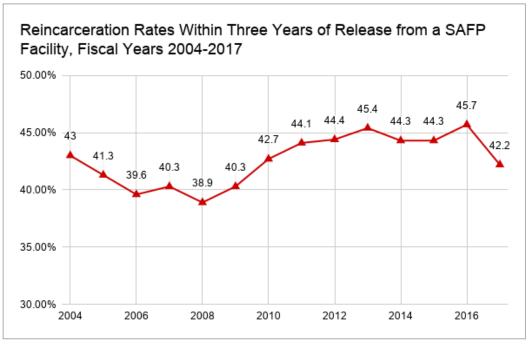


# Improve Texas' In-Prison Therapeutic Community Through Outcome Reporting and Transparency Measures

## THE SAFP PROGRAM MODEL HAS NOT BEEN INDEPENDENTLY EVALUATED IN 20 YEARS

Texas spends \$50 million per year on its Substance Abuse Felony Punishment (SAFP) program,<sup>1</sup> the state's in-prison substance use treatment program for people at risk of probation or parole revocation due to repeated drug or alcohol use. However, the SAFP program has a recidivism rate of 42.2% – higher than rates of (re)incarceration following other terms of supervision or incarceration.<sup>2</sup>

And the rate of re-incarceration following SAFP programming has been climbing over time. In looking at individuals released from SAFP facilities from 2008 to 2016, and measuring re-incarceration over the following three years, the rate grew from 38.9 percent <sup>3</sup> to 45.7 percent. <sup>4</sup> SAFP programs have increasingly failed to address clients' needs or provide them the tools to live successfully in the community.



Also problematic, the SAFP program has not been independently evaluated in 20 years. **The lack of examination and course correction have likely contributed to the program's increasingly high failure rate,** which harms public safety and wastes taxpayer dollars associated with re-arrest and incarceration.

## **HEAR FROM THEM: SAFP PROGRAM CLIENTS**

In 2020, the Texas Criminal Justice Coalition partnered with Texas Tech University to design and implement a multi-phase independent SAFP program evaluation. Through our research to date, we have pinpointed a few areas that, if improved, would strengthen the SAFP program model, as well as the treatment services offered to clients in SAFP and aftercare facilities.

Continued on reverse.

- 1. Long periods of non-therapeutic-focused programming led clients to feel like they were missing out on opportunities to concentrate on rehabilitation. The majority of research participants mentioned sitting upright in chairs with their hands on their lap, without moving, unless they were excused to use the bathroom or eat meals.
  - "We spent months on what they called a 'shut down,' where we sat in chairs for 14 hours a
    day with our hands on our laps. And I watched a lot of women break. They just couldn't take
    the stress of that."
- 2. Clients were more engaged in substance use treatment when they were receiving clinical therapeutic services from counselors who seemed invested in their recovery but that happened infrequently. An overwhelming number of clients mentioned limited access to one-on-one counseling; furthermore, group therapy sessions, which were large, were run not by counselors but by peers, leading some clients to feel uncomfortable sharing their experiences.
  - "There were about thirty people in weekly group therapy sessions, which meant I usually didn't get to talk at all. We had individual therapy once a month."
- 3. The transition from the SAFP program to transitional housing is abrupt, and clients feel unprepared to reenter the community. Numerous clients expressed identical barriers to reentry, including an inability to obtain meaningful employment, being taken to transitional housing far from their home, living in areas with no public transportation, and lacking appropriate shoes and clothing.
  - "They focus on reentry status once they get you to the halfway house. There was no focus on job skills or interviews or how to deal with the collateral consequences."

### COST-SAVING AND PUBLIC SAFETY-DRIVEN SOLUTION: SUPPORT HB 4102 BY REPRESENTATIVE JARVIS JOHNSON

HB 4102 seeks to improve in-prison substance use treatment and aftercare programming through outcome reporting and transparency, which will lead to more effective outcomes, increased public safety, and taxpayer savings. This bill: requires the Texas Department of Criminal Justice to produce an annual, publicly available report on SAFP and aftercare program participation, as well as recidivism rates for SAFP and aftercare programs; requires the curricula used in these programs to be evidence-based and trauma-informed; and calls for regular, independent evaluation of SAFP and aftercare program effectiveness.

### **Citations**

<sup>&</sup>lt;sup>1</sup> General Appropriations Act for the 2020-21 Biennium, Department of Criminal Justice, Strategy C.2.4, <a href="https://www.lbb.state.tx.us/Documents/GAA/General Appropriations Act 2020 2021.pdf">https://www.lbb.state.tx.us/Documents/GAA/General Appropriations Act 2020 2021.pdf</a>.

<sup>&</sup>lt;sup>2</sup> Legislative Budget Board (LBB), *Statewide Criminal and Juvenile Justice Recidivism and Revocation Rates*, January 2021, 6, <a href="https://www.lbb.state.tx.us/Documents/Publications/Policy Report/6293 CJDA Recidivism-Revocation.pdf">https://www.lbb.state.tx.us/Documents/Publications/Policy Report/6293 CJDA Recidivism-Revocation.pdf</a>. The SAFP program has the highest percentage of individuals who are incarcerated or reincarcerated within three years of release compared to felony community supervision, prison, state jail, intermediate sanction facilities, and parole supervision.

<sup>&</sup>lt;sup>3</sup> LBB, Statewide Criminal and Juvenile Justice Recidivism and Revocation Rates, January 2013, 42, <a href="https://www.lbb.state.tx.us/Documents/Publications/Policy\_Report/Statewide%20Criminal%20Justice%20Recidivism%20and%20Revocation%20Rates2012.pdf">https://www.lbb.state.tx.us/Documents/Publications/Policy\_Report/Statewide%20Criminal%20Justice%20Recidivism%20and%20Revocation%20Rates2012.pdf</a>.

<sup>&</sup>lt;sup>4</sup> LBB, Statewide Criminal and Juvenile Justice Recidivism and Revocation Rates, January 2021, 14.