Contra Costa County In-Custody Survey 2025

The Community Advisory Board (CAB) Programs & Services Subcommittee wants to better understand your health, goals, and needs while you are in jail and after release. Your answers will help CAB make recommendations to improve services for people returning home from jail or prison. Thank you for your time!

1. Where are you currently staying?
☐ Martinez Detention Facility
☐ West County (Richmond)
☐ Marsh Creek (Clayton)
2. How long have you been detained at your current facility?
☐ Less than one (1) week
\square One (1) week to less than one (1) month
\square One (1) month to less than three (3) months
\square Three (3) months to less than six (6) months
\square Six (6) months to less than one (1) year
☐ More than one (1) year
☐ Prefer not to answer
□ Unknown
3. Do you have any of these health concerns? (Select all that apply)
☐ Chronic illness (e.g., diabetes, heart disease, chronic pain)
☐ Physical challenges (e.g., trouble walking, moving, or doing daily tasks)

☐ Concerns about drug or alcohol use
☐ Learning or developmental (e.g., ADHD, dyslexia, autism)
☐ Vision or hearing loss
□ None of the above
4. Do you have any mental health or emotional concerns? (Select all that apply)
\square Mental health challenges (e.g., anxiety, depression, PTSD, bipolar, etc.)
☐ Guilt or emotional pain about past behavior
\square Feeling disconnected from your beliefs, values, or purpose
□ None of the above
5. Where do you expect to live after release?
☐ West County (Richmond, San Pablo, etc.)
☐ Central County (Martinez, Concord, Walnut Creek, etc.)
☐ East County (Antioch, Pittsburg, Bay Point, etc.)
☐ Far East County (Brentwood, Oakley, etc.)
☐ Outside of Contra Costa County
6. What are the top three needs or concerns that are most important to you
after release?
□Housing
☐ Employment or job training
☐ Mental health or counseling
□Substance use treatment
\square Family or parenting support
□Legal help
□Transportation
\square Income or public benefits
□Education
☐ Immigration services
\square Supportive community or positive relationships
\square Spiritual or emotional support
□ Other:
7. What kinds of help or services would best support your goals after release?
(Select all that apply)
☐ Housing help
\square Job training or employment programs
☐ Mental health or counseling
☐ Substance use treatment

☐ Family or parenting programs
☐ Legal help
☐ Transportation assistance
☐ Financial or benefits help
□ Supportive community programs
□ Spiritual or emotional support
□ Other:
8. What supportive services are most needed inside the jail? (Select all that
apply)
☐ Education or vocational training
☐ Mental health support
☐ Substance use treatment
☐ Family or parenting programs
☐ Faith-based or spiritual support
\square Connections to community programs before release
☐ Gender-specific programs
□ Other:
9. What race or ethnicity do you most identify with?
□ White
☐ Black or African American
☐ Hispanic/Latinx
☐ Asian or Pacific Islander
☐ American Indian/Alaskan Native
☐ Two or more races
☐ Prefer not to say
10. What gender do you identify as? (Select all that apply)
□ Male
□ Female
□ Transgender
□ Nonbinary
☐ Prefer not to say
11. What is your age group?
\Box 18-25
\square 26–45
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□ 46–64 □ 65 or older
Thank you for sharing your experiences. Your input will help improve programs and support for people returning home.