

A GENDER-INFORMED APPROACH TO INTERVENTION FOR WOMEN OFFENDERS

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I. THE HISTORY OF WOMEN'S CORRECTIONS IN CANADA

The first Canadian federal correctional facility for women, the Prison for Women, opened in Kingston, Ontario in 1934. Within four years of its opening, the Archambault Commission became the first of many commissions to recommend its closure. The institution was repetitively criticized on numerous grounds, including: overly austere security measures, poor programming, and inability to adequately address the needs of Aboriginal and Francophone women. In fact, between 1938 and 1990, at least fifteen government reports had identified serious deficiencies in the services provided to women inmates. The Prison for Women was the only federal prison for female offenders. This was the subject of fundamental and widespread concern; many federally sentenced women were isolated from their families and social support networks and had greater difficulty preparing for release and reintegration into the community. Despite these concerns, the Prison for Women remained the only Canadian women's federal correctional facility for well over half a century. The last inmate was transferred out of the Prison for Women in May; it was officially closed on July 6, 2000.

In 1989, the Commissioner of Corrections called for a special Task Force to address longstanding concerns with the inequitable treatment of women offenders. Its principle mandate was to develop a comprehensive strategy for the management of federally sentenced women. The research and consultation conducted by the Task Force was largely qualitative and included surveys of both staff and women offenders, as well as comprehensive literature reviews. It was the first time in the Correctional Service of Canada's (CSC) history that the voices of women offenders were afforded such serious consideration in the development of strategic policy direction. In 1990, the Task Force published its report: *Creating Choices*. It represented a new definition of effective corrections for women offenders, reached through consensus by a broad range of correctional practitioners and government/non-government agencies. *Creating Choices* was, and continues to be, considered exceptional in its advent of a woman-centered approach to corrections.

The Task Force developed a holistic approach to corrections for women using five guiding principles: empowerment; meaningful and responsible choices; respect and dignity; supportive environment, and shared responsibility.

Empowerment acknowledges that the reduced life choices typically encountered by women offenders often leaves them feeling powerless and unable to make effective choices. As a result,

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they need assistance in gaining insight into their overall situation, identifying their strengths, and being supported and challenged to take positive action to gain control of their lives.

Meaningful and Responsible Choices highlights that women offenders need to have meaningful options which allow them to make responsible choices. Having the opportunity to make informed decisions will not only provide a sense of control and empowerment, but will also assist them in building their self-esteem and sense of self-worth.

Respect and Dignity stresses that mutual respect among women offenders and staff is crucial as is the importance of acknowledging the diverse needs and cultural identities of women offenders as an integral part of the whole person. By engaging with another in a respectful and dignified way, one is more likely to increase their level of self-respect and to respond to others in the same way.

Supportive Environment recognizes that a positive and supportive environment is deemed important for fostering personal development, encouraging the use of acquired skills, empowering women offenders to acknowledge their strengths, and promoting physical and psychological health. Furthermore, positive community support and assistance accessing resources are considered important to women's achieving greater self-sufficiency and autonomy.

Shared Responsibility emphasizes the shared responsibility society has in receiving women offenders back into the community and facilitating their successful reintegration, which includes development, implementation, monitoring and evaluating interventions for women offenders.

These principles drove specific recommendations to replace the Prison for Women with five regional facilities and an Aboriginal healing lodge. It was also recommended that these facilities be constructed and operated using a 'community-living' model, where the women offenders would reside in houses and be responsible for their daily meals, laundry, cleaning, and leisure time. The Task Force further called for the development of women-centered interventions, including therapy for survivors of abuse and mother-child programming.

In accordance with Task Force proposals, CSC opened five new facilities for federally sentenced women, as previously described. Operations and programming both within the institution and post-release have been amended. In particular, the implementation of a Women Offender Program Strategy (Federally Sentenced Women Program, 1994; Office of the Deputy Commissioner for Women, 2000) has provided an opportunity for participants to benefit from programs that were developed specifically to meet women's needs and styles of learning. For instance, a mother-child program is operational at all regional facilities, allowing young children to reside with their mothers on a full-time basis, while older children are permitted part-time residency. Additionally, in late 1999, an *Intensive Intervention Strategy (IIS)* was introduced for women offenders. The strategy provides a protocol for safe and secure accommodation for women classified as maximum-security and those with special needs, while emphasizing intensive staff intervention, programming, and treatment.

II. GENDER-INFORMED POLICY

Correctional Service of Canada's policies are gender-informed and inclusive of four policies that are *specific* to women's sites (staff protocol in women offender institutions; intensive intervention strategy in women's institutions; institutional mother-child program; and case preparation and supervision of women offenders with children residing at a community-based residential facility). The policy statement on staffing in women offender institutions was promulgated to ensure that the dignity and privacy of incarcerated women are respected to the fullest extent possible, while maintaining safety and security. A second important objective of this policy is to ensure that the presence of men in women's prisons does not expose staff or inmates to vulnerable situations.

For example, the policy stipulates that only female staff will monitor women inmates who are under camera surveillance. Additionally, monitor screens are situated in security posts in such a way as to ensure the inmates' privacy. Likewise, frisk searches are conducted by female staff only, and strip searches are conducted, witnessed, and video-recorded by female staff only; they are always conducted in a private area, out of sight of others, by one female staff and in the presence of one female staff witness. Although escorts may be conducted by a man or a woman, due consideration is always given to the following factors prior to assigning a male escort: the nature of the escort, whether the inmate is comfortable being escorted by a male and whether the male is comfortable providing the escort. Finally, the policy also articulates that any staff member who has not received Women-centred training and who is required to work in a living unit will be escorted by a staff member who has received Women-centred training.

III. CORRECTIONAL PROGRAMS

Correctional programs are aimed at addressing the risk and needs of women offenders in a gender and culturally appropriate manner. Programs for women must use an approach that is relevant in dealing with the multi-faceted needs of women offenders. In Correctional Service Canada, the Women Offender Correctional Programs (WOCP) and Aboriginal Women Offender Correctional Programs (AWOCP) are approaches that address emotional regulation needs, cognitive functioning and other problematic behaviours leading to crime (substance abuse, violence, etc).

Programs and interventions for women offenders should be based on the most up to date literature and empirical research in the area. This includes the correctional principles of Risk, Need, and Responsivity (RNR model; Andrews, Bonta, & Hoge, 1990). In brief, the *risk principle* posits that level of treatment should be matched to the risk level of the offender. More specifically, intensive services should be provided to higher risk offenders. The *need principle* distinguishes between criminogenic and non-criminogenic needs. Criminogenic needs are a subset of an offender's risk level. They are dynamic attributes of the offender that, when changed, are associated with changes in the probability of recidivism. Examples include substance abuse, antisocial attitudes, and lack of employment skills. Finally, the *responsivity* principle suggests that programs should be delivered in a style and mode that is commensurate with the learning style and personal characteristics of the offender.

Gender-informed program development and implementation is based on current research and expertise about women offenders. Appropriate programs for women integrate a number of gender-informed theories and methodologies in contemporary correctional services. Although some of these interventions incorporate traditional elements of evidence-based practice (e.g., cognitive-behavioural, skills-based methods), they also explicitly consider needs that are particularly salient to women, and are founded, at least in part, on theoretical models such as relational-cultural theory (Miller, 1986), feminist paradigms, and strengths-based approaches (Van Wormer, 2001). Recognizing the elevated rates of historical trauma amongst girls and women, these programs should be trauma-informed (Grella, 2008; Messina, Grella, Burdon, & Prendergast, 2007) and consider the gendered context (or “pathways”) of female offending (Salisbury & Van Voorhis, 2009; Simpson, Yahner, & Dugan, 2008). For a more comprehensive recent review of the conceptual and empirical foundations for gender-informed interventions, see Kerig and Schindler (2013).

IV. SOCIAL PROGRAMS

Social programs help offenders to identify pro-social lifestyles, to choose activities that will integrate them as productive members of society and law-abiding citizens. Women offenders are encouraged to participate in activities and social programs relevant to their interests and needs. Social programs allow for transfer of skills learned in correctional programs, teach women healthy ways of living, and introduce them to increased pro-social choices. Even though they do not directly target criminal behaviour, social programs, as identity building activities supportive of correctional and mental health interventions, play an essential role in CSC’s efforts to actively encourage offenders to become law-abiding citizens

The Social Integration Program for Women (SIPW) was developed to assist women offenders in preparing for their transition back into the community. It targets wellness, relationships, meaningful occupations and community functioning. SIPW is aimed at helping women identify their strengths and areas of their lives in need of improvement. As part of this program, participants are asked to set goals that will assist them in their reintegration. The program increases women's awareness of community resources and services which can assist them to overcome possible barriers to reintegration.

The goal of the mother–child program is to foster and promote stability and continuity for the mother–child relationship. Mothers who meet the eligibility criteria are allowed to keep their newborns and/or pre-school aged children with them in the institution. The best interests of the child is the pre-eminent consideration in all decisions related to the participation in the mother–child program. The safety and security as well as the physical, emotional, and spiritual well-being remain paramount in consideration of the best interest of the child. A new non-residency element of the mother–child program includes the “Child Link” initiative, which facilitates video visits for women with their children.

The Peer Support Program is an inmate-based program in which trained and qualified inmates provide peer support services to other inmates. The program also exists in the community allowing parolees to provide support to other parolees in the community.

V. MENTAL HEALTH SERVICES/INTERVENTIONS

In the Canadian correctional system, women have greater mental health needs compared to both their male counterparts and women in the general Canadian population. In the federal system, research has demonstrated that 29% of women had a current mental health problem during admission (Correctional Service of Canada, 2009). Furthermore, women tend to have complex mental health difficulties and present with unique needs. For example, in the federal women offender population, 43% of women have engaged in self-injurious behaviour, and 75% of those women have attempted suicide (Derkzen, Booth, McConnell, & Taylor, 2012). Women's significant mental health concerns are often further compounded by issues such as historical trauma and substance abuse, creating a complex interplay of challenges for treatment providers in the criminal justice system.

In 2010, CSC launched its Mental Health Strategy. Considerable attention has been given to the increasing prevalence of mental health needs of women offenders, and the implications of this changing profile. Addressing the mental health needs of offenders promotes improved quality of life, reduces suffering, and respects basic human rights. Moreover, in Canada, it is a requirement under the law (Corrections and Conditional Release Act) to provide essential health care services and reasonable access to non-essential services. Furthermore, promotion of mental health stability may contribute to increased public safety either directly (i.e., by reducing mental health symptoms that are linked to an offender's offending cycle) or indirectly (i.e., by enabling participation in correctional programs to address those factors that support continued offending such as substance use, criminal attitudes, etc.).

Canadian federal correctional facilities for women are designed such that women classified as medium or minimum security live in house-style accommodation. Within the perimeter of each women's correctional facility, there is a Structured Living Environment (SLE) house. The SLE provides intermediate mental health care in a therapeutic environment for women with significant cognitive limitations and/or mental health concerns.

Dialectical Behaviour Therapy (DBT; Linehan, 1993) is offered to women in all the SLEs. DBT targets emotional dysregulation, unhealthy relationships and maladaptive behaviours, with the goal of fostering adaptive behaviours. In cases where the inmate's level of cognitive functioning is not conducive to interventions through DBT, a detailed individual Treatment Plan is devised under the lead of the chief of psychology or delegated mental health professional. These treatment plans are tailored specifically to the needs and cognitive abilities of the individual inmate. Treatment Plans through DBT as well as individual plans for those less cognitively capable are also offered to women classified as maximum security.

For women offenders with significant mental health needs requiring more acute care, psychiatric hospital care is also available.

VI. STAFF RECRUITMENT AND WOMEN-CENTRED TRAINING

Staff working with women inmates should be carefully recruited and selected to ensure that all staff applying for positions with direct inmate involvement meet essential qualifications, including the ability to work in a women-centred environment. This means that they must demonstrate an understanding of issues that may be more salient, or specifically relevant to women inmates. As such, candidates in the selection processes should be assessed in terms of their knowledge, skills, and abilities as they pertain to working with women offenders.

Staff members who have been selected to work in women's correctional facilities should also be provided with Women-Centred training to ensure that they work in a gender-informed manner that facilitates their effectiveness in working with women. At minimum, this training should include elements of trauma-informed care, as well as the interplay between mental health, trauma, and addictions; recognition of the potential impacts of vicarious trauma; provide an understanding of women's unique needs and learning styles; and provide guidance on adherence to gender-informed policies and practices.

VII. RECOMMENDATIONS

1. Correctional programs for women offenders should be gender-informed (i.e., inclusive of theory and research that is specific to women).
2. Social programs and other services for women offenders should consider their unique needs. Examples include mother-child initiatives, women's health issues, relational-cultural considerations (e.g., peer support programs).
3. All staff providing direct services to women offenders should be carefully screened and selected and should receive training on gender-informed care for women.
4. Correctional policies should consider application to both men and women. Where appropriate, policy exceptions or revisions should be made for women offenders. Gender-specific policies for women should be developed and implemented, as appropriate.

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