Alternatives to Incarceration Working Group Meeting Notes
11/07/19
1:00 pm – 3:00 pm

Hubert H. Humphrey

Welcome and Introductions

Rigo facilitated voting member check-in introductions for the work group. Dr. Ross gave an opening talk about the necessity of finishing the recommendations before Hamii Sachi leaves her County appointment. Per Rigo, there are 105 approved recommendations. Rigo announced and played a video from Sheila Kuehl for the work group. He stated 33 out of the 35 Gender Ad Hoc recommendations were approved. More will be voted on today. Rigo mentioned public comment time will be after each recommendation in addition to the end.

He displayed the road map for the timeline for completion. He stated there will be one more meeting and if agenda not completed today, it will be tabled until the December 2019 meeting.

Dr. Ross spoke about the importance of the groups that the voting members represent. He spoke of the respective and collective responsibility of all members to endorse the work done by the group.

Gender/Sexual Orientation Presentation of Findings

Rigo introduced Michelle Parris who works with the Vera Institute. He said that following her presentation items could be discussed further, if voting members desire. Michelle introduced herself and thanked the group. She gave background on what the presentation will be about. She mentioned her acronyms and offered to answer all questions during and after her presentation. She mentioned the Gender Ad Hoc committee had 10 meetings altogether. They first identified the drivers of incarceration, then specific issues, developed recommendations tailored to the identified issues, and voted on what to bring forth after a consensus was reached. They know from research that the local data is like national statistics. She said the data is from the Sheriff’s office and Million Dollar Hoods. There are significant racial disparities. Black women represent 33% of all bookings and 9% of all incarcerated. Prostitution and solicitation charges are most common. Sex work is an issue that needs to be addressed. The minimum time spent for supervision violations for women is 13 days. Much is related to poverty and trauma. Many women cycle in and out for short periods of time that disrupts access to services, housing, work, and other things. 978 women are considered by the Sheriff’s Department to have mental health issues. Many are in financially precarious situations, leads to difficulty getting a job. There is no specific data on how many women in jail are parents. There are 50-70 pregnant women incarcerated at any given time. There are intergenerational cycles of incarceration.

The transition age youth issue needs to be addressed. Transgender women get a lot of discrimination regarding the assumption they are involved in sex work, which results in denial of housing rentals and mistreatment. There are requests for tailored parenting support. There is a lot of fear about separation from children. It is mentioned many aren’t really being offered services until incarceration.

In addition, a harm reduction, care first approach to substance abuse is the stance the committee takes. Traffic related offenses are burdening. There is a tremendous cost to people for these low-level
offenses. They want to address harms people endure. People with medical needs need consideration. Presenter, Ms. Parris went over the Cisgender women handout. She mentioned people are not identified because some information is not collected. She asked the members of the Gender Ad Hoc committee to comment on some of the recommendations before the work group. Ms. Prasad from the Center for Family Law volunteered to give context to Recommendation #7 for pregnant, lactating women and how their children are affected. ODR has a current pretrial diversion for pregnant people, but not for post-partum or lactating women. Restraints on pregnant and delivering inmates are still being used by officers. Increased release of stress hormones creates higher risk pregnancies.

A committee member commented that Los Angeles still has many barriers for LGBTQ+ community. There are ripple effects. Consider all the places we can intervene.

For recommendation 5, they want to create a single point of entry for people to get different services. Rigo asked the voting members if they had any questions on those recommendations.

Michelle Parris clarified that on page 2 of the LGBTQ+ handout, it was found that 58% had their first arrest under the age of 18.

An answer was given to a question about recommendation 2 on page 4. The committee wanted to identify a pathway to decriminalizing DUI.

There were no references to domestic violence as being a driver for black women in the recommendations and how it relates to trauma. Next, related to veterans, there is a recommendation around more intervention from State agencies to help them. The domestic violence piece was addressed by the Gender committee. Also related to Veterans, it was talked about to have the County work in conjunction with the federal government.

Rigo reminded the group that people can pull an item today for further discussion later.

Herb Hatanaka, a voting member, asked if we need to see the Gender committee’s recommendations as “new” now. He asked if they are amendments. Michelle mentioned many of them were related to the work done and specifically focus on those with behavioral health needs. Rigo pointed out that he was asking a “process” question, going beyond the committee’s recommendations.

Dr. Ross had a question about recommendation 5. “How far have we gotten on safe consumption sites, is it as far as we got on needle exchange programs? When do we approach the safe consumption sites, it’s allowed in other places, or is in the works?” Shoshana Scholar replied that “It is not neutral, but is controversial. The opioid epidemic has changed the conversation. People like to think of them as medically supervised sites.” She mentioned cities that are making attempts to implement them. Dr. Ross responded “The cities mentioned are the same cities in the lead for needle exchanges during the AIDS epidemic and when it was talked about the officials would lose their minds”.

Rigo asked voting members if they wanted to comment further, and/or leave things for the implementation discussion. He explained that if a recommendation is pulled it would then be deliberated on next month at the December meeting.

Rigo asked if members of the public had comments.

Joe Maizlish: It is a model that needs to be offered to all people in persecuted populations.
Bamby Salcedo of Trans-Latin@ Coalition: Thanked the group for consideration from work group process for the Gender committee.

Lex Stepling: “It has always worked to help people. The only thing that ever made it difficult is criminalization, NIMBYism and the violence from people not having drugs. It will take political will for it to be. The controversy around it is not going to derail the recommendation”.

Voting on New Recommendations:

Nobody blocked the motion and the voting commenced. The committee roll called their letter votes. They were all recorded on a flip chart.

The meeting break was announced with a restart time of 2:10 pm.

Community Engagement Presentation:

Next, the Community Engagement Ad Hoc committee spoke regarding the importance of community engagement especially for underserved communities. At the workshop events there was childcare, transportation, note-takers, and healers on site. The lead agencies recommended for the workshops were amazing. Over a decade of organizing has gone into this.

Mayra Ramirez mentioned displaying photos from the actual workshop events. The workshop photos were shown along with quotes from participants. She explained that there were two jail-based workshops in Men’s Central and another place. The other upcoming workshop will be in Pacoima with the date to be determined. There are also upcoming juvenile hall workshops. The agencies were thanked individually.

The key findings from the workshops were mentioned for the group. The quotes from participants that back up the recommendations was written verbatim and told to the group. Each workshop theme was said. Pre and post-release, employment and financial assistance for the court-ordered, and other needs were highlighted. There was a strong focus on hiring formerly incarcerated people and getting government contracts to hire people with lived-experiences, in addition to revision of the County contracting process. There is a need for more accessible legal services. They fulfil all class and rehab requirements and yet are still denied reunification with their kids. Housing, career development, trauma-informed care, and provider accountability were some of the needs identified during the workshops.

They want safe neighborhoods, recreational opportunities, youth programs and a list of more (shown in the slides). Over 400 people attended these workshops. The feedback heard supported 21 of the current recommendations that are already approved. There are 2 modifications to recommendations 2 and 4. To recommendation 2, they want to add families and support systems. For recommendation 14, affordable and recovery housing is needed. There needs to be a reentry service program implemented at Intercept 0 (encompassed in the slide presentation).

People are overwhelmed with court-requirements, fines and fees, mandated classes. There is a need for waivers for financial hardships.

In Intercept 4, it is needed that quick mental health assessments are conducted upon incarceration.

At Intercept 5, make sure all documents needed are obtained prior to release.
Dr. Ross congratulated them on the workshops.

Danielle Dupuy asked about in Intercept 1, regarding the connection to medical care and cultural appropriateness. It was mentioned that some recommendations from Gender Ad Hoc focus on the culturally appropriate care and treatment, so there was no need to duplicate it.

Voting member question: “Under Intercept 0, is there time to engage a focus group of community-based providers to ask them to identify contracting challenges and key points to implement?” Gayle Haberman responded that bringing community voice to providers is important and key in the implementation stage as a step”. Also, Diana Zuniga mentioned many of he committee members are representative of some of the providers from the community.

Rigo responded the contracting challenges have already been identified and the implementation planning process is in the works. The ability to organize a separate group of providers is not in the interest of time.

Question: “Why is it at Intercept 0?” Answer: Because Intercept 6 is considered “Release” and they are being distinguished in different ways. People need access to all the services in Intercept 0 before becoming justice-involved.

Question: “Can the language be changed regarding Intercept 5 documentation to ‘all individuals get assistance and information about securing pertinent documentation?’ Our goal is to get them out and not keep them there while they wait for the documentation. It is worded improperly”.

There should be a separate recommendation that there be a “warm hand-off” in Intercept 5.

Herb Hatanaka mentioned that because we are now also focused on specific populations, our approach is to establish a system of care with a comprehensive reentry program, not just for mental health issues.

Public Comment:

Comment: (Bamby Salcedo) The services that any provider gives should be in response to the needs of the community.

Comment: (Sheila Pinkel) People do not enter educational systems due to many problems.

Comment: It is confusing that the reentry recommendation is at Intercept 0

Gilbert Johnson (Community Coalition), former addict, formerly justice-involved, and prior foster youth “Recommendation 4 related to cultural competency, came up repeatedly, so it cannot be police doing mental health assessments”.

Comment: (Acknowledgment of the room) “It’s so important to discuss the political will. Haven’t seen many other intersections like this as committed and as passionate. It’s okay to celebrate this as a victory”.

Comment: “After folks get an education even with an incarceration background, they cannot get licensed or employed any way and they need support”.
Voting:

Dr. Bob Ross made a motion to approve the consent agenda minus Intercept 5. The voting members then gave their voting letters to express their level of consent. It was passed. Other items (4-5 items) will be tabled until December 13, 2019.

ATI Updates:

Karen and Diana closed out the meeting with a thank you for the group’s involvement. It was said that we are deep in implementation planning for all recommendations already approved. The plans will be shared for final review. There are meetings set up for the Funding and Data & Research group and the Data group is requesting training and support on completion of forms related to the plans. It is requested that anyone on the Data committee join an Intercept group.

Diana requested the “cross-walk” documents sent out be returned for review.

Joe Maizlish:” What qualifies someone for a committee and what doesn’t? There ought to be way to include people in them. Also, we have omitted the incarceration Intercept. It could be part of this diversion thing, can they become eligible by whatever standards, can they be included?”

Dr. Ross commented that the good original plan for today got even better. He was overcome with gratitude. He said the TCE is speaking with major studios to negotiate getting a screening of an important film based upon a memoir book.

Adjournment

Meeting was adjourned at 3:00 pm.

Voting Results:

Consent Agenda

- Recommendations from Gender/Sexual Orientation Workshops – Passed
  - A: 6
  - B: 15
  - C: 1
- Recommendations from Community Engagement Workshops – Passed
  - Removed #5
  - A: 14
  - B: 7
  - C: 2