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I. INTRODUCTION

In 2005, the Secretary of the Agency of Human Services (AHS), Mike Smith charged AHS with mobilizing its resources and providing leadership to communities to change the trend in increasing rates of incarceration for women, without compromising public safety. AHS responded by developing the Incarcerated Women’s Initiative (IWI) and engaging communities in the planning process to “bend the curve” and reduce the number of women involved with the criminal justice system. In 2006, Department of Corrections’ (DOC) staff and AHS leadership collaborated with the Vermont Research Partnership (VRP) to conduct an initial study designed to inform future policy, research, and practice in this area. The pilot project is briefly presented in the Executive Summary Report and fully detailed in this Complete Report.

The findings reveal a complexity of issues related to incarcerated women and the correctional system for which there are no easy answers or “quick fixes.” While the data does not reveal new information, it does provide significant insight into the challenges associated with incarceration for women and suggests potential solutions to positively impact the rising rates of incarceration for this population. This study makes it clear that without additional integrated and coordinated supports and a mutually accountable model of systemic reform (from across state government, the criminal justice system, law enforcement and local communities), it is predictable that the number of women entering the criminal justice system and getting caught in its “revolving door” will worsen.

The criminal justice system has become a revolving door for women - once they get in, they have an ever-decreasing chance of productively and permanently reentering our communities. This trend leaves the women, their families and children, and the public subject to serious social and financial costs. In addition, this study suggests that diverting women from incarceration toward substance abuse prevention and treatment, and other community and relational supports will offer a more promising approach to preparing them for productive lives in the community. Vermont is in a unique position to integrate multiple stakeholders in a collaborative cross-systems effort to reduce the trend in women’s incarceration and help women move towards self-sufficiency.

According to DOC, the number of women incarcerated in Vermont has increased from 15 in 1985 to 33 in 1995 to 167 on December 13, 2006. Population rates vary on a daily basis, reflective of the flow through the DOC and criminal justice systems. DOC notes that if the trend continues at this rate, Vermont's average daily count of incarcerated women will exceed 300 within the next 6 years. Currently, Vermont has exceeded its female incarcerative bed capacity.

The following sections in this Complete Report describe the pilot project’s methodology, findings from interviews with incarcerated women and focus group interviews with DOC staff. In addition, we discuss alternatives and recommendations designed to “bend the curve” as well as present options for future research. A literature review on the subject of incarcerated women may be found in Appendix C.
Purpose of the Study

The primary purpose of this study was to describe the experiences of a random sample of incarcerated women in Vermont. Of interest were the women’s perspectives about their relevant histories prior to incarceration, their hopes, fears, and experiences during incarceration, and their thoughts about what would help them to successfully reenter the community. A secondary purpose was to learn about the perspectives of the corrections’ staff who work with these women.

The primary objectives in conducting research for the Incarcerated Women’s Initiative (IWI) were the following:

- To produce a study that represented collaboration in the design, methodology and reporting between and among the IWI Core Team, the Research Team, and the Department of Corrections.
- To produce usable, understandable, and informative research data, as well as provide suggestions regarding policy and practice in Vermont relevant to the IWI.

The secondary objectives of the project included:

- To develop questions and research strategies for a future evaluation of various approaches used by the Department of Corrections to reduce the incidence of incarceration of women and support the successful transition of women from incarceration to community living.
- To develop a research base of literature and practice that may be useful in the design of new, alternative methods of programming for incarcerated women.

II. METHODOLOGY

Sample Selection

Incarcerated women: The research team initially met with Department of Corrections (DOC) staff and advocates to select a sample of incarcerated women from two Vermont prison sites, the Southeast Correctional Facility and the Dale Facility. Each woman inmate was assigned a number. Numbers were then randomly selected from the population of incarcerated women for up to 10 interviews per site. Random selection in both facilities produced a distribution of inmates that staff indicated represented a wide range of characteristics (age, length of time in system) and circumstances surrounding their incarceration (legal disposition of their case, reasons for incarceration).

Corrections staff: During this study, a second group of approximately 65 staff members from the correctional institutions were also selected by the research team from a list of staff provided by the DOC. Criteria for invitation to the focus group meetings were limited to staff having worked with incarcerated women over the past 12 months and being located in field offices in different parts of the state. Selected staff represented a variety of job titles and roles.
Data Collection

**Incarcerated women:** UVM faculty researchers, accompanied by trained graduate students and prisoner advocates conducted individual interviews with 16 women at the prison sites. The interviews lasted from 60 to 90 minutes and focused on each woman’s experiences related to her incarceration. The research team adapted a Mapping Strategy (O’Brien & Forest, 1987) for the individual interviews with incarcerated women. The interview teams, including the advocates, were trained in the mapping protocol. They were also trained in mandatory reporting requirements in the event that information shared during the interviews would require follow-up action by DOC staff. (See Appendix A for Mapping Strategy Interview Questions)

**Corrections staff:** The research team interviewed staff in three focus groups of 20 to 25 people each at the state offices of the Department of Corrections in Waterbury. Staff was interviewed about their experiences related to the corrections system and the work they do. Questions focused on the history of programming for women in corrections, day-to-day operations with incarcerated women, what is working, what is not working and what could be improved. The interviews sought staff perspectives on a broad range of system contacts with women including women’s histories, first contact with the system, adjudication, incarceration and release to the community. Staff interviews specifically avoided questions related directly to the cases of the incarcerated women. (See Appendix B for Staff Interview Questions)

Data Analysis

When all interviews were complete, each member of the interview team read and coded the data derived from their interviews with the incarcerated women. Following this process, the entire team met to identify the most salient themes that emerged from the interviews. The overall findings emerged from the mapping process, which collected the women’s perspectives on their history, dreams, fears, experiences in prison, and identified needs for re-entering the community successfully. The staff focus group data were coded and analyzed by a lead researcher with input and review from the interviewers. Several members of the research team then synthesized the findings into a combined report, which also included a literature review conducted earlier in the project. (See Appendix C for IWI Literature Review)

III. FINDINGS: INTERVIEWS WITH INCARCERATED WOMEN IN VERMONT

This section describes the findings from individual interviews with 16 women who were incarcerated in two Vermont prisons. This phase of the report shares their perspectives about their relevant histories, their lives in prison, and what they believe they need to be successful when they reenter their communities. For the balance of the report, italics generally refer to observations from inmates or staff, “in their own words.” The findings are organized by three major themes, each with several sub-themes:
1) **Challenges Leading to Imprisonment**
2) **Experiences of Incarceration**
3) **Trying to Leave: The Revolving Door**

The first theme, which describes challenges of the women’s experiences leading to imprisonment, includes three sub-themes: a) living with drug and alcohol addiction, b) living with abuse (sexual, physical, and emotional), and c) living without boundaries, stable families and structure. The second theme, which focuses on the women’s experiences of incarceration, includes four sub-themes: a) experiencing daily life in prison, b) recognizing the importance of meaningful work and education, c) recognizing the importance of treatment, d) losing connections with family and children, and e) hoping for, yet fearing release. The third theme, which provides a metaphor of encountering a revolving door when trying to leave incarceration, involves four sub-themes: a) failing to overcome mental health, drug and alcohol issues, b) failing to meet the conditions of community based supervision, c) facing barriers to housing, employment and education, and d) finding difficulty in re-uniting with family and friends. Quotes from the incarcerated women are interspersed throughout the narrative, both within paragraphs as examples and following paragraphs in bulleted, italicized form. Each sub-theme also begins with a seminal quote to introduce the new topic.

### Challenges Leading to Imprisonment

#### Living with drug and alcohol addiction

*Drugs. It is all because of drugs—coke, oxycotton *[sic]*, heroin. I met my baby’s father...he sold coke and heroin. He got me started on it with taking pills like perkoset. I wrecked my brain with drugs, opiates. I started to really like them. They gave me extra energy. I could take care of the kids, clean the house, fix dinner and I would still have energy to do more. After about a year and a half, the baby’s father went to jail.*

Each of the 16 women described her own drug or alcohol addiction and often those of extended family, children, partners and friends. The addictions existed in women of upper, middle and lower levels of socioeconomic status. Some of the women or their partners sold drugs to make money. Others found they had more energy or were better able to cope. Drug and alcohol abuse had serious consequences for the women, such as brain damage, driving violations, removal of children, and even death of a partner due to overdose. Addictions were often related to crimes committed, including prescription fraud, forgery, embezzlement, domestic assault, and participation in an assault and robbery resulting in death. Even for those who had completed long term treatment, addiction still held a firm grip on their lives. One woman was convicted for drug-related crimes after completing the Tapestry program. When asked what advice they would give other women in their situation, they most often warned against doing drugs, but sounded despondent about being able to prevent someone like themselves from the behavior, once started.
\begin{itemize}
  \item My aunt was an alcoholic. Her older sister drank herself to death. Mom brought her liquor to make it through the weekend. By 11 am on the weekend, both were drunk – age 50 and 70….Like an obsession.
  \item My whole family is addicts.
  \item My dad got addicted to oxycontin, got into trouble and went to jail.
  \item I’m always worried about having money. I knew how to make money before, but that’s not how I want to do it now…I was used to dealing drugs and getting money in any way I could. That’s not what I want now.
  \item Don’t do drugs. Drugs are what got me here in the first place.
  \item I became a shell of the person I used to be.
\end{itemize}

One young woman mentioned addictions twice in her list of fears. She feared drugs and alcohol because she herself had “beat up one family member when drunk.” She also indicated that drugs and alcohol held back her progress. Another woman referred to herself as an alcoholic, saying she was always drunk when engaging in irresponsible behaviors. She mentioned consequences, such as three DWI’s. Another inmate said her felony conviction started her on a rehab/relapse cycle. Throughout her teenage and adult years she was involved in several relationships with male partners who were also users. One partner died in her arms from a heroin overdose, but even this was not enough to ‘scare her straight’. She is currently serving time for burglary crimes meant to support her addictions.

An inmate who identified herself as a drug abuser, including the use of IV needles, discussed a family history of substance abuse, including her mother who is a recovering alcoholic and has had one relapse in the past 22 years. Discussing substance abuse, she said there is “a lot of it in my family.” Another woman attributed addiction to spending time with her father as a young teenager: “Due to my Dad, [my boyfriend] and me got really addicted to pills.” One woman’s husband was a convicted felon with substance abuse issues. Another woman’s former husband, and father of some of her children, had been addicted to drugs and alcohol, though apparently, she had some success setting limits with him before their divorce. She said, “he outgrew the drinking and beating” after treatment and intervention, which she associates more with conditions of his current wife. One woman said she started using crack cocaine and opiates when her own son’s overdosing upset her.

An incarcerated woman described her history of drug and alcohol addiction. Her family moved frequently and after a move at age 11, “things started to go downhill.” She said, “I started drinking and experimenting with drugs…and I met the rebel crowd.” At 17, she met her ‘kids’ father who sold drugs. He was 12 years older and then the whole scene ‘took off.’ She had several children followed by a downward spiral with heroin and cocaine. She started embezzling and they had “too much money” so it was easy to do more and more drugs. Pregnant with her third child, she knew she was an active drug addict but couldn’t stop using. “God held my hand with that one because the baby was born OK.” Later, her mother and sister, who were caring for her children while she was serving jail time, became addicted to heroin. Another woman saw her problem (truancy and dropping out of school) as “the friends I hung around with. I started skipping school,
and smoking marijuana. I got involved with some bad friends and started smoking pot.”
She said she landed in jail because of drugs.

Another inmate had suffered considerable brain damage from heavy drug use and said
she has trouble remembering things or making sense out of questions. Her use also
resulted in some other serious psychological and medical symptoms. She and her siblings
grew up with her mother who she describes as an alcoholic. She began selling drugs to
make ends meet when she was supporting her own kids, since it seemed like the only way
she could make enough money. Then she herself started using heroin and cocaine “to see
why people liked it so much.” She got hooked almost immediately and “then nothing else
mattered.”

Use often started at a young age, and involved pills and marijuana, as well as IV drug
use. For example, a woman from a well to do family started drinking at 8 years of age.
Many women also began using drugs after a significant family event such as a birth of a
child, a suicide, or a death of a parent or step-parent. One woman discovered Valium in
her teen years, using it to mask pain from her father’s death, which she said disrupted a
stable, loving family environment. She was angry and found life very difficult with new
responsibilities such as caring for younger siblings and being emotionally supportive to
her mother. She maintained a closet addiction to pills through college. Abuse and
addiction to pills, alcohol, cocaine, and heroin would characterize much of her adult life.
Another of the women said her mother started drinking again after her step-father
committed suicide. She herself starting using drugs at 20 years of age after the birth of
her son.

Living with abuse (sexual, physical, and emotional)

I feel I’ve been through a lot: sexual, physical and substance abuse when I was younger.

Most of the women described experiences with abuse in their families and other
significant relationships. One woman’s history of physical and sexual abuse led her to a
foster care situation. She said her anger and sadness about her past played a clear role in
how she lived her adolescent years, when she got involved with drugs and alcohol. This
woman talked about wanting to help kids with similar issues when she gets out: “I could
help kids recognize those things. You always need someone who cares but also someone
who’s been through it.”

Another woman had been molested by her stepfather at age 11. The step-father then
committed suicide. One inmate described an aunt who was physically, mentally and
emotionally abusive, as well as at least one boyfriend who was abusive. She said she was
sent back to jail for “her own safety.” Another woman indicated she suffered from post
traumatic stress disorder due to being sexually abused as a child. In addition, she was
raped as a married adult woman. An interviewer of two other women commented,
“Sexual and emotional abuse seems to be directly linked to vulnerability to drug use. In at
least two cases we see abuse as a precursor to drug use and trafficking. Women made that
link themselves.”
One woman discussed abusive relationships with at least one of her three husbands: “The guy I met when I was younger…we got married after my second son was born. He told me I was too young for him, not to waste my life. He treated my oldest son as his own. He wasn’t good to me – abusive.” Another woman described an abusive relationship while living in an “unfamiliar, scary place.” Her interviewer described this “place” as having been homeless after a short stint in rehab. Further that she was totally dependent on this abusive male partner for survival. Her substance abuse continued throughout that period of time. Another inmate mentioned physical abuse by her boyfriend, who was also the father of their child.

One inmate mentioned abuse by a man she was dating as a teenager. Her mother “turned him in for statutory rape.” She said, “I thought it was awful but now, if someone were doing that to my daughter, I’d do the same thing.” Another of her boyfriends also started getting abusive. She said, “He’s broken pretty much every bone in my body at least once.”

This woman herself became abusive with her mother and sister when she got out of jail a previous time. Another woman discussed her own aggressive behavior with family members, saying she “beat up one family member when drunk.” She did not mention abuse among her family members. However, she longed for good communication with family without yelling. Her desire was to “have good communication – be able to talk to kids and husband in a good reasonable manner – no yelling, more listening.”

One inmate said her mother married a sex-offender. The interviewer got the impression that she was removed from her home at that point. She described her life as “a drama.” Another woman said her mother was physically abused by her father throughout childhood though they are still together, have talked about their past and worked things out. She described a religious, conservative upbringing, and “not very open” relationships between family members.

**Living without boundaries, stable families and structure**

_Maybe if someone could have helped my mom give me more boundaries, it would have been different._

_When I lived with my dad, I did what I wanted._

All but two of the women discussed unstable family environments during their early years. Due to the absence of fathers after a death, suicide, divorce or because of incarceration, many of the women lived with their mothers initially and then “bounced back and forth” between their fathers and mothers for a period of time during their teenage years. Several then moved in with boyfriends in their mid-teens and became pregnant. Often the boyfriends left shortly thereafter.
Others were in foster care as young children, as a result of leaving home, being given up for adoption or being taken into state custody. In one case, a woman and her siblings were in and out of foster care, spending periods of time at home with their mother, whose moods and behavior were volatile after their father died. Some of the women were angry over their parents’ divorce or angry about being given up for adoption. For one woman, anger subsided after getting more facts about these events as an adult. Over time, contact with family and extended family often decreased, leading to more isolated conditions.

A lack of parental limits and boundaries were often mentioned. Some described a parent who acted like “a big kid.” Truancy and dropping out of school were often byproducts of the lack of stability and boundaries. Nevertheless, a few of the women remembered having a “good” early childhood. In one case, a grandmother was able to set boundaries when the mother did not, and gained the admiration of her granddaughter. Many of the women value their connection with family but seem at a loss for how to make it a positive one. One woman thought that the one thing that might have made a difference was if someone had taken her mother in and given her the structure and caring she needed in order to be a good mother.

Family instability continues into the womens’ current lifestyles. For example, women often change partners, partners become incarcerated or die from a drug overdose or an accident, parents are evicted, trusted siblings commit suicide, or children are taken into state custody. Some discussed behavior problems and drug use in their own children. One woman, speaking of an adolescent son who was beginning to encounter problems at school, said “I can see so much of me in [him].” Another woman, whose son is living with the father’s mother, thinks the grandmother is “giving him too many drugs” for his behavioral disorders. But she also says the grandmother is trying to do a better job this time around than she did as a mother. The boyfriend, his father, and his uncle have all been incarcerated so the grandmother “is just trying to keep my son out of jail.”

- I took off when I was 13. Lived with my father for a year. Bounced back and forth between him and my mom. At 15 I had my oldest son.
- I’m angry with my mother. Nobody else in my family has been to jail. My mother set limits – didn’t bail me out. I’m angry. It’s the first time she’s ever set limits with me in her whole life.
- I was really angry with my mom for a long time, for giving me up. Then I found out she’d been forced to give me up and I wasn’t so angry anymore.
- I only went to school sporadically. I was unmanageable. I didn’t listen. I was angry at my parents. They got divorced when I was about 10 years old. I was pretty mad at them and rebelled. I lived with my mom at the time.
- I was raised by my mother and stepfather. My dad was in and out of jail at the time.

One woman described how her life in the foster care system was challenging. Another woman who lived with an abusive aunt tried to live with her mother, but was sent to youth services for not following rules. One woman, taken into state custody at age 11, bounced between foster homes until age 15 when she started living with her boyfriend. She lost her first son to state custody soon after his birth when she was age 19. Later,
while driving without a license and speeding, she had an accident which killed her boyfriend and paralyzed her brother.

Another woman’s story highlights the emotional isolation in her early years: Describing life after her father left, she said, “Things were usually OK during the day but they always got awful at night.” Frequently having to take care of younger siblings, she learned to keep a low profile because of her mom’s anger outbursts, which were usually directed at her. She said she had no friends to speak of, no attachment to school although she didn’t mind being there, and no one who noticed she was in trouble. Yet, she and her siblings were in and out of foster care quite a lot. “Sometimes it was OK.” She had no contact with her grandfather, very little with her grandmother and no contact with her own father after he left.

One inmate, describing a childhood that she considered “pretty typical and basically happy,” said she lived most of her childhood with her mom and step dad and multiple siblings. “We were the house where the school bus unloaded and all the kids hung out there. My mom was pretty much a big kid and that is the way I try to be with my children. We always had big keg parties. Sex, drugs, and rock and roll were what we did.” After age 11, she said “Basically I went on a tangent, hung out with friends, and was pretty much raised by the backwoods, country boys. Campfires, drinking, kegs…” Her brother, who had always been her closest friend and had “helped to take her mind off things” committed suicide when her first daughter was born and at that point she “started committing crimes.”

She continued to explain that since age 11 she was getting arrested but nothing ever came of it. It was mostly minor possession. The police would call her mom to come get her but “I was more afraid of my Grandma than my mom,” She was selling pot for her father. She eventually “got busted” and was sent to a treatment center. She said, “I called my P.O. and said ‘I’m ready to work.’ And I started going to drug counseling and really working hard. I was really utilizing those 17 months. But in the time that I was gone, both my mother and my sister (her children had been staying with them) had become active heroin addicts and when I got out my anger took over and I took a baseball bat to them. Then I was stuck alone in a house in [a rural town] with three little kids and mandated to hold down a job and go to counseling and I didn’t have a job or a baby sitter but I did it. My grandma was real helpful to me at that time. She’s one person I really admire. I think I have some amazing inner power. I overcame everything; I met all my P.O.’s requirements.” She reflected, “Too many people are enabling you when you are young and then you get in trouble. Someone should have helped my mom set boundaries for us when we were kids.”

Another woman’s story describes the continued unrest in her family: “SRS got called because there was fighting….They didn’t want me or [my child’s father] around my son….They took my son….I couldn’t keep [his father] away from him. After they took him away, I got in trouble for stealing….When that happened my son was in foster care.” She continued, “The thing that really got me was when they terminated my rights to my
son. Since the time I have been in jail all this bad stuff has happened. My mom was evicted. [My child’s father] was sentenced to jail for 2 years.”

One inmate’s story illustrates how unstable family situations continue to leave women in a dependent position. She described the father of her child. “After about a year and a half, the baby’s father went to jail….He was shooting up and went to a bar. He got into a fight and he was a better fighter than the other guy. The judge was overly harsh on him and sentenced him to 3-8 years. He was a hard worker, a good father. I had to go on welfare.” She continued with the story of how she managed after that, “I had three kids to feed and only $240 in food stamps per month. I also only received $700 a month. How was I supposed to live on that? My aunt paid my rent and my mother paid phone and heating.”

**Experiences of Incarceration**

**Experiencing daily life in prison**

*It’s like living in the Hotel California here and it almost seems like you have to have Keith Taylor come down to pull people out.*

The women discussed their day-to-day existence in jail. They commented on various institutional provisions and constraints such as activities and services available to them, health care, rules, privileges, facilities, food, and general atmosphere. They also described aspects of the social environment, such as the social network among inmates, relationships with staff, visits and outside support, and the behavior of inmates.

**Activities and Services in Prison:** The women mentioned over 20 different activities and services offered between the two prisons, such as mental health and substance abuse counseling, basic education and the opportunity to obtain a GED, support groups for substance abuse and domestic abuse, recreation, creative arts, and religious study.

- Drama class gets me away from thinking about things.
- My alcohol and drug counselor….She’s helped me a lot.
- I have regular counseling – you can sign up for regular counseling if you want it.
- Straight Talk and Rocking Horse – most helpful mental health programs.
- I get to tutor and it makes me feel better about myself….I have one girl who did the GED and I met her parents and helped her.
- AA is helpful. They really help with drug and alcohol issues. There is a lot of program and there are things to do. Karaoke night is really nice. Just the other night we had a comedian here. They do a good job with program and giving us things to do.

**Health Care:** Women mentioned inadequate health care, citing a long waiting list for the dentist. Several women thought the doctor needed to be more available and that mental health services were understaffed. One woman said she had been unconscious for “42 minutes” before getting medical attention. Another woman had to be moved to another facility temporarily for more intensive mental health treatment.
- I was unconscious here once for 42 minutes before they called the ambulance.
- They need better mental health programs, especially for PTSD and bi-polar disorders.
- You need to be able to get to see a counselor when you need to see one. The case managers want to help but their cases are far too large.
- I get my meds at 8 am….for my teeth. I get Motrin and Penicillin because I have had a sore tooth for the past 2 and a half months…. There is only one dentist…and there is a big waiting list because they can only take so many at a time and many of us have dental issues.

Rules and Privileges: Women listed a number of rules concerning property such as jewelry and clothing, and items for personal hygiene. In addition, smoking is prohibited and they are required to submit urine samples for analysis. Monthly commissary money is seen as inadequate for purchasing needed supplies. Headcounts were taken several times daily and the days were structured with a schedule for meals, group meetings, recreation, and curfew. Several women explained the privilege system. For example, one woman said she could earn five points per 24 hour period for room inspection, behavior, and work. Mothers had certain privileges for visitation. Those at a certain privilege level earned the use of an electric razor.

- If I were in charge, I wouldn’t be so hard about rules for clothing, property…earrings, jewelry should be allowed….personal items – need to be able to get lotions, conditioner, other items for personal hygiene.
- Lack of smoking very hard on a lot of people – very hard to quit.
- Getting outdoors – You can only go on the porch if you’re on Level 4. There used to be more outdoor time, but the porch isn’t open to everyone now. If you’re not on Level 4 you can only go out for outdoor recreation.
- I have it better than some other girls because I have a little money. If you have money you can make phone calls and you can also buy your own shampoo, soap, and toothpaste.
- You also can’t have razors to shave so you have to buy Nair or you can’t shave. We can’t have razors, because some crazy people hurt themselves. The men still get them but we don’t.
- You can earn the use of an electric razor but it takes weeks…. By the time you get to use a razor, you look like a man – it’s very upsetting.

Facilities, Food, and General Atmosphere: Women likened their rooms to a hospital, with up to five inmates crowded into a small room. Each room was equipped with a television. Laundry facilities were available at certain scheduled times. A few women commented on the food, ranging from considering it healthy, to limited, to “terrible.” Others described the facility as overcrowded, ‘freezing cold,’ and unsanitary. The general atmosphere was described as chaotic, lonely, sad, and unempowering. One woman described it as “very emotional,” with anger, sadness, and uncertainty about relationships. For some, time passed quicker at night and they tended to worry more during the day. Many women were traumatized the first time they arrived. One woman was traumatized by seeing an inmate who had committed suicide “wheeled out in front of everyone.”
I’m in a 4 man room.
Lots of people having eating disorders, so they try to provide good food. You can eat well if you try, because there is a salad bar, vegetarian meals – good for people who have been on street and who haven’t eaten well before.
We all look forward to desserts.
This place is off the wall, it’s unsanitary, there is black mold everywhere.
It’s also really crowded here and the fact that they keep people like me, who haven’t done anything, in detention just makes it worse.
They have terrible food. It’s freezing cold.
It’s kind of like being stuck.

Social Networking Among Inmates: The women described social hierarchies that form in jail and the importance of alliances for protection and trading of property. These alliances were seen as temporary for survival in the prison environment, with few lasting beyond the sentence. Women described “cliques” that formed around age, possessions, status, and power. Tobacco gave some women bargaining power. Relationships between the same people can shift once in jail. For example, those who do not get along outside of jail, often form alliances in prison. New inmates effect the hierarchy and are assessed by other inmates for their potential to be an ally. Those who got involved in “snitching” or telling on others were ostracized. Some women learned to be selective about who they trusted. One woman described her own skills for listening and encouraging her peers. Several women acknowledged their needs for someone with whom they could talk and share stories. Women who are parents bond over children’s issues, and some bond over substance abuse issues.

A friend, we would talk every morning over coffee – always thought she was listening. Then one day I’m over cleaning a building and the drug and alcohol counselor was in. I realized, she’s not even my friend. She’s not even listening (referring to the friend). I’m learning a lot about myself and others. I need people.
I connect with them based on where their heads are at.
I normally listen and don’t give advice. But one girl, I told her, it will get better, stay strong. I’m here to listen – I tell people if they need to vent, talk, I’ll be here.
Orientation is peer orientation…Orientation here I think is a theory, not a practice.
I have one true friend.
You gotta have a girlfriend while you’re here.

Relationships with Staff: Women learn from peers who to ask for things and how the grievance system works. A few said communication with staff is a problem and there is not a handbook for how to do it.

I have a pretty good relationship now, not so good at first – I’ve changed a lot and staff recognize that….Got sick of being segregated for my behavior.
Caseworkers never meet with you. Already nine days have passed since I was eligible to be released and I have heard nothing.
I wish my P.O. were less personal. It’s almost like she has something against me. I think I intimidate her.
One woman described her relationship with the parole officers. “Some parole officers are okay, some are jokes. The officers make things tough, especially the younger officers. It is the little things. Like last night we were watching TV and not bothering anyone. An officer came in and said can you turn the TV down more. The problem was we could barely hear the show. We said we weren’t going to turn it down anymore because we can’t hear. The officer threatened to turn the TV off then. We were being quiet. The officer just wanted to use their authority to tell someone what to do. They make you feel like they are better than you.”

Visits/Outside Support: Visits were allowed once a week on a schedule by suite. If too many visitors came during the visitation hours and time ran out, they were sent home. Women described a great deal of surveillance during visitation, to prevent smuggling. This varied based on privilege level. Many women appreciated visits from friends and family, as well as from the Girl Scout program, college students, and church groups. One woman said, “Outside support from family and friends has been helpful.” Special activities and events often brought in outside presenters such as a dance teacher and a comedian. One woman gets to see her kids fairly regularly, especially her two daughters who participate in the girl scouts program inside the facility.

Behavior of Inmates: The women described a variety of behaviors among inmates, including fights, smuggling, and stealing (especially when the commissary distributes monthly funds). One mentioned a lot of “relationship drama,” drug stories and gossip. One woman complained of sanitary habits, saying many inmates do not wash their hands, and leave garbage all over. One woman described the women as “submissive” and “victims,” even though they were seen as “tough,” since many were battered before coming to jail. Violent criminals were described as “less afraid,” perhaps due to the certainty around their sentences. However, they received fewer privileges. Some women were segregated for their behavior. One woman described extensive force used by staff, such as a “pepper spray incident.”

Irregular sleeping habits were common. Often women stay up all night and sleep during the day. Some women became creative with the resources available to make needed items. For example, a few women improvised tweezers for their eyebrows. A few women keep to themselves. One writes home daily. In the evenings, women may hang out in the dining hall or watch TV. In one case, a woman was having seizures, and other women would help her anticipate them and get her needed assistance.

- I mind my own business.
- They need to solve the smoking thing although in some ways it is good because it used to be that people were throwing drugs over the wall and now people are just more focused on getting tobacco.
- A typical day starts with breakfast. I usually sleep through breakfast though.

One woman, in jail for over a year, gets to live in the honors house, which she considers a blessing because “it is quiet and peaceful and we don’t bother each other.” She works in
the kitchen as a dishwasher five days a week, nine hours a day and says that is the best part of being at prison. It gives a structure to her day and something to do. The rest of the time she stays in her room: “I guess I’m still a loner.” She is fairly contemptuous of many of the younger women who are there because “they are so noisy and mean.”

Another woman described her schedule: “There are five of us in a room. It is usually fine but we have a new roommate and she has been complaining that we are making too much noise since she wants to go to bed at 11 or 12 pm. Generally we stay up all night and talk or play games. She gets mad and says that we keep her up. The time passes quicker at night. It is hard during the day because I am waiting word from my caseworker. I have been eligible to get out of here since mid-September. I am waiting to hear from my Parole Office. You have a 90 window to be released early if you have no major assaults or destroy property. When I get out I need to go into rehab.”

**Recognizing the importance of meaningful work and education**

*I should have more life skills, more jobs, more experience working with others and balancing things...They don’t really have programming here for life skills.*

Most (75%) of the women had dreams for the kinds of work they would like to do, such as postal work, psychiatry, nursing, counseling, culinary arts, cosmetology, and design. However, they held lower expectations for what they thought was actually attainable. Only three of the women felt confident about employability due to strong prior work histories or because of a family business that promised them work. A third of the women with career aspirations felt a cashier job was most realistic upon release. Others knew they lacked employable skills at levels that would enable them to fulfill their dreams. They wanted more meaningful opportunities to learn employment skills and pursue higher education while in jail, beyond the current opportunity to pursue a GED. One woman obtained a high school diploma through the High School of Vermont. This was a good experience for her, but she now wants more. She would like to have college courses and career oriented courses, as well as more opportunities to learn life skills. She has tried correspondence courses but feels they are too expensive.

- **My dream is to get proper schooling that will help me reach my goal of working with kids.**
- **I know now that I can be a really good chef...I just need a little more training and a resume.**
- **I had a career....26 years....I was a very dependable employee....It was the only job I ever had.**
- **Usually have a job the day I want it.**

Several women felt that work opportunities in jail, such as cleaning, did not enhance their employability. Others worried about their criminal records and conditions of release holding them back from pursuing a career. Some wanted more opportunity to get jobs when released from jail. One woman sees a job as critical to her ability to live independently, and worries about making enough money to support her two sons whom
she hopes will come back to live with her. Her fears center on not making enough money, though she reports that “I’d work two jobs if I needed—I’d have to start at the bottom.”

- The jobs here are what you’d do at home: cooking, cleaning, etc. They’re not career types of jobs.
- I’d like to be a residential counselor, but I don’t know how that could work being a felon.
- They say maybe you should do this or that but there are no supports…. I will have to find work. I like people and I like to work around people…. I would like to get a job.

Many of the women work in the jail and appreciate the structure provided by a full time job. One woman wanted a job to pass the time in jail. Another woman hopes for the structure of “a job, apartment, bills” when she gets out of jail. A couple of women, one with five children and the other with a new baby, saw their first priority as mothering their children and thought work would have to wait. One interviewer commented that classes should address domestic issues.

- I have a job in the laundry which is good.
- Being a full time mother…is really a full time job.

**Recognizing the importance of treatment**

Why are they incarcerating women at the rate they are now? I’m an alcoholic. Instead of treatment they chose to incarcerate me. That’s not the way to rehabilitate….Judicial system totally blows my mind. Most of the women here are drug addicts and alcoholics. There has to be another way to give women help. There has to be a better way.

Most of the women, representing a wide range of ages, identified the need for drug and alcohol treatment. Though some acknowledged supportive on-site drug and alcohol counselors, mental health counselors, caseworkers, and other programs that distribute relapse prevention information, they continued to struggle with addictions. It seems that mental health counseling and drug and alcohol support groups are available, but the level of support doesn’t result in treatment “strong” enough or of sufficient duration and frequency to make a lasting difference. In addition, some inmates are ambivalent about treatment and continue to use drugs and alcohol. They may not take advantage of available programs.

For example, one woman said her own violations were related to rehabilitation and attitude. She listed drugs and alcohol as one of her main fears, and said it inhibits her progress. She also mentioned that she had to be housed in another facility temporarily when she had a bout of mental illness. She identified a need for “counseling help – two times a week – within walking distance” – when she gets out of jail. Another woman talked primarily about Narcotics Anonymous. Although she did not talk about using drugs at this time, her pattern of repeat offending has been connected to drug use. She also talked about how hard it is to quit smoking in prison. She discussed mental health services, commenting on understaffing in this area. She likes her mental health counselor
but finds that the counselor does not have enough time for everyone. One woman identified the need for a mentor as well as AA and NA support groups. Another recognizes the “power” of her addiction, saying that it “scares” her. Another inmate attends AA once a week but does not feel this is adequate for the extreme addictions to substances of the incarcerated women.

- **98% of women have a substance abuse problem and no treatment…need it 7 days per week.**
- **Valley Vista is more of a psych program. It helped a lot with the drugs.**
- **I also need a drug treatment program, a job, mentor support. I need treatment counseling. I have to have some supervision so I can get back on track. If I max out then I don’t get support.**
- **I definitely need some drug and alcohol counseling. I did it once before after I got out….I try to hit some meetings.**
- **I know what I need to do to be clean. I just need to get out of here. In the meantime I’m doing drug counseling and working in the laundry, and I’ve got religion.**
- **I need to set up drug counseling before I leave here, I need a buprenorphine program to make this really work.**

Some of the interviews revealed ambivalence about treatment. For example, during one of the interviews, a woman asked for a drug treatment program with more frequent meetings (more than once a week for treatment and NA and more than 3 times a week for AA) and at the same time acknowledged that she had discontinued a residential treatment program and continues to use “every time” she “gets a chance.” Depression and hopelessness seem to be intertwined with this ambivalence. Some women do not take advantage of program offerings, often citing depression. Another woman likes her drug counselor a lot and wished she could spend more time with her. She identified the need for better mental health programs, especially for PTSD and bi-polar disorders.

- **I am constantly in a state of depression. I stay up all night so I can sleep all day because I am so depressed. The women in my room all stay up all night talking and playing games.**
- **There is NO LIGHT AT THE END OF THE TUNNEL.**
- **I was on meds for depression when I came here and then I was selling them so I couldn’t have them any more, which I respect, but then all those feelings came back….You need to be able to get to see a counselor when you need to see one. The case managers want to help but their cases are far too large.**
- **I’ve lost a lot. I am just really depressed.**

One interviewer reflected on the paradox between a woman who wants to change her ways but seeming almost resigned that she really won’t change. She wondered how many inmates feel this way and have this sense of resignation. Another interviewer commented that distrust and apathy regarding prison programs results from a lack of respect for inmates. The grievance system, the only outlet for inmates, does not garner responses. Some women are afraid to express grievances for fear of retaliation.
Another woman described her experiences with various groups and treatments (e.g., Cognitive Self-Change, “Rocking Horse” for substance abuse, and AA.) She reported that she is not involved with any substances at this point, though she has been in some trouble for smoking cigarettes. She has had some good experiences with a mental health counselor and considers these services the most helpful of anything she has received. She also reported finding a program called “Straight Talk” very helpful, noting that it has an open format in which most people talk about substance abuse. She tries not to connect with people who are currently using drugs and alcohol. When asked to talk about what she would change if she were in charge, she reported that she would let people smoke while in jail so that they could deal with their stress.

Regarding overall use of services, this inmate explained, “A lot of people ‘fake it til they make it.’ They use services first as an incentive, but eventually they just keep going. Most think they want to change…I want to change but I’m scared because I don’t have the skills”…”some of us flip flop between where we were and where we want to be.” Another woman was clear about wanting and needing long term treatment. She looks forward to attending the Tapestry program.

- I trust my counselor—she knows how to advocate for me.
- My alcohol and drug counselor….She’s helped me a lot.
- I’ve done most of the groups that are offered.
- AA is helpful. They really help with drug and alcohol issues. There is a lot of program and there are things to do.

Some women had specialized treatment needs that were not yet being met. One woman recognizes she will need buprenorphine treatment when she is released from jail. She does not receive this treatment while incarcerated. Being an IV drug user, she said she feels lucky she has not contracted Hepatitis C. Another woman, who had developed a serious medical complication due to her substance use, has to wait until the medical symptom is under control before being able to commence treatment at a residential program. She knows becoming clean will be important for reunification with her children.

One woman was very specific with recommendations to policy makers regarding treatment:

1) Give women knowledge and long term treatment centers, like Tapestry – one year or more - not 90 day programs. These are nothing if you have a real bad drinking problem. I’ve seen it doesn’t work for girls here.
2) Open these long-term treatment centers throughout the state – not just Brattleboro.
3) Really tax alcohol so it’s very, very expensive.
4) Two prisons for women – does that make sense? You need a drug facility and an alcohol facility….We need rehab so you’re not doing the same thing.
5) Halfway houses would be helpful. If you’re a druggy you go back to the same neighborhood, same people you used to hang out with, dealers...
**Losing connections with family and children**

I want to be the mother that I used to be. I want to be part of their lives, I want to go on fieldtrips, to be there for parent-teacher conferences. I want to be there on the first day of school and I want to bring in snacks. I miss that. I am just worried that I will go back to drugs and miss out.

Many of the women have lost contact with or custody of one or more of their children. Some lost contact and custody before coming to jail, and some as a result of incarceration and its aftermath. One inmate had given birth while incarcerated and now must negotiate limited contact with her baby. “She’s my whole life now. It’s really hard not seeing her every day.” In another woman’s case, her child was exhibiting serious self-destructive behaviors, and was taken into custody and sent for treatment before the parent went to jail. For most of the women who were parents, their concerns focused primarily on their children, including how to re-establish contact, “make amends,” and provide for them. One woman whose goal was to get her older children back, acknowledged that it may be an uphill battle and that she will have to be clean for at least a year before any reunification can take place.

- The thing that really got me was when they terminated my rights to my son…. I was angry and upset, crying. I had never been to jail when I was sent to jail…. I was angry about my son…. People didn’t understand what I was going through with losing my child.
- Women who have terminated parental rights (TPR) – some commit suicide.
- I always am in fear of getting high. It causes everything to be taken away and I have to start all over. Because of getting high I have had to start over four times in the past two years.
- Have my family back together – that’s real important.

In some cases, attempts to set boundaries with their own children made it difficult to be in contact, but lack of contact was isolating and resulted in other serious complications. For example, one woman’s son lived with her until shortly before she came to jail. When she had asked him to help pay to live there, he ruined the house. Saying she “enabled” him, she has not talked with him since. The same woman is angry with her mother for not bailing her out of jail. Indicating that her mother visited her recently, she said she preferred only her granddaughter to visit her. Her daughter had been placed into residential mental health treatment for her own behaviors and had been due to come home two weeks after her mother was placed in jail. According to the mother, her incarceration has been very hard on her daughter. She mentioned, however, that her daughter is now doing well in a group home and has received a full scholarship to college. Initially, when her daughter was placed into treatment, the mother was very angry with the caseworker responsible. She said, “Today I say it’s the best thing that has happened.”

- My daughter was cutting, drug overdosing, trying to commit suicide. She didn’t like my boyfriend. When we were together he couldn’t get a divorce.
I can’t allow my 28-year-old back in my house. First time he ever left home. I enabled him. I let him live in my home with promise he would pay. He didn’t pay for 6 months. I had to let it go….He ruined the house. I haven’t talked to him since all that happened.

I’m angry with my mother….She came down to see me last week. My granddaughter comes three times a week with the girl scouts. I don’t want anyone else but my granddaughter here.

Some of the women, including those without children, lost contact or already had little or no contact with their parents, extended family and friends. One interviewer commented about a woman who had family members on a visiting list, but did not appear to receive many visits. One woman with a young son who lives with his grandmother is afraid he will not want anything to do with her in the future. Another inmate lost one of her children to state custody, has little connection with her immediate family, and primarily connects with the father of her other child. Some women, however, made an effort to stay in contact with family. One woman said, “I call my mom and aunt all the time….I have a debit card so I can call them.”

Mothers expressed the desire to be with their children and “do what is right” for them. Some were actively working on re-establishing contact through phone calls and letters. Family support such as child-care and the ability to call home and receive visits was comforting to several of the women. In some cases, children were living with relatives such as grandparents, siblings, and in-laws. One mother in-law adopted the children. A few of the inmates had daughters or granddaughters who visited regularly through a Girl Scout program. One woman spoke highly of the parent-child center. “They have a really good program here through the parent-child center. It is a really, really useful program. You get two parent-child visits a month. It gives you time alone with your children. Not that I am truly alone with them. There are lots of other people and kids around but I don’t feel I am being baby-sat. Every other Sunday my mom brings my kids to the big visitor room next door.”

For some, however, the effort to contact family was fraught with difficulties. For example one woman noted that’s it’s expensive to call her children and that the commissary doesn’t provide enough money for regular calls. Family visits were limited by geographical distance and sometimes also emotional distance, in cases where relatives were upset or unsympathetic to the plight of the women. In addition, visits were upsetting to a few younger children who were confused by the concept of time involved in both the visits and their mother’s jail sentence. One woman felt her situation was an additional burden to her family for which she was blamed. Another inmate, who is currently not allowed to have contact with one of her children, is trying to reestablish contact.

One inmate, whose marriage was still intact and whose children were living at home with their father, appeared optimistic about her continued relationship with them. She sensed mutual support among the children and from the community for the family. She wrote letters home daily and looked forward to visitation days. Her term in jail had been brief by the time of the interview.
**Hoping for, yet fearing release**

*My history is that I’ve been in and out of the system. I don’t want to have this life anymore….I don’t know how to do everything in a healthy way.*

While most of the women expressed a desire to be released from jail, they also shared concerns about being able to successfully reintegrate back into their communities. Usually this concern centered on fear of relapse, which many had already experienced following a prior release. Their other concerns involved fears about being able to meet practical needs for work, housing, and transportation. Even a few women who expressed less ambivalence about release, shared fears about things that will be difficult to find and maintain in the community such as work, money, housing, and a driver’s license. One woman identified an extended family member who might help her “get back on my feet.” Finding a “good job” was an issue for at least one woman, whose crime was related to her prior occupation. In addition, women knew that their old social networks could lead them back to addiction.

- I hope I get out of jail and go back to school…. There are many roadblocks….There won’t be any place for me to go. My probation officer doesn’t think I can change.
- My dream is never to come back here again. I want to get out and try to have a normal life. It is difficult to be here. I don’t want to miss more days of the kids’ life….The last two years has been terrible…. But old habits are hard to break; friends, people, places, and things.
- I self-sabotage a lot.
- I need to know how to get out of the system. I want to do good. Tapestry is like a halfway house. When I walk out of those doors, I don’t want DOC in my life.

One woman talked often about her desire to get out, to live a clean life, and to provide for herself, yet she fears that she lacks the life skills she needs to hold a regular job and live on her own. She reports that money is a big issue, and that she does not want to return to previous ways of making money, which involved selling drugs. She also reported that the prison does not have adequate life skills programs. There used to be one called “Futures” that dealt with careers, life skills, budgeting, and insurance, but it is no longer offered. When imagining herself in the future, she talked about needing help with work and housing, as well as finding a therapist to talk to if she were to experience the need to use drugs.

A couple of women made comments that illustrate their sense that prison offers some structure and safety. One woman relayed a story about a deadly accident while she was in jail: “While I was in there I got a call that there had been an accident and someone was dead. They didn’t say if it was my boyfriend or his brother. I decided then that there was a reason that I was in jail. It was God’s way of keeping me safe because I would have been in that car.” Another woman, upon a past release, spent the first two weeks staying in the house because she did not know what to do with herself. She noted that prison is structured while life back in the community is not.
At the same time, it seems that the prison structure may offer more of a “holding pattern” than an opportunity for making lasting change, especially in the area of substance abuse. One woman, considering release from prison, identified her “fear of changing” and another woman dreaded “starting over.” Several women felt that without a strong drug treatment program, it would be difficult to overcome a tenacious drug or alcohol addiction. One woman described her fear of the environment to which she will return, citing her old life and friends as routes to addiction. She was clean for a year until moving to the city where, due to availability of cocaine, she used “all day, everyday.” She says she has fallen back into substance abuse so many times, “why will this time be different?” This woman hopes to enter a therapeutic community or commune upon release, to provide a transition. Another inmate did not perceive any real barriers to getting her kids back other than the need for her medical situation to be stabilized. However, at other times in the conversation she expressed strong fear that once released she would start using again without really thinking about it.

The ambivalence expressed by the women seems to run deep, involving hopelessness, and a sense of ‘being up against great odds.’ One interviewer commented on her interview with one of the incarcerated women: “When I asked about the educational opportunities available to her, she noted that they had them, but also said that she does not take advantage of them due to depression. I find this curious, in that she says that she wants to change her ways but she seems almost resigned that she really won’t change. I wonder how many inmates feel this way and have this sense of resignation?”

**Trying to Leave: The Revolving Door**

*I could go home but it wouldn’t work. I’ve seen in the past 14 months – people come in and out like a revolving door. Without a support system in place I would do the same thing.*

**Failing to overcome mental health, drug and alcohol issues**

*When I got out last time I went to rehab for 32 days. Two days after I got out I saw someone overdose. I promised myself that that would not be me. But old habits are hard to break; friends, people, places, and things. I told my mom I needed to go to a meeting in Burlington. She took me and I shot up. I want it to work but you run into people you know. I started the drugs all over again.*

*I know now that this is the big thing in my life...to get and stay clean...but I have failed so many times.*

Many of the women struggled with relapse after repeated attempts to overcome addictions. Some who had completed treatment programs, found them insufficient, having completed a treatment program and relapsing after participation. Some even considered 12 step meetings such as Alcoholics Anonymous as not enough. Others left treatment programs early. When they looked ahead to life outside of jail, the women identified the need for mental health and substance abuse counseling. For example, one
inmate talked about the need to remain connected with a mental health counselor once she is out, especially if she feels the need to use drugs. There seemed to be a lack of mental health supports in the community to help prevent relapse and to help women meet basic needs for jobs and housing. One teenage inmate had already failed in rehab for the second time by her mid-teens. Drugs have been a central focus of her existence for the past five years.

The women also shared specific concerns about trying to overcome addictions. For example, one woman said her previous lifestyle and ability to make money was all drug related. She said this makes it harder for her to see how she will function when she is out without returning to these patterns and habits. One interviewer concluded that those “who are seriously addicted are convinced that they cannot make it on the outside without re-offending because of drug use and sale.” One woman’s incarceration resulted from repeated drug offenses. Another woman thought it would be difficult to find the time to meet the condition of attending Narcotics Anonymous meetings in the context of other responsibilities. She commented, “It’s a lot to fit in all of these groups and meetings with working and parenting.”

Upon previous releases, many women did not leave incarceration having completed a treatment program. Illegal drug use while in jail seemed common. Tobacco use was also an issue. A few women could not understand why smoking while in jail carries sanctions. One woman said, “I’m always in trouble here” for smoking cigarettes. On the other hand, one inmate who had contracted Hepatitis C from drug use could not receive Interferon treatments. They are not available while in prison.

▪ Too many women in prison need to be in rehab because it’s drug and alcohol related.
▪ There’s nothing out there for women. Tapestry is the only thing. Willow Grove and Valley Vista are short term. I need a long-term support system.
▪ I want to do rehab but you only can go if you have Medicare. I don’t know what I have to do to sign up. I need information.
▪ They need a better protocol for detox.
▪ I went to rehab. When I got out, I went to a half way house after a month. It wasn’t the right place for me. I still don’t understand why. It was overwhelming. I just graduated rehab. I didn’t seem to have a reason to be there.
▪ Why sell you the alcohol and then imprison you for getting drunk? They should put you in jail for smoking cigarettes if you get cancer. It’s dumb. I think they should take alcohol off the market.

Of the women interviewed, those that did leave having completed a treatment program often relapsed after returning to the community. Failure to “stay clean” led to resumption of former behaviors and parole violations. The women’s stories highlighted a continuous cycle of treatment and relapse. One woman said, “I didn’t want to come back here when I got out but I got high all over again. I went to the Barb Clinic. They give you an opiate blocker and I did really good.”
Another woman, in jail for the first time, shared a long history of sobriety and relapse. Her story shows the link between relapse and difficulties with significant relationships. She clarified, “I’ve had periods of sobriety…. I’ve been in AA since I was 22 years old. Now I’ve had the same sponsor for four years.” She added that she “usually relapsed over a man or relationship.”

Many felt longer-term options were needed for those who are seriously addicted. One woman felt that Tapestry and AA were insufficient. Another woman also indicated that more was needed. She explained, “The Tapestry program….is a therapeutic community. A lot of judges use it as a sentencing tool. You can get released before you serve your time. It is a very good program. But I needed more than that to stay clean!”

Another woman who also said more was needed for treatment to be effective over the long term, still thinks that the prison offers a lot of programming. She added that she believes she deserves to be there for what she did and does not think she could ask much more of prison life. One interviewer described an inmate’s life as a ‘relapse/rehab’ cycle, saying “She would be ‘scared straight’ for periods by tragedy such as the death of a male partner who overdosed, but would relapse in new relationships with partners who used drugs.” The interviewer asked, “What is missing from treatment?”

One woman described her lack of readiness for treatment: “I didn’t really want to be cured and I was doing xanex the whole time and I left treatment halfway through for some detox and went to a bar and ended up in a holding cell.” Later, after a period of improved circumstances and behavior, she relapsed again: “About a month after I got out this guy showed up, we had been friends as kids, he was the one who had told me that my mom and sister were heroin addicts and that my mom had been taking my kids’ social security. God sent him to me. We both started working and got the kids into school….When I got done there and made parole I started back stepping. My boyfriend called me on it but I was off and running. Things started going downhill and I was arrested….for breaking parole. I was offered treatment at Valley Vista but my heart wasn’t really in it.” While acknowledging that she felt most of it was her fault, especially the drug addictions and related activities, this woman said she needed more support to change. This meant “someone being much stricter with me, to really be able to get past it.”

Several women seemed well aware that returning to their prior environments would increase their chance of relapse. However, those that wanted to move felt hindered by conditions of parole and economic realities that restricted where they could live. For example, one woman said, “Getting paroled from Tapestry is the biggest hindrance. When you get out of Tapestry, you don’t want to go back to where you used. Getting your caseload moved to a different location is almost impossible.”

**Failing to meet the conditions of community based supervision**

*Don’t follow my steps. Once they have you they get you again...*
Three quarters of the women commented about the difficulties that they encountered, beyond relapse, when trying to meet the conditions of community based supervision. Many perceived their conditions for release impossible to meet. Housing requirements and restrictions on where and with whom they could live were often mentioned. Too little time allotted to find a job and insufficient “gateway” funding also made meeting conditions seem insurmountable. Transportation was mentioned by some who needed to find a way to travel from remote rural areas to their Probation and Parole Office. Some women were confused about their charges and also about their conditions of parole. For example, a woman can be returned to prison by the court, the parole board, or the DOC.

Others pointed out inconsistencies across the state in sentencing practices. According to one interviewer, there were several instances where Probation and Parole decisions in one jurisdiction would not have resulted in incarceration in another district. In addition, when women committed what seemed to be minor infractions, which would not be grounds for incarceration without the previous record, they were returned as if they had committed a serious crime.

- People really need to look at why people are here in jail. Many women here are sitting in jail because they don’t have a place to live. I can’t grasp that....10 women are here because of a lack of housing? It should not be that way.
- Housing programs prefer to have people who are still on parole. So if you max out it is harder to find housing. There are FSU apartments and extended hotel suites. But if I max out it will be hard. I have heard they will just release you at 12:01am with no place to go when you max out. I am scared about that.... I can’t go to my mom’s because of my past history.
- The furlough program is pretty good but it needs to be consistent around the state.
- Well for starters some people here are on bull shit charges. One time I was offered 31 days of work crew instead of going to jail. Sometimes the court is too strict. Probation depends on the judge. Last time I asked for stricter probation requirements but the judge wouldn’t listen to me.
- Last time I was out on probation I violated parole by doing drugs while living at my mother’s house. I didn’t do the drugs at her house. I got a ride from her and said I was going to an AA meeting and instead I got high. I violated my parole and that’s why I am back here.

Although she has attended Narcotics Anonymous, one inmate’s continued sporadic use of drugs has interfered with her ability to stay clean and to meet the conditions of her parole. These conditions included attending 12 step meetings and going to extra-curricular activities in which her children were involved. She also wrote a bad check in connection with drug use. Another woman discussed the situation that led to her incarceration, indicating her perception that she had met requirements of prior field supervision and that her arrest came as a surprise. She explained that she had “finished ISAP...paid all fines...figured I was off of it.” Then she had “gone off at night drinking” and got into a “fender bender.” She received a “flash citation to appear in court....FSU came. I never got any paperwork. I was in the dark.”
One woman fears Probation and Parole in her county because she believes they will bring her back to jail on a charge of violation no matter what she does. She also explained that she is not allowed to live with her fiancé because he is a hunter and has guns. Her latest arrest was for having a glass of wine while on a neighbor’s porch. She commented, “Why fill up the jails with wine drinkers?” She feels that she was set up by FSU to be returned to custody. This woman is clear about the fact that the conditions set up for her release are such that she will re-offend in her county and be returned. She says that once released, for example, if she does not get a job within two weeks she will be returned to jail, so she expects this to happen. According to her interviewer, “She cites the ‘habits of mind’ training offered in prison as good, but thinks it is insufficient as long as the system is loaded against her…. The ‘gateway monies’ are not enough to keep her out of jail.” In addition to transition supports discussed in other sections of this report, such as help with employment placement and transitional homes, this woman said she needs help negotiating conditions of release so that she can stay out. She feels that were she in another county’s Probation and Parole Office, she would have a better chance of making it.

Another woman suggested that violation of parole sentencing is “harsh” and that she could be better served in the community than in prison. She thinks a one or two-year sentence for violating parole is “ridiculous.” In her words, she was sent back to jail “for crossing the street…taking the wrong way to work.” Another inmate, serving a second sentence, is unclear on the charges.

Two women both had been in treatment but then relapsed. After relapse, they committed crimes that landed them in jail for long sentences. For example, one woman’s first conviction involved her participation in the Tapestry program. Her second conviction for embezzlement sentenced her to prison for three to ten years. Another woman, who developed a closet addiction to pills after her father died during her young teenage years, received her first jail sentence for heroin possession. After staying clean for a few years, she switched from methadone to cocaine. After another attempt at rehabilitation, she moved back home, got involved with a man who robbed to support a drug habit, and was arrested for burglary, with a sentence of three to seven years.

Several women felt they needed more support from their parole officers and some wanted frequent supervision from those helping with transition and rehabilitation. One woman’s main concerns involved whether her caseworker and parole officer would help her find adequate housing and work. She especially worried about finding approved housing before release.

As will be explained in the staff findings section, the fragmentation of sentencing bodies and practices that the women experienced were linked to staff’s perceptions and definitions of their work roles. For example, portions of the staff view themselves as an agent of the court, while others as an adjunct to law enforcement. Whether staff mainly sees their mission as one of ensuring public safety or as one of rehabilitating offenders appears to make a difference in the women’s experience during community based supervision.
They really need a better way to give you some boundaries when you are out so that you don’t screw up again. I wouldn’t mind having to talk with someone everyday and have to do drug tests.

My probation officer doesn’t think I can change…. I have never actually met my parole officer. I have to convince him to let me go.

Major DRs can also hurt your chances to get out. I got into an argument and got one. Someone came in with drugs and gave me some and they caught me. The DR stands for disrupting the facility. It makes it sound a lot worse.

**Facing barriers to housing, employment and education**

You have to tell people you’ve been in jail. Who’s gonna hire you once you have told them? Who’s gonna trust you?

You have to get a residence to get out of here. They give you up to $1,000 to help you with your down payment but if I have to get a place and then go into rehab for a month, the money will be gone.

I know that I can do it, but nobody will believe me when they look at my high school record.

The incarcerated women clearly articulated barriers to housing, employment and education, including laws, parole restrictions, lack of trust by potential employers and landlords, no job skills, and the need to care for pre-school children. Many cited a lack of transitional support for getting these needs met. Here, the paradox, or “Catch 22,” of the revolving door became particularly apparent. Women needed these resources to successfully leave jail, and yet their situations often prevented them from being able to attain what they needed. Some lacked skills and a record of successful employment. Most worried about the impact of their prison record on their ability to get hired. Several were particularly concerned about their potential to be hired as felons. For some, restrictions on where they could live and work after release meant trying to make ends meet in an expensive county. Several women, who could live with their mothers, said they would not be allowed to do so because their last sentences involved drug use while living with their mothers. Although some found caseworkers or drug and alcohol counselors helpful, for the most part, many of the women felt the help was too little to meet their needs. Many also said they lacked helpful parole officers or other advocates to assist with establishing these basic needs as they transitioned back into their communities.

I’d like to take some college courses but they don’t offer anything here for me and I’d like to study criminal law but once you have a felony conviction you can’t really get a job in that field anyway.

A while ago I was working for a friend….but then my P.O. said she shouldn’t hire me because of the liability.
Now my parole officer doesn’t know if I can go back and live with my mom. I will have to live somewhere else…. They might not let me go back to my mom’s house because I was staying there when I got back into drugs again.

I would like to get a job. But until my baby starts school next year, I would like to stay at home.

One woman, with many mental, emotional, physical needs, had just received Section 8 housing when she was sent back to jail. Saying “access to housing and transportation is huge,” she added, “I will have to start all over again.” Another inmate, who expresses hopelessness about her future (“I have no light at the end of the tunnel”), anticipates not being able to find a high-paying job. She said there are no transitional supports to help her integrate back into the community, and ideally she would like a “mentor.” She finds her caseworker helpful.

Another woman, who was very concerned about housing, said her sister had offered to help. This housing situation, however, had not been approved as a residence. She feels that her caseworker has not been helpful in terms of transitional housing. In general, she is dissatisfied with her caseworker and parole officer. She feels that the caseworker has held up her release by not helping her to identify appropriate housing and other supports, and that her P.O. is “not helpful and has no sympathy.” Another woman was also very concerned about getting appropriate housing. She has no family in Vermont to help. She has been incarcerated since she was a teenager and has no previous experience with parole officers. Before or after landing in jail, women often lost important rights and resources.

I lost everything I owned – house, car, furniture. Had to give my mother power of attorney. I’m barely getting over the anger for what happened. I lost my house because of lack of money.

We all have to live somewhere but a lack of residence is a big issue, access to housing. Big majority of women don’t have a residence to go to so they can’t be released. Probation officers are denying residences.

Another city doesn’t have to take you on their caseload. FSU from one county will call another when they are ready to release. ‘She wants to move to….will you take her on your caseload?’ They can say no. You’re stuck living here because no one wants to supervise you in that county.

Nevertheless, several women who have been educated or who held responsible jobs in the past were able to acknowledge their strengths. One hoped to earn a Masters degree in the future. Another woman, who was interested in opening up a business, mentioned a “Women Helping Women” state grant program. Unlike many of the other women, one inmate is married and knows where she will live when released, though she is unsure about a future job. Another woman will live with her boyfriend’s parents when she gets out of jail, along with her boyfriend and two of her children. Her other children are living with her sister.

One woman articulated several needs:
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- More and better education.
- A connection between education and real work on the outside so that she can become independent and raise her daughter.
- More programming…She sees her ‘ex’ getting more work release and more opportunity to develop skills than she gets.
- Gradual release to the community on weekends.
- “Privilege units.”
- Help in finding housing on the outside.
- Places like the Lund Family Home rather than sending her back to live with her father under house arrest.

Another woman articulated housing and employment issues related to the type of sentencing received.

- They told me I would get out quicker if I plead guilty. I wish I had never done that. I now have 90 days left until I am maxed out. When I plead I lost to get a work release. There are a lot of things I can’t do now because I am considered a violent offender. If I could get a work release then I could cut my time in jail. Now I can’t do that.
- I have to find a place to live. Where am I supposed to find a place to go? Because of the plea I made with simple assault there are now many places that I can’t go.
- There are many roadblocks. I worry about maxing out in 90 days…. My P.O. recommended that I could not get section 8 housing. I don’t know where I could go. You have more options if you get out before you max out.
- You depend on caseworkers here…. They have a lot of power….A caseworker can decide that they won’t let you call a program to look for housing yourself. A caseworker is supposed to work with you one hour a week. I think they should see you more but it is not the way it works. You need help finding housing…. I try to call about apartments but it is hard doing it here without some help.
- You set too many expectations for people. I know people on FSU (Field Supervised Unit). Now you can’t go anywhere. Many of the places you used to be able to go to aren’t available anymore. To be eligible for FSU you need approval. Weapons or drug convictions mean you can’t get certain housing.

One interviewer commented: “The education records of these women are often characterized by failure in the later years of high school, just before dropping out. So, admission to higher levels on the outside after release is really challenging without some provision for evaluating academic potential.” The same interviewer added, “Even for women who are mid-life with children, the uncertainties about housing, income and employment make it very difficult to re-establish family connections, even when their children are housed with the grandparents.”

**Finding difficulty in re-uniting with family and friends**

*Have a better connection with you and your family…. I have no idea how. We get along better when I’m in jail.*
I will have to change people, places and things in order to be successful on the outside. Some of my old friends can be triggers for previous behaviors.

If managing family relationships were difficult before the women were sent to jail, the difficulties were exacerbated by the time they were released. For some, interrupted and/or terminated relationships with children were hard or impossible to reconcile, as the children may now be living with other family members or in foster care. In addition, women recognized that former friends and support networks might not help them develop healthier behaviors and a lifestyle that would keep them out of jail.

One woman, who lost custody of her older child, fears that she will lose custody of her second child as well. Describing herself as the “black sheep” of the family, she described a challenging relationship with her mother who she reports rarely talks with her. Her grandfather died and her grandmother also does not talk to her. Her older brother is on parole and doing “good.” Another woman’s family is divided over her situation, including her mother and stepfather, which she believes will make it hard to reunify family and repair relationships. Still another woman reports concern that her children will not want to be reunited with her but will lobby to stay with her mother and sister. She fears that court battles may ensue.

A woman shared concern about being reunited with her sons. She would prefer to maintain contact with her sister and uncle, whom she sees as supportive, and does not like the fact that her desire to live with her sister has not been approved. Another woman anticipates that probation and parole in her county will put her in a motel with very little money and where she could not see her kids. One teenage inmate, who recently gave birth, had to negotiate visits with the baby who was having health complications. The father of the baby was incarcerated as well. Another woman said her absence has been “really hard” on her daughter, who was two weeks away from returning from residential mental health treatment when her mother was sent to jail.

One inmate, whose sentence is 3-10 years, says her relationships with her daughters are good now, but the long-term effects could be important. She will be absent for most of their teenage years and this could heavily affect their relationships. Their visits are infrequent and monitored, but they do come as often as allowable. Another inmate had two daughters by two different men (both girls are now living with her sister), and two sons by her current boyfriend. These boys are now living with her boyfriend’s parents. When she gets out, she will live with the boyfriend’s parents as well. One woman anticipates moving in with her mother-in-law and another felt fortunate about her family situation: “Some things are going to be easy for me. I have full custody of my kids although my mother has guardianship. I have a house to go home to and a good boyfriend.”

One woman discussed the difficulties in establishing relationships with new partners while on Probation and Parole. “If you’re getting married, once you’re on Probation and Parole – could be nicest guy – they can say, ‘I don’t have anybody in that town who’s
willing to supervise you on that caseload.’ You have to live within the county on a curfew.” A young inmate identified the need for “moral support from family and friends.” She discussed the importance of family, but seemed lost as to how to bring about a positive family experience. One woman expressed concern about finding new friends who would support her in a different way of life. Neither her biological or foster families would be helpful as they lived in other states and she would need to remain in Vermont to get services.

IV. FINDINGS – FOCUS GROUP INTERVIEWS with DEPARTMENT OF CORRECTIONS’ STAFF

This section describes the findings from focus group interviews with approximately 65 DOC staff members. Three interviews were conducted and included 20 – 25 staff per session. This phase of the complete report shares staff perspectives about what they view as the challenges and needs of women who are incarcerated. The findings are organized by three major themes:

1) Women Specific Programs / Services
2) Colliding Policies and Unintended Consequences
3) Community Capacity is Necessary, but Limited

Women Specific Programs / Services

“Women have a lot more pieces – mental health, children, sustainable living.”

Department of Corrections’ staff reported that the needs of women are more challenging when compared to those of a male offender population. While men and women face similar barriers to locating suitable housing, finding adequate financial supports and gaining sustainable employment at a livable wage, women’s experiences with incarceration and subsequent reentry into community living are fraught with additional dynamics such as a:

- presence of children for which they may or may not be the primary caregiver; and
- need for relationships which are supportive, yet have identifiable boundaries.

Literature and research reviewed for this report (see Appendix C) suggests that while men strive for independence, women (who also want independence) achieve it by forming networks and finding supportive relationships.

Further, the prevention and treatment models for women are limited in their ability to address the complexity and depth of issues they face. Women often enter the criminal justice system with multiple mental health challenges that are complicated by substantial drug use and abuse. Staff also spoke about facilities, which were designed to address the needs of men, not women.
The first theme, which describes the distinctions of working with female offenders, includes four sub-themes: a) complex needs of women, b) family supports and contact, c) facilities designed for men, d) health and sanitation / financial supports.

**Complex needs of women**

A primary consideration for female offenders is the presence of children for which they may or may not be the primary caregiver. Staff reported that there are often few spaces where children can spend time with their mothers during incarceration. Staff also talked about the fact that women enter the criminal justice system with significant challenges … “heroin use, they are parents of children...mothers [who have been] using with teens”. During incarceration, they explained, there are times when the children are used to attempt bringing contraband into the facility. In other instances, children are used as a “bargaining chip” for lighter sanctions. These situations demonstrate a level of complexity not often present with male offenders, who generally do not have primary caregiver responsibilities for their children.

Further, the women often seem to have limited family supports. A staff person stated it well; “[we] need to treat women different from men, particularly for transition…there are very few women who have supportive family. During visiting hours we very seldom see the dad.” The need for relationships which are supportive, yet have identifiable boundaries is another area of difference among female and male offenders. Literature and research (see Appendix C) reviewed for this report suggests that while men strive for independence, women (who also want independence) achieve it by forming networks and finding supportive relationships.

Staff also talked about subsequent challenges for women in that they must overcome strict and often unrealistic conditions of parole and probation under community based supervision. For instance, one worker stated, “how [are we supposed] to get a woman living in Morrisville to a program in Barre … and she has kids”. Treatment options in close proximity of these women are often nonexistent. Conditions of release may require that children have a separate bedroom from their mothers. This consideration presents a significant challenge when there is not enough financial support to pay rent for the “luxury” of another bedroom in an apartment.

Both men and women workers talked about the challenges they faced in trying to understand and appropriately respond to the needs and styles of women in crisis. One worker spoke about the apparently greater need of women inmates for “processing” crises than workers experienced with men. In addition, both men and women workers talked about the challenges that male staff have in responding to women in the context of perceived and real threats of sexual harassment.

**Family supports and contact**

Workers identified that the isolation from family, particularly among women placed at the Southeast Correctional Facility, was a particular hardship for the incarcerated women.
Without sufficient supports, women’s transition back into the community was often problematic. In particular, children were most isolated from women in facilities and despite best efforts to provide a family setting in Waterbury, the results of limited family support there are unknown.

Facilities designed for men

For the most part, the facilities where women offenders are housed were originally designed for men. This is particularly true at the Southeast Correctional Facility. There has been, however, little study or review to determine how the physical structures and operating policies that were designed largely for housing men are affecting the women and their prospects for successful transition back into our communities.

Health and sanitation / financial supports

In addition, the health and sanitation needs and financial supports of women are challenging to a system that is experiencing an increase in the rate of female offenders. Staff talked about the fact that women often enter the correctional system in a male facility, where they have no access to a shower or feminine hygiene products for days. They talked about the “time warp” women often experience as they enter a correctional facility on Friday and arrive at Windsor or Waterbury on a Monday, thinking five days instead of the actual two or three days have passed.

As for financial support for many of these women, one worker stated, “a woman can sit for a long time waiting for bail. For example, a woman who needed $200 for bail was in prison for a month…you almost wanted to pass a hat.” Clearly, women’s challenges are complex and range from the presence of children, different health and sanitation needs to financial supports, which are often not available.

Colliding Policies and Unintended Consequences

“*We’re setting them up for failure...*”

Staff members clearly care about their work and show genuine interest in improving the correctional system. Despite their best inclinations, however, staff expressed frustration about a system that often unintentionally works against the success of the women who enter its doors.

The second theme, colliding policies and unintended consequences, describes a system with limited integration and varied results. It includes three sub-themes: a) challenges for staff who work with incarcerated women, b) the revolving door phenomenon, and c) competing paradigms that often conflict and lack integration in a way that appears to be effective.
**Challenges for staff who work with incarcerated women**

Staff discussed the challenges they find in their work with the female offender population. One worker stated, “it’s exhausting to work with women – I’d take 5 males to 1 female”. They talked about the disruptive nature of the “ins and outs” of women being incarcerated. They find competing priorities where one role and work expectation is to make sure a woman is not violating procedures, while what the women appear to need is help transitioning back into the community. There is a sense of loss and of being overwhelmed by work roles and expectations that do not match the complexity and issues faced by this population. One person succinctly stated, “the medical, health and food services available to women are insufficient”. Another spoke of the need for staff support in a system of “ins and outs are driving us crazy”…“conditions of release are unrealistic”. And “[sentencing] requires a lot of supervising”. A report of variances in sanctions imposed in differing regions of the state only adds fuel to a system with the best of intentions, yet delivering inconsistent and limited results in keeping women out of jail.

**Revolving door**

The revolving door nature of women entering, exiting and repeatedly reentering the correctional facilities was a resounding theme among staff. The in and out jail activity encourages short-term relationships, a lack of consistency and sets up a “push/pull” dynamic that is challenging to overcome. Staff reports that there is limited ability to develop a longer-term relationship when women offenders keep coming and going. Many women, they report, go right back to the environment they were in prior to incarceration and re-offend as a result. Many stated that the system needs to continue development of alternatives for women. One reported there is a fear of release and anxiety among many women as they face the potential of living back in the community, and a return to the availability and temptation of drugs. This reasoning seems to indicate a “push/pull” dynamic that is inherent in the design of the correctional system today. Furthermore, women keep coming in the door because of a lack of housing in the community. A staff person summarily talked about the expectations for release being unrealistic and not having enough flexibility for women to transition back into their communities successfully.

**Competing approaches**

Among the themes discovered when talking with staff, the one of competing paradigms involved with the incarceration of women and transition back into their communities was perhaps the loudest. A dynamic tension exists within a system, which seems confused between whether or not it is trying to punish or rehabilitate. Treatment options are often limited due to the short-term nature of sentencing. Extending sentences in some instances to allow for enrollment in support services sometimes is effective, but often is not. Women’s lives are dynamic and fluid; especially when there are children involved. Furthermore, differences in policy and procedures among department of correction and department for children and families do not always support viable treatment planning and case management.
One worker spoke of the judges’ attempt to be lenient and extend one probationary period after another – eventually they note, something happens and the person is faced with a “long minimum and high maximum” [sentence]. A person states, “it’s difficult to hold them [female offenders] accountable”. “New approaches to limit the bar are not working”. Some reported that judges in certain areas of the state are reluctant to put women in jail, while in other areas they are sentencing women to felonies for “writing bad checks”.

Another staff person talked about an obstacle to reunification with women’s children. In order to live with her children, a woman must be able to stay in a different bedroom; however, there are often only one-bedroom apartments available. Furthermore, women who have been incarcerated cannot live together in a community setting. A staff person reported that many women feared living alone and would welcome the opportunity to enter into a short-term living arrangement with another trusted female inmate.

In addition, an inconsistent application of policies and procedures hampers a system that has tried to develop flexibility and options for female offenders. One worker talked about the view that other DOC field offices see some approaches, which provide support or lessen women’s risk of future incarceration and/or harm to self or others, as being an inappropriate use of discretion. As a result, some field office practices are kept hidden to prevent them from prohibition. At the same time, inconsistency in the approaches used to deal with infractions of rules among the field offices’ results in a sense of capriciousness of the system in both worker and inmate views.

Finally, there was a reported tension between DOC and Department for Children and Families (DCF) staff. Access to family records and case management file information is a significant issue for many workers. DCF staff is allowed access to DOC files, but DOC may not access DCF’s. On the one hand, there was some indication that DOC workers feared that DCF might inadvertently misuse data from cases in subsequent family planning. On the other hand, DOC staff efforts to assist with transitioning women back into their communities were limited due to inaccessible information. The Children’s Aid Society and Children’s Upstream Services (CUPS) were identified as potential bridges and sources of information to facilitate better collaboration between these two departments.

To summarize this theme, there appears to be approaches that lack integration in a way that appears to be effective. Staff spoke of a structure that does not support an integrated family perspective or approach, but rather prompts a “siloed” response to their clients’ needs. Again, an inability to share case information with other state entities hampered staffs’ abilities to assist the women. Furthermore, staff was often conflicted about their work roles and responsibilities. Do their loyalties remain with the inmate or the public – who is the client? Dependent upon the individual staff member’s perspective, the answer to this question seemed to translate into service provisions and practices that were inconsistently applied from one area of the state to the next.
Community Capacity is Necessary, but Limited

- “Section 8 transitional housing money requires an address.”

The final theme that emerged from the focus group interviews with staff was recognition that more community capacity is necessary to support the successful reintegration of women into the community. Factors perceived by staff as contributing to the rising rate of female offenders includes three sub-themes: a) limited supports, b) transition barriers, and c) re-entry into the correctional system.

They called for different alternatives to bend the curve in a positive direction. Staff discussion of limitations in the system pointed to the need for the following:

- case management services,
- integrated and interdisciplinary planning and treatment (including substance abuse treatment),
- enhanced continuum of transitional supports and care provisions,
- improved intake and assessment practices, and
- development of mentoring relationships and adoption of perspectives which value social and familial supports.

Limited supports

Staff reported that the transitioning supports needed for women to successfully reintegrate into the community are often not available. And when available, the capacity is generally of a limited nature. They spoke of varied treatment options in different parts of the state. One worker said, “nobody is connecting them”. They talked about the inability of attorneys to respond to women offenders and to the fact that in one region of the state, there is only one public defender. Some talked about communities not wanting transitional housing and most spoke of the need for greater community involvement. “Women need a sense of community”. “Mentoring would be a wonderful approach”.

Transition barriers

One of the key barriers to successful reintegration back into the community is a lack of available housing. Housing is reportedly a “huge issue”. There is an overall lack of transitional housing in the state and affordable housing is often not in good proximity of work, treatment and transportation. Female offenders are stigmatized by landlords who caste them in a demeaning light. “Apartments, housing is a problem”, a worker stated. “The cost of rent is high – Section 8 transitional housing money requires an address”. Additional barriers reported by staff are transportation, availability of work and often, a lack of supportive family networks. In fact, some spoke of the “need to build supportive networks [for these women] that are not [necessarily] families”.

Other transitional barriers identified by staff were:

- The limited availability of medications after release is problematic for many women.
• The limited amount of funds available for women to meet their basic needs, such as food and housing
• The limited effort by the system to assist women with securing employment and transitioning to self-sufficiency

Re-entry into the correctional system

An interesting finding was a report that some women find it “easier to stay in jail”. Workers report that the natural supports and relationships women develop with one another while incarcerated, “sometimes work”. They spoke of women’s fear of release from jail. A worker poignantly stated, “we’re setting them up for failure – get a job, find day care…some say it’s easier in jail”. To do a better job, staff reported “we need to nurture the natural support networks. Women have a lot more pieces – mental health, children, sustainable living”.

To reiterate, the purpose of this study has not been to evaluate the policies in place, but to report what incarcerated women had to say about their experiences with incarceration, and what staff had to say about the systems development to date. A discussion and potential list of recommendations to these findings appear in the following sections.

V. DISCUSSION

Developing alternatives to incarceration: Both staff and inmates questioned that jail was an appropriate place for women, especially for first-time non-violent offenders. This leads one to question whether many of these women need to be incarcerated. Development of alternatives to incarceration would bend the curve most efficiently. This can be accomplished most successfully through integrated and coordinated supports from across state government, the criminal justice system, law enforcement and local communities. A collaborative model of policy development will be required to realize this goal.

Addressing issues contributing to substance abuse: One interviewer commented, “The press of addiction is enormous. The level of intervention needed to overcome addiction is far more than the system is currently designed to provide.” Treating addictions alone, however, is not enough without addressing the other aspects of these women’s lives, such as families lacking boundaries and stability and engaging in abusive behavior, loss of connections with family, and unmet needs for education, work and housing. Here again, multi-faceted approaches to substance abuse prevention involve not only individuals and families, but also various community sectors as well as statewide and national collaborations. In other words, substance abuse prevention and treatment needs to address individual and family vulnerability by providing education, treatment, and recovery support, but it also needs to address broader contributing factors such as laws, media influences, and social norms; as many communities are already doing.
It is interesting to note from the interview data, that drinking or drug use often began after a significant family event such as a birth of a child, a suicide, or a death of a parent or stepparent. This provides some evidence that shifts in the relationship system may be linked to the tendency toward addiction. For example, one of the women said her mother started drinking again after her stepfather committed suicide. She herself started using drugs at 20 years of age after the birth of her son. Unfortunately, while drugs may ease the pain of harsh realities, they eventually create more hardships for these women and become a self-destructive coping mechanism. They also do not effectively help them negotiate life’s challenges in constructive ways.

**Getting new perspectives on the phenomenon of incarcerated women:** It is hard for the outside observer to get past assumptions about incarceration, criminal behavior, and substance abuse to begin to decipher what it means when a woman says, “There is no light at the end of the tunnel.” In some ways, it would require traveling through a ‘time tunnel’ of different experiences, life histories, chronic pressures, and insufficient coping methods that have likely evolved over generations.

The findings offer a springboard for thinking about what brings women into the corrections system and what keeps the revolving door phenomenon active. Answers may emerge from thoughtful and sustained thinking about questions such as: What theoretical frameworks and assumptions underlie the DOC system? For example, to what extent does the system relate from a developmental framework, a behaviorism model or a family systems perspective? Why do we think that incarcerating women is actually helpful? What are the links between 1) the cycle of experiencing social, emotional and physical isolation and violence; 2) stress and its influence on criminal behavior; and 3) the tendency toward criminal and law-breaking behavior, aggression and various kinds of abuse, including substance abuse? In addition, a broad-minded perspective to the process under investigation would encompass not only the individual and the family, but also the community and the larger social context in which vulnerability to incarceration evolves.

The depression and hopelessness experienced by the women are exacerbated by drug use, lack of family connection, prison conditions, and societal stigma as well as multiple challenges of finding adequate resources for life outside of prison (for themselves and for their children) such as jobs, housing, education, and transportation. There needs to be a way of operating that reduces stigma, keeps the public and the inmates safe, reduces anxiety and stress which lead to tunnel vision, and informs the coaching of women and their family members on life skills, job skills, transition, relationships, parenting, stress management, and family systems. There needs to be ‘a light at the end of the tunnel’ for these women.

**Need for stronger supports geared toward women’s unique situations:** There are many parallels between staff and inmate perspectives. Both did not appear to be convinced that jail was an appropriate place for many of these women. These women at risk generally do not have much assistance from family or the community while having many demands, such as raising children. They need much stronger supports to overcome addictions, learn important life skills, and re-enter the community than they are receiving in the current
system. In addition, preventative measures need to address what contributes to women entering jail in the first place. Conditions of community based supervision are often so restrictive that a woman cannot hope to meet them. Like a revolving door, many find themselves back in prison soon after release.

Another barrier involves the community, made up of citizens with varying fears, prejudices, and legitimate concerns about criminal and unlawful behavior, who are not necessarily receptive to providing housing, jobs, or educational opportunities to women who have been incarcerated or who engage in behaviors that lead to incarceration. If communities are to begin contributing to prevention of the cycle of women’s incarceration, it will be important for community members to gain awareness of their role in the broader social context that leaves women vulnerable to failing as independent citizens. At the same time, community members will need to have their concerns heard and addressed.

Tapping into the combined wisdom of the community will likely generate opportunities that allow a woman to be successful and able to lead productive lives outside of jail. In addition, local communities may be able to mobilize resources in other ways to prevent women from being incarcerated in the first place. Collaboration between AHS field service directors and regional partnerships, incarcerated women’s advocates, and stakeholders from corrections, the judiciary, the state’s attorneys, the public defenders, and law enforcement will be central to the success of all of these community efforts. Public safety needs to be continuously protected as these improvements are implemented.

*Strengthening families and other social networks so they can be part of the solution:* How can research, policy, and practice encourage the strengthening of family, friendship, and mentoring connections so they can be sustainable and supportive in a woman’s life? For example, families, whether functioning well or not, exert a great influence on the lives of incarcerated women. One theory associated with the removal of children from incarcerated women is the thought that this practice provides an opportunity to give children a fresh start. The long-term ramifications of this approach, however, are devastating for many of the mothers and the children. It is also expensive.

Data from the interviews showed that women’s dreams and frustrations were linked to family. One of the dreams each woman identified as most important was to have a better family life. At the same time, the women seemed unable to bring this about. They often entered into abusive relationships with others who were also struggling with addictions. At times, the women mistreated their own family members. In some cases, families seemed at a loss for how to support their incarcerated members. For example, one family sends money to their incarcerated daughter, but does not know how to help otherwise. Families, including the incarcerated women who are daughters, wives, partners, mothers, and grandmothers, need a better understanding of how to break the cycle of abuse and addiction and adopt better ways of relating to others and managing themselves. This calls for an integrated response such as a collaborative case management model that views family systems as part of the solution. When families are not available, friendship networks and mentors could be cultivated to support and reduce risk for these women.
In addition, opportunities for visitation are limited and not guided by the developmental needs of children. Women who are incarcerated when they give birth do not have the opportunity to bond with infants in ways that might be developmentally appropriate. When these children begin encountering the challenges of adolescence they lack the stable relationship with the primary parent if she is incarcerated. When the family is reunited the problems are still there. There is no systemic support for learning new parenting skills. More coordinated efforts by the system are needed on behalf of families and children. For example, information shared between departments servicing families could facilitate necessary connections and services.

Allowing the institution flexibility and resources for implementing gender-specific solutions: How can the methods of assisting these women to break the cycle of incarceration give corrections staff enough flexibility to respond to the unique needs of women with an appropriate amount of supports and boundaries? For example, how can the corrections system move away from overcompensating for the lack of boundaries in the women’s lives while still holding them accountable for their behavior? Better options are needed than removing individuals from their families and their communities for a period of time. For most of the women who have children, the effects of incarceration on the next generation may be deleterious and profound, especially when mothers are absent during critical stages of development in their children’s lives.

VI. RECOMMENDATIONS

This study provides significant insight into the multiple and complex challenges involved with the current design of the criminal justice system for incarcerating women. There is no single solution that will meet the challenges described herein. There are, however, several approaches to consider, which if developed in a coordinated fashion, may begin to “bend the curve” in a positive direction on the rate of incarceration of women in Vermont.

The suggestions below are based on data collected from this study and current research. The list is not intended to be hierarchical or prioritized and does not suggest one recommendation as being more important than another.

Alternative Criminal Justice System Responses
- Adopt collaborative intervention models to devise solutions aimed at bending the curve, which include all sectors of the criminal justice system
  - Ensure a functional level of mutual accountability for each sector’s contribution and role in the collaborative process
- Divert non-violent women from entering correctional facilities
  - Many non-violent women could potentially be supervised in a community setting if alterations in current sentencing practices were proposed and adopted
  - Assure that gender-specific issues are addressed
• Include judiciary, prosecution, law enforcement and criminal defense in formulating alternative policies and procedures, and sentencing practices, which support a better coordinated “interface” with the correctional, health, social and family service areas of support

Alternative Correctional System Responses
• Work with community partners to develop non-incarcerative alternatives which support women’s relational needs and familial connections in the community
• Deliver gender-based staff training, which includes developmental and family systems perspectives and involves stakeholders from state government and the criminal justice system
• Provide women with livable wage job training during their period of incarceration
• Increase options for education on parenting and strengthening family relationships
• Encourage family interaction during incarceration
• Consider gender-specific adjustments to prison facilities (use objective data to devise solutions)

Integrated / Collaborative Case Management
• Support integrated case planning and expect collaborative relationships will be maintained between Department of Corrections and Department for Children & Families staff
• Utilize a “team approach” which strengthens families and other social networks
• Train staff in interdisciplinary treatment practices
• Support AHS systemic reform which allows for a holistic, strengths-based and results oriented view of children, families and individuals and provides for the coordinated delivery of easily accessible services for women, as mandated by the criminal justice system
• Develop transitional supports which include a trained volunteer community team to assist with successful reentry into the community

Development of Community Supports
• Provide mentors for women in the facilities and in the community
• Consider longer-term drug treatment approaches
• Provide transitional housing (e.g. Northern Lights, halfway houses)
• Develop additional programs which support job skill development
• Increase job placement and educational opportunities
• Provide educational opportunities for reducing the stigma associated with incarceration
• Provide additional familial supports and self-empowerment (e.g. Rosie’s Girls) to reduce the vulnerabilities of girls at or before age 11, a critical developmental period
• Integrate community treatment interventions – currently, there are multiple, separated services which may be a “set-up” for women to fail
POSSIBILITIES FOR FUTURE RESEARCH TO EVALUATE

Potential strategies to guide future research on incarcerated women may include:

- Analyze current sentencing practices to assist with development of alternatives to incarceration.

- Identify and evaluate alternatives to incarceration. Assess outcomes in the context of program evaluations of new services and supports (e.g. Northern Lights, Tapestry II, community based DETER).

- Track the life course of the women who maintain contact with children and extended family while incarcerated and those who do not. This might provide guidance concerning the provision of family approaches and supports in the future.

- Study those women who are staying out of prison, and the factors that contributed to their success.

- Design and complete a program evaluation study about the effectiveness of the Incarcerated Women’s Initiative.

- Evaluate collaborative systems of care models, which include community partnerships and are structured to hold all participants mutually accountable for their contributions and role.

Before embarking on the studies suggested above, it would be important to explore the literature on related research projects that have already been conducted. A broad view is recommended, including multiple disciplines that are interested in human behavior, families, and the social environment.
VII. APPENDICES
Appendix A

Mapping Strategy Interview Questions*: Incarcerated Women

60-90 Minute Interviews

**History:** If you were making a movie about yourself what would you include?

**Questions** – Education, Housing, Health, Employment History, Children, Family

*Examples:* When you were a kid who did you live with?
How did you come to be here (in prison)?
Tell me about your education.
What kind of housing have you lived in?
How has your health been over the years?
What kind of jobs have you had?
Describe your family.

**Dreams:** Tell me about some of your hopes and dreams?

**Questions** – Education, Housing, Health, Employment, Children, Family

*Examples:* What do you want the first thing you do when you get out to be?
What further education would you like to get?
What kind of housing would you like?
What do you dream about regarding your health?
What kind of job would you like to have?
What would be the best family situation for you in the future?

**Fears:** What stands in the way of your hopes and dreams?

**Questions**- What are some of the specific things that worry you right now?

*Examples:* What would keep you from getting the education you want?
What would keep you from getting the kind of housing you want?
What would keep you from getting healthier?
What would keep you from getting the kind of job you want?
What would prevent you from having the kind of family you want?

**Day-to-Day:** You’ve told me about your history, could you also tell me about who you are now and what has been particularly helpful to you here (in prison)?

**Questions:** Please tell me something that you’re really good at.
What has been helpful for you in prison?

**Needs:** What will your needs be like when you leave prison?

**Questions:** Think about and please share what you want your life to be like when you are released and what you will need to stay out of prison.
What do you want policy makers (like the Governor) to know?
If you met someone like you were before you went to prison, what advice would you give them?

Appendix B

Staff Focus Group Questions

1. History: As you think about the problems of ‘bending the curve’ towards fewer incarcerated women…both initial and repeat…What’s been the history of attempts to solve these problems in your view?

2. Day to Day: What’s it like for you on a daily basis? What do you notice about the women who are incarcerated? What do you deal with on a daily basis?

3. Prospects for Success: When you think about the prospects for women who are now and have been incarcerated, what would improve their chances of:
   a) not re-offending and becoming incarcerated again or,
   b) not being returned to incarceration for violation of probation or parole?

4. Are there things that could be done to improve their chances of success in any of the following four (or more) circumstances?
   a) Arrest?
   b) Adjudication?
   c) Incarceration?
   d) Release to the community?
   e) Relapse?
   f) Losing residence?
   g) Other?

5. Any other thoughts you have about:
   a) improving the chances for these women to either not offend or not re-offend?
   b) Your relationship with the women

6. Any thing else not covered elsewhere?
Appendix C

INCARCERATED WOMEN’S INITIATIVE PROJECT

LITERATURE REVIEW

Initial Report, Submitted August 27, 2006
by
Colleen T. MacKinnon, Sarah Bolton, Jason Gorczyk & Gina Krol

To the IWI research team,
University of Vermont

Revised Literature Review, Submitted January 30, 2007
by
Colleen T. MacKinnon, Ed.D.

University of Vermont
Vermont Research Partnership
LITERATURE REVIEW

Introduction

Since the mid-1970s, state and federal corrections officials, researchers, and women’s prisons activists have continued to raise awareness of gender-specific issues in the criminal justice system. While detaining convicted criminal offenders in an organized institutional setting remains a common sentencing option, the criminal justice system also draws on a range of institutional and community based programs designed to help women offenders cultivate skills and behaviors needed for independent living. This range of options demonstrate sometimes conflicting beliefs about the role of women’s issues in regards to criminal activity and suitable legal responses (Hall, 2004, pp.28-29).

For example, depending on the nature of a crime and mitigating circumstances, sanctions might deliver punishment, provide deterrence from future criminal activity, incapacitate dangerous individuals, impart retribution, or offer rehabilitating strategies. Sentencing guidelines typically match sanctions to crimes. However, because female offenders’ experiences often present gender-specific conditions, our society’s sometimes conflicting beliefs play into legal decisions about ways to restore justice. In the U.S. General Accountability Office’s (1979) first organized study of female offenders, the Comptroller General’s Report to Congress emphasized this point and advised that ambivalence about legal responses to criminal offenses presents an obstacle to the development of strategies for improvements targeted specifically for women. Authors of the report noted,

Criminal justice programming has been hampered by the lack of a clear-cut goal for corrections. Little agreement exists regarding the purpose of corrections: is it to punish, to separate an offender from society, to serve as an example, or to provide opportunities for change? (p. 67)

Because research indicates the role of gender in predicting a woman’s responses to various administrative, punitive and rehabilitative strategies, this review of research literature aims to provide context for current and future research on Vermont programs for incarcerated women. For example, Vermont data on kinship situations parallels national data that indicate the majority of women in prison are mothers and that at the time of arrest, most were the primary caregiver for their children. When women go to prison, sanctions implicate children in often complex ways. In a gender-responsive system, sentencing options might include detention as well as programs that include family members in rehabilitative services. In addition to research implicating kinship experiences, this literature review also presents research literature that helps set an historical context for current practices and points to the complexity of gender-responsive programming, including the following subtopics:

♦ History of gender-specific programs,
♦ Education & job training
♦ Kinship issues & motherhood
♦ Staff training and professional development
♦ Transitional programs
♦ Security and institutional management
Health and wellness

History of Gender-Specific Programming

Rafter (1999) identified three major turning points in the evolution of public policy related to women offenders: First, during the 1820s the first U.S. penitentiaries housed both male and female criminal offenders indiscriminately, and in often the same quarters, for the purpose of imposing behavioral changes through extended time for reflection, hard labor, and to provide daily routines that supported a disciplined approach to living. The second turning point noted by Rafter occurred in the 1870s when former abolitionists began advocating for social policies that attended to individual needs, which translated into skill training and flexible sentencing guidelines. For women, training often correlated with domestic labor and the teaching of traditional skill sets such as sewing. Rafter asserted that the third major turning point occurred in the 1970s when public sentiment initiated a wave of legislative reforms intended to impose harsher penalties on criminal activity, which coincided with civil rights activism that demanded parity in sentencing, regardless of race or gender. A dominant ideology of anti-rehabilitation emerged, and combined with an ironic turn at gender equity in the distribution of punishment, incarceration rates began to climb for both male and female offenders leading to prison over-crowding in many jurisdictions (pp.13-14).

As sentencing guidelines led to greater numbers of incarcerated women in U.S. prisons, allegations of inequitable treatment of female offenders also began to emerge. Social consciousness among women’s advocates combined with increasing detention costs captured the attention of stakeholders who began examining the particular needs and experiences of female offenders, many of whom were marginalized by race, class, gender, and minority status. To initiate legislative responses to a growing problem, numerous advocates brought civil suits forward in local, state, and federal jurisdictions in the 1970s. A series of court cases individually challenged the constitutionality of separate programs and facilities for women, which brought the issue of gender-based biases in the criminal justice system to the political mainstream. One after another, state and federal courts held that women’s programs and facilities must provide parity. Judicial rulings challenged policy-makers to direct attention towards mitigating long-standing practices of inadequate housing, training, employment opportunities, access to health services, and access to transitional services such as work furlough programs. [See e.g., Glover v. Johnson (1979); Barefield v. Leach (1974); Grosso v. Lally (1977); Molar v. Gates (1979); Estelle v. Gamble (1976); Todaro v. Ward (1977); Forts v. Ward (1977) as cited in GAO, 1980, pp. 8-10].

These court cases highlighted discrepancies that had emerged due in part to the smaller numbers of women in the corrections system. With women making up less than five percent of the population under correctional supervision for fiscal year 1978, the relatively small numbers of women under corrections supervision presented challenges for a system that had been driven by efforts to achieve economies of scale for dealing with a predominantly male offender population, as well as by gender stereo-types. The 1980 GAO report noted,
From data available to us... women offenders are not receiving equitable opportunities in facilities, programs, services, and industries. The differences were due to the relatively small number of women confined by each jurisdiction and the cost per inmate to provide women the same type and variety of programs and services as those provided men. The attitudes of corrections' officials also differs toward women. Officials seem to maintain a traditional view toward the training programs and other vocational needs of women offenders. (p. 22)

Authors of the 1980 GAO report asserted that streamlining administrative procedures combined with fiscal limitations led to facilities planning that grouped individuals based primarily on geographic jurisdiction and by level of assumed security risk. Because the majority of offenders were male, a range of facilities and program services could often be provided in close proximity to their home communities. For women, however, the smaller numbers of female offenders led fiscally-minded administrators to group women-representing a range of security risks--into single facilities to streamline supervision activities. Contrary to most male offenders' placements, women's placements often situated women in settings far from their home communities and, therefore, far from children, kinship networks, and an integrated system of transitional services. Noting these and accompanying disparities, both class-action and individual suits identified a range of deficiencies in the corrections system related to facilities, medical care, job training, and other issues.

These court cases forced legislative responses and augmented knowledge gained from feminist research of the 1970s that helped break-down gendered stereotypes. Increasingly, corrections officials began speaking out in favor of changes (as cited in Morash, Bynum, & Koons, 1998, p. 2). A National Institute of Justice survey conducted in 1993 and 1994 illuminated administrators’ and other officials’ perspectives on issues unique to women involved in the criminal justice system, formulating specific issues that demanded further attention. For example, although incarcerated men share similar challenges--such as staying connected to family or accessing job training programs--a disproportionate number of women in prison have been victims of abuse as compared to their male counterparts. In addition, women disproportionately provide the primary caregiver role for their children (p. 1). Co-occurring problems such as a drug and other substance addiction, a diminished sense of self-esteem, and/or a mental illness challenge support networks (Smith & Young, 2003). When all of these issues were brought to the table, women generally seemed to respond to like programs in ways that differed from their male counterparts.

Two decades after the 1980 Comptroller General’s Report to Congress, and buoyed by research that supported the assumption that “women in the criminal justice system have some needs that are quite different from men’s”, the U.S. Department of Justice (1998) sponsored a National Symposium on Women Offenders, marking the “first major discussion of women offender issues in the Department’s history” (p. 3). More than 300 policy-makers, researchers, administrators, and other criminal justice experts assembled in Washington, D.C. to review historical groundings for current practices, show-case promising programs, and to share research. Prior to adjourning, participants articulated
action agendas for their individual jurisdictions, including Vermont representatives who identified the following priorities as noted in the conference report:

♦ Focus work on . . . establishing local, multi-disciplinary teams which develop and implement wrap-around services for women offenders.
♦ Develop service demonstration projects focused on women’s transition from correctional facilities to the community.
♦ Work more with women in their home communities.
♦ Make it possible for some of the resources devoted to women and family issues to be used for comprehensive, cross-agency programs. (p. 84)

When the Comptroller General’s first report on characteristics of women offenders was issued to Congress in 1979, women offenders comprised approximately 12,700 of 300,000 inmates (cited in GAO, p. 1). By the time of the U.S. Department of Justice sponsored the 1998 National Symposium of Women Offenders, Bureau of Justice Statistics reported that the U.S. female prison population had reached about 79,000 and “nearly 1 million [women] were under correctional supervision” (p. 3). By 2004, that population totaled over 96,000 (Frost, Greene & Pranis, 2006, p. 31), still comprising less than 10 per cent of the total prison population yet demonstrating a marked increase from previous counts.

Although women still represent a small percentage of the U.S. prison population, the increasing numbers of women offenders has affected budget development processes due to accompanying demands for improved housing options and types of services. Increases in budget allocations, along with improved understanding of social issues affecting women has caused administrators, legislators, and prison activists to consider changes in current practices and strategies. Regardless of one’s philosophical beliefs about the role of legal remedies for convicted offenders, increases in social costs and fiscal obligations point to the need to find ways to reverse trends.

Advocates for reforms assert that effective programs for women must operate within a gender-based framework, which draws on the premise that socialization plays a significant role in a woman’s decision-making, which might lead to criminal activity (Acker, 2006; Bloom, Owen & Covington, 2004; Chesney-Lind & Pasko, 2003; Heitfield & Simon, 2002). Putting theory into practices also requires officials within the criminal justice system to develop staff training and programmatic criteria that incorporate expectations for gender-specific emotional and behavioral responses. Encompassing a range of strategies and attitudes, Bloom and Covington (2002) defined gender-responsiveness in the criminal justice system, providing a framework for analyzing programs.

Gender-responsive means creating an environment through site selection, staff selection, program development, content, and material that reflects an understanding of the realities of women’s lives and addresses the issues of the participants. Gender-responsive approaches are multidimensional and are based on theoretical perspectives that acknowledge women’s pathways into the criminal justice system. These approaches address social (e.g., poverty, race, class, and gender inequality) and cultural factors, as well as therapeutic interventions. These
interventions address issues such as abuse, violence, family relationships, substance abuse, and co-occurring disorders. They provide a strength-based approach to treatment and skill building. The emphasis is on self-efficacy. (cited in Bloom, Owen & Covington, 2005, p. 2)

While not all women will respond in the same ways to programs, Bloom, Owen and Covington advise that the preponderance of shared characteristics and histories among female offenders indicates a need to adjust practices accordingly.

**Educational Issues**

Highlighting a key component of gender-responsive strategies, various academics and researchers have argued that the increasing numbers of women entering U.S. jails and prisons is sustained by socioeconomic factors implicating employment, housing, health care, family environments, and education (Baird, 1999; Brewster & Sharp, 2002; Fine et al., 2001; McCorkel, 2004; Poehlman, 2005; Smith & Young, 2003; Torre & Fine, 2005). The majority of incarcerated women have been convicted of non-violent crimes such as fraud or drug-related offenses, and, therefore, a woman’s socioeconomic status might contribute to criminal activity (Luke, 2002). To mitigate problems associated with economic disadvantages women need strategies for reversing economic dependency on others. Based on their study of educational programs in Oklahoma, Brewster and Sharp suggested that policy-makers should evaluate the role of specific program features designed with the intention that their use will reduce rates of recidivism and evaluate these features for effectiveness. With myriad needs presented by women offenders, educational and other support programs can vary significantly from one context to another, and in this section descriptions of a few programs illustrate a range of specific strategies explored by various researchers.

For many women, the story of how they ended up under supervision of a corrections system began during their adolescence, especially if they had learning disabilities (Ochoa & Eckes, 2005, p. 23). In a study of disabilities among urban youth in correctional facilities, Ochoa and Eckes pointed out that “students with disabilities in correctional facilities represent 30% to 70% of the total incarcerated student population” (p. 22). In addition, Ochoa and Eckes argued that even though the majority of students entering a correctional facility have been identified with a learning disability and received services in their public schools, teachers of incarcerated youth often have limited access to prior records. Inadequate communication channels often limit service delivery even though incarcerated youth have full legal rights to the same types of services they received prior to incarceration.

For those who go undiagnosed, effects of not receiving services can present difficulties that emerge in sometimes non-social or self-destructive ways, as demonstrated by Sanger, Moore-Brown, Montgomery, Rezac and Keller’s (2003) study of incarcerated adolescent females with language difficulties. Participants’ described school histories exemplified by misunderstanding directions, poor vocabulary skills, and cultural incongruity with their peers. Their difficulty in reading and comprehension made it difficult for them to access
the curriculum and by the time the study’s participants had reached middle school they reported that they had disengaged with academic subject matter. In addition, according to self-reports, these girls typically viewed themselves through the lens of others’ opinions, often resulting in a negative self-image. Sanger et al. asserted that because many never received an early diagnosis of a learning disability, many study participants missed opportunities to develop adaptive strategies to assure success in academic and other environments (p. 477).

Research literature appears to universally support the notion that most types of educational programs provide some benefits to incarcerated women and help prepare them for productive lives when they are released. These programs are wide-ranging, from parenting classes at the Correctional Facility for Women at Shakopee in Minnesota (Luke, 2002) to a college-in-prison program at Bedford Hills Correctional Facility in New York (Fine et al., 2001; Torre & Fine, 2005). Brewster and Sharp (2002) reported that completing a GED correlates with lower recidivism rates; others such as Baird (1999) considered the role of promoting critical-thinking by studying narratives of marginalized women; and Kilgore (2001) explored curriculum that involves empathic practices.

Successful programs seemed to embrace four commonalities: First, women often participated by choice, which firmly established personal investment in the process. Second, participants tended to complete program requirements and some research data suggests that the event of program completion provided a transforming experience (Fine et al., 2001). Third, programs often brought into the programs a range of non-corrective volunteers and professionals, creating a community of learners who could also provide women with access to role models and mentors. Finally, delivery of rigorous programs encouraged students to develop critical-thinking and problem-solving skills that might help prepare women offenders for improved decision-making skills upon release.

Collectively, case studies of apparently successful programs for female offenders point to the need for integrating traditional job-skills training with other programs such as parenting supports and educational programs that can help women critically examine their lives in relation to social structures framed by race, class, and gender issues. While many promising programs seem to exist, Brewster and Sharp (2002) cautioned that “simply providing ‘educational experiences’ may have little if any effect on the post-release lives of offenders” (p. 317). Instead, the “context and mechanisms of educational programs” (Duguid et al., 1996, as cited in Brewster & Sharp, p. 317) must be examined in relation to the specific needs of incarcerated individuals. For example, Brewster and Sharp noted that programs must provide the type of training suited to an individual’s temperament, interests, or the development of practical skills that could be applied towards better paying jobs after release (p. 317). With a lack of marketable skills and unrealistic expectations for finding jobs, women’s economic vulnerabilities might leave them at risk for re-offending.

In another study of educational programs for female offenders, Torre and Fine (2005) investigated personal and social benefits of extending higher education opportunities in
prison. Torre and Fine were interested in better understanding the repercussions of legislative acts that restricted access to awards for criminal offenders such as the 1994 Violent Crime Control and Law Enforcement Act, which denied access to federal assistance for higher education tuition. While some legislative acts essentially closed access to higher education for a predominately poor offender population, Torre and Fine hypothesized that providing higher education opportunities for female offenders could lead to social benefits. For example, higher education for incarcerated women could help develop critical-thinking skills, which they speculated could lead to improved decision-making; and for those completing a program of study, enhanced academic credentials could lead to improved employability thus reducing socioeconomic stresses.

To explore the question of whether or not college for prison inmates had societal merit, Torre and Fine (2005) conducted a 4-year action-research study of the role of college education for female prison inmates. Initiated and sustained through volunteer efforts, stakeholders included faculty and staff from a consortium of private colleges and universities, prison administrators, community members, and inmate volunteers; and all stakeholders reported accounts of success. Both qualitative and quantitative measures indicated that for participants of the study, college in prison led to improved social interactions and reduced rates of recidivism.

Women without college in prison were almost four times more likely to be returned to custody than those who participate in college while in prison. . . . Further, women without college in prison were 18 times more likely to violate parole than women with any college. (p. 579)

Torre and Fine (2005) suggested the core elements of education--such as self-reflection, critique, and inquiry--enabled a transformed sense of self and the experience encouraged participating women to realize their capacities to create new options for themselves. In addition they noted the additional benefit of modeling pro-social behaviors for their children: women who achieved personal goals of attaining higher education degrees demonstrated to their children the value of perseverance, possibility, and hard work.

**Offender and Mother**

Given that 75% to 80% of incarcerated women in the U.S. have at least one dependent child younger than eight years old (as cited in Luke, 2002, p. 932), programs that help mothers improve their own educational levels might implicate next-generational issues as well (Ehrensaft, Khashu, Ross & Wamsley, 2003; Ross, Khashu & Wamsley, 2004). Maternal incarceration places children at risk for compromised intellectual and emotional development due to issues associated with enforced separation. As Luke noted, “mothers do not stop being mothers because they have been convicted of acts that society finds abhorrent. And . . . very few incarcerated mothers are in prison for crimes of child abuse or neglect” (p. 936). Drawing on other research literature related to maternal incarceration, Luke identified a variety of personally and socially destructive risks for children of incarcerated women including (a) behavioral and emotional problems, (b) abuse of chemicals at a young age, (c) early sexual activity, (d) teen pregnancy, (e) truancy, and (f) juvenile delinquency.
In addition, Luke (2002) noted that children of incarcerated parents are up to six times more likely to be incarcerated at some time in their lives than are children of parents not involved in the criminal justice system (p. 933). Drawing on the assumption that “a child’s relationship with his or her mother is among the strongest protective factors in the life of a child” (p. 935), programs described in Luke’s case studies ensure that mothers are able to maintain close relationships with their children. As noted by Luke, program objectives included (a) extended visitations, (b) parenting skills classes, and (c) opportunities for reflective assessment of parenting practices (p. 937). Luke asserted the potential benefits of such programs reach beyond initial objectives for “previous research indicates that a positive relationship with a parent is the most important form of resilience that protects children from the kinds of negative outcomes that are common among children of incarcerated mothers” (p. 944).

Women and children affected by incarceration live a vulnerable existence and those who enter the corrections system are typically poorly educated, single mothers from communities of color who live in poverty. Women who struggle to be the sole financial and emotional providers for their children can benefit from an educational program that includes (a) developing critical-thinking skills and problem-solving abilities, (b) enhancing self-esteem, and (c) helping improve decision-making abilities. Additionally, women offenders who participate in educational programs provide role models for their children, possibly directly affecting later generations. As these studies suggest, helping female offenders work through the initial tribulations associated with incarceration and coming out on the other side with a renewed sense of purpose certainly implicates the skills of knowledgeable and supportive staff, which is explored in the next section.

**Staff Training and Professional Development**

In response to the increased rate of female incarceration and offenders under criminal justice supervision, the National Institute of Corrections (NIC) “undertook a three-year project—titled Gender- Responsive Strategies: Research, Practice, and Guiding Principles for Women Offenders—to collect and summarize multidisciplinary research and practitioner expertise on gender-responsive strategies” (Bloom, Owen & Covington, 2005, p. 1). The establishment of this series of studies and reports was intended to help develop common women-centered policies and procedures for U.S. correctional institutions. Based on theoretical analyses and research evidence, the NIC has continued to provide a clearinghouse for analyzing programming efficacy; and one of the key findings from a range of studies is the importance of staff training, particularly for the selection and training of correctional officers.

Correctional officers represent the largest group of correctional staff and they interact with offenders the most on a day-to-day basis. Tellier and Serin (2001) contended that “staff selection, training, support, and retention are as important to corrections as the choice of assessment instruments, programming modules, and supervision strategy” (p.174). Furthermore, they suggested that well-trained, knowledgeable, and committed staff can enhance good programming, yet inadequately prepared staff can diminish the
effectiveness of even the best program designs; good programs cannot work without good staff. For successful women-centered corrections programs, correctional officers require training and ongoing professional development specific to the needs of female offenders. As part of the NIC’s initiative to improve correctional practices, Bloom, Owen and Covington (2003) developed critical questions to guide staff training and the development of women-centered programs. These questions provide a framework for analyzing key components of programs and include guidelines for developing understanding of cultural, familial, prior trauma, and other gender-specific issues.

In addition to practical knowledge related to day to day institutional management, many programs also attended to the importance of staff attitudes (Blanchette, 2000; Britton, 1999; Garland, 2002; McCorkel, 2003; Storhr, Hemmens, Kifer & Schoeler, 2000; Whitaker, 2000). The impact of staff attitudes on treatment, and staff roles in motivating offenders for treatment obviously straddles gender divides. Guiding principles for any effective program include providing participants the opportunity for developing an understanding of cultural and social influences, as well as developing empowering strategies that set conditions for success upon release. To meet these goals staff must help create a respectful and supportive environment that both assures participants hold themselves accountable for behaviors and also values the potential for making responsible choices. However, due to women’s prior histories and patterns of relational experiences women might present responses to similar programs in ways unique to their socialized gendered roles. Bloom (1998) asserted that, “it is often difficult to understand how effective women-specific services differ from effective services in general” (p.32), which highlights a need for outcome-based research specific to women offenders.

Literature related to staff training seems to draw heavily on research related to women’s pathways into the criminal justice system, with authors frequently noting the prevalence of female offenders who share a common history of being victims of abuse and oppression (Freudenberg, 2002; Messina, Burdon, Hagopian & Pendergast, 2006). Kristiansen (1997) suggested that the system itself might actually contribute significantly to the revictimization of women. For example, because most prison operations include procedures such as pat-searches, the standard practices for ensuring security and safety can cause vulnerable women to relive their abusive experiences (Bill, 1998). Bloom, Owen and Covington (2004) reported that during interviews with correctional staff, staff often expressed concern about these practices in light of their understanding of the trauma it might cause.

[Administrators and correctional staff noted] that they have to manage women offenders based on policies and procedures developed for the male offender. They also reported difficulties in modifying these policies in order to develop a more appropriate and effective response to women’s behaviors in the correctional environment. (p.41)

Because of the sheer number of male offenders, many policies developed in response to assumptions of male offenders’ needs. However, as already noted, women’s histories suggest a necessity for gender-sensitive guidelines. According to Bloom, Owen and Covington (2003), “specialized training for those working with female offenders is
justified, based on the real differences between male and female offenders along three dimensions: demographics, needs, and personalities” (p.23). Beginning with staff selection processes, training that also encompasses a focus on staff attitudes towards female offenders would help address these specific needs (MacDonald, 2001).

In recognition of the dearth of research concerning correctional officers in comparison to research available on particular programs and offender characteristics, Dowden and Andrews (2004) recommended,

Correctional administrators and staff members involved in the design and application of correctional interventions should clearly focus more strongly on staff issues in the future. Attention to this critical detail will substantially increase the therapeutic potential of correctional treatment programs. (p. 212)

As incarceration rates for women continue to rise, and as the shift towards women-centered programming becomes more acute, research literature points to a need for evaluating training programs for gender-specificity as well as providing evaluative research to identify areas for improvement. In addition, promising strategies invariably require coordination of multiple services, which is explore in the following section.

**Coordinated Services**

The rate of incarceration among women continues to grow in part due to policies implemented during the 1990s that impose mandatory sentencing guidelines for drug offenses and that limit access to government services (Bloom, Owen & Covington, 2004; Covington, 2001; Jacobs, 2001; Smith & Young, 2003). From 1986 to 1996 the number of women in state prisons incarcerated for drug-related crimes increased by 888 percent (Mauer, Potier & Wolf, 2000, as cited in Covington, p. 85). For example, the Temporary Assistance to Needy Families welfare reform legislation of 1996, the Higher Education Act of 1998, and the Adoption and Safe Families Act of 1997 each present multiple negative effects on the growing population of incarcerated women due to women’s vulnerabilities and common characteristics, i.e., convictions for non-violent acts; living in poverty and receiving public assistance; undereducated and unskilled; disproportionately comprised of minorities; and single-parenting children under the age of 18 years (Covington, 2001; Hale, 2001; Needels, James-Burdumy & Burghardt, 2005).

Since women are most likely to be imprisoned for drug-related crimes, a woman’s family experiences the detrimental consequences of public policies that limit access to resources for those convicted of criminal activity. Policies intended to dispense harsher penalties for criminal activity in general disproportionately present women with obstacles to successful re-entry into their home communities. For example, minimum sentencing guidelines for drug-related convictions for those women who operate as mules—carrying large amounts of drugs for dealers—impose penalties on women whose prior issues of abuse and dependency might have played into a woman’s decision to participate (Smith & Young, 2003, p. 541). Often male dealers implicate their female spouses or significant others in criminal activity by using coercive tactics such as physical or emotional abuse to assure cooperation. Smith and Young noted that minimum sentencing guidelines leave
little room for judges to consider such mitigating circumstances and therefore adjust sentences accordingly (p. 541).

Similarly, under Temporary Assistance to Needy Families (TANF), women and families disproportionately bear the burden of legislation that requires imposing a lifetime ban on receiving cash assistance and food stamps for individuals convicted of drug-related felony offenses (p. 547). As noted previously, convictions that deny eligibility for tuition assistance made available through federal grant programs can significantly affect an individual’s ability to attain higher education credentials, which would have an indirect economic impact on a convicted felon’s family (Bloom, Owen & Covington, 2004; Jacobs, 2001; Torre & Fine, 2005).

In addition, federal government restrictions for housing assistance and the authority for Public Housing Authorities to examine criminal records of prospective tenants can limit access to housing for some women (Bloom, Owen & Covington, 2004; Jacobs, 2001). According to Jacobs, the lack of access to “safe, affordable housing is one of the biggest barriers to women’s successful adjustment to the community” (p. 47). Without federal housing assistance, women can end up returning to “abusive and drug-using households because they don’t have any other real options” (p. 47), which makes it difficult for a woman to regain custody of children who have temporarily been placed in other housing situations. Finally, the Adoption and Safe Families Act (ASFA) presents another piece of legislation with unintended consequences. Mothers who want to maintain parental rights face a challenging timetable when permanency hearings can occur after only 12 months of separation, which has severe implications for incarcerated mothers and those trying to transition from a prison situation into a more stable living environment (Smith & Young, 2003, p. 542-544; Bloom, Owen & Covington, p. 41; Jacobs, p. 46).

Although several advocates for coordinated services (Bloom, Owen & Covington, 2004; Covington, 2001; Flavin, 2004; Jacobs, 2001; Uekert, 2003) agree that incarcerated women re-entering their communities require coordinated services, at least one study has cast doubt on the efficacy of some case management programs for reducing rates of recidivism among habitual drug users. In a study of the effects of case management models on drug treatment participation and recidivism, Needels, James-Burdumy, and Burghardt (2005) concluded that comprehensive case management strategies demonstrated marginal success:

These results underscore how difficult it is to influence outcomes of former inmates who exhibit multiple, serious problems through case management intervention. [The program’s] effects are similar to those found in other studies of case management intervention. The evidence has shown that these types of programs increase participation in drug treatment, but it shows less consistently that they reduce drug use. There is little evidence that case management programs influence risky sexual behaviors or recidivism. (p. 431)

Needels, James-Burdumy, and Burghardt concluded that case management programs on their own seem insufficient for helping to successfully integrate incarcerated women back into their communities, and that women require more comprehensive systems.
Furthermore, Uekert (2003) suggested that Coordinated Community Responses among agencies such as law enforcement, courts, social services, medical and mental health providers, and community based advocates are difficult to implement. Based on her experience as an evaluator of criminal justice practices, Uekert identified key barriers to successful program implementation: Stakeholders often expressed reluctance to join coordinated programs due to a range of issues including (a) inability of agency heads to participate, (b) lack of communication among service providers, and (c) the failure to reach a consensus about appropriate responses to specific problems, which sometime directly reflected differing philosophical approaches to violations of social norms.

In order for community based services directed toward incarcerated women to generate effective outcomes, the services must integrate gender-responsive strategies, especially those services connected to strengthening relationships among children, family, significant others, and the community (Bloom, Owen & Covington, 2003; Covington, 2001; Hale 2001). Flavin (2004) asserted that programs that have demonstrated successful outcomes in helping incarcerated women after release have been designed not only on strengthening women’s economic capital but also on their ability to mobilize social capital (p. 210). Reporting on action research with two programs that integrate explicit strategies for developing strong relationships among kin and acquaintances for incarcerated women re-entering their communities, Flavin emphasized inclusion of families in planning and implementation.

Families’ dysfunctional responses reflect a lack of knowledge about constructive ways of responding rather than indifference. Even family members who have been hurt in the past or who are dealing with their own problems will try to help a loved one if they believe that something has changed or if they find a source of ongoing support. Provided with guidance and insight, family members often are very effective in providing support and interrupting negative sequences. (p. 211)

In examining a similar program, Hale (2001) wrote that one of the most critical features of the WICS Lifeskills Program in Portland, Oregon, Memphis, Tennessee, and Dallas, Texas was volunteer mentors.

Mentors act as a window to a new lifestyle both educating female offenders and lending the time and advice necessary to individuals in transition. Through this, female offenders develop caring, stable, and continuous relationships, learning how to establish healthy support systems. (p. 36)

Based on collected data for a study that examined the success rates in various programs, Crivens and Dorsey’s (2000) reported a 48.32 percent re-arrest rate for other inmates not participating in the Lifeskills Program as compared to a 34.85 percent re-arrest rate for Lifeskills Program graduates (as cited in Hale, 2001, p. 37). Furthermore, Hale noted that a study conducted by Portland State University in 1997 revealed a significant decrease in reported need for federal assistance for those who participated in the program as compared to those who did not (p.37).

Flavin’s (2004) work with Family Justice, Inc., a national nonprofit organization designed to support families, provides further evidence of the importance of family
inclusion. A direct service program called La Bodega de la Familia opened in 1996 in New York City’s Lower East Side and, according to Flavin, “the presence of family members and a social support system is integral to what has become known as the Bodega Model” (p. 211). In a 2002 evaluation by the Vera Institute of Justice, substance abusers involved in La Bodega were more likely to refrain from drug use and less likely to be arrested or convicted. The evaluation also revealed that 6 months after the initial interview, nearly 90 percent of La Bodega family members had their medical care, housing, food, or vocational training needs met, compared with less than 66 percent of family members in a comparison group (p. 211-212).

Vermont Context

The Agency of Human Services (2006) reported that the number of incarcerated women on an average daily basis has increased from 15 in 1985 to 164 in 2006, with 2006 figures representing 974 unique women admitted to correctional facilities at some point during the year. With the knowledge that Vermont communities also face challenges of an increasing female population under corrections supervision, and all the attending problems associated with this phenomenon, Vermont Agency of Human Services officials have begun exploring opportunities for programmatic improvements.

Although the 164 women housed in correctional facilities accounted for only 7.7 percent of the total incarcerated population in 2006, the characteristics of women as compared to their male counterparts indicates a need for gender-based programming. For example, a 2005 “snapshot” of women in Vermont’s prisons indicated that 80 percent are mothers and 75 percent were the primary caregivers at the time of arrest (Agency of Human Services, 2005). In addition, women were more likely than men to be admitted for non-violent crimes, with only 24 percent of the admitted female population committing a serious felony or misdemeanor against a person, as compared to 56.1 percent for men (AHS, 2006).

Rates of recidivism also continue to increase for both men and women as reported by a 2005 AHS analysis of inmates released between 1993 and 2002. Within three years, 50 percent of released women inmates re-offended, which puts women near the same status as men who showed a 54 percent recidivism rate. While this might indicate some level of parity, research literature suggests issues for women might require gender-based transitional supports that could lead to a reduction in this rate. Because Vermont’s residential facilities are used to capacity (with housing demands often exceeding capacity), the number of women under Department of Corrections supervision in the general population, if it increases at the current rate, will continue to burden an already complex system.

Recognizing the opportunity for improving systems, the 2005 Vermont legislature charged the Agency of Human Services to focus on issues for women under the Department of Corrections supervision, which the AHS answered by developing the Incarcerated Women’s Initiative (AHS, 2005). Specifically, the AHS was charged with addressing the problem of increasing rates of incarceration for women without compromising public safety. Initiative efforts include research to better understand the
nature of the problem and to develop promising recommendations. Guiding the work, the Agency identified the following variables to measure success of initiatives:

- Reducing the flow of women into the broader corrections system
- Reducing the number of women who are incarcerated for violations of probation and other forms of community corrections supervision
- Reducing the number of women being sentenced and detained by the Courts
- Reducing the length of stay in incarceration
- Increasing the rate of successful re-entry for women offenders (p. 2)
VIII. REFERENCES


