SOUTH EAST TEXAS REGIONAL PLANNING COMMISSION

REGIONAL CRIMINAL JUSTICE PLAN 2019

A STRATEGIC PLAN FOR MEETING THE CRIMINAL JUSTICE NEEDS OF THE SOUTH EAST TEXAS REGION OF HARDIN, JEFFERSON AND ORANGE COUNTIES

SETRPC
SOUTH EAST TEXAS REGIONAL PLANNING COMMISSION
Table of Contents

03. Executive Summary
06. Regional Profile
10. Planning Team
16. Law Enforcement Priorities
28. Juvenile Justice Priorities
37. Victim Services Priorities
50. Mental Health & Substance Abuse Priorities
61. Regional Partnerships
67. Future Steps & Implementation
Executive Summary

The South East Texas Criminal Justice Strategic Plan (SETCJSP) 2019 identifies criminal justice priority gaps in services and possible solutions in the areas of law enforcement, juvenile justice, mental health/substance abuse and direct victims’ services for Hardin, Jefferson and Orange Counties. This regional plan was written at the directive of the Texas Office of the Governor, Criminal Justice Division and elicited participation and information from more than 75 South East Texas stakeholders representing forty-five (51) agencies including elected officials, service providers, law enforcement professionals, school districts, courts, corrections officers, faith organizations and the community at large.

The Southeast Texas Regional Criminal Justice Strategic Plan reflects the involvement of more than 75 stakeholders representing 51 agencies who invested time and effort to identify priorities in areas of juveniles, victim services, law enforcement and mental health/substance use disorders.

Goal:
The SETCJSP serves as a roadmap for future criminal justice activities in the Southeast Texas region. It identifies, in a coordinated, comprehensive and methodical manner, priority gaps in current criminal justice services. Possible solutions are included that would improve the quality of life for the estimated 395,965 people who call South East Texas home. The region covered by the SETCJSP consists of only 2,196 square miles, or less than 1% of the 268,561 square miles which make up Texas. However, it is the 6th most densely populated of the 24 regions in the state. The average population density in Texas is 105.2 people per square mile while in the Southeast Texas region it is 180.31 people per square mile. Therefore, projects initiated in South East Texas to remedy identified gaps in services have the potential to positively impact a large number of Texans.

Planning Process:
The SETCJSP 2019 is a comprehensive plan organized to address the current collective needs of the region including the three counties and 20 cities within. The SETCJSP is a major reevaluation and rewrite of the 2014 Plan and the subsequent updates in 2015, 2016, 2017, and 2018.  *Human trafficking gaps in services was a predominate theme throughout the 2019 Plan. Social service agencies assert, “In Southeast Texas, human trafficking is replacing what was once a large transport of drugs on I-10 between Houston to New Orleans.”*

Strategic Planning Assumptions:

- All information collected during the planning process was important, useful and worthy of noting in the plan. Priorities not currently meeting the threshold for inclusion in the regional plan may become priority in subsequent years as current priority objectives are achieved.
- **Sustainment** of current services in areas of criminal justice, juvenile justice, victims’ services and mental health/substance abuse is paramount. Progress in addressing gaps in services is predicated on maintaining those services currently in existence. Only by maintaining and building upon existing services can the region truly realize progress.
**Criminal Justice Vision:** Law enforcement professionals have access to equipment, services and training needed to ensure public safety, preserve life and protect property.

**Local Priorities:**
- Timely, expedient access to and sharing of data between public safety agencies in the region and state
- Access funding and equipment to emerging law enforcement technologies including fingerprint readers, license plate readers and driver license readers provided to officers in the field to identify individuals encountered
- Provide public safety radio coverage for 100% of the region
- Ensure safe and efficient mental health commitment warrant services; mental health intake processes; and mental health training for officers and consumers
- Forensic analysis capability for computer and cell phone evidence/availability to aid investigations and prosecution

**Juvenile Justice Vision:** Juveniles have access to comprehensive services that are culturally competent and restorative thus maximizing the likelihood they will exit the juvenile justice system and become productive, healthy community members.

**Local Priorities:**
- Substance abuse and secure residential mental health facilities for youth
- Affordable specialized counseling for juveniles and families
- Resources for youth with conduct/behavioral problems and their families
- Alcohol/substance abuse prevention programs; life skills classes and training for job skills
- Transportation of youth for treatment (medical, psychological, substance abuse) and classes (life skills, diversion)

**Victim Services Vision:** Victims of crime have access to comprehensive services, including immediate and restorative services that are culturally competent and address their individual needs.

**Local Priorities:**
- Enhance/expand existing victim services agencies that demonstrate a proven record of quality services
- Enhance Regional Interagency Coordination
- Ensure shelters/appropriate, alternate housing available for domestic violence, sexual assault and human trafficking victims including for victims with substance abuse issues
- Provide resources to crime victims and specialized training to crime victim providers that will render more effective navigation of the criminal justice system
- Deliver emergency and long-term services to meet the immediate and restorative needs of victims

**Mental Health/Substance Use Disorder Vision:** People in South East Texas have access to comprehensive services that address their specialized and individual mental health and substance abuse treatment needs.

**Local Priorities:**
- Need for additional mental health and substance abuse resources particularly within the community including additional services, transportation to services, jobs, social/emotional learning in the schools, and education
- Form a robust and comprehensive community collaboration (one body working together) to address mental health and substance use disorders and collaboratively seek out funding to address identified resource gaps
- Enhance mental health resources in every facet of mental health including a psychiatric crisis care center, access to psychologists, psychiatrists and counselors, particularly for those not involved in a criminal proceeding
- Provide additional law enforcement mental health officers with specialized training to address public safety issues involving mental health;
- Expand awareness and public outreach for both mental health and substance use disorders
Regional Profile

The South East Texas Region lies within the Gulf Coastal Plain in the southeastern portion of Texas. The region stretches from the shores of the Gulf of Mexico and Lake Sabine to the heavily forested Big Thicket in Hardin County. The three-county region (Hardin, Jefferson and Orange) encompasses an area of 2,196 square miles with an estimated of 395,965 citizens according to the July 2016 census data. The three central cities of the region (Beaumont, Port Arthur and Orange) contain over half of South East Texas’ population. Hardin County is the fastest growing county in the region. This highly industrialized, yet significantly agricultural region, is served by two navigable rivers (Sabine and Neches), which allow ocean-going vessels to transport, import and export trade.

The region has the distinction of being home to the Spindletop oilfield, discovered on a salt dome formation south of Beaumont in eastern Jefferson County on January 10, 1901, which marked the birth of the modern petroleum industry. The region remains critical to the petrochemical industry today. In fact, the region is the second largest industrial complex in the nation containing roughly 53 major facilities according to the South East Texas Plant Manager’s Forum.

Population Density by County

**Hardin**
- Population - 56,322
- Square Miles - 890.57
- Population Density - 61.3

**Jefferson**
- Population - 254,679
- Square Miles - 876.30
- Population Density - 287.90

**Orange**
- Population - 84,964
- Square Miles - 333.67
- Population Density - 245.30
Jurisdictions by County according to 2010 Census Data Information
Ethnicity by Region
According to 2010 Census Data Information

Ethnicity by County

Page | 9
Planning Team

In developing this Regional Plan, members of the team were divided into several focus groups for the purpose of narrowing the scope of research and data that are incorporated into the Plan. Some members may serve in multiple capacities/categories. Input from the original participants, listed below by discipline, was elicited for the 2019 Plan Update.

**Juvenile Services:**

Monica Kelley Hardin County Juvenile Probation/SETRPC CJAC Member
Craig Corder Orange County Probation Department/SETRPC CJAC Member
Juan Davita Mental Health Association
LaRonda Turner Jefferson County Juvenile Probation Office
Dennis White LIT
Jimmy LeBoeuf LIT Regional Police Academy
Deborah Shedrick Spindletop Center
John Nelson Jefferson County District Attorney’s Office
Sherilynn Goodman CLCI, Inc
Crystal Baloney Community in Schools (CIS)
Kim Phelan Attorney/Youth Advocate
Thira Simon Augusta’s Angels and Bridges of Hope
George Hartsfield Boy’s Haven

**Victim Services:**

Misty Craver Jefferson County Victims Assistance Center/SETRPC CJAC Member
Marion Tanner Garth House Child Advocacy Center/SETRPC CJAC Member
Deborah Shedrick Spindletop Center/SETRPC CJAC Member
Dale Williford Hardin County District Attorney’s Office/SETRPC CJAC Member
Brenda Garrison Child Abuse Forensic Services
Ms. French Bikers Against Child Abuse
Cheryl Williams Crisis Center of Southeast Texas
Laura Pape Hardin County Victim Assistance Center
Lisa McMillian Child Abuse and Forensic Services
Andrew McDonald Dream Center of Southeast Texas
Alma Garza-Cruz Catholic Charities of Southeast Texas
Darla Daigle Harvest House
Sandy Borne CASA of Southeast Texas
Carol Duhon Crisis Center of Southeast Texas
Lisa Boler Harvest House
Ave Jackson UT Physicians
Syrena Krummel CHRISTUS St Elizabeth
Lauren Kemp Jefferson County District Attorney’s Office
Theresa Grimes Harding County Victims Assistance Center
Codie Vasquez CASA of the Sabine Neches Region
Deborah Drago Southeast Texas Nonprofit Development Center
**LAW ENFORCEMENT:**

Gary Duncan  SETRPC CJAC Member/Citizen/Retired Law Enforcement
Clay Woodward  Jefferson County Sheriff’s Office/SETRPC CJAC Member
April Tolbert  Crime Stoppers of Southeast Texas
Aaron Tupper  EMC, Hardin County Office of Emergency Management
John Shauberger  Jefferson County Sheriff’s Office
Mike Zeto  City of Orange Police Department
Matt Frederick  City of West Orange Police Department
Kirk Rice  City of Groves Police Department
Joey Hargrove  Orange County Sheriff’s Office
Steve Lemons  Hardin County Sheriff’s Office
Tod McDowell  City of Bridge City Police Department
Danny Valdez  City of Beaumont Police Department
Jimmy LeBoeuf  Lamar Institute of Technology Regional Police Academy
Jacob Hoffman  City of Sour Lake Police Department
Aleta Cappen  City of Vidor Police Department
Fred Hanauer  City of Pinehurst Police Department
Rebecca Patin  Jefferson County Grant Manager
Gary Porter  Nederland Police Department

**MENTAL HEALTH AND SUBSTANCE USE DISORDER SERVICES:**

Dennis White  LIT and SETRPC CJAC Member
Clay Woodward  Jefferson County Sheriff’s Office/CJAC Member
Dena Smolsky  Spindletop Center
Sally Broussard  Baptist Hospital Behavioral Health
Cordella Lyon  Baptist Hospital Behavioral Health
Robin McCutcheon  Samaritan Counseling
Michael Connor  Dream Center of Southeast Texas
Carol Fetters  Innovations with Solutions
Bree Pierce  Mental Health Association of Southeast Texas
Juan Davita  Mental Health Association of Southeast Texas
Kari Dolan  Spindletop Center
Scott Strange  Spindletop Center
Jeff Menzer  Beaumont Police Department
Thomas Smith  Spindletop Center
Thomas Aardahl  Recovery Council of Southeast Texas
Juvenile Justice:
L-R George Hartsfield, Craig Corder, Kim Phelan, LaRonda Turner, Monica Kelley

Victim Services:
L-R Standing: Cordella Lyons, Tonya Loggins, Sandra Borne, Lisa McMillian, Marion Tanner, Angela Dillahunty, Dale Williford, Ave’ Jackson, Bonnie Spots, Darla Daigle, Lisa Boler
L-R Sitting: Ms. French, Brenda Garrison, Misty Craver
Law Enforcement:
L-R Standing: Matt Frederick, Clay Woodward, Aaron Tupper, Dennis Marlow, Mike Zeto, Aaron Burleson, Danny Sullins, Dennis White, Tim Ocnaschek, Dale Williford
L-R Sitting: Keith Reneau, Tod McDowell, Fred Hanauer, Gary Duncan, Michael Fratus, Stephanie Vanskike

Mental Health:
L-R Standing: Robin McCutcheon, Deborah Shedrick, Juan Davita, Carl White, Sally Broussard, Clay Woodward
L-R Sitting: Kari Dolan, Kristi Premeaux, Bree Pierce
SETRPC:
Criminal Justice and Homeland Security Division
Sue Landry, Director
Kaylan Arendale, Regional Emergency Planner

SETRPC:
Criminal Justice Intern:
McCartney Graves
Lamar University, Criminal Justice Major
Contributed for the SETRCJS Plan
In each of the areas on the following pages, problems are identified and data is included that supports both the existence and severity of gaps as they are found in South East Texas. Below the description and data is a discussion of the problems, the manner in which the problems are being addressed, and strategically how responses to these community problems could be improved.
Law Enforcement Priorities

Law enforcement (LE) planning meetings included participants from law enforcement representatives from all three counties and local agencies. A Regional Stakeholder’s Planning law enforcement meeting was held, as well. The Southeast Texas region consists of 20 law enforcement agencies.

During the planning meeting, LE participants were encouraged to identify the most critical gaps in the region. Below is a list of the regional priorities that were outlined in the meeting.

5 Regional Law Enforcement Priorities as Determined by Law Enforcement Planning Group:

<table>
<thead>
<tr>
<th>Priority #</th>
<th>Problem Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>#1</td>
<td>Provide public safety radio coverage for 100% of the region that includes P25 capable equipment for all responder and public safety personnel.</td>
</tr>
<tr>
<td>#2</td>
<td>Timely, expedient access to and sharing of data between public safety agencies in the region and state.</td>
</tr>
<tr>
<td>#3</td>
<td>Access funding and equipment to emerging law enforcement technologies including fingerprint readers, license plate readers, radios, laptops, body-worn cameras, and in-car videos. Up-to-date forensic analysis capabilities for computer and cell phone evidence that includes training for current and potential analysis personnel in order to stay relevant with always changing technology to aid investigation and prosecution.</td>
</tr>
<tr>
<td>#4</td>
<td>Ensure safe and efficient mental health commitment warrant services, mental health intake processes, and mental health training for officers and consumers. There is a need for mental health peace officers within each agency. Expand peer support groups for officers.</td>
</tr>
<tr>
<td>#5</td>
<td>Training availability through the LIT Regional Police Academy. There is a lack of available trainings, lack of facilities large enough to host large trainings, and financial considerations (overtime, cost of training). Especially training for Crisis Intervention Training, Human Trafficking, Civilian Interaction Training.</td>
</tr>
</tbody>
</table>

Law Enforcement Vision: Law enforcement professionals have access to equipment, services and training needed to ensure public safety, preserve life and protect property.

South East Texas Uniform Crime Report 2017 (Most Recent Available from TXDPS Website) By County

<table>
<thead>
<tr>
<th>Jurisdiction</th>
<th>Population</th>
<th>Murder</th>
<th>Rape</th>
<th>Robbery</th>
<th>Assault</th>
<th>Burglary</th>
<th>Larceny</th>
<th>Auto Theft</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hardin County</td>
<td>56,519</td>
<td>0</td>
<td>4</td>
<td>8</td>
<td>76</td>
<td>267</td>
<td>424</td>
<td>67</td>
</tr>
<tr>
<td>Jefferson County</td>
<td>254,794</td>
<td>23</td>
<td>153</td>
<td>440</td>
<td>1,275</td>
<td>2,359</td>
<td>5,632</td>
<td>696</td>
</tr>
<tr>
<td>Orange County</td>
<td>84,843</td>
<td>4</td>
<td>14</td>
<td>61</td>
<td>213</td>
<td>396</td>
<td>896</td>
<td>182</td>
</tr>
</tbody>
</table>

#1 Problem Identified:
Provide public safety radio coverage for 100% of the region that includes P25 capable equipment for all responder and public safety personnel.

**Data:**

1.1 **Interoperable communication equipment to all first responders**
Operable and interoperable communications are fundamental to an agency’s first responder’s ability to protect the public and its officers. They are vital in the region such Southeast Texas where, due to size, population density, and critical infrastructure, public safety agencies rely heavily on one another via mutual aid. In high speed pursuits crossing county lines, natural disasters (Southeast Texas has been impacted by six named storms since 2005, the most recent being Harvey in August 2017), or a terrorist event, communication plays a key role in response efforts and keeping the community safe.

Ensuring that all first responders within Southeast Texas are equipped with operational, P-25 complaint radio equipment allows for quick responses to incidents, enhances responder safety, and reduces risks to the citizens in the community.

1.2 **Maintenance upkeep and end-of-life equipment replacement.**
Through the SETRPC Regional Interoperable Communication Committee and regional collaboration, significant communication gaps have been closed for Hardin, Jefferson, and Orange counties. Although great progress has been made and continues to be made, yearly maintenance and upkeep as well as replacing end-of-life equipment so that the communication progress that has been made continues to improve and capabilities gaps continue to close.

**Possible Solution:**
Solutions have been found for communication issues that have been outlined in previous South East Texas Regional Criminal Justice Strategic Plan. These accomplishments have closed critical communication gaps within the region. The region now needs to continue to make progress in the area of individual radios—both portable and mobile—subscriber units in order to obtain P25 compliance. The following are needs in the region:
- Subscriber unit issues: ensuring all equipment is P25 compatible; replacing end-of-life equipment
- Hardin County needs a new tower, outdated tower and tower equipment
- FirstNet LTE Migration

**Recent Accomplishments:**
- Grant funds were secured to finish the final stages of building infrastructure and acquiring equipment to complete the region’s switch over to P-25
- Department of Public Safety willingness to place non-grant funded equipment (approximately $385,000) in the South East Texas region to close the gap and also willing to provide an additional $30,000 per year (approximately) for ten (10) years (approximately) to maintain the equipment.
- Willingness of South East Texas Regional Radio Stakeholders (SETRRS) to provide talk groups to the Department of Public Safety to close that agencies communication gaps.
- Port Security Grant funding in the amount of over $1,400,000 was received to erect a tower in Orange County—specifically, to address coverage gaps in the western portion of Orange County. Project was completed in 2017 closing coverage gaps in Orange County.
- Progress has been made to have interoperable communications between Southeast Texas jurisdictions and Louisiana. A link will be placed at the tower in Sulfur Louisiana which will provide communications with
Orange County. Once any problems in this process are worked out, the plan is to expand the system so all jurisdictions in Southeast Texas can seamlessly talk to all of Louisiana.

#2 Problem Identified:
Timely, expedient access to and sharing of data between public safety agencies in the region and state.

Data
2.1 Information sharing across local agencies throughout the region and the State
It is imperative to have timely access to data from various law enforcement agencies in the region with the criticality that exists in Southeast Texas. The region is home to several major cross-county highways including:
- Interstate 10 (east/west) which runs for 24 miles through Orange County and 36 miles through Jefferson County
- Highway 69 (north/south)
- Highway 96 (north/south) ties into Highway 59 and therefore considered a major thoroughfare as well

Law enforcement agencies throughout the region safeguard these highways and those who travel it. In 2018, the following were interdicted on Interstate 10:

Orange County Sheriff’s Office I-10 Highway Patrol Unit:

<table>
<thead>
<tr>
<th>Item Confiscated</th>
<th>Amount/Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>US Currency</td>
<td>$112,520.00</td>
</tr>
<tr>
<td>Vehicles</td>
<td>2</td>
</tr>
<tr>
<td>Marijuana</td>
<td>0</td>
</tr>
<tr>
<td>Cocaine</td>
<td>0.4 grams</td>
</tr>
<tr>
<td>Synthetic Cannabinoid</td>
<td>0</td>
</tr>
<tr>
<td>Heroin</td>
<td>0</td>
</tr>
<tr>
<td>Methamphetamine</td>
<td>5 pounds</td>
</tr>
</tbody>
</table>

City of Beaumont Police Department I-10 Interdictions:

<table>
<thead>
<tr>
<th>Item Confiscated</th>
<th>Amount/Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>US Currency</td>
<td>$173,339.00</td>
</tr>
<tr>
<td>Vehicles</td>
<td>2</td>
</tr>
<tr>
<td>Marijuana</td>
<td>0</td>
</tr>
<tr>
<td>Cocaine</td>
<td>0.4 grams</td>
</tr>
<tr>
<td>Synthetic Cannabinoid</td>
<td>0</td>
</tr>
<tr>
<td>Heroin</td>
<td>0</td>
</tr>
<tr>
<td>Methamphetamine</td>
<td>5 pounds</td>
</tr>
<tr>
<td>Alprazolam</td>
<td>278 grams</td>
</tr>
<tr>
<td>Oxycodone</td>
<td>805.7 grams</td>
</tr>
<tr>
<td>Promethazine</td>
<td>113 grams</td>
</tr>
<tr>
<td>Stolen Vehicles Recovered</td>
<td>3</td>
</tr>
<tr>
<td>Arrests</td>
<td>20</td>
</tr>
<tr>
<td>Guns</td>
<td>2 stolen / 2 seized</td>
</tr>
<tr>
<td>Illegal Aliens</td>
<td>4</td>
</tr>
</tbody>
</table>

Jefferson County Sheriff’s Office I-10 Interdictions:

<table>
<thead>
<tr>
<th>Item Confiscated</th>
<th>Amount/Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>US Currency</td>
<td>$1,173,339.00</td>
</tr>
<tr>
<td>Vehicles</td>
<td>2</td>
</tr>
<tr>
<td>Marijuana</td>
<td>0</td>
</tr>
<tr>
<td>Cocaine</td>
<td>0.4 grams</td>
</tr>
<tr>
<td>Synthetic Cannabinoid</td>
<td>0</td>
</tr>
<tr>
<td>Heroin</td>
<td>0</td>
</tr>
<tr>
<td>Methamphetamine</td>
<td>5 pounds</td>
</tr>
<tr>
<td>Marijuana</td>
<td>0</td>
</tr>
<tr>
<td>Cocaine</td>
<td>0.4 grams</td>
</tr>
<tr>
<td>Synthetic Cannabinoid</td>
<td>0</td>
</tr>
<tr>
<td>Heroin</td>
<td>0</td>
</tr>
<tr>
<td>Methamphetamine</td>
<td>5 pounds</td>
</tr>
<tr>
<td>Oxytocodone</td>
<td>805.7 grams</td>
</tr>
<tr>
<td>Promethazine</td>
<td>113 grams</td>
</tr>
<tr>
<td>Stolen Vehicles Recovered</td>
<td>3</td>
</tr>
<tr>
<td>Arrests</td>
<td>20</td>
</tr>
<tr>
<td>Guns</td>
<td>2 stolen / 2 seized</td>
</tr>
<tr>
<td>Illegal Aliens</td>
<td>4</td>
</tr>
</tbody>
</table>
### Arrests

<table>
<thead>
<tr>
<th>Item</th>
<th>Quantity</th>
</tr>
</thead>
<tbody>
<tr>
<td>Currency</td>
<td>$31,719</td>
</tr>
<tr>
<td>Vehicles</td>
<td>0</td>
</tr>
<tr>
<td>Marijuana</td>
<td>18.31 pounds</td>
</tr>
<tr>
<td>Cocaine</td>
<td>8.907 pounds</td>
</tr>
<tr>
<td>Heroin</td>
<td>2.204 grams</td>
</tr>
<tr>
<td>Codeine</td>
<td>0</td>
</tr>
<tr>
<td>Methamphetamine</td>
<td>11.928 pounds / 16 gallons / 197du</td>
</tr>
</tbody>
</table>

The ability to share information between law enforcement agencies within the region is fundamental to public safety.

**Possible Solution:**

Law enforcement agencies would like to acquire additional funding that would enable all public safety agencies in the region to easily, effectively, and expediently access individual files when law enforcement encounters occur. The following are needs in the region:

- Agencies need additional or to replace Mobile Data Terminals (MDTs), Mobile Data Computers (MDCs), Record Management Software
- Dispatch center with representatives from each agency so data could be shared easier. A centralized database with an integrated record management system.
- License Plate Readers are vendor specific, it would be beneficial if data collected could be shared between agencies regardless of vendor.
- Jefferson County Sheriff’s Office is in the process of becoming a stand-alone HIDTA (High Intensity Drug Trafficking Task Force). This will allow data sharing between Jefferson County SO and Houston, Jefferson County will then be able to share information throughout the region.

**#3 Problem Identified:**

Access funding and equipment for emerging law enforcement technologies including fingerprint readers, license plate readers, radios, laptops, body-worn cameras, and in-car videos. Up-to-date forensic analysis capabilities for computer and cell phone evidence that includes training for current and potential analysis personnel in order to stay relevant with always changing technology to aid investigation and prosecution.

**Data:**

3.1 **Limited funding to purchase law enforcement technologies and equipment**

Technology enables law enforcement agencies to work more effectively and efficiently to protect the public and save money. Technology is a personnel force multiplier. In a region with as much criticality to the state and nation as Southeast Texas, a major challenge has been and will continue to be keeping abreast of technology that can aid in the prevention of a crime or expedite the apprehension of actor(s) once the crime is committed. Only in this way can the highest level of public safety be attained.

Budget constraints for all local jurisdictions, especially smaller jurisdictions, keeps technology, even equipment that is considered “standard, day-to-day operational” out of reach. Acquiring new technologies or replacing outdated, end-of-life equipment can create a huge financial burden that agencies can’t afford. Equipment needs including fingerprint readers, license plate readers, radios, laptops, body-worn cameras, and in-car videos are necessary tools that aide law enforcement personnel in providing the services needed to keep the citizens within the community safe.
3.2 Forensic analysis capabilities

There is a shortage of forensic analysts in the region especially computer analysts. The need for cell phone data “dumps” for investigation and prosecution cases have drastically increased, these cases include child pornography, sexual assault, fraud, burglary, theft, criminal mischief, breach of computer security, false alarm, narcotics, prostitution, on-line solicitation of a minor, failure to register as a sex offender, telephone harassment, capital murder, homicide, suspicious death investigation, aggravated robbery, assault of a police officer, indecency with a child, and state and federal probation searches. Law enforcement agency personnel capabilities for forensic analysis:

- City of Vidor Police Department: 2 cell phone analysts; 0 computer analyst
- City of Beaumont Police Department: 2 analysts who work on both cell phones and computers
- Jefferson County: 1 cell phone analyst;
- Orange County: 1 cell phone analyst; 0 computer analyst
- Hardin County: 1 cell phone analyst; 0 computer analyst
- City of Orange Police Department: 2 cell phone analysts; 1 computer analyst

Agencies reported having a 1-2 week backlog for cell phone data extractions. Since many agencies don’t have computer analysts, computers are sent off for data extraction which can take 2-3 months, some agencies report 4-5 months. The City of Beaumont estimated about 45 cell phone data extractions for 2018 and 1 computer extraction. So far for 2019, Beaumont has done 4 computers, 4HDD, 1 Sony PlayStation 4, 1 SD Card, 1 USB Hard Drive 1TB, 2 USB Flash Drives, and 58 Cell Phones. Each phone extraction can take anywhere from 30 minutes to several hours if errors don’t occur. If errors do occur, a cell phone extraction could take an entire day. Jefferson County Sheriff's Department does about 20 cell phone extractions a year, however, they recently upgraded their forensic analysis technology and equipment and hope they will be able to do more, not only for their agency, they want to assist other local jurisdictions in getting data extractions in a timelier manner. Orange County does about 25 extractions per year, but expect to exceed that number for 2019.

Equipment to conduct the analysis is expensive, and there is not one piece of equipment that can accomplish everything, therefore, multiple pieces of expensive equipment are required. There are three levels of cell phone analysis.

- Level 1 – what everyone can see on their cell phone
- Level 2 – what everyone can see, plus the file system and deleted information
- Level 3 – full extraction of data including emails, pictures, and videos

In many cases, there are multiple pieces of technology equipment that must be examined. It is typical for one case to have a desktop, laptop, camera, phone, and multiple secure digital (SD) cards. Computers are very time consuming and take several months because of the amount of data that must be inspected. For example, a case was completed that had nine terabytes (9 trillion bytes) of data. There is a computer backlog that has 11 terabytes (11 trillion bytes) of data. On average, a computer analysis could take 40 hours; some analyses have been completed in 12-15 hours depending on the amount of data that must be analyzed.

Not only is maintaining the equipment a financial burden on agencies, training personnel to use the equipment is time consuming and expensive. A training for cell phone analysts takes up to 4 weeks and a training for computer analysts takes up to 5 weeks. Software technology can be limiting also, some software systems only extract certain data whereas other software systems are able to extract more data from the cell phone. Software upgrades and licensing are ongoing expenses. Certain software can be limiting on the type of information being extracted, therefore many agencies only have one type of software so not all data is accessible. Many agencies just don’t have enough staff to dedicate to forensic analysis creating more of a backlog of cases.

Possible Solution:
Acquire up-to-date equipment for all jurisdictions in the region, particularly the smaller agencies not currently connected to system. Continuance of maintenance contracts. Connect all Record Management Systems (RMS) in the region. Below is a list of equipment needs in the region, however, this is not an exhaustive list, additional equipment needs may not be listed:
- Subscriber units that are P25 compliant
- Mobile Data Terminals, Mobile Data Computers
- License Plate Readers
- Record Management Systems
- Body-Worn Cameras
- In-car Video
- Data Storage

Acquire additional or replace outdated forensic analysis equipment and fund training classes for law enforcement personnel on forensic analysis.

Jefferson County Sheriff’s Office is in the process of becoming a stand-alone HIDTA (High Intensity Drug Trafficking Task Force). This will allow data sharing between Jefferson County SO and Houston, Jefferson County will then be able to share information throughout the region.

#4 Problem Identified:
Ensure safe and efficient mental health commitment warrant services, mental health intake processes, and mental health training for officers and consumers. There is a need for mental health peace officers within each agency. Expand peer support groups for officers

**Data:**

4.1 Lack of Specialized Staff
There is a lack of specialized staff to execute warrant service and respond to mental health calls. Officers are pulled off patrol, often for hours at a time, to execute the warrants, as well as, called upon to respond to mental health calls in the normal course of their public safety duties. The mental health related calls, while representing a small percentage of the total, are disproportionate in the amount of time required to resolve them. They are also volatile and dangerous for the mentally ill individual and the officer. There are often times issues filling out Emergency Detention Orders (EDOs), if each agency had a mental health peace officer these orders could be done more efficiently. Here is the current number of mental health officers in the region per agency along with the number of mental health officer that are needed to efficiently handle their caseloads:

<table>
<thead>
<tr>
<th>Agency</th>
<th>Current # Mental Health Officer(s)</th>
<th>Needed # of Mental Health Officers</th>
</tr>
</thead>
<tbody>
<tr>
<td>Jefferson County SO</td>
<td>3</td>
<td>6</td>
</tr>
<tr>
<td>Orange County SO</td>
<td>1</td>
<td>6</td>
</tr>
<tr>
<td>Hardin County SO</td>
<td>1</td>
<td>4</td>
</tr>
<tr>
<td>Beaumont PD</td>
<td>1</td>
<td>8</td>
</tr>
<tr>
<td>Port Arthur PD</td>
<td>1</td>
<td>4</td>
</tr>
</tbody>
</table>

The Jefferson County Sheriff’s Office has a Mental Health Response Team funded by Spindletop MHMR that has been operational for a number of years now with noteworthy success in the areas of intervention and diversion with hundreds of individuals with mental health concerns being diverted from law enforcement agencies in Jefferson County. This is not only beneficial to public safety agencies but also those individuals who obtained the treatment they needed in an effective manner. The program is a “best practices” for the region and a goal is have such a specialized team in each county.
Officers are currently mandated to receive 16 hours of Crisis Intervention Training and most officers in the region obtain this training through the Regional Police Academy, which is partially funded through the Office of the Governor, Criminal Justice Division. The purpose of the Intermediate Crisis Intervention Training is to educate law enforcement officers about issues pertaining to crisis intervention techniques, especially in communicating with persons with a mental illness. Senate Bill 1473 amended 1701.253, Occupational Code, by requiring training in “de-escalation and crisis intervention techniques to facilitate interaction with persons with mental impairments.” Effective September 1, 2005, this training became a requirement for an intermediate or advanced certificate. A person licensed as a peace officer for more than two years, or holding an intermediate or higher certification, must complete this training.

During an incident in June 2019, Jefferson County Sheriff’s Department responded to a mental health call. The subject had known mental health issues, was on prescription medication for his mental health issues, was intoxicated, and threatening to harm himself. As deputies were arriving on scene, the subject was leaving in a vehicle and almost hit the patrol cars arriving at his residence. At this point, he started shooting at the deputies. This led to a chase from Jefferson County into Kountze, Hardin County. Department of Public Safety Officers were able to disable the vehicle with a spike strip. At this point, the armed suspect started firing a weapon again at law enforcement personnel and fled into a nearby wooded area. Because of the potential threat to the public, a shelter-in-place was set up for the surrounding neighborhoods. A helicopter was deployed as well as a canine unit. Law enforcement personnel from Jefferson County Sheriff’s Office, Hardin County Sheriff’s Office, Kountze Police Department, Lumberton Police Department, and DPS officers were involved. The suspect was eventually captured and brought to Jefferson County’s jail. After his psychological health was assessed, he was given a mental evaluation by a counselor at the jail. The suspect was able to post bond and at the time of the writing of this plan is not incarcerated.

During the incident, the mental health crisis unit was unavailable due to the time dispatch received the call. The local sheriff’s Office stated that due to budget constraints the mental health crisis team is not always called out because overtime costs become an issue for agencies. However, the mental health crisis team is informed of these types of incidents and follow up with the parties involved.

In June 2019, the Mental Health Liaison office with the Hardin County Sheriff’s Office was responding to a mental health call with a counselor from the Spindletop Center when the individual in crisis shot the Deputy with a crossbow. The Deputy returned fire injuring the man with non-life-threatening injuries.

Mental health calls are often volatile and unpredictable posing safety issues for all involved, including the law enforcement officers, crisis management team members, the individual in crisis, and the family and neighbors within the residence or in close proximity. Having an adequate number of Mental Health Liaison Officers for each agency and having all law enforcement officer trained to handle these types of incidents helps de-escalate the situation ensuring the safety of all those involved.

4.2 Expedited Medical Evaluation

The mental health population has increased, there is a need for mental health peace officers within each agency. While the consensus of the Law Enforcement Planning Team was that training, in general, is beneficial to officers, additional training in critical incident management will not address the root problem—the criminal justice system is increasingly being used to fix a problem that it was never designed, equipped, or trained to manage.
In order to obtain data to substantiate the magnitude of the problem in South East Texas, the number of calls and the amount of time spent per call was obtained for 2018. A cross-section of data specific to mental health calls from law enforcement agencies in the region, large to small, rural to urban, is presented below. **However, every law enforcement agency in the region stated that mental health call data is the most unreliable, underreported, and difficult to accurately capture in terms of the amount of manpower devoted per call.** The near impossibility of accurately capturing the amount of time law enforcement officers spent on mental health related calls is due to several factors like a dispatch center can receive calls such as disturbing the peace, public intoxication, terroristic threat, aggravated assault, etc. that are ultimately determined to be a mentally ill persons in crisis. Rarely are the records updated to reflect this once a call has been cleared. Another reason is that per safety protocols, two or three units respond to each mental health call. Therefore, simply assessing dispatch calls and calculating times from en route to cleared status does not accurately reflect the total time multiple officers are on the scene responding.

The local police departments and sheriff offices, at the request of SETRPC, agreed to dedicate considerable time cross-referencing calls against the number of units responding and the man hours devoted to each call. The goal was to ensure a more accurate reflection of the actual resources a law enforcement agency dedicated to mental health calls. The policy of most law enforcement agencies in the region, is that two and sometime three officers respond to a mental health call. This is for the safety of the officer as well as for the mentally ill person. The information is presented below:
Consider that, on average, mental health calls account for less than 1% of the total public safety calls to law enforcement agencies in Southeast Texas and one can see the disproportionate amount of law enforcement resources required to respond.

A peace officer who takes a person into custody under the Texas Health and Safety code shall immediately transport the apprehended person believed to have a mental illness and because of that mental illness there is substantial risk of serious harm to the person or to others unless the person is immediately restrained to the nearest appropriate inpatient mental health facility or a mental health facility deemed suitable by the local mental health authority, if an appropriate inpatient mental health facility is not available. In 2015 the local mental health authority deemed all hospital crisis care centers in the area appropriate mental health facilities. At this time the officers must bring the mentally ill individual to have the physiatrist and medical assessment
conducted at a local hospital crisis care center. Despite the fact that symptoms of psychiatric disturbance are considered emergency conditions under the Emergency Medical Treatment & Labor Act these emergencies are not given priority, therefore, the patient and the officer can wait hours before being seen by a physician…

Hours during which the patient can become more agitated and anxious, hours in which a person with a mental illness is believed to be a danger to themselves or others, is in close proximity to many others in a crowded crisis care center, hours in which the officer must remain with the individual idle, performing none of the specialized tasks for which he or she is trained, hours in which the officer is unavailable to protect the public safety of the larger community.

The Texas Health and Safety code directs A physician to examine the person as soon as possible within 12 hours after the time the person is apprehended by the peace officer and allows a person accepted for a preliminary examination to be detained in custody for no longer than 48 hours after the time the person is presented to the facility unless a written order for protective custody is obtained.

4.3 Increase Mental Health Facilities
There is a need for mental health facilities within the region and cooperation between the facilities and law enforcement to reduce the resource drain on already under-staffed law enforcement agencies. This correlates to the priority under the mental health/substance abuse discipline for sufficient inpatient and outpatient psychiatric beds to meet the needs in Southeast Texas. If a medically ill person brought to an crisis care center by law enforcement needs placement care, the hospital becomes responsible for finding alternate placement and secure transportation.

After the unfunded mandates of SB 1849 that requires county jails to give prisoners the ability to access a mental health professional at the jail through a telemental health service 24 hours a day. Local jails have become holding places for individuals suffering from mental health related issues. Jails and the staff within the jails are not adequately set up to administer the needs of individuals suffering from a mental health episode.

A diversion center would be very beneficial. This would allow the jails to not become overwhelmed with individuals who do not necessarily belong there and would allow individuals to get the appropriate care they need.

4.4 Expand Law Enforcement Peer Support Groups
Officer PTSD and officer mental health needs to be a priority. The City of Beaumont has a peer support group for officers. This peer-to-peer support group aids in the mental health of officers who have gone through a traumatic event, whether that be from responding to a disturbing scene, the loss of a partner, or any other incident. Nationwide there were 90 law enforcement suicides in 2018.

Although it is based out of the City of Beaumont, group members serve other local police departments in the region, it was suggested that a multi-agency, regional support group is needed. Recently, the group worked with the officer involved in the crossbow incident mentioned above. Funding for the group is needed for training additional team members including Critical Incident Stress Management (CISM).

Possible Solutions
A possible solution for the lack of specialized staff include having specialized law enforcement officers in each county dedicated to executing mental health warrants and responding to mental health calls. The National Alliance for Mental
Illness (NAMI) states the benefits of trained, specialized law enforcement officers dedicated to mental health related service calls include: enhanced public safety, cost effectiveness, reduction in injuries – to law enforcement personnel and the mentally ill individual, decrease in repeat calls, individuals obtain treatment needed from mental health facilities—not put in jail, reduction in jail costs, and improved quality of life for the community.

Changing policies within medical facilities would help elevate the time burden that law enforcement officers face when on a mental health related service call. Policy changes within the medical facilities which provide the psychiatric inpatient treatment that would aid officers including expedited assessment protocols for mentally ill patients accompanied by law.

Due to the lack of resources in the mental health field utilization of the resources that are available within the region are important to the success of the safety and treatment of all involved. The Spindletop Center Mobile Crisis Outreach Team can help assists and transport a mentally ill individual when they are not a danger to themselves or others. The ASAP Team (Assist, Stabilize, and Prevention) are available Monday-Friday from 8am-5pm to help with transportation. This team consists of a law enforcement officer and a qualified mental health professional. The region does need more psychiatric beds, more mental health workers, and sufficient resources needed in order to meet the demand.

Solutions to this problem lie beyond the scope of the region/local criminal justice system ability to impact. It is a systemic problem within the mental health system with the net result being a shift in responsibility to law enforcement.

“As the mental health system continues to refuse to treat the most seriously ill, they become the police’s responsibility. It is often a dangerous responsibility because individuals who refuse treatment may not be taken into custody or to a hospital until after they become a danger to self or others. Rather than prevent violence, the law requires it. This means officers are hurt or killed. Other times, it is the person with mental illness who is hurt or killed. Many mental health advocates blame police for these incidents. We believe the fault is within the mental health system*. Almost all these individuals were known to be mentally ill but were not receiving treatment.” (Mental Illness Policy.org) *Unless otherwise noted, emphasis added by SETRPC.

“Law enforcement professionals provide up to one-third of all emergency mental health referrals. They interact with more persons with mental illness than any other occupational group outside the mental health field. They are often the first to respond to a mentally ill person in crisis and are called on to determine if and when a person should be referred for mental health treatment.” (Journal of American Academy of Psychiatry and the Law Online 2005)

**Problem Identified:**
Training availability through the LIT Regional Police Academy. There is a lack of available trainings, lack of facilities large enough to host large trainings, and financial considerations (overtime, cost of training). Especially training for Crisis Intervention Training, Human Trafficking, Civilian Interaction Training

**Data:**

**5.1 Training availability for local law enforcement personnel**
In the Southeast Texas Region, we are lucky enough to have the Lamar Institute of Technology (LIT) Regional Police Academy. The LIT Police Academy offers basic cadet training as well as continuous education training for licensed peace officers. There is a great need for specialized training in the region. These training classes are out of reach due to funding limitation. The Police Academy tries to offer training on a 2-year cycle, however, classes are not always available. DPS has one of the best human trafficking trainings that are being offered but it is really difficult to get it scheduled, LIT has been trying over a year and has yet to be able to offer that training to local law enforcement personnel in the region. More sessions and additional instructors are needed for Crisis Intervention Training (CIT) and Civilian Interaction Training Program (CITP), Specific training is also needed for law enforcement personnel that respond to calls to a school or that hold an “extra
job” at a school. There are required courses that identify special limitations regarding schools. Additional or more frequent mental health courses are also needed in the region.

Not only is getting courses to the region sometimes difficult, there are also space limitations. Even when courses allow open enrollment, local facilities cannot accommodate the number of law enforcement personnel wanting to attend. This creates a problem with ensuring that all local law enforcement meets the TCOLE requirements for training.

5.2 Basic Cadet Recruitment
Low recruitment has been a growing issue for the LIT Police Academy. There has been a significant drop in the number of people interested in becoming a law enforcement officer. A big factor in the decrease of cadet enrollment is that the region is currently experiencing rapid growth in the refinery and chemical plant fields due to expansion projects. These jobs offer higher salaries which is enticing to young men and women considering career paths. The lack of cadets is causing issues for smaller agencies who can’t afford to sponsor a cadet. Agencies who don’t sponsor an individual attending the LIT Police Academy hire those considered “independent” after graduation. There are fewer “independent” cadets to choose from. Recruiting men and women to become interested in a career in law enforcement has become a priority for the LIT Police Academy.

Possible Solution:
Possible solutions include having popular training courses offered more frequently and in locations that can occupy large numbers of attendees. Train additional instructors so that more training courses can be offered. Enable the premier guest speakers and instructors to be able to come back to the region for local law enforcement training.

Other Noteworthy Regional Law Enforcement Initiatives

- Regional Police Academy will offer mental health training for law enforcement officers a couple of times per year to meet the demand
- Jefferson County District Attorney’s Office will expand the digital search warrant initiative beyond blood warrants to include cell phone warrants and other areas of routine need
- Jefferson County will share the template and provide any other technical support needed for other law enforcement agencies in the region to initiate the No Refusal effort.
- Jefferson County District Attorney’s Office is also expanding their efforts to combat gang activity by using civil gang injunction statutes and other proactive tools to deter gang violence and recruitment efforts in Jefferson County.
- Jefferson County District Attorney’s Office is implementing improved strategies to assist law enforcement in efforts to reduce human trafficking, drug trafficking and related crime though a Crime Abatement Program (CAP). A successful CAP will target a geographical area heavily impacted by crime and utilize both civil nuisance abatement laws and criminal laws to alleviate and hopefully dismantle the targeted criminal element.
Juvenile Justice Priorities

The South East Texas region has juvenile justice detention centers in Jefferson and Hardin counties. In Orange County, there is no juvenile justice detention center, however, Orange County does collaborate with Jefferson and Hardin counties when detention services are needed. Twelve (12) individuals heavily involved in the youth of South East Texas participated in the Strategic Planning process including attending meetings, submitting surveys, and providing statistical information. Representation from all three juvenile probation departments, Jefferson County District Attorney’s Office, non-profit organizations, counselors, and concerned citizens all provided valuable input and identified gaps for juveniles in this region.

Juvenile justice professionals and concerned citizens reviewed the need and gaps outlined in the 2019 Criminal Justice Strategic Plan.

List of Juvenile Justice Priorities:
- Affordable, specialized counseling for juveniles
- Alcohol/Substance use disorder prevention programs; life skill classes; and training
- Need for residential placement facilities for youth that specialize in mental health, substance use disorder, human trafficking, and behavioral health issues
- Resources for youth with conduct/behavioral issues and their families
- Lack of resources for juvenile victims of human trafficking and child sex trafficking
- Resources are needed for aftercare and continuation treatment
- A regional juvenile justice probation detention center would be beneficial to the region
- Transportation of youth for treatment (medical, psychological, substance use disorder) and classes (life skills, diversion)

In recent meetings with the Juvenile Probation Offices in Hardin, Jefferson, and Orange counties, professionals shared that though there has been a decrease in the number of juveniles served through the probation departments, the cost associated per juvenile has increased substantially. The juveniles seen within the juvenile probation departments are experiencing more severe mental health issues that require psychological evaluations, extended periods of counseling, in many instances this involves very expensive residential placement treatment, and after-care treatments for not only the individual juveniles but also their family. The severity of the mental health, behavioral, and/or substance use disorder the juveniles in this region are facing is not only heartbreaking but frustrating due to the lack of resources available to get them the treatment they desperately need. If the region had easier and more affordable access to treatment resources, the increase in the severity of issues the juveniles are dealing with would not be at the magnitude it is now.

Below are the top five (5) priorities for juvenile justice in the South East Texas region:

<table>
<thead>
<tr>
<th>Priority #</th>
<th>Problem Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>#1</td>
<td>Need for affordable, specialized counseling for juveniles</td>
</tr>
</tbody>
</table>
Regional Juvenile Justice Priorities as Determined by Juvenile Justice Planning Group:

#1 Problem Identified:
Need for affordable, specialized counseling for juveniles.

Data:

1.1 There is a lack of Mental Health Providers in the Southeast Texas area and throughout the State of Texas. Counseling services in the Southeast Texas region are insufficient to meet the need. There is a large gap in the number of psychiatrists, professional counselors, therapists, and facilities available for the number of individuals that need some sort of treatment. There is a greater gap of professionals that are trained to treat juveniles, especially in specialized fields like sex offender therapy.

This shortage of treatment providers for juveniles does not address preventative or diversion services. There are numerous children who could have avoided entering the juvenile justice system had diversion resources such as counseling been proactively provided in schools or in after-school programs. There are numerous students who would greatly benefit from LPCs or counseling services being offered at school.

According to the Christus Community Health Needs Assessment and Implementation Plan of 2016, the rate of mental health providers per 100,000 population in the Southeast Texas Region was 79.2. The State of Texas rate is 102.3 per 100,000 and in Orange County the percentage is 23.9 per 100,000. Statistical information was not available for Hardin County.

1.2 The region needs more After Care programs for juveniles and their families.
There is an even greater shortage of available counseling services and resources for after-care programs and family focused treatment. Not only is the initial treatment for addressing mental health, behavioral, and substance/alcohol abuse a necessity for success so is ongoing aftercare treatment. This is not only essential for the juvenile but must be a priority for the family members as well. There have been countless youth who went through treatment, especially in a residential setting that showed extensive progress and signs of reform, however, once back in their old environment resorted back to old behavioral patterns that resulted in their involvement with the juvenile justice system. Continuous after care counseling allows juveniles to stay in touch with the tools and mechanisms they learned to deal with the situations they are faced with at home and school.

1.3 Financial burden of seeing a Mental Health Provider and involvement in After Care Programs.
Financial difficulty is another reason that individuals seeking counseling for a mental health related issues go untreated. Fortunately, mental health services can be provided to children who qualify for government assistance programs. However, there are many families who do not qualify for government assistance yet are not financial able to provide insurance for their family or pay for expensive treatment services.
According to the 2006-2010 estimates from the U.S. Census Bureau’s American Community Survey, 13.5% of Southeast Texas lives in poverty. Broken down by county, Jefferson County has 15.1% of families living in poverty; Hardin County has 10.1%; and Orange County has 11.5%.

Not only is the price of treatment unaffordable to many families and juveniles, just making the appointments can be a financial hardship. Many of the juveniles, especially those in rural areas of Hardin and Orange counties lack transportation. Public transportation is very limited in the Southeast Texas. If a family or juvenile seeking treatment does not have access to a vehicle or unable to afford the cost associated with a vehicle (gas, maintenance, repairs) they would be incapable of receiving the treatment they need.

Medication is also concern. Those families who struggle financially may not be able to afford the medication that a child needs. In so many cases, the child is in the juvenile justice system because of an undiagnosed mental health disorder. If the child is not already on medication, it is likely they will be if they qualify and are placed in residential placement. After placement, medication issues arise due to the extreme shortage of psychiatrists in the region. After a child leaves a residential treatment facility, the wait time to see a local psychiatrist can be so long that the medication runs out. This causes health problem as the child’s body has to re-adjust without the medication. This has the potential to unravel all of the progress the juvenile had made.

Possible Solutions:
The Spindletop Center received grant funds to train behavioral healthcare professionals, paraprofessionals, peer specialists, and volunteers using Cognitive Adaptation Therapy (CAT), Wellness Recovery Action Plan (WRAP), facilitator and patient training, and Cognitive Enhancement Therapy (CET). Although this is great for the region, additional services and facilities are still needed. Trust Based Relational Intervention is needed throughout the entire region. Jefferson County’s Juvenile Probation Officers are trained but Orange County’s and Harding County’s officers are not. Below is a list of possible solutions aimed at solving or at least diminishing this hardship from the region:
- Funding for additional staffing of existing facilities for mental health illnesses.
- Access to telepsychiatry for medication
- Funding for specialized services that include anger management classes and life skill classes; and programs offering treatment for sexual abuse survivors, sex offender treatment, and substance use disorder treatment.
- Funding that can provide financial assistance to parents for their children receiving mental health related treatment and medication.
- Provide funding to detention centers to allow for the hiring of Licensed Professional Counselors.

Jefferson County has the Special Needs Diversionary Program, the goal of the program is to prevent the removal of children with mental health needs from their home, and to prevent further involvement with the juvenile justice system. In 2018, there were a total of 33 juveniles served in this program. (Jefferson County Juvenile Probation Annual Report 2018)

In 2018, the Jefferson County Juvenile Probation Department, the Honorable Judge Randy Shelton, Spindletop Center, and I.E.A. developed the Mental Health Court to address the growing number of juveniles with mental health issues. Juveniles are court had 11 participants in 2018. Through the Mental Health Court, juveniles participate in a program through the Spindletop Center that involves counseling, life skill classes, medication management, and drug assessments. The program lasts about six months. Many of these juveniles do not have extensive criminal histories, they just suffer from mental health disorders that are not properly managed. This program allows the juvenile to be staffed by many agencies collaborating together to make a difference in the child’s life.
#2 Problem Identified:
Alcohol/substance use disorder prevention programs, life skill classes, and training for marketable job skills for juveniles currently in or at-risk of entering the juvenile justice system.

Data:
2.1 Alcohol/Substance use disorder Programs
The region is in need of targeted programs and activities that focus on substance and alcohol abuse education and prevention for juveniles in the system and at-risk teens. In 2018, according to the Texas Juvenile Justice Department Annual Report to the Governor and Legislative Budget Board, 22% of referrals in fiscal year 2018, the juvenile had a known substance use disorder problem; a need for substance use disorder services was suspected in another 10% of referrals. (www.tjjd.texas.gov, page 12). In the Southeast Texas Region, during the performance period of September 1, 2017-August 31, 2018 the Regional Juvenile Alternatives grant, funded through the Office of the Governor, Criminal Justice Division, 27% received counseling or treatment for substance use disorder. During the same period, 107 juveniles were given random drug screenings by one of the three county juvenile probation departments. In 2018, Jefferson County had 16 juveniles that participated in the Drug Court Program.

Over the past years, evidence-based programs have been replacing traditional substance use disorder and alcohol awareness programs in schools, detention centers, at-risk teen programs and in inpatient/outpatient treatment facilities. These programs focus more on high-risk youth rather than youth as a whole. This prevents exposure to low-risk youth while allowing for a more targeted educational program for those who really need it. Though some education is appropriate for all youth, it is important that the focus be on those who are likely to or have already abused drugs and/or alcohol.

2.2 Life Skills & Job Training
There is a lack of life skills classes and job training available to the youth of this region. Until June 2018, the Criminal Justice and Homeland Security Division at SETRPC administered the ARISE program, which is an evidenced-based life management skills curriculum to at-risk youth at three local alternative schools in the area. Once the program was no longer administered by SETRPC, the ARISE workbooks and material were permanently loaned to Beaumont ISD and Port Arthur ISD, so they could continue to use the program.

In recent meetings with the local juvenile probation departments of Jefferson, Hardin, and Orange counties there was discussion regarding the desperate need and importance of residential facilities offering not only solutions to behavioral, mental, and substance/alcohol abuse problems but that also offer a juvenile the chance to learn a vocation or trade skill. Giving troubled juveniles whom have been placed in residential treatment facilities the opportunity to learn a job skill could not only have an immediate positive affect on the child’s life but could provide the groundwork of a positive life change and job success, all while treating the behavioral, mental health, or substance/alcohol that the child is suffering with.

Possible Solutions:
Below is a list of possible solutions aimed at solving or at least diminishing this hardship from the region:
- Opportunities to provide vocational and trade skill education
- Case management and aftercare assistance through the Regional Juvenile Alternative grant
- Establish facilities that provide after school activities for at-risk youth that have already entered the system, especially for at-risk females.
- Integrate more evidence-based substance/alcohol abuse programs into the schools, detention centers and substance use and alcohol facilities. These programs need to start at a young age to educate youth on the risks of substance and alcohol use disorders.
- Educate family members of signs of substance and/or alcohol use disorder
- Provide educational programs in the schools for substance/alcohol use disorder.
- Youth Prevention Intervention – school-based program, built in curriculum with the schools. This program has not been offered in the region for 5 years.
- Educate and create awareness of services available in the region
- Create job training and job skill programs at the local colleges and technical schools where high school students can attend classes before enrollment to peak interests and educate in certain fields.

Land Manor is in the process of opening a residential male youth substance use disorder facility, they still need fencing, a security system, and a fire suppression system. There is a critical need for female juvenile substance use disorder facility, the closest is in Houston.

Bridge City ISD, Vidor ISD, and Nederland ISD has License Professional Counselors available through the schools. This is a need for every ISD in the region.

#3 Problem Identified:
Need for residential placement facilities for youth that specialize in mental health, substance use disorder, human trafficking, and behavioral health issues.

Data:
3.1 Mental Health Facilities
The South East Texas Region does not have a residential placement facility that treats mental health related issues for juveniles. In many cases, the root of the problem for a child placed in juvenile detention for poor conduct, behavioral issues and/or substance use disorder are also suffering from an undiagnosed or untreated mental disorder. Juvenile detention centers, in general, are not equipped to help a child who is suffering from an untreated mental health problem. Having a secured, residential treatment facility within the region would provide countless benefits, including, most importantly, the child would receive treatment to specifically address the problem. Secondly, treatment responsibility could shift from the detention center, who cannot effectively treat the problem, to the mental health system that can. Additional benefits include a regional facility that have the trained staff who can provide family counseling and after-care treatment.

There is a financial burden placed on the Jefferson, Hardin, and Orange Juvenile Probation Departments when a child is sent to a residential placement facility. On average, the cost of one of these treatment facilities is $162-$189 per day, per child and the average stay is between 180-270 days. In fiscal year 2018, 37% of the youth referred to juvenile probation departments throughout the state of Texas had identified mental health needs. In the region, through the juvenile probation departments of Jefferson, Hardin, and Orange counties 81 juveniles received counseling, therapy or other care performed by a licensed professional, and 18 juveniles received licensed treatment for mental health disorders from September 1, 2017 through August 31, 2018.

Not only is there an overall shortage of mental health treatment facilities (inpatient and outpatient) in the region, one of the mental health facilities open is struggling to stay operational, and certainly not because of lack of patients. With insurance changes, strict regulations and increased workloads, facilities are financially troubled and unable to provide the important, life-saving services that so many residents in Southeast Texas desperately need. Due to their enormous workload, these facilities are almost always at maximum capacity and cannot always except patients. When openings are available restrictions are placed on who is accepted, especially when it comes to those threatening to harm themselves or others. Although these precautions are completely necessary for the safety of the staff and other patients, but when a mentally ill juvenile is suffering from a mental episode, there needs to be someplace, nearby, that can treat the child, without restrictions, to provide adequate services to help get the crisis resolved and the juvenile the much-needed help.

3.2 Substance Use Disorder Facilities
There are limited resources regarding substance use disorder treatment for juveniles in the Southeast Texas region. There is a need for facilities that provide a combination of both outpatient and inpatient treatment, along with family counseling and education. With the shortage of facilities in this area, options are limited to what to do with a child needing treatment. In most situations, residential treatment facilities are voluntary and do not tolerate any misconduct. Detention centers will send juveniles to these facilities for treatment, but the juvenile is not required to stay and could possibly be forced to leave due to behavioral issues. In 2018, 22% of the 53,228 formal referrals to juvenile probation departments throughout the state of Texas, the juvenile had a known substance use disorder; a need for substance use disorder services was suspected in another 10% of referrals. ([www.tjjd.texas.gov](http://www.tjjd.texas.gov), page 12).

3.3 Dual Diagnosis Facilities
In cases where dual diagnoses are an issue, treatment for the mental health disease is accompanied by treatment for substance and/or alcohol use disorder. Local detention centers lack specialized professionals, trained staff, and resources to provide adequate treatment for these individuals. The Jefferson County Juvenile Detention Center is the only detention center in the region who has a full-time Licensed Professional Counselor (LPC) on staff. At this time, additional funding for counseling services in this area is greatly needed. With the national shortage of LPCs, counselors, psychiatrists, and specialists in the mental health field, the youth in need of treatment will suffer as their needs go unmet. The table below shows the number of providers per 10,000 children aged 0-17 years, as of 2015. Please note that in counties with fewer than 10,000 children, the number of providers may be overestimated. ([https://www.cdc.gov/childrensmentalhealth/stateprofiles-providers/texas/index.html](https://www.cdc.gov/childrensmentalhealth/stateprofiles-providers/texas/index.html))

<table>
<thead>
<tr>
<th>County</th>
<th>Pediatricians</th>
<th>Psychiatrists</th>
<th>Family Medicine Physicians</th>
<th>Licensed Social Workers</th>
<th>Psychologists</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hardin</td>
<td>0.7</td>
<td>0.0</td>
<td>6.5</td>
<td>2.9</td>
<td>0.0</td>
</tr>
<tr>
<td>Jefferson</td>
<td>4.9</td>
<td>2.8</td>
<td>9.7</td>
<td>6.0</td>
<td>4.4</td>
</tr>
<tr>
<td>Orange</td>
<td>1.5</td>
<td>0.0</td>
<td>6.8</td>
<td>0.5</td>
<td>1.5</td>
</tr>
</tbody>
</table>

3.4 Additional needs of residential placement
Specialized residential placement centers are not only needed for juveniles who suffer from mental health and substance/alcohol abuse but unfortunately, there is a growing need for a placement center that specializes in human trafficking and sex trafficking rehabilitation as well. It was stated during the Strategic Plan working group meetings that the most profound gap in housing is for juveniles human trafficking victims who suffer from substance use disorders.

Not only is there an extreme shortage of availability for juveniles needing residential placement treatment, the cost is sometimes too high for local juvenile probation departments. Local juvenile probation departments have stated due to budget restraints, juveniles who would greatly benefit from residential treatment are only provided local resources until the next budget year when funds will be available for treatment. This delays the juvenile from getting the treatment they need but also keeps the child in the same environment and home situation that is not always conducive to rehabilitation and positive change. Juveniles usually get more benefit out of placement facilities where they learn coping mechanisms and life skills in a positive, structured environment.
Another financial burden that local juvenile probation departments bear is that once a juvenile is in a placement facility, medication is no longer covered by Medicaid and it becomes the responsibility of the local juvenile probation department.

Possible Solutions:
The Spindletop Center has opened a 24/7 short-term respite/residential facility for youth aged 0-17 as a diversion from detention centers. Although this is great for the region, additional services and facilities are still needed. Below is a list of possible solutions aimed at solving or at least diminishing this hardship from the region:
- More facilities or the expansion of existing facilities that treat mentally ill and substance use disorder patients
- Having a Licensed Professional Counselor either on staff or on call for all juvenile justice facilities
- To help with the shortage of counselors, the State of Texas should provide incentives (scholarships, grants, lower student loan rates) for potential psychology/psychiatric students
- Establish telepsychiatry and telemedicine services throughout the region
- More education for families that are dealing with a child who suffers from a mental health issue
- Aftercare is needed for the juvenile and the family after the child returns home from placement
- Educated professionals staff at schools on how to handle mental health situations
- Re-entry into the school system. It is very difficult for a child that has been involved with the juvenile justice system to return to school.
- The integration of Evidence Based Practice programs treating mental illness and substance use disorder in schools, detention centers, substance use disorder and mental health facilities
- Facilities that offer more than just treatment but also offer trade and vocational skills
- Lack of specialized placement facilities, especially those who treat female youth who have been involved in human/sex trafficking. There are limited opportunities for placement. Specialized treatment can cost $195/day. The closest facility is in Houston, Texas-Santa Maria and Odyssey House.
- The length of care for specialized treatment programs are not long enough to adequately treat the juvenile. The length of the programs being offered need to be longer.
- The Buckner Center offers some services for children aging out of foster care, but many need more care than they are eligible to receive.
- Resources are made available for special need youth aging out of the foster care system
- Those youth who age out of the foster care system and are eligible for resources are made aware of the resources available
- Youth aging out of the foster care system with very high levels of care would have long-term options available for independent living.

#4 Problem Identified:
Resources for youth with conduct/behavioral issues and their families.

Data:
4.1 Lack of facilities for severe behavioral or conduct problems
Facilities equipped to handle juveniles with severe conduct and behavioral problems are scare in the state of Texas and nonexistent in the region. In some situations, a juvenile cannot be properly taken care of in the local detention centers because their behavior puts themselves, staff and others in danger. In these cases, the juvenile must be taken to a secure, residential facility that is suitable and best meets the needs of the juvenile.

<table>
<thead>
<tr>
<th>Jefferson County</th>
<th>Hardin County</th>
<th>Orange County</th>
</tr>
</thead>
<tbody>
<tr>
<td># of referrals</td>
<td># of referrals</td>
<td># of referrals</td>
</tr>
<tr>
<td>366</td>
<td>97</td>
<td>64</td>
</tr>
<tr>
<td># of youth on probation</td>
<td># of youth on probation</td>
<td># of youth on probation</td>
</tr>
<tr>
<td>215</td>
<td>69</td>
<td>28</td>
</tr>
</tbody>
</table>
### # of youth in detention centers
<table>
<thead>
<tr>
<th># of youth in detention centers</th>
<th># of youth in detention centers</th>
<th># of youth in detention centers</th>
<th># of youth in detention centers</th>
</tr>
</thead>
<tbody>
<tr>
<td>319</td>
<td>86</td>
<td>47</td>
<td></td>
</tr>
</tbody>
</table>

### # of youth placed in residential facilities
<table>
<thead>
<tr>
<th># of youth placed in residential facilities</th>
<th># of youth placed in residential facilities</th>
<th># of youth placed in residential facilities</th>
<th># of youth placed in residential facilities</th>
</tr>
</thead>
<tbody>
<tr>
<td>19</td>
<td>4</td>
<td>9</td>
<td></td>
</tr>
</tbody>
</table>

Once a juvenile is in a facility that is able to treat his/her specific needs and complete the program, the juvenile comes back to the same environment that lead them to the residential facility. Aftercare is essential to maintaining the focus of these youth, not only for the juvenile themselves, but also with the family. Family involvement and education is extremely important in the success of the child.

4.2 **Juvenile Justice Alternative Education Program (JJAEP) Campuses**

Resources for youth with conduct and behavioral problems are limited in the region. In Jefferson and Hardin counties, a Juvenile Justice Alternative Education Program (JJAEP) is available for students who continually misbehave in school or get charged with an expellable offense. Orange County does not have a JJAEP in the county. There are 31 operational JJAEPs in the State of Texas, 26 of which are mandatory, this includes Jefferson County, and 5 are discretionary, this includes Hardin County. Mandatory counties are monitored on-site at least every 3 years. Discretionary counties are monitored on-site every 2 years. With declining funding over the past few years, it is becoming increasingly difficult to operate the JJAEPs efficiently. It is important for these facilities to remain operational and capable of handling students’ disciplinary and educational needs when a situation arises.

**Possible Solutions:**

Below is a list of possible solutions aimed at solving or at least diminishing this hardship from the region:

- Funding provided by the Office of the Governor, Criminal Justice Division helps provide counseling services and summer classes with counseling available to Hardin and Jefferson Counties’ JJAEP schools.
- Alternatives for counties that do not meet the requirements for a JJAEP
- Funding to build and maintain a secure, residential facility for juveniles with extreme behavioral and conduct issues
- Funding to help with out of region and/or out-of-state residential placement cost for residential placement.
- Aftercare for the child and the families who are coming out of the juvenile justice system
- Afterschool programs and summer programs for at-risk youth; there are some programs but nothing after elementary age kids. Middle school and high school aged children need these programs.
- Possibly consider 45/15 school sessions for the region. This is year-round school with 45 days of school with a 15-day break. This reduces the amount of days kids are out for the summer, reducing the amount of time they could get into trouble.
- Educating school personnel of what programs are available throughout the region. Many school staff don’t know what’s available and therefore can’t share the information with parents. A better way to share available resources with the community.
- Cell phone and social media education for youth. This is done at some ISDs at the high school level but it needs to be introduced by the time a child is in middle school.

### #5 Problem Identified:

Lack of resources for juvenile victims of human trafficking and child sex trafficking.

**Data:**

5.1 **Limited resources for the growing number of juvenile victims involved in human and child sex trafficking**

It is estimated that more than 2 million children are exploited in a global commercial sex trade. (U.S. Department of State, 2011). This number is growing, and local victims need resources and services to not only get out of human trafficking but also recover from the trauma they have endured. 25-30% of reports of sex
Trafficking takes place in the state of Texas. 79,000 children a year are trafficked in Texas. (Harvest House). Texas houses the I-10 Corridor, which the Department of Justice has designated as the number one route for human trafficking. (Harvest House).

There are very limited resources available for youth victims involved in human trafficking and child sex trafficking. The South East Texas Region is very fortunate to have the Harvest House, a non-profit organization that is dedicated to providing sex trafficking advocacy, awareness, mentoring, prevention and community mobilization for adolescent sex trafficking victims and the Garth House, which since opening in June 1991, has interviewed over 11,400 children who may have been sexually or physically assaulted. These organizations provide essential services to our community, but victims don’t always know these resources are available and limited funds restrict the services and the number of juvenile victims that could be served.

When a juvenile is referred to a local juvenile probation department the State requires that a Commercial Sexual Exploitation Identification Tool be used to assess if the juvenile shows signs of being trafficked or if the child is at “high risk” of being trafficked. There are very limited placement facilities available for juvenile victims who have been trafficked. If the assessment determined the child is “high risk” but the child has never been trafficked, then residential placement might not be available. Juvenile Probation Departments are looking for answers on “what are the next steps” once assessment tools have identified victims or potential victims. There are not clear guidelines from the State nor are there adequate resources or funding available to get a child that has been trafficked the restorative services needed. The same is true for “high risk” youth. Counseling services and education programs might not be accessible to the “high risk” juveniles due to lack of availability in the region, transportation issues, and lack of family support. Since the Commercial Exploitation Identification Tool has been used in Jefferson County, 147 screenings have been completed and of those 15 juveniles scored “high for concern.” These juveniles are in need of educational and preventative services that will help keep that child out of trafficking. Jefferson County Juvenile Probation has referred youth that have been identified as “high risk” to the Harvest House. Through Harvest House the child is provided counseling services and if needed placement.

Education programs for youth informing them of the dangers of human trafficking is definitely a need in the region, but so is educating the community and public to identify the signs of juvenile trafficking victims. Teachers, hospital staff, youth leaders, and guidance counselors need specialized training in identifying signs or traits of victims. It was discussed in the Strategic Plan Planning Group meetings that trafficked juvenile victims now attend school like any other child in order to not raise suspicions. If teachers and school personnel were trained, they could address and potentially rescue these exploited juveniles.

Possible Solutions:
Maintain and expand organizations like the Garth House and Harvest House so they can provide services to youth trafficking victims in South East Texas. This would require additional funding.

Have the state provide clear guidance on “next steps” once a child has been identified as a victim of trafficking or is “high risk” to become a victim of trafficking.

There is a need for residential placement facilities within the state, especially for female victims, that specialize in the recovery and restorative needs of youth victims of human trafficking.

Educational programs and community awareness trainings, as well as specialized trainings for professions dealing with youth.
Victim Services Priorities

Victim Services Vision: Victims of crime have access to comprehensive services, including immediate and restorative services that are culturally competent and address their individual needs.

5 Regional Victims’ services Priorities as Determined by Victims’ services Planning Group:

<table>
<thead>
<tr>
<th>Priority #</th>
<th>Problem Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>#1</td>
<td>Enhance/expand existing victim services agencies that demonstrate a proven record of quality services</td>
</tr>
<tr>
<td>#2</td>
<td>Enhance Regional Interagency Coordination</td>
</tr>
<tr>
<td>#3</td>
<td>Ensure shelters/appropriate, alternate housing available for domestic violence, sexual assault and human trafficking victims including for victims with substance use disorder issues</td>
</tr>
<tr>
<td>#4</td>
<td>Provide resources to crime victims and specialized training to crime victim providers that will render more effective navigation of the criminal justice system</td>
</tr>
<tr>
<td>#5</td>
<td>Deliver emergency and long-term services to meet the immediate and restorative needs of victims</td>
</tr>
</tbody>
</table>

#1 Problem Identified:
Enhance/expand existing victim services agencies that demonstrate a proven record of quality services

Data:
1.1 Sustainment of current services to victims of crime:
The region has long-standing highly regarded agencies with a proven track record of providing quality services to victims of:
- Child abuse
- Sexual Assault
- Domestic Violence
- Crimes Against Women Prosecution
- Human Trafficking (children and adults)
- Victim Assistance Centers serving victims of all crime

All of the agencies currently funded have identified the need to sustain the level of services in the region. Without sustainment of the current services, any gains realized in the region regarding victims’ services will be lost. Those agencies that have demonstrated their ability to provide these high-quality services are a priority for continued funding and expansion wherever possible.

A sustainment challenge in the region pertains to Violence Against Women Act (VAWA) funding. Two counties in the region have excellent track records for very critical services in prosecution of crimes against women special prosecutors through VAWA funding. Both programs are needed and could expand to provide more services were more VAWA funding available. New programs meeting a unique need have also been identified as worthy and of benefit; however, with the VAWA funding already stretched beyond the regional allocation, expanding VAWA programs is increasingly difficult.
The need for sustainment and expansion of services provided through the VAWA funds is justified and quantifiable. Funding is all that is lacking. Southeast Texas is concerned that these funding limitations will continue to threaten the agencies’ ability to provide the unduplicated services to violent crimes against women. The prosecutors dedicated to domestic violence crimes which increases prosecution and victim awareness of available options remains a need and the region is very concerned that due to more VAWA requests and VAWA reduced funding, gains made in the region in this area could be lost.

Human trafficking of both adults and children is an emerging and rapidly growing problem. Local victims need resources and services to not only get out of human trafficking but also recover from the trauma they have endured. 25-30% of reports of sex trafficking take place in the state of Texas. Texas houses the I-10 Corridor, which the Department of Justice has designated as the number one route for human trafficking. (Harvest House). Southeast Texas is fortunate that a local non-profit, Harvest House, originally started by one person and funded solely by private contributions, recognized the prevalence of human trafficking and began a grassroots effort to identify and provide services to victims. Today, Harvest House provides advocacy, awareness, mentoring, prevention and community mobilization. Within the last 18 months, the effort to help human trafficking victims has grown substantially to include many county, state and local non-profits.

Few crimes have a more complicated dynamic than family/domestic violence. While men are the victims in some domestic violence cases, 85% of victims are female. A prosecutor dedicated solely to domestic violence crimes would, naturally, increase the number of cases that could/would be prosecuted because of the singular focus and mission. However, because this specialized prosecutor would have presumably received more training in and an increased understanding of domestic violence cases, he or she could also work more closely to enlist and maintain the cooperation of the victim. Currently, in many situations, victims feel as though they have one of two options: prosecute the crime or drop the charges. In fact, there are many other options available to domestic violence victims but due to the large caseloads in the courts, there is no one to explain this to them. Victims do not realize that there are other options whereby the batterer can be held accountable and can be influenced to acknowledge and change the abusive behavior. With a dedicated prosecutor, when a victim request that charges be dropped, the prosecutor could work to create an action plan for or educate the victim regarding the options open to them that would still hold the batterer accountable.

Holding the batterer accountable while supporting the victims not only benefits the primary crime victim, but the secondary victims, who are often children. Supporting the child victims of domestic violence is crucial if we hope to ever address the generational nature of domestic violence.

- Witnessing violence between one’s parents or caregivers is the strongest risk factor for transmitting violent behavior from one generation to the next (National Coalition Against Domestic Violence)
- Boys who witness domestic violence are twice as likely to abuse their partners and children when they become an adult (National Coalition Against Domestic Violence).
- Children suffer in a home where domestic violence lives—not only do they witness violence toward a parent they love, but in 30-60% of the cases, they are abused also (National Coalition Against Domestic Violence).
- A history of child abuse increases a person’s likelihood of being arrested by 53% (Penn State University).
- Violent juvenile delinquents are four times more likely than other youths to come from homes in which their fathers batter their mothers (Women’s’ Action Coalition).
- Children who experience violence at home often turn this violence out on the community. A high percentage of juvenile delinquents are battered children (Breaking the Cycle, 2002).
- 80% of men in prisons grew up in violent homes (Breaking the Cycle, 2002)
• Prosecution and/or options that hold the perpetrator accountable benefit us all.

**Jefferson County District Attorney’s Office Domestic Violence Data:**

<table>
<thead>
<tr>
<th>Year</th>
<th># Victims</th>
<th># Referred</th>
<th># Felony</th>
<th># Felony Convictions</th>
</tr>
</thead>
<tbody>
<tr>
<td>2018</td>
<td>802</td>
<td>356</td>
<td>279</td>
<td>107</td>
</tr>
<tr>
<td>2017</td>
<td>832</td>
<td>329</td>
<td>265</td>
<td>90</td>
</tr>
<tr>
<td>2016</td>
<td>381</td>
<td>381</td>
<td>126</td>
<td>65</td>
</tr>
<tr>
<td>2015</td>
<td>411</td>
<td>411</td>
<td>120</td>
<td>49</td>
</tr>
<tr>
<td>2014</td>
<td>459</td>
<td>459</td>
<td>78</td>
<td>52</td>
</tr>
<tr>
<td>2013</td>
<td>620</td>
<td>620</td>
<td>134</td>
<td>53</td>
</tr>
<tr>
<td>2012</td>
<td>634</td>
<td>634</td>
<td>142</td>
<td>54</td>
</tr>
<tr>
<td>2011</td>
<td>662</td>
<td>662</td>
<td>101</td>
<td>61</td>
</tr>
<tr>
<td>2010</td>
<td>1008</td>
<td>1008</td>
<td>99</td>
<td>48</td>
</tr>
<tr>
<td>2009</td>
<td>1083</td>
<td>1083</td>
<td>81</td>
<td></td>
</tr>
</tbody>
</table>

**Hardin County Statistical Data Dedicated Prosecutor Through VAWA:**

<table>
<thead>
<tr>
<th>Year</th>
<th>Total Cases Referred In</th>
<th>Transferred Cases</th>
<th>Rejected Cases</th>
<th>Convicted</th>
<th>Dismissed at Victims Request</th>
<th>Dismissed for Other Reasons</th>
</tr>
</thead>
<tbody>
<tr>
<td>2018</td>
<td>786</td>
<td>5</td>
<td>17</td>
<td>250</td>
<td>48</td>
<td>12</td>
</tr>
<tr>
<td>2017</td>
<td>605</td>
<td>20</td>
<td>4</td>
<td>260</td>
<td>13</td>
<td>320</td>
</tr>
<tr>
<td>2016</td>
<td>654</td>
<td>11</td>
<td>13</td>
<td>360</td>
<td>29</td>
<td>270</td>
</tr>
<tr>
<td>2015</td>
<td>524</td>
<td>33</td>
<td>3</td>
<td>279</td>
<td>40</td>
<td>372</td>
</tr>
<tr>
<td>2014</td>
<td>856</td>
<td>30</td>
<td>2</td>
<td>311</td>
<td>55</td>
<td>391</td>
</tr>
<tr>
<td>2013</td>
<td>871</td>
<td>27</td>
<td>2</td>
<td>257</td>
<td>25</td>
<td>457</td>
</tr>
</tbody>
</table>

1.2 **Enhancement/expansion of existing victim service agencies with demonstrated record of quality services**

Several agencies currently funded through VOCA grants have identified ways in which they can expand or enhance services to meet a growing gap in victims’ services—especially in the area of human trafficking. While these agencies are willing and able to expand, funding limitations—including cash match/in-kind requirements—may inhibit their ability to do so.

**Enhancement/Expansion Projects in Southeast Texas:**

The Hardin County Victims Assistance Center would like to implement a Domestic Violence Shelter in Hardin County with one wing set aside for Domestic Violence victims who also experience substance use issues.

The Hardin County District Attorney’s Office has identified greatly enhanced service delivery with the addition of a legal assistant to prepare motions, order, subpoenas, etc. and a VAWA investigator who will conduct special investigations, assist the VAWA prosecutor with jury selection, and other trial related activities thus expanding the capacity to solely prosecute crimes committed against women.

The Women and Children’s Shelter of Southeast Texas currently has 17 transitional housing units and could use another 10 units immediately. Additionally, with Rapid Rehousing for 3, 6 and 12 months, the ability to assist domestic violence victims, including families with children, would be increased exponentially.
Domestic violence victims being given priority when it comes to long term housing is also a need. Family Services, Inc. petitioned the Housing and Urban Development (HUD) for this priority and it was granted in Washington; however, it was declined by the Houston office.

Regarding human trafficking victims, two areas of need for both adult and child victims is:

Identification
Investigation

In August-September 2018, Garth House joined forces with the Jefferson County District Attorney’s Office to form STAAT—Southeast Texas Alliance Against Trafficking. STAAT brings together community organizations, service providers, Texas Department of Public Safety, Child Protective Services, law enforcement in Hardin, Jefferson and Orange Counties. The investigative partners of STAAT will work collaboratively to identify and investigate human trafficking cases. Garth House was recently awarded funding from the Office of Victims Crime (OVC) to meet an identified need for a Care Coordination services. This program will serve high risk youth and suspected trafficking victims such as those referred by social services agencies, Juvenile Probation, and children interviewed at Garth House.

The state now requires Juvenile Probation Offices to use the Commercial Sexual Exploitation Identification Tool (CSEIT) in an attempt to identify those youth entering the criminal justice system. This is the tool being used by Garth House also. However, victim advocates assert that many youths at risk do not come to the attention of the juvenile justice system and they would like to see additional agencies currently serving both child and adult victims of sexual assault expanded to have dedicated staff to address human trafficking identification and investigation. These agencies would work in collaboration with Garth House.

Human Trafficking victims are also in need of counselors providing one-on-one and group counseling, and support services to include mental health assessments, healthcare, assistance with identifying benefits, family intervention and assistance in obtaining employment are needed.

STAAT also brought to the region the Texas Office of the Attorney General’s Human Trafficking/Transnational Crimes Unit conduct a week-long City-Wide Immersion Training in June 2019. Approximately 672 people were trained including groups such as Child Protective Services, law enforcement, probation departments, educators, tattoo artists, hospitality workers and members of the public during a showing of “Be the One” film. This presented stories of everyday Texans who identified and reported human tracking and the survivors that were recovered as a result.

The Women’s and Children’s Shelter would like to seek funding to expand current services to provide a sexual assault advocate and sex trafficking advocate through VOCA based upon statistical data that 70% of the women and children entering the shelter have sexual assault as secondary victimization.

1.3 Greater community education regarding existing resources.

The agencies that service victims of crime continue to identify outreach and community education as a high priority need. Crime victims who have no knowledge of what services exist within the community remain unable to readily access those services. While the agencies serving victims of crime participate in community outreach, more education is needed. Of highest importance is the need for education of children in schools to empower them with information that will optimally prevent them from becoming a victim of human trafficking or guide them on what to do if they are victimized.

Victim identification was an on-going challenge articulated by regional crime victim advocates. Regarding human trafficking victims, one method identified as best practices has been putting advertisements or
promoting stories and editorials into English and non-English media to reach victims in ways that mainstream publicity may not. A particularly vulnerable population of human trafficking victims are non-English speaking victims and this method may be especially helpful in reaching those victims.

The need to educate both children and their parents about human trafficking indicators was identified. For example, some people think that human traffickers work predominantly with runaways, but a new trend is for the trafficker to allow the youth to attend school and traffic them after school hours so as not to alert authorities or raise suspicion.

Crime Victims Served by Victims Assistance Centers

Victims Served by Hardin County Victims’ Assistance Center

<table>
<thead>
<tr>
<th>Year</th>
<th>Total Number</th>
<th>Domestic Violence</th>
<th>Assault/Family/Dating Violence</th>
</tr>
</thead>
<tbody>
<tr>
<td>2018</td>
<td>491</td>
<td>306</td>
<td>192</td>
</tr>
<tr>
<td>2017</td>
<td>401</td>
<td>198</td>
<td></td>
</tr>
<tr>
<td>2016</td>
<td>289</td>
<td>193</td>
<td>239</td>
</tr>
<tr>
<td>2015</td>
<td>271</td>
<td>29</td>
<td>148</td>
</tr>
<tr>
<td>2013-2014</td>
<td>423</td>
<td>57</td>
<td>134</td>
</tr>
<tr>
<td>2012</td>
<td>414</td>
<td>66</td>
<td>155</td>
</tr>
<tr>
<td>2011</td>
<td>496</td>
<td>93</td>
<td>112</td>
</tr>
<tr>
<td>2010</td>
<td>375</td>
<td>64</td>
<td>81</td>
</tr>
</tbody>
</table>

Crime Victims Served by Jefferson County Victims’ Assistance Center

<table>
<thead>
<tr>
<th>Year</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>2018</td>
<td>1,071</td>
</tr>
<tr>
<td>2017</td>
<td>980</td>
</tr>
<tr>
<td>2016</td>
<td>1,166</td>
</tr>
<tr>
<td>2015</td>
<td>964</td>
</tr>
<tr>
<td>2014</td>
<td>1,046</td>
</tr>
<tr>
<td>2013</td>
<td>1,016</td>
</tr>
<tr>
<td>2012</td>
<td>1,043</td>
</tr>
</tbody>
</table>

Orange County Victims Assistance Coordinator (Orange County Has No Victim Assistance Center)

<table>
<thead>
<tr>
<th>Year</th>
<th>Total Number of Victims Served</th>
<th>Protective Orders Applied For</th>
<th>Protective Orders Received</th>
</tr>
</thead>
<tbody>
<tr>
<td>2018</td>
<td>500</td>
<td>67</td>
<td>17</td>
</tr>
<tr>
<td>2017</td>
<td>500</td>
<td>26</td>
<td>91</td>
</tr>
<tr>
<td>2016</td>
<td>500</td>
<td>160</td>
<td>32</td>
</tr>
</tbody>
</table>

Domestic Violence

Statistical Data from the Family Services Women and Children’s Shelter of South East Texas by Year
### DV Victims Served

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Hardin</td>
<td>28</td>
<td>39</td>
<td>30</td>
<td>35</td>
<td>17</td>
<td>32</td>
<td>28</td>
<td>22</td>
<td>32</td>
</tr>
<tr>
<td>Jefferson</td>
<td>628</td>
<td>597</td>
<td>458</td>
<td>461</td>
<td>464</td>
<td>388</td>
<td>345</td>
<td>429</td>
<td>680</td>
</tr>
<tr>
<td>Orange</td>
<td>75</td>
<td>90</td>
<td>47</td>
<td>34</td>
<td>41</td>
<td>43</td>
<td>39</td>
<td>66</td>
<td>88</td>
</tr>
<tr>
<td></td>
<td>731</td>
<td>726</td>
<td>535</td>
<td>499</td>
<td>522</td>
<td>463</td>
<td>412</td>
<td>517</td>
<td>800</td>
</tr>
</tbody>
</table>

### Other services provided by the Family Services Women and Children’s Shelter of Southeast Texas:

*Please note some victims receive more than one of the services below.*

<table>
<thead>
<tr>
<th>Type of Service</th>
<th>2010</th>
<th>2011</th>
<th>2012</th>
<th>2013</th>
<th>2014</th>
<th>2015</th>
<th>2016</th>
<th>2017</th>
<th>2018</th>
</tr>
</thead>
<tbody>
<tr>
<td>Information and Referral</td>
<td>380</td>
<td>351</td>
<td>300</td>
<td>220</td>
<td>656</td>
<td>513</td>
<td>511</td>
<td>753</td>
<td>800</td>
</tr>
<tr>
<td>Individual Counseling (Restorative)</td>
<td>75</td>
<td>85</td>
<td>66</td>
<td>42</td>
<td>500</td>
<td>513</td>
<td>531</td>
<td>517</td>
<td>705</td>
</tr>
<tr>
<td>Crisis Counseling (immediate)</td>
<td>455</td>
<td>350</td>
<td>317</td>
<td>440</td>
<td>522</td>
<td>500</td>
<td>522</td>
<td>517</td>
<td>705</td>
</tr>
</tbody>
</table>

### Sexual Assault

*Sexual Victims Served by County by the Crisis Center of Southeast Texas, Inc*

<table>
<thead>
<tr>
<th>Year</th>
<th>Hardin</th>
<th>Jefferson</th>
<th>Orange</th>
</tr>
</thead>
<tbody>
<tr>
<td>2018</td>
<td>28</td>
<td>265</td>
<td>92</td>
</tr>
<tr>
<td>2017</td>
<td>11</td>
<td>342</td>
<td>112</td>
</tr>
<tr>
<td>2016</td>
<td>19</td>
<td>325</td>
<td>73</td>
</tr>
<tr>
<td>2015</td>
<td>34</td>
<td>252</td>
<td>93</td>
</tr>
<tr>
<td>2014</td>
<td>51</td>
<td>299</td>
<td>67</td>
</tr>
<tr>
<td>2013</td>
<td>9</td>
<td>251</td>
<td>59</td>
</tr>
<tr>
<td>2012</td>
<td>17</td>
<td>295</td>
<td>63</td>
</tr>
<tr>
<td>2011</td>
<td>23</td>
<td>420</td>
<td>102</td>
</tr>
<tr>
<td>2010</td>
<td>29</td>
<td>402</td>
<td>73</td>
</tr>
<tr>
<td>2009</td>
<td>42</td>
<td>328</td>
<td>84</td>
</tr>
</tbody>
</table>

Other victims served outside of Jefferson, Hardin and Orange Counties: 174

### Child Abuse Victims

*Child Abuse Victims Served by Garth House Mickey Mchafty Children’s Advocacy Program, Inc.*

<table>
<thead>
<tr>
<th>Forensic Interviews</th>
</tr>
</thead>
<tbody>
<tr>
<td>Year</td>
</tr>
<tr>
<td>---------</td>
</tr>
<tr>
<td>2018**</td>
</tr>
<tr>
<td>2017</td>
</tr>
<tr>
<td>2016</td>
</tr>
<tr>
<td>2015</td>
</tr>
<tr>
<td>2014</td>
</tr>
</tbody>
</table>
Garth House has seen sharp increases in forensic interviews due to Senate Bill 1806 which stipulates that Child Protective Services reports made by professional reporters of sexual abuse and physical abuse have to be referred to a children’s advocacy center and the center will initiate a response through its multidisciplinary team.

### Counseling Services by Children Served

<table>
<thead>
<tr>
<th>Year</th>
<th>Hardin County</th>
<th>Jefferson County</th>
<th>Orange County</th>
</tr>
</thead>
<tbody>
<tr>
<td>2018</td>
<td>41</td>
<td>139</td>
<td>40</td>
</tr>
<tr>
<td>2017</td>
<td>8</td>
<td>101</td>
<td>40</td>
</tr>
<tr>
<td>2016</td>
<td>15</td>
<td>112</td>
<td>65</td>
</tr>
<tr>
<td>2015</td>
<td>27</td>
<td>131</td>
<td>73</td>
</tr>
<tr>
<td>2014</td>
<td>28</td>
<td>99</td>
<td>57</td>
</tr>
<tr>
<td>2012</td>
<td>38</td>
<td>128</td>
<td>52</td>
</tr>
<tr>
<td>2011</td>
<td>51</td>
<td>153</td>
<td>44</td>
</tr>
<tr>
<td>2010</td>
<td>35</td>
<td>44</td>
<td>55</td>
</tr>
</tbody>
</table>

### Garth House Counseling Sessions by County

<table>
<thead>
<tr>
<th>County</th>
<th>2013</th>
<th>2014</th>
<th>2015***</th>
<th>2016</th>
<th>2017</th>
<th>2018</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hardin</td>
<td>500</td>
<td>504</td>
<td>141</td>
<td>107</td>
<td>78</td>
<td>336</td>
</tr>
<tr>
<td>Jefferson</td>
<td>1300</td>
<td>1782</td>
<td>1089</td>
<td>792</td>
<td>883</td>
<td>1086</td>
</tr>
<tr>
<td>Orange</td>
<td>250</td>
<td>1026</td>
<td>510</td>
<td>487</td>
<td>379</td>
<td></td>
</tr>
</tbody>
</table>

Garth House counseling sessions have gone down due to two new types of Evident Based Counseling: Trauma Focused Cognitive Behavioral Therapy (TFCBT) and Parent Child Interactive Therapy (PCIT). Both therapies are very focused on trauma that has occurred and reduces the number of sessions that the client needs to complete a successful counseling experience.

### Hardin County Victim Assistance Center (Hardin County) And
Garth House Child Fatality Review Statistics

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Hardin</td>
<td>5</td>
<td>5</td>
<td>6</td>
<td>1</td>
<td>8</td>
<td>Not Available</td>
<td>1</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>Jefferson</td>
<td>38</td>
<td>45</td>
<td>30</td>
<td>46</td>
<td>49</td>
<td>39</td>
<td>12</td>
<td>16</td>
<td></td>
</tr>
<tr>
<td>Orange</td>
<td>16</td>
<td>14</td>
<td>10</td>
<td>18</td>
<td>22</td>
<td>14</td>
<td>Not Available</td>
<td>Not Available</td>
<td></td>
</tr>
</tbody>
</table>

2016-2018 Death Certificates are still coming in from the State to Garth House.

### Possible Solutions:

Page | 43
Considering a case-by-case waiver of cash match/in-kind requirements for agencies with a proven demonstration of quality services may enable the growth/expansion of these programs to meet additional victims’ services that may otherwise be unattainable.

Additional VAWA funding is a critical need to sustain and expand service delivery.

Specialized resources to aid in the identification and investigation of sexual exploitation cases. Agencies currently conducting public education and outreach expand services with an emphasis on crime prevention—especially with school age children. The belief is that information can help youth identify signs of human trafficking and thereby decrease the likelihood they may fall prey to trafficking ploys. As stated above, putting advertisements or promoting stories and editorials into English and non-English media to reach human trafficking victims in ways that mainstream publicity may not, especially vulnerable populations has been successful across the nation.

#2 Problem Identified:
Enhance Regional Interagency Coordination

Data:
2.1 Prevent victimization through education
Participants in the Criminal Justice Strategic Plan victims’ services working group continue to identify the need for enhanced regional interagency coordination as a need. This priority has improved somewhat with agencies working collaboratively as time and resources allow but additional coordination is needed.

Victims services planning participants felt that while crime victims are provided state crime victims pamphlets, a locally written culturally competent resource guide educating the public, especially school aged children, on how to prevent victimization would be of great benefit. Various agencies within the region are providing limited outreach. More educational outreach is needed.

2.2 Provide an integrated, robust comprehensive response including a list of resources available when victimization has occurred.
Task forces within the region do exist, but participants identified the need for a more comprehensive approach to responding to crime victims. Jefferson and Hardin Counties have Victims Assistance Centers, but Orange County does not. There is a crime victim liaison in Orange County, but no formal crime victims center.

As human trafficking is a being addressed in the region, it is worthy to note that the majority of victims receive assistance through law enforcement referrals or other service providers (95%) followed by word of mouth (54%) and outreach (51%). This data illustrates the importance of community outreach and education regarding available resources.

A Poignant Reminder: A very successful member of the crime victims’ services planning team shared during a planning meeting that “I was that kid”. She stated that she was raised in a home where child physical abuse and sexual abuse occurred. Because of her troubled homelife, she found herself as a teen moving toward involvement in the juvenile justice system. Because of caring adults who intervened on her behalf, she was able to not only overcome the difficulties of her formative years, but also became a law enforcement officer and now a victim’s advocate. It was a poignant reminder of why crime victim advocacy is so imperative.
#3 Problem Identified:
Ensure shelters/appropriate, alternate housing available for domestic violence, sexual assault and human trafficking victims including for victims with substance use disorder issues.

Data:
As in past years, adequate shelter and housing options continues to be a need in the region but since the last Criminal Justice Strategic Plan update, the need for alternate housing for victims who also suffer from substance use disorders has also been identified. According to the victims’ advocates participating in the Strategic Plan Working Group, a disproportionate number of victims do have substance use issues.

The Women’s and Children’s Shelter of Southeast Texas is an available resource for sexual assault and human trafficking victims if domestic violence is their primary victimization. However, according to the Family Services Executive Director, they strive to ascertain if sexual assault and human trafficking victims have also ever been the victims of domestic violence and most have. In these instances, the Women’s and Children’s Shelter will provide services and shelter even if the victims have substance use issues.

There is current insufficient short term (ie-transitional housing) and long-term housing (ie—permanent housing) for victims. The Women’s and Children’s Shelter currently have 17 transitional housing units available and could easily fill another 10 units for a total of 27 that could be utilized immediately. Rapid Rehousing can pay in advance rent for 3 months, 6 months or 12 months. The Women’s and Children’s Shelter has applied for Rapid Rehousing funds but a limitation on the funding is a 100% cash match requirement. As stated in Priority #1 under possible solutions, considering a case-by-case waiver of cash match/in-kind requirements for agencies with a proven demonstration of quality services may enable the growth/expansion of these programs to meet additional victims’ services that may otherwise be unattainable. Grant funds may be accessible to expand to address unmet needs but any cash match/in-kind requirement that is beyond the scope of what non-profit agencies can afford is self-limiting on the funding’s ability to make real headway except in the case of wealthy organizations. The smaller agencies that service both urban and rural areas that do not have a general revenue equal to these larger, wealthy organizations oftentimes has a far greater need.

Hardin County would like to see a dedicated domestic violence shelter in Hardin County with a dedicated wing for domestic violence victims who also suffer with substance use disorder issues.

Regarding human trafficking victims, specifically, a review of national best practices for helping human trafficking victims included a report by the WashACT Task Force (Washington based) that identified the greatest need for victims was for shelters designed to meet their special needs and experiences. Many victims are placed in women’s shelters, domestic violence shelters, transitional housing and rental apartments. It can be difficult for victims to reintegrate back into reality and shelters with those who have had similar experiences and understand can assist them as they journey back to life away from the human trafficking victimization. Local victims’ advocates say that more immediate housing is needed for human trafficking victims—especially those that are juveniles. They state that many victims fall just outside of the age of reaching adulthood.

Victims’ advocates estimate that approximately 75% of victims or someone in their family has substance use disorder issues. Also, it was stated in meetings that if there are substance use disorder issues, that the Women’s and Children’s Shelter will not take them. However, the Executive Director for Family Services, the agency that runs the Shelter, stated that the shelter does allow crime victims who also have substance use disorder issues. The Women’s Shelter also will provide shelter to unaccompanied youth 16 and older who are victims of any crime for a period of up to fifteen (15) days even if the unaccompanied minor has substance use disorder issues.

The most profound gap in housing is for juveniles human trafficking victims who suffer from substance use disorders.
Possible Solutions:
Housing priority vouchers for victims of crime including domestic violence, sexual assault and human trafficking victims. Cash match/in-kind waiver considerations on a case-by-case basis for those victims’ services agencies that have a demonstrated record of success and verifiable need. Other federal programs (for example—the Port Security Grant Program through the Department of Homeland Security) do provide a provision for waiver consideration. The DREAM Center, a non-profit organization that is renting the former Texas Youth Commission (TYC) facility is open to ways in which they can address unmet needs in the community and, in the future, may be a resource for providing additional housing for adult victims.

#4 Problem Identified:
Provide resources to crime victims and specialized training to crime victim providers that will render more effective navigation of the criminal justice system.

Data: Victims’ advocates report that communication amongst all crime victims regarding available resources remains a challenge. The criminal justice system is a complex one and a victim navigating the criminal justice system will interface with numerous agencies and professionals. Just as medical navigators have been found to be beneficial for medical patients, victims’ advocates identified the need for more ‘victim navigators’ who would initiate with the victim immediately after the crime has occurred and remain with them until the crime has been prosecuted. Since the creation of the Southeast Texas Criminal Justice Strategic Plan in 2014 and in every annual update since, the need for a one stop shop or directory for a victim to access all services regardless of victimization or individual needs (housing/counseling/medical/shelter etc) has been recognized.

Child Abuse Victims: Consider that a child sexual assault victim may encounter numerous agencies such as forensic exam programs, rape and suicide crisis centers, law enforcement, victims assistance centers, Child Protective Services and CASA (if the child is removed from the home). With several partners involved, one can quickly see the opportunity for a breakdown in communication about the child’s case and their smooth navigation through the criminal justice system. Garth House bridges this gap by facilitating the Multidisciplinary Team for 56 agency partners. This team meets regularly to “staff” cases and is comprised of representatives from law enforcement, district attorney offices, sexual assault forensic exam programs, child welfare, Garth House family advocates that stay with a family through the duration of their case, and Garth House counselors. This team coordinates investigations and informed service provision.

Child Human Trafficking Victims: For child victims of trafficking, Harvest House Ministry provides comprehensive and on-call case advocacy. An advocate is assigned at the point of identification and dispatched immediately upon recovery and remain that child’s advocate until 25 years of age. They represent the child’s voice and are not to be confused with family advocates.

Adult Victims: Victim advocates estimate that most adult victims of crime will interface with an average of at least 15 professionals. Victims’ advocates also acknowledge that even they, seasoned professionals, have challenges keeping apprised of all the available services in the region. Trust plays a critical role in the victim obtaining what they need from the criminal justice system and more victims’ advocates are needed.

Victims’ advocates also identify the need for additional/sustained training on ever-evolving crime victim’s compensation, victim advocacy, in general, and on other agencies and what they provide. There is also a need for specialized training on court preparation for professionals who will facilitate and support victims of crime—particularly child abuse, domestic violence, sexual assault and other victims of crime—through the criminal justice system. Some victim advocacy groups state that law enforcement training for sexual assault and human trafficking, in particular, with imparting correct information to victims is a huge need. They report times when victims have been
told that if they are not filing charges, a SANE exam is not needed. Another example is that some law enforcement may be unaware that in the case of a sexual assault an exam must be performed within 96 to 120 hours after the crime is committed.

STAAT is currently working on compiling a comprehensive resource directory. The guide will focus on Jefferson County, initially, but will list other counties in which each agency included in the directory serves. It will focus on the needs of the human trafficking victims. However, since most agencies in the region serve other victims as well, it would be useful resource for all victims.

**Possible Solution:**

Funding to provide court education for professionals who can navigate adult and child victims through the criminal justice system. Funding for continues training for crime victim advocates and other professionals. Funding for the regional resource directory is another possible solution.

A resource guide for trafficking victim service providers is being created through the Southeast Texas Alliance Against Trafficking (STAAT) with leadership from the Jefferson County District Attorney’s Office. Garth House will provide Care Coordination services for child trafficking victims as outlined by Children’s Advocacy Centers of Texas and the Office of the Governor’s Child Sex Trafficking Team to support a successful continuum of services for survivors.

**#5 Problem Identified:**
Deliver emergency and long-term services to meet the immediate and restorative needs of victims

**Data**

The services outlined as most problematic by the victims’ working group was: transportation, preventative medical care for HIV and Sexually Transmitted Infections (STI) for sexual assault survivors.

5.1 **Regarding transportation:** In areas such as Hardin and Orange Counties that have limited services available in the county, this often requires travel to Beaumont (Jefferson County) which can mean, in the case of Hardin County, a 114 miles round trip each time a service is accessed and in Orange County, a round trip of 54 miles round-trip. At the writing of this plan, gasoline is $2.70 per gallon on average in Texas and the average vehicle travels 24.7 miles on one gallon of fuel. For Hardin County crime victims traveling to Beaumont for services from the furthest northeast end of the county, that is a cost of $12.46 per trip! For Orange County residents, this could mean $5.90 for each trip to Beaumont required. For victims with no transportation, unreliable transportation or a lack of funds for gas, this means their only hope to obtain the services is for law enforcement or the Victims Assistance Center to transport them.

For example, a child sexual assault victim from Orange or Hardin County would be required to travel to Beaumont to obtain a sexual assault exam. If he or she were from Hardin or Jefferson County, he or she would also likely be required to return to Beaumont at a later date for the forensic interview at the Garth House Children’s Advocacy Center. The Garth House provides forensic interviews in Beaumont (Jefferson County) and City of Orange (Orange County). The Garth House also provides counseling services for child sexual abuse victims in Hardin and Orange Counties, but with a county the size of Hardin, this could still necessitate a 60-mile round trip just to get to the courthouse or counseling center. With gas currently averaging $2.70 a gallon in Texas and average car consuming 24.7 mpg of fuel, this would result in a grand total transportation cost of $26.23 for a forensic exam, forensic interview and two counseling trips.

This scenario is true for victims of other crimes including: domestic violence, sexual assault, child abuse. To bridge the gap, law enforcement, Victims’ Assistance Centers (VAC) and social service organizations are called upon to assist with transporting victims; however, when this occurs, staff is removed from specialized
functions which are a more beneficial use of their time. Also, when law enforcement and VAC staff are attending to other duties which they cannot leave, crime victims have had to wait to access services. In Hardin County, the VAC staff has seen a reduction in force from ten (10) employees 15 years ago to three (3) at the present time. In Orange County, there is no VAC staff. In Jefferson County, the District Attorney’s Office and VAC assists with transportation to court proceedings but not to counseling sessions. While Beaumont does have public transportation, many of the people most in need of the services cannot afford the bus fare.

Transportation Services Provided by the Family Services Women and Children’s Shelter of Southeast Texas in 2017

| Transportation | Family Services Women and Children Shelter of Southeast Texas provided transportation services 518 times in 2018. |

In the case of Driving Under the Influence victims whose transportation has been totaled or seriously disabled, crime victims’ compensation will pay for lost wages but will not pay to replace the lost vehicle. If a victim of this crime could replace their transportation and maintain their job, they may not have to file for lost wages in the first place.

Orange County and Hardin County have limited public transportation options available through the South East Texas Transit. However, most residents are not aware of this service and, in the case of Lumberton residents, due to the city’s urban classification; most people pay $14.50 to travel to Beaumont.

5.2 Regarding preventative medical treatment for HIV and Sexually Transmitted Infections:
In the Southeast Texas region of Hardin, Jefferson and Orange Counties, 1,135 residents are living with HIV as of 2017 with 66 of those being newly diagnosed. Our region is 5th in the state of people who are living with HIV and do not know it. The largest demographic with HIV in the region are those who do not identify as having same sex partners and those with drug use. This is significant for victims of any sexual assault crime because one must assume the perpetrator has HIV or a sexually transmitted infection. One of the local sexual forensic medical providers had a case recently of a 14 year old victim with gonorrhea who they were able to identify and refer to the local public health department. For HIV, medical providers can give the victim within 72 hours medication they will take for 28 days to prevent HIV. When a victim comes into the Crisis care center as a sexual assault victim, they will receive the first dose at the hospital to prevent HIV if they present for the exam and treatment within 72 hours of the assault. The victim must obtain the remainder of the medication, as well as make follow up medical visits to monitor kidney and liver function while taking the medication. Victims often need transportation and financial assistance in obtaining the follow-up treatment necessary. One of primary concerns of a sexual assault victim is that they have contracted a sexually transmitted life-threatening disease. Advocates are needed to follow up with them and cultivate trust. Only then will the victim feel comfortable enough to disclose other issues that may need to be addressed such as substance use disorders, etc.

Possible Solutions:
- Train more victim advocates that can be present from the initial outcry of a sexual assault and assist with transportation needs for victims to obtain life-saving medications available for HIV and sexually transmitted infections;
- Telemedicine for counseling services.
- More funding to provide transportation for victims’ services to obtain services.
- More staff for the Victims Assistance Center to transport victims;
- Seek funding from the Office of the Governor – Criminal Justice Division Transitional Housing Grant that opens in 2017.
- Promote the South East Texas Transit so victims are aware of this service
- Cultivate partnership between service providers and the South East Texas Transit to get the word out about the services;
• Repurpose an old patrol car and acquire funding to cover mileage for staff to transport.
• Nutrition and Services for Seniors (NSS), the non-profit organization that operates South East Texas Transit, could apply for funding to expand transportation for Orange and Hardin County victims. Note—the meeting between NSS Executive Director and service providers has already begun. NSS was unaware of the need but is very interested in the possibility of helping.
• If Lumberton residents ($14.50) can get into a service area such as Kountze or Silsbee, then they can get South East Texas Transit without the $14.50 fee.
• Change crime victims’ guidelines to allow victims to purchase another vehicle when theirs is destroyed/disabled during the commission of a crime.
Mental Health & Substance Use Disorder Priorities

The South East Texas region, like many regions across the nation, is struggling with the increased demand for mental health providers, treatment programs, facilities and extended care options. The ever-growing need for mental health services and diminishing funds has created a massive burden for this region. This issue is not exclusive to those in the mental health profession; this problem is far reaching and involves law enforcement agencies, schools, the juvenile justice system, victim assistance centers and many more. The chart below indicates the number of clients in South East Texas served by the Spindletop Center in 2018 for a mental illness.

<table>
<thead>
<tr>
<th>Jefferson County</th>
<th>Orange County</th>
<th>Hardin County</th>
</tr>
</thead>
<tbody>
<tr>
<td>Adults</td>
<td>Children</td>
<td>Adults</td>
</tr>
<tr>
<td>4835</td>
<td>2007</td>
<td>1341</td>
</tr>
</tbody>
</table>

(This graph indicates clients served only by the Spindletop Center in 2018)

The number of children that are served by Spindletop for mental health related issues have increased substantially in each of the three counties.

Many additional services are rendered by other mental health providers in the region and these numbers only account for those with the most serious mental illnesses who qualify for Spindletop services. Actual number of clients seen in this area would be vastly higher.

Substance use disorder which includes alcohol abuse are also major concerns in the Southeast Texas area. Law enforcement agencies, hospitals, schools, juvenile justice systems, treatment facilities, counseling services and families struggle with understanding, coping and saving those who abuse or are dependent on drugs and alcohol. The chart below indicates the number clients served by county for the Department of State Health Services Region V in 2018 suffering from substance use disorder.

<table>
<thead>
<tr>
<th>Jefferson County</th>
<th>Orange County</th>
<th>Hardin County</th>
</tr>
</thead>
<tbody>
<tr>
<td>Adults 558</td>
<td>Youth 25</td>
<td>Adults 199</td>
</tr>
</tbody>
</table>

Comprehensive List of Mental Health/Substance Use Disorder Priorities as Established During Working Group Meetings

• Need for additional service for substance use disorder patients from detox to after care for those with a substance use disorders including additional beds for those individuals who are not involved in criminal proceedings, transitional housing and/or sober living accommodations in Southeast Texas;
• Need for community collaboration (one body working together) to address mental health and substance use disorder challenges;
• Transportation for those diagnosed with mental health related diseases to obtain medical treatment, counseling, group classes, life skills classes;
• Transportation for recreational activities for youth with the goal of preventing substance use disorders by providing healthy, engaging activities that provide positive options and strategies;
• Need for additional mental health resources in every facet of mental health access including additional hospital beds for those not involved in criminal proceedings to access psychologists’ psychiatrists and counselors in Southeast Texas;
• Additional law enforcement officers with specialized training to address public safety issues involving mental health;
• Need for a psychiatric crisis care center
• Need for social/emotional learning in the school system including teaching self-awareness, social issues, identification of emotions
• Need for sufficient facilities (inpatient and outpatient) to meet the need in the Southeast Texas region including expanding existing facilities.

Mental health and substance use disorder stakeholder planning team members then determined, from the nine (9) gaps identified the five (5) deemed most critical to the region. These highest priorities are outlined in the table below.

<table>
<thead>
<tr>
<th>Priority #</th>
<th>Problem Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>#1</td>
<td>Need for additional mental health and substance use disorder resources particularly within the community including additional services, detox facilities, transportation to services, jobs, social/emotional learning in the schools, and education</td>
</tr>
<tr>
<td>#2</td>
<td>Form a robust and comprehensive community collaboration (one body working together) to address mental health and substance use disorders and collaboratively seek out funding to address identified resource gaps</td>
</tr>
<tr>
<td>#3</td>
<td>Enhance mental health resources in every facet of mental health including a psychiatric crisis care center, access to psychologists, psychiatrists and counselors, particularly for those not involved in a criminal proceeding</td>
</tr>
<tr>
<td>#4</td>
<td>Provide additional law enforcement mental health officers with specialized training to address public safety issues involving mental health;</td>
</tr>
<tr>
<td>#5</td>
<td>Expand awareness and public outreach for both mental health and substance use disorders</td>
</tr>
</tbody>
</table>

**#1 Problem Identified:**
Need for additional mental health and substance use disorder resources including prevention resources particularly within the community including: detox services, psychological services, jobs, social/emotional learning in the schools, education and transportation to services, jobs and prevention activities.

**Data:**
1.1 Resources Generally:
The strongest message conveyed during the mental health and substance use disorder working group meetings was the lack of available, affordable and easily accessible resources for individuals with mental health or
substance use disorders. The lack of resources run the gamut from after school activities to engage youth thereby reducing the likelihood they may fall prey to substance use disorders to psychological services for mentally ill individuals. The lack of transportation creates a barrier to participate even if adequate were available. As noted elsewhere by other stakeholder participants in this plan, increasingly reduced funding has to be delicately balanced between response to immediate crisis needs versus long range prevention strategies.

Inpatient Facilities:
There are two inpatient mental health facilities in the Southeast Texas area. Baptist Behavioral Health has 70 beds (including a geriatric unit); and the Medical Center of South East Texas has 20. There are times when both facilities cannot accept any more patients and facilities are in “diversion,” meaning that if there is a mental health related call that comes into Jefferson, Hardin or Orange County there will not be a facility available to bring the individual that is seeking treatment. According to Baptist Behavioral Health, “diversion” for the Adult and Acute facilities is rare but has been an issue in the past. When beds are full, a patient, in theory, must be transported to a facility that has an opening. The closest inpatient facility is Rusk State Hospital which is over 2½ hours away from Beaumont, Texas. Adding this stress to an individual already in a crisis situation can have potentially harmful outcomes, not only to the patient but to the caregivers. However, mental health professionals state that Rusk is not a realistic option. The wait time for a civil (versus criminal proceeding) bed can be weeks. Rusk is almost always at capacity filled with forensic commitments from the courts which include Not Guilty by Reason of Insanity (NGR) and Competency Restoration to prepare patients for criminal hearings. One local hospital has a patient that has been waiting for a civil (non-criminal) bed for six (6) weeks and is 15th on the waiting list.

Recovery Council of Southeast Texas operates the Unity inpatient Substance Use Disorder residential until for adult males. While there is physical capacity to serve more, low State funding limits the ability to utilize the space.

There are three (3) types of detox facilities: ambulatory detox, opiate detox or medically assisted detox (MAT), and medical detox. The region currently has one very new detox center, Shalom. Shalom has only been open for one (1) month and provides medically assisted treatment for opiate substance use disorder. The initial cost is $299 for the first appointment and $150 each month thereafter. The facility also accepts most insurance and Medicare and Medicaid. There are no other facilities in the region. Baptist Hospital had a detox facility for veteran’s however, there is no longer funding for this service.

Many private pay hospitals do not accept low-income patients or insurance. Care at these facilities can cost approximately $30,000 per month which is beyond the financial scope of what most middle or low income families can afford.

The need for more in-patient psychiatric beds is not only a local but also national problem with one mental health advocacy group siting a 77.4% decrease in inpatient and other 24-hour residential treatment beds between 1970 and 2014 (America Badly Needs More Psychiatric Treatment Beds, John Snook, Treatment Advocacy Center).

1.2 Outpatient Facilities:
As of 2011, a total number of 6,179 mental health outpatient facilities were reported in the United States. Therefore, there were 1.95 such facilities per 100,000 Americans (statista.com). In the Southeast Texas region; there are seven (7) outpatient facilities for 393,360 residents.
Substance use disorder outpatient facilities are lacking also. In 2018, the Spindletop Center treated the following number of clients for substance use disorder:

<table>
<thead>
<tr>
<th>Jefferson County</th>
<th>Orange County</th>
<th>Hardin County</th>
</tr>
</thead>
<tbody>
<tr>
<td>625</td>
<td>146</td>
<td>No Services Provided</td>
</tr>
</tbody>
</table>

*(Please note that this graph only indicates outpatient only clients)*

In some cases, when a crisis situation is occurring, getting to an inpatient or outpatient facility is not possible. During incidents like these, many utilize the emergent and urgent crisis hotline. This 24/7 operation is available to anyone suffering from a mental breakdown or episode. Technicians provide care and services over the phone to help defuse the situation and calm the caller. In 2018, the Spindletop Center serviced the following number of individuals via the emergent and urgent crisis hotline:

<table>
<thead>
<tr>
<th>Jefferson County</th>
<th>Orange County</th>
<th>Hardin County</th>
</tr>
</thead>
<tbody>
<tr>
<td>456</td>
<td>118</td>
<td>118</td>
</tr>
</tbody>
</table>

Recovery Council of Southeast Texas operates the Right Choice outpatient clinic and serves adult and adolescents by providing Substance Use Disorder treatment. Right Choice provided transportation to clients as needed to ensure consistent participation.

1.3 Economic Burden:
Inpatient and outpatient facilities are very expensive. Many of those who suffer from a substance use disorder or a mental illness do not have adequate means of obtaining funding to pay for these services. In past years, the State of Texas has continually decreased the amount of money being spent on mental health related issues. With more and more Texans being diagnosed with a mental illness and less funds to treat them, many go untreated. Nearly 60% of adults with mental illness didn’t receive mental health services in the previous year (NAMI.org). Many, if not the majority, simply cannot afford the treatments.

Below is the financial breakdown that the Spindletop Center used in the treatment of their clients for 2018:

<table>
<thead>
<tr>
<th>Jefferson</th>
<th>Orange</th>
<th>Hardin</th>
</tr>
</thead>
<tbody>
<tr>
<td>Local Psychiatric Inpatient</td>
<td>Local Psychiatric Inpatient</td>
<td>Local Psychiatric Inpatient</td>
</tr>
<tr>
<td>Admission Days</td>
<td>Value of Bed Days</td>
<td>Admission Days</td>
</tr>
<tr>
<td>1,052</td>
<td>$694,320</td>
<td>224</td>
</tr>
</tbody>
</table>

**Total Local Beds All Counties**

<table>
<thead>
<tr>
<th>Admission Days</th>
<th>Value of Bed Days</th>
</tr>
</thead>
<tbody>
<tr>
<td>1,546</td>
<td>$1,020,360</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Jefferson</th>
<th>Orange</th>
<th>Hardin</th>
</tr>
</thead>
<tbody>
<tr>
<td>State Hospital (outside of four catchments areas/no-local):</td>
<td>State Hospital (outside of four catchments areas/no-local):</td>
<td>State Hospital (outside of four catchments areas/no-local):</td>
</tr>
<tr>
<td>Admission Days</td>
<td>Value of Bed Days</td>
<td>Admission Days</td>
</tr>
<tr>
<td>12,132</td>
<td>$7,521,840</td>
<td>1,486</td>
</tr>
</tbody>
</table>

The value of psychiatric medication dispensed by the Spindletop Center in Hardin, Jefferson and Orange Counties for 2018=$5,315,223.

Possible Solutions:
Pursue funding for detox facilities and additional mental health options such as a psychiatric urgent/crisis care center. Research whether telepsychiatry could be used to lessen the psychological provider shortage experienced in the Southeast Texas region.

**Possible Solutions Specific to Transportation:**
Below is a list of possible solutions aimed at solving or at least diminishing transportation hardships in the region:

- Give clients of mental health and substance use disorder facilities bus passes that bring them to and from appointments, meetings, counseling sessions
- Facilities obtain vans to provide transportation for their clients
- Create a volunteer program within organization that help with the transport
- Recovery Council of Southeast Texas provides transportation to clients as needed to ensure client participation and is willing to work with local agencies (OSAR, Probation) to ensure urgent needs are met.

**#2 Problem Identified:**
Form a robust and comprehensive community collaboration (one body working together) to address mental health and substance use disorders and collaboratively seek out funding to address identified resource gaps

**Data:**
The region lacks and could benefit from a robust community collaboration that meets regularly (quarterly/semi-annually) to discuss available services, identify gaps in services and cooperatively compete as a region for available grant funds that would reduce or eliminate the service gaps. The Spindletop Center has identified available grant funds that are predicated on a community collaboration model—one body working together. Since this collaboration does not exist, area agencies, including but not limited to the Spindletop Center, are at a disadvantage, as they seek highly competitive grant funds.

Southeast Texas has a nationally recognized and excellent example of how beneficial collaboration can be to close capability gaps and attract the funding required to do so. Within the Homeland Security/First Responder field, the region has a mutual aid organization, the Sabine Neches Chiefs Association, that meets monthly and has done so since 1944. Since 2005, collaboration amongst participants has yielded the migration from three (3) disparate radio systems where first responders were unable to communicate across county lines to attainment of one regional system—the Southeast Texas Regional Radio System (STRRS) which includes all three counties. By working in cooperatively and with a methodical grant funding approach, multiple agencies have netted $44 million and counting in grant funds that has brought the regional radio system to live. There is power in collaboration and with the intensely restricted resources for mental health and substance use disorder resources in region, work group participants felt initiation of a regional collaboration to be essential.

**Possible Solutions:**
The Mental Health Association (MHA) in Southeast Texas that serves Hardin, Jefferson and Orange Counties has identified the need and obtained funding for collaborative focus groups to be held in each of the three (3) counties. The MHA hopes to initiate the effort in FY2020 and will start small understanding that the frequency will probably grow as the benefits of collaboration are demonstrated. The purpose of the focus groups is to allow for facilitation of
solutions to targeted problems experienced within a geographic area. For example, a local social service agency in Orange County may offer services that a local Independent School District really needs but the School District is unaware the agency offers the services. MHA actually had just such an experience in a past meeting. Focus group meetings are a low cost-high yield way in which to address partnerships and collaborations. Potentially, the collaborators could pursue funding for those service gaps for which no resources are currently available. Being able to substantiation that a funding requests is truly non-duplicative strengthens the request and increases the likelihood that funding will be achieved to provide the services.

#3 Problem Identified:
Enhance mental health resources in every facet of mental health including a psychiatric crisis care center, access to psychologists, psychiatrists and counselors, particularly for those not involved in a criminal proceeding

Data:
This area is lacking mental health providers and mental health specialists. It is reported that one in every five adults will suffer from a mental illness within a year, that is 43.8 million people or 18.5% of the U.S. population (NAMI.org). With a major rise in the diagnoses of mental health illness and behavioral health disorders, there are not enough providers and specialists in the area to meet the demand. This is not just a problem within South East Texas, the State of Texas and the nation is suffering from the lack of providers and there seems to be no immediate solution to the problem.

While the national number of mental health providers is 202.8 per 100,000 populations, Texas has only half this number of providers 102.3 per 100,000, and the number of mental health providers in Southeast Texas is even less. (Christus Dubuis, Community Health Needs Assessment 2017-2019).

Due to the lack of mental health providers, individuals from different fields are left to compensate for the void. Law enforcement officers and teachers are probably the two professions, outside of the mental health field, that encounter a mentally ill person most often.
Law enforcement officers in Southeast Texas have expressed major concern over the time and resources spent on servicing a call that comes in dealing with a mentally ill individual. These situations are often hostile and put everyone in the surrounding area in danger. For more information on law enforcement response to mental health, please see Problem #4 below.

Regarding a psychiatric crisis care center for urgent situations, mental health professionals site the extended wait times for people experiencing a mental health crisis as longer than for those with medical emergencies such as heart attacks, strokes and other life-threatening medical situations which often exacerbates the individual’s already fragile condition. These same professionals state that the mentally ill person in crisis may not only be dangerous to themselves in a traditional crisis care center but also to other patients due to the mentally ill individuals increased volatility when emotionally distraught or in unfamiliar surroundings. The average wait time in an crisis care center for an individual presenting with a mental health related condition is 6.8 to 34 hours (Effects of a Dedicated Regional Psychiatric Emergency Service on Boarding of Psychiatric Patients in Area Emergency Departments, US National Library of Medicine/National Institute of Health) and both mental health and substance use disorder patients presenting to an crisis care center are 2.5 times more likely to be admitted than a non-mental health related condition. Professionals state that with proper care, many of the individuals with mental health or substance use disorders who present at an crisis care center could, with prompt and appropriate attention, be treated and discharged rather than be admitted. A dedicated crisis care center would enable more expedient and appropriate treatment for those in a mental health crisis-- be it major or minor.

The nearest psychiatric crisis care center to this region appears to be in Lufkin, Texas at the Burke Center. Burke Center’s use of telepsychiatry enables a patient to see a psychiatrist within 30 minutes. It is a cost-effective way to achieve the objective with an estimated $18,000,000 cost-savings over seven (7) years (NAMI of Greater Houston).

Possible Solutions:
The Spindletop Center received grant funding to train behavioral healthcare professionals, paraprofessionals, peer specialists & volunteers, using Cognitive Adaptation Training (CAT), Wellness Recovery Action Plan (WRAP) facilitator & patient training, and Cognitive Enhancement Therapy (CET). Spindletop is also opening a psychiatric specialty clinic for people with other behavioral health diagnoses not covered as part of the “target population” currently served. Spindletop Center recently received funds to become a Certified Community Behavioral Health Clinic, to initiate and staff a mobile clinic and expand the mental health officer liaison and jail diversion program. Additionally, they received funding to provide bus passes for mental health clients.

This is great for the region, but numerous additional services and facilities are still needed.

Below is a list of possible solutions aimed at solving or at least diminishing this hardship from the region:
- Telepsychiatry
- Acquire funding and collaborate to bring to fruition a Regional crisis care center dedicated to mental health
- Training for educators and teachers on signs of mental illnesses and way to cope with a child who is suffering from one
- Incentives to attract health care providers into the area
- School scholarships or education grants from the state that encourage those to pursue higher education in the mental health field
• Continuous training for law enforcement in mental health
• Classes, group sessions, counseling services for families, friends, and loved ones who care for someone suffering from a mental health disease
• Classes and group sessions for those who suffer from a mental health disease(s)

#4 Problem Identified:
Provide additional law enforcement mental health officers with specialized training to address public safety issues involving mental health;

Data:
Having specialized, trained mental health law enforcement officers who respond to mental health calls is not only the most compassionate way to provide assistance to one experiencing a mental health crisis, it is also statistically proven to be the most effective. Further, it yields a very significant cost savings to the community by when these specially trained officers are utilized for mental health calls. It requires 87% more of a law enforcement agencies’ assets to handle a mental health versus non-mental health public safety call.

<table>
<thead>
<tr>
<th>Department</th>
<th>Population</th>
<th>Population w/ MH</th>
<th>MH Officers Currently</th>
<th>MH Officers Needed</th>
</tr>
</thead>
<tbody>
<tr>
<td>Jefferson County</td>
<td>83,248 not counting BPD or PAPD</td>
<td>17,482</td>
<td>3</td>
<td>6</td>
</tr>
<tr>
<td>Orange County</td>
<td>85,047</td>
<td>17,859</td>
<td>1</td>
<td>6</td>
</tr>
<tr>
<td>Hardin County</td>
<td>57,937</td>
<td>11,999</td>
<td>1</td>
<td>4</td>
</tr>
<tr>
<td>Beaumont PD</td>
<td>119,114</td>
<td>25,013</td>
<td>1</td>
<td>8</td>
</tr>
<tr>
<td>Port Arthur PD</td>
<td>53,937</td>
<td>11,326</td>
<td>1</td>
<td>4</td>
</tr>
</tbody>
</table>

In 2014, Southeast Texas, through a grant acquired by the Spindletop Center, secured 3 law enforcement officers for Hardin, Jefferson and Orange Counties. The number has grown to 7 officers; however, a total of 28 mental health peace officers are needed. This would require a 300% increase of mental health officers to meet the current need. More detail is provided below:

In the month of June 2019, alone, mental health peace officers responded to 165 unduplicated mental health public safety calls. Since October 1, 2018, officers in the tri-county region responded to 772 unduplicated requests for assistance with 1,799 follow-up contacts. In a twelve (12) month period from June 2018-June 2019, mental health law enforcement responded to 812 mental health calls and performed 1,887 follow-ups. When Spindletop Center initially applied for grant funds in 2014, they estimated the three (3) mental health peace officers could effectively respond to 250 calls per year. In 2019, mental health peace officers responded to 250 calls in one month.
Thanks to law enforcement mental health officers, of the 1,887 individuals referenced above, 1,336 people in crisis were spared a trip to the Crisis care center which could have resulted in long wait times, a greater likelihood of admittance to the hospital and an exacerbation of the individuals’ already fragile condition.

A coexisting concern expressed by mental health and substance use disorder professionals in the region is demonstrated by drilling down further on the statistical data for the 1,887 calls made between June 2018-June 2019. Only 217, or 11.50%, of the 1,887 individuals had health insurance. Of the remaining 88.50%, a disproportionate number were uninsured, low-income individuals. A very much smaller subset of the total number of individuals had Medicaid coverage.

Best practice in mental health peace officer response allows for a sufficient officer-client caseload to proactively address the mental health needs of the individual who seeks assistance. This would include repeated follow-up visits to ensure compliance with treatment and medication protocols. Unfortunately, with one officer handling 60 calls per month, this simply is not yet a reality. The lead Crisis Intervention Specialist for the region concede that with the current officer-client caseload, officers can do little more than address the immediate crisis need of the client.

Even with this less than ideal caseload, the lead Crisis Intervention Specialist conservatively estimates that the 7 mental health peace officers have saved the community $9,000,000 since the program’s inception in 2014. This is a whole community savings—not just a cost saving for one agencies or sector. This is calculated from cost savings of uninsured, low income mentally ill individuals who did not have to go to an crisis care center which not only saves the community money but is also much preferred for the mentally ill individual. It is calculated by the 87% savings in law enforcement assets that can be dedicated to public safety calls other than mental health; $5,500 is saved for each person who does not have to go to the crisis care center when mental health care is what is truly needed. $750 per day for a hospital stay for each individual. $500 in court cost for those individuals who do not have to be committed to a psychiatric facility.

Possible Solution:

- Acquire funding for additional mental health peace officers. As stated above, the region has a demonstrated, quantifiable need for a 300% increase in mental health peace officers.

#5 Problem Identified:
Expand awareness and public outreach for both mental health and substance use disorders

Data:

5.1 Mental Health:
The working group identified as a high priority the need to actively promote strategies that teach good mental health habits to youth in an effort to promote resiliency. Some of the strategies suggested were to start with very young school age children and teach mental health hygiene. By establishing these healthy habits at a young age, they become a part of healthy, everyday coping skills that can be enlisted by the young person to prevent or mitigate the negative impact of life stressors to one’s mental health.
5.2 Substance Use Disorders:
Recent research has shown that some substance use disorder educational programs taught in school are not always helpful and, in fact, can expose low risk adolescents to drugs and alcohol while trying to educate moderate to higher risk youth. Substance use disorder facilities in the region have used evidence-based program for high- to moderate-risk children and teens with astonishing results. One facility in the area had two programs, Positive Action and Rainbow Days. Rainbow Days had two sections—Kids Connection and Youth Connection.

Positive Action, which focused on high-risk teens that had probably already used or who were likely exposed to substance and alcohol use, had about 180 youth from Jefferson, Hardin and Orange Counties participate. The Kids Connection and Youth Connection programs that were geared toward younger, moderate- to high-risk juveniles helped about 750 children from the three counties.

The success rate for Rainbow Days almost always maintained a 100% success rate while Positive Action mostly maintained a 100% success rate--the rate would fluctuate when administered to the alternative campuses. The lowest success rate was about 85%. Success rates were determined by whether the individual scored the same or higher on the exit test as he/she did on the same test that was given on the first day of the program, and if he/she attended at least eight (8) of the ten (10) classes. After 11 years of successfully servicing almost 1,000 adolescents with an evidence-based program with a near 100% success rate, funding for the program was cut in August 2013. A grant was submitted for $800,000 by the Spindletop Center to try and bring this program back to Southeast Texas and in 2015 the Rainbow Days program was re-established. Unfortunately, since 2017, there are no longer funds to support this program.

As of 2015-2016, the chart below indicates the number of youth served by Rainbow Days and the success rate of the program:

<table>
<thead>
<tr>
<th>Jefferson County</th>
<th>Orange County</th>
<th>Hardin County</th>
</tr>
</thead>
<tbody>
<tr>
<td>No. Served</td>
<td>Success Rate</td>
<td>No. Served</td>
</tr>
<tr>
<td>266</td>
<td>97%</td>
<td>404</td>
</tr>
</tbody>
</table>

Over the past several years, the shift to evidence-based programs has and will continue to be a priority for substance use disorder facilities, juvenile detention centers, and schools. With this movement, resources, which are already limited, are targeted to those who need the education and awareness of the harmful effects of abusing drugs and alcohol while limiting the exposure to those deemed to be low-risk.

Evidence-based programs can also be applied to mental health related issues. These programs are specifically geared to help with certain disorders and diseases. It also teaches families and loved ones how to cope with a family member who is suffering from a mental illness.

Possible Solutions:
Below is a list of possible solutions aimed at solving or at least diminishing this hardship from the region:

- Teach self-awareness, self-acceptance, self-compassion, bully prevention/awareness and other mental health hygiene skills in school.
- Beginning at an early age, teach coping and stress management skills in schools
- Secure funding resources for Rainbow Days program or similar programs for the region.
- Secure funding and personnel resources for the ARISE program: ARISE is an evidence-based curriculum for youth; 260 curriculums for ages 12-17, that keeps life skills training evolving as youth matures
- Have substance use disorder counselors and licensed professional counselors (LPCs) available within the schools
• Provide adolescent intervention and prevention programs in schools and the community
• Random drug testing in schools
• Increase Substance use disorder treatment facilities for youth
• Support after school programs that provide a safe, healthy environment for the youth
• Expand digital counseling such as is offered by the UT Physicians at no-cost and video counseling offered by Samaritan’s Counseling Center
• Enlist local industry participation in substance use disorder treatment with the hope of a more skilled and substance use disorder-free workforce that will benefit both the local workers and industry.
Included below are resources identified by the South East Texas Regional Planning Commission Planning Team that are available to provide services that could potentially help in closing criminal justice gaps.

**Juvenile Justice:**
The following services are provided for juveniles in South East Texas:

- Community Mental Health Agencies
- Adolescent/Youth Counseling
- Anger Management
- Conflict Resolution Training
- Juvenile Delinquency Diversion Counseling
- Student Counseling Services
- Bereavement Counseling
- Children’s/Adolescent’s Residential Treatment Facilities
- Adolescent Substance Use Disorder Treatment

Below is a list of agencies in South East Texas:

<table>
<thead>
<tr>
<th>Name of Agency</th>
<th>Agency Type: Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Spindletop Center</td>
<td>Non-Profit: Serves as the mental health and mental retardation (MHMR) authority for South East Texas</td>
</tr>
<tr>
<td>Lamar University, Psychology Department</td>
<td>University: Provides general counseling services for children, adolescents, adults and families</td>
</tr>
<tr>
<td>Family Services of Southeast Texas, Inc.</td>
<td>Business: Provides families and individuals with professional counseling and education for marital difficulties, divorce, parent-child conflict, family violence, child abuse and neglect, step-family issues, depression, anxiety, aging, stress, emotional problems, substance use disorder and other issues affecting family life</td>
</tr>
<tr>
<td>Family Services of Southeast Texas, Inc., Showing Teens Effective Anger Management</td>
<td>Business: 10-week program (STEAM) teaches children between the ages of 13-16 years old anger management skills and alternative methods of coping</td>
</tr>
<tr>
<td>SETX Christian Counseling Center, LLC</td>
<td>Business: Provides counseling services to include family and marriage, parenting, depression, and guidance for both youths and adults in South East Texas</td>
</tr>
<tr>
<td>Buckner Children and Family Services, Inc.</td>
<td>Non-Profit: Provides an array of residential programs for at-risk children and community-based services to youth and families in South East Texas</td>
</tr>
<tr>
<td>Samaritan Counseling Center of Southeast Texas</td>
<td>Non-Profit: Provides individual, couple, grief, family and adolescent counseling and play therapy</td>
</tr>
</tbody>
</table>
**Inspire Encourage Achieve, Ben’s Kids** - Non-Profit: Provides educational and rehabilitation services in the Jefferson County juvenile detention center and an outreach program to juveniles on probation or recently released from probation

**Communities in Schools of Southeast Texas, Inc.** – Non-Profit: Public/private partnership, working on selected Beaumont ISD and Port Arthur ISD school campuses to provide holistic services to at risk youth to help them achieve academic success

**Catholic Charities of Southeast Texas, Elijah’s Place** - Non-Profit: Provides ongoing grief support services to children age 5-18 who have experienced the death of a sibling or parent or who have been affected by divorce and separation

**Girls’ Haven, Children’s Adolescent Residential Facility** – Non-Profit: Provides a safe environment for girls affected by physical, sexual or emotional abuse, neglect, abandonment, exploitation or severe family dysfunction

**Boys’ Haven of America, Inc., Residential Treatment for Boys** – Non-Profit: Operates a 24-hour residential facility for boys between ages 5-17 years

**Recovery Council of Southeast Texas** – Intensive Outpatient Substance Use Disorder Treatment – Non-Profit: Operates two adolescent Intensive Outpatient Programs; one in Beaumont and one in Orange. The program has state funding so no cost to clients based on financial eligibility. Provides transportation to and from treatment, three sessions per week, parenting counseling for parents, and group and individual education and counseling.

**Law Enforcement:**

Below is a list of law enforcement agencies in South East Texas:

Beaumont Police Department – Jefferson County
Beaumont ISD Police Department – Jefferson County
Bridge City Police Department – Orange County
Groves Police Department – Jefferson County
Hardin County Sheriff’s Office – Hardin County
Jefferson County Sheriff’s Office – Jefferson County
Kountze Police Department – Hardin County
Lamar University Police Department – Jefferson County
Lumberton Police Department – Hardin County
Nederland Police Department – Jefferson County
Orange Police Department – Orange County
Orange County Sheriff’s Office – Orange County
Pinehurst Police Department – Orange County
Port Arthur Police Department – Jefferson County
Port Neches Police Department – Jefferson County
Silsbee Police Department – Hardin County
Sour Lake Police Department – Hardin County
Vidor Police Department – Orange County
West Orange Police Department – Orange County
Sabine Neches Chiefs Association – Hardin, Jefferson and Orange County Mutual Aid Association
Victims’ Services:
The following victim assistance programs are provided in South East Texas:

Domestic Violence Shelters
- Spouse/Intimate Partner Abuse Counseling
- Crime Victim Accompaniment Services
- General Crime Victim Assistance
- Domestic Violence Hotlines
- Dating Violence Prevention
- Domestic/Family Violence Legal Services
- Protective/Restraining Orders
- Women’s Advocacy Groups
- Domestic Violence Intervention Programs
- Specialized Information and Referral
- Spouse/Intimate Partner Abuse Prevention
- Subject Specific Public Awareness/Education

Below is a list of agencies in South East Texas:

<table>
<thead>
<tr>
<th>Name of Agency</th>
<th>Agency Type: Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Family Services of Southeast Texas, Inc.</td>
<td>Non-Profit: Strives to build a better community by strengthening families</td>
</tr>
<tr>
<td>Beaumont Police Department, Family Violence Unit</td>
<td>City of Beaumont: Provides services to victims of violence committed by family members, spouses, relatives or others living with victims</td>
</tr>
<tr>
<td>Hardin County Crime Victims’ Assistance Center</td>
<td>Hardin County: Provides assistance to victims of violent crimes including sexual assault, child abuse, domestic violence, stalking, robbery, assault, elder abuse, dating violence, DWI, and homicide</td>
</tr>
<tr>
<td>Jefferson County Administration and Offices, Victims’ Assistance Center</td>
<td>Jefferson County: Services include information and assistance with Texas Crime Victims’ Rights. Crime Victims’ Compensation, the criminal justice system, victim impact statements, case of status information, courtroom familiarization and accompaniment for criminal court and Protective Order proceedings and post-conviction services</td>
</tr>
<tr>
<td>Orange County Courthouse, District Attorney</td>
<td>Orange County: Serves as the chief prosecuting officer for Orange County who is responsible for providing support services for victims of violent crimes</td>
</tr>
<tr>
<td>TCFV-National Domestic Violence Hotline</td>
<td>Non-Profit: Provides national crisis intervention, information and referral to victims of domestic violence, perpetrators, friends and families</td>
</tr>
<tr>
<td>TCFV-Deaf Domestic Violence Hotline</td>
<td>Non-Profit: Provides a national crisis intervention hotline offering information, support, and referrals to people in domestic violence situations or those calling on their behalf</td>
</tr>
<tr>
<td>TCFV-National Teen Dating Abuse Helpline Program (NTDAH)</td>
<td>Non-Profit: Provides 24-hour national web-based and telephone helpline for teens ages 13-18 experiencing dating abuse, and concerned parents, friends, teachers, clergy, law enforcement, and service providers</td>
</tr>
<tr>
<td>Texas Advocacy Project-Family Violence and Sexual Assault Legal Lines</td>
<td>Non-Profit: Provides free legal advice for victims of family violence or sexual abuse in the areas of family law, divorce, child custody, financial support and dating violence</td>
</tr>
<tr>
<td>Aid for Victims of Domestic Violence</td>
<td>Business: Protection of abused spouses and children is provided by obtaining civil court orders</td>
</tr>
</tbody>
</table>
TCRP-Violence Against Women Act (VAWA), Economic Justice Program (EJP) – Non-Profit: Provides civil rights litigation and ensure people with disabilities have equal access to facilities across Texas

Specialized Information and Referral, National Council On Child Abuse and Family Violence – Non-Profit: Provides booklets and posters to schools, churches, civic groups, and libraries for the purpose of public education and prevention of child abuse, spouse/partner abuse and elder abuse

TCFV-Public Awareness and Education - Non-Profit: Promotes education regarding family violence

**Housing:**
The following housing programs are provided in South East Texas:

- Housing Authorities
- Public Housing
- Section 8 Housing Choice Vouchers
- Low Income/Subsidized Private Rental Housing
- Congregate Living Facilities
- Transitional Housing/Shelter
- Homeless Shelter

Below is a list of agencies in South East Texas:

Name of Agency - Agency Type: Description

**Beaumont Housing Authority** – City of Beaumont: Acquires, develops, and professionally manages a diverse real estate portfolio in order to provide affordable housing, supportive services and upward mobility opportunities to income eligible families and individuals

**Orange Housing Authority** – Orange County: Acquires, develops, and professionally manages a diverse real estate portfolio in order to provide affordable housing, supportive services and upward mobility opportunities to income eligible families and individuals

**Port Arthur Housing Authority** – City of Port Arthur: Acquires, develops, and professionally manages a diverse real estate portfolio in order to provide affordable housing, supportive services and upward mobility opportunities to income eligible families and individuals

**Villas of Sunnyside** – Business: Offers senior apartment home community

**Timber Edge Apartments, Low Income Rental Housing** – Business: Provides apartment units for income eligible individuals and families, accepts Section 8 housing vouchers

**Seville Apartments** – Business: Provides affordable apartment housing for the elderly and disabled, accepts Section 8 housing vouchers

**Senior Citizens’ Y-House of Beaumont** – Non-Profit: Provides an apartment community for income eligible seniors aged 62 and older

**Optimist Village, Inc.** – Non-Profit: Provides apartments for the elderly and individuals who are disabled, accepts Section 8 housing vouchers

**Heritage Center of Orange, Inc.** – Government: Offers affordable housing units for older adults aged 62 and older or people with disabilities aged 18 and older, accepts section 8 housing vouchers

**Heatherbrook Apartments** – Business: Provides low income apartment housing for people 62 or older and people with disabilities
Beaumont Senior Citizen Housing, Inc. – Non-Profit: Provides a housing development for the low-income elderly and/or disabled

Family Services of Southeast Texas, Inc., Transitional Housing and Shelter – Non-Profit: Provides transitional housing and supportive services for women with children who are victims of domestic violence

Heaven’s Serenity House of Missions, Homeless Shelter – Non-Profit: Provides a homeless shelter and clothing for the homeless residents

Port Cities Rescue Mission Ministries – Non-Profit: Provides assistance to the homeless of the community by rendering recovery services in a Christian environment

Salvation Army of Beaumont, The Emergency Homeless Shelter – Non-Profit: Provides an emergency homeless shelter for single men and single women

Salvation Army of Beaumont, The Family Lodging Program – Non-Profit: Provides a shelter for homeless families with children

**Transportation:**

The following transportation services are provided in South East Texas:

- Local Bus Transit Services
- Disability-Related Transportation
- Senior Ride Programs
- Evacuation Transportation
- Medical Appointments Transportation
- Mercy Transportation

Below is a list of agencies in South East Texas:

**Name of Agency - Agency Type: Description**

**Beaumont Municipal Transit, Fixed Route Bus Service** – City of Beaumont: Provides a fixed route scheduled transit service with nine routes Monday-Saturday within the city limits of Beaumont

**Beaumont Municipal Transit, Special Transit Services** – City of Beaumont: Provides door-to-door transportation on lift-equipped vans for ADA eligible persons who are unable to ride regular fixed route service

**Orange County Action Association Section 5311 Rural Transportation Program** – Orange County: Provides low-cost transportation for individuals living in the city limits of Orange

**Orange County Transportation, Local Bus Transit** – Orange County: Provides transportation for any resident of Orange County

**Port Arthur Transit, Fixed Route Bus Service** – City of Port Arthur: Provides accessible, affordable alternative modes of mobility for all citizens of Port Arthur

**Port Arthur Transit, ADA Paratransit Service** – City of Port Arthur: Provides door-to-door transportation for the elderly aged 65+ and for disabled of any age in Port Arthur

**Nutrition and Services for Seniors, Section 5311 Rural Transportation** – Business: Provides low-cost public transportation for individuals living in rural Hardin County and rural western Jefferson County

**Nutrition and Services for Seniors, Title 3** – Business: Provides low-cost transportation for those 60 years of age or older

**HHSC OSS – Medical Transportation Program** – Government: Provide transportation assistance to adults and children enrolled in Medicaid, or in the Children with Special Health Care Needs program
American Cancer Society, Medical Appointment Transportation – Non-Profit: Provides medical appointment transportation for people with cancer

**Mental Health and Substance Abuse Disorder:**

**Land Manor, Inc** – Non-Profit: Assists individuals to live independently within the confines of their disability. To accomplish this task, specific treatment modalities have been utilized in the program design of each substance abuse program.

**Baptist Behavioral Health Center** – Baptist Hospitals of Southeast Texas – provides diagnosis, treatment, and rehabilitation of children, adolescents, you and mature adults, and senior citizens who suffer from any mental health and chemical dependency problem they experience.

**Spindletop Center** – Provides behavioral health care services to people with mental illness, intellectual and developmental disabilities and chemical dependency.

**Recovery Council of Southeast Texas** – Non-Profit: Provides Substance Use Disorder outpatient counseling for adults and adolescents (with transportation as needed). 30-90 day residential Substance Use Disorder treatment for adults males, opioid recover support (housing, transportation, case management), plus urinalysis and hair follicle testing.

**Mental Health America of Southeast Texas** – Promote the mental wellness of the region and enhance the lives of all individuals impacted by mental illness through the community, collaboration, education, and advocacy.

**Samaritan Counseling Center of Southeast Texas** – Non-Profit: Provides professional counseling services to individuals and families including low-income families in order to bring about the integration of mind, body, and spirit in the healing process.
FUTURE STEPS & IMPLEMENTATIONS

The South East Texas Planning Team works in conjunction with other planning groups in the region to ensure a regular exchange of ideas. Individuals active in the planning process generally serve on many of these committees and share mutual concerns.

The South East Texas Planning Team strives to meet periodically to review the Plan and make necessary additions and deletions. At least one formal meeting of the entire group will be held each year, but agency and community representatives typically submit suggestions and changes via telephone and e-mail throughout the year to the Planning Coordinator.

Drafts and annual updates of the Regional Plan are circulated by e-mail with requests for comments, changes, etc. Wherever possible, e-mail is used to reduce the need for meetings, printing, postage, etc.

It is the intent of the Regional Planning Group to improve outcomes for South East Texas residents struggling with problems described in the Plan’s focus areas. Efforts are being made by many South East Texas agencies and organizations to address problems with local funds as well as grant funds from multiple state and federal sources. To the extent that these funds are available, the Regional Planning Team will continue to encourage agencies to provide programming that addresses the outlined focus areas.

In the 2014 SETCJSP, it was identified that funding was needed to address gaps in the Victim Services discipline and is being sought to implement 1) a Regional Domestic Violence Task Force; and 2) a dedicated Prosecutor in one of the counties within the region.

In 2014, a dedicated Prosecutor was hired for the Hardin County District Attorney’s Office whose sole job is to handle cases in which a female is the victim.

Coordination between Spindletop Mental Health Mental Retardation (MHMR) and the South East Texas Regional Planning Commission (SETRPC) has been initiated to address some of the mental health concerns outlined in the Law Enforcement section. Spindletop Center is interested in hosting a meeting at their facility to update law enforcement key personnel on programs being implemented and how they can access these services and also in hearing candid feedback from law enforcement regarding mental health issues that affect law enforcement operations in South East Texas.

Participants in the Strategic Planning meetings are committed to continuing to seek out opportunities to close gaps in the region. The Planning Team will meet at least annually to determine additional next steps that can be undertaken.
Funding for the South East Texas Regional Criminal Justice Strategic Plan graciously provided by the Texas Office of Governor Criminal Justice Division. The South East Texas region would like to extend our sincerest gratitude to CJD for all of the guidance, leadership and support provided during the compilation of this plan.