

From Incarceration to Re-Integration: Creating Pathways to Successful Re-Entry

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WOMEN'S PRISON ASSOCIATION

Women's Prison Association

- Founded in 1845, the first organization in the U.S. dedicated exclusively to partnering with criminal justice-involved women
- We prioritize working collaboratively with women to define their own goals, lay out plans to achieve them, and utilize an expanded realm of resources and opportunities.



Women in the Criminal Justice System

- There are currently around 35,000 women under some form of correctional control in New York.

(The Correctional Association of New York)

- Women make up 7% of the prison population nationally, but this number is increasing at a higher rate than for their male counterparts.

(Criminal Justice Research Center at the University of Cincinnati, 2008)

- Although men are still the majority of those behind bars, the portion that is women is twice as large as it was in 1970.

(The Prison Policy Initiative)

Who are Justice-Involved Women?

Justice-involved women face issues such as:

- **Trauma, victimization and abuse**
- **Mental health**
- **Relationship issues**
- **Low self-efficacy**
- **Children and family conflict/parental stress**

As well as noting collateral needs (e.g. housing, poverty, employment, education, substance abuse), and how these gender-neutral factors also uniquely affect women

Trauma and Domestic Violence

- An overwhelming majority of incarcerated women are survivors of trauma including physical abuse and domestic violence.
- An estimated three-quarters of justice-involved women have histories of severe physical abuse by an intimate partner during adulthood, and research reveals that 82% are survivors of physical and/or sexual abuse during childhood.
- “Because domestic violence plays a significant role in women’s pathway to prison, it should be taken into account and addressed at all stages of the criminal justice process. Unfortunately, this is rarely the case.”

(The Correctional Association of New York)

Mental Health, Substance Use & HIV Status

- “73% of female prisoners in state institutions and 47% in federal institutions used drugs regularly prior to incarceration... as many as 80% of incarcerated women meet the criteria for at least one lifetime psychiatric disorder” most commonly substance abuse, PTSD and depression.

(Bloom, Covington, “Addressing the Mental Health Needs of Women Offenders”. 2008)

- “New York State also has the largest number of HIV-positive women inmates of all prison systems in the United States... Of female inmates in New York State prisons, 14.6% are HIV positive compared to 7.3% of male inmates.”

(The Correctional Association of New York, “Women in Prison Project: HIV Briefing”. 2006)

These statistics are particularly notable, since **justice-involved women** are consistently shown to be more likely to suffer from mental health issues and to be diagnosed as HIV positive than both justice-involved men, and women in the general population.



Why Gender-Responsive Approaches?

- Risk assessments used to predict an offender's likelihood of recidivism and to determine the level of custody have previously been based on male offenders.
- Yet women have unique dynamic risk factors and needs, and gender-specific pathways to crime which creates the critical need for gender-responsive approaches and assessments

The WRNA: Women's Risk and Needs Assessment

Based on evidence of the **effectiveness of gender-responsive approaches** and the notion that offender change requires treatment of needs related to future offending, the WRNA was introduced in 2008 by the National Institute of Corrections with the University of Cincinnati.

- Seamless assessments across correctional settings (e.g. probation, institutions, parole).
- For use by agencies invested in gender-responsive programming.
- Specific behavioral criteria, to decrease subjective judgments by practitioners/respondents.
- Contextualization of needs that are not unique to women within gender-responsive terms.

What about Strengths?

- Research acknowledges the importance of risk factors but also supports strength-based approaches
- Strengths, such as self-esteem, self-efficacy, family and relationship support, and financial and educational assets are proven to be crucial to gender-responsive care.
- Strength-based approaches encourage women to mobilize and enhance existing strengths, and to recognize and access personal and community resources.

Specific Risks and Needs Affecting Justice-Involved Women...

“Our society has a strong tendency to define incarcerated women solely by their crimes, ignoring the various circumstances that affect their lives and actions. Like all women, if given the right support and opportunity, incarcerated women have the agency, resilience and strength to overcome challenges and lead healthy, meaningful and productive lives.”

(The Correctional Association of New York)

Women as Primary Caregivers

- Approximately 7 in 10 women under correctional sanction have minor children (Court Services and Offender Supervision Agency for the District of Columbia, 2015)
- The number of children with an incarcerated mom more than doubled from 1991 to 2007.
(The Annie E. Casey Foundation, 2016)
- Parental incarceration has devastating effects on the whole family and community:
 - financial burden and housing instability
 - drain on community resources
 - the challenge of maintaining parental rights while incarcerated
 - risk to physical and mental health and wellbeing (The Annie E. Casey Foundation, 2016)

When you incarcerate a man, you incarcerate that one man.

When you incarcerate a woman, you incarcerate the whole family.



Barriers to Re-entry

Women face the same risks & critical needs after release as they did prior to incarceration:



- **Unemployment**
- **Lack of access to benefits**
- **Lack of education**
- **Unsafe and unstable housing**
- **Substance use**
- **Lack of mental health care and rehabilitative programs**
- **Parental stress and family instability**

Opportunities for solutions

- Start planning for reentry earlier, even upon arrival in prison, including access to trained, effective discharge planners to help.
- Increase relationships between correctional facilities and community-based organizations to try and bridge the gap.
- More funding in mental health and substance abuse treatment, and education/employment, both in the criminal justice system and the community.
- Trauma-informed, gender-responsive approaches to care throughout the continuum of the process, specifically through Alternative to Incarceration programs.

Why Alternatives to Incarceration?

In addition to the therapeutic and rehabilitative benefits, ATIs offer solutions to the huge financial cost of mass incarceration:

- ATIs enable **trauma-informed, gender-responsive approaches** to care and rehabilitation of justice-involved women, as evidenced so far.
- Research suggests that many of the issues which bring women into contact with the criminal justice system would be better treated in community-based settings
- The average annual cost per [NYC jail] inmate in 2012 was \$167,731 whereas WPA's ATI Program costs just \$15,000 per client each year.

(NYC Independent Budget Office 2013, and “The program that’s keeping women out of prison – and saving money” The Guardian 2015)

JusticeHome A.T.I.

- Established in 2013 for women facing felony charges in NYC
- Collaborative case planning & goal setting
- Connection with specialized services as needed
- Gender-informed & evidence-based
- Assessments and interventions include the WRNA, Moving-on Groups, and Seeking Safety for trauma survivors.
- 70% of clients have completed the program successfully since its launch

Hopper Home

- Previously a residential ATI program: 1992-2010 (closed due to city budget cuts)
- Women facing felonies & 2-6 year sentences
- Between 2005 & 2010, 55% of the women who entered the program successfully completed court mandates in the community.
- Now a transitional shelter for justice-involved & homeless women, those who are recovering from substance abuse issues, and survivors of domestic violence.

Our Milestones & Outcomes

- Access treatment for mental health & trauma
- Connection to community resources
- Educational & employment gains
- Stable & safe housing
- Reduced parental stress
- Family stability

Most of what women need to operate safely in the community exists in the community.