Creating opportunities, changing lives, and growing healthier, more inclusive communities
Acknowledgements

The Office of Diversion and Reentry Services would like to acknowledge and thank its reentry partners for their commitment to our clients and for all the work they do to improve our community. This mission calls for a collaborative effort among dozens of County entities and community organizations. Our partnerships have shown that together we can transform criminal justice systems and improve lives.

Partners:
Office of the County Executive
Probation Department
Office of the Sheriff
Department of Correction
Office of the Public Defender
Office of the District Attorney
County Counsel
Office of Pretrial Services
Superior Court
Social Services Agency
Behavioral Health Services Department
Technology Services and Solutions
Health and Hospital System
Valley Homeless Health Care Program
Office of Supportive Housing
Custody Health Services
Employee Services Agency
Facilities and Fleet Department
Department of Child Support Services

And to all of the County-contracted community-based organizations, many of whom are the pioneers of reentry services, we thank you for the dedication, spirit, and compassion that you bring to this work.

Featured Art:
The mural on the cover was created via a collaborative process headed by Sam Brown, coordinator of community engagement for nonprofit Carry the Vision. He gathered men from the community, some of whom have lived experience with the criminal justice system, to develop the inspiration for the mural. Rolando Barón painted the mural. Carry the Vision fundraised for the project and coordinated production and installation. Many thanks to all these individuals, especially Carry the Vision Executive Director Shelley Swan, and Special Projects Manager Olivia Soza-Mendiola for the joy and hope this artwork brings to all who enter the Reentry Resource Center lobby.

Table of Contents

Letter from the County Executive and Chief of Probation
Executive Summary
Reentry Resource Centers
Reentry Champion Q&A
Alignment in Santa Clara County
Supervision in Community (Probation)
Public Benefits
Reentry Behavioral Health Team
Healthcare
Reentry Supportive Housing
Reentry Programs and Initiatives 10-Year Timeline
Employment
Faith-Based Reentry Collaborative
Other DRS-Contracted Services
Pretrial Services and Supervision
Reentry Expungement Program
Custody Alternative Supervision
Alignment (AB109) Recidivism
Lived Experience Advisory Board
Reentry Champion Q&A
Jane Marin
Conclusion
Recommendations

Prepared by:
Office of Diversion and Reentry Services
Javier Aguirre, Director
Chad Martens, Program Manager
Lynn Madden, Communications Officer

In 2011, when the County of Santa Clara first established the Adult Reentry Network, the Office of the County Executive, Sheriff’s Office, Behavioral Health Services Department, Custody Health Services, and Probation Department led the initial effort to establish the Reentry Resource Center, which built the foundation for the development of a streamlined system of support for individuals leaving custody. Today, the Reentry Resource Center serves as a one-stop shop for social safety net services to help clients successfully reintegrate into their home communities through the reentry process, which is statistically one of the most vulnerable times in a justice-involved individual’s life due to the high likelihood of relapse.

Today, the core group of Adult Reentry Network stakeholders has grown into a vast network of more than 75 County departments and community-based organizations, which includes partnerships among law enforcement agencies and court system entities in collaboration with the Office of Diversion and Reentry Services. More than 20,000 clients have passed through the doors of the Reentry Resource Centers in San José and Gilroy, effectively slowing the rate of recidivism among formerly incarcerated individuals and helping individuals from disadvantaged backgrounds reach their potential. Together, we are addressing some of the barriers that prevent individuals from successfully transitioning to their home communities. The Reentry Resource Center provides clients with access to immediate needs such as healthcare, nutrition, and public assistance as well as opportunities for job training, employment support, and education. These services not only help clients meet their basic needs, but also help them to thrive by helping them regain a sense of self-worth and belonging in their home communities. These efforts benefit our community by strengthening familial relationships, improving individuals’ and families’ economic prosperity, and by reducing involvement with public safety.

Santa Clara County has become a national model for making investments in services and programs that prevent or reduce individuals’ involvement in the justice system. Over the last decade, the County has developed more than 100 process, policy or program initiatives to reduce incarceration rates. The Mission Street Recovery Station, located at the Reentry Resource Center in San José, is one example of an effective program that provides an alternative to jail for people who are experiencing a drug, alcohol, or mental health crisis.

The Reentry Network has evolved into a program that centers and is molded by consumer voice. Looking ahead, we will continue to critically assess existing programs and policies and invest in new and evolving strategies to promote rehabilitation. We will also be expanding on our capacity to integrate community, family, and client voice in every aspect of program development and implementation. Santa Clara County provides a vast array of social safety net services related to food, shelter, and clothing for members of our most vulnerable communities. However, we believe that further committing and centering our services and programs on promoting a sense of trust, mutual support, racial equity, spiritual connection, and healing is just as important.

In the Next Five Years, the Office of Diversion and Reentry Services Will Focus Its Efforts On:

- Increased County employment of and support for hiring individuals who have experience with incarceration and the criminal justice system.
- Growing a small business incubator initiative with several successful employment social enterprises that provide jobs, training and support to people breaking through barriers to employment.
- Addressing the gross overrepresentation of people of color involved in the justice system.
- Supporting efforts to expand formal diversion and alternatives to incarceration programs in collaboration with health and human service agencies, law enforcement agencies, and the Superior Court, District Attorney and Public Defender.
- Increasing treatment, shelter, and housing options for individuals and families affected by justice system involvement.

Most importantly, we will continue striving toward providing the best service possible for some of the county’s most vulnerable residents by remaining in close dialogue with the diverse members and families of our communities.
EXECUTIVE SUMMARY

In October of 2011, California’s Public Safety Realignment Act (AB 109) was passed to reduce overcrowding in California’s prisons. Commonly referred to as ‘Realignment’, this legislation shifted the responsibility of incarcerating and supervising lower-level, nonviolent offenders from the state level to the county level. Now, individuals who commit nonviolent and less serious offenses serve their sentences in county jails, instead of state prisons, and are supervised by local probation departments, instead of parole. To assist the counties with taking on this challenge, funding was allocated to each local jurisdiction and each county was tasked with determining how to distribute the funds most effectively. The County of Santa Clara decided to invest the bulk of that funding in resources and rehabilitation.

On March 1, 2011 the Board of Supervisors approved the establishment of the Santa Clara County Reentry Network to identify comprehensive reentry and recidivism reduction strategies to elevate existing efforts, streamline processes of linking inmates to effective in-custody and community-based programming, identify cost-saving methods, and prepare Santa Clara County for Realignment.

Realignment funding was dedicated to providing in-custody programming and post-release reentry services, with the overall goal of preventing recidivism. The County created a collaborative Adult Reentry Network, so that clients would have streamlined access to a holistic network of resources.

In early 2012, the County opened the Reentry Resource Center (RRC) in San Jose which now serves as the hub of the Adult Reentry Network. In 2015 it opened a second center in Gilroy to serve South County residents. The RRC utilizes a “one-stop-shop” model, a partnership with multiple County agencies and contractors, who collaborate under one roof, to provide the resources to individuals leaving incarceration.

Over the last decade more than 20,000 clients have passed through the Reentry Resource Center’s doors, more than 110 staff from County departments are working under its roof and it collaborates with dozens of community-based organizations. Multiple County departments and organizations have been making concerted efforts to ensure that only those who pose the greatest risk to community safety are incarcerated. And that has resulted in a decrease in the jail population from 3,452 on Oct. 1, 2011 to 2,414 on October 1, 2021.

Many stakeholder workgroups have developed over the past decade to inform and direct the County’s efforts to use the best evidence-based policies and procedures for reducing recidivism, depopulating its County jails, and ensuring the safety of the community. Instead of relying on punitive approaches to criminal justice, the County has found that by appropriately assessing individuals in the County’s custodial setting or even prior to taking individuals into custody, resources and services can be provided to residents that can significantly reduce the need for incarceration. Crucial resources including mental, and substance use treatment, housing, employment, and medical care go a long way in reducing crime.

PURPOSE

The purpose of this report is to provide an overview of the last 10 years of reentry initiatives in Santa Clara County, to examine Realignment-funded services and programs, and to examine recidivism among the realignment population. The data and findings are important tools for managing existing programs and policies and for planning the expansion of services as well as new initiatives and policies for continued improvement of the County’s approach to reentry and diversion services.

For more detail regarding what is presented in this summary report, please review the full report here: www.sccreentry.org.

KEY FINDINGS

- From 2012 - 2022 the Reentry Resource Centers have served 20,000 unique clients during 100,000 visits and $432M has been allocated to Santa Clara County for this proactive rehabilitative network
- The majority of AB109 recidivism was at the misdemeanor level, was not violent or serious, and was most commonly drug-related
- For the AB109 population about one third of recidivism is directly related to drug crimes
- Based on data from 2016 at least 20% of individuals in custody and involved with our justice system have a diagnosis in the category of severe mental illness
- Alternatives to incarceration like the Custodial Alternative Supervision Program and the Electronic Monitoring Program have very successful completion rates
- Roughly half of the Realignment population is without permanent housing, which is a significant barrier to successful reentry
- Less than half (48%) of the Realignment population had at least one new law violation within five years of release, compared to 56% before the County’s investment in reentry services.
- Transportation is a significant barrier to accessing services for the Realignment population

For a more in-depth discussion of these findings, please view the full report at the Office of Diversion and Reentry Services website: www.sccreentry.org

REENTRY RESOURCE CENTERS

The County of Santa Clara Office of Diversion and Reentry Services (DRS) was established as the Office of Reentry Services (ORS). It opened the Reentry Resource Center in San José in 2012 and a second location in San Martin in 2015. DRS collaborates with community-based entities and state and County departments to provide clients with services to support their highest needs such as temporary shelter and permanent housing, health and behavioral health care, safety-net benefits, employment training and placement, educational resources, record expungement services, and many other resources. Providing these resources to individuals leaving incarceration assists them to heal and become self-sufficient and contributing members of our community.

REENTRY RESOURCE CENTER PARTNERS

While DRS coordinates intake, operations, and initiatives, each partner housed at the RRCs works autonomously to serve clients within their own internal systems. Together the partners collaborate to support a one-stop-shop model, where justice-involved people can walk in and be linked to several different systems and community partners from one location on the same day. While at the RRCs, clients receive a variety of in-house services such as food, clothing, and hygiene kits. They can be linked directly to in-person County services such as social services, behavioral health teams, record clearance specialists, and supportive housing staff. Clients can also meet with probation officers and report for mandated programming. Through these processes, RRC clients are also linked to dozens of community providers and resources.

DRS AND RRCs MOVING FORWARD

Diversion: In late 2022 and early 2023 DRS will increase its staff from 18 to 34 in order to expand its services and to carry out its expanded mission in terms of diversion programs. To reflect this growth, the Office of Reentry Services (ORS) is changing its name to Diversion and Reentry Services (DRS). When ORS was created 11 years ago, it was formed as an administrative unit to oversee the RRC and identify resources to help individuals leaving custody return to community. Over the last decade the ORS has grown from three full-time employees to 18 and has initiated
or supported more than 60 programs designed to reduce recidivism, help formerly incarcerated individuals successfully reintegrate into the community, and help residents avoid acquiring a criminal record in the first place. The County continues to invest in alternatives to incarceration and services to prevent recidivism and reduce its reliance on incarceration.

**Outreach:** As alternatives to incarceration become more commonplace, the justice-involved population will become more dispersed. A key strategy in DRS’ expansion is to bring on a full team of outreach staff and additional community workers. These staff will be located in the jails, courts, and other community locations to help educate the population about the resources available to them and motivate people to seek and accept support. Outreach has always been a gap in the Adult Reentry Network, and it is needed now more than ever.

**Transportation:** Despite the vast network of services that has been built over the last decade, transportation from the jails and other locations, like the Reentry Centers, remains limited. DRS will work towards piloting transportation services to explore how these services can be most effectively provided.

**Entrepreneurship/Enterprises:** DRS and its partners have developed a robust system of vocational supports over the years. While still growing and improving, these programs have employed and/or placed hundreds of people in jobs. To build upon these programs, DRS will work with local organizations piloting transportation services to explore how these services can be most effectively provided.

**Behavioral Health/Enterprises:** DRS and its partners have developed a robust system of vocational supports over the years. While still growing and improving, these programs have employed and/or placed hundreds of people in jobs. To build upon these programs, DRS will work with local organizations piloting transportation services to explore how these services can be most effectively provided.

**Outreach:** As alternatives to incarceration become more commonplace, the justice-involved population will become more dispersed. A key strategy in DRS’ expansion is to bring on a full team of outreach staff and additional community workers. These staff will be located in the jails, courts, and other community locations to help educate the population about the resources available to them and motivate people to seek and accept support. Outreach has always been a gap in the Adult Reentry Network, and it is needed now more than ever.

**Transportation:** Despite the vast network of services that has been built over the last decade, transportation from the jails and other locations, like the Reentry Centers, remains limited. DRS will work towards piloting transportation services to explore how these services can be most effectively provided.

**Entrepreneurship/Enterprises:** DRS and its partners have developed a robust system of vocational supports over the years. While still growing and improving, these programs have employed and/or placed hundreds of people in jobs. To build upon these programs, DRS will work with local organizations piloting transportation services to explore how these services can be most effectively provided.
How has the Reentry Resource Center impacted your life?

It has given me hope, great opportunity and a platform to speak to others in the community and other fellow individuals and tell them that with hard work, you can accomplish things one at a time. It’s given me a voice and I am now able to build a network and advocate for the reentry population. And it is my second home.

When were you a client at the Reentry Resource Center?

2013 was the year I was a client. I left and then came back in 2014.

If you could add anything to the RRC what would it be?

I would like the length of eligibility to be longer and that former clients could still come and utilize services if needed. It would be a way to continue to show the success of individuals to current clients and show how the Reentry Center provides support to the community.

How old were you when you were first incarcerated and how long have you been out of custody?

I was 17 years old when I was first incarcerated, and I have been out of custody now since April of 2013 and was put on formal probation for two years.

What was your first job when you left custody?

I started off with no jobs and taking the bus to now having three jobs. I have been a house manager for a recovery residence for nine years. I’m a chef at Levi’s Stadium for the Forty Niners where I work with a team of chefs. And I work full time as a program manager for the first peer respite called the “Blackbird House” in Santa Clara County with Family and Children Services of Silicon Valley (Cannar). And I’m also a fulltime dad.

What are your plans for the future?

My plans are to be a great father and role model for my kids, showing how important it is to get your education. To help support others the best I can in the work I do, to be successful and buy my family a house and continue to provide for them; to continue to work on myself for growth in my career and to support my community.

Are you going to school? If so, what are you studying and what do you hope to do with your degree?

I am currently enrolled at San Jose City College. I am studying to get my CADC (Certified Alcohol and Drug Counselor) certification. I’m looking to complete that and continue my education while I continue to make an impact in the community to support others and use my experience to relate to others needing support.

What is your perspective of the Santa Clara Reentry Resource Center?

The Reentry Center has already exceeded the plan and goals that the Center was created for. Within its 10 years, it has grown so much and most of all, it has helped/saved so many people who, without these people or resources, may have ended up reincarcerated. Ten years from now, I see even more ways to support the reentry population and for myself, I will look back and see how far I have come in my journey and know where I started. I feel it starts with the people that do the work, that care for the reentry population, and that fight to continue to improve the lives of the population we serve. And I hope it continues to grow and has the funds to provide the services that are needed for us to be successful.

Are you working, and if so, can you state your profession?

I started off with no jobs and taking the bus to now having three jobs. I have been a house manager for a recovery residence for nine years. I’m a chef at Levi’s Stadium for the Forty Niners where I work with a team of chefs. And I work full time as a program manager for the first peer respite called the “Blackbird House” in Santa Clara County with Family and Children Services of Silicon Valley (Cannar). And I’m also a fulltime dad.

What is your profession?

I am currently enrolled at San Jose City College. I am studying to get my CADC (Certified Alcohol and Drug Counselor) certification. I’m looking to complete that and continue my education while I continue to make an impact in the community to support others and use my experience to relate to others needing support.

What are your plans for the future?

My plans are to be a great father and role model for my kids, showing how important it is to get your education. To help support others the best I can in the work I do, to be successful and buy my family a house and continue to provide for them; to continue to work on myself for growth in my career and to support my community.

Are you going to school? If so, what are you studying and what do you hope to do with your degree?

I am currently enrolled at San Jose City College. I am studying to get my CADC (Certified Alcohol and Drug Counselor) certification. I’m looking to complete that and continue my education while I continue to make an impact in the community to support others and use my experience to relate to others needing support.

What is your perspective of the Santa Clara Reentry Resource Center?

The Reentry Center has already exceeded the plan and goals that the Center was created for. Within its 10 years, it has grown so much and most of all, it has helped/saved so many people who, without these people or resources, may have ended up reincarcerated. Ten years from now, I see even more ways to support the reentry population and for myself, I will look back and see how far I have come in my journey and know where I started. I feel it starts with the people that do the work, that care for the reentry population, and that fight to continue to improve the lives of the population we serve. And I hope it continues to grow and has the funds to provide the services that are needed for us to be successful.

Are you working, and if so, can you state your profession?

I started off with no jobs and taking the bus to now having three jobs. I have been a house manager for a recovery residence for nine years. I’m a chef at Levi’s Stadium for the Forty Niners where I work with a team of chefs. And I work full time as a program manager for the first peer respite called the “Blackbird House” in Santa Clara County with Family and Children Services of Silicon Valley (Cannar). And I’m also a fulltime dad.

What is your profession?

I am currently enrolled at San Jose City College. I am studying to get my CADC (Certified Alcohol and Drug Counselor) certification. I’m looking to complete that and continue my education while I continue to make an impact in the community to support others and use my experience to relate to others needing support.

What are your plans for the future?

My plans are to be a great father and role model for my kids, showing how important it is to get your education. To help support others the best I can in the work I do, to be successful and buy my family a house and continue to provide for them; to continue to work on myself for growth in my career and to support my community.

Are you going to school? If so, what are you studying and what do you hope to do with your degree?

I am currently enrolled at San Jose City College. I am studying to get my CADC (Certified Alcohol and Drug Counselor) certification. I’m looking to complete that and continue my education while I continue to make an impact in the community to support others and use my experience to relate to others needing support.

What is your perspective of the Santa Clara Reentry Resource Center?

The Reentry Center has already exceeded the plan and goals that the Center was created for. Within its 10 years, it has grown so much and most of all, it has helped/saved so many people who, without these people or resources, may have ended up reincarcerated. Ten years from now, I see even more ways to support the reentry population and for myself, I will look back and see how far I have come in my journey and know where I started. I feel it starts with the people that do the work, that care for the reentry population, and that fight to continue to improve the lives of the population we serve. And I hope it continues to grow and has the funds to provide the services that are needed for us to be successful.
SUPERVISION IN COMMUNITY (PROBATION)

The Adult Probation Division (APD) has specialized units which oversee Post-Release Community Supervision (PRCS) and 1170h Mandatory Supervision (MS) clients. As of December 2021, 2,384 (30%) of AB109 releases to APD were 1170hMS and 5,552 (70%) were PRCS.

Among the released AB109 clients, 5,230 cases (including duplicated clients who were released in multiple years) were assessed with CAIS risk assessment. In terms of risk level, the majority of the assessed clients after they were granted PRCS and MS were high-risk clients (75%) followed by moderate (23%) and low risk level clients (3%) across the ten-year time range. Topping the list of principal needs for this group is drug and alcohol treatment.

PUBLIC BENEFITS

CASH, FOOD, AND HEALTHCARE

The Social Services Agency (SSA) was one of the original partners starting at the Reentry Resource Center (RRC) when it opened in 2012. When people are released from custody, income and food assistance is often their priority. If they had benefits prior to arrest, these have often been terminated or suspended and if they were employed, they have often lost their income, residence, and other supports such as healthcare. The SSA office at the RRC has always been the top requested service as it provides vital support to clients who have been separated from society.

Clients often come to SSA the same day they are released from custody. The transition is often difficult emotionally and psychologically as many do not know where they will stay or what they will eat. SSA staffs its reentry office with people who strive to be sensitive and empathetic to all clients. In recent years, SSA staff have taken trainings including mental health awareness which broadens their skills for connecting with clients.

SOCIAL SERVICES REENTRY UNIT

FEBRUARY 2012 – DECEMBER 2021

- Over $21 million in general assistance and over $48 million in CalFresh assistance allocated
- 21,829 applications processed for 11,416 unique households
- 9,264 households received benefits through the Reentry Office
- Enrolled 7,439 households in General Assistance (income assistance)
- Enrolled 3,794 households in Medi-Cal (healthcare)
- Enrolled 7,800 households in CalFresh food assistance
- Replaced 8,756 EBT cards, which clients used to purchase food

CASH, FOOD, AND HEALTHCARE

PUBLIC BENEFITS

REENTRY BEHAVIORAL HEALTH TEAM JANUARY 2016 – DECEMBER 2021

Since the establishment of the Reentry Resource Center in 2012 the Behavioral Health Services Department (BHSD) has operated a Behavioral Health Team at the Center. This team assists any client in need of substance use treatment and/or mental health treatment and also assesses clients for clinical and general needs. The team identifies and links the client to the appropriate treatment in the community, and also offers outpatient substance use counseling on site. When clients have more general needs the BHT team works closely with RRC partners to link them to the array of services provided by the County and community-based organizations. In addition to counselors, peer mentors with lived experience are on site to engage with and advocate for clients, helping them navigate the various support systems and resources.

- Served 11,624 unique individuals over 30,567 visits

MENTAL HEALTH JUSTICE SERVICES

OCTOBER 2011 – DECEMBER 2021

Between October 2011 and December 2021, the Forensic, Diversion and Reintegration Division, the justice-focused mental health component of BHSD served over 3,600 unique justice-involved patients through the justice-based programs funded in part by AB 109. Over the 10-year period there were about 11,200 admissions to six levels of care funded by AB 109 for individuals needing a variety of services addressing mental health, substance use issues and more. Full-Service Partnership programs, explained below, accounted for the greatest number of admissions and clients served.

- 3,606 unique clients served in justice mental health programs
- 11,195 admissions to justice mental health programs
- 48% successful discharge rate

July 2020 – June 2021
MENTAL HEALTH JUSTICE PROGRAMS

- Crisis Residential programming allows for a phased approach, where clients with high need step-down to lower levels of care as they stabilize.
- Full-Service Partnership (FSP) programs provide wrap-around support for clients using a “whatever it takes model.” In addition to helping with treatment, these services directly assist clients in reconnecting with the community so they can ultimately graduate from treatment court.
- The Post-Release Community Supervision (PRCS) program focuses specifically on those coming from state prisons as a result of Realignment legislation. The program transitions individuals from intensive criminal justice system programs to lower levels of care with the focus on further stabilization and moving the individuals into traditional adult and older adult outpatient programs.
- Evans Lane is a county-run outpatient clinic with a residential program. The program traditionally accepts referrals from the Behavioral Health Treatment Court, the Reentry Resource Center, and other Criminal Justice Programs.
- The Aftercare program assists justice-involved individuals who have progressed in treatment but need transitional support. It provides specialty mental health services.

SUBSTANCE USE TREATMENT SERVICES JANUARY 2015 – DECEMBER 2021

In 2011, the Reentry Center and partners began collaborating with the Behavioral Health Services Department’s Substance Use Treatment Services (SUTS) team to provide services to eligible AB 109 clients as part of the broader mission to socially integrate lower-level felons released from prisons and jails. The release of non-violent offenders from state prisons coincided with growing evidence for widespread prevalence of mental illness and substance use in the incarcerated population. Linking newly released people to substance use treatment is an essential step in integrating them with the community and providing them the tools to reach self-sufficiency.

- About 20,000 admissions for 5,972 unique reentry clients
- Despite an increase in employment rates, this population has high need for housing/employment
- 71% successful discharge rate in 2021 for AB109 clients
- Methamphetamine use is the primary drug for over 60% of AB 109 SUTS clients

HEALTHCARE

CUSTODY HEALTH SERVICES

Custody Health Services (CHS) has received AB 109 funding for the last 10 years to provide mental health and medical care in the jails. Currently CHS is providing comprehensive healthcare services to approximately 600 patients each month. CHS health care services for mental health are staffed by psychiatrists, psychiatric nurse practitioners, psychologists, mental health clinicians and psychiatric nurses.

CHS is now able to provide round the clock care to each person entering the jails, from intake screening, mental health screening, all the way to its more recent discharge unit that works to provide medication and After Visit Summary (AVS) to patients leaving the jails for community or another treatment program. CHS has collaborated closely with the Office of Reentry Services to bridge health care gaps helping patients transition to community including the Medical Mobile Unit at the Reentry Resource Center.

Mental health services provided in the jails include individual assessments at intake that follow triage practices and policies ensuring timely care based on immediate needs. CHS’s crisis clinician staff capacity, services, and treatment have been enhanced and expanded over the last decade with AB 109 funding ensuring patients receive crisis care at in-take.

CHS continues to grow its healthcare services in custody and AB 109 funding is critical. For fiscal year 2022 the Board of Supervisors added telepsychiatry, Crisis Intervention Team positions including recreational therapists, medical social workers, clinical nurses, and mental health clinicians, as well as additional services and funding to design and implement a wholistic behavioral change model to ensure that all staff receive training and tools for common language, to enhance and improve collaboration for care.

- 600 patients/mo. in jail receive comprehensive healthcare services

MEDICAL MOBILE UNIT

Starting in 2013, the Valley Homeless Healthcare Program under the County’s Health and Hospital System began offering mobile health services on site at the Reentry Resource Center in San Jose and later expanded services to the South County Reentry Center in Gilroy. The Medical Mobile Unit (MMU) is a fully equipped bus that travels to various locations throughout the County. The MMU provides a vital service to reentry clients. The justice-involved population, especially after being released from correctional facilities, often have medical and/or psychiatric conditions that need to be addressed. The MMU is a central part of the one-stop shop as clients can access care while they address other needs and set up healthcare appointments in the community.

Starting in 2018, behavioral health staff became a part of the team who could assist with psychiatric/counseling needs and staff were provided office space at the San Jose Reentry Resource Center. In 2019, the MMU improved services with the purchase of a new medical mobile unit with larger interiors and newer equipment.

To support client care, the MMU Community Health Workers and Social workers assist clients in accessing services and planning their care. This staff also operates a Transitions Clinic Network program which is an in-custody clinic where staff meet with clients prior to release and set up appointments at the MMU or other community locations.

JANUARY 2017 – DECEMBER 2021

- 5,771 unique patients served at RRCs (2017-2021)
- 1,609 unique psychiatry patients (2018 – 2021)
- 15,681 visits at reentry locations (2018-2021)
- 2,540 unique medical patients (2018 – 2021)

REENTRY SUPPORTIVE HOUSING

Homelessness is one of the greatest challenges reentry clients face. And it is one of the most difficult services to provide given the expensive housing market in Santa Clara County. Roughly 50 percent of reentry clients report being homeless when they register at the Reentry Resource Center. Homelessness impacts virtually every aspect of clients’ lives, their health, mental health, ability to secure employment, recovery from substance abuse, living expenses, reunification with family, even their ability to receive mail.

Since 2012, the Office of Supportive Housing (OSH) has overseen an array of supportive housing initiatives, with specific AB 109 funded programs serving the justice-involved populations. Through these programs, reentry clients have been linked to housing support in a variety of ways such as emergency shelter beds, emergency financial assistance, Permanent Supportive Housing, Rapid Rehousing and Transition-Al Housing Programs. The format of these programs has changed over time and now focuses on a more centralized model. As a result, the data below are undercounted as there were many smaller programs earlier in the office’s history. In addition, many reentry clients access other housing programs funded by other sources.

Since 2017, the Vulnerability Index Service Prioritization Decision Assistance Tool (VI-SPDAT) has been the primary assessment tool that OSH utilizes to enroll people in programs and place them into housing. After being assessed, clients are entered into a queue for housing.

Since 2017, the Office of Supportive Housing (OSH) has overseen an array of supportive housing initiatives, with specific AB 109 funded programs serving the justice-involved populations. Through these programs, reentry clients have been linked to housing support in a variety of ways such as emergency shelter beds, emergency financial assistance, Permanent Supportive Housing, Rapid Rehousing and Transition-Al Housing Programs. The format of these programs has changed over time and now focuses on a more centralized model. As a result, the data below are undercounted as there were many smaller programs earlier in the office’s history. In addition, many reentry clients access other housing programs funded by other sources.

Since 2017, the Vulnerability Index Service Prioritization Decision Assistance Tool (VI-SPDAT) has been the primary assessment tool that OSH utilizes to enroll people in programs and place them into housing. After being assessed, clients are entered into a queue for housing.
### REENTRY PROGRAMS AND INITIATIVES 10-YEAR TIMELINE

<table>
<thead>
<tr>
<th>Year</th>
<th>Programs/Initiatives</th>
</tr>
</thead>
<tbody>
<tr>
<td>2011</td>
<td>Reentry Network Established</td>
</tr>
<tr>
<td></td>
<td>Reentry Resource Center</td>
</tr>
<tr>
<td></td>
<td>Faith Reentry Collaborative</td>
</tr>
<tr>
<td></td>
<td>Re-Entry Multi Agency Program (Re-Entry MAP)</td>
</tr>
<tr>
<td></td>
<td>Healthcare Services for patients in custody</td>
</tr>
<tr>
<td></td>
<td>Mobile Medical Unit (MMU)-Valley Homeless Healthcare Program</td>
</tr>
<tr>
<td></td>
<td>Peer Support Workers Implemented</td>
</tr>
<tr>
<td>2012</td>
<td>Reentry Expungement Program</td>
</tr>
<tr>
<td></td>
<td>Community Outreach Court</td>
</tr>
<tr>
<td></td>
<td>RN Treatments</td>
</tr>
<tr>
<td></td>
<td>Recovery Café funded in part by Substance Use Treatment Services</td>
</tr>
<tr>
<td></td>
<td>HealthRight 360 - Service Contract - Psychoeducation Services in-custody</td>
</tr>
<tr>
<td>2013</td>
<td>Bail and Release Work Group</td>
</tr>
<tr>
<td></td>
<td>South County Reentry Center in San Martin</td>
</tr>
<tr>
<td></td>
<td>Blue Ribbon Commission on Improving Custody Operations</td>
</tr>
<tr>
<td></td>
<td>Jail Diversion and Behavioral Health Subcommittee of the Re-Entry Network</td>
</tr>
<tr>
<td></td>
<td>HealthRight 360 - Service Contract - Psychoeducation Services in-custody</td>
</tr>
<tr>
<td>2014</td>
<td>Goodwill of Silicon Valley – ORS Employment</td>
</tr>
<tr>
<td></td>
<td>San Jose State University Research Foundation – In Custody Classes</td>
</tr>
<tr>
<td></td>
<td>Home Detention Project - Part of Bail Release Workgroup</td>
</tr>
<tr>
<td></td>
<td>SJSU Record Clearance Project - Service Agreement</td>
</tr>
<tr>
<td></td>
<td>Valley Homeless Healthcare Program - In-Custody Team</td>
</tr>
<tr>
<td>2015</td>
<td>Detainer Task Force</td>
</tr>
<tr>
<td></td>
<td>Mobile Crisis Response Team</td>
</tr>
<tr>
<td></td>
<td>Gender Responsive Opportunities for Women (GROW)</td>
</tr>
<tr>
<td></td>
<td>Break Out Prison Outreach (Never Give Up)</td>
</tr>
<tr>
<td></td>
<td>South County Reentry Center Relocates to Gilroy</td>
</tr>
<tr>
<td>2016</td>
<td>South County Reentry Center in San Martin</td>
</tr>
<tr>
<td></td>
<td>Center for Employment Opportunities</td>
</tr>
<tr>
<td></td>
<td>Mission Street Sobering Center</td>
</tr>
<tr>
<td></td>
<td>Community Averting Placement Supervision (CAPS) - Service</td>
</tr>
<tr>
<td></td>
<td>San Jose City College Peer Mentor Alcohol &amp; Drug Studies Certification Program</td>
</tr>
<tr>
<td></td>
<td>24-7 Dad Program</td>
</tr>
<tr>
<td>2017</td>
<td>Goodwill of Silicon Valley – ORS Employment</td>
</tr>
<tr>
<td></td>
<td>San Jose State University Research Foundation – In Custody Classes</td>
</tr>
<tr>
<td></td>
<td>Home Detention Project - Part of Bail Release Workgroup</td>
</tr>
<tr>
<td></td>
<td>SJSU Record Clearance Project - Service Agreement</td>
</tr>
<tr>
<td></td>
<td>Valley Homeless Healthcare Program - In-Custody Team</td>
</tr>
<tr>
<td>2018</td>
<td>Detainer Task Force</td>
</tr>
<tr>
<td></td>
<td>Mobile Crisis Response Team</td>
</tr>
<tr>
<td></td>
<td>Gender Responsive Opportunities for Women (GROW)</td>
</tr>
<tr>
<td></td>
<td>Break Out Prison Outreach (Never Give Up)</td>
</tr>
<tr>
<td></td>
<td>South County Reentry Center Relocates to Gilroy</td>
</tr>
<tr>
<td>2019</td>
<td>Pre-Arraignment Representation and Review</td>
</tr>
<tr>
<td></td>
<td>Bend the Arc Initiative</td>
</tr>
<tr>
<td></td>
<td>Narcotics Public Safety Policy</td>
</tr>
<tr>
<td></td>
<td>Prop 47: Safe Neighborhoods and Schools Act</td>
</tr>
<tr>
<td></td>
<td>Mural Wright Recovery Center Opens</td>
</tr>
<tr>
<td></td>
<td>Mental Health Expansion (Valley Homeless Healthcare Program)</td>
</tr>
<tr>
<td>2020</td>
<td>Automated Proposition 64 Marijuana Conviction Expungement Project</td>
</tr>
<tr>
<td></td>
<td>Narcotics Public Safety Policy</td>
</tr>
<tr>
<td></td>
<td>Pre-Arraignment Representation and Review</td>
</tr>
<tr>
<td></td>
<td>Bend the Arc Initiative</td>
</tr>
<tr>
<td></td>
<td>Safed Releases (Safe, Accessible, Fair &amp; Effective “wraparound” releases) with DOC, BHD &amp; ORS</td>
</tr>
<tr>
<td></td>
<td>Santa Clara County Risk Assessment Instrument and Public Safety Assessment</td>
</tr>
<tr>
<td></td>
<td>Mobile Application - Pretrial Services</td>
</tr>
<tr>
<td>2021</td>
<td>AB 1950 Probation: Length of Terms</td>
</tr>
<tr>
<td></td>
<td>Misdemeanor Jail Diversion Program</td>
</tr>
<tr>
<td></td>
<td>Narcotics Public Safety Policy</td>
</tr>
<tr>
<td></td>
<td>Pre-Arraignment Representation and Review</td>
</tr>
<tr>
<td></td>
<td>Bend the Arc Initiative</td>
</tr>
<tr>
<td></td>
<td>Medications Assisted Therapy Sublocade Induction in Custody</td>
</tr>
<tr>
<td></td>
<td>Prop 47: Safe Neighborhoods and Schools Act</td>
</tr>
<tr>
<td></td>
<td>Mural Wright Recovery Center Opens</td>
</tr>
<tr>
<td></td>
<td>Mental Health Expansion (Valley Homeless Healthcare Program)</td>
</tr>
<tr>
<td></td>
<td>Racial Equity and Leadership (REAL) Team</td>
</tr>
<tr>
<td></td>
<td>Child Welfare Services for Children in Custody</td>
</tr>
<tr>
<td></td>
<td>Mobile Application - Pretrial Services</td>
</tr>
</tbody>
</table>

This is not a comprehensive list of all County reentry programs and initiatives. For the full Reentry Programs and Initiatives Timeline, Glossary and Intercept Points, please visit: www.sccreentry.org
organizations they contract with as shown below.

Catholic Charities:  
FY 2013 – FY 2022  
> 704 enrollments  
> 71% job placement rate

Goodwill of Silicon Valley:  
FY 2013 – FY 2022  
> 1,473 community enrollments in the New Opportunity Work Program  
> 6,449 participants in custody (duplicated)  
> 761 Permanent employment placements

DRS CONTRACTED SERVICES

Employment providers assist clients with not only job placement assistance, but job education and preparation. The providers host workshops on job readiness, resume building, and interviewing skills. In addition, they assist with digital literacy and teach clients how to navigate job search and interview software.

Catholic Charities:  
FY 2013 – FY 2022  
> 704 enrollments  
> 71% job placement rate

Goodwill of Silicon Valley:  
FY 2013 – FY 2022  
> 1,473 community enrollments in the New Opportunity Work Program  
> 6,449 participants in custody (duplicated)  
> 761 Permanent employment placements

PROBATION CONTRACTED SERVICES

Starting in 2011, the Probation department has utilized AB109 funding for vocational and behavioral programming. At the time of this report, Probation contracted with three community organizations. Center for Employment Opportunities and Catholic Charities both provide probationers with vocational services including job placement. Probation also contracted with ConXión, which provided additional vocational services and dayworker employment opportunities until fiscal year 2018.

ConXión Employment Services:  
FY 2011 – FY 2018  
> 1,719 intakes/enrollments  
> 667 completions

FAITH-BASED REENTRY COLLABORATIVE

In late 2011, the Behavioral Health Services Department (BHSD) implemented the Mental Health Services Act (MHSA) funded Innovation project which established an interfaith reentry collaborative and service contracts with four Faith-Based Resource Centers (FBRC). What started as a 36-month project turned into a successful ongoing service network that recently celebrated its 10-year anniversary.

Services Provided:  
- Faith counseling, transportation, clothing, job placement, employment, housing, legal services, food, hygiene supplies, financial support, healthcare, education and more.

FAITH-BASED REENTRY CENTERS

JULY 2017 – DECEMBER 2021

- There were 45,800 services provided to FBRC clients in total  
- Transportation was the most provided resource 7,730 times  
- Clothing was provided to clients in need about 3,500 times  
- Faith counseling was provided 16,760 times

OTHER DRS-CONTRACTED SERVICES

SERVICE NAVIGATION

The service navigation program was implemented in fiscal year 2020 to assist clients who require intensive case management services and/or multifaceted support. DRS contracts with four separate organizations that provide referral-based wrap-around case management and service navigation.

Breakout Prison Outreach:  
FY 2020 – FY 2022  
> 458 enrollments with an overall 70% successful discharge rate

San Jose State University:  
FY 2020 – FY 2022  
- 399 enrollments with an overall 62% successful discharge rate

Mental Health Systems:  
FY 2020 – FY 2022  
- 577 enrollments and over 19,500 services provided

Time For Change Foundation:  
FY 2021 – FY 2022  
- 4 women housed and provided wrap-around support

LEGAL (CIVIL AND FAMILY LAW)

Two legal providers contract with ORS to offer services including representation to clients in custody and in the community, specifically in family law matters. They also provide record clearance support and work with clients whose inability to pay court-related fines and fees (for certain offenses) is a demonstrated hindrance to successful reentry.

County of Santa Clara Superior Court:  
FY 2018 – FY 2022  
295 applications received by the Court, 234 were approved for fines/fee reduction

Pro Bono Project Silicon Valley:  
FY 2015 – FY 2022  
150+ legal workshops provided and 1,300+ clients received legal support

BEHAVIORAL HEALTH SKILLS

Behavioral health and life-skills contractors provide in-custody programming focusing on building life-long coping, prosocial, and psychosocial skills. Providers use cognitive behavioral techniques and a mindfulness-based approach to teach clients self-regulation skills that will help them understand and regulate their emotions.

Carry the Vision Restore Program:  
FY 2016 – FY 2022  
- 250 sessions of life skills annually

HealthRight 360:  
FY 2015 – FY 2022  
- 1,500+ classes between in-custody and pre-trial clients

Employment

Unemployment is a barrier for more than half of the Reentry Resource Center’s clients and impacts local recidivism as a result. The inability to support themselves and their families causes many clients to resort to their former lifestyles. Job interviews are scarce for themselves and their families causes many clients to resort to their former lifestyles. Job interviews are scarce for

Reentry Resource Center’s clients and impacts local recidivism as a result. The inability to support themselves and their families causes many clients to resort to their former lifestyles. Job interviews are scarce for

Collected data for this report were from reentry clients and impacts local recidivism as a result. The inability to support themselves and their families causes many clients to resort to their former lifestyles. Job interviews are scarce for

Collected data for this report were from reentry clients and impacts local recidivism as a result. The inability to support themselves and their families causes many clients to resort to their former lifestyles. Job interviews are scarce for

REENTRY RESOURCE CENTER  
CLIENT EMPLOYMENT STATUS  
JANUARY 2019 - DECEMBER 2021  
(N=7,777)

- Employed Part Time
- Unemployed - Not Looking
- Employed Full Time
- Cannot Work - Disability
- Unemployed - looking for work

7.9%
8.9%
9.9%
13.4%
59.8%
EDUCATION

Partners provide an opportunity for clients to obtain their high school diploma. Clients who want to continue their education and are interested in becoming certified peer mentors and/or certified drug and alcohol counselors can sign up for free classes with San Jose City College. Financial literacy classes are also offered through San Jose City College. For clients seeking basic reading, writing, and computer skills, ORS has two memorandums of understanding with continuing education providers that offer free online self-paced classes. In-custody clients receive parenting classes and are connected to parenting resources for post-release support.

Santa Clara County Office of Education: FY 2021 – FY 2022
- 75+ students enrolled and 5 high school graduates

San Jose Evergreen Community College District: FY 2018 – FY 2022
- 21 Peer Mentor Program graduates

First 5 Santa Clara County: FY 2021 – FY 2022
- 344 parenting classes provided in-custody

PRETRIAL CASELOAD AND JAIL POPULATION

Throughout the judicial process, the court determines whether defendants are released on Supervised Own Recognizance (SORP), an unsupervised release, or held in custody in lieu of bail. When clients are released on SORP, they are supervised by a PTS supervision officer. Some people are ordered released to the Electronic Monitoring Program (EMP) and wear GPS devices.

PRETRIAL SERVICES (2011 – 2021)

<table>
<thead>
<tr>
<th>YEAR</th>
<th>FY 12</th>
<th>FY 22</th>
</tr>
</thead>
<tbody>
<tr>
<td>AB109 SORP Cases</td>
<td>24</td>
<td>113</td>
</tr>
<tr>
<td>All SORP Cases including AB109</td>
<td>1,968</td>
<td>4,919</td>
</tr>
</tbody>
</table>

- Supervised 39,667 SORP cases (FY 2012-2022)
- Increased staff over 40% and tripled supervision caseload capacity
- Supported a 50% reduction in the local jail population during pandemic

PROGRAMS AND SERVICES

In addition to the work PTS does to supervise and monitor clients, the office has been expanding programming and enhancing supportive services. PTS works closely with the courts and attorneys on diversion programming and to facilitate diversion and service linkage in general. PTS works closely with the Behavioral Health Service Department and the Office of Diversion and Reentry Services to coordinate release to treatment and behavioral programming and refers clients to the Reentry Resource Centers for other services such as employment and education programs.

REENTRY EXPUNGEMENT PROGRAM

In the fall of 2013, the Public Defender Office (PDO) in collaboration with the ORS, launched the Reentry Expungement Program (REP) to provide record clearance services for any financially eligible client, regardless of the date of conviction or past representation. Over the years, the program has progressed to a granted relief rate of over 98%.

REENTRY EXPUNGEMENT PROGRAM SEPTEMBER 2013 – DECEMBER 2021

- Convictions expunged increased from 889 in 2015 to 2,088 in 2021.
- 10,462 convictions expunged
- Over 5,000 unique clients served
- 16,869 petitions and applications submitted

REP MOVING FORWARD

PDO continues to innovate REP services. In 2017, the program was embedded into the launch of PDO’s first Postconviction-Outreach Team. PDO’s vision is to assess all clients, not only for expungement services but for all available postconviction relief, including beneficial changes in the law such as decriminalizing past marijuana offenses, reducing the severity of prior convictions, and shortening probationary terms, as well as 290 registration relief. The REP routinely requests that felonies be reduced to misdemeanors in conjunction with record clearance and successfully eliminates outstanding fines and fees. The REP’s goal is to cultivate a client’s ability to thrive in our community by breaking the shackles of prior convictions.

CUSTODY ALTERNATIVE SUPERVISION

Since 2012, the Office of the Sheriff has offered alternative sentencing to individuals through the Custody Alternative Supervision Program (CASP). Participants of CASP finish the remainder of their custody sentence in the community, where they are offered social services, transitional housing opportunities, mental health, and substance abuse treatment, and are enrolled in additional rehabilitative courses to assist them in reintegrating back into the community as productive members. Additionally, when appropriate, CASP also allows participants to return to their families or live in transitional housing, seek additional education or technical skills, and either seek employment or continue to work in their current career.

To ensure public safety, the CASP population is supervised by the Custody Alternative Supervision Unit (CASU). CASU is a specialized unit comprised of specialized Sheriff Deputies from both enforcement and custodial divisions of the Sheriff’s Office who work together with rehabilitation officers, Social Services, probation officers, and program specialists to provide an intensive supervision program.

CUSTODY ALTERNATIVE SUPERVISION FEBRUARY 2012 – DECEMBER 2021

Since 2012, the office of the Sheriff has offered alternative sentencing to Realignment clients through the Custody Alternative Supervision Program (CASP). Participants of CASP finish the remainder of their custody sentence in the community. They are offered social services, transitional housing opportunities, mental health and substance abuse treatment, and are enrolled in additional rehabilitative courses to assist them in reintegrating back into the community as productive members.

- There were 1,212 releases into CASP
- Only 3% of CASP entries ended in with a new law violation
- 74% of CASP entries ended in completion (894 or of 1,212)
The five-year analysis looked at recidivism occurring between 2011 and 2016, while the 10-year analysis looks at recidivism occurring between 2011 and 2021. At the time of the five-year analysis, only those released in 2011 were in the community for five years. For the 10-year, a much larger proportion of the AB 109 population had spent five years in the community. There is also a delay as convictions can sometimes take years to adjudicate, meaning the ten-year analysis will identify convictions that the five-year did not.

**AB 109 RECIDIVISM IN SANTA CLARA COUNTY OCTOBER 2011 – DECEMBER 2021**

- The majority of AB109 recidivism was at the misdemeanor level, was not violent/serious, and was most commonly drug-related.
- Over the 10-year timeframe there were 12,249 AB 109 releases and 9,405 unique individuals released.
- 4,549 (48%) of all individuals released under AB109 committed at least one new misdemeanor or felony.

Among the AB 109 population 48 percent of all individuals released had at least one new law violation within five years of their release date. When looking at time between release and recidivism, 65 percent of all re-offenses occur before the one-year mark and over one third (35 percent) of recidivism occurs between one and six months after release from custody. This demonstrates the need to expand reentry outreach while individuals are still in custody and make sure that services are provided immediately after release.

**AB 109 5-YEAR RECIDIVISM BY TYPE OF OFFENSE**

Most notably, 67 percent of new violations were misdemeanors and 33 percent were felonies. Recidivism among this population is largely drug-related and is primarily lower level, suggesting the risk to public safety is relatively low.

Crimes of drug and drug paraphernalia possession were the most common type of recidivating offense among the AB 109 population. Drug and alcohol-related crimes overall, accounted for at least 31 percent of all new law violations, followed by crimes of theft and fraud which accounted for 23 percent.

Recidivism was captured through a series of steps. First, a master list containing every individual who had been released under AB 109 was generated. This list contained identifiers, demographic information, and each individual’s “Realignment start date,” which represents the date they first reentered the community as a Realignment client. Next a list of all re-convictions was generated by capturing all convictions for the individuals on the master list, which occurred after their start date. Finally, the date of violation was used to ensure each new law violation actually did occur after the reentry start date, as some individuals were convicted after their start date, but on charges with a violation date earlier than their start date.

Prior to Realignment the recidivism rate for individuals who would qualify under the AB 109 designation was 56 percent. Five years into Realignment and the county’s investment in rehabilitative services the recidivism rate for this population fell to 45 percent for AB 109 eligible felons. In 2022, 10 years after Realignment began, the recidivism rate for this population is 48 percent.

Additionally, 63 percent of all individuals who recidivated had at least one conviction under the CJIC category of drugs.

When combining drug offenses with theft/fraud, over half of the captured recidivism fell under these categories. The two categories are also closely related in that many people commit crimes of theft and fraud to support substance use. Over 90% of new offenses were not violent/serious, but due to the way the data are stored in the database, it is difficult to get an exact number.

**RECIDIVISM AS A MEASURE**

While recidivism is an important measure to track, there is a great deal of complexity involved in how it determines efficacy or success. At the macro level, there are many variables that will impact trends. As we increase services and programs it is important to note that larger variables such as the housing and labor markets may also be impacting the population. Additionally, state/federal policy changes, local law enforcement, prosecutors, and judges can all significantly affect the rate at which people are convicted/re-convicted of crime. Without randomized and controlled studies, the actual impacts of local services are difficult to gauge.

Rehabilitation, in whichever form it may take, is often an interactive process, especially when it comes to a population like AB 109 who tend to be frequent, lower-level drug offenders. Therefore, in addition to monitoring who is reconvicted and why, it is important to examine other measures of success. For example, many of the success stories shared walked a slow and steady road to sobriety and crime-free life. People who had never been able to maintain sobriety might only last a week or a month their first attempt. There may be times when they are sober for a year or more, but ultimately relapse and end up back in custody. However, when looking at recidivism alone we only see that they failed, not the improvement made and the hope for the future.

As technical solutions improve, and data sharing becomes more streamlined it will be important to identify additional measures of success that track improvement. For example, tracking people’s average time between jail stays or average time between relapses would help to paint a more complete picture of programmatic success in a community with high costs of living and other larger sociopolitical factors at play.
The Reentry Network is extremely grateful to LEAB board members for volunteering their time after hours and whenever we have sought their advice and assistance with focus groups, events, speaking engagements, and for giving a voice to one of the most vulnerable and underrepresented populations that the County is attempting to serve. The individuals who have participated on this Board over the last three years have each traveled journeys in which they overcame incredible challenges, hardship, and trauma. They draw on those experiences and have responded to this call to service on the LEAB with candor, empathy, collaboration and a level of insightfulness and energy that has and will continue to be crucial guidance for improving the County’s ability to serve its reentry residents. These board members stand as community leaders and mentors and are constant reminders of what it is possible to achieve when each of us has what we need to heal and grow.

Thank you to our LEAB’s 2022 Lived Experience Advisory Board members:

- Miguel Barahona
- Neal Chand
- William Couch
- Brian Evans
- Lerissa Evans
- Olena Gutsa
- Michael Lam
- Grace Naffa
- Jesse Noble
- Crystal Perez
- Jennifer Temoin

Thank you to our former board members who helped build this advocacy group:

- Cesar Barron
- Toomie Chatikavanji
- Lee Clark
- Adrian Jaime
- Kyong (Say) Miranda
- Bonny Palomino
- Felicia Shelton

A core group of 11 members have been meeting, at first quarterly and now every other month. For this report we asked board members to give us some of their perspectives of the County’s reentry efforts to date and what they think would be the most impactful approaches going forward.

One board member credited the RRC with saving his life through providing him services, teaching him patience and how to maintain his successes to keep moving forward. Another member said the Center has helped her regain her confidence and being an Advisory Board member specifically has allowed her to surround herself with a network of support. Regarding the benefits of participating in the LEAB, members appreciate that it gives them a platform for learning about resources for their family members and clients, as almost all of them work in fields helping reentry and disadvantaged individuals. The board also provides valuable feedback for them in how best to serve their clients and ultimately for all of us to better serve the community.

In terms of what the County could be doing better or more of, LEAB members suggest direct case planning with individuals exiting custody to make the most of limited services and to ease their transition. More capacity for addressing mental health issues and housing for clients as well as marketing of services was also recommended.

For the future of the RRC’s multiple members would like to see not only expanded programming to prevent incarceration such as anger management and domestic violence classes, but to expand its capacity overall, both in the amount of programming and the time period over which clients can keep accessing the centers and connecting to resources in the greater community.

How old were you when you were first incarcerated and when were you released last?

The first time I was ever incarcerated was at the age of 12. I am a child of the system. I was born in it. I have always been in the system in one way or another. The longest time I was locked up was when I was 15 years old. I was pregnant with my first child facing 10 years, but only did three. I spent the next 20 years in and out of institutions and jails. I started with Reentry on December 12, 2012. I have been out of custody since 2011 and have been off probation since 2015.

What was your impression of the Center before you came and what’s your impression now?

My expectation for the Reentry Resource Center (RRC) was not much. I connected with Mission Possible (A Faith Based Reentry Center contracted with the RRC) and did not know what I was getting myself into. I just knew I needed help. I was three months pregnant, I had a one-year-old son, and a child in Child Protective Services custody and I was homeless and hopeless. My impression now is that without the RRC, there would be no resources for individuals like me. I would have reverted to my old ways to survive. I feel that with RRC being so easy to access and all the resources available to people like me, there is no way anyone getting out of custody in Santa Clara County cannot succeed.

What resources helped you the most at the Reentry Center?

The services that helped me the most were housing and employment which led to the reunification with my family. Getting help through donations of food, diapers and clothing helped me so much. My case manager would drop off donations to me at the places I was staying. It SHOCKED me that someone would go out of their way to meet me where I was. With my basic needs being met, I was able to focus on everything else in my life to prepare for the return of my daughter and provide for my children.

Were you able to get work when you left custody?

Before I went to the RRC, and Mission Possible I had been looking for a job for a solid six months. No one would hire me because of my criminal record. Now I have my record expunged. After I got my housing situation stable, I was able to get a job at Lillie Mae’s House of Soul Food through my case manager.

How has being a participant in the free alcohol and drug counseling peer mentor certification class through San Jose City College at the RRC affected your life?

I had no plans of ever going back to school, but when the RRC offered college courses at the Center, it helped ease me back in and prepare me for San Jose City College. I started school through the RRC Peer Mentor Program in 2019 and have received my certificate of Peer Mentor and Peer Mentor Specialist. I am currently going to school for my Drug and Alcohol Certificate at SJCC and will graduate this spring semester 2022. I am also enrolled in Bible School at DTBI (DOZ Transformation Bible Institute) and will be graduating this September. My plan to continue my education in the social work field or criminal justice.

Are you working, and if so, can you state your profession?

I am Program Coordinator for City Team Youth Collective. It is a transitional home for young ladies 18 to 24 years old. I have made another full circle back to where I first started. I am a graduate from City Team. Now I am working with them. I love it and appreciate the opportunity they have given me.

What’s your dream job?

Now that my criminal past is behind me, I have my household and family in order; I want to start focusing on my dream career to have my own bed and breakfast where I will employ those with similar back-grounds as me and help restore hope, dignity, and respect into those who need it. I feel so blessed and happy today.
CONCLUSION

Since Realignment was initiated a decade ago, the Adult Reentry Network’s partnerships and reentry services have grown from delivering primarily basic immediate needs to services that are also assisting clients in becoming self-sufficient longterm. The progress of AB 109-funded programs has prompted County leaders to approve multiple expansions of services and staff to continue growing the amount of and access to services for residents. Along with the expansion of DRS, many justice partners have been approved to expand in 2022, and are proposing additional expansions in 2023. Together these partners strive to improve upon the foundation of services they have created, serving people more effectively and offering more forms of support in custody, as alternatives to custody, and in the community.

This additional investment in and commitment to reentry and jail diversion efforts builds on existing jail diversion programs like Behavioral Health Mobile Crisis Response Teams, collaborative courts like Drug Treatment Court and Mental Health Treatment Court taking a therapeutic approach to dealing with health challenges that would have otherwise resulted in jail for these individuals. Santa Clara County was one of the first in the nation to establish these courts.

Numerous factors play into a community’s level of public safety, which makes measuring the impact of reentry work very difficult. But the overall trends are positive. In the last 10 years crime has gradually decreased, according to a 2020 report by the Santa Clara County District Attorney’s Office. And the San José Police Department’s recent annual crime report (2011 to 2021) shows an overall decrease in property crime (burglary, larceny, and vehicle theft). However, there was an increase of more than 10% in reported violent crime and more work is needed to analyze and respond to that increase. However, AB 109 recidivism remained lower in 2021 than in 2010 before Realignment and the County’s investment in reentry services.

The Reentry Network has established a comprehensive set of programs and services for supporting residents transitioning from custody to community, including two Reentry Resource Centers that have assisted more than 20,000 clients over the past 10 years. But this population still struggles significantly with challenges like housing, employment, mental health, and substance addiction. The County and the Adult Reentry Network have multiple efforts under way to address these and other long-term challenges and will lean on their experiences and the data collected over the last decade to continue reducing the incarceration rate and increasing the health and wellbeing of all County residents.

RECOMMENDATIONS

From the information collected in the report, the Office of Diversion and Reentry Services, in partnership with the stakeholders outlined in the report, have provided some high-level recommendations to address remaining gaps in services. While these recommendations are not comprehensive, they provide recommended areas of focus.

SUBSTANCE USE

Substance use is a chronic health condition and a core contributing factor in crime and recidivism. At least a third of the recidivism in the AB109 population is directly related to drug crimes. Without financial means and/or access to treatment and recovery services, addiction disorders may lead individuals to resort to theft and/or fraud.

RECOMMENDATIONS

• Explore local options to further decriminalize drug use and provide alternatives (jail diversion, drug courts, alternative sentencing, etc.).
• Work with managed care plans, commercial insurance providers, and healthcare management organizations to expand outpatient substance use treatment, withdrawal management, and residential treatment services.
• Increase the availability of programs and services capable of providing treatment and support to individuals with co-occurring addiction disorders and mental illness.
• Assess the need for and expand the use of medication assisted treatment.
• Work with the District Attorney’s Office, the Court, and other system partners to improve or expand diversion programs and services.

MENTAL ILLNESS

In 2016 20% of people in custody suffered from a serious mental illness. This percentage is likely higher today due to many lower-level offenders being released. Additionally, the percentage of individuals suffering from mental illness may be higher than reported because not everyone is able to access treatment and obtain a diagnosis.

RECOMMENDATIONS

• Increase behavioral health services at every point of the justice system continuum from crisis intervention teams responding to potential crime scenes to in-custody health and reentry service providers.
• Work with managed care plans, commercial insurance providers, and healthcare management organizations to expand outpatient, inpatient, and residential mental health treatment services.
• Provide more comprehensive data on the specific mental health needs of residents who are arrested, incarcerated, and leaving custody.
• Work with the District Attorney’s Office, the Court, and other system partners to improve or expand diversion programs and services.
EMPLOYMENT
Justice-involved clients often struggle with employ-
ment after release, due to their criminal history
but also because they have not had access to the
resources and guidance to take their employment
into their own hands. There is a greater need to focus
on improving employment support and workforce
development systems for justice-involved clients to
reduce poverty and risk of homelessness.

RECOMMENDATIONS
• Expand upon employment initiatives by
supporting the creation of social enterprises
and small businesses.
• Explore larger vocational training opportunities.
• Increase employment opportunities and
access to County entry-level jobs.
• Continue to strengthen relationships
with employers and advocate for people
with criminal records.

JAIL USAGE/PROGRAMMING
Despite the progress made over the last 10 years and
the expansion of alternatives to incarceration, jails
are still the default response to crime and most of the
local jail population is unsentenced at any given time.

RECOMMENDATIONS
• Continue to pursue alternatives to incarceration
such as jail diversion programs, and alternative
sentencing and supervision to reserve the jail for
higher level offenders.
• Further leverage the use of technology to offer
more in-custody programming, especially to
higher security inmates to whom it is more
challenging to provide regular programming.
• Increase collaboration with jail programming
administration and rehabilitation officers for
increased programming, especially education
options that establish higher education/career
pathways that will follow clients after release.
• Expand discharge planning to facilitate quick and
efficient access to services and successful reentry.

HOUSING
Based on Reentry Resource Center data, more than
half of all people exiting custody have no place to
live upon entering the Centers and are at more risk
of harm, cyclical recidivism, and incarceration.

RECOMMENDATIONS
• Work to expand rental assistance programs
to help individuals obtain housing and to
prevent or reduce the risk of homelessness.
• Increase and improve access to transitional
housing and temporary shelter.
• Increase investments in affordable and
supportive housing.

ENGAGEMENT
Due to the high rates of unhoused individuals, men-
tal illness, and substance use in the justice-involved
population, many people with a high need for services
lack the capacity and or willingness to engage in
services or feel uncomfortable accepting support.

RECOMMENDATIONS
• Expand outreach and social media to make
sure the information is reaching people in
need consistently.
• Hire more staff specializing in engaging
the population, especially people with
lived experience.
• Explore opportunities to incentivize engagement
such as milestone rewards or stipends.
• Develop more specific strategies around serving
people with the highest level of need compared
to those who are most likely to succeed given
specific opportunities.
• Pursue office hours for more staff, especially
peer mentors, to engage people in custody
and expand discharge planning.