Year 1 (2020 – 2021) Program Evaluation: Southern Nevada Reentry Program HOPE for Prisoners

Hope
FOR PRISONERS

Transforming Lives

YEAR 1 EVALUATION OF HOPE FOR PRISONERS (HFP) SOUTHERN NEVADA REENTRY PROGRAM

A REPORT PREPARED FOR HOPE FOR PRISONERS

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CHAPTER 1. BACKGROUND: SECOND CHANCE ACT (SCA)

In April of 2008, and with bipartisan support, the United States Congress passed the Second Chance Act (SCA) of 2007: Community Safety Through Recidivism Prevention (H.R. 1593). This Act authorizes the federal investment of strategies to reduce recidivism and increase public safety while minimizing the costs associated with state and local correctional budgets. The SCA authorizes up to $165 million in federal grants to state, local, and tribal government agencies as well as to nonprofit organizations and programs that assist those released from prisons and jails. Specifically, SCA funding has been awarded to prisoner reentry programs that address the needs and conditions that pose the highest risks of reoffending as well as to programs that seek to improve correctional and supervision practices also aimed at reducing rates of recidivism (U.S. Department of Justice, Office of Justice Programs, 2020).

This focus on reducing rates of recidivism is imperative to grantees, agencies, and organizations awarded under the SCA. The National Institute of Justice (NIJ) states that (NIJ, 2018, p. 1) *"Recidivism is measured by the criminal acts that results in re-arrest, reconviction or return to prison with or without a new sentence during a three-year period following the prisoner's release"* (as quoted in Buckley, 2021, p. 2). Recently, several Bureau of Justice Statistics (BJS) reports (2014, 2018) on recidivism found that, within just six months, over a quarter of individuals released from state prisons were rearrested. Additionally, within three years of release, 68% of previously incarcerated individuals were re-arrested; within six years of release, 79% were re-arrested; and within nine years of release, 83% were re-arrested (see Buckley, 2021, p. 3 – 5). These stark recidivism figures, for some, indicate that federal, state, and local correctional institutions are failing to provide incarcerated persons with the tools necessary for successful reentry (Galston & McElvein, 2016).

Since 2009, Second Chance Act grants have been awarded to more than 840 agencies and organizations in 49 states, the District of Columbia, and U.S. territories. This funding is used to support reentry programs that serve recently incarcerated adults and juveniles and include educational and employment training, substance abuse/use treatment/counseling, affordable housing assistance, family programming, mentoring, and victim support. Overall, agencies and organizations funded by SCAs help individuals transition out of jails and prisons and provide them with resources and services to support them successfully return home.

Recent research has documented the important relationship between reentry programming (i.e., providing services, resources, and case planning) and recidivism (Amasa-Annang & Scutelnicu, 2016). Reentry programs that help to stabilize the lives of formerly incarcerated individuals and their families also help to lower rates of recidivism, minimize the costs associated with incarceration, and reduce crime rates. Most reentry programs funded under SCA grants support and serve a wide range of persons or individuals with prior justice system involvement. The most common reentry programs funded to date includes substance abuse treatment and counseling services. Studies of these previously funded programs found that post-release aftercare, coupled with housing assistance, were the most likely services to provide favorable reentry program outcomes (see Buckley, 2021; Wright, Zhang, Farabee, & Braatz, 2014).

The Second Chance Act's (SCA) grant programs are funded and administered by the U.S. Department of Justice's (DOJ) Office of Justice Programs (OJP). In 2018, HOPE For Prisoners was awarded a Second Chance Act grant from the Department of Justice.

As part of the research into successful community-based reentry programs, the research team briefly documented and analyzed other SCA Grant recipients. **Table 1**, as presented below, provides a list of 10 geographically diverse community-based reentry programs including the name and location of the program, public website, mission statement and vision, and goals.

Table 1 Examples of U.S. Community Based Reentry Programs			
Name and Location	Website	Mission & Vision	Goals/ Values/Outcomes
Persevere, UT	https://perseverenow.org	"To empower justice involved individuals at risk to succeeded as productive members of society."	"To change lives through education, mentoring, and ongoing support." "Teach inmates and parolees to code. Find them jobs. Watch them succeed."
The Fortune Society, NY	https://fortunesociety.org	"To support successful reentry from incarceration and promote alternatives to incarceration, thus strengthening the fabric of our communities." "Building people, not prisons."	"We believe in the power of people to change. We help individuals with justice involvement rebuild their lives through innovative services and advocacy. "Transforming lives and advancing systemic change."
Restore Hope, AK	https://www.restorehopear.org/reentry	"To reduce the rate of incarceration and the need for foster care through a community-driven approach."	"Provide needed services to incarcerated individuals prior to and after their release."
UTEC, MA	https://utecinc.org/who-we-are/mission/	"To ignite and nurture the ambition of our most disconnected young people to trade violence and poverty for social and economic success."	"Primary outcome areas are: reduced recidivism, increased employability, and increased educational attainment."

Safer Foundation, IL	https://saferfoundation.org/about-us/mission-and-vision/	"To support, through a full spectrum of services, the efforts of people with arrest and conviction records to become employed, law-abiding members of the community and, as a result, reduce recidivism."	"Achieving employment opportunities for people with criminal records, thereby transforming communities and generations."
Resonance, OK	https://www.resonancetulsa.org/whatwedo/re-entry-services/	"To help troubled women change for good." "Resonance provides Reentry Support Services to women pre and post release, including substance abuse treatment, work readiness, mentoring, and case management services, to help women be successful upon release from prison."	"Through accredited programs developed exclusively for women–and the special challenges and responsibilities they face as women–Resonance provides the tools, services and support that enable them to make positive life changes for themselves, their family, and the community."
Center for self-sufficiency, WI	https://centerinc.org/services/revitalization-reentry/	"Inspiring hope, fostering growth." "To provide a foundation for people to actualize their hope and motivation to access a good life." "Community revitalization through individual transformation."	"Designed to reduce recidivism for individuals who are high risk, based on the results of the COMPAS assessment or convicted of/or with a history of violent offense convictions."
Going home Hawaii, HI	https://www.goinghomehawaii.org	"To assist justice involved Hawai'i Island men, women, and youth with reintegration into community life through employment, education, training, and appropriate services." "No new crimes, no new victims."	"To provide innovative and culturally responsive reentry and reintegration services to former offenders, their families, and communities."

Hope works, TN	https://www.whyhopeworks.org/students/holistic-reentry/	"To guide Memphians in need of a second chance through essential education, counseling and career development programming to establish a relationship with God while building stability, confidence and a hope-filled future."	"We provide life-breathing counseling support, mentorship, technical education and career pathways to Memphians pre- and post-release from prison."
The Lord's Place, FL	https://thelordsplace.org/what-we-do/reentry-program/	"Serves as a 'second chance' for those transitioning back into society after being released from incarceration."	"While in the program, participants have the opportunity to focus on their future and improve their lives through classes, meetings and volunteer opportunities."

The programs listed in **Table 1**, above, have been the recipients of the *Second Chance Act Comprehensive Community-Based Adult Reentry Program* and are used as direct comparisons to the HOPE For Prisoner's Southern Nevada Adult Reentry Program.

Based on the information presented within this chapter, connecting with other successful reentry organization across the U.S. could prove to be beneficial. Networking with similarly positioned reentry organizations, to mutually support and discuss what's working well (and what's not) could include successes associated with support at the local, state, and federal level. Additionally, collective conversations about creative problem-solving during a pandemic could prove to be worthwhile.

CHAPTER 2. OVERVIEW: INCARCERATION & REENTRY IN NEVADA

In 2020, Nevada's correctional system consisted of 11,139 (or 91%) male offenders and 1,115 (or 9%) female offenders, with the average age being 39.70 years old (Nevada Department of Corrections, 2020). Nearly half (or 43%) of inmates identified as White, approximately a third (or 31%) were Black and almost a quarter were Hispanic (or 21%) while the remaining categories were less common. During the same time frame, the total operating cost per inmate was $23,929 (Nevada Department of Corrections, 2020).

Nevada's incarceration rate is also among one of the highest in the nation, surpassing the national average. Specifically, Nevada's incarceration rate is 763 per 100,000 while the U.S average is 698 per 100,000 (Prison Policy Initiative, 2018). Important to note, that between 1983 and 2015, the number of people incarcerated in Nevada has increased by a whopping 391% (Vera Institute of Justice, 2019).

Additionally, the length of time individuals spend behind bars has expanded by 20% or approximately 4.2 months since 2008 (The Nevada Advisory Commission on the Administration of Justice, 2019). Moreover, recidivism rates in Nevada have gone up for almost all types of offenses, hovering at 29% (The Nevada Advisory Commission on the Administration of Justice, 2019). Given high incarceration and recidivism rates in Nevada, there is a need for effective reentry programs within the state.

BARRIERS TO REENTRY

Barriers to reentry are typically understood as challenges or obstacles that make previously incarcerated and/or formerly justice involved individual's return to society difficult and sometimes impossible. Primarily, consequences associated with having a criminal background impact individuals from finding and securing employment and affordable housing.

First, finding and securing affordable and safe housing has been documented as the most immediate barrier facing formerly incarcerated individuals post-release. Living with family may or may not be an ideal situation. Furthermore, housing opportunities are limited. Due to the scarcity of affordable and safe housing options, other barriers to finding and securing housing are associated with federal mandates (i.e., eligibility requirements) as well as local rules and regulations (i.e., zoning and ordinances).

Documented as one of the most important aspects of successful reentry, finding and maintaining a job has been associated with higher reentry success and lower rates of recidivism. Additionally, higher living wages have also been found to lower rates of future criminal activity (see Urban Institute, 2006). Importantly, depending on level of education, prior employment history, and level of work experience and/or vocational skills, those reentering society face added challenges in finding, securing, and maintaining employment. These realities are compounded by community members' misunderstandings about prisoner reentry and the reluctance of employers to hire a formerly incarcerated person (Holzer, Raphael, & Stoll, 2004). Results of these experiences equate to joblessness, homelessness, and justice-involved persons experiencing increased feelings of exclusion and isolation. Furthermore, opportunities

for pro-social family reunification, continuing education, and pro-social participation in civic life (i.e., voting rights) are also impacted.

Importantly, and related to HOPE For Prisoners, research on reentry programming have been shown to diminish these, and other, aforementioned barriers associated with successful reentry. Specifically, access to reentry services has been shown to also reduce rates of recidivism.

HOPE FOR PRISONERS (HFP) REENTRY PROGRAM

HOPE for Prisoners (HFP) is a local non-profit organization based in Clark County, Nevada. It has been in operation for approximately 11 years, offering evidence-based reentry interventions and services to formerly incarcerated men, women, and young adults returning back to the community. HOPE For Prisoners stands out from other community-based reentry programs across the U.S. due to its unique 18-month mentoring program as well as its partnership with the local police department (i.e., Las Vegas Metropolitan Police Department).

Mentors are an important component of HOPE For Prisoners' client successes (Troshynski et al., 2016). Each mentor is screened, interviewed, and participates in one initial training that lasts eight (8) hours. Then, upon completion of their initial training seminar, they also participate in continuous partnership/interaction with a client/mentee during the18-month mentoring program where they learn about the varied obstacles that clients experience throughout the reintegration process. Each client is paired with a HFP programming staff member and a mentor (or team of mentors) that 'walks' alongside them to help them seek out and secure employment, enroll in educational/training programs, reconnect with family members, and navigate any challenges they might face. Currently, there are over 60 members of the local police department who serve as HFP mentors and are also considered a key component to the program's success.

Since 2017, the Nevada Department of Corrections has been incorporating an empirically validated criminogenic risk and needs assessment tool, namely the Ohio Risk Assessment System (ORAS), renaming it the Nevada Risk Assessment System or Nevada Recidivism Assessment System (NRAS), to match the state it is utilized in. Nevada Parole and Probation also utilizes the NRAS and creates "case plans" that are appropriate to each individual's risk/criminogenic needs. Recently (2020), HOPE For Prisoners has incorporated the NRAS as part of their in-take process. All program staff are now trained to administer and score the NRAS and to "case plan" based on their client's risk/needs.

HOPE For Prisoners has also incorporated other evidence-based interventions into its reentry curriculum, including cognitive-based programming (e.g., Moral Reconation Therapy [MRT] Classes) that has been shown to reduce recidivism rates. Similar to Nevada Department of Corrections (NDOC) staff, HFP program staff have been trained to deliver and facilitate MRT classes to HFP clients. The combination of newly implemented evidence-based assessment, like the Nevada Risk Assessment System (NRAS) and programming, like MRT, highlights continuity with Nevada Department of Corrections and provides a continued focus on comprehensive reentry services for HFP clients.

Additionally, depending on the client's unique risk/needs, HFP continues to offer a range of previously developed and implemented programs including: 1) Pre-Vocational Leadership Workshop (e.g., time management, conflict resolution, effective communication); 2) Financial Fitness for Life (e.g., improving your credit, reading financial statements, banking basics); 3) Leadership Training (e.g., public speaking, critical thinking); 4) Professional Development Training (e.g., team building, emotional intelligence, problem solving); 5) Technology Training (e.g., beginners guide to IT, Microsoft word and excel).

It is important to note that HFP also offers a range of vocational and educational programs. Many of the eligible trainings offered are also offered through Nevada's Workforce Connections and are listed on the Eligible Training Provider List (ETPL) (please see Workforce Connections website[1]).

HOPE For Prisoners (HFP) Mission Statement and Vision

Research has rightfully acknowledged that the language we to describe individuals, populations, and communities' matter and shapes people's views and understandings of past and present events, as well as our understandings of (their) future possibilities (see Cox, 2020; Tran, Baggio, Dawson, et al., 2018). Language used to describe previously incarcerated people, their life experiences, behaviors, risk factors, and future opportunities can therefore play an important role in supporting or undermining their emotional and physical wellbeing as well as their access to resources and services. Notably, those justice-involved individuals utilizing HFP services are demonstratively called/referred to as *"hopefuls"* and *"clients".* HFP staff routinely discuss the importance of *"meeting hopefuls where they are at"* and how they *"walk alongside them"* through their reentry journey.

HOPE For Prisoners provides hope to justice-involved individuals through a process of community transformation. As such, their Mission Statement reads, "*HOPE for Prisoners is committed to helping men, women and young adults successfully reenter the workforce, their families, and our community.*" (See HFP website).

HOPE for Prisoners' vision also emphasizes the importance of empowering individuals which, in turn, helps to create a successful reentry process, "*HOPE for Prisoners works to empower the formerly incarcerated and their families to create a successful future built on strategic leadership and character development. By assisting those fighting for second chances, we strive to serve, build and strengthen our community.*" (See HFP website).

Placing the hopeful at the center, and their prior correctional labels, activities, and conditions second is a hallmark of this non-profit organization. Not only is person-centered language utilized throughout social media and staff articulations of serving this population, but holistic well-rounded services are offered to everyone that walks through HFP doors.

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[1] Nevada Workforce Connections Website providing a listing of all eligible training providers is available here: https://nvworkforceconnections.org/?page_id=8914

HOPE for Prisoners has also identified a list of short- and long-term goals that are aimed to address individuals' unique needs and track the program's success.

Short-Term Goals

- Teach clients specific job skills
- Teach clients specific life skills
- Provide transitional housing
- Provide immediate resources (i.e., transportation)
- Administer programs and trainings
- Address addiction, depression, trauma, and any health problems

Long-Term Goals

- Facilitate family reunification
- Find permanent housing
- Secure full-time employment
- Engagement in community programs
- Providing counseling services to address trauma, mental health, and addictions
- Reduce recidivism rates

These short- and long-term goals are also incorporated throughout the facilitation of the Second Chance Act Comprehensive Community-Based Adult Reentry Program grant awarded to HOPE For Prisoner's in 2019. Other SCA program goals are noted throughout the proceeding **Chapter 3**.

Based on Nevada reentry and recidivism trends, barriers associated with successful prisoner reentry and HOPE For Prisoner's short- and long-term goals are an important component to the successes of HFP hopefuls and, interconnected to the success of HFP. These are also addressed below and within the section highlighted focus group conversations with HFP staff (see **Chapter 4**).

CHAPTER 3. SOUTHERN NEVADA ADULT REENTRY PROGRAM

HOPE for Prisoners, Inc. (HFP), the grant recipient of a 2018 SCA (FY 2018 – 2022), is an established, non-profit organization with demonstrated experience in providing comprehensive, evidence-based reentry services for formerly incarcerated individuals seeking to return to the local community. The Category 1 *project title* for the Second Chance Act (SCA) Grant is entitled, *Southern Nevada Adult Reentry Program* and operates within Las Vegas/Clark County. For this grant/program, *correctional partner agencies* include both State and local correctional facilities/programs.

In the summer of 2021, HOPE For Prisoners requested a no-cost extension for the Second Change Act Grant that was awarded in 2018 due to the challenges associated with the COVID-19 Pandemic. The additional time was requested to complete programmatic components as HOPE for Prisoners was unable to provide both pre-and post-release services to clients due to the COVID restrictions imposed on both state and federal levels. During the period of March 2020 through May 2021, all institutional access was prohibited. HOPE for Prisoners staff and service providers were not allowed to enter facilities to provide services pre-release. Also, clients were restricted from participating in HOPE program due to social distancing requirements. In cases where participation was permitted, class sizes were small, usually 10 clients per class cycle (every 6 – 8 weeks) due to social distancing and institutional protocols. Clients within the community also experienced a myriad of challenges due to restrictions within the community. This tremendously affected enrollment numbers and reentry services provided.

HOPE for Prisoners program staff was able to pivot and explore innovative ways to provide services to clients during this time. A virtual platform was utilized to provide case management services, life skills classes, vocational training, and counseling. Huddles were also done virtually on a weekly basis which allowed an opportunity for clients to interact with mentors, subject matter experts, and community partners.

The overall purpose of the project is to expand HFPs established reentry program to meet the needs of individuals at medium- to high-risk to reoffend, as determined by validated criminogenic risk assessments and the use of evidence-based interventions and services.

SCA Grant specific project goals include:

1. To establish an adult reentry planning council to develop a strategic plan incorporating evidence-based programs, policies, and practices;
2. To plan for second chance reentry services implemented within other law enforcement jurisdictions/ incarceration facilities within Clark County;
3. To provide direct reentry services to 200 medium- to high-risk individuals, aged 18 and over, who were convicted as an adult;
4. To employ a qualified independent evaluator to oversee project data collection, analysis and reporting.

For this SCA grant, **deliverables include:**

1. A project timeline with a planning phase up to 12 months;
2. Submission of a Planning and Implementation Guide;

3. Correctional partner and law enforcement memorandums of understanding;
4. Use of empirically validated risk assessment tools;
5. Use of cognitive based programming;
6. Services for at least 200 reentry clients, aged 18 or older, convicted as an adult, and at medium-to high-risk of reoffending, include those with a history of violent offense convictions;
7. Collaboration with evaluators from the University of Nevada Las Vegas;
8. Use of a documented baseline recidivism rate;
9. A plan to track program participant outcomes for at least 12 months; and
10. Holding quarterly meetings with formal partners to monitor and improve program performance.

Training and other supports that will be provided include participation in the Financial Management Online Training; adequate staff training and coaching to appropriately use cognitive-behavioral interventions, and strategies on the utilization of evidence-based programs and practices.

Throughout the duration of the SCA Grant/program, priority considerations include:

1. Providing services for reentry clients with a history of violent offense convictions;
2. Acquiring feedback from victims of crime, individuals who have been incarcerated, and families of those incarcerated;
3. Maintaining/growing on-going relationship with a state reentry task force.

Prominent to the SCA guidelines, reentry organizations that incorporate a risk assessment of clients coupled with Moral Reconation Therapy (MRT) as part of their reentry planning were prioritized. Of late, HOPE For Prisoners has been utilizing the Nevada Risk Assessment System (NRAS) as part of their client intake. For the SCA, HFP also included MRT as part of their training/programming.

MORAL RECONATION THERAPY (MRT) CURRICULUM

Overview of Moral Reconation Therapy (MRT)

Moral Reconation Therapy (MRT) is an evidence-based intervention that teaches clients the skills necessary to uncover unhealthy thinking patterns and in turn, develop prosocial, cognitive skills (Little & Robinson, 1988). MRT based treatment programs have been shown to be effective with justice-involved populations including adults and youth, leading to a significant reduction in recidivism rates (Blonigen et al., 2021; Cullen & Gendreau, 2010; Ferguson & Wormith, 2013; Little, 2006; Little, Robinson, Burnette, & Swam, 2010; Lipsey & Cullen, 2007).

In fact, correctional facilities that utilize MRT based treatment programs within their curriculum have demonstrated a significantly lower recidivism rate when compared to programs that do not incorporate this approach. For instance, Little (2006) found a 26% recidivism rate among MRT participants when compared to 40% among participants who were not enrolled in an MRT program, over the course of three years. A study recently conducted by Ferguson and Wormith (2013) found that recidivism rates amongst MRT participants was one-third lower than control group participants who were not enrolled/participating in MRT. Given their success in reducing recidivism rates for justice-involved

populations, MRT based treatment programs are regarded to be the golden standard in correctional intervention (Blonigen et al., 2021), when they adhere to the principles of cognitive-behavioral therapy.

Overview of Workbook Used, "How to Escape Your Prison: A Moral Reconation Therapy Workbook" by Little and Robinson (2006)

HOPE for Prisoners has incorporated a Moral Reconation Therapy (MRT) model within their programming. Currently, they are using the workbook titled *How to Escape Your Prison: A Moral Reconation Therapy Workbook* by Little and Robinson (2006). The authors describe Moral Reconation Therapy (MRT) to be "a systematic, cognitive-behavioral, step-by-step treatment strategy designed to enhance self-image, promote growth of a positive, productive identity, and facilitate the development of higher stages of moral reasoning" (Little & Robinson, 2006).

The workbook is structured around 30 chapters and includes a range of topics such as Prison and Unhappiness, The Root of Unhappiness, Inferiority and Non-Existence. Clients are required to complete 12 steps or assignments in order to successfully complete the course. Some of the steps involve structured group exercises while others are designed as homework assignments. Importantly, most of the workbook activities are completed while at home and then, together, clients present in-class during their weekly meetings.

The 12 steps include:

1. Pyramid of Life Exercise as participant testimony.
2. Shield and Life Mask Exercise as well as the Life Wheel Exercise and participant testimony.
3. Worries, Wants, and Needs Exercise and program rules acceptance.
4. Things in My Life Exercise and Major Life Categories.
5. Circle of Relationships Exercise, Best of Times/ Worst of Times Exercise, and Important Relationships.
6. 10 Hours of Helping Others (volunteer work), One-on-one discussion, and Trading Places Exercise.
7. One Year to Live Exercise, Five Years to Life Exercise, Ten Years to Life Exercise, and Master Goal Plan.
8. One-Year Action Plan.
9. 10 New Hours of Helping Others, New One-On-One Discussions, and Action Plan Review.
10. Moral Assessment, My 5 Biggest Problem Areas, and Trading Places Exercise.
11. Circle of Relationships Exercise, Best of Times/ Worst of Times Exercise, Assess Important Relationships in My Life, Summary of Things Learned in Steps, and participant testimony
12. New Master Goal Plan.

This MRT workbook and curriculum have been used by other agencies in Nevada, including the Day Reporting Center (DRC) managed by the Nevada Department of Public Safety Division of Parole and Probation.

Treatment Group Observations

Several treatment group observations were conducted to assess how well the sessions adhered to the principles of cognitive-behavioral therapy. For example, the following items were used to assess the strengths of the curriculum:

- Did the session follow a firm, fair, yet carrying approach?
- Did the facilitator model positive behaviors?
- Did the facilitator engage clients in role-playing exercises?
- Did the facilitator target clients' criminogenic needs?
- Did the facilitator use motivational interviewing techniques?

Each MRT session observed adhered to the above principles. The session moderator, a HFP program staff trained in MRT, followed *"fair, firm, and consistent"* procedures while also modeling a positive mindset. Motivational language was also incorporated throughout the group conversation and, towards the last half hour of the session, the moderator spent one-on-one time with each client to discuss their progress on their steps and how each step is associated with a goal, risk, and need specific to the client.

For example, in observing a MRT class on "ACCEPTANCE" (Step 3), six (6) clients were present and participated in sharing stories about their worries, wants, and needs (see page 53 of the MRT workbook). Overall, these six individuals shared worries associated with finding/keeping an affordable living situation, providing for their children, finding a job, and planning/acquiring training/education for a long-term career. Similarly, the client's needs as related to their happiness corresponded to these shared worries. Clients discussed how they are doing in their current living situation, how they are providing for their children, and – since all clients were also employed – how they appreciated the feeling of being able to provide for the local economy and community.

Clients also discussed how they were all proud of themselves for remaining clean and sober. One newer client, a young mother, mentioned that she just passed another urine analysis or urinalysis (UA) and that this was *"the first time since she was a kid"* that she could remember having a clean UA. The rest of the group shared in this conversation and praised this client, noting how difficult it is to get and remain clean. They told her how proud they were and how they enjoyed watching her grow the last couple of weeks.

One of the clients wanted to share his story and pointed to the evaluator and said *"please write this down. Let them know that this is a life changer".* His story is shared here as an example of the unequivocal service that HFP provides to hundreds of clients annually.

This client, a male in his mid- to late- 30s was incarcerated for a little over one year and, when he was released, HOPE For Prisoners was able to get him a room in a sober living house *"right away!".* He expressed how scared he was coming out of prison because he knew he was going to be homeless. So, he called HOPE For Prisoners and they picked him up once he was released and found him a *"good place to live".* They also gave him *"toiletries, like soap and a toothbrush and toothpaste and some clean clothes".* This, as the client explained, *"shouldn't be that big of a deal".* But, for this client, HFP providing these bare essentials was akin to a thoughtful and humane gesture – an *"act of kindness that was so meaningful"* because he *"literally didn't have anything."*

This young man has been a client at HFP for eight weeks now and appreciates the *"work that they do."* He likes living at the sober living house because he has his own room and bathroom and *"this privacy is greatly appreciated".* He has four children, the eldest is 12, and he is *"working the steps to make sure"* that he *"finds a job that can be a career"* so he can *"take care of them".* He also wants a house of his own someday.

Connected to the unique wrap around model that HOPE For Prisoners is well-known for, this client, like so many others, *"heard about HOPE on the inside"* - from other folks who used their services/classes. He was told it was *"going to change your life"* so he started taking the classes on the inside and is still active now that he's on the outside.

During another MRT class observation, other clients discussed the classes and training sessions offered by HOPE For Prisoners. Two clients connected these classes to a prior conversation they had while completing another MRT step: *"Remember when we realized how much time we've spent on self-improvement?",* one recalled. Other members of this group agreed and conversations about how therapy, self-improvement, and even chores around the house are now considered a *"massive part of the week".* One of the clients, a young man in his early 20s, the youngest in the group offers to go through steps with some of the others. The MRT facilitator mentions that, when he first started the trainings and classes at HFP, he was *"not very active and did not want to participate".* The young helpful man laughed out loud while the group collectively confirmed, *"Now look! He's leading and asking to help!"*

Benefits of MRT Classes Held at HOPE For Prisoners

One important issue to note: Several of these clients mentioned that participating in MRT classes and working through the steps *"work better"* when they are able to do it at the HOPE For Prisoners office location. For two clients living at a local transitional half-way house, they said that they get worried that *"NDOC"* officers (staff at the Nevada Department of Corrections) will overhear them and that it's *"not as comfortable"* to work through the steps with *"correctional officers"* around because they *"don't want to seem like"* they're doing something wrong or that they are completing the assignments *"not the right way".* Furthermore, clients expressed that they feel like they're being judged by MRT facilitators at these correctional locations because *"their facilitator might say something"* to their officer (Probation or Parole). Several of the male clients also mentioned that they did not want to *"look too weak in front of their officer either".*

Importantly, clients do not want to come across as being *"weak"* to several persons they are in regular contact with. This includes correctional officers working at half-way houses where they reside, parole and probation officers governing their community sentence, and other previously incarcerated folks they reside with and/or take trainings and classes with. Some clients acknowledge that they are uncomfortable admitting and reflecting about their prior *"bad behavior"* and that they *"don't want to disclose too much information"* nor do they *"want to look weak in front of other inmates."* These feelings stem from being and feeling vulnerable while they were incarcerated because *"being vulnerable makes you a target on the yard."* Many prefer not to discuss prior delinquent and/or criminal behaviors because they *"don't want to get in to trouble".* Examples of this could include workbook activities that ask clients to talk about the last time that they drank alcohol. Many do not want to put this down on

paper. For many of these clients, they repeated how it was *"difficult to think about"* or *"deal with"* a lot of *"the stuff that MRT makes us deal with"* or *"talk about"*.

That said, when these clients participate in MRT classes held at HOPE for prisoners, they note that they will *"just be honest with"* their program manager. Clearly, the space created and maintained at HOPE For Prisoners helps support clients in their MRT progression. Not only are HFP staff well-trained in MRT but therapists and counselors are available if needed. In talking with some of the program staff members, they mentioned that *"the hardest thing with facilitating MRT classes is that some clients get to a point where they over-share"* and that, unfortunately, MRT is *"not a processing group"*. Rightly acknowledged, MRT classes are set up to have clients focus on the program steps including ways to complete each step successfully. However, some clients tend to deviate from these steps/assignments and talk about their reentry experiences instead. In these moments, program staff have to re-navigate the conversation back to the MRT assignments.

It is important to note that HOPE For Prisoners functions more as a holistic and inclusive organization with well-trained staff, therapists, and counselors available to clients that need time to *"over-share"* and *"process for longer"*. In the event that a client would like to keep sharing, HFP provides therapists that are well-trained and available to work through a range of emotions/triggers that come up for many clients while they are working through the steps of the MRT program.

In sum, and based on these MRT class observations and conversations with HFP clients, it is very clear HFP clients do not feel like a correctional setting is a safe or productive space to successfully work through the MRT program. Yet, and perhaps even more importantly, HFP clients feel safe to feel, share, over-share, and work through the MRT steps at HOPE For Prisoners.

NEVADA RISK ASSESSMENT SYSTEM (NRAS)

Actuarial-based assessment instruments adhere to the principles of effective correctional intervention, also known as the Risk-Need-Responsivity (RNR) model (see Andrews, Bonta, & Hoge, 1990). The Ohio Risk Assessment System (ORAS) was initially validated with research dedicated to Ohio's justice-involved population (see Latessa et al., 2009; 2010; 2014). Since then, the ORAS has been adopted and validated by other states throughout the country including Indiana, where it was renamed the Indiana Risk Assessment System (see Latessa, Lovins, & Makarios, 2013), Texas, where it was renamed the Texas Risk Assessment System (Criminal Justice Connections, 2015) and Nevada, when it was adopted by the Nevada Department of Corrections – including Nevada Parole and Probation - and renamed the Nevada Risk Assessment System.

HOPE for Prisoners has recently adopted and implemented the NRAS to match the state it is currently utilized in. The NRAS includes a total of five assessment instruments:

1) The Pretrial Assessment Tool (PAT)
2) The Community Supervision Tool (CST)
3) The Prison Intake Tool (PIT)
4) The Reentry Tool (RT- from a long-term prison sentence of over 4 years)

5) The Supplemental Reentry Tool (SRT – from a short-term prison sentence of less than 4 years).

The Prison Intake Tool (PIT) falls under five main domains, with a set number of questions assigned to each domain. A high score indicates a high risk and supervision level. The five domains include:

1) Criminal History
2) Education, Employment, and Financial Situation
3) Family and Social Support
4) Substance Abuse and Mental Health
5) Criminal Attitudes and Behavioral Patterns

It is worthwhile to note that the PIT has been shown to display poor psychometric reliability and validity of the instrument (see Blas Dahir, Lanterman, Kolpakov et al., 2017). This means that the PIT, as an assessment instrument, does not always accurately and dependably measure what it means to measure. This is a significant limitation of the PIT instrument. Simple reorganization, removal and/or addition of items, and re-norming of the tool could possibly improve the predictive validity. Also of concern are instrument administration issues, which impact data quality.

In conjunction with the PIT, HOPE For Prisoners uses the Community Supervision Tool (CST) for all post-release clients. This practice is also consistent with Nevada Parole and Probation. If a client is enrolled with HFP pre-release, NRAS scores are provided to the organization via Nevada Department of Corrections PIT scale. The HFP client's NDOC score is only used when they first start the HFP program while they are incarcerated and enrolled pre-release. When clients are release to the community and are still a client of HFP post-release, they are then scored with the CST. Then, upon completing the HFP program, all clients are then scored with the NRAS. This new score is compared to their initial score pre-release and is used to measure any changes in overall scores and risk levels.
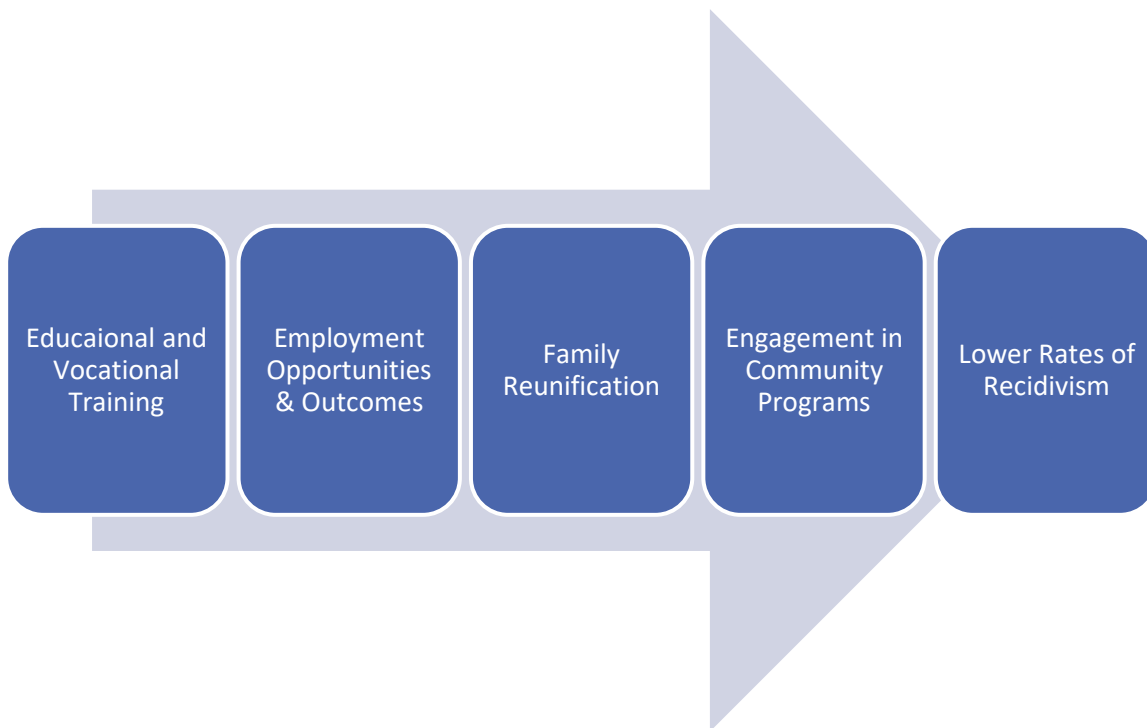
The NRAS validation component of this evaluation found that the Prison Intake Tool (PIT) is able to discriminately predict recidivist and non-recidivist membership using both the overall risk/need categories as well as the overall risk/need raw score. However, the PIT can predict recidivism when using the overall raw score and overall risk categories for females only when technical violators are included in the analyses. When technical violators are excluded from the analysis, the PIT predicts recidivism for males only. Since the sample size of this SCA evaluation is smaller (less than 1000), it does not equate to a desirable number to run analyses; for the female population of the SCA, the sample size is too small to conduct the proper statistical analyses. Therefore, these results are preliminary. Data collection will continue in Year 2 to update these NRAS validation analysis using a closer to appropriate sample size.

CHAPTER 4. YEAR 1 PROGRAM EVALUATION

This report is part of a longer SCA/DOJ evaluation that incorporates prior information within the above chapters. The following chapters expand the scope to also include surveys and focus groups with HFP staff members overseeing SCA/DOJ clients, observations of MRT classes as well as NRAS and Apricot data system training, overview of intake forms and other administrative materials, as well as observations of staff meetings and client case processing conversations.

It should be noted that there is a limitation associated with this fist-year evaluation: Low enrollment numbers due to the COVID-19 pandemic has made it more challenging to collect and analyze data. As a result, data analysis is delayed and a request for an extension (due to COVID-19) has been made and received. The following Year 1 program evaluation involves both quantitative and qualitative research procedures.

Using a mixed methods research design, the aims of this project are thus threefold: (1) to discuss the HFP reentry program, which utilizes an empirically validated criminogenic risk and needs assessment tool such as the Nevada Risk Assessment System (NRAS), (2) to assess program outcomes for HFP clients as well as (3) to evaluate which type of service/reentry initiative is most effective. The following items are considered to be measures of success:

| Educaional and Vocational Training	Employment Opportunities & Outcomes	Family Reunification	Engagement in Community Programs	Lower Rates of Recidivism

Overall, training HFP staff on risk and recidivism, understanding the NRAS scores, and providing case planning around HFP clients' scores - in combination with clients' articulations of top needs and most immediate needs - has helped in the streamlining of case management and case planning.

Additionally, program staff meet on a weekly basis to discuss participants successes, needs, and barriers. These conversations are also helpful in providing well-rounded holistic care and case management. MRT and NRAS trainings for HFP staff have also streamlined case management and outcome goals for participants. MRT classes for participants have helped to provide a safe space for reflection, personal growth, and positive dialogue between participants and HFP staff; this also allows another time for participants and HFP staff and service providers to meet in person. The impact of all of these trainings relate to the overarching goals of the organization in that HFP staff are able to provide for medium- and high-risk participants while they reenter society post-incarceration.

YEAR 1: REPORTED SCA/DOJ GRANT COMMUNITY MEASURES

Submitted to the Department of Justice (DOJ) on July 30, 2020 was the "SCA Community Measures" report. This report included information about the use of SCA federal funds as well as:

1) **Client/participant characteristic requirements:** The target population consists of adult men and women, convicted, sentenced, and currently incarcerated at the following institutions: Clark County Detention Center and Nevada Department of Corrections facilities who are medium to high risk. These sentenced individuals will receive prerelease services prior to their release to Clark County communities. HOPE for Prisoners also provided post-release reentry services to individuals released to communities within Southern Nevada from various correctional facilities.

2) **Criminogenic risk and/or needs assessments used to inform services provided:** Through the Nevada Department of Corrections, all participants are administered the Nevada Risk Assessment (NRAS) tool upon intake; those scores are provided to HOPE for Prisoners before enrolling in the program. Clients enrolled post-release (within the community) were also administered an NRAS by HFP staff. For the SCA, participants are those that have scored medium to high on the NRAS and are thus considered "high-risk" to re-offend. Upon release and at the first meeting with program staff, participants complete an intake form that includes the NRAS as well as checking off a range of needs/services. Then, participants are asked what their top three and biggest needs currently are. Using the NRAS and client self-reported top needs, program staff work with clients to create plans accordingly. Thus, the NRAS assessment is incorporated before the HFP intake and while HFP clients are still incarcerated/pre-release. Then, NRAS assessments are used again when clients enroll and first meet with their HFP program staff/post-release.

3) **Numbers of participants** served thus far (N=140) including those that are still engaged/active (N=123) and those that are inactive/no longer engaged (N=17). Thus, at 2021, 88% of DOJ clients served were still participating in the HFP program.

SCA/DOJ Participants (N=140)
(2020 - 2021)

12%

88%

■ Active/Engaged   ■ Inactive
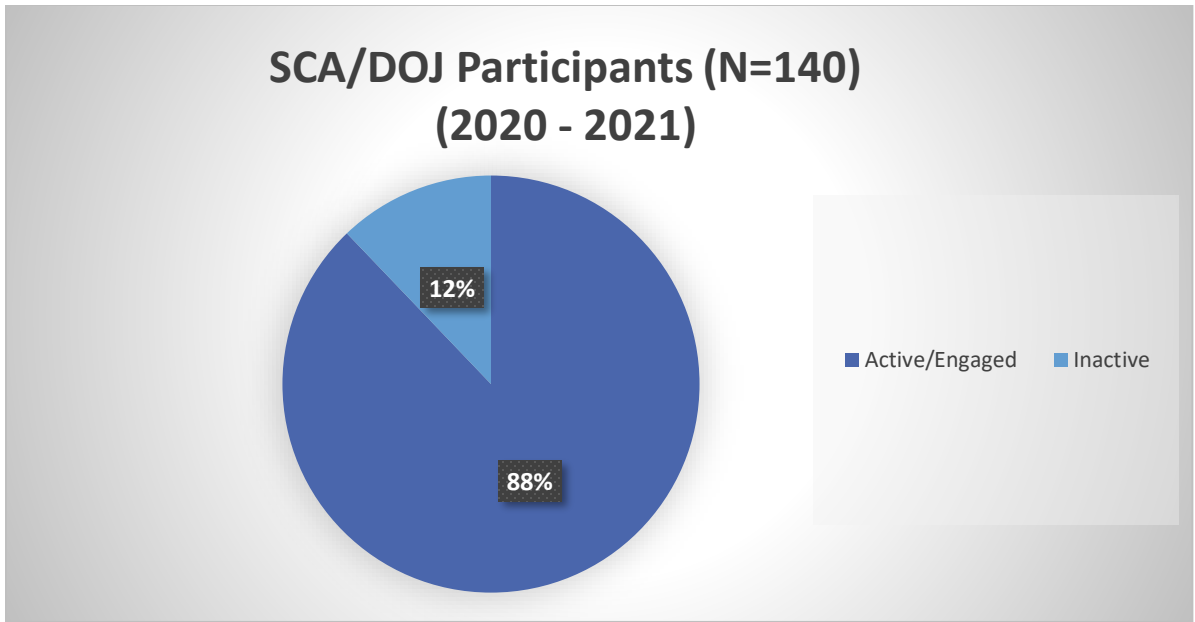
4) **Program provisions** (i.e., inclusion of mentors as well as substance use and mental health counselors) as well as a listing of referrals for collaborative service provision.

5) **Number of participants completing post-release program** requirements at the end of the first year (N=6). Again, and due primarily to COVID-19, this number is low due to the late enrollment start time for many participants.

6) **Facilitation of training to project staff including how training is directly applied to case management:** HOPE staff completed a total of 7 trainings within the reporting period and included Community Health Worker Certification, NRAS training, MRT training, programmatic and staff development training (complete listing of staff trainings noted below).

7) **The purpose and goals of the reentry program:** The overall *purpose* of this funded program is to expand HFPs established reentry program to meet the needs of individuals at medium- to high-risk to reoffend, as determined by validated criminogenic risk assessments (NRAS) and the use of evidence-based interventions and services (MRT). For a listing of SCA *goals*, please see **Chapter 3** above.

8) **Deliverables** associated with the funded project (see **Chapter 3** for a listing of deliverables).

9) **Whether or not the organization has established a formal definition of recidivism:** Recidivism will be measured based on participants' rates of reconviction leading to reincarceration. Currently, the baseline recidivism rate for the state of Nevada is 29%. This is the baseline rate used for comparative analysis. Additionally, participants will be tracked for any technical violations, reincarcerations, and re-arrests. These violations will be reported but not used as part of the measurements for tracking recidivism.
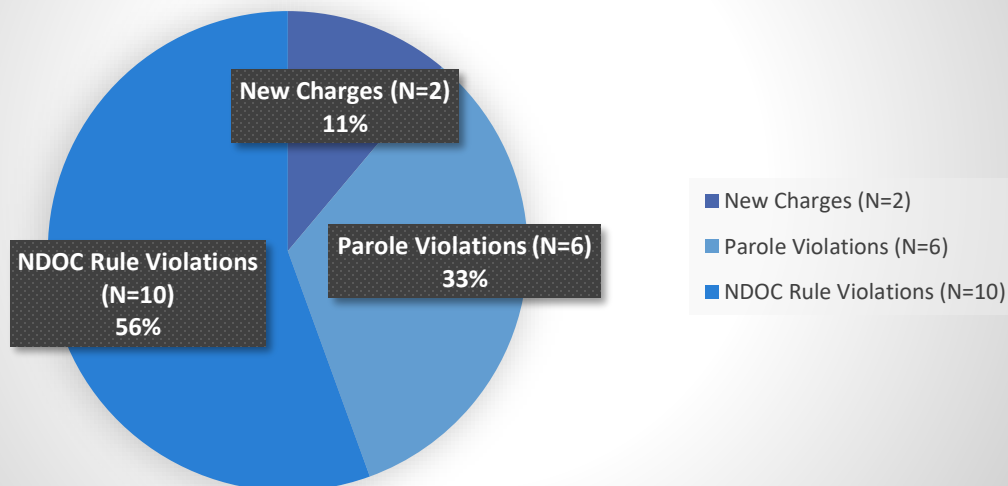
10) **How many program participants, to date, have experienced recidivism:**

- Two (N=2) individuals were reincarcerated on new charges. **Both of these clients were not convicted,** only arrested and reincarcerated;
- Six (N=6) individuals were reincarcerated on parole violations;
- Ten (N=10) individuals housed at CASA Grande Transitional Housing lost community trustee status and were sent back to a higher custody-level institution for rule violations.

For those ten clients that were previously residing at CASA Grande, they were still able to receive pre-release services from HFP while incarcerated at NDOC facilities.[2]

The vast majority of DOJ clients that returned to an incarcerated setting was due to parole technical violations and NDOC rule violations.

Reasons for Reincarceration (N=18)
(2020 - 2021)

New Charges (N=2)
11%

Parole Violations (N=6)
33%

NDOC Rule Violations
(N=10)
56%

- New Charges (N=2)
- Parole Violations (N=6)
- NDOC Rule Violations (N=10)

Therefore, and based on the organization's measurement of recidivism (see above #9), at the end of the first year (Year 1: 2020 – 2021), only 2/140 or **1.4% of all SCA/DOJ clients recidivated**. Again, these 2 clients were rearrested with a new charge but without supplemental convictions.

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[2] 18 individuals returned to an incarcerated setting in some capacity; This number is different than the 17 "no longer active" clients listed in #3 above.

Another 16 DOJ clients returned to NDOC facilities for technical and/or rule violations. These 16 clients had **no new charges and no new convictions** and represent 11.4% of clients who recidivated (6/140 = 11.4%). In total, during the first year of this evaluation, 18 clients – or roughly 12.9% of all SCA/DOJ clients - returned to an incarcerated setting.

YEAR 1: PRELIMINARY FINDINGS

Quantitative data collection is currently underway. Due to the COVID-19 pandemic, HOPE for Prisoners has experienced lower enrollment numbers which have delayed the data collection and analysis component of this program evaluation.

In addition to client data, surveys were also administered to HFP staff and included items related to demographics, length of time working at HOPE For Prisoners, total cases (e.g., active and inactive) managed, program/training sessions, and impacts due to COVID-19. The following presents preliminary findings.

HOPE For Prisoners SCA/DOJ Clients

As of July 23rd 2021, a total of 264 intake forms were completed resulting in 140 DOJ specific clients enrolled in the HFP program.

Based on a review of the numbers of participants served thus far (N=140), 123 were still engaged/active while another 17 were inactive/no longer engaged. This means that, during the first year of this evaluation 2021, 88% of SCA/DOJ clients served were still participating in the HFP program.

GENDER

The vast majority of clients identified as males (80.3% or N=110) while females represented 19.7% (or N=27) of the number of DOJ clients enrolled in the HFP program.

ETHNICITY

As many as 79.6% (or N=109) self-identified as Non-Hispanic or Non-Latino while the remaining 20.4% (or N=28) self-identified as Hispanic or Latino.

AGE

Client's age ranged widely, with the youngest being 19 years old while the oldest was 63 years old, with a mean of 37.766. Figure 1 presents the breakdown graphically by age category.

FIGURE 1: AGE CATEGORY

Age Category	Count
18-24	14
25-34	42
35-44	41
45-54	32
55-64	8
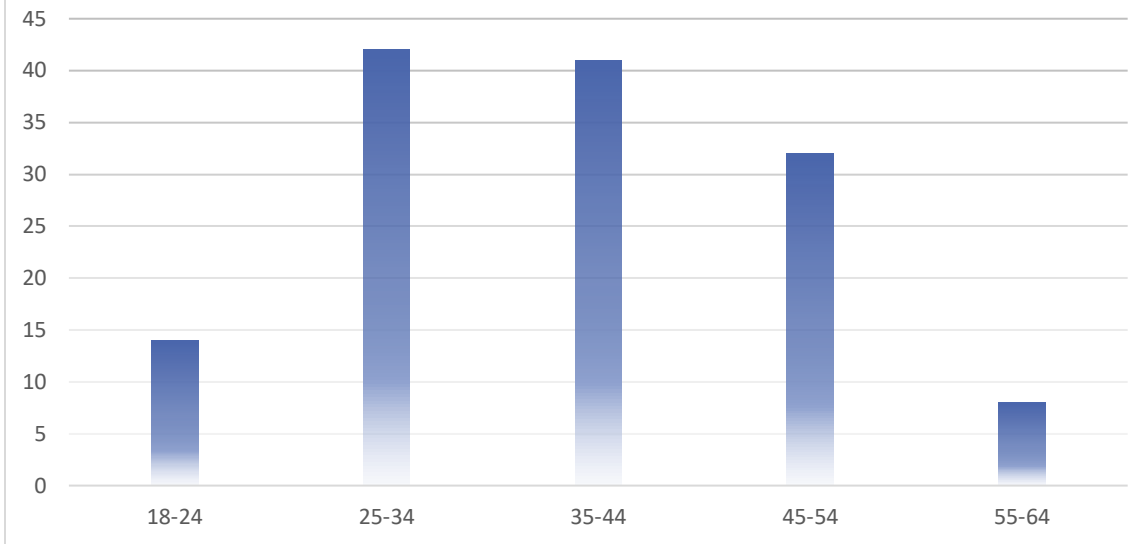
HOMELESSNESS STATUS

Approximately a quarter (21.2% or N=29) of these DOJ HFP clients indicated that they are currently homeless.

JUVENILE RECORD

Nearly half (43.8% or N=60) indicated that they had been arrested as a juvenile.

HISTORY WITH THE FOSTER CARE SYSTEM

Close to 12% (or N=16) acknowledged that they had been placed in the foster care system.

VETERAN STATUS

Two (N=2) HPF clients indicated that they are veterans of the U.S. Armed Forces.

The pandemic has had and will continue to have a profound impact on our society, affecting various aspects of everyday life and resulting in millions of deaths around the world. In the U.S., Nevada has been hit especially hard by the pandemic, having one of the highest positivity and hospitalization rate in the country.
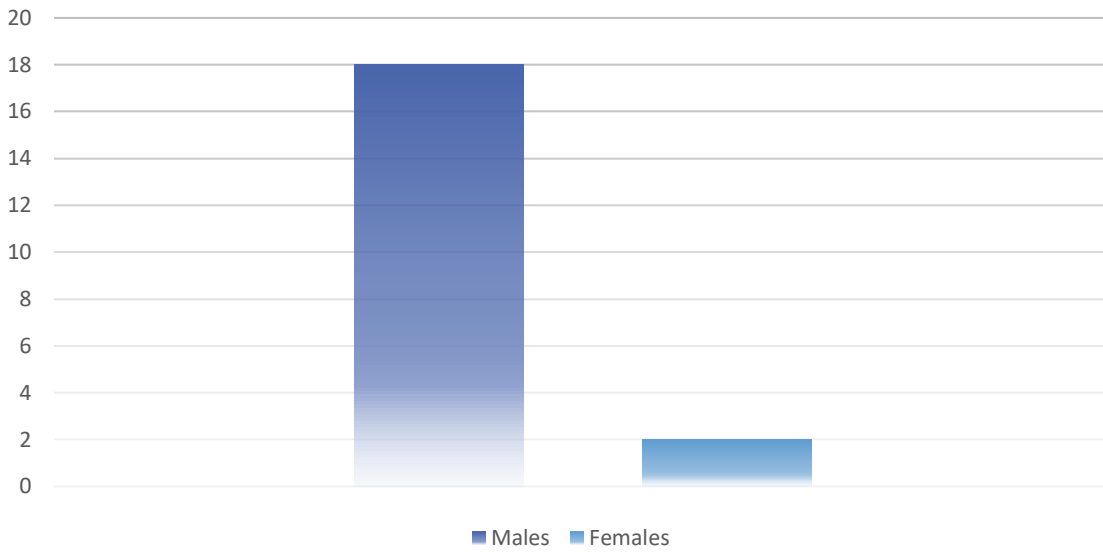
Amongst those most vulnerable to contracting COVID-19 are justice-involved populations due to current overcrowding conditions in correctional settings (Bhaskar et al., 2020). To date, there have been over 400,000 positive cases registered within correctional facilities across the country and a total of 2,536 incarcerated deaths related to the COVID-19 pandemic (The COVID Prison Project, 2021).

In Nevada, there have been a total of 4,586 positive cases registered within correctional settings and a total 54 incarcerated deaths, not including staff deaths (The COVID Prison Project, 2021). Given these realities, it is essential to assess if/ how COVID-19 has impacted the lives of those individuals returning back into the community as well as identifying what resources and services they might need during this time. To this end, the research team and HOPE for Prisoners have decided to incorporate a series of COVID-19 related questions within their intake forms. These include:

1. Have you been impacted due to the COVID-19 pandemic?
2. If yes, can you please provide a displacement date?
3. Please select displacement impact type.
4. Are you receiving Unemployment Insurance Benefits (UIB) or Pandemic Unemployment Assistance (PUA)?

A summary of these findings is presented below and is based on the number of clients currently enrolled in the HFP program. Of the 93 clients who provided an answer to question #1, approximately a quarter (N=20 or 21.5%) indicated that they had been impacted due to the COVID-19 pandemic. **Figure 2** presents the impact of COVID-19 by gender; **Figure 3** presents the breakdown by age group; while **Figure 4** present the breakdown by ethnicity.

FIGURE 2: COVID-19 IMPACT BY GENDER

Males   Females

FIGURE 3: COVID-19 IMPACT BY AGE GROUP

FIGURE 4: COVID-19 IMPACT BY ETHNICITY

A bar chart titled "FIGURE 4: COVID-19 IMPACT BY ETHNICITY" with a y-axis scaled from 0 to 16. The "Non-Hispanic or Non-Latino" bar reaches 15, and the "Hispanic or Latino" bar reaches 5.
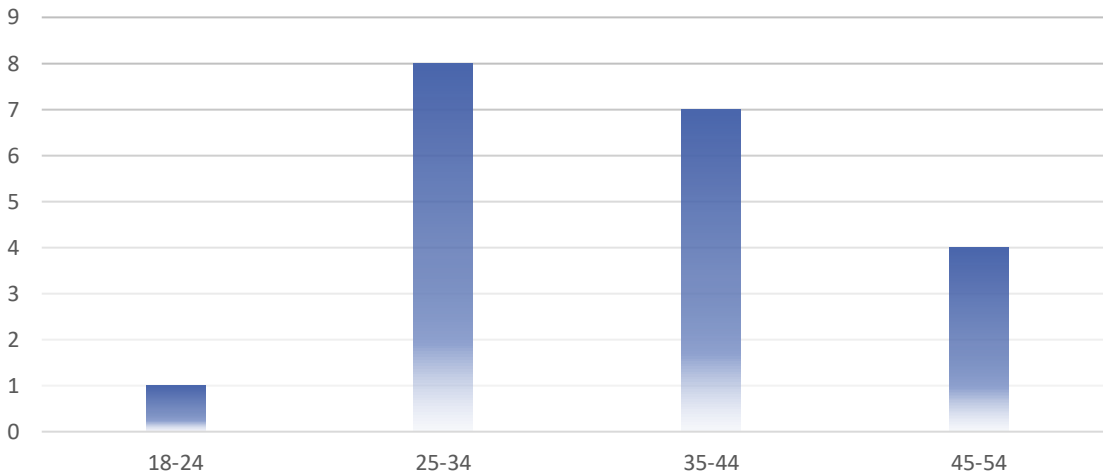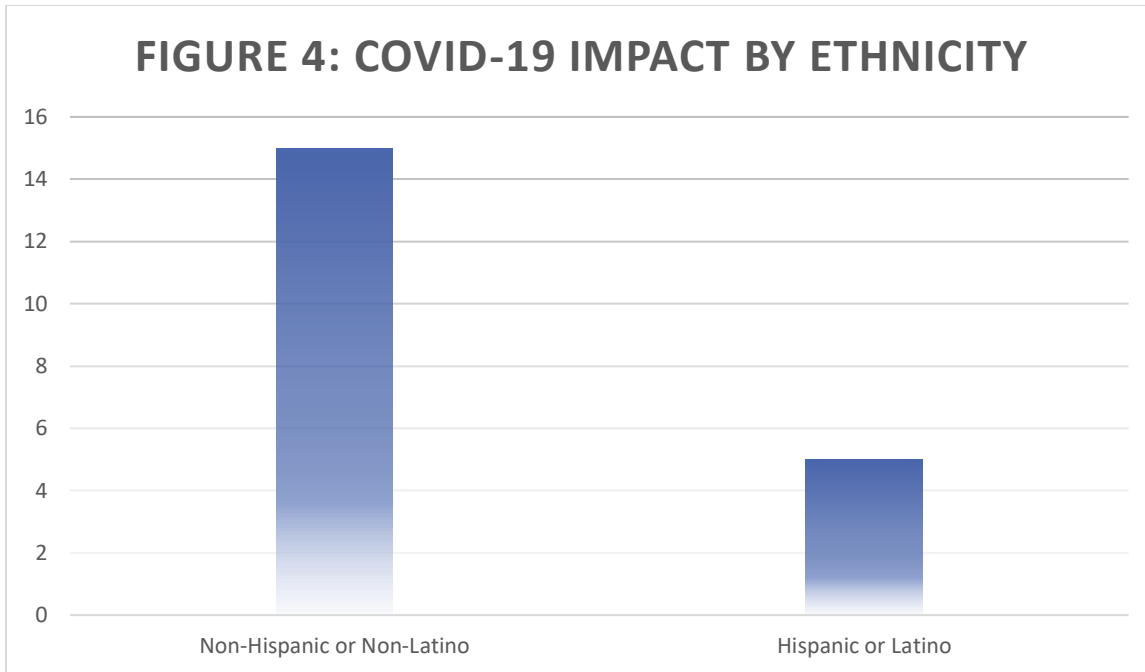
When asked to indicate the type of displacement, clients revealed that their "employment" (N=12) and "health" (N=4) had been affected as a result of the pandemic. The earliest displacement date indicated was March 16th, 2020 while the most recent was December 28, 2020. Two clients indicated that they are currently receiving Pandemic Unemployment Assistance (PUA).

EXPERIENCES WITH RECIDIVISM AND REINCARCERATION

At the end of the first year (Year 1: 2020 – 2021), only 1.4% of all SCA/DOJ clients recidivated.
Two (N=2) individuals were reincarcerated on new charges. Both of these clients were not convicted, only arrested and reincarcerated.

Another 16 DOJ clients returned to NDOC facilities for technical and/or rule violations.
Specifically, six (N=6) individuals were reincarcerated on parole technical violations (6/140 = 4.3%) and another ten (N=10) individuals residing at NDOC's CASA Grande Transitional Housing lost community trustee status and were sent back to a higher custody-level institution for rule violations (10/140 = 7.1%). For those ten clients that were previously residing at CASA Grande, they were still able to receive pre-release services from HFP while re-incarcerated at NDOC facilities.

In total, during the first year of this evaluation, 18 clients – or roughly 12.9% of all SCA/DOJ clients - returned to an incarcerated setting.

HOPE For Prisoners Staff

For this first-year program evaluation, a total of 6 HFP staff were surveyed. The following includes descriptive information as well as the many trainings, challenges, and successes accomplished during the first year of the SCA/DOJ grand. a

GENDER

All six HFP staff surveyed identified as female.

AGE

HFP staff's age ranged widely, with the youngest being 25 years old while the oldest was 50 years old, with a mean of 38.33.

MARITAL STATUS

Two of the HFP staff surveyed identified as single while the remaining reported being either in a relationship and/or married.

ETHNICITY

Staff members at HFP are racially diverse, with 3 identifying as White; 1 identifying as having a Hispanic, Latino, or Spanish background, while the remaining self-identified as Black.

MULTI-LINGUAL

Half of the respondents reported speaking two or more languages (e.g., Spanish, Samoan, and/or Creole).

EDUCATION

HFP staff have a diverse educational background as well, with 3 completing a graduate degree while the remaining had some college experience or a high school diploma.
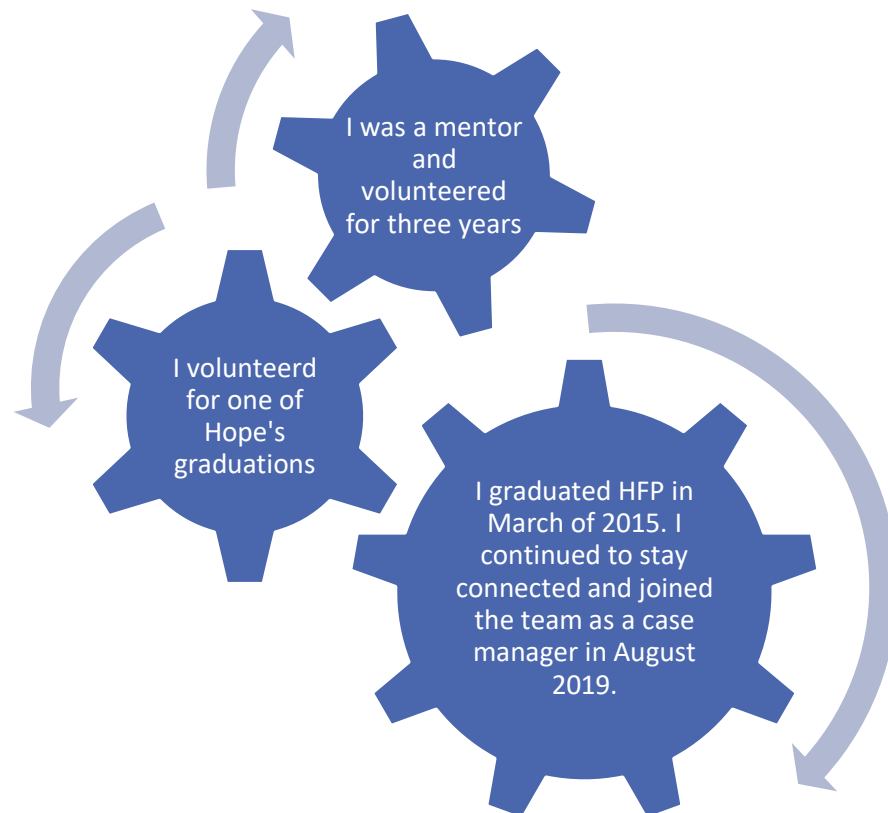
Prior to joining HFP, many staff members served in various capacities including as a mentor, volunteer, researcher and alumni. The following summarizes participant's responses:

Several started working with HOPE For Prisoners in a different capacity. When asked how long they have been involved with the HFP program, time (in months) ranged between a little over a year to well over 5 years (average = 43 months or around three and a half years of total involvement). Importantly, these 6 staff members have prior experience with the program as a volunteer (N=5), a mentor (N=4), a teacher/trainer (N=2), and as prior client's that successfully completed the 18-month HFP program (N=2).

When asked to list how long they have been a program staff member at HOPE For Prisoners, time, in months, ranged from a little over a year to three and a half years (average = 23 months or a little less than 2 years).

Figure 5: Staff Involvement with HOPE For Prisoners

I was a mentor and volunteered for three years

I volunteerd for one of Hope's graduations

I graduated HFP in March of 2015. I continued to stay connected and joined the team as a case manager in August 2019.

JUSTICE SYSTEM INVOVEMENT

Half of those surveyed acknowledged that their involvement with the criminal justice system has shaped the way they interact with clients and ultimately, influenced their case managing styles. For example, one expressed "*As a [title], I reflect on my experiences and what I needed and implement it into my case management*" with clients. Another one echoed a similar sentiment:

"My past experience with the CRJ system has shaped how I case manage and interact with clients and staff since I had to navigate the system pre- and post-release. It has given me a better understanding of the challenges, fear, and uncertainty our clients experience on a daily basis. Because I am equipped with the knowledge, I am able to problem solve and relate to client challenges differently."

Over the past year, even with COVID-19, all staff members were involved in administrative and programmatic training courses. Across all 6 program staff members, they completed an impressive 80 training seminars and/or certificate courses (average = 13.3 completed training sessions per staff member).
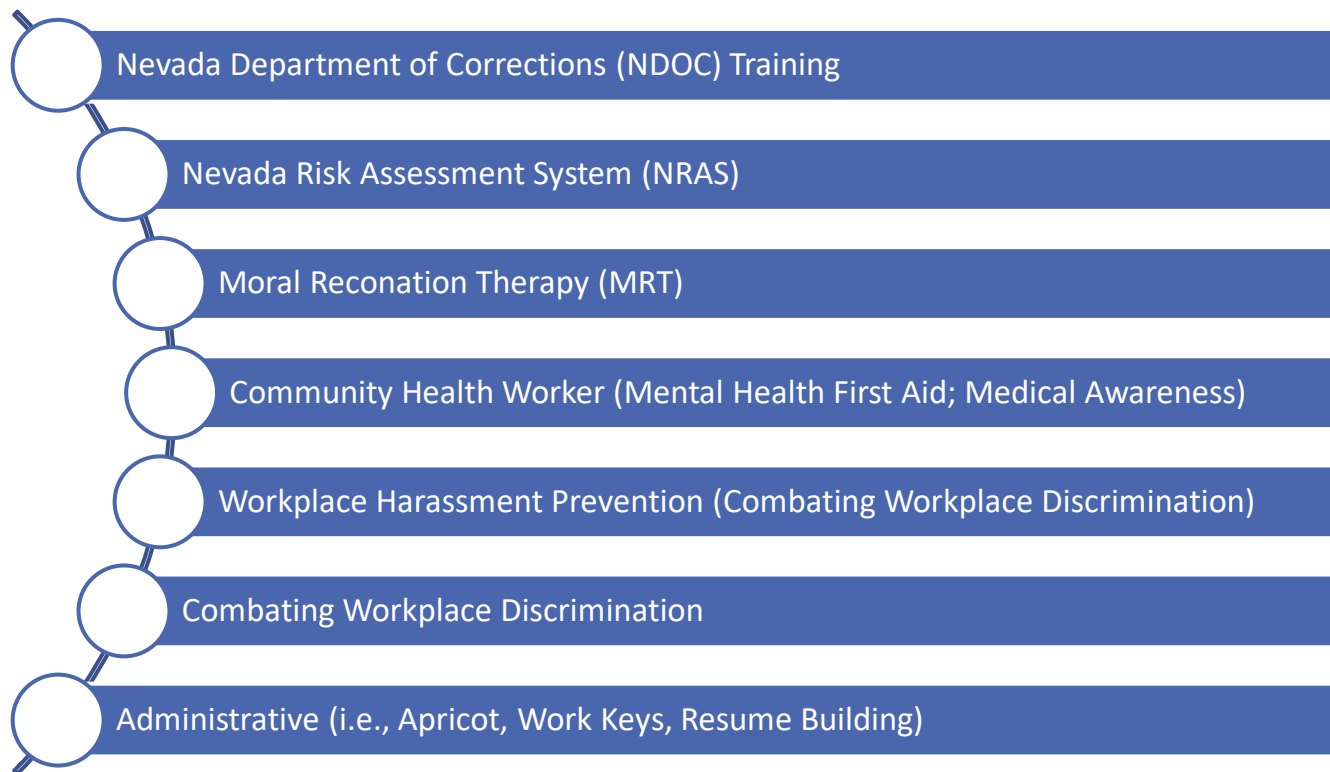
Types of trainings completed by **all staff** include MRT, Workplace Harassment Prevention, Combating Workplace Discrimination, and Harassment and Violence Prevention. Administrative training sessions having to do with learning more about HFP data reporting system also included an Apricot Training Seminar and a Work Keys Training Seminar.

During 2020 – 2021, and in order of frequency, other trainings completed by programming staff include:

- MRT (N=6)
- Workplace Harassment Prevention (N=6)
- Combating Workplace Discrimination (N=6)
- Harassment and Violence Prevention (N=6)
- Resume Building (N=6)
- Apricot Training (N=6)
- Work Keys Training (N=6)
- NRAS Assessment and Scoring (N=4)
- Financial Literacy (N=4)
- Community Health Worker (CHW) (N=4)
- Mental Health First Aid (N=4)
- Self-Care Webinar (N=4)
- Medicaid Awareness (N=4)
- NDOC Volunteer Training (N=3)
- Homelessness and Substance Abuse Use and Disorder (N=2)
- Suicide Prevention (N=2)

- Task Management (N=2)
- Substance Abuse Training (N=1)
- Behavioral Health Emergencies (N=1)
- Aegis Leadership Training (N=1)
- Mentor Training (N=1)
- Personal Development (N=1)

Figure 6: Types of Trainings Completed by HFP Staff Members

Nevada Department of Corrections (NDOC) Training

Nevada Risk Assessment System (NRAS)

Moral Reconation Therapy (MRT)

Community Health Worker (Mental Health First Aid; Medical Awareness)

Workplace Harassment Prevention (Combating Workplace Discrimination)

Combating Workplace Discrimination

Administrative (i.e., Apricot, Work Keys, Resume Building)

AVERAGE NUMBER OF CASELOADS

For the purpose of this longer year 1 evaluation report, the survey also asked how long, in months, have they managed DOJ HFP client caseloads. Primarily due to setbacks with COVID-19, the amount of time managing these caseloads ranged from one programming staff member managing DOJ cases for 3 months and two staff members managing DOJ cases for 20 months. Across all 6 programming staff, the average length of time working on DOJ cases was 10.5 months. Please note that one (1) programming staff member is not included in the below table because they oversee all active DOJ client cases.

Perhaps due to this variety in managing DOJ caseloads, the amount of active HFP cases managed (between 33 and 140; average of 53) as well as DOJ specific caseloads (between 10 and 57; average of

25) varied. This means that, per month - and depending on the month - all five (5) HFP programming staff members oversee around 123 active DOJ client cases (average of 25 per staff member) with approximately 25 inactive DOJ client cases (average of 5 per staff member) where "inactive" means that the client has not made contact with their HFP programming staff member for over 90 days (See **Table 2,** below). Importantly, all case managers follow up on their own "inactive" clients weekly. Some HFP clients that might have been "inactive" during one month (usually due to work related scheduling conflicts) become "active" again the next month.

This is a snapshot of cases management at one point in time during the Year 1 evaluation.

Table 2: DOJ Client Case Management Per HFP Staff			
Total Active	Total DOJ Active Only	DOJ Active Per Week/Month	DOJ Inactive Per Week/Month
37	14	9/14	0/1
57	57	57/57	15/15
33	14	6.5/14	7/7
140	28	2.5/3.5	1/2
33	10	8.5/33	0/0
Average of 267/5 = 53.4	Average of 123/4 = 24.6	Week Average 83.5/5 = 16.7 Month Average 121.5/5 = 24.3	Week Average 23/5 = 4.6 Month Average 25/5 = 5

Based on this information, and in combining all active cases managed, HFP programming staff oversee roughly 267 active HFP cases: This equates to an average of 53 active cases per month per programming staff person. Roughly half (123/267 or 46%) of these cases are dedicated to SCA/DOJ HFP clients. Again, in addition to the above information, the lead programming staff manager also consistently oversees all programming staff cases as they manage HFP clients.

Please note: The total SCA/DOJ client caseload represented here included 123 HFP clients. Information herein was collected from all programming staff via a survey and follow-up interviews conducted in July – September of 2021. During the start of September 2021, there were another 17 clients that enrolled the following week. These clients were enrolled in the SCA/DOJ program and brought the total enrollment number up to 140 for the first year of the evaluation period.

Some of survey questions assessed whether HFP staff had been impacted personally by the pandemic, the level of impact (e.g., no impact, minor, neutral, moderate, major) they experienced and whether their cases/clients were affected as well.

When asked if they were "personally impacted by COVID-19" all programming staff persons responded affirmatively, "Yes", while only one answered "No". The level of impact ranged from Minor (N=2), Neutral (N=1), and Major (N=3). For example, those that selected "Minor" impacts noted that family members tested positive for COVID and, thankfully, did not become that sick. Also, one program staff reflected on the minor impacts suggesting that she did not realize how mentally and emotionally exhausting it would be to manage clients during this unique time. The program staff that said that her COVID impacts were "Neutral" mentioned that she was under additional stress because she lived with an immunocompromised roommate and as a result, she was diagnosed with anxiety. This sentiment was echoed by yet another program staff who expressed that their mental health had been affected by the pandemic: *"I didn't realize how COVID impacted me emotionally and mentally. I was trying to be supportive for my clients and neglected my own mental health."*

"I didn't realize how COVID impacted me emotionally and mentally. I was trying to be supportive for my clients and neglected my own mental health."

Those that checked "Major" impacts explained that they caught COVID-19 while working; one explained that her husband lost his job because of COVID-19 employment cut-backs/closures; all expressed that they knew of someone – either a close family member or friend – that tested positive for COVID-19 and had serious symptoms.

HFP staff were also asked to describe the biggest DOJ client impact they experienced due to COVID-19. When asked to reflect on their DOJ clients and whether or not COVID was an impact for them, all responded "Yes" with the level of impact, again, ranging from Minor (N=2), to Moderate (N=1), and Major (N=3). For those that selected "Minor", they mentioned that client's had siblings that tested positive for COVID and were "okay" or that the only impacts were housing availability and job security – client experiences that are already an issue with or without COVID-19. Those that chose "Moderate" mentioned how DOJ clients were impacted by the mandatory vaccination requests outlined by NDOC and that they helped advise them during the requirements and support them in their concerns.

Several program staff that selected "Major" noted that they had clients who lost family members due to COVID-19 – a mother, and a grandmother. Additionally, everyone brought up the stark reality that clients were having a difficult time accessing trainings, programming, and services during the pandemic. Since all classes and programming were halted during the pandemic, clients struggled with their reentry plans pre- and post-release. Once HFP staff were able to enter the facilities and resume working with clients, there was an outbreak within the facility. Everyone had to be quarantined for over a month and classes and case management was halted. Clients had to wait for release to come to HFP for services.

One programming staff member wrote that, "*no matter the situation, everyone is still human and the importance of community partnerships is key.*"

"Clients were unable to utilize services both in the community and pre-release. All classes and programming were halted during the pandemic. Once we were able to enter the facilities and resume working with clients, there was an outbreak within the facility, everyone had to be quarantined for over a month and classes and case management was halted. Clients had to wait for release to come to HFP for services."

These other issues stemming from the pandemic - unemployment challenges, housing instability, as well as classes and training programs being paused during the lockdown – was mentioned by all staff members as concerns. One program staff expressed: *"Clients were unable to utilize services both in the community and pre-release. All classes and programming were halted during the pandemic. Once we were able to enter the facilities and resume working with clients, there was an outbreak within a facility, everyone had to be quarantined for over a month and classes and case management was halted. Clients had to wait for release to come to HFP for services."*

Figure 7: Biggest HFP staff and DOJ client impacts as it relates to COVID-19

Even with these personal and client-specific impacts and concerns, all HFP program staff members mentioned that they love their job and the work that they do. One noted, *"My mantra is do for the client what I would want someone to do for me ... and then some more!"* This sentiment of going above and beyond for clients – even during a pandemic - is commonplace for all programming staff members at HOPE for Prisoners. Additionally, a few liked that they could connect their academic training/education to their work/case management: *"to make sure that we are implementing the data properly"* and how their job as a programming case manager has also helped them to *"influence how research"* is embraced within the organization and utilized throughout their managing style.

Indeed, HFP program staff revealed that they feel like this is the *"work they are intended to do"* and that they *"have been placed at HFP to continue (their) journey to help others have a better life;"* while another expressed, *"I want to help this population have a smooth transition back in the community".* Every single program staff mentioned *"I love what I do!"* and that this love is connected to having a *"passion for helping"* those that are reentering society post-incarceration.

CHAPTER 5. FOCUS GROUPS WITH HFP STAFF

For this program evaluation, a total of three focus groups were scheduled with 6 programming staff overseeing DOJ caseloads. Each focus group occurred on Fridays during regularly scheduled staff meetings. These focus groups ran, on average, for two hours. Questions asked during focus groups resulted in conversations about HFP goals, how programming staff understand and case plan for DOJ client's needs and criminogenic risks, strengths of the organization, barriers experienced either due to access to services and/or COVID-19, and ideas about future goals and improvements for the future.

Focus Group #1: Goals, Strengths, Limitations, and Solutions

To begin, all programming staff articulated that the main goals associated with HOPE For Prisoners included providing holistic care and case management services for clients, providing them with resources for successful reentry experiences, to reduce risks associated with recidivism, and to encourage pro-social family reunification. Long-term goals included securing grants and other funding revenue so that the non-profit can survive, creating a national model for reentry, and building on previously successful community collaboration efforts with similar organizations. For example, one explained: *"I would love to see more community involvement where, every once in a while, we have an opportunity to be the boots on the ground, doing the work. But, just in general, to know that we - as an organization - can be the number one resource for people… like, you see us in the community advocating, doing cleanups, just making our presence known… so that people see us not just on the reentry side but within the larger community making an impact."*

For these program staff, envisioning the future of HFP equated to fostering a successful national model for reentry while also being known as an impactful non-profit organization that is connected to the larger community locally.

Throughout these goal-oriented conversations, all programming staff members also discussed barriers their clients experience daily. The number one barrier was equated to client's finding and securing affordable housing. Comments like *"Resources like housing is the number one barrier"* were common and one program staff further articulated that *"when they exit prison, they come home, and a lot of them do not have a home to go to so they find themselves reverting back".* Lack of housing as a barrier to successful reentry was also connected to securing employment, that *"housing and unemployment are both connected"* and that, not having either results in clients *"reverting back to a criminal mentality… doing what they are used to, as survival mode".*

In thinking about how the organization and the work that they do helps to facilitate these goals, immediate examples included *"case planning with clients"* and *"making sure that the HFP model is very clear".* Following-up on the importance of transparency, program staff mentioned that *"everyone needs to be on the same page"* and that the *"workshops, mentorship program, volunteer activities, and weekly meetings are helpful"* in providing clear and consistent services and case planning for clients. Additionally, *"providing counseling, substance abuse therapy, and leadership development"* opportunities were also articulated as successful ways to help clients accomplish their reentry goals and, in effect, reduce recidivism.

When asked if there were any barriers and/or limitations to successfully accomplishing these goals, one program staff explained the compounding effects clients face – of being previously incarcerated, barriers associated with reentry, and then being actively involved in HFP programming: *"Walking the whole 18-months with clients is very challenging because there is so much going on behind closed doors with them…You know, sometimes it's challenging to get them to engage because they realize, like after a workshop, that the work they have to put in is a lot harder than what they expected. Because of all the barriers they are experiencing too. So, they fall off or they find it's really hard to do the work because a lot of them have been behind bars for so many years that they have to learn how to walk again. They don't know how to utilize the computers or the phones, and stuff like that."*

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In addition to these issues, program staff also talked about how the overall availability and scheduling of classes also impacted client's engagement. For example, if a client's case plan is to successfully complete the financial literacy course, but one is not offered on a regular basis, the client becomes confused and frustrated: *"We lose people because we are waiting on these classes that were required and a part of their case planning. But, sometimes, it's not happening quick enough. It's just too much for them".*

A recommended solve for this common issue was also discussed and was connected to long-term planning. Scheduling classes and training sessions so that they are offered routinely and consistently would help program staff, and clients, plan to successfully complete program requirements. This way, program staff and clients know what classes to expect every month, two months, etc. In thinking about their client's experiences, all program staff acknowledged that – by the time the client starts working, and depending on their work schedule, it becomes more difficult for them to attend classes.

In agreement, one program staff person said, *"Exactly! Because, for them, it's like survival. It's like – 'OMG! I got a job! I gotta work work work work!"* And then, sometimes, clients become comfortable with their job and their work schedule and it's harder for program staff to *"pull them out of that to get the assistance they need, especially when training is offered during their work schedule… because, for them, it's like – Okay, but how long is this going to be? What am I going to do to make sure I feed my family?"*

All program staff agreed that being able to *"get them at the beginning, when we have everything in place, with a schedule, would mean we would have more engagement with clients".* Thus, being able to provide clients with a long-term schedule of classes would help make sure that their engagement remains productive and positive. Long-term planning for 3- 6- 12- and 18- months of classes, trainings, and services is an admirable solution; one that would encourage and support the overarching goals of the program.

Towards the ending of this first focus group, program staff kept coming back to conversations about what *"client success should look like"* and how this success has been impacted by COVID-19. One reflected: *"When I was involved in the program, there were book clubs, there was a women's therapy group, they were constantly referring out, there was just so much going on and at any time, I could just pop in and be like, 'What's going on this week?' There was always something to sign up for and do."* Before the pandemic, there were regularly occurring programs, trainings, classes, speakers, clubs, etc.,. And, this range of scheduled activities helped contribute to a sense of community that, for all program staff s, are what HFP clients need the most.

Every staff member mentioned how HFP is not a *"cookie-cutter"* program and that clients *"take away"* and benefit from different trainings, classes, and opportunities offered. For example, one mentioned conversations she has had with clients about what has impacted them the most: *"I know a lot of my clients say different things like – it was their mentor. Or – it was the trainings. It was the workshop. There are so many things that one person could like. Or not like… But maybe there's something we're not offering?"* Gauging the interest and needs of clients and utilizing those interests/needs for future programming could be useful in building up a sense of community post- COVID-19.

In talking about the scheduled and routine classes prior to COVID-19, what HFP is currently offering, and hopes for future programming, all program staff mentioned that client engagement levels were not as high as in prior years before the pandemic. Program staff mentioned that, *"program success"* is also about making sure that they have *"good mentors"* and that the *"graduates keep coming back".* Additionally, program staff talked about how they *"don't see many alumni sticking around after the 18-months".* These musing lead to the idea that HFP needs to *"do something for clients who complete the 18-month program".*

Currently, HOPE For Prisoners clients who successfully complete the initial week-long leadership development workshop attend a graduation to cumulate this important milestone in their lives. These "hopefuls" graduate and receive certificates and it is assumed that they will continue on with the 18-month program. To be clear: The vast majority of these hopeful graduates do continue to participate in the 18-month program. Yet, for those hopefuls that do complete the 18-month program, currently, there is no cumulating event to celebrate this serious achievement.

One staff member stated, *"The person that did the week-long workshop and never came to case management got the same thing (a certificate) as the person who struggled and got calls from us to stay connected for 18-months… I can come in, get my certificate, get my job, disappear, and still go in the community and say, 'I'm a HOPE For Prisoner's Graduate'. That's fine but where is the motivation to really stick it out until the end?"* In thinking about these leadership development graduation ceremonies, another added, *"It's self-motivation. It's priceless what they are getting. But, how great would it be for them to see graduates who successfully completed the 18-month program?"*

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All programming staff agreed that HOPE For Prisoners should have a way to highlight the clients that complete the 18-month program in its entirety. This could be a joint celebration during the leadership development graduations – or a solo graduation ceremony for those HFP clients completing the 18-month program. These recognitions could encourage hopefuls graduating from the initial week-long leadership development program to meet successful alumni, hear their stories, and envision themselves also completing the 18-month program. Importantly to note, all programming staff involved in this evaluation discussed how they *"do celebratory things for their own clients"* who finish the 18-month program.

At the end of this focus group, after everything that was discussed, these programming managers were still thinking about how to *"do more for",* acknowledge, and uplift their clients.

Focus Group #2: Risk, Recidivism, and Connections to Client Needs

This second focus group concentrated on how HFP staff understand their client's risk to recidivate, as well as how they perceive recidivism in general. Connected to risk and recidivism were conversations of how programming staff persons identify and plan for client's needs.

Immediately at the start of this focus group, everyone discussed the difference between re-offending via *"getting a new charge"* compared to a technical violation due to issues with parole (or probation). Everyone agreed that recidivism is when a client is convicted of a new crime. Not for, say *"if you're out past curfew 10 minutes",* as one program staff put it. HFP program staff have to navigate clients' actual risk of re-offending and getting a new charge as well as their risk of violating the rules and administrative procedures that govern them due to their parole status. One program staff member mentioned, *"I think it all depends on the PO (Parole Officer) too. You know. If they're going to violate the client for curfew or anything like that. I feel like, instead of putting them (the client) back in prison - or sending them back to the yard or whatever the case may be - it's a, it's a, [pause] it should be like a conversation or a warning. Not the yard. So, yeah, recidivism, to me, is catching a new charge."*

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In discussing how difficult recidivism is to define and case plan for, program staff contemplated whether or not recidivism should include a new charge *or* a new conviction. Operationally, and for the purposes of case management tracking of *all* HFP clients, programming staff have agreed that they will track parole revocations, technical violations, new charges as well as new convictions. Yet, for these staff members, they have all agreed that recidivism is a new conviction.

In thinking through whether or not recidivism should be based on a new charge or a new conviction, one program staff member shared a helpful example of a client's recent experience: *"I think it should be a new conviction because, a lot of times, the individual is charged for something – let's say something like a burglary. So, an allegation of a burglary was made and then they're charged. They're housed at CCDC and that triggers a parole violation because there was a charge. But, a lot of times, the charges get dropped. But then, the parole violation has already - you know - been triggered. So they end up in NDOC."* Overall, all program staff agreed that recidivism should be a new conviction. Sometimes these new convictions are connected to a new charge; sometimes they are not.

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Additionally, sometimes these new convictions are connected to client's "old behavior"; sometimes not. In thinking through the connection between a client's "old behavior" and risk of recidivism, program staff also articulated that – sometimes – clients do resort to old behavior and commit a new crime but that doesn't always mean that they will be arrested, charged, and receive a new conviction. In fact, all staff members discussed how, as practitioners, they can figure out when their clients are *"going back to their old behavior because there's less contact"* with them or with the program. In agreement, another mentioned, *"Yes, and they're not as engaged."*

The importance in tracking active and inactive clients, as well as their level of participation and engagement, also turned in to a healthy examination of case management styles. For example, some

programming staff members have clients that are not engaged because, *"They just don't want to be involved with the program anymore because it reminds them of where they were"* or *"They don't want to be connected with HOPE For Prisoners anymore because they're doing so well and it reminds them of their past"*. The commonality for all staff members is that, if they do not hear from their client, they check on them and they check on them weekly. They also check with the client's Parole Officer, NDOC, CCDC, and justice websites. After 90 days, if they do not hear from/get in touch with their client, discharge is initiated and the client is discharged from the HFP program.

These conversations were important in helping these employees realize the difficulty in defining and/or measuring recidivism and whether or not risk is actually associated with engagement in programmatic services offered. Not only are HFP programming staff committed to continuing to track client's parole revocations, technical violations, new charges, and new convictions but they are also committed to being cognizant of these experiences as they all impact their client's well-being and reentry success. One staff member explained, *"We should be mindful of all of these pockets, even if we don't count them ultimately as recidivism. If we are aware of these situations, then we can help prevent the ultimate end… which is a new crime and reincarceration"*

Conversations about risk were then connected to these aforementioned deliberations about recidivism. HFP staff have been incorporating and tracking clients' prior NRAS scores from NDOC as well as their current NRAS scores calculated at HFP intake. The majority of HFP programming staff are trained in NRAS administration and scoring and, importantly, NRAS is administers at the point of HFP enrollment. The NRAS is also administered at the completion of the program to assess clients' scores and risk levels as they complete the post-release portion of paperwork and exit the program. Clients NRAS scores are *"the most helpful in how we decide what level of risk they are and what program they'll go to"*. NRAS scores are also important as "*they provide a baseline from which case managers are able to build case plans addressing specific needs depending on risks. These scores also allow for staff to see if the case plan, services, and resources provided had an effect in reducing a client's risk levels and overall recidivism."*

Staff members who participated in this evaluation were quick to mention top risk factors that they look for when they are meeting a client for the first time; these are not always adequately captured within the NRAS. Top examples discussed included, *"a client that's homeless"*, *"not ready to give up substance use"*, *"someone who maybe in a volatile relationship"*, followed with *"no family support"*, and *"client's that come in and don't have any education at all"*. Overall, though, the top risk factor mentioned was homelessness.

Then, personal motivations of the client were also discussed as being associated with their risk to re-offend. One mentioned, *"For me, one of the biggest things that's a trigger to me is the client's motivation for change."* All staff participants agreed with this statement and mentioned that, *"If they're not motivated to change, then nothing else matters"*.

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In thinking about motivation for change, programming staff connected this to a client's feeling of inclusion. One mentioned, *"We look for motivation for change. But, another thing that's really important is support. We look a lot to family support, but I think community support or their ability to feel like they're coming home is important… They need to feel like they're coming home to a community or a society that's going to accept them despite what they've done. Sometimes they don't feel comfortable in a community that they're in and then that causes them to isolate and – if you don't have ties to a community, you don't care. If you're not motivated, you don't care. And then all that spirals."*

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Notably, programming staff persons realized that this "motivation for change" and its connections to a client's feelings of comfort coming home as well as the type/amount of community support they receive are not factors captured in the NRAS risk assessment scale.

Everyone agreed that, besides the risks scored on the NRAS - which are primarily related to housing, employment, and financial stability - *"One of the major things is that emotional connection – the feeling that you're coming back to a community and whether or not you feel supported in that community"*.

Focus Group #3: SCA Year 1 Programming, Successes, and Barriers

The third and final focus group for the Year 1 Evaluation focused primarily on HOPE For Prisoners successes during the pandemic as well as DOJ client successes. In articulating these organizational and client successes, conversations about *"the biggest barriers"* were also discussed as well as ways that HFP staff *"troubleshooted"*, *"problem solved"*, and *"pivoted"* whenever there was a setback due to COVID. Importantly, when asked what the "biggest barriers" were for 2020, participants mentioned organizational and client specific issues.

For example, several immediately responded with stories about how *"clients would call and say someone in my family or someone close to me tested positive. So, if we had meetings set up, those were canceled and then they would have to reschedule for 2 weeks later"*. In agreement, another programming staff member added, *"or family members came in contact with somebody that tested positive so then they needed to reschedule appointments."*

In addition to COVID-19 specific worries (i.e., testing positive, family testing positive, or coming in contact with someone who tested positive), the other top barrier articulated was issues with unemployment: *"I would have to say that employment was a huge barrier."* For several clients recently released during COVID, there were no jobs to apply for and/or obtain. Additionally, many HFP clients

who were working also faced unemployment strains. One shared a DOJ client's story: *"Unemployment was such a hassle. (Clients) trying to do everything they had to do to submit the correct paperwork to get it approved. It was so time consuming for them. Even if they lost their jobs and only worked for those last few months, unemployment was such a hassle on top of everything else."*

For those hopefuls that were successfully employed before COVID, their unemployment issues were also just as taxing. For instance, one mentioned, *"One of the biggest hurdles we saw was, most of our clients were working the hospitality industry and they have been there for a period of time. Or, some of them recently got their jobs. So, when they lost their jobs, it was hard to get them back working in some other field because all the options were limited"* [due to COVID restrictions].

Another staff participant reflected on examples of employed clients that lost their job: *"Just the fact that they lost their whole livelihood. It was so hard. So how are they going to make it now? Umm using government assistance? That's even more paperwork and issues."* Undeniably, many HFP clients that were gainfully employed did not meet the qualifications for government assistance during the pandemic. As one employee explained, *"Some of them were not able to qualify for unemployment because they did not have their four quarters completed. So, they didn't meet the criteria for assistance."*

Even though staff were working full-time from home for a few months, programming staff worked with clients throughout the pandemic and helped them navigate these unemployment realities. They offered clients immediate resources to get by. These included clothing and food because, *"some of them (clients) did not have government assistance. So, it was trying to provide access to the food pantry or other places where they can go to get that resource."* Another followed this comment and explained that it was like, *"now, not only did they not have a job, but they don't have food stamps to support themselves, to move forward for that month or whatever the case may be"*.

Eventually these staff members were able to help clients apply for federal Pandemic Unemployment Assistance (PUA) funds. But, again, due to the realities of working with community members reentering post-incarceration, there were setbacks in applying for PUA money. For example, several programming staff members talked about *"the challenge with PUA was that they were asking for so many things. Your documentation. Well, most clients don't have a social. They don't have an ID."*

Another continued, *"It [applying for PUA] became problematic because they were unable to upload those documents to the system. So, they were being denied. Social Security offices were not open. The DMV wasn't opened. So, they were being asked for all of these things that the client has no way of getting. It didn't matter how hard we tried. That was one of the biggest challenges."*

Moreover, the vast majority of clients are not *"tech savvy"* and several have not used a computer in years. Applying for PUA/UIB and logging on to system websites was a challenge in its entirety because clients do not know how to navigate these tech systems. When asked how they worked through these barriers, all staff participants discussed how they *"had to call"* or *"had to have the client come to the office and work through the process with them",* and *"we literally had to sit with them and do it together".* Many felt like they became a different sort of advocate and were involved in helping clients access services that were not familiar to them. One revealed, *"We literally had to sit with them. Write letters for them so that they can send those in. We had clients that came in every week just so that we could walk them through the unemployment process, applying for the unemployment, finding their documents, uploading documents. It didn't matter how much we taught them, they still got stuck. So it was… I think last year, we really pivoted and became personal secretaries, I would say."*

This was not the only funding barrier experienced by HFP clients. These staff participants also said that client's applying for Clark County Housing Assistance Program – otherwise known as *"CHAP financial assistance"* - also experienced similar setbacks. This type of local housing assistance was made available for individuals who, due to COVID, were behind in paying their rent. However, if the client was renting a room, apartment, or house and their name was not on the lease, they did not qualify for this type of assistance. Additionally, if, for example, the person listed on the lease did not qualify (i.e., they did not lose their job due to COVID) then it was almost impossible for HFP clients to qualify. Importantly, due to several properties/landlords doing background checks, clients are not able to list themselves on a lease and actually secure housing. This is the primary reason why so many clients have friends or family sign a lease for them or are living with family or friends. Then, if HFP clients were not able to pay rent, they were the ones who faced eviction and homelessness.

One salient example of this bureaucratic hurdle was provided by a programming staff member: *"I had a client whose grandmother leased the apartment for her… she couldn't get the assistance"* because she was not listed on the lease. Then, *"in the midst of COVID, her grandmother passed away."* For HFP clients that were renting a home and were not listed on their lease, it was very difficult for them to apply for - and secure - these much needed emergency funds. Even client's utilizing transitional housing experienced problems. One illuminated, *"I also wanted to add with housing; When we are utilizing our transitional housing for people that are being released from institutions, there was a barrier. For instance, we used* [local transitional resources] *so they (clients) can get house arrest. But, if there was an outbreak at the transitional housing or they had to quarantine, they would not be enrolling any other residents. Or, if someone tests positive, they would not be able to be housed. So, we have to find additional housing for them."* In these moments, for some specific clients, programming staff were able to work with Southern Nevada Health District and University Medical Center to find clients affordable housing to safely quarantine.

In thinking about the many barriers experienced, staff members were able to also acknowledge how they worked around those barriers. Yet, some challenges – like helping clients apply for PUA and CHAP funds – were at a loss only due to bureaucratic hurdles associated with state application and verification systems. Additionally, programming staff said that there was a lot of fraud. Several received reports from clients that someone else was claiming their social security number and/or unemployment claims so they were unable to secure their own benefits.

Relevant to these access to funding concerns were worries that clients might actually become more at-risk to re-offend. One staff participant pointed out this important connection: *"For those that had been working and doing good, now they were at risk of losing their housing. That's homelessness. Another risk. Issues with their family. Issues with their PO. They were not able to pay their fees. So it just trickled into a whole ball of mess for them."*

"For those that had been working and doing good, now they were at risk of losing their housing. That's homelessness. Another risk. Issues with their family. Issues with their PO. They were not able to pay their fees. So it just trickled into a whole ball of mess for them."

Common programmatic and client service setbacks throughout 2020 included not being able to incorporate the pre-release training portion of HFP program. Due to COVID-19, several times at the start of 2020, programming staff members were not allowed inside to teach, train, and meet with clients. All staff members mentioned that they were *"not able to provide services inside two of the major institutions"* and that *"there was too much disruption when they were working from home."* Then, all inside training was paused for the last eight months of 2020.

The "solve" for this lack of client connection was the creation of computer labs with Internet access in NDOC facilities. Access to Internet for clients on the inside resulted in access to on-line "huddles" – support groups with guest speakers where clients were able to log on and participate in group conversations. Additionally, clients were able to participate in on-line trainings and life skills classes, they were able to meet virtually with program staff, attend educational classes, and participate in counseling (using a telehealth platform).

The point, here, is that, during COVID-19, HFP programming staff were all able to work with clients consistently. Even during a full NDOC lockdown that occurred November of 2020 to April 2021. Staff commented on how this *"pivot"* was *"innovative, even if they had to spend money to create the computer labs to make sure that their clients had Internet access" "so that they can keep participating"*.

Overall, throughout 2020 and during the pandemic, HFP had 1 virtual training session in Casa Grande and 2 inside CCDC. Each virtual class had *"about 25 people joining"*. Online training at Casa Grande was "*good"* but *"challenging"* because programming managers were not *"there interacting with the clients."* This lack of face-to-face personal interaction meant that it was more difficult to really *"tease out what they (clients) wanted their career path to be."* Once released, clients were still asked to complete these courses online if they were not able to complete them while incarcerated. Depending on childcare and work schedule, some clients struggled with meeting online at the scheduled time. In

addition to scheduling conflicts, additional challenges included some clients not being able to consistently access these online classes. For example, sometimes clients did not have access to a computer or laptop; even so, many clients use their cell phone to log in and participate.

When asked if clients have an easy time accessing the online classes, one programming staff member said, *"Not really. Some of them have to do it on their phone. It's not good"* while another mentioned, *"Or they are working around the same time as the class. Or life is happening."* One staff member overseeing one class described, *"For the financial literacy class, people would literally be online driving"* usually *"coming home from work or going to work".* During this conversation, another employee participant noted, *"Or there's children around screaming. So it's a little bit challenging*". Overall, these examples highlight the reality that online classes, when accessed consistently, are still difficult to pay attention to.

In sum, during the pandemic and Year 1 of this DOJ evaluation, HFP clients experienced myriad of barriers. First, in-person classes and face-to-face case management was stalled. Programming managers were not able to access clients on the inside. Once released, it was difficult for some clients to complete classes that they started pre-release. Online classes were not easily accessible and on-line learning platforms were not desirable. It was even more difficult to find employment and housing. Many clients that did find work lost their jobs. Due to their criminal record and properties requiring background checks, clients are not able to access available housing. Therefore, many clients that found housing were not listed on their lease. There are assistance programs available to them but they, again, are not able to access these funding streams. Programing staff help clients with securing paperwork, filling out applications, and submitting forms online. Yet, at the end of the day, it's up to these state entities to either accept or deny their clients applications. With the eviction moratorium ending, hundreds of clients are facing eviction and homelessness.

During Year 1, these staff members confided in one another, shared resources and service contact information, and meet on a weekly basis to debrief about issues facing clients. When asked to discuss *"things that they were most proud of",* staff participants talked about how they *"learned to trust one another*" and that *"trust continued to increase"* based on the *"sharing of a lot of resources and services".* Collectively, programming staff persons described how they were all committed to *"making sure all of their clients were successful",* not just the ones on their individual caseload. Due to the uncertainties and stresses associated with COVID-19, caseworkers said that they *"realized they were all in the same boat"* and that the *"weekly meetings"* were extremely helpful.

Team building and bonding through a pandemic proved to be extremely productive. These weekly meetings were also used as a way to troubleshoot, share stories about client and administrative barriers, and brainstorm the best ways to navigate those barriers. All programming staff mentioned that these weekly sessions were *"so important"* and *"what helped the most"* during the pandemic. HFP leadership was also noted as a *"success"* during the pandemic. The CEO is always described as a *"great motivational speaker*" and *"visionary leader"* while the program manager was consistently described as demonstrating *"great leadership"* inclusive of being kind and understanding. For example, everyone mentioned that they felt the level of open communication between all of them, as a team, is paramount and that they all feel comfortable to express their feelings, concerns, and stressors. Additionally, HFP employees talked about how important it is for all of them to also be "*fair firm and consistent"* in the work that they do collaboratively and with their clients one-on-one. Even with worries associated with

potentially losing their job at HFP, every staff member said that they all *"knew that they had a job"* and, because of this fact, it was easier for programming staff to focus their energy and continue to *"help those that didn't have a job."*

Although the pandemic created multiple challenges when working with clients, as an organization HOPE for Prisoners was able to pivot and provide services to clients throughout the duration of the grant. Despite the challenges, HOPE was able to standup a computer lab in one of the NDOC facilities which allow clients access to case management and educational services. HFP was also able to collaborate with organizations within the community to provide financial assistance and address food insecurities throughout, but specifically during the peak of the pandemic. Program staff were able to meet their clients' needs and go above and beyond to provide services to them. In doing so, they must be commended for their tireless efforts.

First, for the next months and moving in to the second year of the DOJ SCA grant (Year 2 evaluation), the following activities are planned.

- In the fall of 2021, the HFP reentry council will resume meeting on a regular basis. These meetings will review current status of HFP clients/services provided as well as discuss any barriers clients/staff are facing while accessing/delivering services.

- HFP will continue to work with correctional institutions to provide reentry services to clients currently incarcerated. Completing enrollments and providing vocational training for these clients. Providing post release follow-up services to clients.

- Major activities planned for the next 6 months are to complete enrollment of approximately 60 clients. HFP will enroll 20 clients in August, 20 clients in September and 20 clients in October. Clients will participate in case management, vocational training, employment services, substance abuse and mental health counseling, as well as other programmatic pieces associated with the grant.

- The independent evaluator will continue to make site visits, attend reentry council meetings and any other meeting of importance to the evaluation. Focus groups and/or interviews with HFP clients will begin September 2021 and will be on-going throughout the fall 2021 and spring 2022 semesters. These narrative data will be useful in providing context to the successes and barriers of this SCA funded reentry program.

Second, and based on data collected during the Year 1 evaluation, the following recommendations are offered. These suggestions are organized based on 1) Administrative, 2) Organizational, and 3) Client needs.

<u>Administrative Suggestions:</u>

- Based on conversations about defining and tracking "risk", continue to review research/best practices for "at-risk" scales and evaluations. For example, the gender responsive risk survey could be incorporated and used for female clients. HFP is also encouraged to create their own risk assessment based on their/clients experiences (see "Notes from BJA SCA Performance Measures" sent via email to HFP staff).

- Based on conversations about defining and tracking "recidivism", continue to review research/best practices for documenting and tracking client's rates of recidivism and connections to parole and probation violations, technical violations, actual re-offending (for new and/or similar to prior crime), re-arrest, sentencing, re-conviction, and re-incarceration. For example, see the SVORI (see "Notes from all Case files" sent via email to HFP staff). HFP is also encouraged to continue to track client's experiences in these areas.

- Based on a review of all HFP administrative forms, continue to update and make consistent in-take and other client forms. For example, in-take forms and forms completed post-leadership development seminar/graduation should be consistent. This data is transferred to Apricot so having consistent measures/language should be a goal.

- Based on conversations with clients attending MRT classes and noted changes in client demographics, update client forms to include disability status, citizenship status, physical and mental health needs, previous rehabilitation/hospitalization, and other information discussed with research team (see "Notes from all Intake Forms" sent via email to HFP staff)

- Based on review of current client's rates of recidivism, continue to track clients based on connections to probation and parole, whether or not they are residing/utilizing Casa Grande services, and any other transitional housing. Make sure that intake forms and follow-up conversations between clients and case workers include documenting client housing changes/situation(s), specifically if these clients are residing within Casa Grande.

- Based on prior evaluations that found that client connection(s) to mentors helped reduce rates of recidivism, continue to recruit and train appropriate and diverse mentors. For example, HFP could track client's time spent with mentor (in Apricot), topics of conversations, and suggestions/follow-up that mentor(s) provide.

HFP Organizational Suggestions:

- Based on prior organizational successes pre-COVID, continue to collaborate with important service providers. Examples include Clark County Regional Transportation Commission of Southern Nevada (RTC), Job Connect, Work Force Connections, Dress for Success, Las Vegas Rescue Mission, Vegas Chamber of Commerce, and the College of Southern Nevada (CSN). Continue to foster these connections.

- Based on conversations with programming staff participants, continue to have a knowledgeable, approachable, and friendly probation and parole officer (PnP) "in-house", acting as a liaison. This allows for better communication between Nevada Department of Correction (NDOC) and Probation and Parole.

- Based on conversations about "needs" and "future needs", continue to build new collaborations with mental health care providers, addictions treatment providers, as well as other therapists and counselors that focus on reentry, PTSD, addictions, and family conflicts.

- Continue to encourage all HFP staff to be trained in addictions, mental health care, as well as administrative areas associated with helping clients navigate social security, DMV, Medicare, and other state- and federal- financial reimbursement applications/systems.

- Based on staff articulations of successes, continue to have weekly team meetings. Continue to have team meetings with other HFP staff members. Continue to share stories of client successes and barriers. Continue to communicate about changes in program/class/training scheduling.

- Based on staff articulations of creating/being a national model, continue to track other reentry organizations – particularly those that have successfully received other SCA grants - to see what they are doing, who they are collaborating with, and what is working for them. There might be a way to collaborate and learn/support one another as organizations and as employees of a reentry organization.

- Based on conversations with programming managers and clients, continue to collaborate with local non-profit organization including those that do not focus on reentry services. HFP clients and staff should continue to participate in community volunteer events and events hosted by other non-profit organizations. Making connections post-pandemic is important and helpful to *"get the word out"* about HFP services/resources. Additionally, collaboration could turn into important coalition building.

Client Specific Suggestions:

- Continue to use the language of *"hopefuls"* and *"family"*. Staff acknowledged that part of HFP/client success is due to the organization being more like a "family" and that sharing client successes and setbacks with them is important.

- Based on conversations with programming staff employees, clients, and a review of case files, HFP should continue to focus on clients' number 1 needs (i.e., housing and employment); HFP should continue to collaborate and seek out affordable housing options, transitional housing options, and sober living/housing options.

- Based on conversations with programming staff, clients, and review of case files, HFP should continue to focus on clients' number 1 needs (i.e., employment and housing); HFP should continue to collaborate and seek out "in the meantime" and "career" employment opportunities for clients; HFP should continue to develop a range of diverse training tracks including educational training tracks for clients; there should be a focus on clients successfully securing employment that includes a living wage and health insurance.

- Based on conversations about client needs, HFP should create a consistent schedule of programs, classes, and trainings. This should be done in collaboration with entities and service providers that help facilitate these classes. This way, clients and HFP programming staff can create immediate-, short- and long-term plans/schedules. For clients with work and care-taking schedules (those taking care of children and other family members), this will be most impactful.

- Based on conversations with clients, HFP should continue to provide a "safe space" for them to work through and complete MRT classes as well as any other classes/trainings/programs. HFP should continue to make sure that these classes are taught by trained professionals not directly associated with Probation and Parole and/or the Department of Corrections.

- Based on conversations with programming staff, HFP should develop a recognition and/or graduation celebration for clients that successfully complete the 18-month program. This could be part of the leadership development graduations and would hopefully encourage more alumni support in the future.

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