

LANDSCAPE ANALYSIS: REENTRY SERVICE PROVIDERS IN DELAWARE

2023

DCRC

DELAWARE CORRECTIONAL REENTRY COMMISSION

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EXECUTIVE SUMMARY

While the latest data (2017) shows that return to prison rates in Delaware have decreased,¹ there is much work to be done to ensure that those reentering the community are supported in their efforts to stay out of prison. Organizations and agencies across the state are providing reentrant services to accomplish this goal. These services, as well as the needs of those providing them, will be the focus of this Landscape Analysis (“Analysis”). This Analysis seeks to accomplish three goals:

- 1 Outline the current reentry services available to understand the provider landscape
- 2 Highlight service provider and client needs, as identified by service providers, to better serve reentrants
- 3 Explore opportunities to enhance the landscape for reentry services in Delaware

To complete this analysis, 24 organizations in the reentry space participated in interviews and 19 of those organizations participated in a survey. The findings from these service provider engagements form the basis for this Analysis.

Through the collection and analysis of data from these engagements, three key findings were identified and are explored in more detail in this Analysis:

- Delaware has a dedicated network of reentry service providers working to meet the needs of clients. Detailed information about these providers can be found in the Service Provider Landscape section.
- Service providers identified three clear needs to better serve reentrants:
 - Flexible and equitable funding to increase services and capacity;
 - Improved communication and partnership among stakeholders; and
 - Improved process for data collection, access, and accountability.
- Service providers identified the greatest client needs as housing and basic needs; service accessibility; employment; and transportation, each of which are provided by more than 50% of reentry service providers that completed the survey.

As part one of a two part initiative, this Analysis will outline the current reentry service provider landscape and highlight its needs based on the perspective of the reentry service providers engaged. The second part of this work, to be completed in 2023, will focus on the reentrant perspective.

1. Recidivism in Delaware: An Analysis of Offenders Released in 2015 through 2017. 2021 November. Statistical Analysis Center. <https://sac.delaware.gov/wp-content/uploads/sites/64/2021/12/AdultRecid21.pdf>

INTRODUCTION

The Delaware Correctional Reentry Commission (DCRC) was established in 2019 under Executive Order 27 and was formally sunset in 2020 once the original 19 objectives were accomplished. Given the great success of the Commission, the group identified additional system improvements, policy issues, and projects that would improve the state of prisoner reentry in Delaware and continued its work through the creation of the 2021-2024 Delaware Recidivism Reduction Blueprint.

DCRC and its partners undertook this Analysis to better understand the assets, gaps, and opportunities of the current reentry services available in Delaware. As part one of a two part initiative, this Analysis will outline the current reentry service provider system and highlight its needs based on the perspective of the reentry service providers engaged. The second part of this work, to be completed in 2023, will focus on the reentrant perspective.

While there is no standard definition of a reentry service provider in Delaware, survey respondents provided insight into the definition from the service provider perspective. From these responses, a working definition has been created.

Reentry service provider (working definition): An entity that provides resources, support, and services to individuals who are about to be or have recently been released from incarceration.

The DCRC and its partners will continue to engage on this working definition in an effort to better assess the current reentry service provider landscape. In the future, a more nuanced definition with tiers to represent level of engagement with reentrants may be created. This Analysis will use the term reentry service provider to refer to the stakeholders engaged for this work, all of whom meet the working definition.

ANALYSIS METHODOLOGY

Although Delaware does not yet have a standard definition for reentry service provider, DCRC sought to identify and engage stakeholders that provide essential services to people reentering society. This identification was done through research, DCRC expertise, and the snowball effect (asking stakeholders to identify other providers). The DCRC's Landscape Analysis Working Group, which consists of 11 participants from relevant organizations and agencies (see Appendix A), also provided insight and guidance to support the identification of stakeholders. Through this process, 27 organizations were identified.

To accomplish the goals of this Analysis, each stakeholder was invited to participate in a qualitative interview to share information about services provided, perceived needs, and potential opportunities for improvement in the space. In total, 24 of the 27 stakeholders were interviewed, resulting in an 89% participation rate (see Appendix B for interviewees). Each interview lasted about one hour and followed a semi-structured interview process, with 24 questions across four categories (see Appendix C for interview guide). Interviews were recorded and extensive notes were taken. It is important to note that two of the organizations interviewed, Plummer Community Corrections Center and Community Corrections Treatment Center, are Department of Corrections (DOC) facilities and one of the organizations, University of Delaware, is a partner in the reentry space, but is not a service provider. Additionally, while Centurion is one organization, it completed two interviews and two surveys for the separate work done by the Opioid Use Disorder (OUD) team and the Reentry team

All qualitative interview data collected was analyzed through a coding process, wherein 69 distinct codes were used to organize and categorize interviewees' responses by service provider need, client need, operations, and opportunities. This qualitative analysis is the basis for the Service Provider Needs and Client Needs sections of this report. The analysis was also used to inform the Service Provider Landscape section, the data for which largely comes from the Reentry Provider Survey.

ENGAGEMENT

24 ORGANIZATIONS
INTERVIEWED

19 ORGANIZATIONS
SURVEYED

The Reentry Service Provider Survey was created to collect operational data from providers that participated in interviews. The 14-question survey covered multiple topics such as clients served, eligibility and exclusions, services provided, assessment tools, and more (see Appendix D for survey questions). Of the 24 service providers interviewed, 19 responded to the survey resulting in a 79% response rate (see Appendix B for respondents). Survey data was collected via Google Forms and analyzed using Excel.

The data collected for this Analysis from 24 stakeholders through both interviews and surveys is robust and represents a diverse sample of service providers in Delaware's reentry space, but it does have limitations. Given that there is no standard definition of reentry service providers in the state, stakeholder identification relied on research, DCRC expertise, and word of mouth. It is likely that there are additional providers serving reentrants in Delaware that were not identified and engaged. The data also has subject matter gaps, especially around budgeting and funding amounts, as stakeholders did not have accurate information to share at the time of engagement. Other quantitative data related to reentrants (e.g., number of reentrants served) was also difficult to obtain, as many service providers do not collect this specific data. Lastly, this data is limited to the service provider perspective and does not include the perspective of other key stakeholders such as reentrants. Subsequent work in 2023 will seek to fill many of these data gaps.



SERVICE PROVIDER

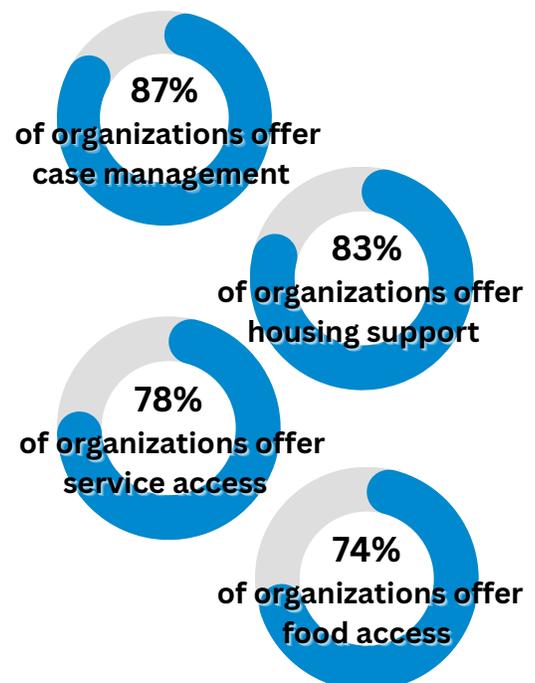
LANDSCAPE

There are many service providers across Delaware providing essential resources and support to individuals rejoining society after incarceration, but there is no central database of information about those providers. This section will seek to begin the compilation of key information about the reentry service providers in the state that we spoke with for this Analysis, including the services provided, geographies served, staff involved, clients served, and clients excluded.

All of the information in this section is self-reported by the service provider organizations and was gathered through qualitative interviews with 24 organizations and a survey that received responses from 19 of those same organizations. It is important to note that these are the reentry service providers identified by DCRC for this Landscape Analysis, but there may be others in the state that were not reached. In 2023, DCRC hopes to expand upon this work to include more organizations as well as key qualitative and quantitative data such as funding sources and amounts, funding gaps, costs per client, referral processes, average caseload per caseworker, and more.

The four most offered services among participants are case management, housing support, gaining access to services, and food, with 87%, 83%, 78%, and 74% of the organizations, respectively, providing this to clients. Other popular services offered by more than 50% of the providers surveyed include transportation, clothing, access to identification documents, employment support, advocacy, peer support services, and mental health support.

Of the engaged organizations, 57% either exclude or limit the access of at least one group from at least one service. The most cited group excluded from or given limited access to services is Registered Sex Offenders, which are excluded from one or more services offered by 43% of the organizations.



SERVICE PROVIDERS

SERVICES (1 of 2)

	Bridge Clinic	CPSU	Centurion OUD**	Centurion Reentry**	DCJ	Dover Interfaith	First State Community Action	Friendship House	Heartlight Foundation	Hopes & Dreams	CCTC*	PCCC*
Case Management	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Housing Assistance	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Transportation	✓	✓	✓	✓	✓	✓		✓	✓	✓	✓	
Food	✓		✓	✓	✓		✓	✓	✓	✓	✓	
Clothing	✓		✓	✓	✓			✓		✓	✓	✓
Access to ID Paperwork	✓	✓	✓	✓	✓	✓		✓	✓	✓	✓	✓
Access to Services	✓	✓	✓	✓	✓	✓		✓		✓	✓	
Access to Hygienic Needs								✓				
Educational Planning		✓				✓		✓				✓
Employment / Vocation					✓	✓	✓	✓		✓		✓
Financial Services				✓	✓			✓				
Mental health Support	✓		✓			✓				✓	✓	✓
Psychiatric / Clinical	✓		✓								✓	
Substance Use Treatment	✓		✓							✓	✓	
Purchase of Care	✓											
Peer Support Services	✓		✓	✓	✓				✓	✓	✓	✓
Emergency Services			✓	✓	✓		✓					✓
Family Support Services	✓				✓			✓	✓		✓	
Crisis Services	✓			✓					✓			
Religious Services									✓			✓
Expungement					✓				✓			
Advocacy	✓		✓	✓	✓	✓		✓	✓		✓	

*CCTC and PCCC are DOC Facilities

**While Centurion is one organization, it completed two interviews and two surveys for the separate work done by the Opioid Use Disorder (OUD) team and the Reentry team

SERVICE PROVIDERS

SERVICES (2 of 2)

	Hudson Behavioral Health	Impact Life	MHP	Partners for Justice	Project New Start	Salvation Army	Refuge/Piece By Peace	The Way Home	Veteran Affairs	West End Neighborhood House	YWCA
Case Management	✓	✓	✓	✓	✓	✓	✓	✓	✓		✓
Housing Assistance	✓	✓			✓	✓	✓	✓	✓	✓	✓
Transportation					✓	✓		✓	✓		
Food	✓	✓	✓		✓	✓		✓	✓		✓
Clothing			✓		✓	✓		✓			✓
Access to ID Paperwork					✓	✓		✓			
Access to Services		✓	✓	✓		✓	✓	✓		✓	✓
Access to Hygienic Needs											
Educational Planning		✓								✓	
Employment / Vocation		✓			✓	✓	✓	✓	✓	✓	
Financial Services					✓	✓			✓	✓	✓
Mental health Support	✓	✓	✓		✓	✓			✓		
Psychiatric / Clinical		✓							✓		
Substance Use Treatment	✓	✓	✓				✓		✓		
Purchase of Care											
Peer Support Services	✓	✓	✓		✓		✓	✓			
Emergency Services		✓			✓	✓			✓		✓
Family Support Services					✓					✓	✓
Crisis Services		✓			✓	✓					✓
Religious Services						✓		✓			
Expungement						✓		✓			
Advocacy		✓					✓	✓		✓	✓

SERVICE PROVIDERS

CLIENTS AND STAFF

	Primary Geography Served	Client Population	Clients Per Year (2021)	Reentrants Per Year (2021)	Reentry Staff (2021)	Exclusions
Bridge Clinic	Wilmington, Dover, Georgetown	Any DE resident 18+ with a mental or behavioral health issue	60-108			None
CPSU	Statewide	Eligible for TANF or TANF-Like	438	438	14	Currently incarcerated individuals
Centurion OUD	Statewide	Incarcerated pretrial offenders with OUD	822	822	4	None
Centurion Reentry	Statewide	Incarcerated sentenced offenders with SA/MH/CC	1557	1557	8	None
DCJ	Statewide	Program dependent		574	10	Service limitations for Registered Sex Offenders
Dover Interfaith	Dover	Homeless men	300			None
First State Community Action	Dover	Income 200% FPL or less	10,000			Service limitations for Registered Sex Offenders
Friendship House	Statewide	Homeless Individuals and those in need of emergency services	5000 direct 8,500 indirect		5	Service limitations for Registered Sex Offenders
Heartlight Foundation	New Castle County	Reentrants with SA/OUD and in need of medical assistance	25			SPMI clients and Registered Sex Offenders
Hopes & Dreams	Dover	All are eligible			2	None
CCTC*	Statewide	All inmates at CCTC	300	300	1	None
PCCC*	Statewide	All offenders	1080	1080	6	None
Hudson Behavioral Health	Georgetown & Sussex County	Individuals in active recovery from addiction	100	20-25	2	Those currently in active addiction
Impact Life	New Castle & Sussex County	Individuals with SUD who are in active recovery	1800	1800		SPMI clients and Registered Sex Offenders
MHP	Sussex County	Any Individual on Probation			2	None
PFJ	Statewide	Public Defender clients			6	Anyone not represented by Public Defender
Project New Start	Wilmington	Incarcerated individuals in a work-release center or recently released and low income	20-30	15	4	Service limitations for Registered Sex Offenders
Salvation Army	Wilmington	Victims of human trafficking	20-25	1	3	Service limitations for Registered Sex Offenders
Refuge/Piece by Peace	New Castle County	Adolescents and young adults suffering from psychiatric and SUD	20	20	6	Service limitations for Registered Sex Offenders, SPMI client
The Way Home	Sussex County	Individuals on probation, newly released reentrants	300	300	9	None
Veteran Affairs	Dover, Georgetown, Wilmington	Veterans		20	1	None
West End Neighborhood House	Wilmington, New Castle County	Any DE resident	10,000	86	1	Service limitations for Registered Sex Offenders
YWCA	New Castle County	Homeless individuals with family, survivors of domestic abuse/sexual violence	250-275	20-25	2	Service limitations for Registered Sex Offenders

Blank boxes indicate that data was not available

A majority of the providers (74%) serve clients in Wilmington or New Castle County and 26% serve only clients there. Georgetown and Dover were the next two geographies with the most services available. Across the 23 organizations that provide direct services, between 30,000 and 35,000 clients are served each year. While many providers do not specifically track the number of reentrants they serve, those that do worked with over 5,200 reentrants in 2021.

**5,200
reentrants
served**

**74%
offer services
in Wilmington**

**43% exclude
Registered
Sex Offenders**

SERVICE PROVIDER

NEEDS

To ensure that the needs of reentrants in Delaware are being met, it is important to understand what perceived gaps exist for reentry service providers in their pursuit to support successful reintegration for clients. This section will share three key needs identified from the data collected for this Analysis: 1. Flexible and equitable funding; 2. Improved communication and partnership; and 3. Improved data processes. For each, the Analysis will examine what was heard, why it matters, and opportunities to meet the identified need.

Flexible and equitable funding to increase services and capacity

What we heard

Service providers across the state of Delaware are dedicated to meeting the needs of reentrants as they attempt to successfully reintegrate into their communities. In their journey to provide this support to as many reentrants as possible, service providers feel they lack both the necessary funding and capacity to achieve this goal.

Throughout the course of the service provider interviews, eleven interviewees mentioned a funding gap for their services 23 separate times. While there was an overarching sentiment that more funding in general is needed in the space, two specific needs did arise - equitable funding and flexible funding.

A common theme mentioned by providers, especially those with services outside of Wilmington, is the need for more equitably distributed funding. There is a shared sense that most of the reentry funding is given to organizations in Wilmington and/or New Castle County and particularly that it is awarded to the same organizations each year.

One provider shared that, from their perspective, "It [funding] is top heavy and it is North." If there is indeed a lack of funding diversity, reentrants may not have access to critical services in their community and innovative, effective ideas may be overlooked. Given that Seaford and Dover have the second and third highest number of city residents incarcerated in the state, it is clear that services outside Wilmington are needed.

“
It [funding] is top heavy
and it is North.”

Interviewees also noted that funding is very prescriptive, making it difficult for organizations to meet the evolving needs of clients and staff. According to the organizations interviewed, service providers would be better able to serve reentrants if they had access to flexible funding that could cover both basic client needs (e.g., transportation, food) and operational expenses.

Multiple interviewees lamented that current funding does not allow providers to meet immediate client needs, especially for transportation, food, and clothing. Given that many clients experience these needs upon reentry, it is difficult for providers to support reentrants in other important ways (e.g., obtaining employment) until these basic needs are met. One interviewee mentioned panicking when money for bus passes runs out because they know it is such an essential need. Additionally, providers shared a common need for more flexible funding to support operations, especially given the extensive reporting requirements of some of the funding sources. This money would also allow providers to hire and retain key personnel.

While there was agreement that more funding would allow for better service delivery, many organizations shared that they felt confident the current funding sources available were sustainable. When asked “how confident do you feel in the longevity and sustainability of your funding for reentry services?,” 33% of organizations responded they were extremely confident while 11% responded they were not at all confident. Respondents specifically noted that while they were confident in current funding sustainability, they were not confident in being able to fund important services not covered by their current sources such as those mentioned above (e.g., basic needs).

How confident are service providers in the sustainability and longevity of funding for reentry services?



2. Widra, E. et al. Where people in prison come from: The geography of mass incarceration in Delaware. Sept 2022
<https://www.prisonpolicy.org/origin/de/2020/report.html>

Related to the need for flexible funding for operational expenses, service providers felt staff capacity was an important gap that needed to be addressed; this was mentioned 18 times by nine of the interviewees. An emphasis was placed on the need for more peer support staff and case managers to meet client needs. Those currently in these positions are stretched thin and not able to serve every reentrant. In part, some service providers believe this staff shortage is causing wait lists for essential services such as mental health, counseling, and skills-based support such as parenting classes.

Service provider suggestions

The service providers interviewed provided ideas and opportunities to improve funding and capacity, including:



- Identify current state funding opportunities and review for both geographic diversity and provider diversity; work closely with the Delaware Criminal Justice Council (CJC) to identify grant opportunities to fill gaps.
- Put checks and balances in place to ensure state and federal funding is equitably distributed, especially outside of Wilmington and New Castle County.
- Where possible, increase the flexibility of funding to allow for spending for basic client needs (e.g., transportation) and operational expenses, especially for staff training and salaries.

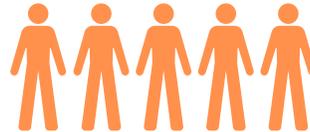
Improved communication and partnership among stakeholders

What we heard

Given the diverse needs of reentrants in Delaware, a strong network of service providers is essential to successfully serve this population. With such a robust provider landscape, which includes organizations and agencies that support reentrants at different stages in their journey, there is a need for support building more trusting, communicative partnerships among providers.

Interviewees shared a general sentiment that the reentry landscape is fractured and siloed and while there was some mention of strong partnerships within the space, many noted that more intentional collaboration is needed. Five interviewees noted that these silos between reentry providers hinder service delivery. Without strong trust and communication, each provider tries to do too much instead of staying within its expertise and referring to external organizations for additional services. When providers do refer clients to external services, the results are mixed and communication is lacking.

5 Interviewees noted silos between reentry providers



Some interviewees noted that this lack of collaboration stems from the perceived inequitable funding distribution outlined in the section above, which leads to competition and a scarcity mindset that prevents providers from partnering. One interviewee noted,

“ I think that it’s turned into a race... we go out there, we see everyone, we see whose banners are at what price range, the marketing, everyone constantly talks about who got the money, where did it go.



Multiple organizations shared that transparency of and communication with government agencies involved in reentry was a point of frustration. Specifically, there is a lack of communication between service providers and both Department of Corrections (including Probation & Parole) and other reentry service providers. Three service providers shared that they are not aware of a clear, timely process for reentrant referral to services upon release. This can leave providers scrambling to meet reentrant needs on a very short timeline. One interviewee stated that the Transitional Accountability Plans (TAP) were rarely shared with them upon a reentrant's release, making it difficult to serve clients effectively.

Service Provider Suggestions

The service providers interviewed offered ideas and opportunities to improve communications and partnership, including:



- Support a backbone organization that serves as the communication and partnership hub between all providers in the reentry space.
- Create intentional spaces and opportunities to improve the relationship between service providers and local and state agencies

Improved process for data collection, access, and accountability

What we heard

Interviewees from eight organizations shared a desire for better data collection, access, and accountability to enhance service delivery and support continuity of care. Specific data needs cited include: 1. Access to shared data systems to better communicate about reentrants across organizations, 2. Access to a centralized information system to create a shared understanding of available services, and 3. Access to relevant data to support operations as well as measurement of service efficacy.

According to interviewees, this lack of access to data and information has caused less effective and efficient service delivery for clients. One provider stated,

“ We could help more people in an efficient way if the [state and service provider] systems could talk to each other, and we have access to those [state] systems as well. ”

The most mentioned type of data that service providers would like to access is demographic information about new clients as well as information about their identified needs. Data and information sharing between service provider organizations was also cited as a barrier, as organizations have difficulty communicating effectively about clients that they share. This causes issues with referrals as well as continuity of care and is directly related to the need outlined above for better communication between providers.

It has also caused difficulty with evaluating efficacy of programs, as organizations cannot get access to necessary data to measure results, especially data from government agencies. For example, one interviewee shared that they requested employment placement numbers for reentrants in Delaware from the state, but they were unable to get access. It is important to note that DCRC is working toward analyzing employment data for reentrants, which may be available to providers in the future in aggregated form. Some data necessary to measure results may also be protected information, which would need to be explored further as sharing protected information requires legal assessment and agreements.

Data collection is essential to successfully evaluate and implement reentry programs. Beyond just collection, coordination between agencies allows for more efficient programming targeting the specific needs of reentrants.

Service Provider Suggestions

The service providers interviewed offered ideas and opportunities to improve communications and partnership, including:



- Centralized information hub that hosts information on services and resources.
- Database with easy to access data on reentrants, such as employment placement numbers.
- A uniform platform that allows service providers to communicate with one another and government agencies to better provide wraparound care

CLIENT NEEDS

Reentry service providers across the state of Delaware are working diligently to meet the needs of reentrants as they attempt to successfully reintegrate into their communities. Given their close work with the reentrant population, these service providers have a unique perspective on what clients in this space need. This section will share four key client needs identified by reentry service providers, including: 1. Housing and other basic needs; 2. Employment support; 3. Transportation access; and 4. Service accessibility. For each, the Analysis will examine what was heard, why it matters, and opportunities to meet the identified need.



Housing and Other Basic Needs

What we heard

Housing is the foundation for successful reentry, as reentrants who are unable to secure safe and affordable housing are at an increased risk of homelessness, violations of probation, and/or new arrests. Every organization³ interviewed noted an immense need for housing support, with this topic coming up 48 times across the 24 interviews.

While it was generally noted that there is an overall affordable housing shortage, providers spoke specifically to the difficulty certain groups have finding stable, affordable housing. Sex offenders, those living with disability (mental and physical), LGBTQ+, and elderly reentrants are among the populations that are often overlooked or excluded from affordable housing opportunities. In addition, providers expressed difficulty both securing public housing for and partnering with landlords to accommodate individuals with criminal records.

Sex offenders, those living with disability (mental and physical), LGBTQ+, and elderly reentrants are among the populations that are often overlooked or excluded from affordable housing opportunities.

Interviewees also emphasized the importance of meeting clients' basic needs, the most cited being food, clothing, shoes, cash, cell phone, bedding, and hygiene supplies. Some of these needs can be addressed by state provided social service programs, but interviewees noted that many of these services take time and require acquiring necessary documents, while these needs are often urgent. It can be difficult for reentrants to obtain these necessary documents (e.g. licenses, identification cards, birth certificates) due to time, financial, and accessibility constraints. DOC shared that there are processes in place to obtain vital documents at little to no cost; this presents an opportunity to educate providers who can advise reentrants to follow these processes.

3. Roman, C. G. (2004). Taking stock: Housing, homelessness, and prisoner reentry.

Service Provider Suggestions

The service providers interviewed offered ideas and opportunities to improve communications and partnership, including:



- Creation of greater incentives for landlords to accept Delaware State Housing Authority vouchers and provision of landlord education on the benefits of participation in the program. Some landlords have preconceived ideas about reentrants and education may strengthen the partnerships between landlords and service providers.
- Provision of educational programming for reentrants covering how to navigate the housing and renting markets. According to Delaware Public Media⁴ congregate shelter capacity decreased last year while homelessness increased by 35% compared to 2020. For those who have not participated in the renter/housing market in the past few years, the rapid increase in median rents can be disheartening and difficult to navigate.
- Extension of the COVID-era motel-voucher program as well as allowing for more flexible, longer-term use of the vouchers would support reentrants with obtaining emergency housing.
- Creation of emergency housing specific to reentrants to help traditionally excluded populations.
- Repurposing of abandoned housing to transitional housing.

Employment Support

What we heard

Employment is one of the most critical aspects of successful reentry. Without employment, the path towards growth and prosperity becomes significantly more arduous. Research has shown⁵ that employment is tied to lower rates of recidivism, and higher wages have been tied to lower rates of criminal activity.

4. "Annual Homelessness Count Shows Big Increase..." (2021). Delaware Public Media. <https://www.delawarepublic.org/delaware-headlines/2021-05-28/annual-homelessness-count-shows-big-increase-but-advocates-say-its-more-complicated>

5. Understanding the Challenges of Prisoner Reentry (2006). Urban Institute Justice Policy Center. <https://www.urban.org/sites/default/files/publication/42981/411289-Understanding-the-Challenges-of-Prisoner-Reentry.PDF>

The importance of providing employment support for reentrants was noted by 14 stakeholders, with an emphasis on the need for not only finding employment, but obtaining a job with a livable wage. With rents and prices rising nationwide and wages remaining stagnant, finding a job with a livable salary is essential. This need for employment is immediate upon release, as many expenses come due at that time including rent, child support, fees and fines, and more. This places great pressure on both reentrants and service providers to find immediate employment. One interviewee mentioned that reentrant bills add up so quickly upon release, that within a month the emergency support they had requested for that person is no longer sufficient to meet their needs.

In addition to a lack of well-paying jobs for reentrants, another barrier to employment observed by interviewees is the lack of skills training and personal development support. Ideally these services would be offered pre-release and include training in skills that are of interest to reentrants (outside of the service industry). Providers mentioned the usefulness of work release and work assignment programs while incarcerated. While job training and education are important, stakeholders emphasized that reentrants need paying work immediately upon release.

Service Provider Suggestions

The service providers interviewed offered ideas and opportunities to improve access to employment support, including:



- Increased access to vocational and apprenticeship programs for reentrants. Service providers also mentioned strengthening partnerships with trade organizations within the state to strengthen linkages.
- Expanded job coaching, career development support, and hard and soft skills training for reentrants, both pre- and post-release. Kentucky has created a “Prison-To-Work Pipeline” program that includes a virtual job skills program to familiarize reentrants with the demands of the workplace.
- Increased access to work-release programs, in-house certifications, and connections to willing employers.

6. “Gov. Beshear Launches Programs To Boost Workforce Participation” (2022). Kentucky’s Office of the Governor. <https://www.kentucky.gov/Pages/Activity-stream.aspx?n=GovernorBeshear&prId=1574>

Transportation Access

What we heard

Related to obtaining gainful employment, reentry service providers shared that many of their clients need better access to transportation to get to work and interviews, look for housing, seek medical care, and attend mandatory appointments. A few themes arose related to transportation, including a need for money to cover public transportation, education to understand the public transportation system, and support when public transportation is not available.

As discussed in the Service Provider Need section above, many of the funding sources available to reentry service providers in the state do not allow for coverage of basic needs such as transportation (e.g., bus passes). This leaves many clients without a reliable way to get to and from work or meetings with Probation and Parole officers. In addition, some clients have been incarcerated for a long period of time and no longer have a basic understanding of the public transportation system. Clients need support paying for essential transportation and learning how to use it.

There are also individuals, especially those in more rural parts of the state, who do not have access to public transportation. One interviewee noted, "Transportation is a big issue in Kent and Sussex; bus passes aren't always effective because bus stops are miles away." Another lamented, "A lot of times [clients] want to keep their job in Sussex, then they have to work at night, how will they get back and forth between Dover, and say, Rehoboth?"

“*Transportation is a big issue in Kent and Sussex; bus passes aren't always effective because bus stops are miles away.*”



Service Provider Suggestions

The service providers interviewed offered ideas and opportunities to improve access to transportation including:



- Providing wraparound programming at a central site to reduce trips. Being able to cluster multiple services in a single location (or general location) relieves the burden placed on reentrants, with respect to finances and time.
- Increased, flexible funding that allows providers to support transportation access. Many of the service providers we interviewed provide transportation services and funding these existing services will allow providers to increase capacity and cover more gaps.

Best practice research also identified another opportunity that was not mentioned during the interviews, but has been implemented by other states:

- Repurposing DOC credential cards to also be utilized as bus passes to provide a resource for those with lack of access to public transportation. This approach was used in Howard County, Maryland, where upon release from Howard County Detention Center, individuals are given a Reentry ID, which can be utilized as a bus pass for the first 60 days after release. A memorandum of understanding was established with the county transportation department to facilitate this.⁷

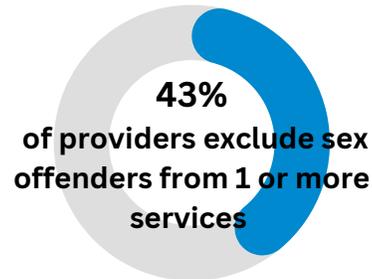
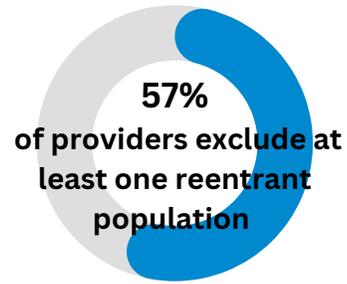
Service Accessibility

What we heard

Delaware has a robust network of useful services for reentrants, but not all reentrants have access to the services they need to successfully reintegrate into their communities. Access to services was a barrier that providers mentioned 24 times throughout stakeholder interviews. Three main barriers to accessibility arose during these conversations, including: 1. Eligibility exclusions, 2. Complexity of the system, and 3. Onerous requirements for services.

7. "Transportation After Incarceration" (2021). Policy Research Associates. <https://www.prainc.com/gains-transportation-after-incarceration/>

57% of providers shared that their services exclude at least one reentrant population, with 43% of providers excluding registered sex offenders from at least one service. Other excluded populations included those with HIV/AIDS and individuals that cannot complete activities of daily living. Nine interviewees mentioned a need for services that include sex offenders, especially housing. While not specifically excluded, other groups were identified as needing greater access to services including women, individuals with mental health needs, and individuals with disabilities.



Given that these groups are strongly represented in the reentrant population, it is essential that services are accessible to them. A 2012 National Inmate Survey⁸ found that 32% of prisoners and 40% of jail inmates reported having at least one disability. In 2016, according to the Bureau of Justice Statistics, 1,749 women were released from incarceration in Delaware. A system that cannot accommodate these groups will inevitably limit access to essential services for reentrants.

“
If you have not been on probation there is no way to understand the level of fear that probation puts into you. There are a crazy amount of rules.
”

Two other barriers identified by service providers include the complexity of navigating reentry as well as onerous requirements placed on reentrants after release. One interviewee noted, when speaking about the probation system, "if you have not been on probation there is no way to understand the level of fear that probation puts into you. There are a crazy amount of rules."

Providers noted that clients struggle to both keep up with rules and requirements post-release and juggle those commitments with others (e.g., employment). Another shared that the lack of guidance around family reunification often leads to confusion and domestic disputes that result in Violations of Probation.

8. "Disabilities Among Prison and Jail Inmates, 2011-12" (2015). U.S. Bureau of Justice Statistics. <https://bjs.ojp.gov/content/pub/pdf/dpji1112.pdf>

Another spoke about the arduous requirements placed on reentrants who participate in behavioral/mental health programs,

“ A lot don't want to continue with the work, because of the demands on them. They are ordered into 3 groups a week, have to go into aftercare; a great many of the homes they live in require 3 sessions a week. ”

In addition to navigating a new life outside of prison, these onerous and confusing requirements and systems can cause reentrants to shy away from programs that would support their successful reintegration.

Service Provider Suggestions

The service providers interviewed provided ideas and opportunities to improve access to services, including:



- Collaboration between service providers and DOC to improve the process for sharing TAPs.
- Advocacy for a change to the Federal policy that currently terminates Supplemental Security Income (SSI) benefits when inmates are incarcerated for over a year. When SSI benefits are suspended, they can be restarted with little delay. When the benefits are terminated, it can take months to resume, which is time reentrants simply do not have.

CONCLUSION

Reentry service providers across the state are dedicated to providing the best services possible to meet the needs of reentrants. The commissioning of this report by DCRC, involvement of the Landscape Analysis Working Group, and high participation rate of providers show the great dedication that all stakeholders in the Delaware reentry landscape have to serving this population.

Through this analysis, key needs were identified that, if met, will allow these providers to more effectively and efficiently provide services. These needs include access to more flexible and equitable funding; greater communication and partnership between stakeholders; and improved data collection and sharing processes. While reentrants have not yet been engaged on these topics, service providers also offered their unique perspective on the greatest needs of their clients. These include more support for housing, basic needs, employment, and transportation as well as improved access to services more generally.

An important finding from this Analysis is the disconnect in information between government and service providers. Throughout the data collection process, service providers shared needs and opportunities to improve reentry for clients across Delaware. In conversations with the Department of Corrections (DOC) it became clear that some of these identified opportunities are already underway or currently have a process in place. It stands to reason that better communication of processes, programs, and other key information is necessary between DOC and reentry providers to ensure clients are receiving the most effective and efficient services. It may also be the case that some of these processes should be reevaluated for efficacy to understand if they can be improved upon.

There is still work to do to understand the full reentry landscape in Delaware, including both its assets and gaps. This Analysis is part one of a two part initiative that will continue in 2023, where reentrant stakeholders will be engaged and service providers will continue to provide important information to fill in missing information about services. The culmination of this work will ideally allow the reentry community to better understand services that are available (at what capacity and to whom), gaps in the system that need to be addressed, and opportunities for moving toward a more unified and effective system.

This Analysis would not have been possible without the time and dedication of DCRC, Social Contract, the Landscape Analysis Working Group, and the 24 organizations that provided insights.

APPENDICES

APPENDIX A LANDSCAPE ANALYSIS WORKING GROUP

MEMBERS

AGENCY

Alonna Berry	Office of the Governor
Corie Priest	Department of Justice
Gina Aurora	Department of Labor
Jessica Cline	Department of Correction
Joanna Champney	Department of Health & Social Services
Karryl Hubbard	Department of Labor
Lisa A. Minutola	Office of Defense Services
Maureen Whelan	Department of Education
Michelle Jewell	Office of the Governor
Valarie Tickle	Criminal Justice Council

**APPENDIX B
STAKEHOLDERS ENGAGED FOR ANALYSIS**

Organization	Survey	Interview
Brandywine Counseling	X	X
Bridge Clinic	X	X
Centurion	X	X
Centurion	X	X
Community Corrections Treatment Center*	X	X
Delaware Center for Justice	X	X
DHHS CPSU		X
Dover Interfaith		X
First State Community Action		X
Heartlight Foundation	X	X
Hudson Behavioral Health	X	X
Impact Life	X	X
MHP		X
PFJ Client Advocates		X
Plummer County Correctional Center*	X	X
Project New Start	X	X
Refuge/Aquilla	X	X
Salvation Army	X	X
The Friendship House	X	X
The Way Home		X
University of Delaware**		X
Veterans Affairs		X
West End Neighborhood House	X	X
YWCA	X	X

*CCTC and PCCC are DOC Correctional Facilities

**University of Delaware is a reentry partner, but not a service provider

**APPENDIX C
INTERVIEW GUIDE**

Topic	Questions
Populations Served	<p>What is client eligibility for your services? Do you differentiate clients based on their level of risk [to recidivate]? If so, how do you know their level of risk? Are certain populations ineligible to receive your your services i.e. SO's, SPMI, transgender, other? Why? Do you specialize in serving a specific client population? (e.g., veterans, elderly, disabled, transgendered, HIV/AIDS, SPMI, substance abuse, etc.)? Tell me about your staff make-up. How many case managers? Peers? Other staff? Does your staff have caseloads? How do caseload assignments work? How many clients do you actively serve? Are you at capacity? Can you serve more people?</p>
Menu of Services	<p>What types of reentry services do you provide in-house? Are there specific services that you do not provide? For services that you do not provide, do you make referrals to outside agencies? If so...which services do you refer clients to most often? How do you track referrals/data? Do you have any official partnerships with outside agencies (e.g., MOUs, joint grantees)? Do you communicate with partners about client services/progress? If so, how? Do you plan to offer additional services in the future? Why? Do you plan to cut services in the future? Why?</p>
Reentrant Needs & Barriers	<p>How do you assess/determine the needs of your clients? What are the most common needs that clients present? What are the most difficult reentry barriers to navigate from your perspective/role? What external resources do you find the most helpful in addressing client needs, (outside funding assistance, free resources, etc.)? What resources do you utilize most frequently? Are there resources missing from the local community? If so... What resources do you think need to be more available?</p>

**APPENDIX C
INTERVIEW GUIDE**

<p>Funds Committed</p>	<p>What are the primary sources of funding for your reentry services? Philanthropic grants, State funding, federal grants, etc? Have you lost any sources of funding in the last few years? If so, how did that impact your organization/services? Have you gained new sources of funding in the last few years? If so, what have you funded with these new sources? What is the longevity of your funding? Are your services sustained due to grant funding or are there other streams of funding that will support services upon grants expiring? If you had a magic [money] wand, what would you fund to improve reentry services, (internal and external)?</p>
<p>Misc. Questions Optional</p>	<p>Have you participated in reentry studies in the past (e.g., landscape analysis)? If so, do you remember who conducted them? Do you have access to the reports/final product? Does your organization hire peer support specialists or reentrants to assist with service provision? If so, what does that look like?</p>

APPENDIX D SURVEY

1. What organization are you answering on behalf of?
2. Does your organization identify as a reentry service provider? Why or why not?
3. How would you define a reentry service provider?
4. Which of these reentry services did you provide in 2021? Please check any and all that apply (23 services with checkboxes for each.)
5. In 2021, how many clients who are reentrants utilized your services?
6. In 2021, how many of your services were open to reentrants?
7. In 2021, were certain reentrant populations ineligible to receive your services i.e. SO'S, veterans, elderly, disabled, transgender, individuals HIV/AIDS, SPMI, substance abuse, etc.? Why?
8. In 2021, did you specialize in serving a specific reentrant population? (e.g., SO'S, veterans, elderly, disabled, transgender, individuals with HIV/AIDS, SPMI, substance abuse, etc.)
9. In 2021, how many staff members did you employ total for your reentry related services?
10. In 2021, what services for reentrants did you make referrals for?
11. In 2021, what assessment tool(s) did you use to determine the needs of your reentrant clients?
12. In 2021, what funding shortfalls or gaps did you have for reentry related services, if any?
13. In 2021, how much did it cost for your organization to provide reentry-related services, per person?
14. How confident do you feel in the longevity and sustainability of your funding for reentry services? (Scale from 1-10 with 1 being No Confidence and 10 being Extremely Confident.)