



**RE-ENTRY SURVEY**

***IDENTIFYING CURRENT BARRIERS AND NEEDS  
IN RURAL AND URBAN COMMUNITIES***

**SUBMITTED BY ANA YÁÑEZ-CORREA, EXECUTIVE DIRECTOR  
TEXAS CRIMINAL JUSTICE COALITION**

**REGARDING INTERIM CHARGE 3**

**HOUSE COMMITTEE ON CORRECTIONS**

**JUNE 30, 2010**

## **TEXAS CRIMINAL JUSTICE COALITION**

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The Texas Criminal Justice Coalition is committed to identifying and advancing real solutions to the problems facing Texas' juvenile and criminal justice systems. We provide policy research and analysis, form effective partnerships, and educate key stakeholders to promote effective management, accountability, and best practices that increase public safety and preserve human and civil rights.

### **Contact Information**

**Ana Yáñez-Correa, Executive Director**

**Phone: (w) 512-441-8123, ext. 109; (m) 512-587-7010**

**[acorrea@criminaljusticecoalition.org](mailto:acorrea@criminaljusticecoalition.org)**

**[www.criminaljusticecoalition.org/public\\_policy\\_center/interim\\_charges](http://www.criminaljusticecoalition.org/public_policy_center/interim_charges)**

We would like to extend our appreciation to Jacqueline Conn, Erica Surprenant, and Molly Totman, J.D. for their invaluable assistance in preparing this survey.

Dear Members of the Committee,

My name is Ana Yáñez-Correa. I am the Executive Director of the Texas Criminal Justice Coalition (TCJC). Thank you for allowing me the opportunity to present the findings of a survey that was recently administered to various Texas agencies, local providers, and other stakeholders on re-entry in Texas. The particulars of the survey are discussed more fully below. We hope that the results will assist the committee as it examines Charge 3: *“Study current re-entry programs and procedures across the juvenile and adult criminal justice continuum. Make recommendations to ensure that offenders who are released or discharged have the necessary supervision and access to employment, housing, treatment, and other support programs to allow successful entry and integration into the community. Evaluate the working relationship between state agencies facilitating re-entry and make recommendations on how to achieve greater efficiency and cost savings.”*

### **SURVEY BACKGROUND**

In late May, the statewide Reentry Task Force’s Community Reentry Working Group, chaired by Commissioner Roy C. Brooks of Tarrant County and vice-chaired by myself, created an online survey intended to evaluate the challenges facing re-entry providers and others in both rural and urban communities. We sent the survey to a diverse group of recipients, including TCJC’s internal list of criminal justice practitioners, members of the Texas Reentry Task Force, the Texas Board of Pardons and Paroles, staff members of the Texas Department of Criminal Justice (TDCJ) and Community Justice Assistance Division (CJAD), the Texas Association of Counties, the Urban County Association, participating providers of 2-1-1, and many other critical groups who are knowledgeable and care deeply about improving re-entry practices throughout Texas. We are grateful for the support of these groups and for their willingness to forward the survey to their own internal lists of relevant contacts.

Over a period of two weeks, 645 respondents provided their feedback. The results of the survey are detailed below, beginning with “Program Information” on page 2. Furthermore, an overview of the findings begins on page 37. Again, we would like to thank each and every one of the survey respondents for taking time out of their busy schedules to offer their invaluable input.

As previously stated, we hope that the information provided throughout this testimony will be helpful to the Committee in its efforts to evaluate and create effective re-entry strategies, while also furthering the primary objective of the Community Reentry Working Group and the Reentry Task Force at large, which is to identify barriers that impact individuals’ successful re-entry into Texas communities from local or state correctional facilities, specifically including the statutory, regulatory, programmatic, resource, and implementation barriers that exist.

**Note:** For the purposes of this testimony, we have eliminated “free response” replies that were repeated or were not relevant. A complete copy of the survey results without exclusions is available upon request.

## OVERVIEW OF FINDINGS

### ➤ **Participant Demographics**

Our online survey had 645 respondents, with **71%** from **urban** counties and **38.1%** from **rural** counties. These respondents represented a wide range of roles in the re-entry field. The highest rate of response was from Adult Parole Officers (38.8% of total responses), while the next largest group identified themselves as “Other” (19.9%) and included the following:

- Sheriffs
- Unit Parole Supervisors
- 2-1-1 Information and Referral Staff
- Parole Board Members and Administrators
- Wardens
- Attorneys
- College Professors
- Judges
- Members of the Media

### ➤ **Services Provided**

The largest percentage of survey respondents (69.2%) provide case management services. The second largest percent (65.1%) provide referrals to other programs and services in the community. Other services include legal representation, gender-specific life coaching, advocacy, and life skills training.

### ➤ **Initiatives and Programs**

The largest percentage of respondents (99.8%) had one program or initiative in their community they were most proud of. These include DOORS, Ventana del Sol’s foodservice training program, District Re-entry Centers, Texas Re-entry Services, Inc., Project RIO, Project Reconnect, Ban the Box, and others.

### ➤ **Successful Coordination**

Participants were asked how programs successfully coordinate their efforts with state-level and/or local-level entities. Many who provided free responses stated there was little or no coordination, while other respondents said that routine meetings and email correspondence helped them coordinate efforts. Other responses mentioned lack of funds as an impediment to effective coordination.

### ➤ **Current Laws Limiting Re-Entry**

Participants were asked whether there were laws that prevented them from assisting individuals who would benefit from their services. Many who provided free responses stated that the largest obstacles were the laws limiting sex offenders from accessing housing, employment, and

other services. Additionally, many respondents said that bans preventing formerly incarcerated individuals with drug conviction from accessing food stamps and educational loans could limit re-entry.

➤ **Gender-Specific Services**

In our sample, 59.1% of providers offered gender-specific services, while 40.9% did not. Respondents who did not provide such services were asked to identify why the services were not offered. The majority of respondents (47.4%) stated that they were unable to provide them due to lack of funds, while 40% said that there was no difference between male and female offenders. 17.4% replied that they did not have enough knowledge about gender-specific programming to implement such programs, while 12.2% responded that there were not enough female offenders to create specific programs.

➤ **Youth Services**

In our sample, 80.3% of respondents did not provide any youth services, while 19.7% did provide such services.

➤ **Barriers Facing Youth**

With regards to employment, the largest percentage of survey respondents (45.9%) feel that it “always” acts as a barrier to youth trying to reintegrate back into their communities.

Separately, large percentages of survey respondents feel that the following areas “often” pose barriers to youth facing re-entry: (a) education, (b) returning to a traditional school setting, (c) transitioning back into the home and community, (d) mental health and substance abuse treatment, (e) life skills education, (f) basic needs, (g) transportation, and (h) obtaining state-issued identification.

➤ **Waiting Lists**

The largest percentage of survey respondents (50.8%) felt there was not a waiting list or backlog of clients waiting to receive their services. However, of the remaining respondents who felt they did have a waiting list, 23.9% replied that 1-25 individuals were currently on that list.

➤ **Barriers to Re-entry: Overall**

With regards to employment, the largest percentage of survey respondents (51.9%) feel that it “always” acts as a barrier to individuals trying to reintegrate back into their communities.

Separately, large percentages of survey respondents feel that the following areas “often” pose barriers to reintegration: (a) educational and/or vocational training, (b) transportation, (c) financial difficulty, (d) housing, (e) locating support services, (f) rehabilitative services and/or aftercare, and (g) obtaining identification,

➤ **Barriers to Re-Entry: Education**

The largest percentage of survey respondents feel that the following education-related issues “often” or “sometimes” act as barriers to reintegration: (a) low literacy levels, (b) limited financial literacy skills, (c) lack of basic literacy education programs (after release), (d) lack of basic literacy education programs (pre-release), (e) lack of GED certification (after release), (f) lack of college-level academic education (pre-release), (g) lack of GED certification (pre-release), (h) lack of educational loan opportunities (after release), (i) lack of educational loan opportunities (pre-release), and (j) lack of college-level academic education (after release).

➤ **“Ban the Box” Initiative**

The largest percentage of survey respondents (50.5%) said that there was not a “Ban the Box” initiative in their area and 37% of respondents were not sure whether they had such an initiative in their area.

➤ **Barriers to Re-Entry: Employment**

The largest percentage of survey respondents feel that the following employment-related issues “often” act as barriers to reintegration: (a) lack of communication/soft skills and other employment-readiness education (after release), (b) lack of academic/literacy skills, (c) lack of employment procurement/interview training (after release), (d) lack of communication/soft skills and other employment-readiness education (pre-release), (e) lack of vocational skills training (after release), (f) lack of employment procurement/interview training (pre-release), (g) lack of vocational skills training (pre-release), (h) health challenges, and (i) lack of eligibility for a professional license.

➤ **Barriers to Re-Entry: Mental Health & Substance Abuse**

The largest percentage of survey respondents (69.7%) feel that individuals with a mental health and/or substance abuse issue are excluded from obtaining housing benefits.

Separately, large percentages of survey respondents feel that the following mental health- and/or substance abuse-related issues “often” or “sometimes” act as barriers to reintegration: (a) inconsistency in taking psychotropic medication (after release), (b) lack of co-occurring programming (after release), (c) inability to access/afford psychotropic medication (after release), (d) lack of mental health services (after release), (e) lack of substance abuse treatment (after release), (f) lack of resource and referral information about services, (g) inability to access/afford psychotropic medication (pre-release), (h) lack of substance abuse education (pre-release), (i) lack of co-occurring programming (pre-release), (j) lack of substance abuse education (after release), (k) inconsistency in taking psychotropic medication (pre-release), (l) lack of substance abuse treatment (pre-release), and (m) lack of mental health services (pre-release).

➤ **Barriers to Re-Entry: Life Skills Education**

The largest percentage of survey respondents feel that the following life skills education-related issues “often” or “sometimes” act as barriers to reintegration: (a) lack of behavior modification counseling (after release), (b) lack of cognitive skills education (after release), (c) lack of parenting education (after release), (d) lack of anger management education (after release), (e) lack of anger management education (pre-release), (f) lack of parenting education (pre-release), (g) lack of behavior modification counseling (pre-release), and (h) lack of cognitive skills education (pre-release).

➤ **Barriers to Re-Entry: Service Provision**

With regards to both lack of staff (due to insufficient funding) and insufficient per diem reimbursements by the state, the largest percentage of survey respondents (34.3% and 27.4%, respectively) feel that they “always” act as administrative obstacles to those trying to start up and/or maintain a program or service.

Separately, large percentages of survey respondents feel that the following issues “sometimes” act as administrative obstacles to starting up and maintaining re-entry programs or services: (a) lack of certified/trained workforce, (b) high staff turnover rate, (c) statutory restrictions on starting up the program, (d) lack of reimbursement by insurance companies for substance abuse treatment, (e) restrictions on qualifying for government contracts, (f) restrictions on professional licensure for people with convictions, (g) lack of reimbursement by insurance companies for mental health services, and (h) requirement to provide both security and treatment as contract provisions.

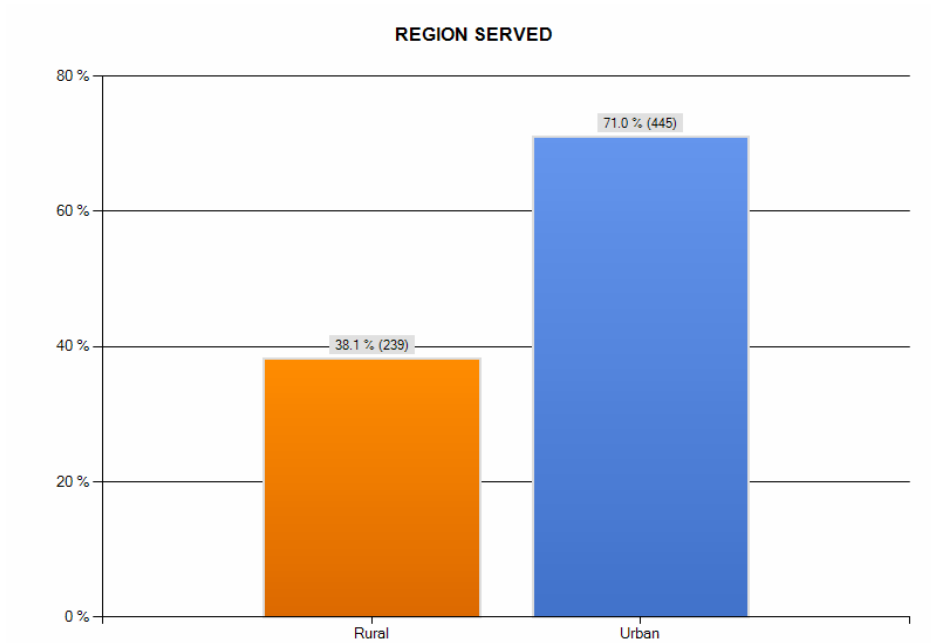
➤ **Providing Quality Services to People with Convictions**

With regards to (1) lack of providers in rural areas, (2) watered-down services (due to insufficient funding), and (3) watered-down services (due to insufficient staffing), the largest percentage of survey respondents (36%, 30.7%, and 29.6%, respectively) feel that they “always” act as barriers to providing quality services to people with convictions.

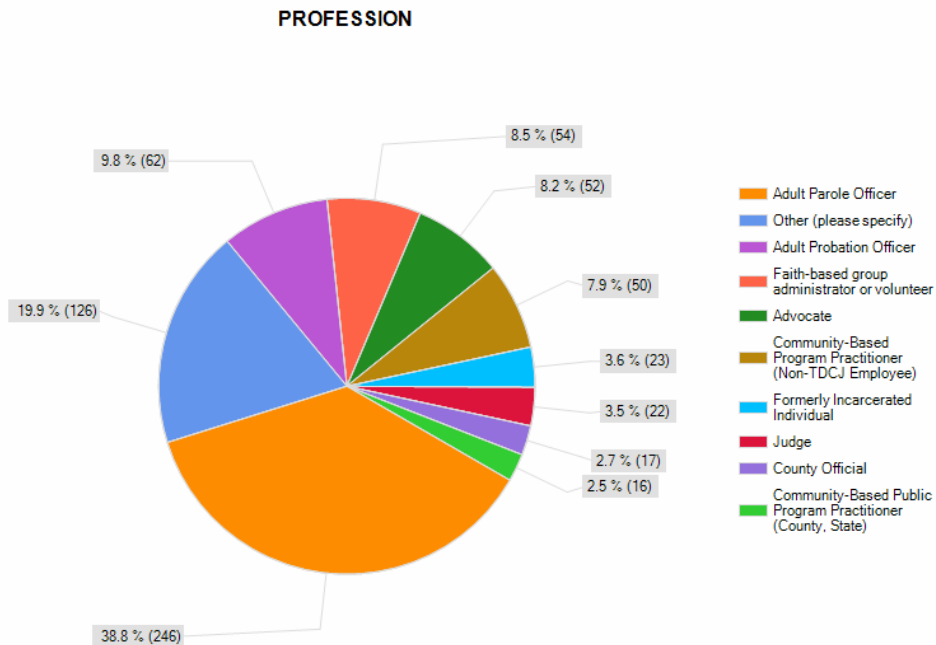
Separately, large percentages of survey respondents feel that the following issues “sometimes” act as barriers to providing quality services to people with convictions: (a) lack of information referral networks among providers, (b) lack of a certified and/or trained workforce, (c) legal restrictions preventing recovered clients from doing outreach in jails/ prisons, (d) legal restrictions preventing staff from contacting clients for follow-up evaluation and services, (e) too much time lapse between sentencing and treatment, (f) too much time lapse between release from incarceration and community-based treatment, and (g) restrictions on professional licensure for people with convictions.

## PROGRAM INFORMATION

### 1. What region do you serve?



### 2. Please identify your role(s) in the criminal justice re-entry profession:





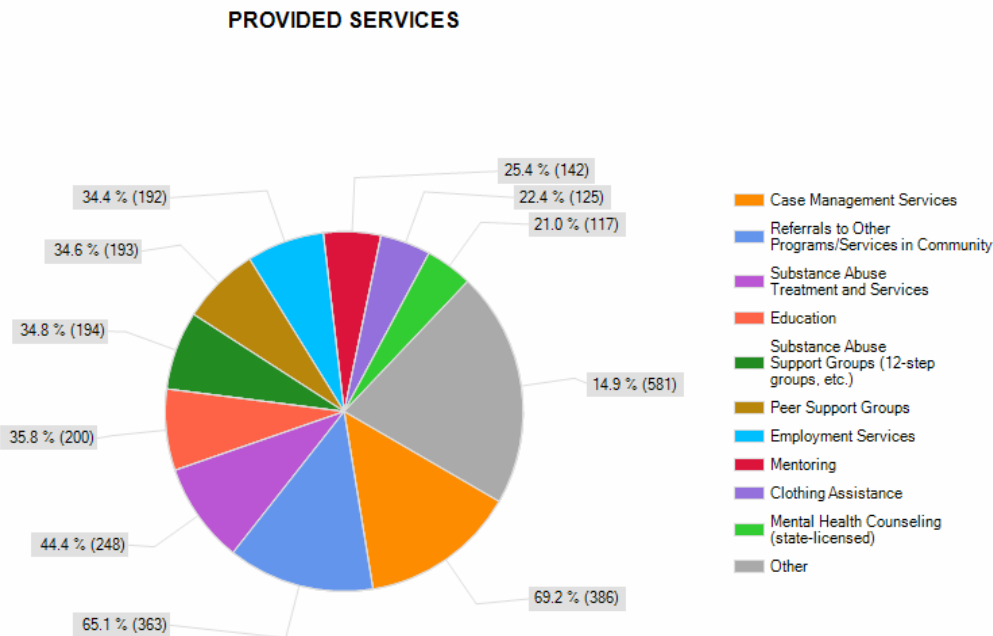
**“Other” responses:**

- (1) 2-1-1 Information and Referral Services
- (2) A Faith Based Transitional Work Facility
- (3) Adult Parole Unit Supervisor - Supervise Parole Officers
- (4) Adult Probation Administrator
- (5) Adult Probation Assistant Director
- (6) Adult probation case work manager
- (7) AmeriCorps member
- (8) Area Information Center
- (9) Associate Faculty University of Phoenix
- (10) Attorney - Legal Aid working with low income people who have reentered community.
- (11) Author of THE UNITED STATES JAILHOUSE LAWYER’S MANUAL
- (12) CASCD Administrator
- (13) Case manager
- (14) Case Manager for Housing Program for homeless felony offenders
- (15) Chief Juvenile Probation Officer
- (16) City of Dallas Offender Reentry Liaison, Contract Administrator for Dallas One-stop Optimized Reentry System
- (17) City Youth Employment Program
- (18) Clerk II
- (19) College
- (20) College professor leading a vocational rehabilitation, job training, and placement program for ex-offenders
- (21) Community Member - Mother of formerly incarcerated individual
- (22) Community Organization – not faith-based
- (23) Concerned citizen
- (24) Conduct psychological assessments and evaluation for the Bell County Juvenile Center, Killen, TX
- (25) Correctional Education Administrator
- (26) Counselor for CES , Travis State Jail
- (27) Counselor in private practice
- (28) County Auditor’s Office
- (29) County Indigent Defense/Pre-Trial Services Specialized Supervision Officer
- (30) Criminal Justice Planner
- (31) CSCD Director
- (32) Director of Administration - Board of Pardons and Paroles
- (33) Director of Office of Acquired Brain Injury, Director of TX Juvenile Justice TBI Screening Partnership Project
- (34) E.D. family violence program
- (35) Education Director Lockhart Work Program Facility
- (36) Educator
- (37) Employment Placement Specialist
- (38) Employment Provider
- (39) Employment Specialist/Case Manager, non-profit
- (40) Executive Director
- (41) Faith based advocate for change for the better in the criminal justice system

- (42) Family member of an incarcerated individual (sister)
- (43) Family member of FIP and statewide victim advocacy organization
- (44) Family member of formerly incarcerated individual; business owner who addresses women's issues.
- (45) General public acceptance
- (46) Grad student in social work; community volunteer; former prisoner; board member of various prison groups
- (47) Grassroots coalition of ex-offenders for the elimination of employment discrimination
- (48) Homeless Shelter Employee
- (49) Housing and Supportive Services Provider
- (50) I own a transition home for men
- (51) I wrote my PhD dissertation on barriers faced by women on parole
- (52) I&A Provider
- (53) Indigent Defense
- (54) Jail Diversion
- (55) Journalist
- (56) Juvenile Corrections Academy
- (57) Juvenile Justice Subcommittee for Task force for children in need, also President of Foster Care Alumni Association - Texas Chapter.
- (58) LULAC
- (59) Media
- (60) Mental Health Official
- (61) Mental Health Therapist - Juvenile Justice Department
- (62) Mentor
- (63) Mother of a former prisoner
- (64) Non-Profit organization
- (65) Offender Parent
- (66) Parent of a formerly incarcerated youth
- (67) Parole Board Administrator
- (68) Pastor
- (69) PhD Health Educator/advocate for therapeutic community treatment facilities
- (70) Placement Specialist - assist ex-offenders find employment post release
- (71) Pre- Post Release Faith base Program 6-9 months
- (72) Pretrial Officer
- (73) Program Manager for the City (Government)/Sister to a recently released offender (living with me)
- (74) Program Manager/Independent Living/3/4 Quarter House
- (75) Property Supervisor for a management company
- (76) Reentry Program Senior Counselor
- (77) Retired TYC Parole Officer
- (78) San Antonio Crime Coalition
- (79) Self-Employed PRI Consultant
- (80) Sheriff
- (81) Social Services Provider serving only the prison family
- (82) Social Worker for the Travis County Mental Health Public Defender Office
- (83) Spouse of formerly incarcerated individual
- (84) State agency - TX Task Force on Indigent Defense
- (85) State Contract Manager

- (86) State Employee
- (87) TCOOMMI advisory member
- (88) TDCJ-CJAD Substance Abuse Treatment Facility (SATF)
- (89) TDCJ-PD, Specialized Programs
- (90) TDCJ-Warden
- (91) Texas Inmate Families Association - Rio Grande Valley Chapter (support group for families)
- (92) Transition Coordinator Windham School District (works with Title I Program )
- (93) Treatment provider probation department
- (94) TYC Administrative Law Judge - conduct parole revocation hearings
- (95) TYC Workforce Development Reentry Specialist
- (96) University Professor
- (97) VICTIM, role model, criminal justice graduate and mentor/volunteer for those in need or a second chance
- (98) Webb County Jail Management
- (99) When a defendant returns from in-patient programs, they are on a specialized probation where they see me regularly
- (100) Winners Circle Peer Support Network
- (101) Work for a community non-profit organization
- (102) Workforce Development Board staff
- (103) Workforce Development Professional
- (104) Youth Transition Program for foster youth

**3. Please check all services your program/department directly provides:**



**“Other” responses:**

- (1) 2-1-1 Information and Referral Services
- (2) Advisory
- (3) Advocacy
- (4) Advocacy and networking to assist organizations on transitional living requirements, eligibility and resources, for Foster Care aging out.
- (5) Angel Tree
- (6) Assist in retrieving driver license
- (7) Business owner who provides self-esteem and social skills enhancement and productive citizenry education for women and female adolescents.
- (8) Career Development for Parolees
- (9) Child Support Education
- (10) Completed referrals to programs
- (11) Determines which offenders are released on supervision, conditions of supervision, revocation determinations
- (12) Discipleship programs in-prison for female inmates
- (13) Diversion Court - Drug Court Program
- (14) Emergency financial assistance with rent and utilities
- (15) Family reintegration preparation and follow up support/assistance; Family Relationship Counseling/Education; Life Skills for entire prison family
- (16) Family Services such as Individual, Couples, and Group
- (17) Family support, advocacy and education
- (18) Financial reporting and demographics
- (19) Funding to counties for criminal/juvenile defense services
- (20) Gang Affiliation Re-direction Seminar Sessions
- (21) Gender-specific life coaching
- (22) Hospice Program, Day Treatment Program, Housing Assistance Program, Oral Health Care (dental clinic) for HIV positive people
- (23) Housing and classification of offenders
- (24) ID of undiagnosed brain injury among MH/Substance Abuse youth that may have contributed to criminality
- (25) Information on services available in the region through Project Rio
- (26) Job training and pre-employment counseling
- (27) Legal representation
- (28) Legal Services, Socio-Economic Workshops, Training & Seminars
- (29) Life skills education
- (30) Monitor compliance
- (31) Our section provides information former TYC youth, parents, and other stakeholders for possible use in obtaining assistance with all of the above areas (e.g.: medical documents for continuity of care).
- (32) Oversee all that is involved in running a large-mid size juvenile probation department and detention center
- (33) Parenting classes, cognitive classes, financial classes, personal development seminars
- (34) Parole interview, document review, home plan review, presentation of case summary to BPP for parole vote.
- (35) Parole supervision
- (36) PC training

- (37) Pre-release and post-release services provided by Texas Department of Criminal Justice at the direction of the Parole Board
- (38) Program Administration and Technical Assistance
- (39) Provides sex offender treatment
- (40) Publisher of U.S. Prison News
- (41) Re-Entry classes while in county jail; Advocacy in Court
- (42) Referrals to Substance Abuse Treatment and Services
- (43) School board member
- (44) Securing work boots for those seeking employment in construction
- (45) Sex Offender Counseling
- (46) Spiritual support
- (47) Statewide advocacy for prevention and treatment of mental illness
- (48) Supervise offenders
- (49) Texas Drug Offender Education and Alcohol Education Awareness Programs
- (50) We are a communication link for the newly released, providing information regarding community resources
- (51) We are a non-profit legal aid service for domestic violence clients.
- (52) We provide counseling and treatment through contract services & we supervise adult probationers.
- (53) Worship, Work Program, job readiness, domestic violence awareness, spiritual counseling / classes

**4. What re-entry related program(s) or initiative(s) are you most proud of in your community?**

- (1) "Ban the Box"
- (2) 1 year addiction recovery program
- (3) 1st Offender Program
- (4) 2-1-1 Texas Information and Referral Services we provide
- (5) 4 C Program for post SAFPF Placement
- (6) 4C Re-Entry
- (7) A New Entry
- (8) A New Way to Reentry
- (9) AA/NA
- (10) AAMSS
- (11) ACHEIVE employment readiness program
- (12) ACLU
- (13) Addiction Recovery Ministry
- (14) Adult probation
- (15) Adult TCOOMMI Case Management
- (16) Adult TCOOMMI Medication Management
- (17) Adult TCOOMMI Peer Groups
- (18) Aftercare/reentry services for delinquent youth in placement facilities
- (19) Agency Support
- (20) AID Foundation of Houston
- (21) AIDS arm
- (22) Aliviane Drug Rehab

- (23) Angel Tree
- (24) Angela House
- (25) Anger management
- (26) Anger Management/Domestic Violence Classes
- (27) APAA
- (28) ATR
- (29) Austin / Travis County Reentry Roundtable
- (30) Austin Youth Development Program
- (31) Basic Life Skills Program for Juveniles
- (32) Benefits for Foster Care. i.e. housing, higher education.
- (33) Bexar County Detention Ministries
- (34) Bexar County Reentry County
- (35) Bexar County Sheriff's Office Reentry Program
- (36) Boys & Girls Club Teen Center/County Run
- (37) Brazoria County Hurricane Preparedness Guide
- (38) Brazos Place, Freeport, Texas
- (39) Bridges to Life
- (40) Burning Hope Baptist Church
- (41) Bus Station Ministry, assisting releasees
- (42) BVACASA
- (43) Cameron County Divert Court
- (44) Caritas
- (45) CBI
- (46) CCF Aftercare Re-Entry Court for Women
- (47) Center for Health Care Services
- (48) Central Texas Treatment Center (180 days residential)
- (49) CHANGES
- (50) CHCS
- (51) Christian Counseling Services
- (52) Church Services In Prisons
- (53) Church-Temple-Mosque Connections
- (54) City of Houston Re-Entry Program
- (55) Cognitive Intervention
- (56) Community Advisory Board
- (57) Community Healthcore
- (58) Community Networking
- (59) Community Partnership Council
- (60) Community Partnership Counsel
- (61) Community Reentry Network Program, City of Houston
- (62) Computer training
- (63) Construction Gateway
- (64) COOL Church (A Nurturing Church)
- (65) Crime Prevention Institute
- (66) Criminal Justice Planning & Public Safety
- (67) Crosspoint Residential Reentry Services
- (68) DARS
- (69) DFDV
- (70) District Re-Entry Center (DRC)

- (71) Domestic Violence Class
- (72) Domestic Violence Counseling
- (73) Domestic Violence Court
- (74) Domestic Violence Programming
- (75) DOORS
- (76) Drug Courts and DWI Courts (misdemeanors and felony)
- (77) Drug Treatment (12 Step Programs)
- (78) Dual diagnosis program
- (79) Employment assistance
- (80) Epiphany
- (81) F.A.C.T. program
- (82) Fatherhood Initiative
- (83) Felony Alcohol Intensive Program
- (84) Female first and foremost
- (85) Financial/budget classes
- (86) First Contact (faith based)
- (87) First Contact Ministry at the release points
- (88) First Step Counseling
- (89) Food assistance and/or pantry
- (90) Four Rivers Outreach
- (91) Free and Forgiven Ministries
- (92) Free Entrepreneurship Workshops
- (93) Free Job Readiness Training Workshops
- (94) Front Door Ministry
- (95) Functional Family Therapy evidenced based program
- (96) FZDFV
- (97) Gateway
- (98) GED Preparation
- (99) Get Started Program
- (100) God of Hope Ministries
- (101) Goodwill Services
- (102) Greater Texoma Health Clinic
- (103) Harris County Transitional Partners
- (104) Haven for Hope
- (105) HCSO HIV continuity of Care Program
- (106) Health Department HIV Program
- (107) Healthcare for the Homeless – Houston
- (108) Heaven Helpers Women’s Transitional Living Facility
- (109) HHH Jail Inreach Program
- (110) Hi Risk Programs
- (111) High Risk Offender Program
- (112) HIV and other STD education and risk reduction programming
- (113) HIV/AIDS Health Improvements for Re-entering Ex-Offenders
- (114) HIV/AIDS Reentry Task Force
- (115) Home Construction Program
- (116) Homeless Coalition
- (117) Homeless shelters
- (118) HOPE Action Care/ Patricia Movement

- (119) Hope Home Ministries
- (120) Hospice services
- (121) House of Hope for women
- (122) Houston Area County Services
- (123) HWH
- (124) ID
- (125) Innerchange Freedom Initiative
- (126) Intensive Aftercare Supervision
- (127) Interagency collaboration
- (128) Investments in Human Potential, Privately owned business
- (129) IOP program (6 months cognitive based substance abuse)
- (130) IPTC- Continuum of Care
- (131) Jail Diversion grant through Nueces county sheriff department
- (132) Jesse Tree in Galveston
- (133) Jesus House
- (134) Jesus House Odessa
- (135) Journey Home
- (136) Juvenile probation
- (137) KAIROS
- (138) Know the Truth Correspondence Bible Institute
- (139) Know the Truth Prison Ministry
- (140) Last Chance
- (141) Legacy Community Services
- (142) Life Guide for America
- (143) Life Skills Training
- (144) Life Stream
- (145) Loops Rec Room
- (146) M.O.S.S. Class
- (147) Maggie's House
- (148) Magnificat House
- (149) Match program in county jail
- (150) Mayor's Office Re-entry Program
- (151) Mental Health Court
- (152) Mental Health Public Defender
- (153) Mental health services
- (154) Mental Health/Substance Abuse Assistance related to brain injury
- (155) Mentoring program
- (156) MHMR
- (157) MHMRTC TCOOMMI funded Project RAPP
- (158) Mid-coast services
- (159) Ministerial Alliance
- (160) Mission Messiah
- (161) Moving conviction question further into the application process
- (162) National Restorative Justice Reentry Conferences
- (163) New Life Opportunities/Prostitution Diversion Initiative (NLO/PDI)
- (164) New Name Ministries
- (165) North Dallas Shared Ministries
- (166) OES



- (167) One Prison Ministry
- (168) One Star Foundation's capacity building trainings for nonprofit management
- (169) OneSource New Life Center
- (170) Operation Rebound
- (171) Oral Health Care
- (172) Our Bridge Back program
- (173) Out For Life
- (174) Outpatient Competency Restoration
- (175) Outpatient Sexually Violent Predator Program
- (176) Overcomers
- (177) OWDS
- (178) P.E.A.C.E. Initiative family violence education
- (179) Parenting Groups
- (180) Parenting Program for parents of juveniles in Residential Program
- (181) Pay it Forward Austin (PIFA) - engages ex-offenders in helping others who are reentering the community
- (182) Peer Support Programs
- (183) Perpetual Help Home
- (184) Personal Development Seminar
- (185) PIE Program
- (186) PRIDE Court (Prostitution Misdemeanor Divert court)
- (187) Prison Entrepreneurship Program
- (188) Prison Fellowship
- (189) Prisoner Re-entry Project in the Randall County Jail
- (190) Problem Solving Support Court
- (191) Programs building life/living skills for incarcerated & foster care youth.
- (192) Progressive Male/Women are Worth It
- (193) Project 4 Victory
- (194) Project COPE
- (195) Project Reconnect
- (196) Project RIO
- (197) Project Safe Neighborhood
- (198) Reachout Ministries
- (199) Ready to Change comprehensive treatment
- (200) Reconciliation, Restoration, Rehabilitation, Responsibility
- (201) Referrals and/or case management
- (202) Reid Facility
- (203) Relapse Prevention
- (204) Religious Programs
- (205) Religious service to County Jail
- (206) Resource Guide and Resource/Job Fairs at the County and State Jails
- (207) Restitution
- (208) Restorative Justice Alliance
- (209) Restoring Families
- (210) RIFT Success
- (211) RTC aftercare program
- (212) SAFPF Aftercare programs
- (213) SAFPF Programs

- (214) SAFPF Re-entry court
- (215) Salvation Army
- (216) Santa Maria Hostel
- (217) SCAN -C-Star Program
- (218) SCAN -Futuros Sin Limitaciones Program
- (219) SCAN-STCADA
- (220) SEARCH
- (221) SEARCH Jail In Reach Project
- (222) SEARCH Jail program
- (223) Second Chance Coalition - Cameron County
- (224) Sex offender therapy
- (225) Sharing and Caring
- (226) SNOP
- (227) Social Actions Groups (Friendship west)
- (228) Social Services Subcommittee Reentry
- (229) Special Needs Offender Program- Continuity of Care
- (230) Sponsoring Odyssey House Chapter in Rosenberg, TX
- (231) STAR Court (Felony Prostitution)
- (232) Star of Hope Mission
- (233) STARS Court
- (234) State Jail Early Release Program
- (235) STEP (Subsidized Transitional Employment Project)
- (236) Stew Pot
- (237) Substance Abuse Treatment Services
- (238) Take our men back
- (239) Tarrant County Re-entry Initiative
- (240) TDCJ Parole Day Resource Center in Dallas
- (241) TDCJ Reentry Task Force
- (242) Teen Challenge of West Texas
- (243) Texas Criminal Justice Coalition's re-entry manual & Tools for Re-entry Project
- (244) Texas Inmate Families Association
- (245) Texas Inmate Services
- (246) Texas Reentry Services, Inc.
- (247) Texas Voices
- (248) TFI counseling programs
- (249) THAP
- (250) The 12 steps of Christ
- (251) The Bridge
- (252) The City of Houston Health Department program
- (253) The Gulf Coast Center, Angleton, TX
- (254) The Houston Food Bank "Serving for Success"
- (255) The Houston Launch Pad
- (256) The re-entry programs and training initiated by Mountain View College
- (257) The Therapeutic Community Prison facility in Kyle, TX
- (258) Therapeutic Community Program
- (259) Thinking for a change
- (260) Third Cross Support Group
- (261) TIFA Storybook Project

- (262) TOMB
- (263) TORI
- (264) Transitional and/or supportive housing
- (265) Travis County Offender Workforce Development
- (266) Travis County State Jail Advisory Committee
- (267) Travis County's Commitment to Change program
- (268) Trinity Center
- (269) Truancy abatement program
- (270) True Freedom
- (271) Truevine Missionary Baptist Church
- (272) University Health Care System
- (273) Urban League
- (274) UTMB/TDCJ HIV continuity of care program
- (275) VA
- (276) Ventana del Soul's Vocational Training in Foodservice and Culinary Arts
- (277) Veterans Court
- (278) Veterans Court, SAFPF re-entry court
- (279) Violent Gang Task Force
- (280) Volunteers In Prison System (VIPS)
- (281) W.I.T.T. Program
- (282) We're in this together SACP
- (283) Weed and Seed
- (284) Welcome Back
- (285) Windham's Title I Program Texas
- (286) Winner's Circle Peer Support Network
- (287) Winners circle
- (288) Women at the Well
- (289) Work boots
- (290) Work Faith Connection
- (291) Work Force Solutions
- (292) Workforce Solutions of Texas
- (293) Wrap around reentry services
- (294) WRAP Around service systems
- (295) XGF
- (296) Youth Gang Intervention Prevention PD Partnership
- (297) Youth Village Inc. Program

**5. How do those programs or initiatives successfully coordinate their efforts with other state-level or local-level entities?**

- (1) 2-1-1 is fairly well coordinated. Others, not very well.
- (2) All these groups coordinate with multiple agencies through networking, meeting attendance, and daily interaction to insure information about services are being provided to the offenders.
- (3) Although I have not been as involved as I would like with reentry because of my work schedule, when I reconnect with TDCJ and Travis County initiatives, there seems to be duplication of objectives and activities--such as information gathering. I may or may not

be in a good position to gage this because I have not been deeply involved in the processes at this particular time.

- (4) Ban the Box was a race with other communities nationally as well as state-wide and collaborating between city and county. Offender Employment Specialist Training Program in Travis County is a huge coordination effort between county, state parole, federal, non-profit and faith-based to put on every quarter.
- (5) Businesses are working with offenders to reintegrate them into the community; Project Rio makes the referrals.
- (6) By interacting in stake-holder meetings, providing outreach and in reach within TDCJ unites/County Jails, and working with other community service providers.
- (7) By seeking new and improved means of meeting the needs of offenders on parole and by effectively communicating with TDCJ employees and other agency staff.
- (8) Clinicians work closely with parole, probation, and courts to assist clients in the re-entry process.
- (9) Collaborate with judges, SAFPF unit, treatment providers.
- (10) Communication by email and telephone with providers in other communities.
- (11) Community Partnership works with several religious organizations in the community to provide reporting space, mentoring, and social assistance.
- (12) Coordinated efforts with TDCJ and local substance abuse service provider (ADAC).
- (13) Coordinated with County jail and probation.
- (14) Coordinates with parole to offer substance abuse classes, provides a residential substance abuse program.
- (15) Coordination is primarily through the Dallas County Criminal Justice Advisory Board, which has a standing re-entry work group.
- (16) Cross-involvement on boards and advisory groups as well as partnering on grant proposals.
- (17) Despite the lack of funds within the county, there is communication between most law enforcement and social service agencies.
- (18) District Re-entry Center is a state level program, and coordinates with all community programs in the Tarrant County area. Community Partnership Counsel is a union of all faith bases services under one banner that works with TDCJ-Parole Fort Worth area.
- (19) Drug Court and Family Drug Court both utilize ATR funds from the state.
- (20) Encourage dialog with correctional staff and treatment providers.
- (21) Good communication
- (22) Good communication with each other.
- (23) Goodwill programs assist offenders with jobs and provide them with information for food, clothing, etc. The medical clinic provides offenders with the medical attention and assistance needed for reintegration.
- (24) Goodwill shares best practices between its programs nationally to create programs that assist clients in jail and with convictions. Also is well represented within collaborative coalitions in Austin, so knowledge of their services exists. Foundation Communities' financial aid application program does not network within reentry services community, but project RIO at the Airport Worksource Solutions Center knows about the services and makes referrals to them. Room for improvement- they usually target youth, but services are provided to everyone. 12 Steps- do not represent themselves collaboratively, and by principle do not do outreach or have leaders, but are available everywhere. Maggie's home is too small to do anything but provide holistic wrap around services to their residents.

- (25) In all cases, we have enjoyed a strong collaborative effort from the county level and state level.
- (26) In May 2010 a conference to enhance levels of awareness to all agencies to come together and support one another and thereby support all clients.
- (27) Includes all agencies that have an interest in the re-entry of offender in Galveston County.
- (28) It appears this is a case of one hand not knowing what the other hand is doing, and/or everyone trying to protect their own turf as opposed to addressing the issues at hand, and working to resolve the problems/issues.
- (29) It has been a tremendous challenge to collaborate with state & local level service providers.
- (30) Local HIV agencies have begun coordination efforts between TDCJ, HCSO, DSHS ADAP program, local medical and case management providers to ensure that clients have access to HIV medication so they do not miss doses.
- (31) MHMPD coordinates social services with attorneys and/or other court staff.
- (32) MHMR appointments are scheduled for offenders before release. Project Rio representative has office hours at the parole office.
- (33) MHMR is a contact service provider for TDCJ through TCOOMMI Legacy funded through Harris County and AFH (AIDS Foundation of Houston). Search offers medical services coordinated throughout Houston, Harris County and federal funds. Innerchange Ministries Networks throughout the community to find jobs for offenders. Their program goes into the prisons and takes applications from motivated offenders who will be mentored upon release.
- (34) Needs improvement but so better than in the past when there was no coordination.
- (35) Offer presentations to other agencies to let them know what types of services they offer.
- (36) Overcomes and were in this together are held at the district parole office which is convenient for the offenders to attend.
- (37) Parole is more willing to work with outside programs than in the past. They have acknowledged the efforts of these programs and have made efforts to network with them.
- (38) Peer Groups, Case Management, Medication Management & COC Management work hand in with Adult Probation daily to help our client's re-integrate back into society. Also COC Management works hand in hand with Adult Parole to help clients re-integrate back into society via a non-required Monthly meeting.
- (39) Project RIO coordinates services of various state agencies and organizations, including the Institutional and Paroles Division of the Texas Department of Criminal Justice and TWC. Inmates learn about the program from supportive RIO professionals who explain benefits of prison education and vocational training programs and encourage their participation. Project RIO's seven full-service sites offer special job search seminars that cover such topics as completing applications, making appointments, writing resumes and interviewing. Facilitators also discuss interview attire, telephone etiquette and labor market information. TWC's interviewers continue to assist ex-offenders until they find suitable employment.
- (40) Provide intermittent stakeholder gatherings to report program status. Staff members provide client status and update reports. Program staff members appear committed and provide clear communication.
- (41) Quarterly meetings to discuss issues and progress.
- (42) Regular meetings for needs assessments and constant contact.
- (43) Regularly meet and email each other on updates, availability, changes or added services with programs.
- (44) Routine meetings and coordination, flexible services.

- (45) Some vendors do a great job of communicating the progress of offender activity. Some programs can stand to be more helpful in that area i.e. Project RIO.
- (46) Texas Reentry is an invaluable resource for ex offenders attempting to mainstream back into the community. They network closely with employers that will hire ex offenders, they provide case management, counseling, limited financial assistance and work closely with agencies such as housing department, programs offering literacy training. They utilize the 2-1-1 on line resource database and Blue Book directory of community services as their referral tools.
- (47) The 3/4 housing are coordinated with the local treatment facility to provide stable housing after discharge and also the community collaboration help with stable employment and education for the client when they entry into the TTC housing.
- (48) The community support received at the District Re-entry Center continues to provide resources for the offenders released to the Houston 01 area.
- (49) The Drug Court Program coordinates efforts with local service providers, academic/vocational skill service providers, and other state-level entities such as DSHS to rehabilitate offenders and provide them the opportunity for drug/crime free lifestyle.
- (50) There is a coordinated effort to engage City, County and State. CPI is funded by both County and City. A/TCRRT is also funded by both County and City.
- (51) There is little coordination with State level entities except for referrals.
- (52) There is open communication between the parole officer and the agencies in order to meet the needs of the client.
- (53) These programs are being utilized by other local, state agencies.
- (54) These programs are initiated while offenders are in CID. Through the coordination between TDCJ Divisions, these offenders receive a continuity of care post release continuing to address on going needs of the offender.
- (55) These programs interact successfully by coordinating visits with case manager, offender, and parole officer.
- (56) They all collaborate together to make sure the ex-offenders get the resources they need to reenter into society. The OES training helps providers who work directly with ex-offenders. 200+ have been trained in the county. The OWD program helps ex-offenders prepare and present themselves to offender friendly employers and connects with many other resources in the community to help in the reentry process, i.e. Goodwill, Urban League, WorkSource Solutions, Sheriff's Office, City of Austin, etc.
- (57) They are not really coordinated. The Parole Officer will refer the offender to a specific program and follow up on attendance and participation.
- (58) They are not very well coordinated in southern Brazoria County.
- (59) They coordinate with TDCJ in that the agency allows them space to enter the prisons and offer services and continue post-release.
- (60) They do not coordinate with other entities.
- (61) This program provides change in behavior with biblical base programming. Offenders become more accountable and transparent when they apply the word of God to daily life. They are paired with a volunteer mentor who will provided support to the parolee and church home. I have been a parole officer for 22 years and I have not seen a program that can even compare to the success of this program.
- (62) Through an array of state and local agency partnerships that work together for individual and family centered assistance, working with schools, work forces, and others to assist youthful offenders be successful, to reduce recidivism and to prevent matriculation into TDC.

- (63) Through constant communication and education, the program is able to coordinate and collaborate with multiple state and local entities.
- (64) Through Travis County's Offender Workforce Development Criminal Justice Planning Department.
- (65) Travis County believes in and supports the idea of local partnerships and community collaborations.
- (66) We are collaborating with several faith-based and criminal justice programs to establish a reintegration program.
- (67) We are in constant contact with our state and local partners with regards to our re-entry initiatives.
- (68) We attend various coordinating meetings and we work to partner with various community based agencies.
- (69) We collaborate with the Ryan White Planning Council to improve access to care for HIV+ people.
- (70) We meet regularly participate in staffing and coordinate services.
- (71) We partner and collaborate with large number of local agency and organizations in Tarrant County. We work closely with federal, state, and local criminal justice institutes.
- (72) We work closely with our regional MHMR office for the re-entry program for SAFPF graduates.
- (73) We work with parole officers and public defenders.

**6. Are there any current laws that prevent you from helping individuals re-enter the community and, if so, what are they?**

- (1) A law needs to be written forcing the Parole Board to identify offenders 12-18 months before release so that TDCJ can offer these offenders some programming.
- (2) A law needs to be written to allow TDCJ to move offenders from ID units to state jail facilities so that they can be mentored by faith based volunteers in the community they are returning to. A law needs to be written that will get DPS off their butts so that they can assist offenders going back into society with a Driver's License or ID.
- (3) Acquiring valid tx-id/dl. Our offenders need an easier way to obtain id/dl. Three forms of id is hard for offenders that were born mid-wife.
- (4) Apartment complexes are allowed to deny a convicted offender from obtaining housing from them, which makes it very hard for our offenders to find suitable housing.
- (5) Background checks. Individuals that have 3g offenses is hard to find them employment and housing even if the offense occurred over 20 years ago.
- (6) Barriers: Employers are most likely to balk at hiring a felon.
- (7) Child Safety Zones and sex offender registration laws.
- (8) Child Support payments concerns while incarcerated
- (9) Children who are detained longer than 30 days loose their Medicaid. The family has to reapply after the child is discharged which breaks the continuity of psychotropic medication for many juveniles
- (10) Complications of Parole Reporting where Parolee has to take nearly a day off work to report, no one on duty after hours or if emergency, lack of housing where they can live, job placement, transportation

- (11) Deferred Adjudication equals a conviction when the state law defines deferred adjudication as not guilty and no contest no matter what the charge is or what level (felony/misdemeanor) it is.
- (12) Driver Responsibility Act
- (13) DWI laws do not encourage DWI court participation
- (14) Felons can not live in public housing
- (15) Financial Aid for potential students
- (16) Folks needing substance treatment do not meet criteria for state funding due to the lapse of time since last use.
- (17) Gang member laws need to be reevaluated to weed out the true predators as opposed to those that age out and want to change.
- (18) Grant conditions prohibit violent offenders from participating in drug courts
- (19) HB 3689 requiring students to participate in and show success in a reading program in order for them to reenter their communities doesnt make sense.
- (20) Housing issues and drug convictions, drug convictions and food stamps.
- (21) I believe parole officers should have more of a role in prevention of absconders. By this I mean we should be able to search individuals home and vehicles in security issues. We should be certified to arrest if necessary.
- (22) If it is not a crisis situation MHMR will not provide services.
- (23) If the legislature adopts the standards of the Adam Walsh Act, it would have a devastating impact on juveniles who have successfully completed intensive treatment and are at very low risk for re-offending.
- (24) Immigration laws
- (25) Information security protection for juveniles also limits the ability to publicize the needs.
- (26) Inordinately long sentences for those sentenced at a particular time. Need for more parole flexibility.
- (27) Laws that limit release of offenders into the community due to residents not wanting them in their neighborhoods.
- (28) Laws that need to be reviewed - prevention of various licenses/certifications for those with a felony such as hairdressing, manicurist, electrician, etc. Need to offer expungement of record for those that have had a significant amount of time with any other offense (7-10 years).
- (29) Need more incentives for agencies/organizations/businesses who house and employ persons with criminal background.
- (30) Not a law, but local probation department policies that recommend against probation officers providing positive job recommendations/child support recommendations to support clients in obtaining jobs. The federal law that promotes that local HUD authorities may exclude people with drug/prostitution convictions from living in their apartments, without providing ANY directives that SOME of the funding be used to house SOME people with convictions.
- (31) Offenders must return to the county where they were convicted.
- (32) Parole restrictions that limit access, no federal housing assist for felony drug convictions, restrictions barring felons from professional licensing.
- (33) Parolees not being allowed to be with other ex-offenders.
- (34) Professional licensing/certification regulations
- (35) Really would like to see changes/amendments in regards to 3G offenders and SO's. They really need to be able to access basic services i.e., food, clothes, shelter and transportation services



- (36) SAT UDC prevents any residential services for individuals convicted of murder or sex offenses.
- (37) Texas laws and Texas government does not provide Grants to community-based groups for Reentry programs!
- (38) The age 19 limit for juveniles. By the time they get released from TYC, there is not much time left to provide them aftercare/reentry services.
- (39) The barriers which most interfere are laws governing sex offenders, mentally ill, and offenders on electronic monitoring.
- (40) The DPS surcharges makes it very difficult on a lot of offenders.
- (41) The fact that an individual must carry the label of “felon” for the rest of his life is unfortunate and a handicap in their job search and location of housing.
- (42) There are some city ordinances that make it difficult to start up half-way houses. It’s a local problem though and not a state one.
- (43) TLETS Texas Law Enforcement Telecommunication Systems (does not allow anyone with a felony or misdemeanor to work at sites where background checks are done and where they are accessible or stored). Also the regulatory licensing which does not allow certain folks with felonies get their licenses, i.e., plumbing, electrician, etc.
- (44) TRLA is not allowed to represent an individual who is incarcerated for more than a temporary stay.
- (45) Unsure about a particular law, however, county employment practices prohibit the hiring of ex-offenders
- (46) We need:
  - a law that differentiates predators from non-predators in sex offenses
  - a law that limits the number of years non-predators should have to register as sex offender
  - a law that helps all ex-offenders who pay child support to pay a nominal amount for the first 2 years out of prison so they can get back on their feet
- (47) Yes, (1) the big one is the ASFA that terminates a mother’s parental rights if she has her child in foster care for more than 15 months out of 22 months. A 2 year sentence is common for prostitution. (2) The laws that restrict women who have felony records from obtaining Section 8 housing and TANF.
- (48) Yes, TDCJ prohibits Volunteers from being more involved with Inmates after they are released. Also, those who are on a solid foundation or prohibited from going into prisons to help and encourage others. Those who have been incarcerated are the best encouragers of those who are incarcerated.
- (49) Yes, the procedural laws regarding persons who are accused of a crime and have mental health problems.
- (50) Yes, TYC does not like volunteers that work with youth on the inside to help them find placement and or help them after they are out
- (51) Yes, we are not encouraged to work overtime to help parolees on conducting a full GED Training utilizing State Funds after hours. We are allowed to volunteer, but not as a paid position for extra curricular educational activities. I am currently requesting Federal Grant Funding to conduct educational services to parolees, so we may reduce recidivism and to promote positive offender change to include a full GED Course with practice tests and to benchmark progress. This GED Course is not been offer in parole. A generic watered down course is been offered, but in my opinion not very effective and is not been fully documented as an academic option to reduce and to provide evidence of its success record. The full documentation I am referring to is to keep a progress report of the

parolees academic progress while enrolled in a full GED Training Academy such as my proposed GED Training Academy as an additional programs and services that would not only provide and assist and to track the progress of each parolee enrolled in my classes. Also, to provide an educational avenue to encourage parolees to be enrolled in a community college or university-like learning environment by us providing the teaching tools to the offenders. When the offender have additional tools such as our GED Training Academy, the offender is most likely not-to reoffender with other career goals and educational goals that may offset their criminal activities from re-occurring. To me, this will reduce recidivism through programs and services as a WIN-WIN for parolees and a WIN-WIN for the State of Texas and also a WIN-WIN for the Dallas County area.

**7. Do you provide any gender-specific services?**

Answer Options	Response Percent	Response Count
NO	59.1%	337
YES	40.9%	233

**8. If you answered “NO” to Question 7, why not:**

- (1) Accurate and current data entry and statistical reporting is lacking in this county.
- (2) Funding
- (3) High caseload and daily responsibilities limits officer opportunities to implement programs.
- (4) Lack of resources available in the community for both men and women.
- (5) No support by agency directors to allow us to implement new programs or initiatives outside of what is offered by the District Reentry Center. Men and Women parole could benefit from local programming if we are allowed to foster new relationships with others in the community.
- (6) Not a top priority, most parolees have same basic needs, programs for women parolees not cost effective.
- (7) Not required to differentiate between genders.
- (8) TDCJ does not have the funding.
- (9) While not specific, each offender’s needs are addressed on an individual basis.

**9. Do you provide services to youth?**

Answer Options	Response Percent	Response Count
NO (skip question 10)	80.3%	466
YES (please answer question 10)	19.7%	114

10. Please rank the barriers to re-entry facing youth in order of importance:

Answer Options	Always a Barrier	Often a Barrier	Sometimes a Barrier	Never a Barrier
Basic needs	27.9%	<b>44.1%</b>	25.1%	2.8%
Education	32.1%	<b>48.9%</b>	17.4%	1.6%
Returning to a traditional school setting	22.6%	<b>48.6%</b>	25.4%	3.4%
Employment	<b>45.9%</b>	40.4%	12.0%	1.6%
Transportation	34.1%	<b>43.1%</b>	21.6%	1.2%
Mental health and substance abuse treatment	26.1%	<b>46.2%</b>	23.9%	3.8%
Life skills education	34.1%	<b>45.1%</b>	17.0%	3.8%
Transitioning back into the home and community	32.0%	<b>47.0%</b>	19.9%	1.1%
Obtaining state-issued identification	19.3%	<b>36.9%</b>	35.2%	8.5%

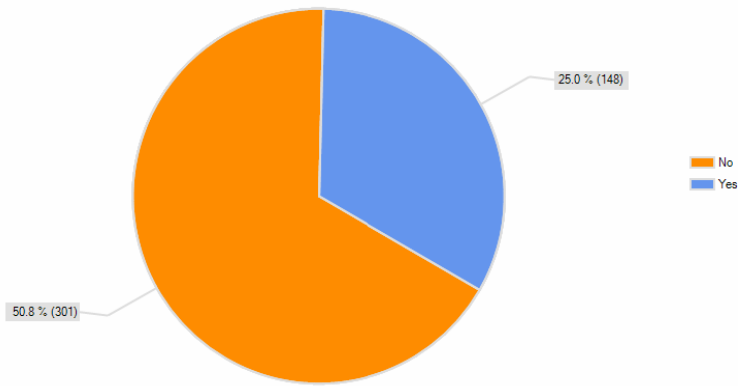
**“Other” responses:**

- (1) APS only works with adults who are aged or are 18 yrs olds and disabled.
- (2) childcare for our women in treatment
- (3) Gang Membership Re-direction Programs
- (4) having a positive support base
- (5) health issues (obesity)
- (6) Housing
- (7) Information & Referral to community services
- (8) Lack of any awareness of available programs.
- (9) lack of common sense, failure to assume self-responsibility, did not graduate or earn GED
- (10) maintaining a bond with the incarcerated parent (Storybook)
- (11) Mentors for older youth between 17-21 years old
- (12) no support system available for them outside of 12 step gps
- (13) No support, in helping obtain this info and materials they need.
- (14) Not knowing how to use a computer
- (15) post prison syndrome
- (16) sex offender housing and treatment
- (17) State Standards often interfere with our means to rehabilitate youth. Too cumbersome, too accusatory towards good probation and detention officers through their hot line or more appropriately named their “retaliation line”. Standards are increased from several hundred pages to almost 3 thousand pages when you consider all the chapters, sub chapters, compliance resource manual etc.
- (18) Systemic racism.
- (19) The fundamental guidance for a young person who grows up with no information on how to be effective once they are an adult.
- (20) The State of Texas does not provide Grants to community-based groups for Reentry programs!
- (21) Treating the issue that lead to entry into prison, jail, etc

(22) Upon exiting the system, vocational training with industry specific certifications and vocational mentoring help provide structure, support and balance during the reentry transition

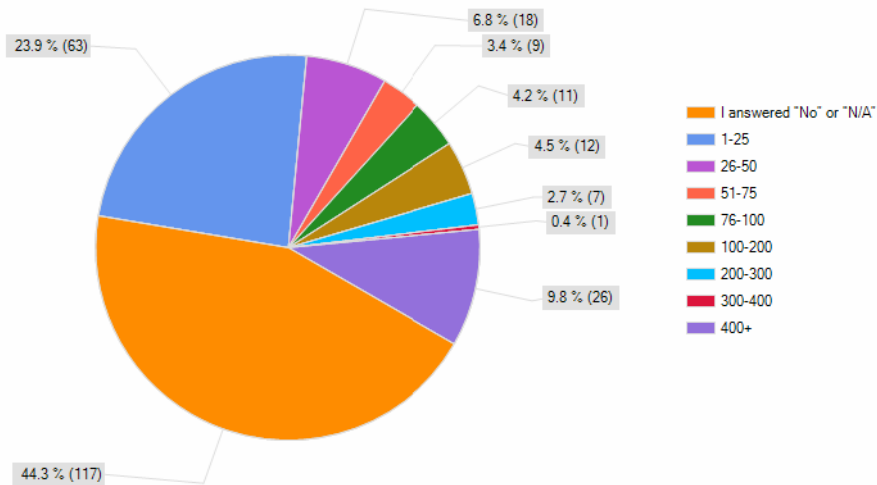
11. To your knowledge, is there a waiting list or backlog of clients waiting to receive your services?

WAIT LIST OF CLIENTS WAITING TO RECEIVE SERVICES



12. If you answered “Yes” to Question 11, how many people do you estimate are waiting for your services?

NUMBER OF PEOPLE WAITING FOR SERVICES



## BARRIERS TO RE-ENTRY: OVERALL

### 13. Please rank in order of importance the greatest barriers to re-entry.

Answer Options	Always a Barrier	Often a Barrier	Sometimes a Barrier	Never a Barrier
Housing	33.3%	<b>43.1%</b>	22.0%	1.6%
Obtaining food stamps and other public assistance	14.4%	35.2%	<b>40.0%</b>	10.4%
Obtaining identification	19.8%	<b>37.8%</b>	37.7%	4.7%
Transportation	28.1%	<b>46.6%</b>	23.7%	1.6%
Educational and/or vocational training	21.4%	<b>53.7%</b>	21.9%	3.0%
Employment	<b>51.9%</b>	38.8%	8.7%	0.7%
Rehabilitative services and/or aftercare	16.7%	<b>39.6%</b>	37.3%	6.4%
Locating support services	18.7%	<b>41.0%</b>	35.4%	4.9%
Financial difficulty (not able to pay utilities, rent, food etc.)	38.5%	<b>44.0%</b>	16.7%	0.9%
Ability to obtain work appropriate clothing	20.0%	32.3%	<b>40.5%</b>	7.1%
Eye care including glasses	8.1%	21.8%	<b>56.5%</b>	13.7%

#### “Other” responses:

- (1) Access to dental care. A good portion of our clients abuse illegal drugs (meth) and have a great need for dental care.
- (2) Accountability/mentorship
- (3) Adequate mental and physical health service access
- (4) After Incarceration, ReEntry People need 30-day debriefing--Trauma Resolution Therapy (Release-Shock)
- (5) Bad planning and organization for requirements for parole
- (6) Byzantine system of fees
- (7) client being released not equipped with basic resources
- (8) Connecting with a Mentor or Faith-BAsed group that can be of great assistance and encouragement
- (9) Cultural barriers- sometimes people who have too many tattoos are discriminated against
- (10) Family support services - there may be no support or destructive associations that need to be dealt with. Women may face difficulties with childcare. Lastly, having a Probation Officer or policies that punish too quickly rather than helping to find a solution for problems.
- (11) Finding a suitable living environment that does not encourage illegal behaviors
- (12) For women - protection from domestic violence upon release.
- (13) Free Aftercare for additional support services.
- (14) Handling child support upon release due to fears of reincarceration
- (15) I don't believe we can say that any of these on the lists ALWAYS has a barrier. But if we were simply asked to rank this list as to level of barrier issues, housing and employment would be at the top.

- (16) Lack of money and everyone expects you to provide for your kids, wife, husband or whatever responsibilities you left behind before you got incarcerated.
- (17) low self esteem
- (18) Many others but varies per person. Women need more support when they have kids but no non-custodial parent to support the children.
- (19) Mental Health and Substance Abuse Outpatient Treatment and Personal Development Counseling
- (20) No services available.....rural Texas
- (21) not having adequate life skills, not being prepared to be back into society, Youth being kept in TYC ( jail) to long
- (22) obtaining Birth certificates for ID purposes
- (23) Obtaining medications
- (24) Offender not seeking assistance after release and returning to Gang Family Affiliation
- (25) Only given 10 day supply upon release, not enough for the newly released with discharge from CJS to community. The newly release would benefit having a least a (30) day supply of medications to include mental health meds
- (26) Rebuilding family trust
- (27) Reconnecting with undesirable influences or returning to dysfunctional familial environments.
- (28) Socio-Economic Development Programs: Life Skills, Job Readiness, Money Management & Entrepreneurship
- (29) Support with daily structure and guidance /Child Support Payments that take up to 50% of paychecks before a person has a chance to address their own basic needs.
- (30) The Texas state government has seen fit to ensure ex-sexual offenders cannot get certain government services such as food stamps.
- (31) these offenders get NO assistance from Project RIO
- (32) treatment for prisoners who contracted disease from being raped or tortured
- (33) understanding how to access medication, particularly psychiatric medication if leave facility with 0 - 10 days of meds
- (34) vigilante actions and endangerment of parolee's families and employers.
- (35) We are not making the best of release planning. Correctional Institutional Division should prepare the offenders for reentry in a manner similar to the SOVRI program and maybe utilize their Changes and GRAD programs as the basis for reentry. They should focus on the offenders needs and risk prior to release. They could have an orientation program (a few months prior to release) with the family to address possible barriers and discuss a plan to meet reentry expectations. The family has to be educated on their role to the offenders successful reintegration and provide them with information during the orientation on how the can be an asset to this process.

## BARRIERS TO RE-ENTRY: EDUCATION

14. To what degree do your clients with criminal records experience the following education issues as barriers/obstacles to reintegration into the community?

Answer Options	Always a Barrier	Often a Barrier	Sometimes a Barrier	Never a Barrier
Low literacy levels	20.0%	<b>49.2%</b>	29.2%	1.6%
Lack of GED certification (pre-release)	14.8%	33.5%	<b>39.4%</b>	12.3%
Lack of GED certification (after release)	13.0%	37.0%	<b>40.8%</b>	9.2%
Lack of basic literacy education programs (pre-release)	14.2%	35.6%	<b>41.7%</b>	8.5%
Lack of basic literacy education programs (after release)	14.8%	<b>41.4%</b>	38.3%	5.5%
Lack of college-level academic education (pre-release)	16.5%	32.6%	<b>39.7%</b>	11.1%
Lack of college-level academic education (after release)	17.0%	34.7%	<b>37.1%</b>	11.2%
Lack of educational loan opportunities (pre-release)	18.4%	32.2%	<b>37.6%</b>	11.8%
Lack of educational loan opportunities (after release)	18.9%	34.0%	<b>38.2%</b>	8.8%
Limited financial literacy skills	21.6%	<b>47.6%</b>	29.0%	1.7%

### “Other” responses:

- (1) Barriers: Lack of adequate/suitable housing; Limited Mental Health Services and Medication Monitoring/Distribution; only a small few of those who need services actual receive help. No effective Job Readiness, Job Training or Job Development programs. Inadequate Peer Relationships: lack of programs to address life skills or how to have positive family relationships or personal relationships. Education Gap: functioning below expected grade level 9; staff not making proper referrals to address this issue or services not available or convenient for the offender. Medical Health: offenders not taught how to obtain medical assistance or insurance. No legal documents to assist with reentry; social security card, money for ID, birth certificate, immigrant status if applicable. Transportation: No effective bus voucher to assist offender to meet the conditions of parole (employment, treatment attendance, etc.).
- (2) Bilingual Bicultural basic translation and tutoring
- (3) Difficulty accessing the resources that are available in and out of incarceration.
- (4) employment and housing barriers to certain offenses - felony/ sex offender
- (5) For adolescents, parents do not understand what basic needs are required.
- (6) Government assistance is hypercritical mainly because policies deny those who have drug convictions on their background and they emphasize gaining education but so many choices are denied when selected.
- (7) I would like to implement a full GED Training Academy specifically for parolees. To obtain their GED and to encourage college and university education, so they may be better

equipped and marketable and fully integrated into the community in the long run. More importantly, employed and higher pay.

- (8) Lack of Job Training Soft Skills ( How to carry ones self to present for employment)
- (9) Lack of knowledge that federal financial aid IS available to pay for credited college courses and trade certifications through AFFORDABLE public institutions.
- (10) lack of support group organizations and mental health care resources.
- (11) lack of vocational mentoring in the first two years of employment.
- (12) Lack of vocational skills (Computers, Cars, Crafts)
- (13) language difficulties
- (14) Limited in non-existent knowledge of education opportunities.
- (15) most are coming from Mexico therefore language and lack of education from Mexico becomes a great barrier.
- (16) Motivation and opportunity to pursue school. Those on parole have to be at parole meetings. Those needing a job, especially if they're in a half-way can do school and work. No financial assistance. If the State would lower the rate of incarceration and spend those funds on those being released, effectively, we could really impact recidivism and relapse.
- (17) no incentive in prisons for further education programs
- (18) no packages given upon d/c to validate trades, college hrs., skilled trainings, too many being released after serving 10 + years with not even a GED. Too many with degrees, to include Masters due to instant offenses 3G's SO not being able to secure employment
- (19) Problem is that a lot of the people released are serving long sentences and often get no reentry skills at all and others who are trying to get into programs while still incarcerated can't get into programs because of the length of their sentence but yet get an FI-1. We can't afford to release these individuals without SOME type of reentry or they will return.
- (20) Selective Service Registration in TYC so men are eligible for grants.
- (21) There is a need for education for those classified as G4 (Medium Custody) through G6 (administration segregation). A way to educate these offenders needs to be figured out without compromising security.
- (22) There is a need to provide all these services. Finding a job after prison is the most hardest for them or coming from a rehab place
- (23) these offenders come out w/ no way to support themselves financially and are forced to revert to illegal means of financial support.
- (24) We currently have only one place to send clients for classes before taking the GED, then they have to drive 25 -30 miles to take the GED test and often do not have a vehicle or the monies to pay to take the GED test. Some are receiving Pell Grants who have a HS diploma or GED to attend college.
- (25) You say "former sex offender" and everyone turns a deaf ear. This has to stop.



## BARRIERS TO RE-ENTRY: EMPLOYMENT

15. Does your city or county have a “Ban the Box” policy? NOTE: Implemented in Travis County, the “Ban the Box” policy removes criminal history questions from initial applications and does not automatically bar individuals with a criminal history from employment.

Answer Options	Response Percent	Response Count
Yes	12.5%	68
No	50.5%	274
Not Sure	37.0%	201

16. To what degree do your clients with criminal records experience the following employment issues as barriers/obstacles to reintegration into the community?

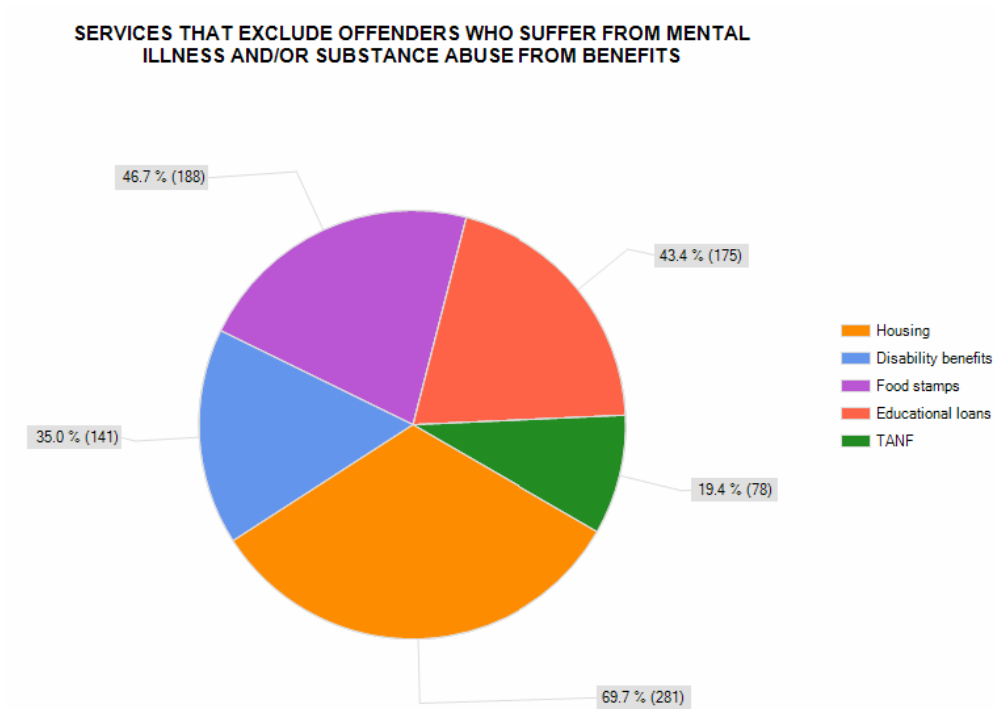
Answer Options	Always a Barrier	Often a Barrier	Sometimes a Barrier	Never a Barrier
Lack of academic/literacy skills	18.8%	<b>50.8%</b>	28.9%	1.5%
Lack of vocational skills training (pre-release)	23.0%	<b>45.1%</b>	28.3%	3.5%
Lack of vocational skills training (after release)	23.3%	<b>47.6%</b>	27.6%	1.5%
Lack of communication/soft skills and other employment-readiness education (pre-release)	20.8%	<b>49.5%</b>	27.4%	2.3%
Lack of communication/soft skills and other employment-readiness education (after release)	22.1%	<b>51.7%</b>	24.9%	1.3%
Lack of employment procurement/interview training (pre-release)	24.2%	<b>45.4%</b>	26.1%	4.3%
Lack of employment procurement/interview training (after release)	24.2%	<b>50.2%</b>	22.0%	3.6%
Lack of eligibility for a professional license (ex: barber, manicurist, electrician, plumber, sanitarian, truck driver, nurse, etc.)	25.7%	<b>41.6%</b>	30.6%	2.1%
Health challenges (mental health, substance abuse, physical health)	19.1%	<b>43.6%</b>	34.3%	3.0%

**“Other” responses:**

- (1) Criminal records.
- (2) Current economic climate
- (3) even with a profession license no one wants a convict
- (4) Family Support Groups for Re-integrations
- (5) Lack of work experience
- (6) Low self-esteem, self-confidence, workplace etiquette
- (7) Need job development training beyond interview training. Require skills such as how to deal with a manager, co-workers, dress, workplace behavior/expectations, etc.
- (8) Our clients are the family members who experience most/all of these barriers when their loved ones come out of prison.
- (9) reliable transportation/ funds for public transportation
- (10) Resume
- (11) The law offers deferred adjudication which is NO CONTEST but 99% jobs place deferred adjudication in the same category with a conviction which causes elimination.
- (12) There is no real plan of action for those being released to be ready for jobs. The jobs available in prison impact so few until the majority are just doing other things while incarcerated. Classes are limited and there’s no real incentive to gain job skills. Skills are not being taught in so many prisons. A person could be there 3-4-5 years and not have an opportunity to learn a skill. Women need nursing skills, computer skills, etc. that will allow them to be marketable upon release. Every prison should offer comprehensive computer classes.
- (13) This section would pertain to adolescents 16-17 yrs
- (14) Vocational mentoring and training after release provides structure, external resources and balance

## BARRIERS TO RE-ENTRY: MENTAL HEALTH & SUBSTANCE ABUSE

17. In your experience, what services exclude offender populations from obtaining benefits if they suffer from mental illness and/or substance abuse? (Please check all that apply.)



18. To what degree do your clients with criminal records experience the following mental health and/or substance abuse issues as barriers/obstacles to reintegration into the community?

Answer Options	Always a Barrier	Often a Barrier	Sometimes a Barrier	Never a Barrier
Lack of mental health services (pre-release)	16.0%	34.5%	<b>35.8%</b>	13.6%
Lack of mental health services (after release)	21.7%	<b>38.4%</b>	28.2%	11.7%
Inability to access/afford psychotropic medication (pre-release)	17.2%	29.7%	<b>38.3%</b>	14.8%
Inability to access/afford psychotropic medication (after release)	27.7%	<b>39.8%</b>	30.0%	8.5%
Inconsistency in taking psychotropic medication (pre-release)	19.2%	33.5%	<b>37.1%</b>	10.2%
Inconsistency in taking psychotropic medication (after release)	26.1%	<b>46.8%</b>	24.6%	2.5%
Lack of substance abuse treatment (pre-release)	15.5%	32.2%	<b>36.3%</b>	16.0%

Lack of substance abuse treatment (after release)	16.9%	<b>35.3%</b>	32.2%	15.5%
Lack of substance abuse education (pre-release)	13.6%	30.3%	<b>38.1%</b>	18.0%
Lack of substance abuse education (after release)	14.8%	31.4%	<b>37.5%</b>	16.4%
Lack of co-occurring programming (pre-release)	14.8%	37.1%	<b>37.7%</b>	10.4%
Lack of co-occurring programming (after release)	20.1%	<b>43.6%</b>	31.3%	5.0%
Lack of resource and referral information about mental health and/or substance abuse services	18.4%	<b>35.2%</b>	33.3%	13.0%

**“Other” responses:**

- (1) AA/NA is considered substance abuse treatment by TDCJ. It is not treatment. It is support.
- (2) Continuum of monitoring and provision of care is lacking and unavailable and financially prohibitive
- (3) Defendants cant afford the classes
- (4) Difficulty reinstating benefits (SSI, Medicaid, etc)
- (5) Even if the services exist they are difficult to access, often because of lack of knowledge or transportation
- (6) Lack of Cognitive Re-structuring.
- (7) Lack of concern from probation officers, unrestricted freedoms of probation officers.
- (8) Lack of detox and residential treatment
- (9) Lack of Substance Abuse treatment is problem because we are a small county and do not have any in this county.
- (10) Limited resources for rehab, psychiatric care in Travis Co., esp. for the uninsured
- (11) little concern for mental health patients who never been to prison, less concern for ex-convicts
- (12) Long delays accessing psychiatrist after release. Offenders often out of meds prior to initial assessment.
- (13) MHMRA is not offender friendly. The assessment is superficial and misses important factors.
- (14) need more choices of treatment professionals and facilities
- (15) need more evidence based treatment and less substance abuse “education”
- (16) Our local MHMR provides very little if any assistance to these folks.
- (17) Since lack of substance abuse education has little to do with substance abuse by the user, investing more for education/support networks for families may be most effective.
- (18) Since the substance abuse programs took a decline in the 1980’s, volunteers decline for 12 step meetings, and outside of IPTC’s and SAFPF’s for targeted offenders there is no real substance abuse services within the TDCJ system for long term abusers parolees re-entering the community. No quality treatment facilities in the Houston area to face these issues. Being addressed now through Houston Council on Alcohol and Drug Abuse and other treatment providers for a model

- (19) Spanish speaking AA/Counseling
- (20) Substance abuse education is too often led by untrained religious leaders. Although they are well-meaning, their effectiveness is limited, at best.
- (21) The treatment program, such as SAFPT and Rehabs, do not really address the issue around substance abuse. Those in these programs, including some of the teaches, are just going through the motions. No real changes are being made.
- (22) We need a substance abuse inpatient treatment program for many ex-offenders. The waiting list for MHMR is too long and the MHMR program needs more funding. This population needs rehab therapy especially when looking at personality disorders which are not dealt with by MHMR due to their funding restrictions.
- (23) With my limited experience in the State system, My initial thoughts or observations are: Lack of Substance Abuse Treatment (pre-release) not enough programs to accommodate the numbers of Substance abuse offenders in the system that need treatment while incarcerated. Should be required if offenders have a history of abuse and as a result of abuse, additional crimes occur and reoffend.
- (24) Women have a hard time if in their addition to obtain a in treatment bed.
- (25) Youth at TYC get little help dealing with mental and trauma issues. They do get help, but it is limited to time and to the numbers of youth needing the help

## BARRIERS TO RE-ENTRY: LIFE SKILLS EDUCATION

19. To what degree do your clients with criminal records experience the following life skills education issues as barriers/obstacles to reintegration into the community?

Answer Options	Always a Barrier	Often a Barrier	Sometimes a Barrier	Never a Barrier
Lack of cognitive skills education (pre-release)	16.9%	34.0%	<b>35.2%</b>	13.9%
Lack of cognitive skills education (after release)	20.1%	<b>38.4%</b>	29.5%	12.0%
Lack of behavior modification counseling (pre-release)	16.8%	34.7%	<b>36.1%</b>	12.4%
Lack of behavior modification counseling (after release)	19.3%	<b>39.8%</b>	29.8%	11.1%
Lack of parenting education (pre-release)	18.2%	33.7%	<b>36.2%</b>	11.9%
Lack of parenting education (after release)	20.2%	<b>36.8%</b>	33.4%	9.5%
Lack of anger management education (pre-release)	14.3%	33.5%	<b>37.1%</b>	15.1%
Lack of anger management education (after release)	16.8%	<b>34.1%</b>	32.7%	16.4%

### “Other” responses:

- (1) A lot of these classes are offered only on a limited basis...many times depending upon the availability of a volunteer.
- (2) Again, lack of accessibility
- (3) Basic social skills, dress, and etiquette needed for interviews and the workplace.
- (4) basic support system
- (5) Cognitive in one county in Texas is a sham. I think it's Williamson County, someone needs to investigate them. The therapy these guys receive does NOT include individualized treatment, they're all put in the same class with varied convictions and sometimes it makes the guys I know throw up when they get out of class. They are not dangerous nor should be IN a class, period.
- (6) Counseling for Post Traumatic Stress Disorder
- (7) ex-convicts don't get very much consideration no matter what skills they possess
- (8) First I believe we need to look at Evidence Based Programs which show through empirical data that the programs will work as opposed to only using best practices (I am referring to regular supervision. offenders). We need to change the culture of staff to buy into reentry and help them understand that it will help the mission by having a positive impact on recidivism. Our policies tend to be a bit stringent and we can revisit our contact standards based on some of the findings from a pilot project by Dr. Fabelo.
- (9) Lack of basic financial literacy
- (10) Lack of re-integration groups. Transitioning from prison to the community.
- (11) Most of these items would occur when adolescents have to be concerned with post natal obligations
- (12) need capacity to re-test offenders EA scores after release.

- (13) Often times people need special services for anger management and cognitive skills and a cookie cutter approach is not working. Group Level Intervention do work but some people need Individual Level Interventions and there no fund for this. Even on a sliding scale and they want the service services too high and what about the unemployed/under employed
- (14) Pre-Release, Offenders should be required to attend the education/counseling required for their offense. ie, anger management/domestic violence counseling for those with violence in their history, Parenting for those who have a history of related offenses, cognitive, etc. While in the Institutional System, these counseling and education opportunities should be made readily available to assist in reducing recidivism and providing opportunities for the offender to succeed prior to release. And If paroled, Parole voters need adequate time to program offenders to the most adequate program. many times an offender does not have enough time to be programmed to a substance program/offense related program, because his/her Projected Release Date is only a few months away and there is not enough time to place them in the program and the individual did not take the program while in the ID system. We must provide the offender with every opportunity to succeed while continuing to protect society.
- (15) some of the TYC students do get some are all these classes, again, some classes are limited in time spent with the youth and number of the youth
- (16) Staff are often unprepared to deal with these issues
- (17) These things are being taught, but they really don't help. Those with anger problems come out of these classes with the same or slight escalated anger issues.
- (18) This is a prevailing issue in the general population as well. Pre-leased, highly motivated parents may be the population with which parenting ed. can be most effective by providing an incentive for reconnecting with children.
- (19) we need to recognize the criminogenic behaviors and personality disorder and provide therapy.

## BARRIERS TO RE-ENTRY: SERVICE PROVISION

20. How often do you experience the following administrative obstacles to starting up and/or maintaining your program or service?

Answer Options	Always a Barrier	Often a Barrier	Sometimes a Barrier	Never a Barrier
Lack of certified/trained workforce	16.2%	28.6%	<b>38.0%</b>	17.2%
Restrictions on professional licensure for people with convictions	23.1%	28.6%	<b>30.0%</b>	18.3%
High turnover rate of staff	18.4%	28.1%	<b>33.8%</b>	19.7%
Lack of staff due to insufficient funding	<b>34.3%</b>	29.4%	23.3%	13.0%
Lack of reimbursement by insurance companies for mental health services	16.3%	24.9%	<b>29.8%</b>	29.0%
Lack of reimbursement by insurance companies for substance abuse treatment	17.9%	24.3%	<b>30.9%</b>	27.0%
Insufficient per-diem reimbursement by the federal government	21.6%	22.8%	25.7%	<b>29.9%</b>
Insufficient per-diem reimbursement by the state	<b>27.4%</b>	25.7%	27.2%	19.7%
Statutory restrictions on starting up the program	18.0%	23.4%	<b>32.2%</b>	26.4%
Restrictions on qualifying for government contracts	20.7%	25.4%	<b>30.5%</b>	23.4%
Requirement to provide both security and treatment as contract provisions	20.6%	25.3%	<b>28.3%</b>	25.8%

### “Other” responses:

- (1) Lack of all organizations working together or always downing another’s programming attempts without facts.
- (2) Most Administrators that I’ve encountered in both State and Federal prisons are just doing a job. They don’t really work with the volunteers to make programs, in prison, more effective. For instance, Chaplains compete with Education Dept. Whoever has the most power win. So Inmates who really would like to take a class that I offer is pulled out for Educational reasons. Then you have limited teaching space in facilities.
- (3) no basis for analysis: help is in form of directing and re-directing to existing programs
- (4) No time to initiate the programs and perform assigned duties as well.
- (5) Not allowed to use outside persons (volunteers) but agency (Parole Division) for anger management taught in Parole Office.
- (6) Only service offered are for victims/perpetrators of domestic violence
- (7) Some insurance companies will not fund substance abuse treatment if it is mandated by the court. This makes it difficult for probation clients who have insurance, because having insurance excludes them from receiving Texas Alternative to Incarceration Program (TAIP) chemical dependency funding. Just seems unethical for insurance companies to be allowed to exclude people who need treatment.



- (8) unnecessary paperwork; testing and expensive fees paid before testing; expensive educational plans to qualify for training/licensure
- (9) We need to change the culture of staff to buy into reentry and help them understand that it will help the mission by having a positive impact on recidivism.
- (10) We use no government, federal funds and only use small paid staff, the rest volunteer.

**21. To what degree do you experience the following barriers/obstacles to providing quality services to people with convictions?**

<b>Answer Options</b>	<b>Always a Barrier</b>	<b>Often a Barrier</b>	<b>Sometimes a Barrier</b>	<b>Never a Barrier</b>
Legal restrictions prevent staff from contacting clients for follow-up evaluation and services	18.5%	24.0%	<b>33.6%</b>	24.0%
Legal restrictions prevent recovered clients from doing outreach in jails/prisons	23.2%	25.1%	<b>35.1%</b>	16.6%
Lack of a certified and/or trained workforce	19.3%	32.0%	<b>35.6%</b>	13.2%
Lack of providers that are DSHS/TDCJ certified	23.0%	<b>32.9%</b>	31.7%	12.4%
Restrictions on professional licensure for people with convictions	25.6%	27.7%	<b>32.2%</b>	14.6%
Watered-down services in my agency/organization due to insufficient staffing	<b>29.6%</b>	28.2%	27.8%	14.4%
Watered-down services in my agency/organization due to insufficient funding	<b>30.7%</b>	28.4%	27.3%	13.5%
Lack of providers in rural areas	<b>36.0%</b>	32.8%	20.9%	10.2%
Lack of information referral networks among providers	20.3%	33.4%	<b>37.0%</b>	9.3%
Too much time lapse between sentencing and treatment	25.8%	31.9%	<b>33.0%</b>	9.4%
Too much time lapse between release from incarceration and community-based treatment	24.8%	31.3%	<b>32.5%</b>	11.4%

**“Other” responses:**

- (1) A religious volunteer working with an offender should also be the contact point for their faith group to the offender’s family. A religious volunteer cannot minister to an offender and their family at the same time.
- (2) Lack of consistent referral from prisons to program for pre release planning and follow up upon release
- (3) Loss of fidelity to programs administered

- (4) only services offered are for victims/perpetrators of domestic violence
- (5) Organizations under minding each other to protect funding sources.
- (6) Potential client organizations have restrictions on their funding, which eliminates or disables effective service from my organization.
- (7) So much is said about the continuity of care but is not what it is suppose to be. Lack of collaboration between organizations, schools and even the local sheriff office and probation officers.
- (8) Some referral programs are no longer available and have not been updated in the system. Not relevant to current information or some not very effective..
- (9) The Audits are not sufficient. It's as though there are no real standards for quality services.
- (10) We provide minimal services because that is the assistance we were created for.