months) and over half (56%) took more than one month to find the job following prison release. About one-third (37%) had help from others in locating employment, with family members (50%) most frequently providing this assistance, followed by UCSD SB 618 staff (29%), and other community agencies (21%).

The treatment group's level of satisfaction with the salary and position is shown in Figure 6.2. For those interviewed six months after release, about three quarters (74%) were at least somewhat satisfied with their position. This view rose to 87 percent after one year in the community. Satisfaction with salary was slightly lower (62% at six months and 61% at one year). In addition, the majority planned to stay in their current position (67% at six months and 76% at one year) (not shown). While the relatively high level of satisfaction with employment is consistent with prior research (Visher, et al., 2008), satisfaction with wages was slightly higher for the treatment group compared to the longitudinal study of parolees in Illinois, Ohio, and Texas where about half were satisfied with their salary (47% to 51%).

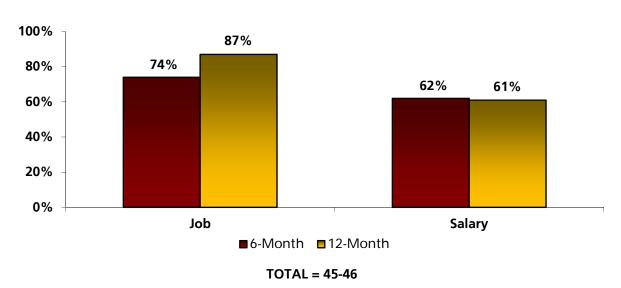


Figure 6.2
TREATMENT GROUP REPORTS SATISFACTION WITH EMPLOYMENT AND SALARY

NOTE: Cases with missing information not included.

SOURCE: Follow-Up Interviews, SANDAG SB 618 Fourth Annual Evaluation Report

As previously discussed in Chapter 1, a series of vocational assessments (i.e., the Occupational Information Network [O*NET] Values, Career Interests, and Abilities¹⁰ and the Myers-Briggs Type Indicator[®] [MBTI]) are conducted with SB 618 participants while they are in prison, with the intent to use this information to guide participants in finding satisfying jobs when released into the

¹⁰ The O*NET Abilities tool assesses nine areas. Determination of occupation is based on the highest score across the nine areas. The data file available included only six areas. Any analysis would have been invalid and is therefore not included here.

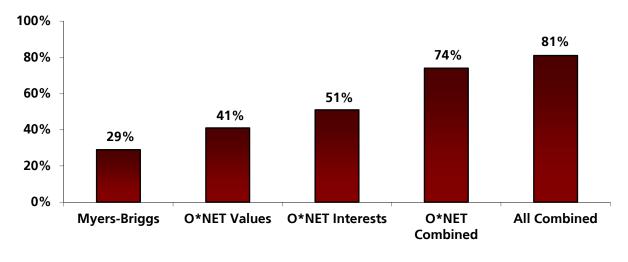
community. In order to explore the value of these assessments, the positions suggested through the results of these assessments were compared to the actual jobs attained during the first six months in the community. As shown in Figure 6.3, O*NET Interests and Values assessments contributed the

most to identifying occupations that could be acquired in the community. That is, two-fifths or more of those employed had jobs aligned with the results of the O*NET Values (41%) and Interests (51%), compared to 29 percent of the Myers-Briggs. When the two O*NET tools were combined, the proportion increased to 74 percent, and all three assessments together resulted in an 81 percent match to positions acquired. Further, the tight job market also may be impacting these results (i.e., the

The match between specific occupation recommended through the assessment process and job attained is highest when based on multiple assessments.

only jobs available may not be consistent with assessments). However, these data illustrate the importance of considering both career interests and values in the process of identifying satisfying careers, as discussed in the career assessment literature (Smith & Campbell, 2009).

Figure 6.3
COMBINED ASSESSMENT RESULTS MATCH ACTUAL JOBS OBTAINED IN THE COMMUNITY



TOTAL = 110

NOTES: Cases with missing information not included. Difference between the O*NET Combined and All Combined significant at .05 level.

SOURCES: SB 618 Database and CCM and Vocational Specialists' Records, SANDAG SB 618 Fourth Annual Evaluation Report

SUMMARY

This chapter summarizes preliminary findings from the impact evaluation related to risk reduction, the social outcomes outlined in the correctional research as related to risk for continued criminal activity (e.g., substance abuse, social supports, employment, and housing). With respect to substance abuse assessments over time and follow-up interviews, the data indicate reduced use. In addition, social supports are positive, with SB 618 participants reporting a friendship circle of individuals who do not engage in negative behavior and improved relationships with family members following program entry. Further, a large proportion of the treatment group secured stable housing (a higher percentage than found in other studies of parolees) and were employed during the one year following release from prison (a factor identified in the literature as contributing to desistance from crime through income, as well as the social bonds within the job site).

Chapter 7:

Impact Evaluation: Program Satisfaction

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CHAPTER 7

IMPACT EVALUATION: PROGRAM SATISFACTION

INTRODUCTION

An important measure of program impact is participant satisfaction. This information is of interest because the level of satisfaction can impact engagement in services and ultimately program effectiveness. Specifically, the literature on evidencebased practices indicates that the quality of contact between program participants and staff impacts client motivation and increases the likelihood that service delivery is related to client risks/needs (Gendreau, 1996; Matthews, Hubbard, & Latessa, 2001; Sherman, Gottfredson, MacKenzie, Eck, Reuter, & Bushway, 1997). This chapter examines satisfaction with services provided through SB 618 based on interviews with participants who were solicited for input at 6 and 12 months following release from prison regarding satisfaction with services in the community. Chapter 2 provides more details regarding this research method the and characteristics of interview respondents were described in Chapter 6.

LIFE PLAN

As previously described in Chapter 1, a Life Plan, based on each individual's needs, delineates the strategies designed to help the participant succeed in reentering society. This Life Plan is made available to participants throughout the SB 618 program. To explore the extent to which the Life Plan was made available to participants and incorporated their input, the follow-up interview included questions about the Life Plan.

MAJOR FINDINGS

- Participants felt the Life Plan includes their input and accurately describes their needs.
- Services provided by the community case managers (CCM) are rated favorably, as are services brokered through community-based agencies.
- ▶ Even though the Community Roundtable meetings were not held as frequently as planned, participants consider them helpful in providing resources and encouragement, focusing on goals, and maintaining regular contact.
- The most helpful services in the community included assistance with transportation issues, substance abuse treatment, getting identification documents, education, housing, and provision of basic necessities.
- While participants were positive about the program overall, more accurate information about program components, employment assistance specifically related to ex-offenders, and additional follow-up were desired.

Based on input six months following release from prison, 85 percent of the treatment group knew about the Life Plan.¹ Of these, 89 percent indicated that they had provided input into it and 88 percent had received a copy of it. Of the 119 people providing input, 92 percent felt that their

¹ Of the 12 people who did not know about the plan at six months, three had a copy by the time of the 12-month follow-up interview.

contributions had been included in the design of the Life Plan. Of those receiving a copy of it, about four-fifths (81%) had a copy six months following release from prison, 94 percent of whom believed that the plan described their goals well (not shown).

According to the SB 618 program design, the Life Plan is a "living" document that changes over time as the circumstances of the participant evolve. To examine this dynamic process, the follow-up

interview included questions regarding Life Plan modifications (Table 7.1). About two-fifths (42%) indicated that the Life Plan changed over time. The relatively low proportion reporting Life Plan changes suggests that the complexity of the issues outlined in the Life Plan (e.g., substance abuse, educational needs)

Most participants feel that their input has been incorporated into their Life Plan.

requires time before the issues can be fully addressed and the plan changed. When the Life Plan was modified, over three-quarters (77%) reported that their input was used in making the changes, consistent with the SB 618 program design.

Table 7.1
PARTICIPANTS PROVIDE INPUT INTO LIFE PLAN CHANGES

Did your Life Plan change?	
Yes	42%
No	58%
TOTAL RESPONDENTS	130
If yes, was your input used in making the changes?	
Yes	77%
No	23%
TOTAL RESPONDENTS	53

NOTE: Cases with missing information not included.

SOURCES: Six-Month Follow-Up Interviews, SANDAG SB 618 Fourth Annual Evaluation Report

SATISFACTION WITH SERVICES IN THE COMMUNITY

Community Case Management

Provision of community services officially begins in prison when the CCMs meet with SB 618 participants about six months prior to release. During follow-up interviews, almost all (99%) respondents indicated that the CCM did meet with them while in custody, with the vast majority finding these meetings somewhat or very helpful (95%). Once released into the community, all but

one individual was contacted by the CCM. This interaction was generally viewed as positive with 93 percent indicating that it was somewhat or very helpful (not shown). Respondents also were asked to rate the CCM regarding a series of statements designed

CCM services are rated favorably by participants.

to examine the CCM-participant relationship on a five-point scale, with 1 indicating "strongly agree" and 5 "strongly disagree." As Table 7.2 shows, the CCMs were rated favorably based on the first six months of interaction in the community and these positive ratings remained high 12 months after release from prison. Ninety percent or more of respondents agreed that the CCM did not

discriminate, treated participants fairly and with respect, was supportive, was sensitive to cultural/ethnic background and gender, cared about the participants' future, and was knowledgeable about the program. While the proportion of respondents agreeing that the CCM treated them fairly and with respect declined slightly between the 6-month and 12-month follow-up interviews (from 100% to 95%), there were only four individuals who did not agree after one year in the community. Further, though ratings related to CCMs providing motivation and brokering services were lower after 12 months in the community, the differences were not statistically significant.

Table 7.2
RESPONDENTS VIEW INTERACTIONS WITH CCM AS POSITIVE

The CCM	6-Month	12-Month
did not discriminate against me	100%	98%
treated me fairly and with respect*	100%	95%
was supportive	98%	95%
was sensitive to my cultural/ethnic background and gender	96%	94%
seemed to care about my future	96%	91%
helped me feel more motivated	93%	84%
was knowledgeable about SB 618	92%	90%
was effective in getting me appropriate services	89%	84%
TOTAL RESPONDENTS	82	<u>!</u>

^{*}Difference significant at .05 level.

NOTES: Cases with missing information not included. Percent shown represents respondents who gave a rating of "strongly agree" or "agree" on a five-point scale.

SOURCE: Follow-Up Interviews, SANDAG SB 618 Fourth Annual Evaluation Report

Over 90 percent of the respondents rated the CCM as somewhat or very helpful in addressing needs during both 6 and 12-month interviews (Table 7.3). The details regarding how the CCM was helpful were gathered through an open-ended question. Based on responses to follow-up interviews at both 6 and 12 months, the most frequent ways that CCMs helped participants included providing basic necessities, providing emotional support, following up, and offering employment leads.

◆ SB 618 PARTICIPANT 12-MONTH FOLLOW-UP INTERVIEW◆

"She called right back after any time I called her with any problems... I lost my wallet and she got me all new ID's. She's like a member of the family... I'm going to counseling and rehab, and it's all because of her - she has a good heart. She is effective... I'm like a real person, again. This is what somebody needs. Well, I can't speak for everyone, but I'll never break the law again."

Table 7.3
CCM MOST HELPFUL WITH PROVIDING BASIC NEEDS, SUPPORT, FOLLOW-UP, AND JOB LEADS

	6-Month	12-Month
CCM helpful	95%	91%
Ways CCM helped		
Basic needs (clothing, bus passes, etc.)	65%	34%
Supportive	40%	31%
Follow-Up	28%	18%
Employment leads	24%	22%
Link to treatment	18%	8%
Motivate	18%	9%
Facilitate education	16%	8%
General resources	14%	9%
Link to housing	10%	7%
Provide transportation	6%	3%
Link to legal services	5%	14%
Coordinate with family	5%	8%
Facilitate medical services	5%	5%
Link to sober living	5%	12%
Coordinate with parole	3%	9%
Facilitate mental health services	3%	1%
Programs	0%	4%
Financial	0%	5%
TOTAL RESPONDENTS	80	74

NOTE: Cases with missing information not included.

SOURCE: Follow-Up Interviews, SANDAG SB 618 Fourth Annual Evaluation Report

Participants not rating the CCM as helpful were given the opportunity to specify why they gave this rating. These individuals wanted more follow-up (6), were frustrated with staff turnover (2), needed more resources in general (2), desired more contact with the CCM (1), felt that views were ignored (1), were dissatisfied with the use of stabilization funds² (1), and found the services not applicable (1) (not shown).

² Up to \$500 per participant are available to offset costs for obtaining identification documents (e.g., driver's license), clothing for work, public transportation passes, and other items necessary for successful reentry.

Community Roundtable

In an effort to involve social supports in the lives of participants, SB 618 was designed to include regular Community Roundtable meetings during the community portion of the program. The purpose of these meetings (previously described in Chapter 1) is to ensure that the participant is on the appropriate path by reviewing needs and progress regarding the Life Plan, and includes the

CCM, parole agent, participant, and any other individuals actively involved in the participant's reentry into the community. Participation in the Community Roundtable was reported significantly more often after six months in the community (71%) than after one year (39%) (Table 7.4), consistent with the frequency of Community Roundtables presented in Chapter 4. However, for those respondents who did participate in a Community Roundtable, ratings of helpfulness were consistently

Helpful aspects of Community
Roundtable meetings include
providing resources and
encouragement, focusing on
goals, and maintaining
regular contact with
attendees.

high (88% at 6 months and 97% at one year).³ The most frequently mentioned ways in which the Community Roundtable was helpful included resources provided, encouragement/support, discussion regarding goals, and contact with roundtable attendees (18% to 28% at 6 months and 13% to 48% at one year).

◆ SB 618 PARTICIPANT 6-MONTH FOLLOW-UP INTERVIEW◆

"Sometimes I get sidetracked and [the Community Roundtable helps] me keep my focus, by asking me to come back to what my goals are and knowing my history and my plans. They ask me how my behavior is contributing to my focus and goals. I did not have a good understanding [of] how my behavior was not pertaining to my goals. They helped me with that and really care about me."

The few individuals indicating that these meetings were not helpful felt they were too fast and lacked substance (5), thought attendees were working at cross-purposes (2), believed their perspective was ignored (1), and found attendees invasive (1). Suggestions for improvement included being more organized (5), providing more resources (3), and spending more time listening to the participant (1) (not shown).

-

³ A total of 27 individuals participated in a Community Roundtable within 6 months, as well as 12 months. For these participants, ratings of helpfulness were not significantly different (93% at 6 months and 96% at 12 months).

Table 7.4
COMMUNITY ROUNDTABLE VIEWED AS HELPFUL

	6-Month	12-Month
Attended Community Roundtable*	71%	39%
TOTAL RESPONDENTS	82	83
Community Roundtable Helpful	88%	97%
TOTAL RESPONDENTS	58	32
Ways Community Roundtable helped		
Resources	28%	13%
Encouragement/support	26%	48%
Focus on Life Plan/goals	26%	29%
Regular contact/update	18%	19%
Advice	14%	10%
Improved relationship with Parole	12%	6%
Got everyone on the same page	6%	6%
Listened	4%	3%
Motivated	4%	3%
Showed impact of my behavior	4%	0%
Updated friends/family	4%	0%
Considered my perspective	2%	3%
TOTAL RESPONDENTS	50	31

^{*}Difference significant at .05 level.

NOTE: Cases with missing information not included.

SOURCE: Follow-Up Interviews, SANDAG SB 618 Fourth Annual Evaluation Report

Community Programs

SB 618 seeks to address the underlying needs of offenders upon release from prison (as documented in the literature and described in Chapters 1 and 3) by linking them to existing services in the community in order to reduce recidivism and increase public safety. As such, follow-up interview respondents were asked to rate the helpfulness of the various community service options on a four-point scale with 1 indicating "very helpful" and 4 "not helpful at all". As Table 7.5 shows, a majority of respondents found the following services helpful:

Services in the community rated as most helpful include transportation, substance abuse treatment, obtaining identification, education, housing, and basic necessities.

transportation, substance abuse treatment, obtaining identification documents, housing, basic necessities, employment referrals, and vocational training. Less than 20 of the respondents indicated that they had received help in the areas of education (at 12 months only), legal services, mental health treatment, medication management, medical services, financial assistance (at 12 months only), child support, and dental care. The ratings for these services should be interpreted with caution given the small number of individuals responding.

Table 7.5
RESPONDENTS RATE COMMUNITY SERVICES AS HELPFUL

	6-Month		12-Month	
Service Provided in the Community	Percent	# Receiving Service	Percent	# Receiving Service
Transportation	100%	67	96%	45
Substance abuse treatment	96%	48	94%	36
Obtaining identification (birth certificate, driver's license)	97%	62	93%	30
Education	96%	25	88%	8
Housing	95%	41	89%	28
Basic necessities (e.g., clothing)	94%	54	91%	34
Employment referrals	87%	60	84%	37
Vocational training	86%	36	85%	20
Legal services	86%	14	73%	11
Mental health treatment	85%	20	77%	13
Medication management	85%	13	70%	10
Medical services	81%	16	78%	9
Financial assistance	83%	36	82%	17
Child support	80%	15	63%	8
Dental services	55%	11	40%	5

NOTES: Cases with missing information not included. Percent shown represents respondents who gave a rating of "very helpful" or "somewhat helpful" on a four-point scale.

SOURCE: Follow-Up Interviews, SANDAG SB 618 Fourth Annual Evaluation Report

♦ SB 618 PARTICIPANT 6-MONTH FOLLOW-UP INTERVIEW♦

"... Anything that I couldn't do for myself they helped me with... It's been great."

OVERALL SATISFACTION

Ideas for Program Improvement

Follow-up interviews with treatment participants gave respondents the opportunity to share ideas for improving the program. Six months after release from prison, about one-quarter (27%) of the follow-up interview respondents indicated that the program was fine as implemented with no suggestions to make the program better; this proportion rose to over one-third

Participants desire more accurate information about program components, employment assistance specifically related to ex-offenders and the local job market, and more follow-up.

(37%) after one year in the community (not shown). For the respondents suggesting improvement, Table 7.6 shows the ideas that were offered to this open-ended question. The most frequent suggestions related to providing more accurate information about program components, more relevant employment assistance, and more follow-up as the following quotes illustrate.

- *At the beginning when people are signing up for SB 618 they should be more clear about the actual services we will receive and not lead us on."
- Have more solid job leads. I am not expecting them to find a job for me but it has to be better than 'Craigslist'... there will be thousands of applicants... They should set-up trainings with skills and real job leads with actual contacts and better links...."
- "...get a better understanding of what employers are looking for... I'm fiber optics certified but I can't get a job with them because of my record so it's kind of pointless getting trained in prison if they know I can't be hired."
- "Work more closely with people. Have regular meetings when they are released and see what they are up to... I never had a [Community] Roundtable. It would have been good if my family knew about the roundtable so that they could have helped me when I got out."

Table 7.6
AREAS FOR IMPROVEMENT IN COMMUNITY SERVICES INCLUDE INFORMATION FLOW, EMPLOYMENT, AND FOLLOW-UP

Area for Improvement	6-Month	12-Month
More accurate information	21%	15%
Employment	16%	17%
Follow-up	15%	15%
Improved in-prison services	10%	6%
Small caseloads	8%	13%
More basic assistance (e.g., bus passes)	8%	2%
Increased resources in the community	8%	
Housing resources	7%	6%
Additional funding for the program	7%	2%
Better plan of action for person after release from prison	7%	
Ensure services are individualized to specific needs	7%	
Facilitate communication between participants	5%	8%
More staff training	5%	4%
More expedient procurement of identification (birth certificate, driver's license)	5%	
Better coordination between agencies	5%	
Maintain quality staff	3%	6%
More financial assistance (e.g., access to food stamps)	3%	4%
More health services	3%	4%
More dental services	3%	4%
More vocational training	3%	
More substance treatment	2%	10%
New program needs time to solidify	2%	4%
Insurance enabling staff to transport participants	2%	2%
More mental health services	2%	2%
Assistance in overcoming limitations created by having a criminal record	2%	
Better system for service distribution	2%	
More involvement in the community	2%	
More educational programs	2%	
More incentives/rewards for good behavior	2%	
Continue program evaluation	2%	
Expand program so more can benefit	2%	
Increase fairness in allocation of resources		6%
Continue services longer		6%
Reduce staff turnover		4%
More participant input/feedback		2%
TOTAL RESPONDENTS	61	52

NOTE: Cases with missing information not included.

SOURCE: Follow-Up Interviews, SANDAG SB 618 Fourth Annual Evaluation Report

Challenges/Barriers

Another open-ended question on the follow-up interview asked respondents to share any challenges or barriers faced that limited their ability to make positive changes or progress following release from prison. Over one-third (37%) of the participants interviewed 6 months after they were

paroled indicated that they had no barriers, increasing to 47 percent at 12 months (not shown). However, for the individuals specifying challenges, employment was the barrier most frequently shared (Table 7.7), highlighting the reluctance of employers to higher ex-offenders, particularly in the current

Employment is the barrier faced most often by treatment participants.

economic climate. An examination of the barriers particularly for participants who are not successful (i.e., have a new arrest, conviction, or prison term within the first six months following prison release) revealed that substance abuse and employment were the most frequently mentioned barriers to successful reentry (not shown), which emphasizes the role of substance abuse treatment and satisfying employment in reducing recidivism.

♦ SB 618 PARTICIPANT 6-MONTH FOLLOW-UP INTERVIEW

"...trying to get situated, by finding a good job that will pay a good income. Being an ex-con or parolee makes it tough to get a job - they're out there but they're hard to find."

♦► SB 618 PARTICIPANT 12-MONTH FOLLOW-UP INTERVIEW

"I got a good trade, but construction is in a recession. I'm having to come up with my own creativeness in applying my trade. No job leads... They... pay half of a person's wages if they have a felony. I'm having difficulty finding a job. I know people who got hired at the shipyard, but I can't get hired, so I don't know. I'm an electrician, I got a trade, but I can't get a job."

Table 7.7
EMPLOYMENT IS THE PRIMARY BARRIER TO REALIZING POSITIVE CHANGE

Barrier	6-Month	12-Month
Employment	47%	34%
Criminal record	19%	7%
Handling financial obligations	15%	7%
Substance abuse	11%	14%
Obtaining documents	9%	7%
Personal motivation	8%	11%
Physical health	8%	11%
Access to transit	6%	9%
Housing	4%	11%
Complying with parole conditions	4%	2%
Peer influence	4%	2%
Mental health	4%	2%
Emotional stress	2%	7%
New arrest	2%	5%
Dental issues	2%	
Judgment by others	2%	
Pregnancy		2%
Access to medication		2%
TOTAL RESPONDENTS	53	44

NOTE: Cases with missing information not included.

SOURCE: Follow-Up Interviews, SANDAG SB 618 Fourth Annual Evaluation Report

SUMMARY

This chapter summarized preliminary findings from follow-up interviews at 6 and 12 months following release from prison. Overall, treatment participants had a favorable opinion of the program. Assistance provided specifically through SB 618 (i.e., CCM, Vocational Specialists, and the Community Roundtable) were rated favorably, as well as services brokered through community-based agencies (e.g., education, housing, and substance abuse treatment). While participants were positive about the program overall, areas needing improvement also were revealed to assist program partners as they continue to manage the program in the future, particularly with respect to providing more accurate information regarding program components and employment assistance.

Chapter 8:

Conclusions

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CHAPTER 8 CONCLUSIONS

INTRODUCTION

In response to high incarceration rates with few rehabilitative programs offered in prison, the San Diego County District Attorney's (DA) Office authored Senate Bill (SB) 618 with the goal of recidivism and increasing reducina probability of successful reentry for individuals leaving prison and returning to California communities. SB 618 is based on national knowledge of evidence-based practices in prisoner reentry and the concept that providing tangible reentry support services will increase parolees' chances of successful reintegration into the community. Information is provided in this fourth annual evaluation report regarding the program components, as well as details regarding the process and impact evaluation research design. Research findings are described, relating to the process of program implementation and accomplishments and the impact of the program on recidivism, risk reduction, and program satisfaction to date.

PROGRAM IMPLEMENTATION AND MANAGEMENT

Information regarding the process of program implementation and management provides valuable information to other jurisdictions interested in implementing similar prisoner reentry programs and to program partners as they continually strive to improve and enhance program components.

Was the Program Implemented as Designed? What Modifications Were Made and Why?

MAJOR FINDINGS

- The program partners encountered challenges to program implementation and management, especially in regard to recent budgetary constraints. However, program partners have remained committed to the original program design and worked diligently to find creative ways of providing services within these constraints.
- Participant needs are assessed within the expected timeframe, reducing time spent in the prison reception center.
- With respect to risk reduction, preliminary data from the impact evaluation suggest that SB 618 participation is linked to reduced substance use, as well as improvements in social supports, housing, and employment.
- Service engagement in the community and stable housing are the two factors predictive of success
- Significantly fewer full treatment participants are arrested or convicted for a new crime throughout the 12-month post prisonrelease period.
- The full treatment group is significantly less likely than the comparison group or the partial treatment group to commit a parole violation, as well as be returned to prison within 12 months following prison release.

Program implementation and management have involved numerous partners who have dealt with the many challenges presented in Chapter 3.

- The ability to implement SB 618 as planned has been hampered due to significant budgetary and bureaucratic constraints, which resulted in reductions in prison programming, staffing, and increased caseloads for PCMs and CCMs. Specifically, from FY 2008-2009 to FY 2010-2011, CDCR's budget was cut \$1.9 billion, including a 27 percent reduction in funding for SB 618 in FY 2009-2010 and an additional 16 percent in FY 2010-2011. Despite these constraints, program partners have remained committed to the original program design and worked diligently to overcome obstacles. Based on these efforts, many best practices were implemented and new components incorporated, including cognitive-behavioral therapy classes at RJD and a system of rewards for participants who complete crucial program "benchmarks". Further, after years of persistent effort, program partners were successful in ending the duplication of mental health screenings at RJD, thereby utilizing limited resources more effectively.
- The unprecedented collaboration between local and state agencies in SB 618 has included the San Diego District Attorney's (DA) Office; Public Defender's Office; Defense Bar; Sheriff's Department; Probation Department; the California Department of Corrections and Rehabilitation (CDCR) (Division of Community Partnerships, both prisons, and Parole); Grossmont Union High School District; and the University of California, San Diego, Department of Psychiatry, Center for Criminality and Addiction Research, Training and Application (UCSD); and AmeriCorps*VISTA (Volunteers in Service to America). Representatives from these agencies meet regularly (as often as weekly) to collaborate in the development of creative solutions to issues as they arise.

SERVICE DELIVERY

What Were the Characteristics and Needs of Participants?

As part of the evaluation design, a total of 347 eligible individuals were assigned to the treatment group and 367 to the comparison group. The comparability of these groups was examined in Chapter 4 to discover any differences resulting from the lack of random assignment that could bias the study findings.

The research findings indicate that SB 618 targets individuals shown in the corrections literature to be at high risk for continued criminal activity (i.e., drug or property offenders with lengthy criminal records) (National Research Council, 2008).

The treatment and comparison groups were similar regarding age and gender, with participants averaging about 35 years old at program intake and the majority of both groups being male (83% and 87%, respectively). With respect to criminal history, the two groups were comparable regarding the number of convictions, as well as level (i.e., felony or misdemeanor) and type (e.g., violent, property, or drug) of conviction charges both for offenses during the two years prior to program assignment and for the instant offense. There was a larger proportion of Whites (46%) and fewer Hispanics (19%) in the treatment group relative to the comparison group (38% and 23%, respectively).

Two in three individuals offered the program accepted. Those who did not accept had less prior criminal involvement in the criminal justice system. The assessment process at program entry revealed that nearly the entire treatment group had a significant need for vocational training and

substance abuse treatment. The analysis presented in Chapter 4 also described the following details regarding the needs of SB 618 participants.

- Assessment of alcohol and drug use within 30 days prior to program entry indicated that the majority of SB 618 participants were in need of treatment, particularly for methamphetamine and marijuana use.
- Almost half of the treatment group reporting drug and/or alcohol use (to the point of intoxication) in the past 30 days had prior treatment experience.
- The treatment group had educational and life skills sufficient for success in vocational programming.
- Consistent with other research findings (Bloom, Owen, & Covington, 2003), female participants were significantly more likely to report being a victim of abuse (i.e., emotional, physical, and/or sexual abuse).

These assessed needs suggest that SB 618 services should focus on vocational training, substance abuse treatment, and gender-responsive programming, which it has attempted to do despite the bureaucratic and fiscal constraints previously mentioned.

What Services Were Provided Through SB 618?

Service provision for SB 618 begins with the needs assessment process, which is completed in local custody (i.e., prior to prison entry) so that time in prison can be utilized for participation in rehabilitative services. Data collected for the evaluation regarding service delivery also were analyzed in Chapter 4 and showed the following.

- Participants were assessed within the expected timeframe.
- As a result, nearly all participants received some type of program services while in prison.
- Nearly everyone in the treatment group met with the Prison Case Manager (PCM), although the frequency of meetings was greater at CIW compared to RJD. This difference may be due to staffing shortages at RJD experienced throughout the evaluation period. Likewise, nearly all participants met with their Community Case Manager (CCM) in prison, as was the design of the program.

With respect to the match between needs assessed and services provided in prison, 82 percent of the treatment group participated in prison programs that matched their individual needs.

• Over half (53%) of males and nearly one-third (32%) of females in prison received training in a vocational program.

- Almost two-thirds (59%) received Substance Abuse Programs (SAP) and one-quarter (25%) of those went on to participate in Drug Treatment Furlough (DTF), which is located in the community and considered part of the prison stay. This proportion is higher than reported statewide, where 10 percent of those in need participate in substance abuse treatment (CDCR, no date).
- About two-fifths (43%) participated in educational programs (e.g., adult basic education, General Equivalency Diploma [GED], and college courses).

For services received in the community during the first year following prison release, services matched needs for almost all participants (95%).

- Three quarters of the SB 618 participants who had been out of prison for the 12-month post period utilized a service in the community and they tended to be older and score lower on criminal thinking scales than remaining one-quarter of SB 618 participants who did not follow through on referrals.
- Participants with substance abuse needs were most frequently referred to substance abuse treatment and these services were accessed by the largest number of participants.
- Employment, clothing, and housing needs also were commonly addressed during this period.
- Nearly all of the treatment group members had regular contact with the CCM after release, though this contact occurred during the critical three-day period after prison release for only about half of participants. This difference may be related to the fact that some participants are released directly from prison to residential treatment, where a "blackout period" precludes any contact with anyone outside the facility, including CCMs.

Despite this level of service provision, there was a disconnect between needs and specific services provided, particularly with respect to education, vocational training, and substance abuse treatment in prison, as well as education and vocational training in the community. This disconnect is due in part to the lack of service availability resulting from the fiscal crisis.

- Program retention was high, with 90 percent remaining in the program throughout the prison term and 84 percent successfully participating during the 12 months following prison release.
- The primary reason for leaving the program while in prison or in the community was lack of compliance (e.g., rule violations in prison and parole violations or new offenses in the community).

PROGRAM IMPACT

What was the Impact of SB 618 on Offender Behavior?

Ultimately, SB 618 aims to assist ex-offenders in becoming productive citizens who do not return to prison in order to protect the public and save precious taxpayer dollars. The impact of the program on offender behavior was assessed in Chapter 5 with respect to parole violations, arrests, convictions, and return-to-prison rates for the 12-month period following prison release. At the

time data were compiled for this report, about one-third of the treatment and comparison groups had not been out of prison for the full 12 months and could not be included in the analysis. Therefore, any conclusions regarding program effectiveness should be deferred until the final report.

- The full treatment group was less likely to be re-arrested for a parole violation one year after release. The finding that SB 618 may be assisting offenders to adhere to their conditions of parole is especially valuable given the high rate of parole revocations in California, as well as in light of the new legislation mandating non-revocable parole for non-violent, non-serious offenders.
- The full treatment participants were significantly less likely than the comparison group to return to prison.

The SB 618 program is based on the philosophy that successful reentry is tied to understanding needs and service provision in prison, followed by support and services in the community. Based on this perspective, the analysis in Chapter 5 examined the relationship between receipt of services and success (i.e., desistance from crime).

- Receiving services in the community (i.e., utilizing the referrals provided by the CCMs) was related to, and predictive of, not being arrested, convicted, and/or returning to prison in the 12 months following prison release.
- Dotaining stable housing and employment also were protective against criminal activity. However, multivariate analyses showed that without stable housing, employment alone was not predictive of success.

What was the Impact of SB 618 on Risk Reduction?

With respect to social outcomes related to risk for recidivism, several improvements occurred for SB 618 participants, particularly as related to substance abuse, social supports, housing, and employment, as discussed in Chapter 6.

- ▶ Based on the Addiction Severity Index (ASI), alcohol and other drug use decreased for SB 618 participants from program entry to release in the community.
- During interviews with the treatment group following prison release, the majority of participants indicated that their friends were not involved in anti-social activities and that family relationships had improved during program involvement, resulting in open communication and a high level of satisfaction with the relationships.
- With respect to housing, over four-fifths of the treatment group secured stable housing within one year of release from prison, which included government supported and monitored accommodations, sober living, board and care, residential treatment, and permanent housing (i.e., responsible for paying rent/mortgage).
- Almost three-quarters of the treatment group were employed at least once during the year following prison release.

What was the Level of Program Satisfaction Among Participants?

The impact evaluation included measures of participant satisfaction in Chapter 7 since level of satisfaction can impact engagement in services and ultimately program effectiveness. Specifically, the literature on evidence-based practices indicates that the quality of contact between program participants and staff impacts client motivation and increases the likelihood that service delivery is related to client risks/needs (Gendreau, 1996; Matthews, Hubbard, & Latessa, 2001; Sherman, Gottfredson, MacKenzie, Eck, Reuter, & Bushway, 1997).

- Overall, SB 618 participants appreciated the services received through the program.
- Life Plans were viewed as accurately describing needs and inclusive of participant input.
- The community portion of the program (e.g., Community Case Management) was rated favorably, as were services brokered through community-based agencies.
- Participants also shared areas for program improvement. The most frequent suggestions for program improvement included providing more accurate information regarding program components and employment assistance, specifically related to ex-offenders and the local job market.

LESSONS LEARNED

The accomplishments and challenges experienced through the implementation of SB 618 have provided valuable lessons to guide others considering implementation of similar prisoner reentry programs.

What has Worked Well?

- Program partners have remained committed to the original program design and worked diligently to resolve constraints due to policies and practices with long histories and budgetary constraints that grew more significant over the course of the evaluation. As a result, evidence-based practices were implemented (e.g., system of rewards for completing crucial "benchmarks").
- Since program inception, a culture of open communication has been fostered among program partners across agencies. Operational Procedures Committee meetings were first convened in November 2005 and have served as one vehicle for communication. These meetings are regularly attended by key individuals to discuss issues, brainstorm possible solutions, and come to agreement on the best course of action.
- Though in-prison programming has been reduced and case management caseloads increased, SB 618 continues to differ from treatment as usual. For example, needs are assessed in a timely manner; a life plan is developed with participant input to address assessed needs starting in prison; services are received in prison sooner; and support is provided from PCMs and CCMs, who are able to work with Parole to facilitate the referral process and complete service delivery upon a participant's reentry into the community.

- Another method of communication utilizes a Web-based data management system designed specifically for the local SB 618 program. With frequent input from program partners, the DA's Office Information Systems experts created a user-friendly database that captures data on each participant from screening/assessment through program exit. The database includes automation of the Life Plan to allow it to be updated online and shared among Prison Case Managers and Community Case Managers, facilitating timely communication between everyone working with each participant.
- As part of SB 618, assessments are conducted locally, beginning before a participant is transferred to the prison reception center. During program development, partners thoroughly discussed which assessments should be conducted and agreed that additional information would be useful regarding participants' substance use and vocational needs. The information gained from these assessments is used in the creation of each participant's Life Plan. As previously mentioned, the relatively high proportion of participants receiving services matching their overall needs also suggests the effectiveness of these assessments.
- Research on prisoner reentry has highlighted the beneficial role of collaboration in the provision of services through partnerships across systems (La Vigne, Davies, Palmer, & Halberstadt, 2008). The primary method of collaboration used in the SB 618 program involves incorporating interdisciplinary team approaches at two key points in a participant's progress, both of which have received positive feedback from participants. The first of these is the MDT meeting held prior to participants' sentencing to review eligibility and discuss screening and assessment results. These meetings are staffed by a Probation Officer, CCM, PCM, and a prison classification counselor. The second of these interdisciplinary forums, the Community Roundtable, is convened on an ongoing basis from the participants' release to their exit from the program. The Parole Agent, CCM, participant, and any other individuals significantly involved in the participant's reentry effort attend these meetings.
- Program processes realized during the course of the evaluation could ultimately lead to systems change. Specifically, the treatment group spends less time in the reception center, an area of the prison where offenders are housed together regardless of risk level and rehabilitative services are not available. Expansion of this practice could potentially improve opportunities for rehabilitative programming for all prisoners.
- Even though around one-third of eligible individuals declined services when offered the program at sentencing, those who did enroll were actively engaged in the program while in custody and upon release into the community. Those who refused services were less likely than the treatment group to have prior criminal involvement two years before being offered SB 618.
- SB 618 reduced factors shown in the literature to be linked to recidivism, including social supports, employment, and stable housing.
- Full treatment participants were less likely to be returned to prison. By stopping the revolving door to prison, SB 618 has the potential to help California reduce its prison population and lower the historically high rate of technical violations.

What Issues Remain?

Despite the diligence of program partners, SB 618 has not been consistently implemented as initially envisioned during the course of the evaluation. Some challenges which have remained priorities for the partners include the following.

- While program partners were successful in negotiating the end mental health screening duplication at RJD, medical screenings are delayed until entry into the prison reception center because CDCR's medical system is under federal jurisdiction and administered by a court-appointed medical receiver. As a result, the length of time participants spend in the reception center is longer than intended, reducing the portion of the sentence spent in areas of the prison open to rehabilitative services.
- Achieving full prison case management staffing at the Richard J. Donovan (RJD) Correctional Facility has been an on-going challenge throughout the evaluation period.
- Closures of in-prison programming particularly with respect to substance abuse programs and vocational training negatively impacted the match between services and needs, which is directly related to the ability of participants to prepare for clean and sober lifestyles and employment upon release from prison into the community.
- Period Continued policy changes may have an effect on SB 618, including the opening of a specialized Reentry Court in San Diego County and passage of SB 18, which created Non-Revocable Parole (NRP), a strategy to reduce prison overcrowding and Parole caseloads by releasing eligible inmates directly to the community rather than assigning them to a Parole Agent.

PRELIMINARY RECOMMENDATIONS

The following recommendations are based on the research findings and are offered for consideration by program partners as they continue to strategize creative ways to address constraints for fully implementing the original program design.

- Program outcomes may improve if contacts with friends and family members were increased through more consistent implementation of the Community Roundtables (since study findings indicated that these meetings were not held as often as planned). Research studies indicate that the support of family members is key to reducing recidivism by providing financial and emotional support (La Vigne, et al., 2008; La Vigne, Visher, & Castro, 2004). More specifically, quality and positive relations have been found to be more predictive of the development of strong social networks, leading to positive outcomes (Wolff and Draine, 2004).
- Since individuals with a history of parole violations were more likely to recidivate, identifying this group through the assessment process and focusing to an even greater degree on related needs may improve outcomes.
- Given the relatively high proportion of participants with previous substance abuse treatment, outcomes may be improved by more strategically addressing factors that led to relapse.

- ▶ Continued focus on cognitive-behavioral programming in prison may improve outcomes by helping participants replace anti-social associations and behaviors with pro-social ones before release into the community.
- ▶ Based on assessed needs, SB 618 services should continue to focus on vocational training, substance abuse treatment and gender-responsive services.
- Within the constraints of current caseload size, consideration of ways to emphasize frequent and constructive contacts with participants may maximize client motivation, improve the connection between referrals and needs, and ultimately outcomes.
- Feedback from participants indicated a need for more employment assistance specifically related to ex-offenders and the local job market. In light of the economic downturn over the past few years, program partners may want to continue and expand current efforts to conduct outreach with felon-friendly employers and explore vocations suitable to this population with more equitable wages.
- With about one out of three individuals refusing SB 618 services when offered at time of sentencing, program partners may want to examine if refusal rates vary by court branch to help determine the factors holding people back from getting needed reentry assistance.

SUMMARY

Based on the preliminary research findings in this fourth annual evaluation report, the SB 618 Prisoner Reentry Program in San Diego has encountered challenges, especially in regard to recent budgetary constraints. The recommendations shared in this chapter are provided to assist local program partners as they continue to grapple with obstacles and to guide others interested in implementing similar reentry programs in other jurisdictions. Over the next year, the evaluation will continue to document the process of program implementation and further assess program impact as the treatment and comparison groups have longer periods in the community following release from prison and more long-term outcome data will be available for a larger number of participants.

NEXT STEPS FOR EVALUATION

As the evaluation reaches completion over the next year, a more refined assessment of program impact will be provided through the following:

- A statistical method will be employed to match the study groups to ensure that research findings are not biased;
- A robust analysis will be conducted as a larger number of cases will be out of prison for a longer period of time; and
- A cost-effectiveness analysis will be conducted.

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