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## Introduction

# Next Steps in Gender- Responsive Classification Models

by Patricia Van Voorhis, Ph.D.

Without question, the emergence of several dynamic risk/needs assessments during the 1990s dramatically changed the face of correctional practice. Assessments such as the Level of Service Inventory (LSI-R) (Andrews and Bonta, 1995) and the Northpointe COMPAS (Brennan, Dieterich, and Oliver, 2006) continued the task of identifying offender risk that had begun decades earlier through static offense-based assessments. (Bonta, 1996.) In contrast to the static instruments, however, the new dynamic risk/needs assessments added offender needs to the list of assessment predictors. Key to this innovation was the fact that the risk/needs assessment not only identified offender risk, but also alerted correctional practitioners to the needs and problems that would likely bring offenders back into the system if not treated. In other words, with the advent of the dynamic risk/needs assessments, the field had a road map of sorts for reducing offender risk levels. Subsequent research showed that when dynamic (changeable through interventions) risk/need factors (e.g., criminal thinking, criminal associates, financial needs, employment, education, accommodations, family issues, and use of leisure time) were addressed successfully

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## Analysis

# Implementing the Women's Risk/Needs Assessment (WRNAs): Early Lessons From the Field

by Patricia Van Voorhis, Ph. D., Ashley Bauman, Emily M. Wright, Ph. D., and  
Emily J. Salisbury, Ph. D.

The National Institute of Corrections (NIC), in cooperation with the University of Cincinnati (UC), recently announced the completion of two Women's Risk/Needs Assessments (WRNAs):

1. A full risk/needs assessment of both gender-neutral and gender-responsive factors; and
2. A supplemental risk/needs assessment for use with gender-neutral assessments such as the Northpointe COMPAS (Brennan, Dieterich, and Oliver, 2006) and the LSI-R (Andrews and Bonta, 1995).

Both forms are available in separate versions for probation, prison, and pre-release populations. (See [www.UC.edu/womenoffenders](http://www.UC.edu/womenoffenders).) (For ease of presentation, we will be referring to both the stand-alone version, (1) above, and the supplement, (2) above, as WRNAs throughout the remainder of this article.)

## **Offender Rehabilitation Paradigms**

The WRNAs are the products of an ambitious, multiyear research and development effort that also involved policy and planning teams in four states. They were designed to incorporate two paradigms of offender rehabilitation, namely:

1. The principles of effective intervention, which emerged from the

meta-analytical research of Canadian scholars such as Don Andrews, James Bonta, and Paul Gendreau. (See Andrews and Bonta, 2007.)

2. The paradigm stressing the importance of women's unique "pathways to crime," which recognized the work of feminist criminologists such as Kathleen Daly, Meda Chesney-Lind, Joanne Belnap, and Merry Morash as well as several who developed the gender-responsive model put forward by the National Institute of Corrections. (Bloom, Owen, and Covington, 2003.)

The link between these two paradigms is largely through the needs principle, one of the key directives of the principles of effective interventions, and recognizes that the treatment of needs predictive of future offending is essential to the task of changing offenders. However, the gender-responsive/pathways model maintains that women's unique needs are not adequately tapped by the current generation of risk/needs assessments. (See Salisbury and Van Voorhis, 2009.) In response, the WRNAs identify such needs as:

- Trauma and abuse;
- Unhealthy relationships;

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- Parental stress;
- Depression;
- Safety; and
- Personal strengths.

The WRNA construction validation research found that assessments of the additional needs made statistically significant contributions to the gender-neutral assessments. (Van Voorhis, Wright, Salisbury and Bauman, forthcoming.)

### Implementation Issues

Once the NIC/UC assessments became available, many correctional agencies began the task of integrating them into their current classification and case-management protocols. It quickly became apparent that it was one thing to construct the assessment tools and quite another to implement them. Indeed, agencies seeking to implement WRNAs became involved in intense organizational decision-making and planning. Issues encountered in planning for the full implementation of these tools involved the following:

- Deliberations about whether it would be appropriate to use separate risk/needs tools for men and women;
- Decisions about how the tools were to be used (risk assessment, needs assessments, or both);
- Planning training approaches to building staff competencies;
- Commitments to appropriate use of the tools;

- Developing quality control measures to protect the fidelity of the assessment and interview process; and
- Developing and implementing programs and services to address the needs targeted by the assessments.

Our involvement with these state and local agencies took place at agency conference tables and among project staff members at the University of Cincinnati. They often involved officials at the National Institute of Corrections as well as known scholars of gender-responsive approaches to corrections.

This article summarizes these many experiences according to the most common issues and includes suggestions for addressing them. The suggestions put forward below are those recommended by correctional administrators, practitioners, and scholars. Research from both gender-neutral and gender-responsive bodies of work, along with the actual experiences in implementing the tools, also informed these guidelines.

### Shift in Approach to Corrections

As we observed agencies grapple with various challenges to implementation, it became apparent that use of the assessments was actually part of a paradigm shift in their philosophical and programmatic approach to corrections, one that needed to represent optimal recognition of the notion that “gender matters.” (Bloom et al., 2003.) The gender-responsive assessments also gave new meaning to key correctional notions of high risk and dynamic risk/need factors. The UC/NIC research

found that it was not entirely accurate to describe the high-risk woman simply as one who had an extensive prior record and/or committed a serious offense. In fact, one of the most obvious and consistent findings across the construction validation studies was that high-need, marginalized, and seriously troubled women were more likely to incur prison adjustment problems and recidivism. (Van Voorhis, Salisbury, Wright, and Bauman, 2008; Van Voorhis, Wright, Salisbury, and Bauman, forthcoming.) That is, regardless of correctional setting (prison, probation, pre-release), gender-responsive and some gender-neutral needs were more predictive of offense-related outcomes than static risk factors pertaining to the current offense and prior criminal history. In addition, because women’s pathways to crime were different from men’s, it was becoming increasingly apparent that full attention to the needs principle—the notion that offender change requires treatment of needs that are related to future offending (Andrews and Bonta, 2007)—required addressing a new set of gender-responsive needs such as abuse, parental stress, unhealthy relationships, poverty, safety, and depression in addition to gender-neutral risk/need factors that were more common treatment targets. Thus, while the notions of high risk and treatment of dynamic risk factors certainly were not new to corrections, they were coming to mean something different for women than for men.

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*Research on Probation for Female Offenders*

# Changing Probation Experiences for Female Offenders Based on Women's Needs and Risk Assessment Project Findings

by Emily J. Salisbury, Ph.D., Patricia Van Voorhis, Ph.D., Emily M. Wright, and Ashley Bauman\*

Many practitioners and criminological scholars, including ourselves, argue for additional research and study of women offenders in large part because their numbers have increased dramatically over the last 20 years, and because women's supervision and treatment needs are emerging as somewhat unique in comparison to men offenders. Similar to the study of men, research on women offenders has focused almost entirely on inmate populations or women transitioning out of prison settings to post-release supervision. Yet, the vast majority of women offenders are on probation. In fact, women represent 23% of supervised probationers in the U.S. (Bureau of Justice Statistics [BJS], 2008.) Further, between 1995 and 2007, the total number of women probationers rose 52%. (BJS, 1996; 2008.)

Because nearly one million women in the U.S. are on probation (BJS, 2008), a better understanding of women's probation experiences, risk levels, and factors that contribute to their successful completion of supervision is warranted. To that end, results from the three probation samples of the Women's Needs and Risk Assessment Project are broadly discussed here. The overall pattern of findings illustrate that probation for women offenders, who generally are much less of a public safety concern than men, should be less focused on traditional elements of supervision and control and more on a gender-responsive philosophy using case-management approaches that emphasize wrap-around services.

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## Women's Needs and Risk Assessment Project

Two cooperative agreements between NIC and the University of Cincinnati resulted in the Women's Needs and Risk Assessment Project, which developed gender-responsive risk/needs assessment instruments specifically designed for women offenders. Women probationers from three correctional sites informed the construction of instruments, including women under supervision from the Hawaii Department of Public Safety (Maui County;  $N = 158$ ), Minnesota Department of Corrections ( $N = 233$ ), and Missouri Department of Corrections ( $N = 313$ ). All three sites implemented a self-report survey to women probationers measuring several gender-responsive factors intended to supplement currently validated gender-neutral dynamic instruments, such as the Level of Service-Inventory (Andrews and Bonta, 1995) or the Correctional Offender Management Profiling for Alternative Sanctions (COMPAS) (Brennan, Dieterich, and Oliver, 2006).

Beyond the self-report survey, research conducted in Missouri was unique because the DOC sought to create a stand-alone, dynamic risk/needs assessment instrument that included knowledge from both gender-neutral and gender-responsive perspectives. In conjunction with the Missouri Women's Issues Committee, researchers designed an instrument that contextualized traditionally gender-neutral factors in gender-responsive terms. For example, a mental illness scale asked questions specifically about women's symptoms of both psychosis and mood disorders (e.g., anxiety, depression, post-traumatic stress disorder). A housing scale expanded upon traditional gender-neutral concepts of antisocial influences by including questions regarding a woman's safety and exposure to violence. Moreover, several strengths, or protective factors, were also assessed, including social support and educational assets.

## Women Probationers Are High Need, Low Risk

The number of studies demonstrating that women offenders have distinct risks and needs is beginning to flourish. Recognizing women offenders' distinct needs and less dangerous dispositions enables us to understand why women experience community supervision in ways that hinder their successful termination. Indeed, male and female offenders seem to respond differently to conditions of probation. For instance, women may benefit more from treatment services than men. In a large-scale study of probation in Illinois, completion of substance abuse treatment was more influential in reducing women's likelihood of arrest than men's. (Olson, Alderden, and Lurigio, 2003.) Women who completed treatment were 75% less likely to be re-arrested, whereas men who completed treatment were 45% less likely. Interestingly, treatment failure was a more powerful contributor to re-arrest for women than men. Women who did not complete substance abuse treatment were 300% more likely to be re-arrested than women who completed it. For men, this comparative figure was much lower (80%).

**Fines.** Further, Olson et al. (2003) found that fines as a probation condition served as a deterrent for men but not for women. Given women's economic marginalization, high poverty, low employment, and responsibility for children, it is plausible that fines actually increase supervision failure for women because they simply cannot afford to pay them. Thus, judges sentencing women to probation supervision should seriously reconsider policies of automatic fines and the use of financial bonds to motivate women into compliance. Such a judicial policy change was recently achieved in Hamilton County, OH, by educating municipal court judges

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on how these policies fail to recognize women's economic marginality. (Muse, 2000.)

**Less Dangerous Than Men.** Additionally, it is important to acknowledge that women are significantly less dangerous than men. Studies consistently show that women's offenses are more often characterized by minor drug and property crimes, and when women commit violent acts, three out of four times it is for simple assault. (BJS, 1999.) Essentially, women as a group are at much lower risk of initial offending behavior and recidivism in comparison to men. Further, women probationers, by virtue of being located at the front end of supervision, are likely one of the lowest risk subgroups of all adult correctional populations.

Data from the Women's Needs and Risk Assessment Project support this notion. Women from our probationer samples were largely low to low-moderate risk, although there was some variation across the three sites. Using the LSI-R manual cutoff scores for female offenders (see Andrews and Bonta, 1995), 60% ( $n=140$ ) of women probationers in Minnesota fell into low or low-moderate risk levels. Women from Maui appeared to be even lower risk, with 83% ( $n=131$ ) characterized as low or low-moderate risk.

Similar to Minnesota and Maui, Missouri probationers were also a relatively low risk group. Because the LSI-R was not implemented in Missouri, risk levels were assessed using the newly developed stand-alone instrument and the factors from it that were associated with future recidivism. In a trichotomized scale, 56% ( $n=176$ ) of women were deemed low risk, 34% ( $n=105$ ) medium risk, and only 10% ( $n=32$ ) high risk. Additionally, the criminal histories of women from Missouri were quite limited: 81% ( $n=246$ ) had no prior felonies and 74% ( $n=230$ ) had never been on supervised probation or parole in the past.

**Low Recidivism Rates.** Moreover, the relatively low rates of recidivism among our samples after one- and two-year follow-up periods parallel what is typically found with other women offender samples. In Minnesota, 24% ( $n=55$ ) of the probationers were re-arrested after one year. In Maui, even fewer women recidivated, with 22% ( $n=35$ ) re-arrested after two years. Although re-arrest data were

not readily available in Missouri, only 17% ( $n=52$ ) of the women were revoked and subsequently incarcerated within a two-year period. Of those revocations, the vast majority (73%,  $n=38$ ) were for violations of probation supervision, rather than for new criminal convictions.

**Probation Failure.** Given that most women on probation are characterized as relatively low risk, by definition they have fewer criminogenic needs and necessitate less supervision and probation conditions. Essentially, the risk principle (Gendreau, 1996) suggests that we intervene very little, if at all, in the lives of these particular female offenders. Yet, we must ask ourselves why probation agencies nevertheless continue to witness many low and low-moderate risk women fail on supervision. For example, in Minnesota, of the 55 women who were re-arrested, 21 were low or low-moderate risk as determined by the LSI-R. The implication for taking a "hands off" approach with these particular women perhaps contributed to their failure. Why do low and low-moderate risk women make up such a high proportion of recidivists (38%)?

Our data suggest that the answer is related to what is and, more importantly, what is not measured by gender-neutral assessments. The overall pattern of results across probation sites suggests that there are gender-responsive factors that contribute to women's risk which are not captured by gender-neutral assessments. In fact, gender-responsive factors that significantly contributed to future re-arrest among low and low-moderate women in Minnesota were the following:

- Low self-esteem and self-efficacy;
- Child abuse;
- Physical victimization and harassment as adults;
- Intimate relationship dysfunction;
- Parenting stress; and
- Low income.

Moreover, gender-responsive factors were also demonstrated as risk factors among higher-risk female probation samples.

### Probation Recommendations

Women probationers are a relatively low-risk population in comparison to men, but still have problems that

contribute to successfully completing supervision. Often these problems are related to various gender-responsive needs that are highly related to one another (e.g., lifetime trauma and victimization, mental illness, addiction, dysfunctional relationships, and extreme poverty) and reflect distinct pathways of offending behavior. (Daly, 1992; Owen, 1998; Salisbury and Van Voorhis, 2009.) In a detailed analysis of the Missouri probationers' pathways to future incarceration, Salisbury and Van Voorhis (2009) found support for three gendered pathways that highlighted women's need for holistic, wraparound services that target past and current victimization, depression and anxiety, substance abuse, low self-efficacy, unhealthy relationships, educational deficits, and poverty. In addition, of the 52 Missouri probationers who were subsequently incarcerated, 39 (75%) were mothers of dependent children.

Considering women probationers' lower risk levels but multiple problems, women probationers appear to need more services rather than conditions meant to deter and control. Thus, we feel that probation for women should be a fundamentally different experience from the way it is traditionally implemented. Below, we provide several policy and programmatic recommendations to probation agencies based on our project findings, as well as the gender-responsive research knowledge base, namely:

1. Include gender-responsive needs in the needs assessment process;
2. Establish gender-responsive case-loads;
3. Train probation staff on gender-responsive guiding principles; and
4. Implement case-management strategies with wraparound services.

### Include Gender-Responsive Needs in the Needs Assessment Process.

One of the major conclusions from the NIC/UC assessment study is that gender-responsive needs are predictive of women's recidivism. This echoes the sentiments of probation staff. Seng and Lurigio (2005) surveyed a large sample of Chicago probation officers and found that they generally felt women and men probationers have different needs and require distinct supervision strategies. Unfortunately, most of these needs are not incorporated

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*Gender-Responsive Prisons*

# Lessons From the NIC/UC Gender-Responsive Classification Project

by Emily M. Wright, Ph. D., Patricia Van Voorhis, Ph. D., Emily J. Salisbury, Ph. D., and Ashley Bauman\*

Female inmates are dramatically different from male inmates, but the distinctions are seldom accommodated by current correctional policies. Women differ from male prisoners according to:

- Background characteristics;
- The offenses that bring them to prison;
- The danger they pose to prison security;
- Their needs; and
- The factors that bring them back into the system.

Most incarcerated women are convicted of drug offenses (29%) or property offenses (31%), while males are incarcerated predominately for violent offenses (53%) and property offenses (20%). Only 19% of male offenders are committed for drug offenses. (Sabol, Couture, and Harrison, 2007.) Women seldom commit acts of violence while in prison. For example, Hardyman (2000) found that 17% of males and approximately 5% of females engaged in aggressive incidents over one year, while Harer and Langan (2001) reported aggression in 19% of males and 3% of females. Instead, incarcerated females are likely to be:

- Substance abusers;
- Economically marginalized;
- Lacking in employable skills;
- Poorly educated;
- Single mothers of minor children;
- Victims of physical and/or sexual abuse; and
- Coping with physical and mental health problems. (Bloom, Owen, and Covington, 2003.)

## NIC/UC Gender-Responsive Project

With these differences in mind, the Prisons Division of the National Institute

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of Corrections (NIC) entered into a cooperative agreement with the University of Cincinnati (UC) to begin a research initiative to develop improved strategies for classifying women offenders. The NIC gender-responsive project began in 1999 with a pilot study in the Colorado Department of Corrections and continued in 2004 with three larger projects in Maui, Minnesota, and Missouri. Across all four project sites, women in prison (in Colorado, Minnesota, and Missouri), on probation (in Maui, Minnesota, and Missouri), and in pre-release settings (in Colorado and Missouri) were examined with regard to various gender-neutral (e.g., criminal history, antisocial peers) and "gender-responsive" (e.g., victimization, mental health problems, marginalization, relationship difficulties, and substance abuse) risk and need factors. Overall, the results of initial studies support paying attention to various gender-responsive risk factors in correctional classification. (Salisbury, Van Voorhis, and Spiropoulos, forthcoming; Van Voorhis, Salisbury, Bauman, Holsinger, and Wright, 2008; Van Voorhis, Wright, Salisbury, and Bauman, forthcoming; Wright, Salisbury, and Van Voorhis, 2007.)

## NIC/UC Findings

The findings from the gender-responsive project continue to demonstrate that women are largely nonviolent and suffer from poverty, marginality, substance abuse, victimization, and mental health problems. Over 40% of women in Minnesota and Missouri prisons were drug offenders, while between 15% and 20% were convicted of forgery or fraud. Less than 20% engaged in violent offenses for which they were incarcerated, and fewer than 3% engaged in assaultive or threatening behavior during one year of incarceration. The majority of women had children under the age of 18 and roughly 40% were receiving public assistance before they were imprisoned.

**Victimization.** Approximately 66% of women in Minnesota and 76% in Missouri had been victimized at some point in their lives—31% and 37%,

respectively, were victims of sexual abuse during childhood—and over 50% were victims of domestic violence during adulthood. More than half of the women in Missouri and 83% of the women in Minnesota had received treatment for mental health problems, and almost all (over 80%) women in both samples reported abusing substances.

**Troubled Women.** In addition to supporting the earlier descriptive studies of incarcerated women, the NIC/UC study underscored the importance of gender-responsive needs. In fact, many of the gender-responsive needs predisposed women to adjustment problems while incarcerated. Women who had been abused, had histories of substance abuse, or who were depressed, anxious, angry, or suffered from psychosis were more likely to incur serious misconduct while incarcerated than other women. In addition, women who reported having criminal and dysfunctional romantic relationships prior to their incarceration were also cited for more serious prison misconduct. Simply put, troubled women made more difficult adjustments to prison than others. It is also important to note that gender-responsive needs played a role in bringing women back into the system upon release. (Van Voorhis, Salisbury, Wright, and Bauman, 2008; Van Voorhis et al., forthcoming; Wright, Van Voorhis, Bauman, and Salisbury, 2008.)

As one might expect, these findings present numerous implications for prison management. They also underscore the need to prioritize interventions targeted to women's needs while incarcerated and upon re-entry. These and other implications are discussed in more detail in the pages that follow.

## Gender-Responsive Recommendations for Prisons

In many cases, the characteristics of the contemporary women's prison (e.g., its programs, services, approaches to case management, classification and assessment systems, architecture, operations,

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skill sets of staff members) do not fit the picture of the contemporary female offender. Much could be said in this regard, but we believe that the findings of the NIC/UC project help to identify important directions for the future of women's prisons. First, the project found that the women most likely to incur prison disciplinary problems were high need, troubled, and traumatized. Women who scored high on a custody classification system because of extensive prior records or a serious current offense were less likely than the troubled group to demonstrate problems. Second, very few women engage in violent offenses while incarcerated. They commit more petty offenses than male inmates, but far fewer acts of aggression. (Hardyman and Van Voorhis, 2004.) Finally, the overwhelming majority of female inmates (over 90% in some cases) are released within 12 months of incarceration. Based on these findings, we recommend that prisons do the following:

1. Adopt valid assessment tools to formulate risk levels and identify gender-neutral and gender-responsive treatment needs;
2. Redefine the meaning of maximum custody;
3. Match prison architecture and security policies to the behavior of incarcerated women rather than that of incarcerated men;
4. Direct treatment toward reducing needs that are predictive of women's prison adjustment and recidivism;
5. Prioritize women's re-entry issues;
6. Hire and train staff to work with women offenders; and
7. Reduce additional sources of overclassification.

**Adopt Valid Assessment Tools to Formulate Risk Levels and Identify Gender-Neutral and Gender-Responsive Treatment Needs.** The current generation of static, offense-related custody classification systems is often not valid for women offenders (Hardyman and Van Voorhis, 2004) either because they ignore important aspects of women's lives or because most states have not validated their systems on female offenders. As such, it is likely that many women are being improperly assigned to minimum, medium, and maximum custody levels.

- *Incorporate gender-responsive factors in assessments and develop case management responses.* Custody classification systems are more valid or predictive when gender-neutral (e.g., criminal history, antisocial peers) and gender-responsive (e.g., mental health problems) factors are examined. (Van Voorhis, Salisbury, Wright and Bauman, 2008; Van Voorhis et al., forthcoming; Wright et al., 2007.) Further, useful assessments identify the factors that need to be changed in order to reduce criminal activity among women. The Women's Risk Needs (WRN) Assessments developed during the NIC/UC research were designed for these purposes; they examine both traditional gender-neutral and new gender-responsive risk factors among women and provide recommendations for gender-responsive programming and case management. (Van Voorhis, Salisbury, Wright and Bauman, 2008.) Using the WRN Assessments for custody and needs assessment is likely to better fit the nature of female inmates as well as address their risk management and treatment needs.
- *Train staff to use gender-responsive assessments.* Prisons should train staff how to properly use gender-responsive assessments. Case management staff will need to be versed in how to ask questions about victimization, relationships, and mental health problems in a sensitive manner. They must understand how to talk about and respond to these sensitive aspects of women's lives. Effective gender-responsive interviews require that staff engage in a meaningful dialogue with the offender, build trust, and sensitively listen to women's stories.

**Redefine the Meaning of Maximum Custody.** We did not necessarily begin our research expecting to find that the women most likely to misbehave in prison settings would be troubled women. But this finding certainly calls into question traditional notions of the high-custody female inmate. Instead of placing high-need and troubled inmates into punitive environments, we suggest that such inmates are good candidates for treatments targeted to alleviate the needs that make them troublesome. Placing troubled inmates into the most punitive prison settings is not defensible

and would only serve to further marginalize those with tragic personal histories. In response, some states are reserving higher custody facilities (or prison wings) and community prisons for intensive treatment and services. That appears to be a much more constructive, logical, and humane response to the contemporary high-risk women offenders.

**Match Prison Architecture and Security Policies to Behavior of Incarcerated Women Rather Than That of Incarcerated Men.** In most of our prison studies with women, roughly 3% of the participants engaged in aggressive altercations during the first 12 months of their prison stay—certainly this suggests that they might require different types of prison facilities and security policies than male inmates. Given this, it is unlikely that states would benefit from building expensive maximum custody facilities for women. Instead, states may benefit from using smaller, less expensive regional prisons or community settings for females. Such facilities are more practical and relevant to gender-responsive treatment and service goals. Moreover, to critics who argue (relative to the second recommendation, above) that classifying a high-need woman as high risk/custody further marginalizes her by placing her into more punitive prison settings, we would say that we do not believe such settings are warranted based on actual data pertaining to women's prison infractions.

**Direct Treatment Toward Reducing Needs That Are Predictive of Women's Prison Adjustment and Recidivism.** If women's needs are more predictive of their prison adjustment and recidivism than their offenses, perhaps treatment targeted at reducing or stabilizing those needs should be the primary goal of women's prisons. (Blanchette and Brown, 2006; Bloom et al., 2003; Gehring and Bell, 2007; Koons-Witt, Burrow, Morash, and Bynum, 1997; Owen and Bloom, 1995.) Such a recommendation is not unique to women offenders, but rather a core principle of evidence-based practice, which maintains that the most effective strategy for reducing offender criminal behavior and recidivism involves treating criminogenic needs (i.e., risk/need factors that are correlated with prison misconduct and/or recidivism). (Andrews et al., 1990; Gendreau,

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1996.) Our findings depart somewhat from prevailing correctional research which advocates that major attention be devoted to treating the “big four” (e.g., attitudes, associates, personality factors, and criminal history (Andrews and Bonta, 2007)) criminogenic needs. Our research, however, indicates that substance abuse, victimization/trauma, mental health (especially depression), and relationship and family unification difficulties are criminogenic needs that increase misbehavior among women in prison and therefore should be targeted for treatment to provide a safer prison environment and more humane adjustment. Further, we found substance abuse, mental health problems, trauma, unhealthy relationships, parental stress, employment, safe housing, child care, financial assistance, and education to be criminogenic needs that increase women’s recidivism in community settings.

We therefore suggest the following:

- *Drug and alcohol programs.* Prisons should provide drug and alcohol programming that promotes independence from drug use and teaches coping skills for avoiding continued use. These programs should also recognize that women’s substance abuse often co-occurs with trauma and mental health problems. (Covington, 2008.) Programs such as Helping Women Recover (Covington, 2008) and Forever Free (Hall, Prendergast, Wellisch, Patten, and Cao, 2004) would likely be helpful in this regard.
- *Trauma and victimization programs.* A number of programs have been developed to help women recognize their own victimization and educate them about the consequences of victimization (e.g., victimization later in life, involvement with violent partners and significant others, development of mental health problems). These programs should also teach women positive coping strategies (e.g., stress management) to replace their criminal coping strategies (e.g., substance use) as responses to their victimization. (Bloom and Covington, 2009.) Suggested programs include Seeking Safety (Najavits, 2002), Beyond Trauma (Covington, 2003), and Dialectical Behavioral Treatment (Linehan, 1993).
- *Trauma-informed services.* Prisons must operate in a trauma-informed manner. That is, the prison environment and staff duties should be structured in a way that does not re-traumatize women while they are incarcerated (e.g., strip-searches by male correctional officers). (See Elliott et al. (2005) and Harris and Fallo (2001) for more information regarding trauma-informed services, and Walton et al. (2009) for work related to the Prison Rape Elimination Act.)
- *Mental health programs.* A majority of female inmates have been diagnosed with psychosis, post-traumatic stress disorder, depression, and anxiety. It is important that prisons train staff members to accurately identify women’s mental health problems and appropriately respond, either through direct service and intervention or by linking women with psychological service agencies within or outside of prison. (Covington and Bloom, 2007.)
- *Relationship programs.* Such programs would foster and enhance women’s connections and relationships with their children, family, and prosocial associates outside of prison. (Farr, 2000.) These may include expanded visitation rights and privileges for children (Brennan, 1998; Pollock, 2002) as well as programs that help women develop and maintain healthy, prosocial, and nonabusive significant and familial relationships inside and outside of prison. (See Koons-Witt et al., 1997.) The Moving On program (Van Dielen, 1998) devotes considerable attention to the importance of healthy relationships.
- *Additional promising programs.* Although we did not find parenting, educational, or occupational needs to be criminogenic risk factors for institutional misconduct among women, they are often cited as barriers to successful reintegration into community life and identified as risk factors for community recidivism. (Brown and Bloom, 2009; Dodge and Pogrebin, 2001; Richie, 2001; Schram, Koons-Witt, Williams, and McShane, 2006.) Therefore, we advocate the use of parenting, educational, occupational, and life skills programs within women’s prisons. These programs

should address general parenting issues such as prenatal care, parenting roles, and child development. Potential family reunification programs may include parenting skills classes (Showers, 1993) or programs such as Mothered (see Pollock, 2002) and Girl Scouts Behind Bars (Moses, 1993; 1995). Life skills programs (e.g., financial budgeting, balancing work and home responsibilities) and nontraditional vocational skills (e.g., carpentry) are also important because they help women become economically independent and self-sufficient. (Koons-Witt et al., 1997; Schram, 2003.)

**Prioritize Women’s Re-entry Issues.**

Women will be released into the community sooner than men—within one year in most states. This suggests that many women’s prison settings might be better viewed as residential community correctional settings. While this finding raises questions about prison locations, visitation policies, and work release, it mainly underscores the importance of prison re-entry services. Prisons must begin to program for women’s re-entry needs immediately upon intake.

Women who are prepared for the circumstances in the community that raise their risk of recidivating may be more likely to abstain from such circumstances. Preliminary results from the NIC/UC pre-release sites in Colorado and Missouri suggest that employment, substance abuse, mental health problems, abuse or trauma, lack of family support, and poor self-efficacy may be risk factors for women when they are released into the community. (Van Voorhis et al., forthcoming.) We therefore suggest that these factors be given priority when planning for re-entry:

- *Substance abuse treatment.* The “unnatural” treatment settings women face in prison may be detrimental to their transition in the community because they face new risk factors and situations once released. (Richie, 2001.) Newly released women need immediate access to substance abuse treatment in the community in order to continue their treatments as seamlessly as possible and to find support systems outside of prison. (Bloom et al., 2003.) Addressing

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through correctional programming, reassessments of risk showed a reduction in overall offender risk scores.

### Women's Risk Factors

Notwithstanding the effect of the new dynamic risk/need assessment models on correctional practice and reductions in recidivism (Andrews and Bonta, 2007), critics faulted them for not attending to risk factors that were most likely to bring women offenders back into the criminal justice system. (Blanchette and Brown, 2006; Bloom, Owen, and Covington, 2003; Reisig, Holtfreder, and Morash, 2006.) Where, for example, were screens for parental stress, dysfunctional relationships, abuse, depression, safety, and strengths such as self-efficacy? In response, the National Institute of Corrections and the University of Cincinnati recently completed research that found this list of gender-responsive needs to be predictive of future offending. Moreover, addition of the gender-responsive risk/needs to current gender-neutral risk needs were found to make statistically significant contributions to the earlier assessments. (Van Voorhis, Wright, Salisbury, and Bauman, forthcoming.)

### Implementation Considerations

Our purpose in the articles that follow is not to further discuss the research and technical issues associated with the WRNAs but rather to reflect on equally daunting implementation considerations. My colleagues and co-authors have been involved in a number of state efforts to implement the new assessments, and we have learned valuable lessons that we will share in the following pages. Simply put, validity and psychometric precision will matter little if the new assessments are not administered correctly or used to their full potential. In the following articles, we identify a number of implementation concerns and share treatment implications pertinent to female inmates and probationers. In support, the importance of quality control and careful implementation was highlighted in Mark Lipsey's most recent meta-analysis, which found that the quality of interventions was more

important than most other program characteristics. (Lipsey, 2009.)

**Proper Administration.** As with earlier dynamic risk/needs assessments, the WRNAs will "not work" if improperly used or administered. For example, in "Implementing the Women's Risk/Needs Assessment (WRNAs): Early Lessons From the Field," Van Voorhis et al. note that the WRNAs are appropriate for agencies focused on treatment and the reduction of offender needs. Use of the tools solely for identifying inmates needing more austere environments and less privileges or reduced access to programs would be a tragic misuse of the assessments. The article also discusses the importance of matching gender-responsive needs to gender-responsive programs. The WRNAs were not intended to sit in case folders but rather to serve as a road map informing women's case management and treatment needs. Legal issues, particularly the legality of using separate assessments for men and women, are also discussed. The article also recommends techniques for building staff competencies and insuring the accuracy and integrity of the assessments.

**Service Needs.** In conducting the construction validation research for the WRNAs, my staff and I also learned much about the women in various correctional settings; these findings transcend the assessments themselves. In "Changing Probation Experiences for Female Offenders Based on Women's Needs and Risk Assessment Project Findings," Salisbury et al. offer an important reconceptualization of the meaning of risk for women offenders and specifically discourage prevailing assumptions that low-risk offenders require no services. The article also advocates for gender-responsive caseloads, wrap-around services, and gender-responsive supervision strategies.

**Risk Management.** Finally, "Gender-Responsive Prisons: Lessons From the NIC/UC Gender-Responsive Classification Project," by Wright et al., cites data from the NIC/UC research to profile the risk levels and needs of female inmates. The fact (replicated across studies) that these populations are primarily nondangerous and very short-term (a year or less) recommends a thorough review of correctional policies pertinent to incarcerated women

offenders. Most importantly, such findings advocate for a serious discussion of the meaning of high custody with respect to women offenders. The findings also underscore the need for frank discussions about prison architecture, security policies, and staff culture. Finally, the article makes a strong case for managing risk through treatment as opposed to costly high security buildings and overly punitive policies that do not attend to re-entry needs. With the overwhelming majority (over 90%) of women offenders serving less than one year in many states, agencies would do well to view this population mostly in terms of treatment and re-entry needs.

### Need Underscored

In sum, I hope the following articles will stimulate new and evidence-based thinking about women offenders. I also hope we are discouraging any expectations that adoption of the WRNAs is all that is needed to transform a correctional agency into a gender-responsive agency. The assessments will alert practitioners to new treatment needs and in the course of doing so will likely underscore the need for new gender-responsive services, programs, and policies. Finally, careful attention to the fidelity of the assessments themselves, through careful staff training and monitoring of the quality of the assessments and case plans is essential to using them to their full potential.

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### Are the WRNAs Appropriate for All Types of Correctional Agencies?

No, they are not. Since the 1990s, the field of corrections has witnessed a dramatic shift in correctional policy and practice, shifting toward an emphasis on the treatment of dynamic risk/needs and away from strict adherence to the notions of deterrence, incapacitation, and punishment. (Cullen and Gendreau, 2001.) This shift was prompted in no small part by meta-analyses that showed that appropriate programming addressed to dynamic risk/need factors produced greater reductions in recidivism than more punitive correctional policies. (Gendreau, Goggin, Cullen, and Andrews, 2000.)

**Minimal Investment in Offender Programming.** For this reason, the goal of “lock them up and throw away the key” is no longer popular. However, it is still practiced in some states. In such agencies, there is minimal investment in offender programming. Therefore, there is no need to assess needs or to understand how those needs translate into future offending if they are not addressed. Such agencies do well to limit their risk assessments to second generation, offense-related, and static risk factors that validly inform the goals of incapacitation, deterrence, and punishment. (See Bonta, 1996.) Because these static assessments can be administered quickly through examination of record data, it is not likely that these agencies would welcome conducting more lengthy interviews with offenders. Use of the WRNAs would not be a good fit to these agencies.

**EBP Investment.** In contrast, agencies that have invested in evidence-based practice (EBP) (correctional treatment) look much different from their more antiquated counterparts. Even before adopting gender-responsive programs and services, they have made strong investments in programs and the assessments that link offenders to appropriate programs. For example, staff in such agencies devote considerable time to assessing and reassessing needs. The current generation of dynamic risk/needs assessments requires at least one hour to administer; gender-responsive risk/needs assessments typically require one-and-one-half hours. It is not unusual for the EBP agencies to view

assessment as the first step of case management and re-entry planning. As such, the assessments are core components of the first and perhaps the second meeting with the offender. The WRNAs would fit these settings quite well.

Simply put, some agencies are not well suited, philosophically or from the standpoint of their resources, to implement gender-responsive assessments or programs. More amenable agencies have had these treatment-related resources in place for some time or are planning to do so in the near future. They likely will be making additional

Finally, parity is not present when the same system defines men’s risk as similar to women’s risk, when high-risk men actually show much higher proportions of offense-related behaviors than high-risk women. In such cases some have argued that not having separate instruments is cause for litigation (Brennan, 1998), and legal cases have been won on this premise.

**Legal Support.** Additional support for separate systems may also be found in the Prison Litigation Reform Act of 1996 and the U.S. Supreme Court decision in **Turner v. Safley**, 482 U.S.

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### *Staff in EBP-based agencies invest a considerable amount of time assessing and reassessing needs, including gender-responsive services.*

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investments in the development of gender-responsive programs, practices, and services. Most often these advances are planned by women’s taskforces, work groups, or new organizational entities such as women’s divisions. Their work, of course, also involves planning for the additional issues discussed below.

#### Is It Legal to Use a Separate Instrument for Men and Women?

The concern for whether or not separate classification systems should exist for men and women results from litigation or legislation mandating parity or equal treatment of male and female offenders in matters pertaining to housing, access to legal services, programming, employee wages, medical care, and other rights.

**Validity for Group.** Classification/assessment was assumed by many to fall within this rubric. (Brennan, 1998.) Subsequent research has shown, however, that “similar is not equal.” For example, identical assessments do not accomplish the goal of parity if they are valid for one group of offenders and not the other. Equity is not present when the same system is valid for one group (men) and not the other (women), or has been validated on male and not female samples. (Van Voorhis and Presser, 2001.) Identical systems are also not equal if they identify the most relevant needs for males while ignoring those needs most relevant to females.

78 (1987), which opened the doors for prison administrators to utilize creative approaches to enhance rehabilitation and reduce offender recidivism with minimal court oversight and inmate litigation. Thus, as long as legitimate penological goals are being served, gender-responsive strategies have legal support. (Bloom et al., 2003.)

#### How Shall the WRNAs Be Used—for Risk and Needs Assessment or Only as a Needs Assessment?

As noted earlier, the gender-responsive scales are highly predictive of prison misconduct and community recidivism. (Van Voorhis et al., 2008.) Moreover, adding these scales to most current gender-neutral risk/needs assessments (e.g., the LSI-R or the Northpointe COMPAS) enhances the predictive validity of these assessments. In fact, gender-responsive needs are far more predictive of prison misconduct than the static offense-related scales that currently classify offenders into high, medium, and low custody assignments. (Van Voorhis et al., forthcoming.) However, many of these scales carry a high degree of political cachet, and careful agency planning is required if these are to be used to increase custody levels or community supervision levels. With classifications of

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high risk or maximum or close custody come reduced freedoms, more intensive supervision, and more punitive conditions of confinement. Correctional personnel may not feel comfortable imposing such conditions on women who are classified into higher risk categories by virtue of hardships associated with mental illness, physical and sexual victimization, economic disadvantage, or dysfunctional relationships with significant others—even if these are the very women who tend to do most poorly under correctional supervision. Of course, these concerns would seem most relevant to prison classification approaches.

**Separation of Risk, Needs.** In response, some agencies have chosen instead to use the WRNAs as needs assessments only—thereby using them to guide treatment options but not to determine custody or supervision levels. The decision, therefore, separates the assessment of risk and needs (see Baird, 2009); the WRNAs are used for needs assessments and custody continues to be assessed by static, offense-related factors. Unfortunately, that decision does nothing about the fact that the current generation of static custody classification models is typically not predictive for women without considerable modification. (Hardyman and Van Voorhis, 2004.)

**Reconceptualize High Risk.** The more ideal approach would find policymakers and practitioners reconceptualizing their notions of high risk. If high-risk women are actually women with multiple serious needs, shifting policy implications regarding “high-risk” women from a punishment model to the rehabilitation model makes good sense. In cases where higher custody facilities or wings of facilities afford intensive programming or high community risk guides women to more intensive case management, interventions, and community support, the concerns for punishing or further marginalizing troubled women is greatly reduced.

#### What Are the Formulas for Adding Supplemental WRNA Factors to Gender-Neutral Assessments?

If the supplemental WRNA risk/need factors are to be added to a gender-neutral assessment, such as the LSI-R

or the Northpointe COMPAS or some other tool, what are the computation formulas for doing so? The full set of gender-responsive items has not been fully tested with gender-neutral risk assessments. (See Van Voorhis et al., forthcoming.) However, with several states now using all scales, we plan to conduct the research needed to develop computation guidelines for adding the LSI-R or the Northpointe COMPAS to the gender-responsive variables to formulate risk levels. Prior to the completion of those studies, agencies should use the supplement as a needs assessment, and base risk scores on the gender-neutral assessments. Gender-neutral assessments such as the LSI-R (Smith, Cullen, and Latessa, 2009) and the Northpointe COMPAS (Brennan, Dieterich, and Ehret, 2009) are valid for women, but their validity can be improved with the addition of gender-responsive items (Van Voorhis et al., forthcoming).

The research needed to develop these formulas should also identify redundant variables. The WRNA supplement includes a small number of traditional gender-neutral scales such as mental health, employment, family support, education, finances, and home environment that have been redesigned to reflect a more gender-responsive quality. Ongoing research will be needed, and is being conducted, to determine whether any of these variables should be omitted due to redundancy. These concerns do not have to be directed to the gender-responsive variables (e.g., abuse, relationship dysfunction, self-efficacy, parental stress, or depression).

#### Addressing Gender-Responsive Needs

Agencies must ensure that programming options are available to address the gender-responsive needs identified by the WRNAs. It makes no sense to use an assessment/classification system that does not match an agency’s system of services, programs, and risk management policies. In some instances, the WRNAs may be identifying gender-responsive needs that agencies cannot yet address through programs and services. For example, some agencies may not have services to attend to family or parent-child reunification, child care, parental skills, healthy relationships,

self-efficacy, trauma-informed services, post-traumatic stress disorder, depression, and gender-responsive substance abuse treatment. It is of little value to assess the needs of women if programming is not available.

Fortunately, the availability of programs to address these needs has been improving. Below are some examples of emerging gender-responsive programs:

- **Moving On:** This program treats the risk/needs of women through strengthening their personal and community resources (Van Dietsen, 1998). (<http://www.OrbisPartners.com/index.php/programs/moving-on/>)
- **Beyond Trauma:** This program helps women cope with trauma and victimization experiences (Covington, 2003). ([http://www.StephanieCovington.com/b\\_beyond.asp](http://www.StephanieCovington.com/b_beyond.asp))
- **Helping Women Recover:** This program addresses substance abuse in a gender-responsive framework (Covington, 2008). ([http://www.StephanieCovington.com/b\\_helping.asp](http://www.StephanieCovington.com/b_helping.asp))
- **Seeking Safety:** This program treats the co-existing disorders of trauma/PTSD and substance abuse (Najavits, 2002). (<http://www.SeekingSafety.org/>)
- **Forever Free:** This program treats substance abuse among incarcerated women (Hall, Prendergast, Wellisch, Patten, and Cao, 2004). ([http://www.nrepp.samhsa.gov/programfulldetails.asp?PROGRAM\\_ID=90](http://www.nrepp.samhsa.gov/programfulldetails.asp?PROGRAM_ID=90))
- **Female Offender Treatment and Employment Programs:** These programs seek to successfully reintegrate incarcerated women into the community with a focus on employment, substance abuse, and parenting (Grella, 2005). ([http://www.WaldenHouse.org/services/cj\\_residential.html#fotep](http://www.WaldenHouse.org/services/cj_residential.html#fotep))
- **Healthy Relationships Programs:** These programs attempt to teach women to identify dysfunctional relationships in their lives and to acquire the skills needed to engage in healthy relationships in the future (see Koons et al., 1997).
- **Family Foundations:** This program assists substance-abusing mothers with the re-entry process (Wiewel

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and Mosley, 2006). (<http://www.lacada.com/FFP.htm>)

- **Family Connections:** This program attempts to reduce the incidence of child neglect through community-based parenting interventions (DePanfilis and Dubowitz, 2005). (<http://www.FamilyConnections.org/>)
- **Motherhead:** This program helps maintain the connection between the incarcerated mother and her child(ren) by sending her children books with a recording of the mother reading the book (see Pollock, 2002).
- **Girls Scouts Behind Bars:** This program seeks to continue the relationship between incarcerated mothers and their adolescent daughters by facilitating Girl Scout troop meetings at the prison (Moses, 1993, 1995; see also Pollock, 2002). ([http://www.GirlScouts.org/program/program\\_opportunities/community/gsbbs.asp](http://www.GirlScouts.org/program/program_opportunities/community/gsbbs.asp))
- **Parent Education Programs:** These programs help women to develop parenting skills (see Showers, 1993).

### Developing Staff Competencies to Administer, Use the WRNAs

How shall we develop staff competencies to administer the WRNAs and use them for case planning? There are lessons to be learned from experiences with the more common gender-neutral assessments. As noted earlier, the most frequently used gender-neutral assessments have proven to be valid for women. From our experience, the few exceptions have involved poor quality control and inadequate attention to staff training. When using any of a number of dynamic risk/needs assessments, case managers will find themselves engaging offenders in a meaningful conversation or interview and developing a treatment plan based upon the results of the assessment. In order for the staff to obtain accurate information, they must be skilled in building trust and rapport, listening, adhering to ethical standards, and motivating offenders to change. These skills become even more important when using gender-responsive assessments, which ask questions about sensitive issues (e.g., questions relating to

trauma, relationships with significant others, and children). It is also necessary for staff to be skilled in creating treatment plans and motivating offenders to participate in those plans.

**Training Protocol.** The University of Cincinnati's Corrections Institute (UCCI) recently developed a training protocol to prepare WRNA interviewers and case managers. (Gehring and Bell, 2008.) The following topics are covered in the curriculum:

- Evidence-based practices and principles of effective intervention;
- Gender-responsive principles and practices;
- Motivational interviewing and other interview skills;
- Orientation to the assessment and scoring of the assessment;
- Gender-responsive case management and planning.

**Additional Requirements.** We should note that adoption of the assessments does not require the use of UCCI services, but the agencies do have to assure UCCI that staff will be trained on the topics listed above in order to secure permission to use the WRNAs. (See also [www.UC.edu/womenoffenders](http://www.UC.edu/womenoffenders).) They should also create a training plan to ensure that training is completed prior to implementing the assessment. Follow-up or "booster" training sessions should be planned for as well, typically on an annual basis. Staff turnover is a common occurrence that must be addressed by additional training options. Finally, agencies should plan to have some of their own staff trained as trainers in order to achieve greater efficiencies and an internal capability to maintain the assessment model.

### Quality Assurance Is Essential

Problems with program and assessment fidelity have plagued correctional treatment efforts for decades. (Van Voorhis, Cullen, and Applegate, 1995.) It is not at all uncommon for highly effective programs to fail to reduce offender recidivism because the quality of the programs is neglected. This finding has undeniable empirical support in Mark Lipsey's most recent meta-analysis, which found that program fidelity was *the most important* program dimension affecting offender recidivism. (Lipsey,

2009.) In this study, program integrity had a stronger effect on reducing recidivism than any specific type of intervention.

Once an agency begins utilizing the WRNAs, it is important that procedures are in place to confirm their accuracy. With the assessments having such a tremendous effect on the lives of female offenders, it is crucial that they be completed and scored correctly. We strongly recommend that agencies develop quality control plans that address the following issues:

- **Interview quality:** To ensure quality, interviewers must adhere to the training model and utilize motivational interviewing and other interview skills. Specific to the WRNAs, rapid-fire questions do not work. Tape and video reviews are very helpful.
- **Assessment conditions:** It is necessary to check to see that the assessment is being completed in a quiet, reasonably private, and safe location.
- **Assessment scoring:** To verify that assessments are being scored accurately, look for logical inconsistencies between answers.
- **Data entry:** Ensure that there are no mistakes when entering the assessment into computer databases.
- **Case planning:** Verify that case plans are being initiated and completed and that referrals are driven by assessment results. Regular file audits become very useful in this regard.

### Address Issues for Successful Implementation

In closing, agencies looking to implement the new gender-responsive risk/needs assessments have important implementation issues to work through prior to rolling out these assessments and the programs that follow from them. Impressive strides have been made to assist these efforts. Developing a taskforce or policy team to address these topics is highly recommended. We hope the experiences of others will prove helpful.

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on assessment instruments used by probation agencies. Departments that wish to have more successful outcomes with their female probationers would do well to measure gender-responsive factors during the needs assessment process and triage them into the appropriate services.

Some departments may interpret our findings as evidence supporting a policy of incorporating gender-responsive factors into risk assessments. Although our research has demonstrated that many gender-responsive factors contribute to women's likelihood of recidivism, we do not advocate allowing these needs to increase women offenders' supervision levels, especially that of probationers. The factors that we observed as predictive reflect a need for services instead of more restrictions and conditions. We do not mean to suggest that women are actually higher risk than previously thought because gendered needs, which are not included on standard risk assessments, are predictive of future offending. Again, we recommend including such factors within a needs assessment process, which does not influence risk designation, to promote service delivery.

**Establish Gender-Responsive Caseloads.** Probation agencies need to recognize that they are serving two distinct populations across gender, one of which is considerably less dangerous than the other, with unique intervention needs. Establishing gender-responsive caseloads in which officers supervise women in a manner consistent with gender-responsive principles may be beneficial in a number of ways. First, it may reduce the difficulties that caseload officers face as a result of having to shift from one supervision strategy to another across male and female clients. Indeed, interviews with officers reveal that many are already well aware of the different intervention strategies necessary when supervising women in comparison to men. (O'Brien, 2009; Seng and Lurigio, 2005.) Navigating these competing strategies likely contributes to officer frustration and a general disdain for working with women because they may be viewed as too "needy."

Second, gender-responsive caseloads may facilitate the development and refinement of probation officer skills

for managing women, such as learning how to:

1. Listen and communicate more effectively with women;
2. Recognize their strengths;
3. Be a source of social support;
4. Develop safe and trusting relationships; and
5. Respond to women's emotional needs.

Over time, the refinement of skills can result in more effective and efficient modes of interaction between officer and client, producing more favorable outcomes. (O'Brien, 2009.)

Clearly, the spirit of a gender-responsive caseload goes beyond whether an officer simply supervises only women. Unfortunately, this appears to be occurring in some jurisdictions across the country. Assigning officers to supervise women only and then labeling the policy as "gender-responsive" completely misses the goal of having a women-centered probation experience. A thorough understanding of what "gender-responsive" means is essential for any such caseload to be effective at reducing women's recidivism.

**Train Probation Staff on Gender-Responsive Guiding Principles.** Achieving desirable outcomes with gender-responsive caseloads necessitates training probation staff on the guiding principles of the gender-responsive approach. (See Bloom, Owen, and Covington, 2003, at 77-90.) Gender-responsive approaches acknowledge major sociological, psychological, and cultural differences across gender and purposely allow gendered life experiences to direct programming and supervision decisions for women. Staff will need to gain an appreciation for the underlying theoretical bases for differential services and supervision for women (i.e., relational, trauma, and addiction theories), particularly how the feminist pathways perspective informs women's routes to crime and ongoing destructive behavior. Furthermore, gender-responsive training confronts the typical stereotypes that many staff harbor towards women, and illustrates the numerous negative effects that gender bias has toward successful termination.

This leads to an important question that has been frequently, albeit quietly, raised in the correctional field: Should

men supervise women offenders? While women officers may certainly have a natural affinity toward working with women offenders, it would be a mistake to assume that only women can effectively develop the necessary skills and strategies. It is our belief that both women and men have the ability to be successful in supervising women. More important is the overall approach to supervision and treatment, which can be affected by such things as personality traits, communication style, maturity, emotionality, and interpersonal demeanor (not necessarily gender, *per se*). This underscores the need for training on gender-responsive principles and supervision. Moreover, male officers who possess characteristics and skills congruent with a gender-responsive philosophy may serve as especially powerful role models for those women offenders who have never had a healthy, respectful relationship with a man.

Furthermore, departments should provide gender-responsive training to all staff that supervise women offenders, regardless of whether they manage specialized caseloads. Many departments serve very large numbers of women, which precludes the widespread adoption of gender-responsive caseloads. As a result, a significant proportion of women may remain on standard probation. Improving general supervision techniques for women across the department will likely increase overall organizational success with women clients. (Lurigio, Stalans, Roque, Seng, and Ritchie, 2007.)

**Implement Case-Management Strategies With Wraparound Services.** Most women offenders have a multitude of needs that are considered overwhelming even to criminal justice professionals. Traditional modes of supervision reflecting control and surveillance do not provide the most effective strategies for addressing the various services women need. To effectively address these issues, women need to be involved in an approach that goes beyond the basic referral process. Thus, case planning and case-management strategies are strongly recommended. Moreover, because of the intersecting nature of women's

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needs (e.g., co-occurring disorders of mental illness and substance abuse), we also emphasize wraparound service planning within a case-management approach based on a gender-responsive foundation.

Wraparound service planning refers to a process of organizing and coordinating service delivery and is specifically designed for populations with complex needs involving multiple treatment providers. (Pullmann et al., 2006.) As such, its integration within a case-management strategy is likely to be more

effective than case-management alone. To illustrate, one study found that case management for drug-involved women probationers was no more successful than standard probation. (Chan et al., 2005.) However, wraparound service

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planning was not a featured component of the intervention, and gender-responsive principles were not embedded within the strategy. We feel that for case management to truly be effective, departments must adopt a gender-responsive philosophy and implement wraparound styles of service delivery. Moving toward a wraparound model means that departments will need strong connections with community

agencies that can provide appropriate services to women in a dynamic manner as women's needs change and goals are achieved.

**Service Delivery for All Risk Levels**

The overall pattern of findings from probation samples from the Women's Needs and Risk Assessment Project suggest that many women probationers represent welfare populations rather than criminal populations. Significant proportions of our samples were

women probationers characterized as low to low-moderate risk, yet still demonstrated a need for services rather than supervision and control. Thus, service delivery should not be reserved only for women deemed to be at high risk for recidivism. Moreover, because women have a complex set of inter-related needs and are generally less dangerous in comparison to men, the probation experience needs to be one that intervenes with women in holistic and multifaceted ways. ■

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these issues might involve direct referrals to community substance abuse services.

- *Mental health treatment.* Mental health problems (e.g., depression, anger, psychosis) continue to create adjustment problems for women in the community. (Richie, 2001.) Women need to be properly diagnosed and referred to community services so that they can receive the treatment that will help them adjust to the community and meet the conditions of their release. Simply providing 30 days of medication to aid transition into the community will likely not be an effective policy.
- *Safe and affordable living environments.* Women re-entering the community often return to violent or criminogenic homes because they have nowhere else to go. This is an added barrier for women, especially when they are expected to also find and keep a job, provide for themselves and their children, and satisfy the conditions of their supervision. (Brown and Bloom, 2009; Richie, 2001.) Women unprepared to address such situations are at an increased risk of recidivating; therefore, we suggest that prisons identify these potential problems and link women with housing and employment opportunities upon release.
- *Community wraparound services.* It is vital that women receive a continuum of care once they are released. Wraparound services provide this continuum by coordinating multiple treatment providers in the community to address women's needs. (Pullmann et al., 2006.) To accomplish

this, prisons need to have connections with the community agencies that can provide appropriate services (e.g., mental health, substance abuse) to women upon release.

- *Family reunification efforts.* Women may have lost custody of their children while incarcerated and may attempt to regain custody or visitation rights upon release. They also may find it difficult to return to households where their role as an authority figure has been diminished or reallocated to another family member (e.g., grandmother (see Brown and Bloom, 2009)), and they have to deal with the social stigma of being labeled a "criminal." (Dodge and Pogrebin, 2001.) For these reasons, women need connections to community legal counselors prior to release as well as re-entry programming which identifies and prepares women for these potential problems.

**Hire and Train Staff to Work With Women Offenders.** In light of the gender-responsive movement, some states are beginning to provide officers with gender-responsive training (e.g., California Department of Corrections and Rehabilitation (see Owen, 2007)). Because women prisoners are more verbal than male prisoners (e.g., women ask questions, need to talk to work things out) and are considered more emotionally needy than males in light of their victimization and mental health backgrounds (Schram, Koons-Witt, and Morash, 2004), correctional staff need to be skillful listeners and communicators. Correctional staff who have good communication skills and patience and who are positive role models may work best with women prisoners as opposed to male prisoners. (Koons-Witt et al., 1997.) Further, staff who desire to

work with women prisoners may be more effective than those who begrudgingly serve in women's facilities. Lastly, because of the mental health needs of women prisoners, prisons would benefit from hiring personnel with qualifications or interests in serving the mental health and medical needs of women prisoners. (Harding, 2002.) Aside from these staff personal characteristics, we suggest the following:

- *Train staff on the differences between male and female offenders.* Prisons should train staff regarding the ways in which females differ from males in terms of their risk and need factors. Staff might benefit from understanding how victimization and trauma affect various aspects of women's lives (e.g., their relationships, mental health, substance abuse, and parenting practices). Understanding that women's needs are unique from men's may help staff to embrace the importance of trauma-informed services. Further, staff would be better equipped to manage women prisoners once they understand their unique characteristics. For instance, appropriately trained staff may be less likely to see women's questions (e.g., "why") as acts of insubordination, and thus be less likely to cite women on disciplinary infractions.
- *Hire and train staff for case planning.* The case-planning model involves assessing, diagnosing, and planning programming for prisoners, so prisons should invest in staff that possess the skills necessary to design or implement the services mentioned throughout this paper. Case planning should not only address the needs of women inside the prison but also

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those outside of prison (i.e., women's re-entry needs). NIC is currently piloting a gender-responsive case management approach. (Partners, 2006.)

**Reduce Additional Sources of Overclassification.** Female offenders are often overclassified, meaning that they are held at higher custody classifications than are warranted on the basis of their behavior. (Hardyman and Van Voorhis, 2004; Van Voorhis and Presser, 2001.) Simply validating and revising a custody classification system is not all that is needed to prevent overclassification. While an invalid custody classification system is a sure cause of overclassification, there are other causes of overclassification that may occur with even the most valid of classification models. For example, if the architecture of a facility is too secure for the behavior of the inmates assigned to the facility, overclassification occurs regardless of the adequacy of the classification model.

Excessive citations for petty offenses also contribute to overclassification. (Hardyman and Van Voorhis, 2004.) In many states, women have far more citations for petty offenses than men. Such citations drive up classification scores at reclassification if the woman stays long enough to be reclassified. Excessive citations are usually a symptom of staff who

are not skilled in managing conflicts with women offenders (see the sixth recommendation, above). Absent proper skills, they manage female offenders through citations.

The list of inmate infractions has a similar effect on reclassification scores. For example, women's assaults are often far less serious than men's. If the disciplinary code does not take this into account, serious disciplinary scores will also inflate reclassification scores. With this in mind, consultants and researchers often revise inmates' disciplinary codes to provide levels of similarly labeled misconduct (e.g., assault and contraband).

### Prisons Will Benefit

The findings from the NIC/UC gender-responsive project are very relevant for contemporary women's prisons. Guided by the core findings from this project, we have attempted to outline what we see as the most critical issues that need to be addressed within women's prisons. We believe that prisons that take our recommendations into account will benefit from more "gender-informed" policies and procedures. These benefits will not only positively affect prison management and staff, but they will also affect the women incarcerated within, their misbehavior, and their likelihood of success in the community. ■

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