

Orange County Sheriff's Department Custody Operation Efforts

Sheriff Don Barnes
April 20, 2023



ORANGE COUNTY
SHERIFF'S DEPARTMENT

5 Jail Facilities at 3 Locations



Central Jail Complex

Capacity: 2,724 inmates

- Men's Central Jail
- Women's Central Jail
- Intake Release Center



Theo Lacy Facility

Capacity: 3,442 Inmates



James A. Musick Facility

Temporarily Closed

Construction of 512 and 384 bed
estimated completion Winter 2023.

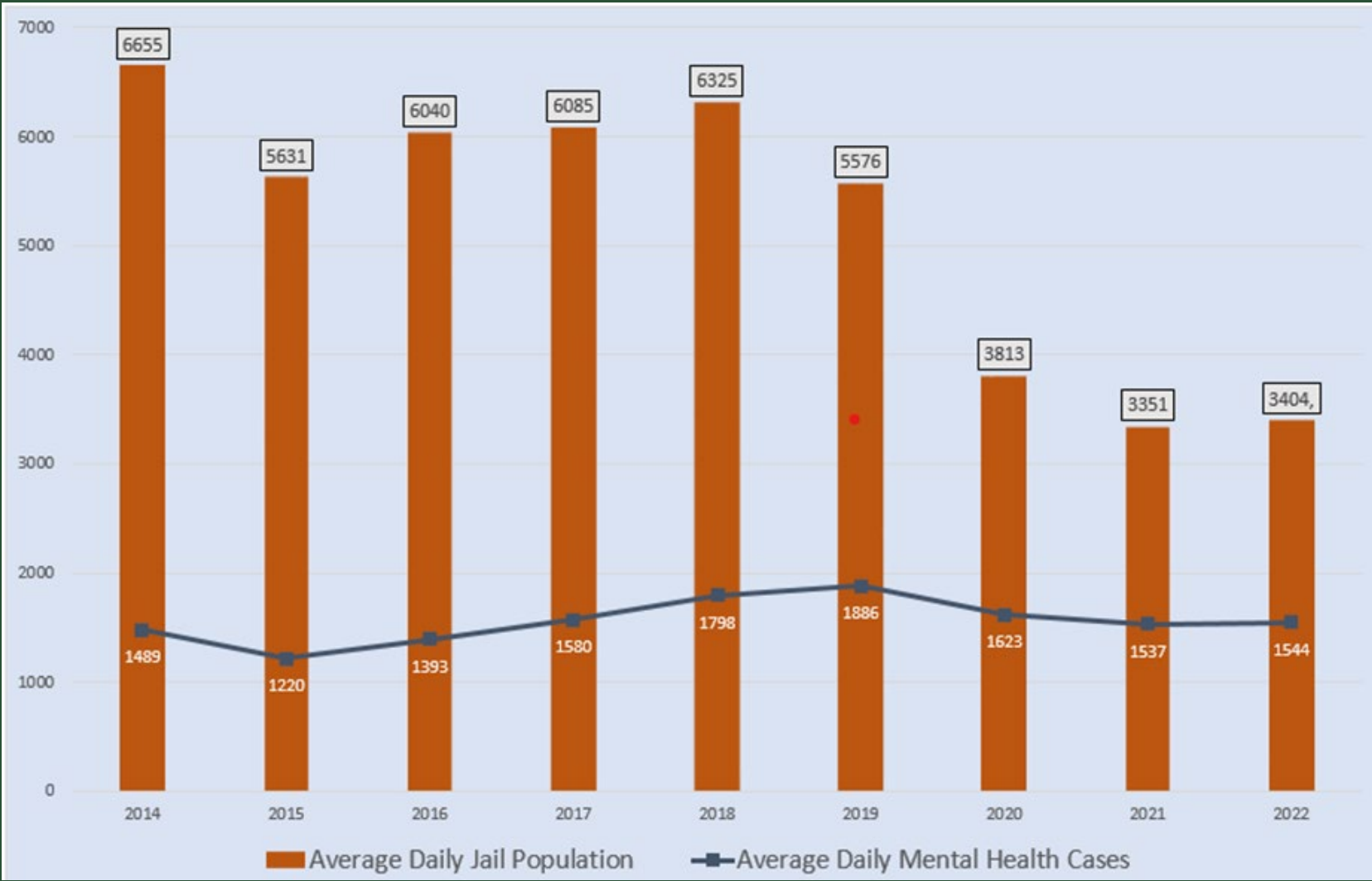
April 19, 2023 Total Population: 3,495

Musick Jail Project



- \$100 Million in AB 900 funding awarded in 2012; \$80 Million in SB 1022 in 2014
- Direct Supervision Model
- Construction commenced in Summer 2020

Average Daily Population and Mental Health Cases 2014-22





Addressing Behavioral Health Needs and Reducing Recidivism

- New Mental Health Housing Modules
- Crisis Intervention Training
- Ending of Late-Night Releases
- Substance Use Disorder Step Down Units
- New Jail Classification
- Medical Assisted Treatment (MAT) Program
- Project Kinship Reentry Program
- **HUMV Unit for Veterans-90% Success Rate**
- **Transitional Age Youth Research Partnership**



UCI News

National Institute of Justice funds UCI evaluation of new Orange County Jail program

Research will gauge effectiveness of measures to curb recidivism among young men



Questions?

Contact the Office of Sheriff
Barnes

714-647-1800

Trauma Responsive Reentry

Carrie Pettus, PhD, MSW
President/CEO Wellbeing & Equity Innovations
Principal, Justice System Partners

Bradford Locke,
Chief, Bureau Of Program Development
Florida Department of Corrections

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Overview



What We Know



What is Trauma
Responsive Reentry



Active Research



Cautions and
Considerations

What We Know

Trauma is a nearly universal experience

- Pre-incarceration prison (95-98%); jail (~70%)
- During incarceration (80-89%)
- After incarceration (47% within 8 months of release)

Symptoms of untreated trauma are correlated with problematic behavior, justice/legal system involvement, and behavioral health disorders:

- Aggression, impulsivity, hypervigilance, misappraisal of danger
- Substance use disorders, depression, and anxiety
- Limited social supports and interpersonal difficulties

Untreated trauma symptoms can alter the way an individual perceives the world, complicate their ability to form healthy relationships, and change the very structure of their brain, their mental and physical processes, and their behavior.

What We Know



Development of trauma symptoms does not always occur immediately following a traumatic event and not everyone develops trauma symptoms

Disruptive trauma symptoms can be mitigated and managed – neuroplasticity of the brain

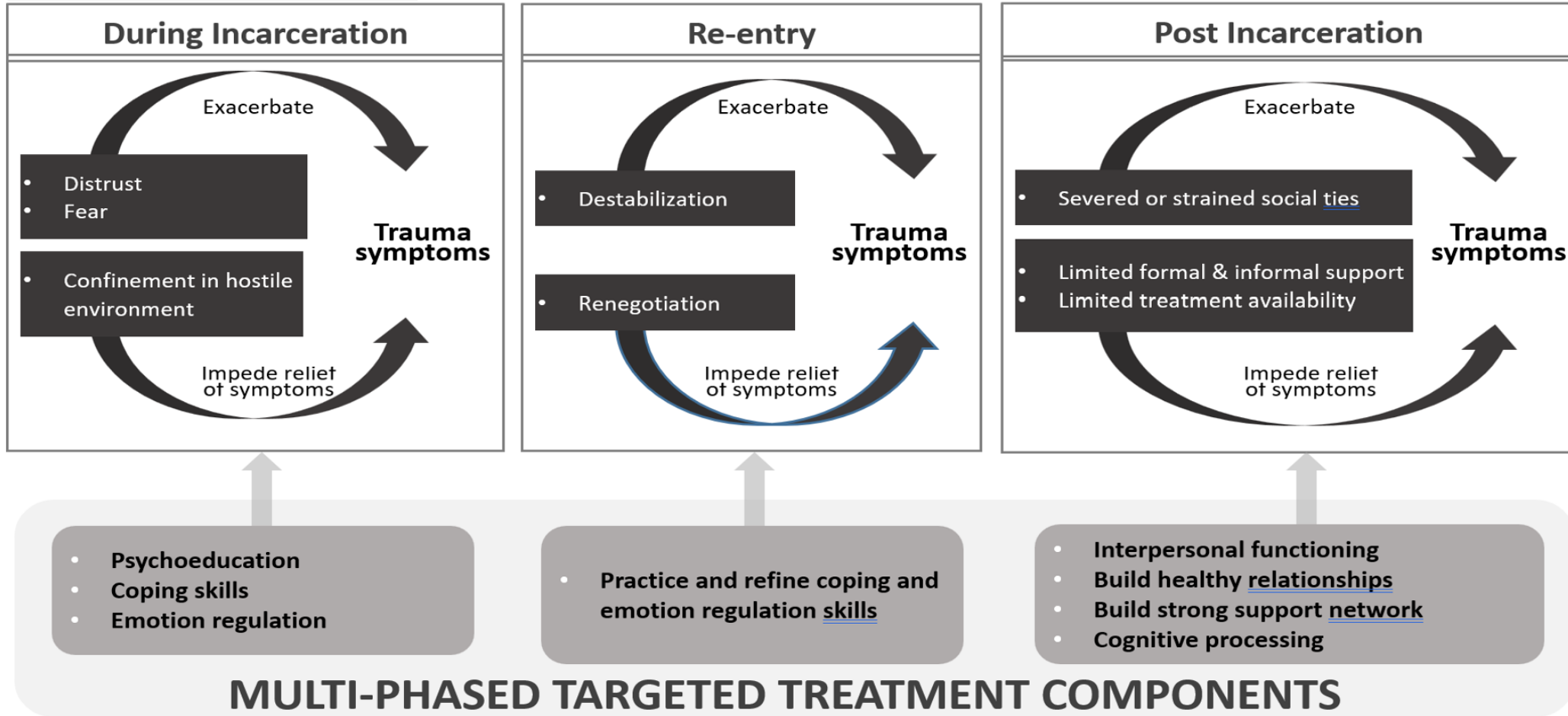
Post-traumatic healing and post-traumatic growth is possible

An evidence base is emerging for trauma interventions

- Esuba, Seeking Safety, Beyond Trauma, Beyond Violence, Trauma Affect Regulation (women)
- Men's Trauma Recovery and Empowerment Model (M-TREM), Resilience in Stressful Experiences (RISE), Skills Training in Affective Interpersonal Regulation (STAIR), Exploring Trauma

Disproportionately higher rates of trauma pre, during, and post incarceration

Phased Trauma Intervention for Reentry



What is Trauma Responsive Reentry



Trauma-responsive reentry bridges information to action, involves a revision of both policies and practices to mitigate the damage caused by past and present trauma experiences



understands the neuro-connectivity of trauma and the impact trauma can have on autonomic nervous system as well as the ability for problematic neuropathways to be redirected



seeks to restore a sense of self-determination, safety, and autonomy and prevent revictimization and retriggering of trauma.

What is Trauma Responsive Reentry



assesses realistic demands on an individual's time post release and attempts to sequence expectations and support over a long period of time to reduce daily stressors and promote growth.



offers individualized reentry with one-on-one counseling options in lieu of group settings, which require individuals to expose vulnerabilities to others to fully engage in programming.



priority is placed on a positive therapeutic alliance between correctional and reentry staff and the individual experiencing reentry.

Multi-site Randomized Controlled Trial of Comprehensive Trauma Informed Reentry Services for Moderate to High Risk Youth Releasing from State Prisons



- Resilience In Stressful Experiences (RISE)
- 400 individuals who identify as men (ages 18-34) releasing from prison
- Integrating community stability intervention content with trauma specific content
- Follow up data collection May 2023

RISE Study Goals



- Investigate whether Resiliency In Stressful Experiences (RISE) improves key mechanisms of change for moderate- to high-risk young incarcerated males.
- Investigate whether RISE improves community stability for moderate- to high-risk young incarcerated males.
- Investigate whether RISE decreases rates of recidivism for moderate- to high-risk young incarcerated males.
- Implementation evaluation: Feasibility, acceptability, fidelity

Qualitative Feedback



Qualitative findings:

- ❑ new insights
- ❑ increasing hope and motivation
- ❑ community stability components important
- ❑ individual vs group better post-release

Cautions and Considerations



Physical health: (a) Etiology of disparities in chronic health conditions overrepresented among individuals who are incarcerated; (b) importance of creating opportunities for physical activity

Structural and historical barriers to healing and posttraumatic growth including community resources / characteristics; Intergenerational trauma, racial trauma, and cultural trauma

Vicarious and secondary trauma for helping professionals including peer professionals; peer led intervention trauma processing; non-peer led interventions – trauma processing

Trauma responsive reentry will be limited without trauma responsive criminal legal and justice systems

Partnering with Researchers from a Corrections Practitioners Perspective



Service delivery and resources for participants



Continual improvement



Participating in the generation of evidence based practices



What it takes.....

Thank you!

Carrie Pettus, PhD, MSW
carrie@wellbeingandequity.org

Join the NRRC's distribution list to receive
National Reentry Resource Center updates!

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Bradford Locke,
Chief, Bureau Of Program Development
Florida Department of Corrections
Bradford.Locke@fdc.myflorida.com



Q&A



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