



# The Florida Senate

## Local Funding Initiative Request

### Fiscal Year 2022-2023

LFIR # 2685

1. Project Title

2. Senate Sponsor

3. Date of Request

4. Project/Program Description

This program equips incarcerated parents with the tools to restore their emotional well being, re-establish their self-confidence in their parenting skills, and to teach them tools to rebuild and strengthen their relationships with their children. Our mission is to equip and restore incarcerated men and women to become devoted parents so the generational cycle of incarceration can be broken. Malachi Dads and Hannah's Gift programs are a multi-book curriculum that develops purpose in the lives of inmates, elevates the role of fathers and mothers, and strengths their life-long influence on their children. These programs are outcome based practices, which includes parenting classes and promoting relational restoration.

5. State Agency to receive requested funds

State Agency contacted?

6. Amount of the Nonrecurring Request for Fiscal Year 2022-2023

Type of Funding	Amount
Operations	170,000
Fixed Capital Outlay	0
<b>Total State Funds Requested</b>	<b>170,000</b>

7. Total Project Cost for Fiscal Year 2022-2023 (including matching funds available for this project)

Type of Funding	Amount	Percentage
Total State Funds Requested (from question #6)	170,000	81%
<b>Matching Funds</b>		
Federal	0	0%
State (excluding the amount of this request)	0	0%
Local	40,000	19%
Other	0	0%
<b>Total Project Costs for Fiscal Year 2022-2023</b>	<b>210,000</b>	<b>100%</b>

8. Has this project previously received state funding?

Fiscal Year (yyyy-yy)	Amount		Specific Appropriation #	Vetoed
	Recurring	Nonrecurring		

9. Is future funding likely to be requested?

a. If yes, indicate nonrecurring amount per year.

b. Describe the source of funding that can be used in lieu of state funding.

10. Has the entity requesting this project received any federal assistance related to the COVID-19 pandemic?



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If yes, indicate the amount of funds received and what the funds were used for.

#### 11. Details on how the requested state funds will be expended

Spending Category	Description	Amount
<b>Administrative Costs:</b>		
Executive Director/Project Head Salary and Benefits	Full time employee - program manager	45,000
Other Salary and Benefits		0
Expense/Equipment/Travel/Supplies/Other		0
Consultants/Contracted Services/Study		0
<b>Operational Costs: Other</b>		
Salary and Benefits		0
Expense/Equipment/Travel/Supplies/Other	Training supplies, books, curriculum, and office supplies for inmates and trainers. Travel and vehicle expenses to go to 6 prisons on a weekly basis. Digital and office supplies and any IT fees. Pre-approved reunification family events and graduation supplies at end of each course.	125,000
Consultants/Contracted Services/Study		0
<b>Fixed Capital Construction/Major Renovation:</b>		
Construction/Renovation/Land/Planning Engineering		0
<b>Total State Funds Requested (must equal total from question #6)</b>		<b>170,000</b>

#### 12. Program Performance

##### a. What specific purpose or goal will be achieved by the funds requested?

Reconnecting families through the classes and approved family events throughout the year. Lower recidivism rates for the incarcerated parents when released. Build positive relationships with parents and child(ren) while in prison. Reduce the generational incarceration cycle. Help change the prison culture to a positive supportive community, both in and out of prison.

##### b. What activities and services will be provided to meet the intended purpose of these funds?

Teach parenting classes to incarcerated fathers (Malachi Dads Program) which is a 4 - 12 week class. Hannah's Gift program is a 3 - 12 week class which is for the incarcerated mothers. After each program is completed, there is a special graduation for each inmate who finished. With the pre-approval of the prisons, special family restorations events are promoted and supplied throughout the year.

##### c. What direct services will be provided to citizens by the appropriation project?

Services provided: Through these classes, we are seeking to reduce the recidivism rates which in turn reduces the cost of incarceration. By breaking the cycle of generational incarceration, crime is also reduced throughout the state. By teaching the skills for family restoration and positive relationship also builds strong families and strong communities. Helping men and women develop and grow in moral rehabilitation also helps them to become positive influences in their prison communities and outside communities when released.

##### d. Who is the target population served by this project? How many individuals are expected to be served?

We currently serve in 6 prisons in 2 different regions. We are currently talking with Region 2's chaplain about starting in their prisons. Currently about 300 inmates are in these classes, but each year the program grows and more inmates want to become involved in these classes as they see the difference it has made in their fellow inmates and their families.

##### e. What is the expected benefit or outcome of this project? What is the methodology by which this outcome will



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be measured?

Outcomes can be measured both in and out of prison. The prison where these classes are taught have seen behavioral infractions reduced. Family restoration , which starts in prison, gives a hope and purpose to the inmate and a goal for them to be able to get out of prison faster by better behavior. It has also lower the recidivism rate for these inmates plus breaking the incarceration generation cycle. Strengthens the family bonds which serves the good of the state both in and out of prison.

**f. What are the suggested penalties that the contracting agency may consider in addition to its standard penalties for failing to meet deliverables or performance measures provided for the contract?**

Follow the Department of Correction standard requirements for any project unfulfilled.

**13. The owners of the facility to receive, directly or indirectly, any fixed capital outlay funding. Include the relationship between the owners of the facility and the entity.**

no capital outlay funding requested



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#### 14. Requestor Contact Information

a. First Name  Last Name

b. Organization

c. E-mail Address

d. Phone Number  Ext.

#### 15. Recipient Contact Information

a. Organization

b. Municipality and County

#### c. Organization Type

- For Profit Entity
- Non Profit 501(c)(3)
- Non Profit 501(c)(4)
- Local Entity
- University or College
- Other (please specify)

d. First Name  Last Name

e. E-mail Address

f. Phone Number

#### 16. Lobbyist Contact Information

a. Name

b. Firm Name

c. E-mail Address

d. Phone Number