COACHING PACKET

Reentry Considerations for Women Offenders

One in a series of Coaching Packets designed to assist jurisdictions in the implementation of effective practices that will support successful offender outcomes

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Coaching Packet Series 1: Creating a Blueprint for an Effective Offender Reentry System

- A Framework for Offender Reentry
- Establishing a Rational Planning Process
- Engaging in Collaborative Partnerships to Support Reentry

Coaching Packet Series 2: Delivering Evidence-Based Services

- Implementing Evidence-Based Practices
- Effective Case Management
- Shaping Offender Behavior
- Engaging Offenders' Families in Reentry
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Introduction to the Coaching Packet Series

The Center for Effective Public Policy (the Center) and its partners, The Urban Institute and The Carey Group, were selected by the U.S. Department of Justice, Office of Justice Programs, Bureau of Justice Assistance to serve as the training and technical assistance providers to the Fiscal Year 2007 Prisoner Reentry Initiative grantees (hereafter "PRI grantees"). The project team served in this capacity from April 2008 to June 2010.

The Center is a nonprofit criminal justice consulting organization based in Silver Spring, Maryland. Since the early 1980s, the Center has provided training and technical assistance to the criminal justice field on a wide array of topics, including transition and reentry, and has administered a number of national projects of this kind. The Urban Institute was established as a private, nonprofit corporation in Washington, D.C. in 1968 and is a leader in prisoner reentry research, focusing on making best practice information accessible to practitioners and policymakers. The Carey Group is a justice consulting firm with extensive practitioner experience in evidence-based practices, strategic planning, community and restorative justice and corrections.

As a part of its technical assistance delivery to the PRI grantees, the Center developed a series of tools to assist grantees in specific areas of their reentry work. The final products of this work include eleven Coaching Packets in three series. These Coaching Packets offer practical value beyond the jurisdictions involved in this initiative and are available to criminal justice professionals and their partners interested in enhancing their strategies for reducing recidivism and improving offender outcomes.

Each Coaching Packet provides an overview of a specific topic as it relates to successful offender reentry, and offers tools and resources for those interested in exploring the topic in greater depth.

- *Series 1* provides a blueprint for an effective offender reentry system. This series provides a conceptual framework for addressing prisoner reentry at the policy level; outlines a strategic planning process to support implementation efforts; and explores the establishment of successful collaborative partnerships at the policy and case management levels.

- *Series 2* addresses key issues related to the delivery of evidence-based services to offenders. This series summarizes the key literature with regard to implementing evidence-based practices; explores advances in approaches to case management; addresses the important role of staff in changing offender behavior; and summarizes research and practice as it relates to working with women offenders, engaging families, and mentoring.

- *Series 3* provides guidance and tools to ensure that reentry efforts achieve their intended outcomes. This series describes methods to assess the effectiveness of reentry efforts and offers strategies for achieving continuous quality improvement.

FY 2007 Prisoner Reentry Initiative (PRI) Grantees

The Prisoner Reentry Initiative (PRI) – intended to support the development and implementation of institutional and community corrections-based reentry programs to help returning offenders find employment and provide other critical services – is a collaborative effort of the U.S. Department of Justice (DOJ), Office of Justice Programs, Bureau of Justice Assistance and the U.S. Department of Labor (DOL). Grants were awarded to state and local corrections agencies by DOJ to provide pre-release and transition services to offenders and were "matched" by DOL grants to faith- and community-based organizations (FBCOs) to provide post-release services, focusing on employment assistance and mentoring.

Thirty-five states received grants in three cycles of the Initiative during Fiscal Years 2006, 2007, and 2008.[1] Of these, 23 FY 2007 PRI grantees received assistance under this project. FY 2007 grants were awarded in the fall of 2007 and implemented from 2008 to 2010; however, some grantees will not complete their activities until 2011. The FY 2007 grantees provided technical assistance under this project included:

- ✓ ALASKA, Native Justice Center
- ✓ ARIZONA, Criminal Justice Commission/ Yuma County Sheriff's Office
- ✓ CALIFORNIA, Department of Community Services and Development
- ✓ COLORADO, Division of Criminal Justice Services/City of Denver
- ✓ DISTRICT OF COLUMBIA, Government
- ✓ FLORIDA, Department of Corrections
- ✓ HAWAII, Department of Public Safety
- ✓ INDIANA, Department of Corrections
- ✓ IOWA, Department of Corrections
- ✓ KANSAS, Department of Corrections
- ✓ MAINE, Department of Corrections
- ✓ MICHIGAN, Department of Corrections
- ✓ MINNESOTA, Department of Corrections
- ✓ NEVADA, Department of Corrections
- ✓ NEW JERSEY, Department of Corrections
- ✓ NORTH CAROLINA, Department of Corrections
- ✓ OHIO, Department of Rehabilitation and Correction
- ✓ PENNSYLVANIA, Department of Corrections
- ✓ RHODE ISLAND, Department of Corrections
- ✓ TENNESSEE, Department of Corrections
- ✓ VIRGINIA, Department of Criminal Justice Services
- ✓ WISCONSIN, Department of Corrections
- ✓ WYOMING, Department of Corrections

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[1] The PRI program will end when the FY 2008 grantees complete their activities.

Acknowledgments

Becki Ney, Principal, Center for Effective Public Policy, served as the PRI Training and Technical Assistance Program Project Director. Ms. Ney conceptualized and oversaw the development of the Coaching Packet series.

Madeline M. Carter, Principal, and Rachelle Giguere, Program Associate, Center for Effective Public Policy, served as the key editors for the Coaching Packet series. Ms. Giguere also provided extensive research support to the development of the series.

Introduction to the Reentry Considerations for Women Offenders Coaching Packet

The Contents of this Packet

This Coaching Packet provides:

- Support for the assertion that there are significant differences between male and female offenders that have implications for women's successful reentry;
- A review of the principles of gender-responsiveness for women offenders;
- An update on important developments in a number of critical practice areas;
- A list of strategies for assisting women offenders successfully transition from prison to the community;
- A tool to determine your jurisdiction's strengths and gaps regarding implementation of gender-responsive reentry strategies for women offenders;
- An aid for developing plans to address identified gap areas; and
- References to additional resources on the topic.

The Intended Audience for this Packet

This Coaching Packet was originally developed to assist grant teams that were established to manage local PRI initiatives. The teams were composed of representatives from institutional and community corrections and faith-based or community organizations involved in the delivery of pre- and post-release services to offenders transitioning from prison to the community. The content of these Coaching Packets has much broader application, however; the information and tools contained within this Coaching Packet can also be used by teams of criminal justice professionals and their partners to assess the status of their efforts in implementing evidence-based practices and effective reentry services to offenders.

This Coaching Packet may also serve as a resource for professionals at all levels who are interested in learning more about this topic.

How to Use this Packet

SECTION I: READ THE OVERVIEW ON REENTRY CONSIDERATIONS FOR WOMEN OFFENDERS.
This section of the Coaching Packet provides an overview of the ways in which women's experiences within and outside of the criminal justice system are different from their male counterparts, the principles of gender-responsiveness, and some strategies for achieving successful reentry with women offenders. Review its content and, if the information it contains is applicable to your work and addresses an area in which you feel you need to focus your efforts, use the tool in Section II to assess your jurisdiction's strengths and gaps with regard to implementing a gender-responsive approach to reentry for women offenders.

As a team, complete the Reentry Considerations for Women Offenders Coaching Packet Checklist. (Based upon the information you read in Section I, consider who may need to be involved so that you are able to answer the questions thoroughly.) Complete the checklist as a group and discuss your responses along the way.

- Rate each item listed in the checklist (yes, no, not clear).

- For items where your response is "not clear," make note of the additional information the team needs to collect in order to be able to rate this item.

- Add additional items that may relate to your jurisdiction's implementation of a gender-responsive approach to offender management and transition that are not already included on the checklist.

- Develop a consensus-based response for each item on the checklist.

- Once the checklist is completed, consider your jurisdictions' strengths in implementing such an approach. Make note of these.

- Next, consider your most significant gaps. Make note of these as well.

SECTION III: DEVELOP AN ACTION PLAN.

If, after completing the checklist in Section II, your team determines that further work on this topic is necessary or would be helpful, follow the steps below to identify your goals, objectives, and action items, and identify any additional assistance or expertise needed.

Working as a team, review your findings from the Reentry Considerations for Women Offenders Coaching Packet Checklist. Specifically:

1. Determine whether, based upon what you have read and discussed, you desire to advance your jurisdiction's work with regard to implementing a gender-responsive approach to reentry.

2. If you determine you have a desire to improve in this area, write a goal statement that reflects where you want to be with regard to improving your current efforts. Your goal might be to "Conduct awareness building sessions with managers on the key differences between male and female offenders and the implications of these differences for policy and practice," "Ensure that classification and risk and needs assessment tools have been validated for the agency's women offender population," "Develop or adopt a curriculum to train custodial staff or parole officers in gender-informed and evidence-based supervision strategies," or another goal. Using the Action Planning Worksheet in Section III, note your goal in the area of implementing a gender-responsive approach to reentry.

3. Identify your three most significant strengths in this area and discuss how you might build on those to overcome some of your gaps.

4. Identify your three most significant gaps. For each gap, write an objective. Your objectives might be, "To develop a profile of the risk and needs of women offenders using one of several newly developed gender-responsive assessment tools," "To review all established policies from a gender-responsive lens or with a gender-informed checklist to identify those

that require adaptation," or something else. Note your three objectives on the Action Planning Worksheet.

5. Add the following on the Action Planning Worksheet for each objective:

    a. The specific sequential steps that must be taken to meet the objective.

    b. The individual who will assume lead responsibility for this action item.

    c. The completion date for this action item.

6. Discuss whether additional assistance or outside expertise is needed to successfully achieve any of your action items. For instance, explore whether additional literature, guidance from another practitioner over the telephone, examples of work products from other jurisdictions, or on-site technical assistance would be helpful options.

    a. For each action item, identify those for which assistance/expertise is needed.

    b. Identify the type of assistance/expertise needed.

    c. Prioritize each of these need areas. If assistance/expertise will be limited, for which action items is assistance most needed?

    d. Begin exploring ways to secure the needed assistance/expertise.

How to Seek Additional Information

To download copies of the Coaching Packets, please visit the Center's website at http://www.cepp.com/coaching.htm. To obtain further information on the use or content of this or any of the Coaching Packets, or on the 2007 PRI Training and Technical Assistance Program, please contact:

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Section I: Reentry Considerations for Women Offenders

Research on the differences between male and female offenders invites institutional corrections and community supervision agencies to review the extent to which current practices acknowledge how women's experiences within and outside of the criminal justice system are different from their male counterparts. Through an understanding of these critical differences, corrections agencies can focus on those policies and programs that will maximize the success of women reentering the community.

Definition of the Problem and Rationale for Focusing on Women Offenders as a Distinct Population

WOMEN OFFENDERS: A GROWING POPULATION

While prison population growth has slowed in the past decade[2], the female offender population continues to rise at a faster rate than the male offender population. From 2000 to 2008, the number of women in state and federal prisons increased by 22%, while the number of men rose 14%.[3]

Percent Change in Male and Female State and Federal Correctional Populations, 2000-2008

Source: Sabol, West, & Cooper, 2008, Appendix Tables 6 & 8.
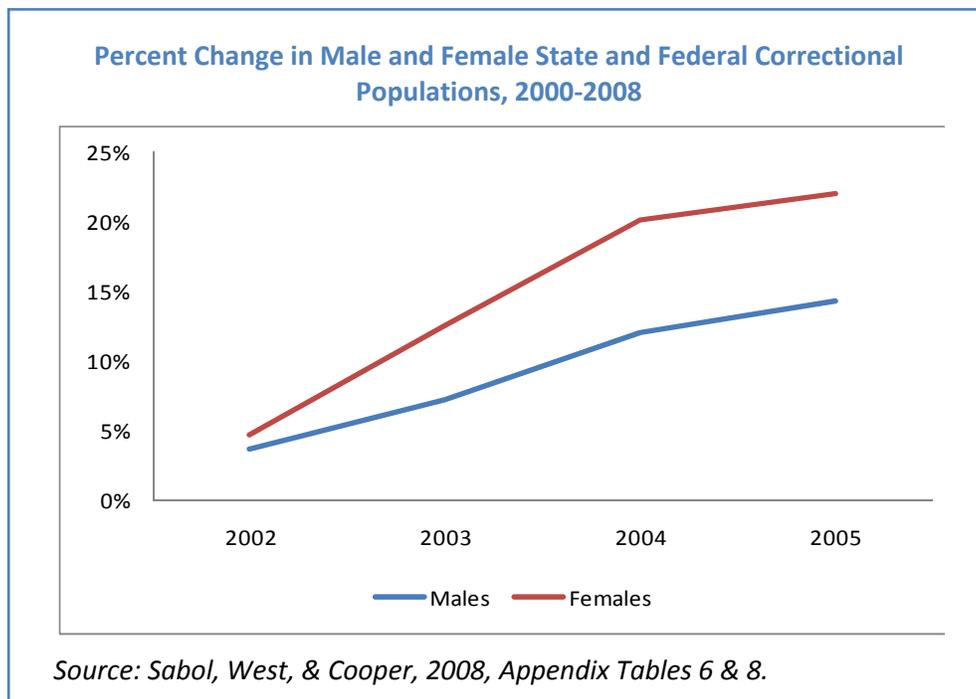
The increase in women offender populations can be traced to changes in state and national drug policies that mandated prison terms for even relatively low-level drug offenses. Between 1986 and 1999, the number of women incarcerated in state facilities for drug related offenses alone increased by 888% (compared to an increase of 129% for non-drug offenses).[4] For many women who are drug involved, or for whom community supervision obligations become

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[2] Sabol, West & Cooper, 2008.
[3] Ibid.
[4] Lapidus et al., 2004.

obstacles in themselves (e.g., parole conditions, fees, and restitution), involvement in the criminal justice system is a revolving door from which they have difficulty escaping.

FEMALE "PATHWAYS" TO CRIME

The "pathways" research of the past 15 years has illuminated some distinct ways in which women and girls become involved in criminal behavior. The research on pathways studies girls' and women's life histories in order to understand the connections and relationships among child and adult experiences and criminality.[5] The following are some of these pathways:[6]

- ✓ Childhood victimization drives girls to run away from home and to use illegal drugs as a means of coping with the trauma of physical and sexual abuse. Drug selling, prostitution, and burglary often follow as a means of street survival.

- ✓ In a related sequence, adult women who have experienced childhood victimization resort to drugs to cope with the pain of abuse as well as other stressors in their lives such as adult intimate partner violence, sexual assault, or grief over the loss of custody of children. Thus, the interconnections of prior or current victimization, mood and anxiety disorders (e.g., depression, anxiety, and posttraumatic stress disorder), and self-medicating, substance-abusing behaviors comprise a frequent pathway for women offenders.

- ✓ Poverty or economic motivation often contributes to both women's involvement in the drug trade or prostitution (sex for drugs) as well as non-drug related crimes – to support a drug addiction or because they encounter economic difficulties in supporting themselves and their children.

- ✓ Finally, a small proportion of women appear to be primarily economically motivated and not drug involved; their criminality is instead related to the poor economic conditions they face and the desire for monetary and material possessions.[7]

It is important to note that there is not one single, dominant pathway for women offenders, but rather multiple ways in which their experiences contribute to their illegal behavior. However, the key factors that have emerged through the observation of offense patterns and qualitative research are violence/abuse, poverty, and substance abuse.

DIFFERENCES BETWEEN MALE AND FEMALE OFFENDERS

There are important differences between male and female offenders in terms of offending histories, risk factors, and life circumstances. Some factors or dimensions are critical to both genders but observed with greater frequency among women; others occur with relatively equal frequency in both genders (e.g., substance abuse) but with distinct physical, personal, and social effects for women, and yet other factors are not typically seen with men. These issues are described in detail below and are summarized in Exhibit 1.

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[5] Belnap, 2007.

[6] For more information on different categorizations of pathways see Bloom, Owen, & Covington, 2003; Chesney-Lind, 1997; Daly, 1992; Dehart, 2005; Green et al., 2005; Lapidus et al., 2004; Salisbury, 2007.

[7] As Morash (2010) comments, this pathway more closely resembles male criminality.

Offending Patterns. Women are convicted primarily of property and drug offenses, and the majority of violent offenses are in the simple assault category. Women are less likely to have been convicted of a violent crime and are less likely to use a gun or other weapon in the commission of a crime.[8] Further, female offenders as a whole are at lower risk of institutional misconducts and reoffending in the community than male offenders.[9]

Types of Crime Committed, Percentage of Total Crimes Committed by Male and Female Inmates, 2006

Males
- Public-order offenses 9%
- Other/not specified 0%
- Drug offenses 19%
- Property 20%
- Violent 52%

Females
- Public-order offenses 7%
- Other/not specified 5%
- Drug offenses 27%
- Violent 32%
- Property 29%

Source: Sabol, West, & Cooper, 2008, Appendix Table 15.
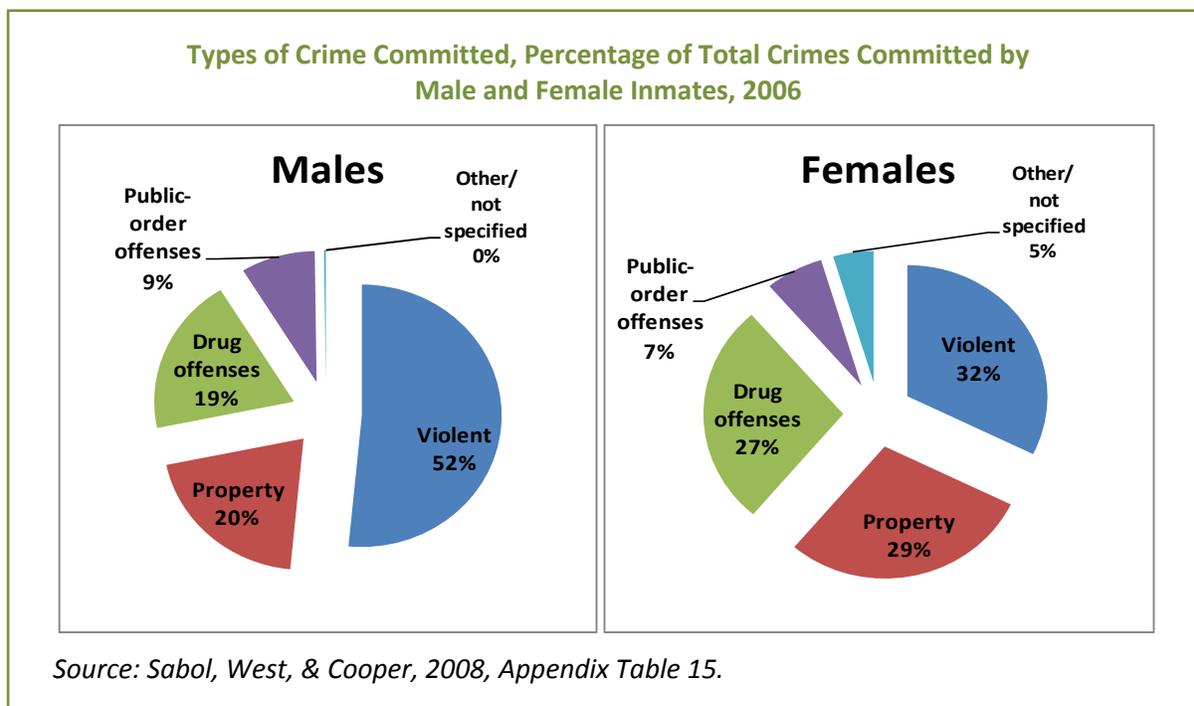
Victimization and Abuse. Women under correctional supervision are more likely to have experienced physical and sexual abuse as children and adults than women in the general population or the male correctional population. Between 32% and 47% of female offenders experience physical abuse prior to sentencing, while only 6-13% of male offenders report the same experience.[10] For sexual abuse the discrepancy is even larger, with 22-39% of female offenders and 2-6% of male offenders reporting sexual abuse. These rates of "officially reported" abuse are considered conservative. For example, a study of women in a New York maximum security prison found that 70% had been physically abused as children and 75% as adults.[11]

Another important difference between the abuse histories of men and women is the length of time in which they experience abuse. While the risk of abuse for males drops after childhood, the risk of abuse for females continues throughout their adolescent and adult lives.[12]

Mental Health. Women inmates suffer a great deal more from mental illness than male inmates. A recent report found that 55% of male adults in state prisons exhibited mental

[8] Greenfeld & Snell, 1999.
[9] Hardyman & Van Voorhis, 2004.
[10] Harlow, 1999.
[11] See Browne, Miller & Maguin, 1999.
[12] Covington, 2001.

health problems as compared to 73% of women prisoners.[13] In addition, women prisoners are twice as likely as male prisoners to take prescription medications for mental health problems and receive therapy for their illness.[14] Significant for custody management, women prisoners with mental health problems have higher infraction rates than non-mentally ill females.[15]

Women typically experience different types of mental illness than men.[16] For example, women are more likely to be diagnosed with depression or anxiety disorders than men, and are more likely to experience eating disorders. Conversely, men may be more likely to experience a substance abuse disorder or antisocial personality disorder.

Trauma is a special case for women. While the rates of posttraumatic stress disorder (PTSD) among all substance abusers range from 12-34%, for women with substance abuse disorders, it ranges from 30-59%.[17]

Substance Abuse. Like male offenders, a large proportion of women offenders suffer from addiction. In a 2006 Bureau of Justice Statistics study, over 60% of women met the DSM-IV criteria for a drug dependence or abuse problem during the year prior to their incarceration.[18] Another concern is the prevalence of co-occurring substance abuse disorders and mental illness: the majority of women (75%) who suffer from mental illness also have substance abuse disorders.[19]

Research suggests that the onset and use of drugs looks different for female offenders than male offenders:[20]
- ✓ Women describe the onset of drug use as sudden, rather than gradual, and that the drug use begins as a result of a specific reason such as depression or family problems.
- ✓ Women experience the adverse physical effects of alcohol more quickly than men, a condition referred to as "telescoping."[21]
- ✓ Women are more likely than men to be introduced to drugs by a sexual partner and continue to use drugs to maintain the relationship.
- ✓ Women who abuse drugs also have higher rates of childhood physical and sexual abuse than men and non-substance abusing women.

Relationships. While relationships are important to all people, they are critical to women in particular.[22] Research on female psychological development illuminates how female's identity, self worth, and sense of empowerment are defined by and through relationships with others.

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[13] James & Glaze, 2006.
[14] Ibid.
[15] Ibid.
[16] Bloom, Owen, & Covington, 2003; Kassebaum, 1999; WHO, 2010.
[17] The lifetime prevalence for the general population is 8%; see Sacks & Ries, 2005.
[18] Mumola & Karberg, 2006.
[19] Bloom, Owen, & Covington, 2003.
[20] Ibid.
[21] Telescoping is defined as the faster and more intense effect of alcohol on women as compared to men.
[22] See Bloom, Owen, & Covington, 2003; Covington, 2001.

This is in contrast to males for whom the major developmental issues are achieving autonomy and independence.

However, because of the high incidence of abuse, trauma and neglect experienced by female offenders, their ability to achieve healthy, empathic and mutually empowering relationships is limited. In fact, the criminal experiences of women are often best understood in the context of *unhealthy* relationships (e.g., a male partner who encourages substance abuse or prostitution).[23]

> In order to provide effective correctional services to women, we must understand *Relational Theory*. That is…females are motivated by their connections with others and develop their self worth from the relationships they hold.

Family Roles. Women are more likely to have served as the primary caretakers of children prior to entering prison[24] and have plans to return to that role upon release[25]. This fact transforms the experience of many incarcerated women. They are concerned in an ongoing way with their children's welfare and the potential loss of legal custody. For instance, the Adoption and Safe Families Act of 1997 (ASFA) requires termination of parental rights when a child has been in foster care for 15 or more of the past 22 months. Given that average prison terms for women are 18 to 20 months, this time period has particularly serious consequences for incarcerated mothers.[26]

Only 28% of children of female offenders live with their other parent, while 90% of the children of incarcerated fathers live with their mothers. Instead, most live with grandparents (52.9%), other relatives (25.7%), with friends/others (10.4%) or in non-relative foster care (9.6%).[27]

Poverty and Economic Marginalization. Poverty is also of particular concern for females involved in the criminal justice system. A greater percentage of women (37%) than men (28%) report incomes of less than $600 per month prior to their arrest.[28] Most incarcerated women were previously employed in low wage, entry-level positions, and two-thirds earned a maximum wage of $6.50 per hour. In interviews with women inmates in California, researchers found that the primary source of income was a legitimate job for only 37% of those women interviewed, while nearly 22% said their primary source was public assistance.[29] An additional 16% reported that selling drugs was their way of providing for themselves and their children.

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[23] Berman, 2005.
[24] Mumola, 2000.
[25] Hairston, 2002.
[26] Jacobs, 2001.
[27] Mumola, 2000.
[28] Greenfeld & Snell, 1999.
[29] Owen & Bloom, 1995.

Exhibit 1: Comparison of Female and Male Offenders		
	Females	**Males**
Offending Patterns	• Primarily commit property (29%) and drug offenses (27%) • While 1/3 are violent offenses, these are mostly simple assault (Sabol, West, & Cooper, 2008)	• Less than half are property (20%) and drug offenses (19%) • About half (52%) commit violent offenses (Sabol, West, & Cooper, 2008)
Victimization	• More likely to be involved in abusive families and battering relationships • Greater risk of sexual, physical, and domestic violence (Bloom, Owen, & Covington, 2003)	• 16% of men report experiencing physical or sexual abuse, while up to 57% of women report the same (Harlow, 1999)
Mental Health	• 73% of female state prisoners exhibit mental health problems (James & Glaze, 2006) • Depression, anxiety disorders (e.g., PTSD), and eating disorders are more prevalent (Bloom, Owen, & Covington, 2003; Kassebaum, 1999; WHO, 2010)	• 55% of male state prisoners exhibit mental health problems (James & Glaze, 2006) • Substance abuse and antisocial personality disorders are more prevalent (Bloom, Owen, & Covington, 2003; Kassebaum, 1999; WHO, 2010)
Substance Abuse	• 60% of female state prisoners met the DSM-IV drug dependence or abuse criteria (Mumola & Karberg, 2006) • More likely to suffer from co-occurring substance abuse and mental health disorders (Bloom, Owen, & Covington, 2003)	• 53% of male state prisoners met the DSM-IV drug dependence or abuse criteria (Mumola & Karberg, 2006)
Relationships	• Sense of self worth is built from their connections with others (Bloom, Owen, & Covington, 2003)	• Psychological theories describe men's path to maturity as becoming self sufficient and autonomous (Bloom, Owen, & Covington, 2003)
Family Roles	• Two-thirds of women in state prisons are mothers of a minor child (The Sentencing Project, 2007)	• Less likely to serve as the primary caretaker of children (The Sentencing Project, 2007)
Poverty	• Most earn lower monthly incomes than men (The Sentencing Project, 2007)	• More likely to be employed full time (60% of men vs. 40% of women) (The Sentencing Project, 2007)

Operating Principles for the Management of Female Offenders

Since the correctional system was designed for and serves a predominantly male population (i.e., it incorporates assumptions about typical male behaviors, experiences, and criminal pathways), a successful reentry strategy for women must take into consideration key differences between male and female offenders as it applies and integrates both evidence-based and gender-informed strategies to such areas as assessment, case management and treatment.

In 2003, the National Institute of Corrections published a report on gender-responsive strategies based on inter-disciplinary research.[30] This foundational report defines six core elements of gender-responsiveness that have been widely accepted by the field:[31]

ACKNOWLEDGE THAT GENDER DOES MAKE A DIFFERENCE FOR CORRECTIONAL PRACTICE.
Without an understanding of gender differences, there is little support for changing policy and practice based on the specific characteristics of women offenders. It is critical to acknowledge that women come into the criminal justice system through distinctly female pathways, exhibit dissimilar characteristics, require unique custody and supervision considerations, and pose different risk levels for misconduct and crime. For instance, it is well understood that women have different communication styles than men, and this fact has implications for all supervision settings. Women offenders are more willing to share the details of their lives than men and express themselves more extensively. This requires more "listening skills," patience, and time on the part of corrections professionals in order to avoid unnecessary conflict (e.g., write-ups for minor infractions) and to effectively engage women as partners in their supervision and program plans.

CREATE AN ENVIRONMENT BASED ON SAFETY, RESPECT, AND DIGNITY.
Given the high rates of trauma and victimization experienced by women offenders, it is important that the physical environment, and standard protocols and staff behaviors do not unintentionally exacerbate the impact of those experiences. It is well understood that a safe, consistent and supportive environment is fundamental to positive behavioral change. Thus all staff should be expected to interact professionally and respectfully with women. Further, staff should be trained to recognize and respond appropriately to the behavioral impacts of trauma (e.g., flashbacks, severe depression, anxiety, fear of isolation and restraints, suicidal thoughts and self cutting). Care must be taken to ensure that standard procedures (e.g., segregation, use of restraints, medical examinations) do not retraumatize women.

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[30] Bloom, Owen, & Covington, 2003.
[31] This section contains text adapted from Berman, 2005.

DEVELOP POLICIES, PRACTICES, AND PROGRAMS THAT ARE RELATIONAL AND PROMOTE HEALTHY CONNECTIONS TO CHILDREN, FAMILY, SIGNIFICANT OTHERS, AND THE COMMUNITY.

This principle is based on the importance of relationships in women's psychosocial development (i.e., relational theory) and the fact that so many women have experienced unhealthy relationships involving domestic violence, substance abuse, and crime-involved partners. To increase women offenders' success, practitioners must assist them in forming healthy relationships with their families, children, partners, and pro-social others in the community.

ADDRESS THE COMPLEX PROBLEMS OF SUBSTANCE ABUSE, TRAUMA AND MENTAL ILLNESS IN AN INTEGRATED AND COMPREHENSIVE WAY.

In order to respond more effectively to the interconnectedness of substance abuse, trauma, and mental health issues in women's lives, services for women offenders in these areas should be managed in a comprehensive and integrated way. Cultural issues also need to be appropriately integrated into the program design in order to increase retention and impact on women.

PROVIDE WOMEN WITH OPPORTUNITIES TO IMPROVE THEIR SOCIOECONOMIC CONDITIONS.

Most women who enter the criminal justice system are economically disadvantaged, with little education, few job skills, and sporadic employment histories. Many have relied on public assistance that, in some states, will no longer be available following a felony drug conviction. At the same time, many women offenders are single mothers who must find ways to support themselves and their children when they reenter the community. For these reasons, assisting female offenders with education and training to improve their financial situations is critical.

Elements of Gender-Responsive Practice

RELATIONAL: **Work with women in a relational way to promote mutual respect and empathy.**

STRENGTHS-BASED: **Recognize that all women have strengths that can be mobilized.**

TRAUMA-INFORMED: **Recognize that the history and context of personal abuse plays an important role in how women respond to services.**

HOLISTIC: **Provide a comprehensive case management model that addresses the complex and multiple needs of women in conflict with the law.**

CULTURALLY COMPETENT: **Provide services that value and acknowledge the diverse cultural backgrounds of women.**

Source: Benedict, 2008.

ESTABLISH A SYSTEM OF REENTRY AND COMMUNITY SUPERVISION WITH COMPREHENSIVE AND COLLABORATIVE SERVICES.

Women offenders leaving prison must stay clean and sober, return to a primary caretaker role for their children, earn a livable wage, obtain reliable child care and transportation, and find safe and sober housing for themselves and their children. This must occur while meeting the requirements of community supervision and additional demands of other public agencies (e.g., child welfare). Furthermore, many women must find care for chronic health conditions such as HIV.

To ensure that women are not overwhelmed by the requirements of multiple service agencies, case management approaches must ensure that essential services are readily available and well coordinated. That is, the organizations providing substance abuse, public health, employment, child welfare, and housing services must work with corrections agencies to provide "wraparound services" or a "holistic and culturally sensitive plan" for providing services to women within their communities.[32]

Critical Issues for Women Offender Management and Transition

This section provides an overview of the current literature on key issues in managing women offenders including gender-responsive classification, risk and needs assessments, case management, and programming.

TRADITIONAL CLASSIFICATION TOOLS

In the prison setting, classification tools are used at intake to assess the risk of major and minor misconducts, in order to determine custody level, and to identify programming needs of offenders related to the reduction of future offending. It is essential that these tools be valid for both men and women.

Unfortunately, a 2004 survey of state classification systems revealed that the static, offense-related classification tools in use in many systems are not valid for women, either because they have not been validated on a female offender population or because they ignore important aspects of women's lives relevant to their institutional behavior.[33] As discussed below, *a particular concern is over-classification, where classification tools prescribe higher and more restrictive custody levels than women's behaviors warrant. Inappropriately high custody levels may limit access to reentry and community release programs typically reserved for lower custody women.*

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[32] Bloom, Owen, & Covington, 2003, pg. 82.

[33] Hardyman & Van Voorhis, 2004. A recent validation study of a gender-responsive assessment tool provides additional support to the finding that traditional custody classification tools based on static, offense-related variables are less predictive of future offending than gender-responsive factors (Van Voorhis et al., 2010). The results of this study are discussed below.

GENDER-RESPONSIVE RISK AND NEEDS ASSESSMENTS

The first principle of evidence-based practice posits the use of empirically valid risk and needs assessments of offenders.[34] However, the use of the same assessment tools used with male offenders may not provide an accurate picture of women's risk to reoffend or their treatment needs.

Consider the following concerns about the use of "gender-neutral" (i.e., those tools that do not differentiate between men and women) risk and need assessments and classification tools for women:[35]

- ✓ Women who are assessed using gender-neutral tools as high risk in institutions for misconducts, escapes, and violence actually engage in fewer high risk infractions than men similarly assessed as high risk. That is, high risk women "look more like" medium risk men.

- ✓ Some factors operate differently in women than men (e.g., higher levels of education lower risk of infractions for men in institutions, but increase risk for women).[36]

- ✓ Factors important to women may not be accounted for in gender-neutral tools (e.g., children's well-being may be a critical factor for women in terms of both positive institutional behavior and reentry success, but is not addressed in these tools).

To address these concerns, a number of gender-responsive tools and supplements for women have been developed or are currently under development. These include:

- ✓ The Women's Risk/Need Assessment, a "stand-alone" gender-responsive tool, developed by the University of Cincinnati (UC) in collaboration with the National Institute of Corrections (NIC), and validated on a sample of women on probation, prison, and pre-release in Missouri.[37]

- ✓ The Women's Risk/Need Supplement ("the trailer"), designed to supplement current dynamic risk/needs tools such as the Level of Service Inventory-Revised (LSI-R) and the Northpointe Correctional Offender Management Profiling for Alternative Sanctions (COMPAS). The supplement was also developed by UC and NIC. The supplement was validated for use with the LSI-R, but a more comprehensive version is currently being studied for use with both the COMPAS and the LSI-R. Preliminary findings from California's institutions for women are favorable regarding the Women's COMPAS supplement.

- ✓ The Service Planning Instrument for Women (the SPIn-W) by Orbis Partners of Ottawa Canada, which is currently being validated on a large sample of women in Connecticut.[38]

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[34] Readers are encouraged to read and become familiar with the Coaching Packet on Implementing Evidence-Based Practices before reading this Coaching Packet.

[35] Hardyman & Van Voorhis, 2004.

[36] This dynamic is not well understood. However, some researchers hypothesize that more educated women are effective advocates for their needs and rights, thus appearing troublesome or demanding – characteristics that can result in write-ups for minor infractions.

[37] See http://www.uc.edu/womenoffenders/ & http://www.nicic.org/WomenOffenders.

[38] See http://www.orbispartners.com/index.php/assessment/spin-w/.

✓ A version of Northpointe's COMPAS that includes gender-responsive risk/need factors for women.[39]

EMERGING LESSONS FROM IMPLEMENTING GENDER-RESPONSIVE RISK AND NEEDS ASSESSMENTS

Efforts to validate gender-responsive instruments for women offenders provide some noteworthy findings that may change the way that women offenders are managed in institutional and community settings. One year follow-up studies of the Women's Risk/Need Assessment and "the trailer" by the University of Cincinnati and NIC show promising results:[40]

✓ Many gender-responsive factors (e.g., depression, psychosis, anger) were predictive of misconduct (in the institution) and/or recidivism (in the community) for women.

✓ Certain factors emerged from the research as strengths of women: family support significantly reduced the risk of both misconduct and reoffense, while educational assets and self-efficacy reduced the likelihood of reoffense.

✓ The traditional predictors of criminal behavior (i.e., gender-neutral factors) were also predictive of both prison misconduct and reoffending for women.

　　o However, the relative importance of these criminogenic needs was different for women than that which is generally recognized as the "Top 4" and "Next 4" criminogenic needs.[41] For instance, antisocial attitudes and antisocial associates were not as predictive of women's recidivism as expected on the basis of the research on men. Meanwhile, the most important predictors for women included substance abuse, education, and employment, factors not considered as part of the traditional "Top 4" criminogenic needs based on predominantly male samples.

While these findings should be considered preliminary until further research is conducted, it is noteworthy that *consideration of gender-responsive factors in addition to the gender-neutral predictors of criminal behavior will increase corrections professionals' accuracy in predicting women offenders' prison misconduct and reoffense*.[42] Inclusion of these factors also offers case managers more relevant information – gender-responsive and gender-neutral risk factors and, importantly, strengths – with which to build case plans and prioritize interventions to reduce reoffending.

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[39] See http://www.northpointeinc.com/software---women.aspx.
[40] See also Exhibit 2. Van Voorhis et al., 2010; Van Voorhis et al., 2009.
[41] See the Coaching Packet on Implementing Evidence-Based Practices.
[42] See Van Voorhis et al., 2010; Van Voorhis et al., 2009 for a more in depth discussion of their findings.

Exhibit 2: Risk Factors and Strengths of Women Offenders[43]		
	Gender-Neutral	**Gender-Responsive**
Institutional Risk Factors[44] *Increases risk of misconduct*	• Criminal history • Antisocial attitudes • Family conflict • History of mental illness	• Depression/anxiety symptoms • Psychotic symptoms • Child abuse • Anger • Relationship dysfunction
Institutional Strengths *Reduces risk of misconduct*		• Family Support
Community Risk Factors[45] *Increases risk of recidivism in the community*	• Criminal history • Antisocial attitudes • Antisocial associates • Educational challenges • Employment/financial • Family conflict • Substance abuse history • Dynamic substance abuse • History of mental illness	• Depression/anxiety symptoms • Psychotic symptoms • Housing safety • Anger • Parental stress
Community Strengths *Reduces risk of recidivism*		• Education assets • Family support • Self-efficacy

CASE MANAGEMENT

Similar to the new risk and needs assessment instruments for women, a new model has emerged for women offender case management based on the evidence-based and gender-responsive literature. Orbis Partners Inc., in partnership with the National Institute of Corrections, and with an advisory group of practitioners and researchers, developed the *Women Offender Case Management Model* (WOCMM).[46]

The goals of this case management model are not only to reduce future criminal behavior but also to increase the health and well being of women, their families, and communities. The model is intended for use with women sentenced directly to probation and throughout the reentry process, including in-prison assessment and programming, transitional planning, and

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[43] Van Voorhis et al., 2010.

[44] The risk factors of substance abuse history and dynamic substance abuse did not predict misconduct in the research samples and therefore are not included in this chart as predictors of misconduct. As with all the gender-responsive risk factors, these are undergoing further research with larger samples.

[45] Child abuse and adult victimization were only found to be strong predictors of recidivism in some of the research samples in community settings and therefore are not included in this chart as predictors of recidivism. These are also undergoing further research with larger samples.

[46] See Orbis Partners, 2006. The WOCMM model, while building from the best available research, is currently being piloted in three jurisdictions: one with probation cases and two with women transitioning from prison to the community. Research is underway to test its effectiveness.

community supervision. The implementation of the Women Offender Case Management Model should be guided by the following "core practices:"[47]

1. Provide a comprehensive set of mutually supportive services that address the complex needs of women.

2. Recognize that all women have strengths and resources that can be utilized to address their challenges (i.e., do not solely focus on risk factors).

3. Work intentionally to ensure that women are involved in case planning and the supervision process (i.e., enhance their intrinsic motivation[48]) and respect women's rights to choose which needs to addressed and in what order.

4. Promote services that are "limitless" and are available to women and their families long after the termination of criminal justice supervision.

5. Match services to the risk level and criminogenic needs of women.

6. Build essential partnerships with the community and enhance its capacity to serve women offenders (i.e., ensure that critical resources are available and readily accessible).[49]

7. Establish a multi-disciplinary case management team (including women as part of this team).[50]

8. Monitor progress and evaluate outcomes (i.e., assure that case plans address the unique needs of women offenders).[51]

9. Establish quality assurance methods to ensure program integrity.

WOCMM Definition of Case Management

Case Management is a dynamic, seamless process that starts at sentencing and continues beyond discharge from prison and/or community supervision until women are stabilized in their communities.

In order to be successful, the case management team must work collaboratively with women offenders to define individual needs and strengths, and find mutually agreed upon goals. The team must also utilize a common framework to monitor progress and update outcomes as women transition through the criminal justice system.

Adapted from: Orbis Partners, 2006.

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[47] Orbis Partners, 2006.
[48] For more information on enhancing offender motivation, see the Shaping Offender Behavior Coaching Packet.
[49] See the Coaching Packet on Engaging in Collaborative Partnerships to Support Reentry.
[50] See the Effective Case Management Coaching Packet.
[51] For more information, see the Measuring the Impact of Reentry Efforts Coaching Packet.

The WOCMM has four stages, all of which can and should be implemented at all stages of the reentry process including the institutional phase, the transition phase, and the community phase. That is, during each of these phases of reentry, the case management team should[52]:

- ✓ *Engage and assess*: Gather a complete picture of the factors that contribute to criminal justice involvement; and identify women's protective factors and strengths.
- ✓ *Enhance women's motivation*: Increase commitment and self-efficacy by enhancing intrinsic motivation (e.g., use Motivational Interviewing techniques).
- ✓ *Implement the case plan*: Identify personal goals for the case plan, and deliver and broker the necessary services to assist women in achieving these goals.
- ✓ *Review progress*: Determine if goals have been achieved, and update the case plan with new goals or alternative steps in achieving goals that have not been realized.

The responsibilities of the team and anticipated outcomes from the four stages of the Women Offender Case Management Model are illustrated in Exhibit 3.

Integrating the Four Stages of the Women Offender Case Management Model into the Three Phases of Reentry

Institutional Phase	Transition Phase	Community Phase
• Engage and assess • Enhance motivation • Implement case plan • Review progress	• Engage and assess • Enhance motivation • Implement case plan • Review progress	• Engage and assess • Enhance motivation • Implement case plan • Review progress

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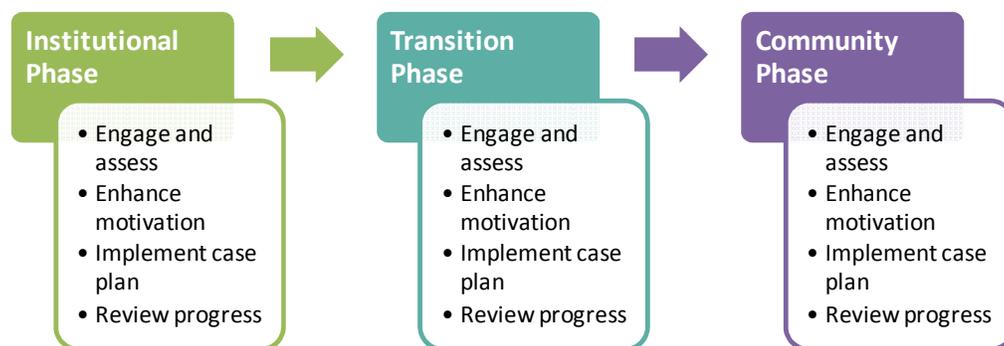
[52] A number of tools and resources for use by case management teams in implementing this model are provided at http://nicic.org/Downloads/PDF/Library/021814.pdf.

Exhibit 3: Women Offender Case Management Model (WOCCM) Stages		
Core Stages	**Case Management Team Responsibilities**	**Anticipated Outcomes**
Engage and Assess	• Create a safe environment. • Focus on building rapport and establishing a respectful relationship. • Use a gender-responsive assessment. • Identify major needs and strengths that influence behavior. • Listen to the woman's perspective on her strengths, needs and life experiences.	• Increased awareness of the personal, situational, and contextual factors that contribute to criminal justice involvement and that impact life satisfaction. • Increased awareness of strengths that can be mobilized to mediate the impact of risk.
Enhance Motivation	• Use a gender-responsive approach to enhancing motivation. • Provide feedback by summarizing the assessment results. • Explore the priority targets (the strength and need areas resulting from the assessment) with women. • Ask women to identify their personal goals. • Review incentives and disincentives for change.	• Identification (by women) of one or more priority targets. • Expression of commitment (by women) to work on one or more of the priority targets.
Implement the Case Plan	• Work collaboratively to develop the case plan (goals, actions steps). • Identify personal and social resources that will augment the case plan. • Provide the opportunity to build formal supports. • Explore service and treatment options across four dimensions: personal, vocational, family, and community. • Promote healthy informal relationships that will support change efforts.	• Action steps are formalized. • Ability (of women) to identify personal and social supports necessary to achieve goals.
Review Progress	• Review and update progress. • Reinforce successes. • Introduce problem-solving strategies when obstacles arise. • Make deliberate plans to maintain women in success areas (e.g., sustain employment, keep safe housing, comply with supervision conditions, maintain sobriety, sustain positive social connections).	• Ability (by women) to rate personal successes. • Ability (by women) to mobilize strengths and supports when faced with challenges. • Development (by women) of maintenance strategies to ensure proactive responses to high-risk situations.

GENDER-RESPONSIVE PROGRAMMING

The number of promising gender-responsive programs has grown in the past 15 years with an increased understanding of women's unique pathways to crime and gender-specific needs. While the field has suffered from a lack of research on the effectiveness of these programs, this situation is beginning to change. Exhibit 4 illustrates some of these promising gender-responsive programs, and where available, the research evaluating their effectiveness with women.

Exhibit 4: Promising Gender-Responsive Programs[53]		
Program Name	**Description**	**Evaluations and Resources**
Moving On (by Dr. Marilyn Van Dieten)	Goals are to provide women with opportunities to mobilize and enhance existing strengths, and access personal and community resources; incorporates cognitive-behavioral techniques with Motivational Interviewing and relational theory.	A recent evaluation of its use with women on probation in Iowa confirmed its effectiveness in reducing recidivism (Gehring, Van Voorhis, & Bell, 2010). Van Dieten, 1998 http://www.orbispartners.com/ index.php/programs/moving-on/
Beyond Trauma: A Healing Journey for Women (by Dr. Stephanie Covington)	Uses psycho-educational and cognitive skills approaches to help women develop coping skills and emotional wellness to counter the effects of physical, emotional, and sexual abuse.	Covington, 2003 http://www.stephaniecovington. com/b_beyond.asp
Helping Women Recover: A Program for Treating Addiction (by Dr. Stephanie Covington)	Addresses substance abuse by integrating the four theories of women's offending and treatment: pathways, addiction, trauma, and relational theories.	Covington, 2008 http://www.stephaniecovington. com/b_helping.asp
Seeking Safety (by Dr. Lisa Najavits)	Treats the co-existing disorders of trauma, PTSD, and substance abuse; draws from the research on cognitive-behavioral treatment of substance abuse disorders, post-traumatic stress treatment, and education.	Evaluations indicate improvements in social adjustment, psychiatric symptoms, problem-solving, substance abuse, and depression (http://www.seeking safety.org/3-03-06/studies.html). Najavits, 2002 http://www.seekingsafety.org/
Forever Free[54] (California Institution for Women)	Goals are to reduce in-prison disciplinary actions as well as substance use and recidivism; run as a modified therapeutic community; provides substance abuse treatment and relapse prevention services.	The one program evaluation conducted thus far demonstrated that participants had fewer arrests or convictions while on parole supervision than participants in a comparison group (Hall et al., 2004). Kassebaum, 1999 http://www.nrepp.samhsa.gov/ programfulldetails.asp?PROGRAM _ID=90
Female Offender Treatment and Employment Programs (FOTEP) (Implemented within 13 counties in California)	Assists with employment, substance use, criminal involvement and parenting for reentry; employs intensive case management, vocational and family services, and facilitates reunification with children.	An ongoing evaluation indicates that participants are less likely to recidivate and use alcohol/drugs, and are more likely to find employment and live with their children (Grella, 2005). Grella & Greenwell, 2007 http://www.waldenhouse.org/services/cj_ residential.html

[53] Adapted from: Gehring & Bauman, 2008; Van Voorhis et al., 2009.
[54] This program implements the Center for Substance Abuse Treatment (CSAT) guide for treating women offenders (Kassebaum, 1999).

Some Gender-Responsive Strategies for Successful Reentry

Despite the growing literature on the management of women offenders, the challenge remains in determining how best to implement policies and practices that assist women offenders in making a successful transition to the community. This section provides some policy and practice considerations for correctional agencies, community supervision agencies, and their partners as they work with women offenders during the three phases of reentry.[55]

INCARCERATION PHASE

During the first phase of reentry, there are a number of considerations specific to women offenders:

✓ Ensure that institutional classification tools, and risk and need assessments used with women have been validated on an appropriate female population.

✓ In the short-term, supplement tools with additional instruments to ensure that information is collected on what we know to be the critical factors for women.

✓ Collect information on women offender strengths and protective factors that can be built upon while women prepare for release to the community.

✓ Create institutional environments that feel safe for women (i.e., where the physical environment and staff behavior do not further traumatize women physically, sexually, or emotionally).

✓ Ensure that women in institutions are provided with needed medical, mental health, substance abuse, and support services.

✓ Consider including mentors on the case management teams who can work closely with women, encouraging them to work towards their case management goals.

✓ Encourage women to develop healthy and supportive relationships while incarcerated; encourage staff to build rapport with women, treat them with respect, and show genuine interest in their success.

✓ Once stabilized, assist women in working towards the goals outlined in their case plans in order to begin preparing for life in the community.

✓ Provide gender-responsive programming to address women offenders' unique criminogenic needs.

> **Critical Information to Collect when Assessing Women Offenders**
>
> - History of abuse
> - Relationship status/issues
> - Self-esteem/self-efficacy
> - Mental health (including depression and PTSD)
> - Parental stress (e.g., number of children, current arrangements for children)
> - Level of family support or conflicts
> - Financial status/poverty
> - Safety concerns
> - Strengths/protective factors
>
> *Adapted from: Berman & Gibel, 2007; Van Voorhis et al., 2009.*

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[55] The strategies outlined here are adapted from Berman, 2005; Berman & Gibel, 2007; readers are referred to these documents for a more in-depth discussion of women offender reentry issues.

- ✓ Provide education and vocational training to women that match the job opportunities available in the community to assist women in achieving financial independence.
- ✓ Institute policies that help women to sustain healthy prosocial relationships with their families and communities (e.g., family-friendly visiting rooms, encouraging correspondence though mail and phone calls).
- ✓ Collaborate with a child welfare liaison to ensure that women are meeting obligations that will prevent termination of their parental rights.

Women's Protective Factors

Protective factors are the **strengths of the woman** and **aspects of her social environment** (also called human and social capital) that help her resist pressure to return to offending behavior. Some protective factors include:

- Strong self-efficacy (i.e., the belief that one's life is under her own power and control and that she can take positive steps to improve her circumstances)
- Positive social networks (e.g., supportive families, friends, religious groups, etc.)
- Higher levels of education

TRANSITION PHASE

As incarcerated women prepare for their release from prison, there are a number of considerations for assisting women as they transition to the community:

- ✓ Modify membership of the case management team as needed to ensure planning for supervision and services that are essential to stabilizing women in the community (e.g., parole supervision, physical and mental health, employment, family reintegration services).
- ✓ Work with women to maintain the progress they have made in achieving the goals identified in their case plans.
- ✓ Utilize community-based programs and services which might continue to provide services to women upon their release to the community (i.e., to build trust and increase retention in the community); at a minimum, invite representatives to meet with women prior to release for introductory purposes.
- ✓ Consider the use of community-based residential facilities as early as possible in the sentence to assist women in their adjustment to community life.
- ✓ When developing a plan for housing post-release, consider the safety of the women (e.g., whether they will be free from domestic violence by a romantic partner, whether the housing option jeopardizes their sobriety), as well as accommodating their children.
- ✓ Assist women in working towards job opportunities that provide a living wage for their families (and which provides independence from relationships that may jeopardize their success and safety).

- ✓ Pay attention to the survival needs of women (i.e., where they will acquire food, clothing, housing, transportation, identification) to ensure that they are prepared for the first few weeks of living in the community.
- ✓ Assist in family reunification by providing opportunities for families to prepare together for women's release to the community (e.g., offer family counseling, informational sessions).

Achieving Successful Reentry: Reports from Women Offenders

When surveyed about what helped them successfully transition to the community, women said the following:
- Relationships with family, friends, and other women who were positive role models.
- Positive support from social networks, particularly once in the community (e.g., housing, job connections, transportation).
- Positive support from/relationships with corrections staff, especially female staff.
- Safe environments in which to live (e.g., efforts to reduce trauma in their lives, like not using restraints).
- Programming such as substance abuse, mental health, parenting, education/vocational, within the institution and in the community.
- Ability to secure employment/financial support.

Adapted from: Cobbina, 2009; Covington, 2001.

COMMUNITY PHASE

When women are released to the community, there are a number of strategies that might assist them in finding success:

- ✓ Ensure survival needs are met for the immediate future (e.g., connect women with services that offer clothing and food, provide bus passes for transportation).
- ✓ Link women with substance abuse issues to treatment immediately upon release (i.e., set up appointments ahead of time, share information from institutionally-based programs with community treatment providers) to ensure continuity of care and prevent relapse.
- ✓ Ensure that women are connected to physical and mental health services in the community that will provide needed medications and ongoing care.
- ✓ Be clear with women about community supervision expectations and consequences (to ensure that women see sanctions as fair and predictable).
- ✓ Offer legal assistance and transportation for women who must meet obligations to the child welfare system in order to gain or keep custody of their children.
- ✓ Acknowledge the challenges women face in reintegrating with their families and remain flexible in assisting women in dealing with these challenges (i.e., additional effort by

parole officers and others on the team beyond simply referring women to community-based services).

✓ Assist women in applying their knowledge and skills (i.e., parole officers and others on the case management team should expect that women may need continual support and advice to make changes in their lives).

✓ Support the successful employment of women offenders under supervision (e.g., create plans for childcare, determine transportation, educate women about on the job sexual harassment).

✓ Include family and friends involved in women's lives (whether providing housing, transportation, etc.) in their supervision and management.

✓ Continue to assist in building resources for women to support their vocational, personal, and social needs.

✓ Prepare women for discharge from community supervision (i.e., explain what will change once formal supervision by the criminal justice system ends, ensure that women are integrated into a network of community resources that will continue in the after-care phase).

Some Indicators of a Gender-Responsive and Evidence-Based
Correctional Facility

- A gender-informed mission statement is clearly articulated and prominently displayed throughout the facility.
- Attention is paid to the adequacy and appropriateness of basic living conditions (cleanliness, heating, cooling, comfortable furnishings, and visual environment).
- The facility design and operation match the demonstrated security requirements of the women (i.e., no higher security than warranted).
- There are written policies and procedures for the implementation of gender-informed practice in critical areas (i.e., property list, hygiene products, transportation of pregnant women, cross-gender supervision, privacy, pat and strip searches, and sexual harassment/PREA).
- The staffing pattern supports the operational requirements of working with women and pays particular attention to the number of female staff overall, including same sex supervision at important times.
- Inmates and staff feel physically and emotionally safe (i.e., basic management and security procedures ensure the safety of both).
- Staff members receive initial and ongoing training that provides them with the skills and competencies for working effectively with women (e.g., behavioral impacts of trauma, communication style).
- Staff interact professionally and respectfully with women offenders, and maintain appropriate staff-to-inmate and staff-to-staff boundaries. Staff encourage respectful language, model effective problem solving and conflict resolution, and exhibit consistent practice across shifts.
- Staff members set a positive tone in interactions with inmates, use affirmations and reinforcers instead of inappropriate confrontation, acknowledge strengths and assets, and use problem solving techniques to de-escalate problems.
- The facility uses an objective tool for custody classification that has been validated on a sample of women offenders in the facility.
- The facility uses an objective and valid assessment of risk of reoffending, needs, and strengths that includes items relevant for women.
- The assessment of risk, needs, and strengths guides the development of individual case plans, and recommends access and referral to critical services.
- Women receive the medical, mental health, transportation, legal and victim services as indicated in their case plans.

Note: These indicators are drawn from a comprehensive instrument, developed under funds from the National Institute of Corrections, called the Gender Informed Practice Assessment (GIPA). This tool, which looks comprehensively at the management, operations, climate, and programming in women's prisons, is currently being piloted.

Some Indicators of a Gender-Responsive and Evidence-Based Correctional
Supervision Approach

- A gender-informed mission statement is clearly articulated to supervision staff and prominently displayed in field offices and in official correspondence.
- There are written policies and procedures for the implementation of gender-informed practice.
- Staff members receive initial and ongoing training that provides them with the skills and competencies for working effectively with women (e.g., behavioral impacts of trauma, communication style).
- Supervision staff interact professionally and respectfully with women offenders, and maintain appropriate boundaries. Staff encourage respectful language, and model effective problem solving and conflict resolution.
- Supervision staff understand that their role goes beyond surveillance and enforcement; instead, they also have an obligation to promote offender success.
- Supervision staff set a positive tone in interactions with offenders, use affirmations and reinforcers instead of inappropriate confrontation, acknowledge strengths and assets, and use problem solving techniques to de-escalate problems.
- Appropriate information is received from the correctional facility and incorporated into women's community supervision plans.
- An objective and valid assessment of risk of reoffending, needs, and strengths, that includes items relevant for women, is used.
- The assessment of risk, needs, and strengths guides the development of individual case plans.
- Supervision levels are dictated by the risk instrument; interventions are dictated by the assessment of needs.
- Conditions of supervision are realistic, relevant, and research based. The number and type of conditions do not exceed the level of risk women pose to the community.
- Women understand the conditions of supervision, the expectations of the supervision officer, and the potential consequences.
- Supervision staff effectively partner with community-based services to ensure that women receive the necessary mental health, substance abuse, employment, and victim services.
- Responses to violations are graduated, gender-responsive, and appropriate to the seriousness of the behavior.

Section II: Reentry Considerations for Women Offenders Coaching Packet Checklist

Considering Women Offenders	YES	NO	NOT CLEAR	NOTES
1. Have classification tools been validated on an appropriate female offender population?				
2. Are gender-responsive risk and need assessments used with female offenders (or have existing tools been validated for women)?				
3. Do staff understand the differences between female and male offenders (e.g., pathways to crime, gender-specific needs)?				
4. Is case management a seamless, dynamic process from intake to discharge from community supervision?				
5. Has a multi-disciplinary case management team been formed that includes representatives who can address the specific needs of women (i.e., substance abuse, mental health, trauma)?				
6. Are institutional settings for women safe and managed in such a way as to not retraumatize them (i.e., free from sexual misconduct, and verbal and physical abuse)?				
7. Do staff and case management team members treat women with respect and indicate a genuine interest in their well being?				
8. Are women involved in the development of their own case plans?				
9. Are techniques used to enhance women's intrinsic motivation (e.g., Motivational Interviewing)?				
10. Are women's strengths and resources accounted for when developing case plan goals?				
11. Are programs provided that address the criminogenic needs of women (e.g., those factors linked with future criminal behavior such as self-efficacy, family conflict, past abuse)?				
12. Are services provided to address the survival needs of women upon transition to the community (e.g., housing, transportation, food, clothing)?				
13. Is specific attention paid to women's concerns about their children (e.g., loss of custody, reintegration upon release)?				
14. Do staff promote healthy and supportive relationships among women and others?				
15. Are women provided with educational and vocational opportunities to assist them in achieving financial independence?				
16. Do housing plans include consideration of the women's children, and whether significant others with whom they will live might jeopardize their safety or sobriety?				
17. Is information passed on to the necessary agencies/organizations to ensure continuity of care when women transition from prison to the community?				
18. Are women provided with information regarding available after-care upon discharge from community supervision?				

Section III: Action Planning Worksheet

GOAL:

Objective 1:

Tasks	Lead Person	Completion Date	Assistance/Expertise Needed
1.			
2.			
3.			
4.			
5.			

Objective 2:

Tasks	Lead Person	Completion Date	Assistance/Expertise Needed
1.			
2.			
3.			
4.			
5.			

Objective 3:

Tasks	Lead Person	Completion Date	Assistance/Expertise Needed
1.			
2.			
3.			
4.			
5.			

Section IV: References and Additional Resources

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http://nicic.gov/WODP/

National Institute of Corrections, Women Offenders Project Web Site:
http://nicic.gov/WomenOffenders

Women's Prison Association Web Site: http://www.wpaonline.org/