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Females in the Criminal Justice System

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Females in the Criminal Justice System

While the majority of criminal offenders are male, the number of females in the criminal justice system is growing at a much faster rate.¹ In the past 10 years, arrests of females increased 10.5% while arrests of males decreased by 6.8 %, with females accounting for 25.5% of all arrests in 2010.² As of 12/31/12, 2,703 women were incarcerated in Missouri prisons and 16,239 women were supervised either on probation or parole.³ Per 100,000 population, Missouri incarcerated 80 females in 2010 compared to the national average of 59 in FY 2011.⁴ In 2012, 353 females were released to St. Louis City and St. Louis County from Missouri prisons. The recidivism rate after two years for women released in 2010 was 41.9% in St. Louis City and 31.3% in St. Louis County.⁵ Despite these statistics, female offenders, a population who reports a considerably higher need for services, are often overlooked in regards to re-entry programming.⁶

Criminogenic Risk Factors:

Risk factors for women differ from those of men. On average, females involved in the criminal justice system are in their mid-thirties and are disproportionately women of color.⁷ They are less likely than women in the general public to have been married, and most have minor children, the majority having been the custodial parent prior to incarceration.⁸ Compared to men in the criminal justice system, women typically have committed less violent crimes, have different risk factors which often center around relationships, require different services (including trauma counseling), and have differing societal roles such as caring for children while balancing contesting priorities.⁹ Women generally enter the criminal justice system due to non-violent crimes that are drug related and/or driven by poverty,¹⁰ and they are less likely to have extensive criminal histories.¹¹ A 2000 study found that an amorous relationship with an individual engaged in criminal activity was the strongest predictor of female engagement in crime.¹²

Abuse/ Trauma:

Early victimization has demonstrated a greater relationship to future criminal outcomes in females compared to males¹³ and childhood trauma and abuse have been linked with both substance abuse and mental health disorders in incarcerated women.¹⁴ The percentage of incarcerated women reporting extensive abuse ranges between 77% and 90%, and those with more exposure to trauma in childhood experience a younger onset of many health and behavioral problems, including depression, substance abuse, post-traumatic stress disorder, sexually transmitted diseases, poor problem-solving and coping skills, and engagement in prostitution and other criminal behavior.¹⁵ For female offenders, substance abuse may be motivated by a desire to mask or cope with unpleasant emotions arising from traumatic experiences and mental health issues.¹⁶

Mental Health and Substance Abuse:

Approximately half of all female prisoners have mental health disorders, with a very high percentage also having substance abuse problems.¹⁷ The occurrence of depression and anxiety is more common in female offenders versus male offenders¹⁸ and, while not considered a relevant factor in predicting male offending, evidence suggests that extreme depression, suicidal tendencies, and self-harm have a criminogenic effect on women.¹⁹ Research indicates that substance abuse is a strong direct predictor of prison readmission for females.²⁰ According to one study, the likelihood of re-arrest was 75% lower for females who completed substance abuse treatment versus those who dropped out of treatment.²¹

Needs:

Financial hardship, custody-related matters, limited contact with loved ones, and limited support for child rearing contribute to considerable stress on incarcerated mothers, which is linked to institutional adjustment difficulties and recidivism.²² A recent study of impoverished female offenders also found that the provision of services such as health care, housing, job training and education was psychologically empowering and significantly decreased the rate of recidivism by 83%.²³

Employment and Livelihood:

The majority of female offenders face economic marginalization when returning to the community after incarceration.²⁴ Female offenders are both unemployed and underemployed, make less per hour and work fewer hours than male offenders, and are often employed in low-level, non-permanent, or entry-level occupations.²⁵ Because certain prohibitions restrict ex-offenders from obtaining certification and licensure in an estimated 300 occupations²⁶, female offenders are limited in advancement from service and caregiving positions into professions where they are more likely to earn benefits and a living wage.²⁷ In addition, those female offenders who have the experience and skills to obtain better jobs are often hindered by their responsibilities as primary caretakers of children.²⁸ In addition, female offenders generally have less human and social capital, resulting in less self-efficacy and confidence to achieve specific goals.²⁹

Females with little support from family and lower self-confidence have more problems maintaining jobs and achieving financial independence.³⁰ Factors such as financial independence have been found to be significantly related to prison readmission.³¹ One study found that for adult women, income generated from employment was “associated with a lower likelihood of rearrest, such that each \$100 increase in weekly salary (up to \$500) was associated with a 24-percent reduction in the likelihood of rearrest”.³² Another study found that females who were married and employed were the least likely to remain criminally involved, followed by women who were married and unemployed, then women who were unmarried and employed, with women who were both unemployed and unmarried being most likely to remain criminally involved.³³

Residence:

As most states, such as Missouri, have fewer correctional centers for females than for males, women are often housed far from the community where they will return.³⁴ Stable housing following incarceration is crucial, and the lack thereof significantly increases the odds of failing on parole.³⁵ Residential goals should include safe and permanent housing to accommodate the woman and her children.³⁶ At times, women may want to rely on family and friends in this process, but this must be carefully considered to determine whether the situation threatens her sobriety.³⁷

Family/Relationships:

Women are influenced by relationships and relationship status, and studies suggest that support and participation of significant others can improve retention and both short- and long-term outcomes. Due to the family disruption that has generally occurred, women need services to re-establish and support family ties, including family therapy and other support services.³⁸ As reunification can be emotionally challenging, it is made easier for the client if ties have been maintained and supported during incarceration.³⁹

Health:

Public health agencies are important partners in the reentry process as most women will rely on public sector health services.⁴⁰ Poor health is often a characteristic of women in the criminal justice system due to lifestyles that damage their bodies, while a history of abuse and poverty may prevent the seeking and receiving of needed assistance.⁴¹ Screening for potential health problems and an emphasis on treatment and counseling for infectious diseases and protection from abusive relationships is greatly needed.⁴² Other programming may also be necessary to address self-injury or self-harm, which women entering prison have much higher rates of than women who are not incarcerated. It should be noted those who exhibit such behaviors are less likely to respond as well to reentry programming than those who do not exhibit self-injury.⁴³ Women should also be screened for pregnancy to begin prenatal care, and other programming should encourage women to value and take care of their bodies.⁴⁴

Gender-Responsivity and other Promising Practices:

Recent research points to the need for gender-responsive case management for female offenders. Gender responsiveness takes into account “the differences in experience that men and women bring to the criminal justice and corrections systems and adjusting our strategies and practices in ways that are appropriately responsive to those differences”⁴⁵. The key principles of a gender responsive approach include (1) acknowledging gender makes a difference in correctional practice, (2) creating an environment based on dignity, respect, and safety, (3) acknowledging the experiences of women

are defined through relationships, (4) addressing the interaction of trauma and victimization, mental-health problems, and substance abuse in an integrated way, (5) recognizing that women's capability to be economically self-sufficient is crucial to their success in the community, (6) accepting women's need to find support to face the challenges of re-entry.⁴⁶ Resulting from a partnership with the University of Cincinnati, the Missouri Department of Corrections has recently implemented a Gender Responsive Assessment Tool to better understand and address the needs of their female clients.

The incorporation of a gender-specific model including treatment for trauma and substance abuse and a gender-responsive approach that is empowering, strength-based, and nurturing with attention to relationships shows improved functioning, higher levels of employment, higher wages, reduction in substance abuse, and fewer arrests.⁴⁷ Additionally, programs promoting reunification and routine, quality contact with children, family members, and supports, while promoting effective parenting skills play an important role in successful outcomes.⁴⁸ It is also suggested that the use of community-based residential facilities can prevent the disruption involved in incarceration.⁴⁹

To increase the likelihood of success in the community, women should have access to vocational training and education, employment assistance, programs to learn problem-solving skills, functional and supportive social networks, and assistance with child care, housing, health care, and other public capital.⁵⁰ A study by the Urban Institute of a women's prison found that participation in postsecondary education led to higher levels of self-esteem.⁵¹ Other recent research indicates that programs designed to increase women's vocational and educational skills are especially effective in decreasing their risk of recidivism.⁵² These services can increase personal and social capital, while enhancing the quality of life for the women and her child and family.⁵³ Overall, the challenges women face upon reentry are interrelated and programming must address these issues in an integrated manner.⁵⁴

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