

### Program #50028 - Diane Wade Program

FY 2024 Proposed

**Department:** Community Justice **Program Contact:** Denise Pena

Program Offer Type: Existing Program Offer Stage: Proposed

**Related Programs:** 

**Program Characteristics:** 

## **Executive Summary**

The Diane Wade Program (formerly the Diane Wade House) is a culturally and gender responsive transitional housing program for Black and African American women on probation and also those transitioning from a correctional facility and returning to Multnomah County under supervision by the Department of Community Justice Adult Services Division (ASD). Wraparound and stabilization services include secured housing, resource referrals for co-occurring disorders (substance abuse and/or behavioral health), family reunification, and cultural responsiveness and empowerment.

# **Program Description**

The Diane Wade Program was developed in response to the lack of appropriate and responsive intervention, sanction, and stabilization options for women experiencing mild behavioral health issues, particularly Black and African American women who experience disproportionately higher rates of incarceration.

This program was launched in 2020 with grant funds from The MacArthur Foundation. Ongoing County funding was provided in FY 2021 to the Department of Community Justice (DCJ) to continue this important program. Throughout FY 2021 DCJ worked with providers and the Community Advisory Board to assess changes that should be made to the services and size and structure of the home. As of FY 2023, a Request For Proposal (RFP) process is underway which will result in the selection of a provider to run the program.

The RFP calls for a community partner to provide secured housing and a safe space for women to stabilize, address trauma, build healthy relationships, be referred to substance abuse and behavioral health treatment and learn new skills. The RFP calls for Black and African American culturally specific, trauma-informed programming with the purpose of empowering residents' strengths and resiliency, by supporting them to reach their goals to uplift themselves, their families, provide long-term support, and build stronger communities.

Performance Measures								
Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer			
Output	Number of women served annually	20	40	0	15			
Outcome	Percent of adults convicted of a misdemeanor or felony within 1 year of supervision start date	26%	15%	25%	25%			

#### **Performance Measures Descriptions**

Measure 1: In FY 2023 the RFP process is still pending. The number of clients served will depend on the space available with an estimate of 12-15 clients annually.

### **Revenue/Expense Detail**

	Adopted General Fund	Adopted Other Funds	Proposed General Fund	Proposed Other Funds	
Program Expenses	2023	2023	2024	2024	
Contractual Services	\$697,954	\$0	\$725,721	\$0	
Total GF/non-GF	\$697,954	\$0	\$725,721	\$0	
Program Total:	\$697,954		\$725,721		
Program FTE	0.00	0.00	0.00	0.00	

Program Revenues						
Total Revenue	\$0	\$0	\$0	\$0		

### **Explanation of Revenues**

County General Fund

# Significant Program Changes

Last Year this program was: FY 2023: 50028 Diane Wade House

The prior Diane Wade Program space set up was a "dormitory style" that had the capacity to accommodate a large number of clients (40). Feedback from residents indicated the dorm style felt institutionalized, reminding them of incarceration, perpetuating trauma and this was a barrier for client entry. Additionally, COVID-19 guidance required social distancing among congregate residents and reducing the capacity and number of referrals to the house. To mitigate these challenges, DCJ held a series of visioning/listening sessions in the fall of 2020 to solicit feedback from staff, community members and past clients of the Diane Wade Program in revisioning what this culturally specific transitional housing for women would look like prior to the issuance of the RFP. This reinforced the message that a single or double room occupancy house with a smaller census with intensive services would best serve high risk and high need clients.