



SNAPSHOT: Three Critical Criminal Justice Programs
Solutions to Sacramento Region's Health and Restoration



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SNAPSHOT: Three Critical Criminal Justice Programs

SUMMARY

The Robert Wood Johnson Foundation framed the punitive landscape well. “Mass incarceration disproportionately impacts lower-income communities, communities of color, and persons with disabilities, creating a barrier to achieving health equity.”¹

Government leaders have an historic opportunity to change the face of public safety in Sacramento. As they move into thoughtful analysis of the traditional, increasingly unaffordable, and ineffective carceral systems, they find themselves questioning deeply rooted social myths about how to manage and sustain cost effective public safety. Conventional narratives of “good versus bad” are complicated by evidence that behavior deemed “criminal” often circles back to public policies that disinvest from, abandon, and dehumanize certain groups of people. Punitive systems, created in the name of public safety, are proven by decades of legal rulings and data, including in Sacramento County, to be inhumane, racist, classist, and ableist. Policy makers must choose a path--one that largely maintains the punitive nature of our systems and the harms those systems produce, or one that bends the arc toward justice.

County leaders have a responsibility to institute public safety for all--which at its core addresses health and safety inequity. Intersections of mental health, race, poverty, disability and carceral systems are at the forefront of public safety reimagination across the country. Changing from punitive systems of incarceration to investments in social supports, youth services, housing and economic disparity reductions, and mental health treatment have shown promise for a new, safe, more cost efficient and humane path forward. That promise is amplified when governments adequately support community-based nonprofit organizations to provide these types of services. Research shows that support for these innovative projects, which are trusted by those who live in our most underserved areas, results in significant reductions in crime rates.²

¹ Acker J, Braveman P, Arkin E, Leviton L, Parsons J, Hobor G. [Mass Incarceration Threatens Health Equity in America](#). Executive Summary. Princeton, NJ: Robert Wood Johnson Foundation, 2019.

² Sharkey P, Torrats-Espinosa G, Takyar D. [Community and the Crime Decline: The Causal Effect of Local Nonprofits on Violent Crime](#). American Sociological Review. 2017;82(6):1214-1240. doi:10.1177/0003122417736289

2020 proved to be a pivotal year with the highly respected, American Public Health Association's two-year researched declaration, [*Structural Racism is a Public Health Crisis*](#).

Sacramento County has echoed that sentiment, approving a resolution declaring [racism as a public health crisis in Sacramento](#), and has yet to show outcomes. Along with lawsuits, there have been numerous reports that underscore the county's disparities. In 2018 The Healthy Sacramento Coalition³ partnered with PolicyLink and the University of Southern California Program for Environmental and Regional Equity to examine the state of equity in Sacramento. It found that "It is abundantly clear that our current structures and policies are broken."

Justice2Jobs Coalition partners, of which we are proud to include the Greater Sacramento NAACP, studies government successes and failures and offer solutions through the lens of the criminal legal system and [social determinants of health](#). Our commitment is to put power back in the hands of communities who are most disproportionately impacted by the bureaucracies of harm meant to remedy social problems.

This report offers a critical assessment of decisions that underfund or derail overlooked, cost-effective investments in equitable [public health](#) and [safety remedies](#). It then provides a snapshot of three county criminal justice projects that have potential to begin shifting Sacramento's approach toward one that is more restorative. That said, our highlighting of these three opportunities should not be mistaken as support for a strictly institutional response to the public safety challenges facing Sacramento. We firmly believe in the expertise of those who experience traumatic impacts from contact with the criminal legal system. Impacted persons inform the credibility of community organizations and innovative community projects that are indispensable to ultimately moving us away from the mass carceral system into one that can truly protect the health and safety of Sacramentans and restore our communities.

³ ["Health Equity Now: Toward an All-In Sacramento"](#) Mary M. Lee, James A. Crowder Jr., Pamela Stephens, Justin Scoggins, PolicyLink, February 2018.

STATEMENT OF PROBLEM

Sacramento County’s approach to public safety is ineffective, costly, inequitable, and unsustainable. The county’s system reflects the centuries-old practice of punitive confinement in brick-and-mortar structures and related punitive systems that undermine health equity. A large and growing body of research supports adoption of restorative and transformative justice as sounder ways to ensure community health and safety.⁴ Sacramento has been slow to accept and respond to this evidence.

The county’s decision making practices similarly lag behind public policy advances of the last two decades. Current best practices call for collaboration with a broad range of stakeholders to evaluate current practices, learn about research-based policies and practices, and take actions to improve systemwide outcomes by aligning the two.⁵ By contrast, Sacramento County has tended to treat existing correctional programs as fixed baselines upon which to build, thereby sustaining the harm caused by those traditional systems and structures.

The county has failed to connect the dots between inequity, racism, and poverty on the one hand and failed policies on the other. While the Board of Supervisors’ 2020 declaration of racism as a public health crisis is an important first step, following through on this requires an examination of the county’s policies and programs through an equity lens and a collective willingness to make fundamental, structural changes where needed.

Illustrations of these shortcomings on the part of our county include:

- Raising allocations for the county’s existing, punitive approach to justice while reducing budgets for health and human services and providing minimal to no sustained support for transformative justice and economic restoration.

⁴ See for example, [Ending Mass Incarceration: Ideas from Today’s Leaders](#), edited by I. Chettiar and P. Raghavan, ed. (2019), Brennan Center for Justice; [Imprisoning Communities: How Mass Incarceration Makes Disadvantaged Neighborhoods Worse](#), T.R. Clear (2007) in *Studies in crime and public policy*. Oxford University Press; and [Effects of Outpatient Treatment on Risk of Arrest of Adults With Serious Mental Illness and Associated Costs](#), Richard A. Van Dorn, Sarah L. Desmarais, John Petrila, Diane Haynes, and Jay P. Singh, *Psychiatric Services* 2013 64:9, 856-862.

⁵ See for example [The Evidence-Based Decision Making Initiative: An Overview for State and County Legislators and Administrators](#), by Madeline M. Carter of the Center for Effective Public Policy, for the National Institute of Corrections.

- Relying on personnel who are *in and of* the existing criminal legal systems as primary experts and sources of information when considering whether and how to change these entrenched systems. However competent and knowledgeable these individuals may be, they have an inherent interest in maintaining current systems despite ineffective and unjust outcomes. They are unable to provide an objective assessment of their own programs or different approaches outside of their traditional models that better align with federal, state, and other data-informed system change models.
- An almost complete absence of public or even internal analysis, review and accountability of current policies and programs:
 - No cost-benefit analysis
 - No system-gap analysis
 - No litigation impact analysis
 - No public health impact analysis
 - No racial equity impact analysis
 - No environmental impact analysis
 - No community complaint tracker or analysis
 - No office of continuous improvement/change management
 - No regular, independent analysis and public, easily accessible reporting on the impacts of the county’s carceral systems
 - No integrated data system connecting multiple data sets to analyze individuals’ points of contact in various county departments and to evaluate program interactions. (As an example, Sonoma County has a [collaboration](#) among the County’s safety net departments—Health Services, Human Services, Community Development Commission, Probation, Child Support Services and criminal justice partners. Together, the departments share data and work holistically to support clients with complex needs in ways that ultimately improve their health and economic stability.) Such a resource is necessary to identify effective practices and determine how best to coordinate services, reduce duplication, and improve outcomes.

- Even when ostensibly implementing accountability by engaging an inspector general, thwarting those very efforts by providing no authority to carry out oversight.
- A severe lack of planning, as evidenced by:
 - No comprehensive change management plan or timeline
 - No comprehensive county carceral management and depopulation plan
 - No plan for alternatives to incarceration (ATI)
 - No centralized, non-criminalizing office or department designated for ATI, diversion, reentry, reinvestment, and restoration
 - No Blue Ribbon Commission to put forth recommendations that align with federal and state trajectories of criminal legal, justice, health equity, and restorative reforms
 - No process for experts to inform and review new plans, policies, and protocols
- Underfunding departments, like the Office of the Public Defender, that improve long-term public safety by tackling the drivers of inequity, poverty, and racism.
- Disinvesting and discontinuing programs that place impacted residents at their center, such as the Homeless Emergency Aid Program (HEAP) and the Jail’s Suicide Prevention Task Force.
- Depending regularly on one-time grants—an unsustainable model—to provide effective solutions that are then terminated.
- Directing funding meant to be used for the purpose of decarceration and diversion to criminalizing efforts such as Community Correction Partnership dollars siphoned to the County Crime Lab
- Failing for more than six years to seat a community participant on the Community Corrections Partnership, despite a state mandate to do so.

RESULTS OF OUR EXISTING CARCERAL SYSTEM

Sacramento County’s [Selected Crime and Correctional System Data Trends](#) 2020 report shows a significant, sustained decline in both felony and misdemeanor crime rates, with the total crime rate down nearly half from 2005 to 2019. For June 2020, the report shows a 20-year

low of 2,475 in monthly average daily population (ADP), down nearly half from a July 2008 peak. And yet, we have:

- **Longer lengths of stay:** The average length of stay in the jail has consistently risen over the last 20 years, and since 2005, is up 52% (pre-COVID-19).
- **Majority pre-trial:** Over 70% of those incarcerated in June were in pretrial jail detention and thus legally presumed innocent.
- **Large/growing share in need of mental health care:** More than half of our county's jail population is deemed mentally unhealthy.
- **Persistent Racial disparities:** The share of detainees who are Black/African American remains consistent at just under 40% while this group makes up just 11% of the county population. Black/African American persons have a 7 times greater representation in Sacramento jails than their white counterparts.

These findings lead to the following questions:

- Why is the length of stay continuing to rise regardless of the average daily population?
- Why does Sacramento County criminalize our Black/African American community more harshly than our white community?
- Why does the county criminalize those who are impoverished and/or have health needs, instead of addressing the underlying problems?
- Why do we jail people whose offenses are clearly related to health conditions?
- Given the racial disparity described above, how will the county stop doing disproportionate harm to our most vulnerable communities and address the long term negative impacts of the harm already done?
- Why is the Sacramento jail population consistently higher than in some other counties, such as Riverside, Santa Clara, and Alameda that have larger populations?
- What County programs and resources are available that currently practice restorative justice?

A PROPOSED WAY FORWARD

The approved November 2020 [resolution](#) declaring racism a public health crisis in Sacramento County lays the groundwork for change. The subsequent February 9, 2021 [press release](#) underscores this opportunity. In the committed words of District 1 Supervisor Phil Serna, "As

stewards of resources and programs that support our community's youngest people and their families, we have an obligation to clearly articulate First 5's intent to ensure racism has no place in what we do and how we do it." Supervisor Serna continued, "The resolution adopted is the road map to ensure concern for racial equity and social justice permeates everything we do, and that we're held accountable."

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In his statement, Supervisor Serna recognizes an important truth: the wellbeing of our most vulnerable children is impacted by the health and wellness of their *parents, families, and neighborhoods*. This is an especially important connection to understand.

Although the county does not make available the share of those in custody who are parents with children at home, half to three-quarters of incarcerated individuals nationally report having a minor child, and 40% of incarcerated parents are Black/African American fathers. Children of parents who are incarcerated are 6 times more likely to be incarcerated themselves. According to the National Institute of Justice, "Unfortunately, parental incarceration is only one of a series of separations and stressful situations facing children whose parents are involved in the criminal justice system. If we consider the full continuum of the criminal justice process — arrest, pre-trial detention, conviction, jail, probation, imprisonment, and parole — the number of children affected is significantly larger."⁶

In the spirit of Sacramento County's support for impacted youth and the adopted road map to racial equity, we identified three programs that diverge from the county's traditional path. These evidence-based programs demonstrate the county's opportunity to create effective, efficient, equitable, and sustainable approaches to public safety. Two of the programs have been implemented as grant-funded pilot programs and one is an existing county inpatient psychiatric hospital funded at half residential capacity. Together, they serve 150 individuals who would otherwise be incarcerated, and all three have the potential to scale up quickly and cost-efficiently to serve many more.

⁶ Eric Martin, "Hidden Consequences: [The Impact of Incarceration on Dependent Children](https://nij.ojp.gov/topics/articles/hidden-consequences-impact-incarceration-dependent-children)," March 1, 2017, nij.ojp.gov: <https://nij.ojp.gov/topics/articles/hidden-consequences-impact-incarceration-dependent-children>.

The cost of these programs is a fraction of that for new brick and mortar structures with a similar capacity, which typically include large up-front outlays and ongoing facility and maintenance costs in addition to programmatic and personnel costs. Investing in programs such as the three highlighted here would free resources for support systems that mitigate criminogenic factors. Moreover, these programs can be far more flexible and responsive to changing practices and conditions, as compared with the constraints of large, fixed investments like the proposed jail annex. Each program could be scaled efficiently to alleviate some of the current pressure on the county related to increasing diversion from jail, reducing jail population, addressing inhumane conditions, and providing treatment for those suffering from health disorders, and meeting other requirements of the Mays consent decree, described in the box below.

Mays Consent Decree

The 2019 [Mays v. County of Sacramento](#) federal consent decree seeks to hold the county accountable for violating human and civil rights laws. Specifically, the decree supports federal goals to reduce jail overcrowding, eliminate unhealthy detention conditions, and promote [HIPAA](#) and [ADA](#) compliance. It aligns with the federal and state goals of redirecting systems of mass incarceration—which inevitably promote racial and health disparities—toward systems of transformational justice that promote public safety without relying on incarceration as the central strategy. Such an approach can alleviate fiscal burdens that defund public health and support services with devastating results in housing and health insecurities. The decree exemplifies how government bodies are being held accountable for creating long-term solutions to repair the harm that current systems have caused to individuals, families, and communities. The County’s independent Carey Group Report ([referred to here, but not published on the County’s website](#)) affirms the accountability direction found in the federal consent decree.

THREE CRITICAL PROGRAMS

1. EMPOWER: A Department of State Hospitals Mental Health Diversion Grant.

EMPOWER is the county's first dedicated forensic behavioral health outpatient program prioritizing services for those involved in the criminal legal system. A critical success factor for this program is the participation of professionals with specific training in understanding factors that can lead to criminal behavior and the needs of impacted clients.

This program, currently implemented by the county's Office of the Public Defender (SCPD), serves the populations most overrepresented in the jails: persons with serious mental illness, those who are likely to be found incompetent to stand trial, those charged with felonies, and those with court ordered diversion. Three key components define the success of this program.

- Offers a full service partnership
- Involves a professional forensic mental health specialist who assesses participants to ensure they can be safely treated in the community
- It is implemented by the single office in the county's criminal justice system that is most aligned with decarceration

Persons suffering from mental illness are offered a full service partnership (FSP). [FSP](#) programs are considered the gold standard in outpatient mental health care. This behavioral health model uses intensive case management and [treatment with a multidisciplinary team](#). It puts the client's needs at the center of the treatment plan and uses data informed strategies and a "whatever it takes" approach to meet those needs. Continuity of care is recognized as one of the most important features of this model because the client builds a relationship with their assigned care and skills team. No other program in the county centers the individual's need regardless of the level of fluctuating psychiatric status. The program includes a comprehensive needs assessment, 24/7 crisis intervention care, intensive mental health treatment, medical care, and job and life skills support. Currently, the [Los Angeles Office of Diversion and Recovery](#) has delivered astounding success incorporating the FSP model in decreasing homelessness and psychiatric hospitalizations while increasing independent living and employment.

Impact: This is a 3-year grant ending June 2023 and totaling \$4.5 million (partially matching). It serves 50 individuals, half of whom receive housing. The program is easily scalable such that it could continue to reduce the jail population thereby lowering criminogenic risks, increasing economic productivity and housing opportunities, and restoring families.

2. SCMHTC (pronounced “Schmick”), Sacramento County Mental Health Treatment Center.

This is the county’s inpatient psychiatric hospital. Following budget reductions in 2008, the county reduced SCMHTC’s structure to two parts. The initial service was a 100 bed inpatient psychiatric facility. This structural change reduced the inpatient part to 50 beds. The new part became an urgent care facility (known as Urgent Care). This urgent care facility limits intake services to weekdays between 8 a.m. and 5 p.m. The 24/7 stabilization unit closed and the inpatient 50 beds no longer remain.

The other 50% inpatient bed capacity remains.

SCMHTC provides discharge planning from inpatient care and directly coordinates with outpatient providers. The county could serve 100 patients in the existing facility while complying with HIPAA, ADA, and other relevant standards; the capacity is limited only by the program budget. SCMHTC is an underutilized resource that could add tremendous value as a restorative alternative to jail, helping the county address diversion and depopulation challenges by returning to its original structure and intention. It can also be considered for fixed structure and program scaling.

As our untreated mentally impacted population grows, so do the community’s needs associated with mental illness. Treatment needs include responses to trauma, delusions, and their related outcomes including domestic violence, physical harm to self and others, theft, and the condition of being unhoused.

When a person with acute mental health needs is arrested, the arresting agent determines where to take the impacted person. The options are SCMHTC, emergency rooms, and the jail. Agents are likely to be unsuccessful with a SCMHTC placement due to insufficient capacity. Emergency rooms require the agent to remain present until the patient is treated, thus imposing costs to law enforcement in paid time and time away from patrol. This leaves one viable option from the perspective of the arresting agent: a jail.

Re-investing in SCMHTC to restore its pre-2008 capacity would be a relatively cost-effective and sustainable way to reduce jail population by 50 individuals with significant mental health needs, thereby alleviating several of the facility-related consent decree issues.

Also notable is the potential for SCMHTC to be part of the alternative 911 proposal currently under consideration with the Board of Supervisors. As a non-carceral intervention, SCMHTC could further advance the county's public safety interests along with the objectives of the consent decree.

Impact: Restoring SCMHTC would provide treatment capacity for 50 individuals with significant mental health needs, decrease the jail population by 50, and avoid substantial costs related to building a new carceral facility. It would lower criminogenic risks, increase the community's economic viability, lower the unhoused population, and contribute to restoring the impacted individuals, families, and communities.

3. Pretrial Support Project: A Bureau of Justice Assistance/Justice and Mental Health Collaboration Program Grant.

The Office of the Public Defender (SCPD) operates a Pretrial Support Project (PTSP) funded by a three-year, \$750,000 federal grant that expires in 2023. (This is distinct from the Probation Department's pretrial assessment and supervision program that depends on [\\$9.5 million](#) in state funding.)

PTSP responds to four key challenges the county faces with a client-centered program based on a holistic defense approach:

- Jail overcrowding and the resulting exposure to inhumane conditions
- Growth in the number of incarcerated individuals with mental health needs
- Longer time in jail for those with mental health and/or substance abuse treatment needs
- Lack of coordination with criminal court and jail discharge planning

Unlike Probation's Pretrial Services, under the PTSP, skilled personnel (including trained law and social work student interns) contact detained individuals within 24 hours of booking and complete a comprehensive needs assessment. Based on the assessment, personnel make a recommendation to the attorney for social worker follow up, case navigation toward collaborative/diversion courts, and/or advocacy for release from custody based on needs, COVID concerns, and compliance with a recent California Supreme Court ruling requiring the least restrictive monitoring for pretrial individuals. When social worker follow-up is

recommended, a PTSP social worker coordinates jail discharge, provides links to services, conducts further clinical assessments, and provides service coordination and case management. The program also assists families with navigating the process of recovering property held at the jail, appearing at Zoom court hearings, and finding an individual's court dates. Services address the underlying needs that may have contributed to an individual's engagement in unlawful conduct, thereby interrupting the recurring cycle of criminalization for individuals with mental health needs.

By contrast, in the county's carceral system where most criminally charged individuals with mental health needs are held, these same challenges are routinely met with punitive responses, which has led to further trauma-based impacts such as becoming unhoused which adds to a revolving door at the jail and its attendant costs in human, legal, and budgetary terms.

Although the PTSP program is in its infancy, the current needs assessments determine that 79% of persons who engage with the program are in need of mental health and forensic social worker support. This evidence overshadows the Department of Correctional Health's representation at 58%. This is problematic for several reasons:

- Underprojected needs impact budget decisions.
- The May's consent decree is being used as a ceiling for implementation of lawful conditions. If the conditions, which include mental health needs, are not assessed well, the remedy will be inadequate, therefore not meet the consent decree.
- Approaches to gathering data may be different. The standard should be to know the real needs based on information that comes directly from the client. Ascribing needs from the perspective of personnel without corroboration of someone who can speak on behalf of the client is insufficient. These insufficiencies will impact restorative health and criminalization outcomes.
- Most importantly, there are real people behind the numbers. If the lowest projected number is used, there will continue to be racial and class disparities--real people who need mental health support.

Impact: This program meets many of the federal consent decree requirements while significantly lowering immediate and long-term costs for the county. The program is flexible, relies on personnel rather than facilities, is sustainable, and could be scaled to many times its

current capacity while remaining cost effective. The program takes a restorative approach to persons impacted by poverty, health disparities, racism, and criminalization. Additionally, and perhaps most notably, this program can preserve employment for arrested individuals by mitigating their length of stay, thereby diminishing reliance on other public supports and preserving personal and family economic stability.

PRELIMINARY RECOMMENDATIONS

Our hope is that county leadership would exercise the opportunity to be a pioneer and national leader in reimagining how restorative and transformative justice could change our region. A minimum expectation is to bring Sacramento's approach to public safety and its related public policy decision making practices into alignment with evidence-based practices, and to help county leaders connect the dots between inequity, racism, and poverty on the one hand and failed policies on the other. We offer the following preliminary recommendations.

- Adopt a collaborative, evidence-based decision making model as the basis for effective public policy decisions.
 - Follow the model with fidelity (that is, fully implementing all components as designed and tested), spending the time necessary to engage stakeholders--with special emphasis on persons who are most impacted by the decision, map existing programs, learn about research-based policies and practices, and evaluate current and proposed programs against those benchmarks.
- Conduct racial equity impact analyses using established analytic models to evaluate existing and proposed programs. Give the results significant weight in county decision making.
- Consider that with every public dollar spent on incarcerating a parent, loved-one, or neighbor, the county is disinvesting in a child. That disinvestment gravely impacts budgets, and over the long term debilitates families' ability to lead healthy lives.
- Maximize usage of pre-trial intervention and alternatives to incarceration that protect children, keep families intact, and reap dividends for public dollars.

- Evaluate the three critical programs described in this report against the above public policy and racial equity best practices, and make continuation, expansion, and supplemental funding decisions accordingly.
- Evaluate for redundancy. Redundancy can be good. However, if redundancy is not recognized and evaluated it can become an internal morale issue for personnel, projects can fail to bring about the outcomes for which they are meant.
- Invite non-elected department experts to evaluate proposals. While elected officials can bring forward ideas, the board does not have a mechanism to benefit from the knowledge and ideas of non-elected departmental experts who might have useful countervailing perspectives about the elected officials' presentations.
- Create clear quality assurance goals. Lawsuits should be the minimum standard.
- Develop an integrated data system that can draw from multiple departments' data sources to provide a comprehensive view of impacted persons' pathways through county systems, program effectiveness, program gaps, and other systemic issues.
- Provide regular, public, disaggregated reporting on county program utilization, outcomes, and costs, and practice transparency.
- Invest heavily in community projects led by people who are most impacted
- Provide researchers and community advocates with access to de-identified data under the purview of the Sheriff, Probation Department, and Courts for independent analysis.
- Access the people who are directly harmed or benefit from current systems and supports. Impacted Sacramentans are our greatest asset to know what changes must be employed to achieve a positive outcome

Lastly, we conclude with these thoughts. Sacramento County has a wealth of community-based organizations providing innovative solutions to systemic problems that plague our neighborhoods. We urge county leaders to treat these innovators as gems to be actively sought out and supported. Further, the county itself has many resources and projects to aid criminally-impacted individuals, including those with mental health needs. These programs are already up and running, trusted by community members, and could be brought

to larger scale with modest investments. The three programs highlighted in this report are just the tip of the iceberg. Before investing tens of millions of dollars—and committing hundreds of millions more—at the expense of the rest of the county budget years into the future, we urge county leaders to take an inventory of those assets that are already working. We urge county leaders to provide the clear-eyed leadership required to transform Sacramento’s government, institutions, and public workforce to meet immediate and future needs, not those of yesteryear. The county’s [mission and values](#) are both aspirational and widely unpracticed. It is in leadership’s power to reimagine and create a public safety system staffed by professionals who deeply understand the harms caused by the correctional justice and health systems. The county can employ agents of innovation and stewards of county resources while protecting and restoring our communities.



Justice2Jobs Coalition (J2J) is a community power-building project that rejects the criminal punishment bureaucracy and advocates for the creation of humane systems.

We catalyze Sacramento region’s criminal legal, economic and anti-criminalizing policy reform. We believe in forgiving fines and fees, advocating for criminal records repair and other restorative practices that advance pathways for economic opportunity. We recognize and center criminally impacted people who have traumatic lived experience, including from sustained, structured social oppression. We look at justice systemically—excavate and report facts, interrogate processes, and create solutions for healthy, equitable, and inclusive neighborhoods.



Vision Statement

The vision of the National Association for the Advancement of Colored People is to ensure a society in which all individuals have equal rights without discrimination based on race.

Objectives

- To ensure the political, educational, social, and economic equality of all citizens
- To achieve equality of rights and eliminate race prejudice among the citizens of the United States
- To remove all barriers of racial discrimination through democratic processes
- To seek enactment and enforcement of federal, state, and local laws securing civil rights
- To inform the public of the adverse effects of racial discrimination and to seek its elimination
- To educate persons as to their constitutional rights and to take all lawful action to secure the exercise thereof, and to take any other lawful action in furtherance of these objectives, consistent with the NAACP’s Articles of Incorporation and this Constitution.

The Greater Sacramento NAACP

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