CMOC Quarterly Training
From Prison to Home: The Challenges of Re-Entry

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TRAINING INSTITUTE

CMOC Quarterly Training
From Prison to Home:
The Challenges of Re-Entry

October 16, 2019

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Making a New Way for a Brighter Day!

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How A Life Course of Trauma Impacts Re-entry and Recidivism

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Learning Objectives

- By the end of this presentation, participants will:

  – Understand the definition of trauma and the historical context of trauma

  – Discuss how individuals may have experienced trauma from the life course perspective and understand the impact of ACEs

  – Identify systemic factors that place formerly incarcerated persons at higher risk for recurring trauma and recidivism

  – Provide probable solutions for how to work with clients who have experienced multi-faceted trauma

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What is Trauma?

- **Trauma** is an emotional response to a terrible life course event like an accident, rape or natural disaster
  - Immediately after the event, shock and denial are typical
  - Longer term reactions include unpredictable emotions, flashbacks, strained relationships and even physical symptoms like headaches or nausea
  - While these feelings are normal, some people have difficulty moving on with their lives

https://www.apa.org/topics/trauma/

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Historical Trauma Theory

- While the term was coined in the 1980's by Dr. Brave Heart, the premise of this theory is that populations historically subjected to long-term, mass trauma—colonialism, slavery, war, genocide—exhibit a higher prevalence of disease even several generations after the original trauma occurred

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The perpetuation of trauma
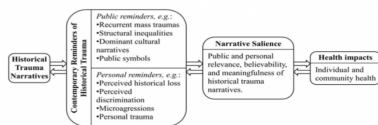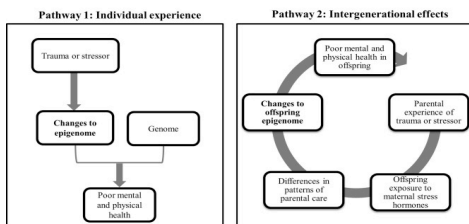

Figure 1.
Narrative Model of How Historical Trauma Impacts Health: Public narratives connect historical traumas to health impacts through public and personal contemporary reminders and the degree of narrative salience. Each stage of the narrative model is recursively influential of the connecting stages.

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How Health may be Impacted

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Types of Trauma

- **Acute trauma:** Results from exposure to a single overwhelming event/experiences (car accident, natural disaster, single event of abuse or assault, sudden loss or witnessing violence)
- **Repetitive trauma:** Results from exposure to multiple, chronic and/or prolonged overwhelming traumatic events (i.e., receiving regular treatment for an illness)
- **Complex trauma:** Results from multiple, chronic and prolonged overwhelming traumatic events/experiences which are compromising and most often within the context of an interpersonal relationship (i.e., family violence)
- **Developmental trauma:** Results from early onset exposure to ongoing or repetitive trauma (as infant, children or youth) includes neglect, abandonment, physical abuse or assault, sexual abuse or assault, emotional abuse witnessing violence or death, and/or coercion or betrayal. This often occurs within the child's care giving system and interferes with healthy attachment and development.

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Types of Trauma

- **Vicarious trauma:** Creates a change in the service provider resulting from empathetic engagement with a client's/patient's traumatic background. It occurs when an individual who was not an immediate witness to the trauma absorbs and integrates disturbing aspects of the traumatic experience into his or her own functioning.
- **Historical trauma** is a cumulative emotional and psychological wounding over the lifespan and across generations emanating from massive group trauma. Examples of historical trauma include genocide, colonialism (i.e., residential schools), slavery and war.
- **Intergenerational trauma** describes the psychological or emotional effects that can be experienced by people who live with people who have experienced trauma. Coping and adaptation patterns developed in response to trauma can be passed from one generation to the next. https://yourexperiencesmatter.com/learning/trauma-stress/types-of-trauma/

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- Adverse Childhood Experiences (ACEs) is the term used to describe all types of abuse, neglect, and other potentially traumatic experiences that occur to people under the age of 18.
  - Adverse Childhood Experiences have been linked to
    - risky health behaviors,
    - chronic health conditions,
    - low life potential, and
    - early death.

https://www.cdc.gov/violenceprevention/childabuseandneglect/acestudy/aboutace.html
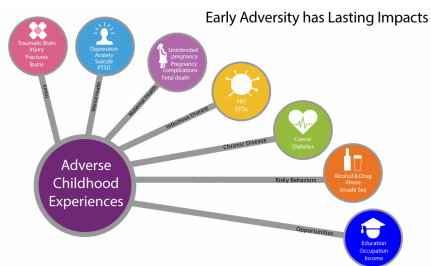
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A Public Health Approach to ACEs

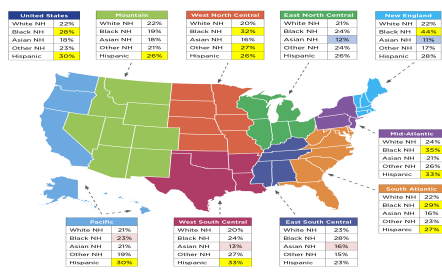How Childhood Trauma Affects Health Across a Lifetime

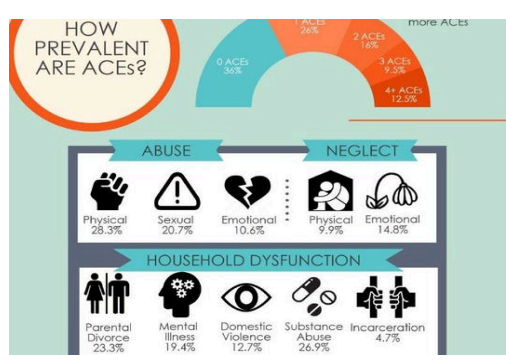HealthHIV DC|HEALTH

ACES Continued

Early Adversity has Lasting Impacts

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Percentage of children with 1 ACE

United States	
White NH	22%
Black NH	28%
Asian NH	18%
Other NH	23%
Hispanic	30%

Mountain	
White NH	22%
Black NH	19%
Asian NH	18%
Other NH	21%
Hispanic	26%

West North Central	
White NH	20%
Black NH	32%
Asian NH	16%
Other NH	27%
Hispanic	26%

East North Central	
White NH	21%
Black NH	24%
Asian NH	12%
Other NH	24%
Hispanic	26%

New England	
White NH	22%
Black NH	44%
Asian NH	11%
Other NH	23%
Hispanic	28%

Mid-Atlantic	
White NH	24%
Black NH	35%
Asian NH	21%
Other NH	26%
Hispanic	33%

South Atlantic	
White NH	22%
Black NH	29%
Asian NH	16%
Other NH	23%
Hispanic	27%

Pacific	
White NH	21%
Black NH	23%
Asian NH	21%
Other NH	19%
Hispanic	30%

West South Central	
White NH	20%
Black NH	24%
Asian NH	13%
Other NH	27%
Hispanic	33%

East South Central	
White NH	23%
Black NH	28%
Asian NH	16%
Other NH	15%
Hispanic	23%

NH=Non-Hispanic

Yellow shading = Percentage is higher than white non-Hispanic children at a statistically significant level.
Blue shading = Percentage is lower than white non-Hispanic children at a statistically significant level.
Red shading = Estimate should be interpreted with caution, because the relative confidence interval is greater than 120 percent. See the "About the data used in this report" section for more information.

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HOW PREVALENT ARE ACEs?

1 ACE 26%
2 ACEs 16%
more ACEs
0 ACEs 36%
3 ACEs 9.5%
4+ ACEs 12.5%

ABUSE
- Physical 28.3%
- Sexual 20.7%
- Emotional 10.6%

NEGLECT
- Physical 9.9%
- Emotional 14.8%

HOUSEHOLD DYSFUNCTION
- Parental Divorce 23.3%
- Mental Illness 19.4%
- Domestic Violence 12.7%
- Substance Abuse 26.9%
- Incarceration 4.7%

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Key Health Services Research and Policy Areas

Six Fundamental Health Services and Policy Research Domains to Address ACEs

- Organization and financing of health systems and services
- Access & coordination and services and resources
- Practitioner & family engagement, communication & behavior
- Measurement, informatics and clinical decision making
- Clinical evaluation and outcomes research
- Health professions work force capacity, training and support

CAHMI
The Child & Adolescent Health Measurement Initiative

AcademyHealth

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"Racial disparities in the criminal justice system are no accident, but rather are rooted in a history of oppression and discriminatory decision making that have deliberately targeted black people and helped create an inaccurate picture of crime that deceptively links them with criminality."

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Incarceration Trends in the U.S.

- Between 1980 and 2015, the number of people incarcerated in America increased from roughly 500,000 to over 2.2 million
- Today, the United States makes up about 5% of the world's population and has 21% of the world's prisoners
- 1 in every 37 adults in the United States, or 2.7% of the adult population, is under some form of correctional supervision

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Incarceration At-a-Glance

Black men comprise about
13%
of the general population, but about 35% of those incarcerated.

Black people are incarcerated in state prisons at a rate
5.1×
greater than that of white people.

44%
of incarcerated women are black,
although black women make up about 13% of the female U.S. population.

One in 18 black women born in 2001 is likely to be incarcerated sometime in her life,
compared to one in 45 Latina women
and one in 111 white women.

In 2016, a Police Accountability Task Force in Chicago found that police searched black and Latino drivers
4×
as often as white drivers. However, police found contraband on white drivers twice as often as black and Latino drivers.
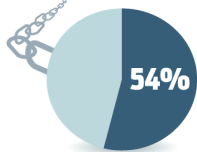
One in three black men born today can expect to be incarcerated in his lifetime,
compared to one in six Latino men
and one in 17 white men.

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Bound by blood: Children of incarcerated parents

Percentage of U.S. prison inmates who are parents with children, including more than 120,000 mothers and 1.1 million fathers:

54%

1 in every 28 children — or 3.6 percent — has a parent incarcerated. That's a total of 2.7 million children, up from 500,000 in 1980.

BY RACE

African American children	Hispanic children	White children
1 in 9	**1 in 28**	**1 in 57**
11.4%	3.5%	1.8%

Source: Pew Charitable Trusts, 2010

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Drug Sentencing Disparities

- In the 2015 National Survey on Drug Use and Health, about 17 million whites and 4 million African Americans reported having used an illicit drug within the last month
- African Americans and whites use drugs at similar rates, but the imprisonment rate of African Americans for drug charges is almost 6 times that of whites
- African Americans represent 12.5% of illicit drug users, but 29% of those arrested for drug offenses and 33% of those incarcerated in state facilities for drug offenses

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Effects of Incarceration

- A criminal record can reduce the likelihood of a callback or job offer by nearly 50 percent
- The negative impact of a criminal record is twice as large for African American applicants
- Infectious diseases are highly concentrated in corrections facilities: 15% of jail inmates and 22% of prisoners – compared to 5% of the general population – reported ever having tuberculosis, Hepatitis B and C, HIV/AIDS, or other STDs
- In 2012 alone, the United States spent nearly $81 billion on corrections
- Spending on prisons and jails has increased at triple the rate of spending on Pre–K–12 public education in the last thirty years

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Trauma of the Incarcerated

- The majority of individuals who interface with the criminal justice system - including prisons, jails and detention centers - have been exposed to traumatic events across the life-course (Kubiak, et al 2017).

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Early Traumas Experienced by the Incarcerated

- According to Kubiak et al.
  - Women reported higher rates of past year physical (45%) and sexual abuse (36%) than men (11% physical and 4% sexual abuse)
  - The most common traumatic event experienced by men is witnessing death or serious physical injury
  - A history of previous victimization has been linked with subsequent victimization
  - Toxic STRESS (homelessness, abuse, food insecurity, etc.)
  - A recent Centers for Disease Control survey found that 23% of men have experienced some form of sexual victimization (compared to 44% of women), equating to 26 million men nationally.

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In other research

- Respondents who reported greater than 4 traumatic events had fourfold higher odds of being arrested and fivefold odds of being incarcerated
- Those who experienced 1-3 traumas were significantly associated with the odds of being arrested (Jaggi, et al 2016)

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Causes of Trauma while Incarcerated

- Rates of exposure to violence or traumatic events are anywhere between about 62% to 100% - roughly double that in a community-based male population
- Physical assault and more importantly sexual abuse, affect almost 15-16% of male prisoners in sharp contrast to the 1-3% in the general male population
- The highest rates of PTSD occur in male prisoners who have any other mental health condition
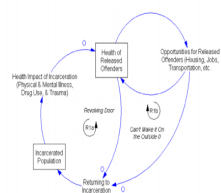
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Types of Trauma While Incarcerated

- PTSD
- Violence
- Mental Health diagnoses
- Illness
- Separation from children

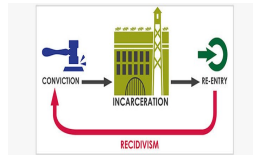HealthHIV   DC|HEALTH

How Trauma Impacts Health

- **Reinforcing loop 1** – The health impacts of incarceration can be lifelong because incarceration limits opportunities, and exposes people to trauma, disease, chronic stress, social stigma and exclusion; once incarcerated, people are trapped.
- **Reinforcing loop 2** – Health impacts are intergenerational; having an incarcerated parent is recognized as a traumatic experience for the child and is linked to negative health outcomes throughout the child's life.
- **Reinforcing loop 3** – High rates of incarceration impair community health.

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Recidivism woes

- America is faced with a reality where 4 out of every 5 individuals who leave prison will return at some point in the future.
  - Unstable housing
  - Lack of employment opportunities
  - Lack of social support/social capital

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Re-entry Resolutions

- The 5 Key Model for Reentry Program focuses on the social mobility and well-being of formerly incarcerated individuals to ensure individuals will remain crime-free and contribute positively to society.
- Research indicates that a focus on mobility and well-being best maximizes public health and public safety.

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Re-entry Resolutions cont'd

- Create Systemic Change Through
  - Implementation of trauma-informed care in organizations
  - Professional development and cultural sensitivity training for all who work in corrections and with re-entry populations
  - Utilize evidence based approaches (e.g. Safe Streets & Second Chances) by partnering with academic institutions and others to reduce recidivism

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Conclusion

- Trauma throughout the life course impacts individuals in a plethora of ways
- Trauma contributes significantly to disparities in mass incarceration
- In order to reduce recidivism and enhance reentry, a paradigm shift must occur with respect to how we view those formerly incarcerated

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- Jaggi, L., Mezuk, B., Watkins, D and Jackson, J. (2016). The Relationship between Trauma, Arrest and Incarceration History among Black Americans: Findings from the National Survey of American Life. Society and Mental Health. 6(3):187-208
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- https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5079438/

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- https://www.vera.org/publications/for-the-record-unjust-burden
- https://www.naacp.org/criminal-justice-fact-sheet/
- https://www.news-medical.net/health/Prisoner-Post-Traumatic-Stress.aspx
- https://www.charleskochinstitute.org/issue-areas/criminal-justice-policing-reform/reentry-programs/
- https://www.rethinkhealth.org/wp-content/uploads/2016/04/ReThink-Health-March-17-Report-1.pdf

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Slide 1

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The Comparison of Men's & Women's Reentry

Presented by Ashley McSwain, MSW, MSOD
Executive Director, Community Family Life Services

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Slide 2

Introduction

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Slide 3

Our Goal Today

- Create a shared understanding of reentry and how gender impacts the reentry experience
- Compare and contrast the differences between the reentry experience of women and men
- Understand how incarceration can influence health and chronic illnesses
- Briefly discuss trauma and gender informed care

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Community Family Life Services

CFLS Women's Reentry Services Include:

- Employment
- Parenting
- Women's Reentry Release Planning & Case Management
- Ryan White/HIV Testing/HOPWA Housing
- Domestic Violence & Reentry Family Housing
- Financial Literacy Housing
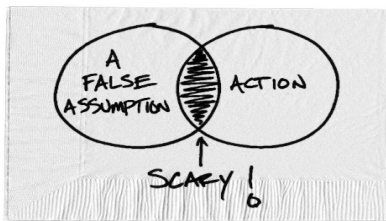- Mentoring
- Drop In Center
- SPEAKERS BUREAU

Community Family Life SERVICES

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BUILDING THE FRAME
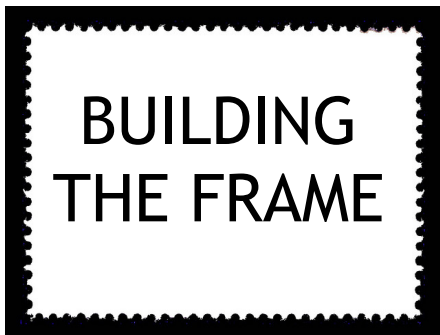
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Share Some Assumptions you have About Men's and Women's Reentry

Where do your assumptions come from?

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What is Reentry?

The period following incarceration when individuals begin to rebuild and repair, while addressing their most basic needs. It includes managing court requirements, paying fines and fees and managing the realities of living with a criminal history.

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Some Basic Facts

There are approximately 250 men and women releasing each month to the DC community

QUICK FACTS

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Some Basic Facts

In the last 40 years, the number of incarcerated **women** increased by more than **700 percent**, a growth-rate outpacing men by more than 50 percent

National Resource Center on Justice Involved Women (2016). Fact Sheet on Justice Involved Women in 2016. Retrieved from http://cjinvolvedwomen.org/wp-content/uploads/2016/06/Fact-Sheet.pdf
•Kajstura, A. (2017). Women's Mass Incarceration: The Whole Pie 2017. Retrieved from https://www.prisonpolicy.org/reports/pie2017women.html
•Sentencing Project (2015). Incarcerated Women and Girls Fact Sheet. chrome-extension://oemmndcbldboiebfnladdacbdfmadadm/http://www.sentencingproject.org/wp-content/uploads/2016/02/Incarcerated-Women-and-Girls.pdf

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Men vs. Women

- Many women are single mothers, with two-thirds having children under the age of 18
- Caregivers want the mother to take responsibility for her children as soon as she is released despite not having acquired employment or adequate support
- In contrast, men often have wives, mothers or family members caring for their children and often have women waiting for them when they return home
- Women have fewer people to turn to for support and fewer options upon reentry, which often leaves them to make choices that can be counterproductive

Austin, James, Bloom, Barbara, & Donahue, Trish, National Council of Crime and Delinquency, San Francisco, CA 1992, "Female Offenders in the Community: An Analysis of Innovative Strategies and Programs.

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Men and Women

- Females have lower levels of academic knowledge and vocational training than males
- Because male offenders dominate the criminal justice system, there are many more programs available to support their reentry
- Many of these programs are not suitable for women, especially women who have children
- Of the few programs for women, many are modeled after male programs and often do not adequately address their unique needs

Austin, James, Bloom, Barbara, & Donahue, Trish, National Council of Crime and Delinquency, San Francisco, CA 1992, "Female Offenders in the Community: An Analysis of Innovative Strategies and Programs.

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Trauma-Informed

- Grounded in a thorough understanding of the neurological, biological, psychological and social effects of trauma and violence on individuals
- Until the effects of trauma are acknowledged and effectively managed and treated, **women have difficulty participating in their own reentry process**
- Practitioner works from the assumption that something has been done to the person that may affect the way they make decisions
- There are many types of trauma

Howe, M., Collins, K., Engel, L. (2006). Women and Reentry: Foundations for Success. Boston, MA: Crime & Justice Institute.

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Being Trauma-Informed

Creates a space for practitioners to acknowledge the role of trauma in their client's lives, and avoid accidental re-traumatization

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Gender-Informed Care

Gender-responsive programming means that practitioners **acknowledge the implications of gender** throughout the implementation of their services

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Gender-Informed Care

- Looks through a lens of gender
- Identifies interventions that increase self-esteem
- Addresses health and co-occurring disorders
- Acknowledges their unique lived reality
- Reinforces familial reunification
- Provides a seamless bridge to community support

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Implementing Gender-Responsive Solutions for Women

- Consider childcare needs that can impede employment opportunities
- Consider housing needs that have to include enough space for children to live or visit
- Consider domestic violence concerns that impact housing, employment opportunities, self-esteem and self worth
- Acknowledge that women want you to build a relationship with them before they will trust your professional advice
- Consider that women may have physical biological needs that have to be part of any intervention:
  - e.g. dealing with monthly cycles, cramps, child birth, birth control, etc.

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Reentry and Health

- Jail and prison inmates have a higher burden of chronic diseases than the general population
  - e.g. hypertension, asthma, and cervical cancer
- 12% of women incarcerated within DC jails report being HIV-positive - nearly three times higher than in the District's general population
- The food in prisons and jails is not designed for health and often exacerbates chronic illnesses, leaving individuals to return home sicker

Ingrid A. Binswanger, Nicole Redmond, John F. Steiner, LeRoi S. Hicks (2012)
Health Disparities and the Criminal Justice System, J Urban Health. Published online 2011 Sep 14

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Reentry and Health

- Chronic health impedes employment, interrupts stability planning and impacts already fragile relationships
- Healthy food is challenging when unstable living conditions may not allow regular meals, which can impede medical regimens

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Summary

- Understanding the intersection of gender and reentry allows practitioners to create a more effective environment from which clients can grow and learn
- Understanding your own biases and assumptions may help you design interventions more relevant to the clients' needs
- Understanding the complexities and gender nuances associated with reentry will allow you to design more targeted and focused strategies that will more effectively address the acute needs this population faces

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Closing

Share one sentence to describe something you learned today

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The Leadership
Conference

FACT SHEET – Barriers to Successful Re-Entry of Formerly Incarcerated People

Every year, nearly 700,000 people are released from American prisons, and an estimated 9 million are released from jail.[1] According to the National Institute of Justice, almost two-thirds of them are arrested again within three years. Once released, formerly incarcerated people face a myriad of barriers to successfully re-entering society. They are not allowed to vote, have little access to education, face scant job opportunities, and are ineligible for public benefits, public housing and student loans. These obstacles have profoundly negative effect on millions of American families and make it practically impossible for millions of people who are returning home to be the engaged, responsible citizens we say we want them to be.

Barriers to successful re-entry include:

Employment
- Of the 262,000 offenders that were released from federal prison between 2002 and 2006, 50 percent of those who could not secure employment during the time of their supervised release committed a new crime or violated the terms of their release and were sent back to prison.[2]
- Ninety-three (93) percent of those who were able to secure employment during the entirety of their supervised release were able to successfully reintegrate back into their communities and not return to prison.[3]
- More than 90 percent of companies use background checks in their hiring decisions, putting jobs further out of reach for the one in three adults who are living with a criminal record.[4]
- Eighteen (25) states and more than 150 cities and counties have embraced ban the box and other fair-chance policies. Major corporations like Target, Bed Bath & Beyond, Wal-mart, Home Depot, and Starbucks have also chosen to ban the box.[5]

Education
- Access to higher education for formerly incarcerated individuals has been severely curtailed. In 1994, the Omnibus Crime Bill included a provision that blocked Pell Grants for incarcerated people. The next year, the number of incarcerated individuals able to access higher education fell by 44 percent. [6]
- Nearly 40 percent of incarcerated individuals over 18 years old have not graduated from high school. [7]

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[1] http://csgjusticecenter.org/nrrc/facts-and-trends/
[2] http://www.justice.gov/usao-sdal/programs/ex-offender-re-entry-initiative
[3] ibid
[4] http://www.nelp.org/content/uploads/2015/03/65_Million_Need_Not_Apply.pdf
[5] http://www.nelp.org/content/uploads/Ban-the-Box-Fair-Chance-Fact-Sheet.pdf
[6] http://www.urban.org/research/publication/classroom-community
[7] http://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS_09_1YR_S2601B&prodType=table

Last updated: March 27, 2017

FACT SHEET – Barriers to Successful Re-Entry of Formerly Incarcerated People

- Numerous studies conducted over several decades have shown that the more education an incarcerated person receives, the less likely he or she is to return to prison.[8] However, in 2005, the Bureau of Justice Statistics reported that only 35 percent of prisons were providing some sort of access to higher education.[9]

Housing
- Since 1975, federal regulations have instructed public housing authorities to consider the criminal history of applicants for public housing as it relates to criminal acts that could affect the welfare of other tenants. Consequentially, most public housing authorities have adopted blanket screening policies that reject applicants with criminal backgrounds.[10]
- Federal law mandates a public housing ban for people with certain types of specific convictions—such as methamphetamine production. However, for the vast majority of crimes, federal statute gives public housing agencies broad discretion to deny or evict anyone with a history of criminal activity.[11]
- Under the U.S. Department of Housing and Urban Development's 1996 One Strike policy, public housing agencies have the authority to evict or deny an entire household if the agency has reasonably determined that any member or guest of the household is engaging in illegal drug use or other criminal activities.[12]
- Due to limited work histories and low incomes, most individuals released from prison cannot afford to buy or rent housing in the private market.
- Many landlords are unwilling to rent to formerly incarcerated people. An estimated four out of five landlords employ background checks to screen out prospective tenants with criminal records.[13]
- Due to such housing barriers, one in five people who leave prison will become homeless.[14]

Voting Rights
- 6.1 million Americans are prohibited from voting due to laws that disenfranchise citizens convicted of felony offenses.
- Each state has its own laws regarding the deprivation of the right to vote after a criminal conviction, resulting in a confusing patchwork of laws across the country.
  - Thirty-four (34) states prohibit voting by people who are either in prison, on parole or probation, and post-sentence.
  - Twelves (12) states permanently disenfranchise people who have completed their sentences in their entirety. Individuals in those states make up 50 percent of the entire disenfranchised population.

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[8] http://www.dllr.maryland.gov/adulted/aeimpactprisoned.pdf
[9] http://www.bjs.gov/content/pub/pdf/csfcf05.pdf
[10] An Affordable Home on Re-entry. National Housing Law Project. http://nhlp.org/resourcecenter?tid=86
[11] Ibid.
[12] http://www.nelp.org/publication/advancing-a-federal-fair-chance-hiring-agenda/
[13] https://cdn.americanprogress.org/wp-content/uploads/2014/12/VallasCriminalRecordsReport.pdf
[14] http://www.endhomelessness.org/pages/re_entry

Last updated: March 27, 2017

- o Fifteen (15) states prohibit voting by people in prison.
  - o Two (2) states have no restrictions on voting.
- Persons currently in prison or jail represent a minority of the total disenfranchised population. In fact, 77 percent of disenfranchised voters live in their communities, either under probation or parole supervision or having completed their sentence.
- Disenfranchisement laws have a disproportionate impact on African Americans.
  - o Nationally, one out of every 13 African-American men are disenfranchised, a rate more than four times greater than for non-African-American men.[15]
  - o In some states in the Deep South, about one quarter of African-American men can't vote.[16] In total, 2.2 million black citizens are banned from voting.
- Research suggests that formerly incarcerated individuals who vote are less likely to be rearrested. According to a report by the Florida Parole Commission, the overall three-year recidivism rate based on all released inmates was 33.1 percent, while the recidivism rate for released prisoners who were given their civil rights back and were allowed to vote stood at 11 percent.[17]

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[15] http://sentencingproject.org/doc/publications/AR%202012%20FINAL.pdf
[16] http://www.sentencingproject.org/doc/file/fvr/fd_losingthevote.pdf
[17] http://www.thecrimereport.org/archive/2011-08-a-solution-to-recidivism-let-ex-offenders-vote

Last updated: March 27, 2017

National Resource Center
on Justice Involved Women

Fact Sheet on Justice Involved Women in 2016

Women's experiences within and outside of the criminal justice system are markedly different from justice involved men, and therefore their needs are unique. This resource provides some basic facts about justice-involved women, and how they are different from their male counterparts. It is intended for practitioners who wish to adopt more gender informed approaches and be more successful in their work with women.

Women Offenders as a Growing Population in American Criminal Justice

Women are a fast-growing criminal justice population according to trends over the past 30 years.

- Since 1980 the number of women in U.S. prisons has increased by more than 700% and has outpaced men by more than 50%.[1]

- While arrests have dropped overall during the past decade, the decrease is more pronounced for men (down 22.7% in 2014 as compared to 2005) than for women (down 9.6% in the same time period).[2] Still in 2014, over 1.3 million women were arrested in the U.S.[3] and women in local jails has increased 44% between 2000 and 2013.[4]

- In 2013, 1.2 million women were under the authority of the criminal justice system in some way shape or form.[5]

> A recent study that looked at incarceration rates of women worldwide reports that –with the exception of Thailand and the U.S. itself, the top 44 jurisdictions throughout the world with the highest rate of incarcerating women are individual American states.
>
> -Kajstura & Immarigeon, 2015.

The increase in justice involved women can be traced to changes in state and national drug policies that mandated prison terms for even relatively low-level drug offenses, changes in law enforcement practices (particularly those targeting minority neighborhoods) and post-conviction barriers to reentry that uniquely affect women.[6]

- Between 1986 and 1999, the number of women incarcerated in state facilities for drug related offenses alone increased by 888% (compared to an increase of 129% for non-drug offenses).[7]

- These policies had a differential impact by race and ethnicity.[8] While recently there has been a notable dip in the incarceration rate of black women, in 2014, the imprisonment rate for African American women was still more than 2 times the rate of imprisonment for white women. For Hispanic women incarceration rates were 1.2 times the rate of white women.[9]

This document provides up-to-date statistics on justice involved women and is intended to supplement the NRCJIW's *Ten Truths that Matter When Working with Justice Involved Women* published in 2012. For this and other resources, visit http://cjinvolvedwomen.org/.

Women's recidivism rates are similarly troubling to those of men. About one-quarter of women released from prison fail within 6 months (i.e., have an arrest for a new crime), one-third fail within a year, and 2/3 fail (68.1%) five years out from release.[10]

Differences Between Male and Female Offenders

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

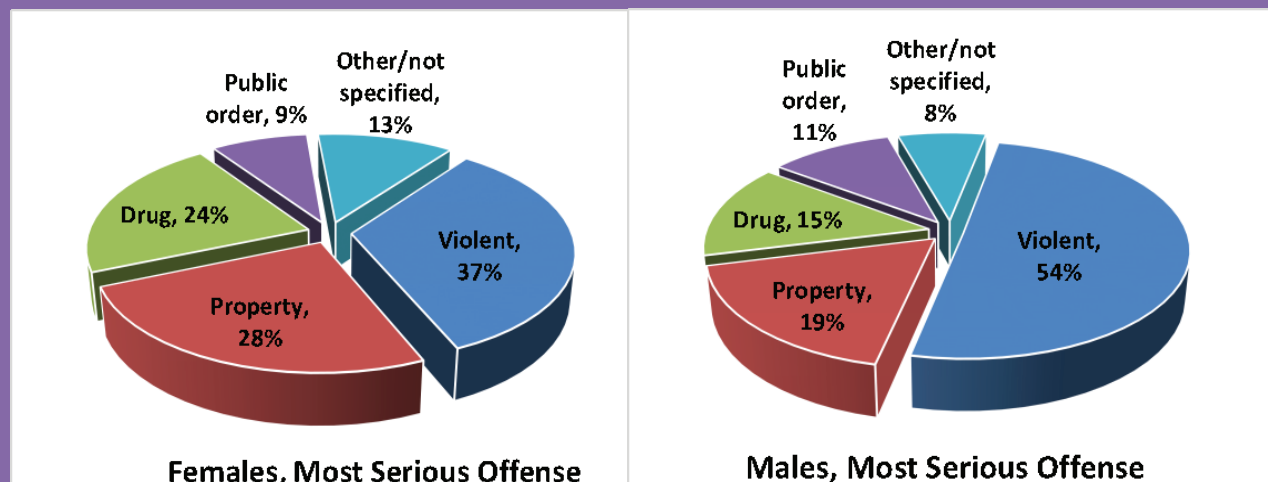**Recidivism Rates of Prisoners Released from Prison in 30 States, 2005-2010**
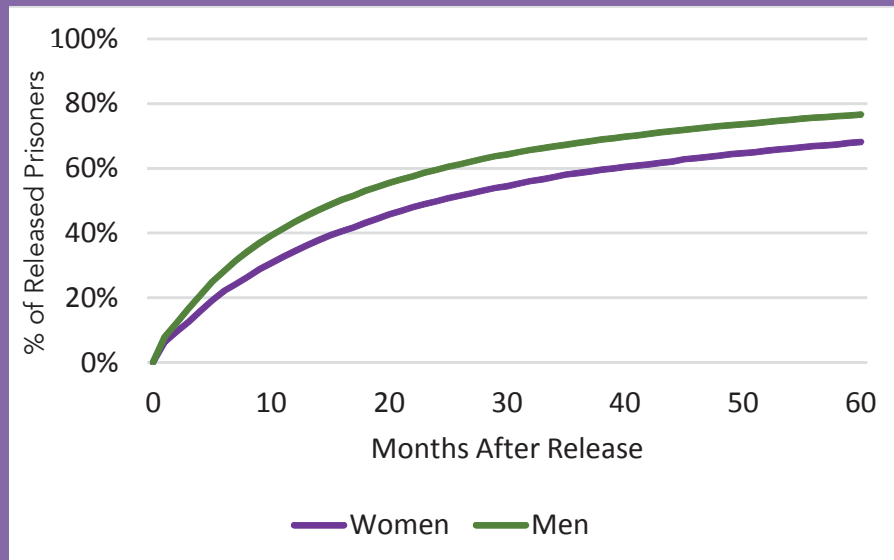
Source: Snyder, Durose, Cooper & Mulako-Wangota, 2016

Offense Types and Use of Violence

• Women are more likely than men to commit property crimes such as larceny-theft and fraud, and are also more likely to commit drug offenses, including drug possession and trafficking.[11]

• Women are less likely than men to have been convicted of a violent crime.[12]

• There is evidence that many women who do commit violent or aggressive acts often do so in self-defense (e.g., in situations of intimate partner violence), rather than in a calculated manner.[13] Also violent offenses by women are often committed against family members or intimates in domestic settings.[14]

Types of Crime Committed, Percentage of Total Crimes Committed by Male and Female Inmates, 2014

Females, Most Serious Offense — Other/not specified, 13%; Public order, 9%; Drug, 24%; Property, 28%; Violent, 37%

Males, Most Serious Offense — Other/not specified, 8%; Public order, 11%; Drug, 15%; Property, 19%; Violent, 54%

Source: Carson, 2015, Table 11

- Further, female offenders as a whole are at lower risk of serious or violent institutional misconducts[15] and are also less likely to reoffend in the community than male offenders.[16]

Victimization and Experiences of Trauma

- Over the past decade, there has been great interest among researchers in the impact of trauma on justice involved populations generally, and women specifically.[17]

- Women under correctional supervision are more likely to report having experienced physical and sexual abuse as children and adults than their male counterparts.[18] A number of studies have found that about half (50%) of justice involved women report experiencing some kind of physical or sexual abuse in their lifetime, with some studies noted rates of trauma histories as high as 98%.[20]

- For some women, victimization can continue while they are incarcerated, either at the hands of staff or other women.[21]

- Another important difference between the abuse histories of men and women is the length of time in which they experience abuse. While the risk of abuse for males drops after childhood, the risk of abuse for females continues throughout their adolescent and adult lives.[22]

Mental Health

- Given their extensive histories of trauma, it is not surprising then that women in jails and prisons report high rates of mental health problems such as depression, post-traumatic stress disorder (PTSD), and substance abuse.

- About 1 in 3 justice involved women meet criteria for current PTSD, with 1 in 2 meeting criteria for lifetime PTSD.[23]

- A national survey found that 55% of male adults in state prisons exhibited mental health problems as compared to 73% of women prisoners.[24]

- A multisite study of jail detainees found that 14.5% of men and 31.0% of women had current serious mental disorders.[25]

- There is some evidence that women with mental health problems may be more likely to commit violent crimes.[26] Women with mental disorders also have higher infraction rates than non-mentally ill females while incarcerated.[27]

Substance Abuse

- In a 2006 Bureau of Justice Statistics study, over 60% of women met the DSM-IV criteria for a drug dependence or abuse problem during the year prior to their incarceration.[28]

- In a sample of women in 11 states receiving reentry services, two-thirds of the women had reported using illicit drugs during the 30 days before incarceration.[29]

- In a recent multi-site study of women in jails, 82% of the sample met lifetime criteria for drug or alcohol abuse or dependence.[30]

- A particular concern for women is that they are twice as likely as men to have co-occurring substance abuse disorders and mental illness (40.5% for women vs. 22.9% for men).[31]

Relationships

- Research on female psychological development illuminates how female's identity, self-worth, and sense of empowerment are defined by and through relationships with others.[32] This is in contrast to males for whom the major developmental issues are achieving autonomy and independence.

- The criminal experiences of women are often best understood in the context of unhealthy relationships (e.g., a male partner who encourages substance abuse or prostitution).[33] Due to the high incidence of abuse, trauma and neglect experienced by justice involved women, their ability to achieve healthy, empathic and mutually empowering relationships is limited.

Summary: Comparison of Female and Male Offenders		
	Females	**Males**
Offending Patterns	• Primarily commit property (28%) and drug offenses (24%) (Carson, 2015) • About 1/3 are violent offenses (Carson, 2015), which are often targeted to a close relative or intimate partner (Van Dieten, Jones, & Rondon, 2014)	• Less than half are property (19%) and drug offenses (15%) (Carson, 2015) • More than half (54%) commit violent offenses (Carson, 2015)
Victimization	• Most common experiences include child and adult sexual violence and intimate partner violence (Miller & Najavits, 2012)	• Most common past traumas include witnessing someone being killed or seriously injured, and being physically assaulted. (Miller & Najavits, 2012)
Mental Health	• 73% of female state prisoners exhibit mental health problems (James & Glaze, 2006) • Depression, anxiety disorders including PTSD, and eating disorders are more prevalent (Bloom, Owen, & Covington, 2003; Kassebaum, 1999; WHO, 2010) • Women prisoners are twice as likely as male prisoners to take prescription medications for mental health problems and receive therapy for their illness (James & Glaze, 2006)	• 55% of male state prisoners exhibit mental health problems (James & Glaze, 2006) • Antisocial personality disorders are more prevalent (Bloom, Owen, & Covington, 2003; Kassebaum, 1999; WHO, 2010)
Substance Abuse	• 60% of female state prisoners met the DSM-IV drug dependence or abuse criteria (Mumola & Karberg, 2006) • Twice as likely as men to suffer from co-occurring substance abuse and mental health disorders (CASA, 2010)	• 53% of male state prisoners met the DSM-IV drug dependence or abuse criteria (Mumola & Karberg, 2006)
Relationships	• Sense of self-worth is built from their connections with others (Bloom, Owen, & Covington, 2003)	• Psychological theories describe men's path to maturity as becoming self-sufficient and autonomous (Bloom, Owen, & Covington, 2003)
Family Roles	• Two-thirds of women in state prisons are mothers of a minor child (The Sentencing Project, 2015)	• Less likely to serve as the primary caretaker of children (The Sentencing Project, 2007)
Poverty	• Most earn lower monthly incomes than men (The Sentencing Project, 2007)	• More likely to be employed full time (60% of men vs. 40% of women) (The Sentencing Project, 2007)

Family Roles

- Women are more likely to have served as the primary caretakers of children prior to entering prison[34] and have plans to return to that role upon release.[35] For many justice involved women, their children are often the motivating factor for their desistance from crime.[36]

- Justice involved women are concerned in an ongoing way with their children's welfare and the potential loss of legal custody. For instance, the Adoption and Safe Families Act of 1997 (ASFA) requires termination of parental rights when a child has been in foster care for 15 or more of the past 22 months. Given that average prison terms for women are 18 to 20 months, this time period has particularly serious consequences for incarcerated mothers.[37]

Poverty and Economic Marginalization

- Poverty is of particular concern for women involved in the criminal justice system. A greater percentage of women (37%) than men (28%) report incomes of less than $600 per month prior to their arrest.[38] Most incarcerated women were previously employed in low wage, entry-level positions, and two-thirds earned a maximum wage of $6.50 per hour.

- In interviews with women inmates in California, researchers found that the primary source of income was a legitimate job for only 37% of those women interviewed, while nearly 22% said their primary source was public assistance.[39] An additional 16% reported that selling drugs was their way of providing for themselves and their children.

Being Gender Responsive

Gender responsiveness means understanding the differences in characteristics and life experiences that men and women bring to the criminal justice system and adjusting practices in ways that appropriately respond to those conditions.[40] There are numerous resources available from the National Resource Center on Justice Involved Women that provide guidance and research on gender responsive approaches with women. Visit http://cjinvolvedwomen.org/.

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MAY 2005

GENDER-RESPONSIVE STRATEGIES

FOR WOMEN OFFENDERS

A Summary of *Research, Practice, and Guiding Principles for Women Offenders*

By Barbara Bloom, Barbara Owen, and Stephanie Covington

The Gender-Responsive Strategies Project: Approach and Findings

Women now represent a significant proportion of all offenders under criminal justice supervision in the United States. Numbering more than 1 million in 2001, women offenders make up 17 percent of all offenders under some form of correctional sanction.

To improve policy and practice regarding women offenders in corrections, the National Institute of Corrections undertook a 3-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. The final report summarizes the following:

- The characteristics of women in correctional settings.

- The ways in which gender makes a difference in current criminal justice practice.

- Multidisciplinary research and theory on women's lives that have significant implications for managing women in the criminal justice system.

FROM THE DIRECTOR

This is the first in a series of bulletins to address the needs of women offenders with regard to gender-specific policies, programs, and services. Like their pathways to crime, the challenges faced by women offenders differ from their male counterparts. Many women entering the criminal justice system are victims of domestic and sexual violence, suffer from psychological trauma, are substance abusers, are unmarried mothers of children under the age of 18, or a combination thereof.

Being responsive in the criminal justice system requires the acknowledgment of the realities of women's lives, including the pathways they travel to criminal offending and the relationships that shape their lives. Moreover, for women offenders to successfully navigate the criminal justice system and remain free citizens in the community requires providing a continuity of services that meet their specific needs.

–Morris L. Thigpen, Sr.

The National Institute of Corrections (NIC) is a center of correctional learning and experience. NIC advances and shapes effective correctional practice and public policy that respond to the needs of corrections through collaboration and leadership and by providing assistance, information, education, and training.

• Guiding principles and strategies for improving the system's responses to women offenders.

This bulletin summarizes the major findings of the report[1] and offers guidance to those throughout the criminal justice system who seek a more effective way to respond to the behavior and circumstances of women offenders. Policymakers from legislative, executive, and judicial branches of government and agency administrators should find this summary particularly useful. All are encouraged to obtain the full report for a more complete analysis of gender-responsive research and practice.

Approach

To construct a knowledge base that provides a foundation for gender-appropriate policy and practice, project staff reviewed multidisciplinary research literature in a broad range of areas, including health, family violence, substance abuse, mental health, trauma, employment, and education. This literature was analyzed to determine its application to gender responsiveness

in criminal justice practices (see sidebar "Defining Gender Responsiveness").

Additional data pertinent to managing women offenders within the criminal justice framework were collected through national focus groups and interviews with experts representing various criminal justice agencies. Project staff conducted more than 40 individual and group interviews with policymakers, managers, line staff, and women offenders in all phases of the criminal justice system throughout the country. Written documents that included official and technical reports concerning women offenders, policies and procedures, and existing academic research were then collected

and analyzed. Finally, the Practitioner Advisory Group, representing community corrections, jail, prison, and parole professionals, reviewed multiple drafts of these findings.

Potential Benefits of Gender-Responsive Practice

Study findings indicate that paying attention to the differences in male and female pathways into criminality and their differential responses to custody and supervision can lead to better outcomes for both men and women offenders in institutional and community settings. Policies, programs, and procedures that reflect empirical, gender-based differences can—

Defining Gender Responsiveness

Being gender responsive in the criminal justice system requires an acknowledgment of the realities of women's lives, including the pathways they travel to criminal offending and the relationships that shape their lives. To assist those who work with women in effectively and appropriately responding to this information, Bloom and Covington developed the following definition:

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.*

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* Bloom, B., and Covington, S. (2000). Gendered justice: Programming for women in correctional settings. Paper presented to the American Society of Criminology, San Francisco, CA, p. 11.

- Make the management of women offenders more effective.

- Enable correctional facilities to be more suitably staffed and funded.

- Decrease staff turnover and sexual misconduct.

- Improve program and service delivery.

- Decrease the likelihood of litigation against the criminal justice system.

- Increase the gender appropriateness of services and programs.

The Foundation for the Principles

To develop guiding principles and strategies, the gender-responsive strategies project reviewed and integrated the characteristics of women offenders, the key elements of criminal justice practice, and theories related to women's lives.

Characteristics of Women in the Criminal Justice System

The significant increase in the number of women under criminal justice supervision has called attention to the status of women in the criminal justice system and to the particular circumstances they encounter. The increasing numbers have also made evident the lack of appropriate policies and procedures for managing women offenders. Women offenders typically have low incomes and are undereducated and unskilled. They have sporadic employment histories and are

National Profile of Women Offenders

A national profile of women offenders reveals they are—

- Disproportionately women of color.

- In their early- to mid-thirties.

- Most likely to have been convicted of a drug-related offense.

- Individuals with fragmented family histories; other family members also may be involved with the criminal justice system.

- Survivors of physical and/or sexual abuse as children and adults.

- Individuals with significant substance abuse problems.

- Individuals with multiple physical and mental health problems.

- Unmarried mothers of minor children.

- Individuals with a high school degree or GED but with limited vocational training and sporadic work histories.

disproportionately women of color. They are less likely than men to have committed violent offenses and more likely to have been convicted of crimes involving drugs or property. Often, their property offenses are economically driven, motivated by poverty and by the abuse of alcohol and other drugs (see sidebar "National Profile of Women Offenders").

Women Offenders and Criminal Justice Practice

Two key findings emerge from an examination of the state of criminal justice practice regarding women. First, because of the overwhelming number of male offenders, the issues relevant to women are often overshadowed. Second, criminal justice agencies often have difficulty applying to women offenders the policies and procedures that

have been designed largely for the male population. Most systems lack a written policy on the management and supervision of women offenders. Further, in focus groups, a number of managers reported resistance to modifying policies to reflect more appropriate and effective responses to the behaviors and characteristics of women under supervision.

Gender differences in behavior, life circumstances, and parental responsibilities have broad implications for almost every aspect of criminal justice practice. The differences between men and women involved with the criminal justice system have been documented in terms of the levels of violence and threats to community safety in their offense patterns, responsibilities for children and other family members, interactions with staff,

and relationships with other offenders while incarcerated or under community supervision.

Women are more vulnerable to staff misconduct and have different programming and service needs, especially in terms of physical and mental health, substance abuse, recovery from trauma, and economic/vocational skills. While all offenders must confront the problems of reentry into the community, many of the obstacles faced by women offenders are specifically related to their status as women. The majority of women in correctional institutions are mothers, and a major consideration for these women is reunification with their children. The obstacles for these women are unique because their requirements for safe housing, economic support, medical services, and other needs must include the ability to take care of their children. These obstacles include system-level characteristics, such as the lack of programs and services designed and targeted for women, women's involvement with multiple human service agencies, and lack of community support for women in general.

In the full report, issues related to gender differences and their effects are described with regard to the following:

Criminal justice processing: Gender differences have been found in all stages of criminal justice processing, including crime definition, reporting, and counting; types of crime; levels of harm; arrest; bail; sentencing; community supervision; incarceration; and reentry into the community.[2] For example, women as a group commit crimes that are less violent than the crimes committed by their male counterparts. The Bureau of Justice Statistics reports that, according to victim accounts, only one of seven violent offenders is female. Drug offenses account for a greater proportion of the imprisonment of women than men, women have fewer acts of violence or major infractions in prison, and children play a more significant role in the lives of incarcerated women than those of men.

Classification and assessment procedures: Most of the classification and assessment instruments in use today were developed and validated for male offenders. Because these instruments were based on the behaviors of a male offender population, they are often unable to accurately assess either the risks or the needs of women offenders and tend to overclassify women, placing them at higher levels of custody or supervision than necessary. Moreover, most instruments do not assess the specific needs of women that are tied to their pathways to offending, specifically the interconnected problems of substance abuse, trauma and victimization, mental illness, relationship difficulties, and low self efficacy.

Women's services and programs: Substance abuse, family violence, and their struggle to support themselves and their children are the main factors that drive women into crime. More often than their male counterparts, women need gender-specific services such as protection from abusive partners, childcare services, access to reliable transportation, and realistic employment opportunities that allow for self-support. In general, research shows an insufficient number of programs for women under any type of supervision that will help them prepare for career-oriented training and address issues common to women offenders such as sexual abuse, victimization through violence, and low self-esteem.

Staffing and training: In terms of staff training, standard training protocols often neglect or minimize information about woman offenders. There is a perception among correctional staff that women offenders are more difficult to work with than their male counterparts. Preparing staff to work with women offenders requires increased knowledge about women that will help staff members develop the constructive attitudes and the interpersonal skills necessary for working with women under correctional supervision.

Staff sexual misconduct: In the past decade, the problems of staff sexual misconduct have received significant attention from the media, the public, and many correctional systems. Most of the published work describes the problem in the institutional setting; however, the problem exists throughout the criminal justice system. Although

the more publicized pattern of misconduct appears to involve male staff with female inmates, it is important to note that female officers have also been involved in serious misconduct. Sexual harassment may retraumatize women with a history of abuse and diminish their ability to heal and engage in programming. Further, standard procedures in correctional settings (e.g., searches, restraints, and the use of isolation) can act as triggers to retraumatize women who have histories of abuse.

Theoretical Perspectives Related to Women's Lives

Gender-responsive principles and strategies are grounded in three intersecting perspectives: the pathways perspective, relational theory and female development, and trauma and addiction theories.

The Pathways Perspective

Research on women's pathways into crime indicates that gender has a significant role in shaping criminality. Women and men enter the criminal justice system via different pathways. Among women, the most common pathways to crime are based on survival of abuse and poverty and substance abuse. Recent research establishes that, because of their gender, females are at greater risk of experiencing sexual abuse, sexual assault, domestic violence, and single-parent status. For example, girls and young women often experience sexual abuse in their homes;

in adulthood, women experience abuse in their relationships with significant others. Pathways research has identified key issues in producing and sustaining female criminality, such as histories of personal abuse, mental illness tied to early life experiences, substance abuse and addiction, economic and social marginality, homelessness, and dysfunctional relationships.

Relational Theory and Female Development

Theories that focus on female development, such as the relational model, posit that the primary motivation for women throughout life is the establishment of a strong sense of connection with others. Relational theory developed from an increased understanding of gender differences and, specifically, of the different ways in which women and men develop psychologically. According to relational theory, females develop a sense of self and self-worth when their actions arise out of, and lead back into, connections with others. Therefore, connection, not separation, is the guiding principle of growth for girls and women.

The importance of understanding relational theory is reflected in the recurring themes of relationship and family in the lives of women offenders. Disconnection and violation rather than growth-fostering relationships characterize the childhood experiences of most women in the criminal justice system. Women are far more likely

than men to be motivated by relational concerns. For example, women offenders who cite drug abuse as self-medication often discuss personal relationships as the cause of their pain. The relational aspects of addiction are also evident in research indicating that women are more likely than men to turn to drugs in the context of relationships with drug-abusing partners to make themselves feel connected.

A relational context is critical to successfully address the reasons why women commit crimes, the motivations behind their behaviors, how they can change their behavior, and their reintegration into the community.

Trauma and Addiction Theories

Trauma and addiction are interrelated issues in the lives of women offenders. Although they are therapeutically linked, these issues historically have been treated separately. Trauma and addiction theories provide the integration and foundation for gender responsiveness in the criminal justice system. Trauma has been the focus of a number of studies, and various experts have written about the process of trauma recovery.[3] Because the traumatic syndromes have basic features in common, the recovery process also follows a common pathway. A generic definition of addiction as "the chronic neglect of self in favor of something or someone else" is helpful when working with women.[4] Some

women use substances to numb the pain experienced in destructive relationships.[5] Women who abuse substances are also vulnerable targets for violence.

A New Vision: Guiding Principles for a Gender-Responsive Criminal Justice System

NIC's report on gender-responsive strategies documents the need for a new vision for the criminal justice system—one that recognizes the behavioral and social differences between men and women offenders that have specific implications for gender-responsive policy and practice.

Principles and Strategies

Empirically based evidence drawn from a variety of disciplines and effective practice suggests that addressing the realities of women's lives through gender-responsive policy and programs is fundamental to improved outcomes at all criminal justice phases. The following guiding principles are designed to address concerns about the management, supervision, and treatment of women offenders in the criminal justice system. Together with the general strategies (see sidebar "General Strategies for Implementing Guiding Principles"), the guiding principles provide a blueprint for a gender-responsive approach to the development of criminal justice policy.

Guiding Principle 1: Acknowledge That Gender Makes a Difference

The foremost principle in responding appropriately to women is to acknowledge the implications of gender throughout the criminal justice system. The criminal justice field has been dominated by the rule of parity: Equal treatment is to be provided to everyone. However, this does not necessarily mean that the exact same treatment is appropriate for both women and men. The data are very clear concerning the distinguishing aspects of men and women offenders. They come into the criminal justice system via different pathways; respond to supervision and custody differently; exhibit differences in terms of substance abuse, trauma, mental illness, parenting responsibilities, and employment histories; and represent different levels of risk within both the institution and the community. To successfully develop and deliver services, supervision, and treatment for women offenders, we must first acknowledge these gender differences.

The Evidence

The differences between women and men are well documented across a variety of disciplines and practices, and evidence increasingly shows that the majority of these differences are due to both social and environmental factors. Although certain basic issues related to health, such as reproduction, are influenced by physiological differences, many of the observed behavior disparities are the result of gender-related differences, such as socialization, gender roles, gender stratification, and gender inequality. The nature and extent of women's criminal behavior and the ways in which they respond to supervision reflect such gender differences, including the following:

- Women and men differ in levels of participation, motivation, and degree of harm caused by their criminal behavior.

- Women's crime rates, with few exceptions, are much lower than men's crime rates.

- Women's crimes tend to be less serious (i.e., less violence, more property- and drug-related offenses) than men's crimes. The gender differential is most pronounced in violent crime, where women's participation is profoundly lower.

- The interrelationship between victimization and offending appears to be more evident in women's lives. Family violence, trauma, and substance abuse contribute to women's criminality and shape their patterns of offending.

- Women respond to community supervision, incarceration, and treatment in ways that differ from those of their male counterparts. Women are less violent while in custody but have higher rates of disciplinary infractions for less serious rule violations. They are influenced by their responsibilities and concerns for

their children, by their relationships with staff, and by their relationships with other offenders.

Guiding Principle 2: Create an Environment Based on Safety, Respect, and Dignity

Research from a range of disciplines (e.g., physical health, mental health, and substance abuse) has shown that safety, respect, and dignity are fundamental to behavioral change. To improve behavioral outcomes for women, it is critical to provide a safe and supportive setting for supervision. A profile of women in the criminal justice system indicates that many have grown up in less-than-optimal family and community environments. In their interactions with women offenders, criminal justice professionals must be aware of the significant pattern of emotional, physical, and sexual abuse that many of these women have experienced. Every precaution must be taken to ensure that the criminal justice setting does not reenact women offenders' patterns of earlier life experiences. A safe, consistent, and supportive environment is the cornerstone of an effective corrective process. Because of their lower levels of violent crime and their low risk to public safety, women offenders should be supervised with the minimal restrictions required to meet public safety interests.

The Evidence

Research from the field of psychology, particularly trauma studies, indicates that environment cues

behavior. There is now an understanding of what an environment must reflect if it is to affect the biological, psychological, and social consequences of trauma. Because the corrections culture is influenced by punishment and control, it is often in conflict with the culture of treatment. The criminal justice system is based on a control model, whereas treatment is based on a model of behavioral change. These two models must be integrated so that women offenders can experience positive outcomes. This integration should acknowledge the following facts:

- Substance abuse professionals and the literature report that women require a treatment environment that is safe and nurturing. They also require a therapeutic relationship that reflects mutual respect, empathy, and compassion.

- A physically and psychologically safe environment contributes significantly to positive outcomes for women.

- Safety is identified as a key factor in effectively addressing the needs of domestic violence and sexual assault victims.

- Custodial misconduct has been documented in many forms, including verbal degradation, rape, and sexual assault.

- Assessment and classification procedures often do not recognize the lower level of risk to public safety presented by women both in the nature of their offenses and in their behavior

while under supervision. This can result in placement of women in higher levels of custody than necessary in correctional institutions and in inappropriate assessments of their risk to the community.

- Women offenders' needs for personal safety and support suggest the importance of safe and sober housing.

Guiding Principle 3: Develop Policies, Practices, and Programs That Are Relational and Promote Healthy Connections to Children, Family, Significant Others, and the Community

Understanding the role of relationships in women's lives is fundamental because the theme of connections and relationships threads throughout the lives of women offenders. When the concept of relationship is incorporated into policies, practices, and programs, the effectiveness of the system or agency is enhanced. This concept is critical when addressing the following:

- Reasons why women commit crimes.

- Impact of interpersonal violence on women's lives.

- Importance of children in the lives of women offenders.

- Relationships between women in an institutional setting.

- Process of women's psychological growth and development.

- Environmental context needed for effective programming.

- Challenges involved in reentering the community.

The Evidence

Studies of women offenders highlight the importance of relationships and the fact that criminal involvement often develops through relationships with family members, significant others, or friends. This is qualitatively different from the concept of "peer associates," which is often cited as a criminogenic risk factor in assessment instruments. Interventions must acknowledge and reflect the impact of these relationships on women's current and future behavior. Important findings regarding relationships include the following:

- Developing mutual relationships is fundamental to women's identity and sense of worth.

- Women offenders frequently suffer from isolation and alienation created by discrimination, victimization, mental illness, and substance abuse.

- Studies in the substance abuse field indicate that partners, in particular, are an integral part of women's initiation into substance abuse, continuing drug use, and relapse. Partners can also influence the retention of women in treatment programs.

- The majority of women under criminal justice supervision are mothers of dependent children. Many women try to maintain their parenting responsibilities while under community supervision or while in custody, and

many plan to reunite with one or more of their children on their release.

- Studies have shown that relationships among women in prison are also important. Women often develop close personal relationships and pseudo families as a way to adjust to prison life. Research on prison staff indicates that correctional personnel often are not prepared to provide appropriate responses to these relationships.

Guiding Principle 4: Address Substance Abuse, Trauma, and Mental Health Issues Through Comprehensive, Integrated, and Culturally Relevant Services and Appropriate Supervision

Substance abuse, trauma, and mental health are three critical, interrelated issues in the lives of women offenders. These issues have a major impact on a woman's experience of community correctional supervision, incarceration, and transition to the community in terms of both programming needs and successful reentry. Although they are therapeutically linked, these issues historically have been treated separately. One of the most important developments in health care over the past several decades is the recognition that a substantial proportion of women have a history of serious traumatic experiences. These traumatic experiences play a vital and often unrecognized role in the evolution of a woman's physical and mental health problems.

The Evidence

The salient features that propel women into crime include family violence and battering, substance abuse, and mental health issues. Other considerations include the following:

- Substance abuse studies indicate that trauma, particularly in the form of physical or sexual abuse, is closely associated with substance abuse disorders in women. According to various studies, a lifetime history of trauma is present in approximately 55 to 99 percent of female substance abusers.[6]

- Research shows that women who have been sexually or physically abused as children or adults are more likely to abuse alcohol and other drugs and may suffer from depression, anxiety disorders, and posttraumatic stress disorder.

- Co-occurring disorders complicate substance abuse treatment and recovery. An integrated program concurrently addresses both disorders through assessment, treatment, referral, and coordination.

- Research conducted by the National Institutes of Health indicates that gender differences, as well as race and ethnicity, must be considered in determining appropriate diagnosis, treatment, and prevention of disease.

- Experience in the substance abuse field has shown that treatment programs are better able to engage and retain women clients if programs are culturally targeted.

Guiding Principle 5: Provide Women With Opportunities To Improve Their Socioeconomic Conditions

Addressing both the social and material realities of women offenders is an important aspect of correctional intervention. The woman offender's life is shaped by her socioeconomic status; her experience with trauma and substance abuse; and her relationships with partners, children, and family. Most women offenders are disadvantaged economically, and this reality is compounded by their trauma and substance abuse histories. Improving socioeconomic outcomes for women requires providing opportunities through education and training that will enable them to support themselves and their children.

The Evidence

Most women offenders are poor, undereducated, and unskilled. Many have never worked, have sporadic work histories, or have depended on public assistance. Additional factors that affect their socioeconomic conditions include the following:

- Most women offenders are heads of their households. In 1997, nearly 32 percent of all female heads of households lived below the poverty line.

- Research in the field of domestic violence has shown that availability of material and economic necessities—including housing, financial support, educational

and vocational training, and job development—is essential to women's ability to establish lives apart from their abusive partners.

- Research on the effectiveness of substance abuse treatment has noted that, without strong material support, women presented with economic demands are more likely to reoffend and discontinue treatment.

- Recent changes in public assistance due to welfare reform (e.g., Temporary Assistance for Needy Families programs created under the Welfare Reform Law of 1996) affect women disproportionately. They negatively affect women's ability to support themselves and their children by making them ineligible for benefits. Even when eligible, women may not be able to apply for benefits until they have been released from custody or community supervision. They cannot gain access to treatment or medical care without Medicaid. Additionally, their convictions may make them ineligible for public housing or Section 8 housing subsidies.

Guiding Principle 6: Establish a System of Community Supervision and Reentry With Comprehensive, Collaborative Services

Women offenders face specific challenges as they reenter the community from jail or prison. Women on probation also face challenges in their communities. In addition to the stigma of being identified as an offender, they may carry additional

burdens, such as single-parent status, decreased economic potential, lack of targeted services and programs, responsibilities to multiple agencies, and a general lack of community support. Navigating through myriad systems that often provide fragmented services and have conflicting requirements can interfere with supervision and successful reintegration. There is a need for wraparound services—that is, a holistic and culturally sensitive plan for each woman that draws on a coordinated range of resources in her community. Types of organizations that should work as partners to assist women who are reentering the community include the following:

- Mental health providers.

- Alcohol and other drug treatment programs.

- Programs for survivors of physical and sexual violence.

- Family service agencies.

- Emergency shelter, food, and financial assistance programs.

- Educational organizations.

- Vocational training and employment services.

- Health care.

- The child welfare system, childcare, and other children's services.

- Transportation.

- Self-help groups.

- Consumer-advocacy groups.

- Organizations that provide leisure and recreation options.

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- Faith-based organizations.
- Community service clubs.

The Evidence

Challenges to successful completion of community supervision and reentry for women offenders have been documented in the research literature. These challenges can include housing, transportation, childcare, and employment needs; reunification with children and other family members; peer support; and fragmented community services. There is little coordination among community service systems linking substance abuse, criminal justice, public health, employment, housing, and child welfare. Other considerations for successful reentry and community supervision include the following:

- Studies from such fields as substance abuse and mental health have found that collaborative, community-based programs offering a multidisciplinary approach foster successful outcomes among women. Research has shown that women offenders have a great need for comprehensive, community-based wraparound services. This coordinated or case management approach has been found to work effectively with women because it addresses their multiple treatment needs.

- Substance abuse research shows that an understanding of the interrelationships among the women, the program, and the community is critical to the success of a comprehensive approach.

- Data from woman offender focus groups indicate that failure to meet the following needs puts women at risk for criminal justice involvement: housing, physical and psychological safety, education, job training and opportunities, community-based substance abuse treatment, and economic support. All of these factors—in addition to positive role models and a community response to violence against women—are critical components of a gender-responsive crime prevention program.

Policy Considerations

As agencies and systems examine the impact of their operations, policy-level changes are a primary consideration (see sidebar "Gender-Responsive Policy Elements").

General Strategies for Implementing Guiding Principles

The following general strategies can be applied to implementation of each guiding principle:

Adopt	Adopt each principle as policy on a systemwide and programmatic level.
Support	Provide full support of the administration for adoption and implementation of the gender-responsive principles.
Resources	Evaluate financial and human resources to ensure that implementation and allocation adjustments are adequate to accommodate any new policies and practices.
Training	Provide ongoing training as an essential element in implementing gender-responsive practices.
Oversight	Include oversight of the new policies and practices in management plan development.
Congruence	Conduct routine procedural review to ensure that procedures are adapted, deleted, or written for new policies.
Environment	Conduct ongoing assessment and review of the culture/environment to monitor the attitudes, skills, knowledge, and behavior of administrative, management, and line staff.
Evaluation	Develop an evaluation process to access management, supervision, and services.

Gender-Responsive Policy Elements

Create parity: Develop an understanding of parity or "equal treatment" that stresses the importance of equivalence (of purpose and effort) rather than sameness (in content).

Commit to women's programs: Create an executive-level position and provide appropriate resources, staffing, and training to ensure that women's issues are a priority.

Develop procedures that apply to women offenders: Review existing policies and procedures and develop operating procedures that address the needs of women offenders in such areas as clothing, personal property, hygiene, exercise, recreation, and contact with children and family.

Respond to women's pathways: Develop policies, programs, and services that respond specifically to women's pathways in and out of crime and to the contexts of their lives that support criminal behavior.

Consider community: Develop strong partnerships for community and transitional programs that include housing, training, education, employment, and family support services.

Include children and family: Facilitate the strengthening of family ties, particularly between mothers and their children.

Conclusion: Addressing the Realities of Women's Lives Is the Key to Improved Outcomes

This bulletin documents the importance of understanding and acknowledging differences between men and women offenders and the impact of those differences on the development of gender-responsive policies, practices, and programs in the criminal justice system. Analysis of available data indicates that addressing the realities of women's lives through gender-responsive policy and practice is fundamental to improved outcomes at all phases of the criminal justice system. This review maintains that consideration of women's and men's different pathways into criminality, their differential responses to custody and supervision, and their differing program requirements can result in a criminal justice system that is better equipped to respond to both men and women offenders.

The guiding principles and strategies outlined in the full report and this bulletin are intended to be a blueprint for the development of gender-responsive policy and practice. They can serve as the foundation for improving the ways in which criminal justice agencies manage and supervise women offenders in both institutional and community settings.

Ultimately, commitment and willingness on the part of policymakers and practitioners will be needed to actualize the vision and implement the principles and strategies of a gender-responsive criminal justice system. Reducing women's involvement in the criminal justice system will benefit the women themselves, their communities, and society. Such efforts will develop a more effective criminal justice system and generate positive effects for generations to come.

Notes

1. See Bloom, B., Owen, B., and Covington, S. (2003). *Gender-Responsive Strategies: Research, Practice, and Guiding Principles for Women Offenders*. Washington, DC: National Institute of Corrections. NIC accession no. 018017.

2. Harris, K. (2001). "Women offenders in the community: Differential treatment in the justice process linked to gender." Information session on supervision of women offenders in the

The full text of *Gender-Responsive Strategies: Research, Practice, and Guiding Principles for Women Offenders* may be obtained free of charge from the National Institute of Corrections Information Center. The Information Center can be reached at 800–877–1461. Information on this report and other available documents can be found on NIC's Web site at www.nicic.org.

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6. See Brown, V., Melchior, L., and Huba, G. (1999). Level of burden among women diagnosed with severe mental illness and substance abuse. *Journal of Psychoactive Drugs* 31(1): 31–40. Browne, A., Miller, B., and Maguin, E. (1999). Prevalence and severity of lifetime physical and sexual victimization among incarcerated women. *International Journal of Law and Psychiatry* 22(3–4): 301–322. Najavits, L.M., Weiss, R.D., and Shaw, S.R. (1997). The link between substance abuse and post-traumatic stress disorder in women: A research review. *American Journal on Addictions* 6(4): 273–283. Owen, B., and Bloom, B. (1995). Profiling women prisoners: Findings from national survey and California sample. *The Prison Journal* 75(2): 165–185. Teplin, L.A., Abram, K.M., and McClelland, G.M. (1996). Prevalence of psychiatric disorders among incarcerated women. *Archives of General Psychiatry* 53(6): 505–512.

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Reentering Society:
Ensuring A Safe And Successful Return To The
Community And Reducing Recidivism

Presenter: Melanni Bolton, Director/Corporate Liaison

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From Prison to Home

There are five (5) components that affect coming home from Prison:

- Families
- Children
- Community
- Employment/Housing
- Psychological impact of being incarcerated

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Families

- Big impact on families
  - Absent parents
  - Rely on social welfare services
- Finances at home fall apart
  - Conflict with family members
- Family members pass away, move away
  - Lose interest trying to staying connected

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Children

- Children are the most affected
- Ages 2-6
  - Separation anxiety, traumatic stress, survivor's guilt
- Ages 7-10
  - Developmental regressions, poor self-concept, acute traumatic stress reactions, impaired ability to overcome future trauma
- Ages 11-14
  - Rejection on limits of behavior, trauma-reactive behaviors
- Ages 15-18
  - Premature termination of dependency relationship with parent, intergenerational crime and incarceration

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Community

- Community is one of the biggest adjustments
- Those that are 5 or more years incarcerated often have fears and anxiety when re-entering community
- Simple tasks like purchasing groceries and using a cell phone can create anxiety
- Teach life skill classes such as:
  - Shopping, budgeting, computer classes, taking public transportation, social skills

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Employment/Housing

- Employment and housing is the most challenging component
- Assessment is completed during the employment orientation session
  - All returning citizens are assessed on their skill set, academics (reading, writing and comprehension)
  - Previous work history, education, housing needs
  - What they would like to do for a living now

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Employment/Housing

- Most returning citizens do not have a high enough education to secure adequate employment
  - Ultimately will effect housing if not secured
  - Link community partners who assist with housing
  - Shortage of housing in our communities
- Opportunities for returning citizens to obtain their GED, attend trade schools (CDL, Welding etc.), register for college

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Psychological Impact of Being Incarcerated

- Creates serious psychological risks for prisoners
  - Many experience panic, anxiety, rage, depression and hallucinations
  - Confined for long periods of time (some up to 25 years)
- Citizens come to reentry programs undiagnosed or untreated
- Concerns around costs for inmates to access medical and mental health care
- Prisoners enter prison as indigents, arrive to reentry centers in the same capacity
- Medicaid, Medicare, Social Security and similar resources are discontinued until they are fully released

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Psychological Impact of Being Incarcerated

- Many reentry centers are not equipped to handle severe mental health cases
  - Reentry facilities rely heavy on community partners to assist
- Majority of state prisons and unknown number of jails who require prisoners to pay a co-pay of $2 to $5 for medical visits
  - An attempt to reduce frivolous use of medical services (fees can be waived for emergencies)
  - Prisoners generally pay for these services from minimal wages earned doing prison jobs
  - Cost of visits can deter from seeking preventative and routine care
- Imperative that reentry facilities have some type of assessment in place
  - Determines the mental health needs of each individual
  - Utilizes TCU (Texas Christian University) to determine the returning citizens' criminal thinking level
  - Pre- and post-assessments help determine if criminal way of thinking changed

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Women and Reentry

- Face a host of challenges when they leave jail/prison and return to communities
- Current systems do not always address specific challenges
- Struggle with substance abuse and mental health
- Often linked to history of physical or sexual abuse
  - Beginning in childhood, extending into adulthood
- Most state and local reentry programs lack the significant trauma-informed behavioral health component
- We rely heavily on our community partners for mental health and substance abuse treatment
- Also struggle with reconnecting with children

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Men and Reentry

- Each man's story of reentry is unique
- Most exiting male prisoners are African American and/or Latino
  - Typically no strangers to the criminal justice system
  - Multiple prior convictions
- Some access to programs behind bars
  - Related to education
  - Employment readiness
  - One in three expressed interest in programs that were unavailable
- At the time of release, housing was a challenge
  - Housing stability diminished over time
  - Resides where drug dealing is problematic
  - Jobs are scarce

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Reentry Needs

- Birth Certificate
- Social Security Card
- State Identification
- Suitable Release Plan
- Stable employment
- Medications
- Clothes
- Hygiene Products

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The End

Creating opportunities for offenders

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Pivot Program

George Chochos
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PIVOT PROGRAM

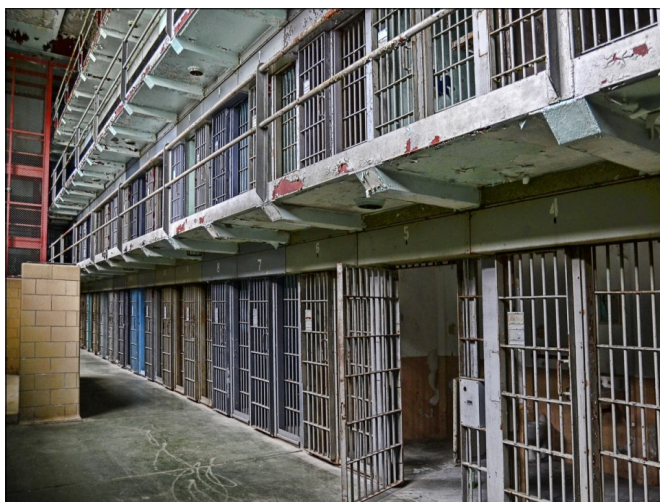GEORGETOWN UNIVERSITY

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AROUND

Bank robbery suspect caugh

East Greenbush *Albany man arrested after deportation from Canada*

By TIM O'BRIEN
Staff writer

An Albany man charged with robbing two banks and suspected of two other Capital Region hold-ups during the past 10 months was arrested seconds after he was deported from Canada Friday.

Police said George T. Chochos, 26, fled the United States after learning

CHOCHOS

sweat shirts believed to have been used in the robberies, $3,000 in stolen cash and the silver 1998 Chevrolet Malibu believed to have been used as a getaway car were seized by police.

Investigators said Chochos disguised himself in the robberies by wearing the gloves, the hooded sweat shirts, the hats and the scarves, and that he even darkened his mustache with mascara.

"These were well-planned bank robberies by a very smart man who thought he could get away with it indefinitely," said East Greenbush Police Chief Christopher Lavin. "Every robbery left some clues behind. It left some very valuable footage."

By committing repeated robberies and hitting the same banks, the

school track star — sprint to a car in a nearby accountant's ing lot immediately after the Greenbush robberies.

Chochos had told Cana_ border agents that he had criminal record and was not wa ed for any crimes. In fact, Lav said, he has a felony drug charge o his record and a string of misde meanor crimes.

Canadian authorities — who had been correctly told by Chochos where he would be staying with an acquaintance in Montreal — held a hearing Friday morning on deporting Chochos as an undesirable alien. Citing his criminal record, a magistrate ordered him immediately deported — a much faster process than extradition.

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NEW HAVEN REGIST

Sunday, November 17, 2013 $2.00   FACEBOOK.COM/NEWHAVENREGISTER   TWITTER.COM/NHREGISTER

NEW HAVEN

'FROM JAIL TO YALE'

George Chochos is photographed at the Yale Divinity School campus in New Haven.
ARNOLD GOLD—NEW HAVEN REGISTER

Slide 1

Yale Divinity School

Giving   Calendar   News & Media   Continuing Education   Offices

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🏠 › NEWS & MEDIA › NEWS › FROM SING SING TO YALE

News

Reflections Magazine

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CONTACT

Communications Office
(203) 436-8379
tom.krattenmaker@yale.edu

From Sing Sing to Yale

Fifteen years ago, George Chochos peered out of the window of his cell at Sing Sing Prison in New York and reflected on his life. On May 25, 2016, Chochos '16 M.Div. collected his Yale Divinity School degree and one of the school's top honors—the Wolcott Calkins Prize for "excellence in clear and vigorous pulpit speaking."

George Chochos '16 M.Div. at Commencement 2016 / photo by Jean Santopatre '16 M.Div.

Slide 2

Partnerships

MINORITY BUSINESS DEVELOPMENT AGENCY
U.S. DEPARTMENT OF COMMERCE

GEORGETOWN UNIVERSITY

17 89

PRISONS & JUSTICE INITIATIVE

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Slide 3

Selection Process

- Initial selection criteria:
  – DC resident
  – Released within past 2 years
  – High school diploma, GED or equivalent
  – *Interest in entrepreneurship, self-directed*
  – *Strong interpersonal and communication skills*
  – *Emotional readiness*

Solicit referrals → Establish eligiblity → Candidate interviews → Academic assessment → Second-round interviews → Committee review/ selection → Candidates notified of admission
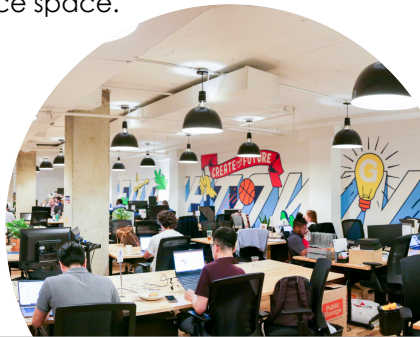
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Pivot as part of the Georgetown start-up community

- The Venture Lab offers a community of entrepreneurs but no dedicated classroom or private office space.

Pivot Program Curriculum 2019-20

Business Fundamentals
- Strategy
- Economics
- Marketing
- Basic Accounting
- Management Skills

Liberal Arts
- Literature
- Philosophy/Logic
- Government
- History
- Psychology

Entrepreneurship
- Evaluating opportunities
- Developing the business model
- Forms of ownership/funding

Professional/Life Skills
- Personal finance
- Business communications
- Workplace etiquette
- Self-advocacy, self-regulation
- Career management

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PIVOT PROGRAM
Employers

TORTI GALLAS + PARTNERS   Flikshop   NORTHERN real estate urban ventures
THE EMORY BEACON OF LIGHT
CCE Council for Court Excellence   JUSTICE POLICY INSTITUTE
PREQUEL RESTAURANT INCUBATOR   CIC   Thrive DC
fifth tribe   ONE TENT HEALTH   UNCHAINED media collective
Common Cause   NTCHRICH COMMUNICATIONS   GOOD Projects

Partners

EVERFI   lyft   Suited for CHANGE   JUBILEE JOBS

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Well-educated, engaged, emotionally-ready for the challenges of the workplace

- Understand basic elements of business, financial literacy
- Critical thinking and communications skills
- Understand appropriate workplace behavior
- Develop problem-solving and management skills
- How to assess career and commercial opportunities
- How to set and achieve goals

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PIVOT PROGRAM

GEORGETOWN UNIVERSITY
1789

THE EFFI BARRY
TRAINING INSTITUTE

Mayor's Office on Returning Citizen's Affairs

Frank Petersen
Outreach Specialist

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TRAINING INSTITUTE

**READY Center
DC Department of Corrections**

Eric Weaver
Deputy Director

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THE EFFI BARRY
TRAINING INSTITUTE

Thrive DC ™
At the Heart of a New Start

1525 Newton Street, NW
Washington, DC 20010
202-737-7311 x522
www.ThriveDC.org

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What is Thrive DC?

Thrive DC's mission

To prevent and end homelessness by providing vulnerable individuals with a comprehensive range of services to help stabilize their lives. Thrive DC envisions a city in which the community unites to ensure that vulnerable individuals have the necessary support and resources to lead fulfilling and stable lives free of homelessness.

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Thrive DC Services

- Emergency Services:
  – Meals
  – Showers
  – Laundry
  – Hygiene supplies
  – Clothing
  – Mail
  – Shelter / housing assistance
  – Emergency pantry
  – Crisis management

- Step-up services
  – Meals
  – Substance Use /Recovery groups
  – Work Readiness program
  – Real Opportunities – Culinary job training
  – Reentry -Women In New Directions (WIND)
  – Victims Assistance for Homeless
  – Partner Provider support

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Emergency Services

Helping Clients in Crisis

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Emergency Services

- Daily Breads/Daily Needs
- The only full service meals program operating five days a week in the Columbia Heights/Adams Morgan/Petworth areas
- One of the lowest barrier meal programs offering the breadth of services that Thrive DC provides:
  - Breakfast daily
  - Lunch to-go daily
  - Dinner (for women and children only) daily
  - Laundry service - daily
  - Showers -daily
    - Emergency hygiene supplies – daily
    - Mail service - daily

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LINKS Program

- Designed to help stabilize clients by connecting them to long-term services needed to help regain stability and independence
  - Clients are connected to a wide variety of services (i.e., mental health, housing, substance abuse, etc.)
  - Weekly enrichment activities - Yoga Studio and Art Therapy
  - Weekly educational presentations and support groups
  - Working one-on-one with case managers
  - Partner providers offer on-site services for clients (e.g., dental screenings, legal assistance, HIV testing, etc.)

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Pantry Programs

- Pantry programs and supplemental food opportunities
- Homelessness programs designed to address the needs of those who find themselves in need of supplemental groceries in order to make ends meet
- Food Pantry - Wednesdays
- Grocery bags of staple items are provided to individuals who need additional nutritional support
- Emergency Food Assistance – available daily
- We respond to referrals from other agencies and any request for Emergency provisions for families or individuals
- Fresh Food Fridays – fresh fruits and vegetables gleaned from area farmers markets, grocery stores and other donors are set out and clients are able to choose from a variety of lovely fresh produce

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Victims Assistance

- Goals:
  - To help homeless victims of crime navigate and engage with appropriate resources, so that victims are not re-victimized by the system's neglect of them
  - To meet victims' physical and psychological needs associated with their victimization and their underlying issues of homelessness, and ultimately
  - To give victims an opportunity to successfully reintegrate into community as restored individuals

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Step up Services

Helping clients take step toward independence

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Workforce Development

- Real Opportunity Culinary/Food Service Training
  - This employment training program embodies our commitment to ending homelessness by providing individuals with the comprehensive support, rigorous training, and life-skills coaching needed to successfully enter the workforce and become self-sufficient.
  - Six weeks of practical application training – food handlers certification
  - Eight weeks of externship experience
- Employment Assistance
  - Computer literacy workshops (English and Spanish)
  - Resume building workshops
  - Job search assistance
  - Mock interviews
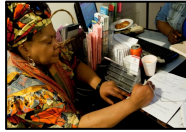
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Reentry Support

- Women In New Directions (WIND)
  - Life skills
  - Employment readiness
  - Customer service certification
  - Internship
  - Assistance with job placement

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Substance Use and Recovery

- The Substance use and Recovery program meet three times a week to offer psycho-educational groups designed to help individuals work toward and maintain their sobriety.

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Computer Lab

- Six hours a day, five days a week, clients are provided access to computers for:
  - Job searches
  - Resume building
  - Conducting business
  - Connecting with Family & Friends
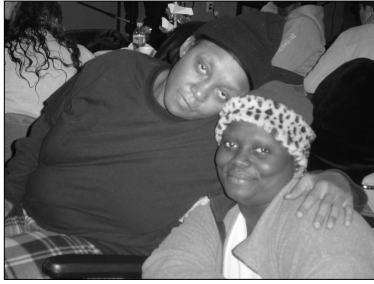 - Advocacy efforts

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Many Hands – Volunteer Program

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Thrive DC®
At the Heart of a New Start

To regain a portion of our human dignity is priceless
-Linda, Thrive DC client

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