



Rethinking Behavior Management with Female Offenders: Using a Gender Responsive Behavior Motivation Paradigm to Facilitate Safety and Resident Growth

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Introduction

The movement to improve services for females involved in the criminal justice system according to the principles of gender responsive practice has led to enhancements in such areas as client/resident assessment, classification, case planning and programming. These improvements have all been based on research which indicates that females have different aspects to their development, different pathways into and within the criminal justice system and different service needs. “Gender-specific,” or, more recently, “gender responsive” services and approaches – those that meet the specific needs of a gender group – are viewed as an important principle of service delivery for females nationally, in virtually every state and across multiple jurisdictions, institutions, and facilities/programs within each state. In fact, more and more studies are showing that adopting a gender responsive approach improves staff effectiveness and satisfaction as well as various outcomes for females involved in the criminal justice system.

Gender Responsive

Gender responsive (also referred to as “gender-specific” and “gender informed”) programs intentionally allow research and knowledge on female socialization, female psychological development, female strengths, female risk factors for system involvement, females’ pathways through systems, female responses to traditional interventions and females’ unique program/service needs to affect and guide ALL aspects of the program’s design, processes, and services (adapted from Maniglia, 2000). At minimum, this means that each program component integrates, where possible, an understanding of the Five CORE Practice Areas of Gender Responsiveness (Benedict, 2002) at both a conceptual and practice level:

- A Relational-cultural Approach
- A Strengths-based Approach
- A Trauma-informed Approach
- A Culturally Competent Approach
- A Holistic approach

Administrators and practitioners who work with females are now facing a new and important challenge – the challenge of applying the principles and practices of gender responsiveness to their behavior management systems, or, approaches to sanctions and discipline. **The principles of and practices of gender responsiveness challenge conventional thinking about sanctions and discipline and the methods and tools required to create safe and productive environments for female offenders.**

Why a Gender Responsive Approach to Discipline and Sanctions for Females?

It is virtually impossible to enter a program or facility without hearing the terms “discipline,” “sanctions,” and “behavior management” coupled with a desire on the part of staff to manage the range of behaviors they see on a daily basis. Staff members who work with female residents often report unique challenges, citing female resident behaviors such as resisting staff directives, practicing manipulation, and engaging in unhealthy or coercive relationships, self harm and relational aggression. It is equally as common for female residents to report concerns that they do not feel safe, do not like staff and do not like the sanctions/behavior management system used at their program/facility. Female residents often report feeling misunderstood and unsupported. Ultimately, staff members are expected to maintain safety by effectively responding to a variety of behaviors on a daily basis ranging from minor challenging behaviors such as talking out in a group to more serious behaviors such as threatening a staff or peer. The challenge of this task in facilities has led to the development of several different approaches to what are commonly called “behavior management,” “disciplinary” and “sanctions” systems.

Used with males and females, many conventional sanctions and discipline systems are an outgrowth of a criminal justice system originally designed to protect public safety and punish transgressors. However, at least two important trends require that we update our approaches to sanctions and discipline with females. *First, research suggests that focusing on motivation and skill building can set the stage for a type of growth and sustainable change that can improve the lives of female residents and, in turn, impact public safety.* This research - which is a blend of long-standing psychological concepts and newer literature regarding what facilitates behavior change - challenges us to consider fundamental concepts about what methods encourage growth and change. *Second, we have a new, more accurate understanding of females who are involved in the criminal justice system.* Pioneer researchers and practitioners have highlighted the unique developmental pathways of women – including their specific risks, strengths and needs and gender-specific motivators for behavior change and responses to interventions. **Taken together, these bodies of knowledge set the stage for the design and implementation of gender responsive approaches to sanctions and discipline.**

This article asserts that the underlying philosophy driving any behavior management system used with females should be based on a) fundamental psychological concepts regarding behavior change and b) gender responsive research and principles. It also offers hope that when sound, research-based and gender responsive approaches are used to motivate and respond to a range of female resident behaviors, positive outcomes result from which both staff and residents benefit, including the creation of safer facilities. Specifically, this article offers **“behavior motivation” as a new paradigm for creating safer programs/facilities and more effective sanctions and discipline systems for females.**

“Comparisons between people whose motivation is authentic...and those who are merely externally controlled for an action typically reveal that the former, relative to the latter, have more interest, excitement, and confidence which in turn is manifest as heightened...self esteem” (Corsini & Wedding, 2010).

The need to develop gender responsive approaches to sanctions and discipline is clear. Formal and informal studies that focus on the experiences of criminal justice system involved females as well as countless anecdotes reveal that facilities across the United States continue to struggle in their efforts to maintain safe and productive environments for staff and female residents alike. This is related, at least in part, to the fact that many facilities:

- Do not understand the unique dimensions of female behavior.
- Have not yet adopted a gender responsive philosophy regarding management, sanctions and discipline.
- Do not have the time and/or resources for staff training and ongoing professional development regarding gender responsive approaches to discipline and sanctions.
- Have assumptions, biases and fears about the population (or sub-population) they are serving and the methods required to maintain order and safety (this is most operative in higher security facilities).

- Compartmentalize sanctions and disciplinary approaches (e.g., do not see them as part of a larger gender responsive clinical/mental health philosophy or link them to the clinical/mental health work taking place in the facility).
- Have a high level of inconsistency in staff members' approaches within the same sanctions and discipline system (shifts run differently, staff within shifts behave and respond differently, the vocational program has a different approach).

What are Some Limitations of Conventional Sanctions and Disciplinary Approaches for Females?

Simply stated, many conventional systems have not integrated fundamental principles of behavior modification and often have characteristics that render them far less effective for females. Research on behavior change suggests that narrowly interpreted behavioral approaches are limited (e.g., only relying on punishment and aversive therapies) and that we improve one's chances of success when we utilize a holistic approach (e.g., one that takes into consideration what propels behavior, and acknowledges the individual's need for connection and validation, support, and opportunities to develop new skills). Many conventional systems actually include practices that are not only counter to the principles of gender responsive practice with females, but erode the physical and psychological safety of staff and residents alike. And, while some emerging methods represent improvements from older ones (those that have a strengths-based and/or restorative philosophy) many still lack a keen awareness of and attentiveness to gender.

The Myth of "Management"

One of the fundamentally limiting precepts of traditional systems is the implied or overtly stated notion that a chief goal of a program is to "manage" females' behaviors. Lacking an orientation toward **resident motivation and self-management** creates a "lose-lose" situation for staff and residents alike. In systems where the management of residents' behaviors is a primary goal (this can be intentional or unintentional), female residents will either comply with rules to placate staff while others will comply on the surface to "get by." Others may constantly oppose a system they feel is oppressive; one upon which they have no impact. In any of the aforementioned possible scenarios, female residents have limited or no internalization of important concepts and skills, and the facility culture often suffers. Staff members lose because they are constantly putting out fires as the system being used often worsens the very behavior staff members are hoping to eliminate. Female residents lose because their focus shifts from learning and growth to managing and working the system. Opportunities for community skill building and empowerment for staff and residents are lost. Perhaps most problematic is the lost opportunity for the facility to function as a safe place within which female residents can learn and practice skills and behaviors that will facilitate their success when they leave. The facility becomes yet another source of disempowerment in females' lives.

The Risk of Compliance

Linda Albrecht was one of the first practitioners to highlight the limitations of traditional behavior management systems for adolescent females citing that traditional behavior management approaches/systems often unwittingly emphasize program compliance without elucidating the application of success in those systems to life success. Additionally, they may foster blind compliance rather than the internalized effective decision making processes essential for female residents. The shortcomings of such systems are often related to the lack of staff training on what works with females, and to the fact that the characteristics of approaches and systems that are more relevant and effective for females have only recently come into view (see Albrecht, 2000).

Skill Building in the Wrong Direction

Level systems (and variations of the "level" concept), specifically those that rely on the giving and taking away of points, can be very limiting when used with females. By nature, the systems encourage competition, are status-driven and subjective. Given their unique developmental pathways, females are not motivated to "buy-in" to the

hierarchy of level systems, and the systems ultimately do not “modify behavior” for females. Instead, they allow females to self-victimize by sabotaging opportunities for success (see Albrecht). Instead of encouraging growth and skills acquisition, these level systems also encourage females to understand the nature of each staff person and “work the system,” using the level system as their strategy. Other methods used in many sanctions and discipline systems (e.g., lock down, prolonged segregation) can also create problems, especially when they are the primary methods used to work with challenging female resident behaviors. Female residents often adopt strategies to cope with these types of interventions (e.g., many trigger memories and feelings related to past trauma) – strategies that may not serve them well in the facility or in the real world (e.g. relational manipulation, avoidance, indirect or overt aggression).

Systems Designed for Males are Typically Less Effective for Females

Many of the behavior management and sanctions systems currently used were designed primarily with males in mind. In order for a facility to be safe and effective, sanction and discipline protocols must acknowledge and incorporate the unique aspects of female development. Ultimately, traditional systems include language and practices that can actually reinforce destructive behavior patterns exhibited by females, patterns often related to past victimization, such as compliant and submissive behavior, physical aggression and relational aggression.

Beyond Sanctions and Discipline: The CORE Gender Responsive Behavior Motivation Paradigm for Females

*“...one cannot employ disempowering means
in the service of emancipatory ends.” (Corsini & Wedding, 2010).*

Creating a Safe Facility Culture through Behavior Motivation

Sanctions and discipline are but one aspect of facility safety. In fact, in order for any approach to sanctions and discipline to be effective, it must exist within a larger framework that fosters facility safety, behavior motivation and resident self-management. In other words, tools and methods for sanctioning cannot be the framework itself; they are merely a part of it.

The CORE Gender Responsive Behavior Motivation Paradigm is based on the premise that motivating behavior (even when administering a consequence) in the context of an over-arching gender responsive approach enhances resident safety, productivity and growth. Ultimately, safe, productive, and growth-oriented female residents create safer facilities. Creating a culture, or “climate” of encouragement and motivation (in times of relative stability AND crisis) does not mean that female resident accountability is an afterthought. Rather, motivation is woven through every aspect of the culture as primary mechanism for creating facility safety and fostering resident engagement and growth. This means that staff members motivate female residents before challenges arise AND while holding females accountable through sanctions and disciplinary methods. As stated earlier, sanctions and disciplinary methods must exist as part of a larger behavior motivation paradigm. This paradigm is, ideally, a direct outgrowth of a gender responsive facility philosophy/mission, and is used to create and reinforce the principles of a gender responsive facility culture.

The CORE Behavior Motivation Paradigm is grounded in three primary principles (described later in this article), the implementation of which requires specific methods that are designed to help female residents develop important skills as well as an internalized ability to self-manage (given their unique emotional-behavioral-cognitive strengths and challenges). Female residents are encouraged to have safe, healthy and non-coercive interactions, embrace personal and community responsibility, access relevant privileges and responsibilities in the facility community, and develop, perhaps for the first time, a skill set around dealing with challenging and positive feelings and emotions in a safe environment with staff support. These are not the benchmarks of conventional systems, and many systems currently in use have been developed based on male development and focus solely on punishment (often not administered properly) as a motivator for behavior change. As discussed earlier in this article, many such systems, often sanctions, points- and/or levels-driven, are less effective when applied to females. The CORE Behavior Motivation Paradigm is based on proactively creating a motivating environment where effective behaviors can occur and be consistently reinforced, utilizing female motivators for change, and employing effective, gender-informed responses to females’ behaviors that are consistent with fundamental principles of behavior modification (e.g., apply a consequence in close proximity to the behavior, match the consequence to the severity of the behavior).

*“When [individuals] learn new ideas, whether true or false, whether in the clinic or the course of daily life,
concomitant alterations of the brain occur” (Corsini & Wedding, 2010).*

Exploring How the Principles of Behavior Modification and Gender Responsive Practice Intersect

There are important areas of intersection between principles of behavior modification and gender. While a full discussion of this is beyond the scope of this introductory article, the following example is noteworthy. Consider the behavior modification principle of matching the consequence of the behavior to its severity. There are a range of behaviors exhibited by females that, depending on the facility or staff member within the facility, may be viewed as more or less severe because they are being exhibited by a female versus a male (e.g., aggression). If aggression displayed by a female is viewed as more unacceptable (versus aggression displayed by a male) it may lead to a more severe consequence - one that matches a gender bias versus objective view of the severity of the behavior. Areas of intersection such as this should be explored as part of any gender responsive behavior motivation paradigm.

Understanding that the Environment Cues and Reinforces Specific Behaviors

Significant numbers of females involved with the criminal justice system have learned to navigate environments that were unsafe. They bring survival skills into the facilities to which they are sent— survival skills that though very adaptive when they were originally created (e.g., immediately following trauma) are not always adaptive in other environments. For many females, these survival strategies come in the form of sometimes complex behavioral patterns that can be easily triggered depending on the conditions of the environment they are in. What environments are we creating for women in our facilities? Are we giving them the best chance to feel safe enough to practice new ways of being and relating? Or, are we creating conditions that mimic the very conditions that made it necessary to develop a survival skill? These are essential questions to ask when implementing any behavior motivation paradigm for females.

Shifting from a management and sanctions paradigm to a gender responsive behavior motivation paradigm requires that staff members focus on resident support as often as resident accountability. Support means creating an environment that encourages resident- and community-level learning and growth. Balancing support and accountability includes, but is not limited to:

- Creating a sense of community and shared responsibility among residents and staff
- Motivating residents (especially in times of challenge) by offering access to community responsibilities and to relevant privileges as they make progress
- Encouraging resident self-management
- Creating opportunities and incentives for healthy behaviors, learning and behavior improvement following behavioral struggles
- Emphasizing positive reinforcement
- Focus on resident-empowerment and increased self-monitoring and responsibility over time

It is especially important for females to learn to self-manage because they often comply with rules to placate. Compliance should never be the sole goal, as internalization of concepts and self-management skills are the primary determinants of long-term behavior change and personal success.

Hopeful Outcomes

New research and anecdotal evidence strongly suggest that female offenders benefit from and respond to gender responsive approaches. The Women Offender Case Management Model - a gender responsive case management model developed for the National Institute of Corrections by Orbis Partners - requires that staff partner with women and use gender responsive strategies to engage and motivate women. Outcomes of this dynamic gender responsive approach are extremely positive and challenge us to reconsider what we think women in the criminal justice system are capable of.

Another example is noteworthy and speaks to fact that small changes can produce big results. In one prison, management noted that following a facility assessment of gender responsiveness and a one-day staff training that offered introductory information on gender responsive practices, unnecessary disciplinary actions against females were significantly reduced and segregation time was virtually non-existent. At the time of this article, both trends had persisted for two months with no accompanying threats to unit safety. At this same facility and over the same period of time, female residents began to report that they were seeing positive changes in the facility. What is so remarkable about this and other stories like it is the fact that important changes can emerge simply when staff embrace a broader view of female residents and their behaviors and use gender responsive practice skills in conjunction with their other skills when working with female residents on a daily basis.

The CORE Gender-specific Behavior Motivation Paradigm for Females: *Fundamental Assumptions*

- Resident growth is possible and can increase possibilities for success as well as enhance facility and community safety.
- Resident growth is constrained when a facility is not physically and emotionally safe.
- Safety is enhanced when resident motivation is a fundamental part of the facility culture.
- A critical element of behavior motivation is prevention.
- Behavior does not exist in a vacuum; residents use various means to meet basic needs and both the “means” and the “needs” are influenced by gender, culture and trauma.
- External behavior reflects an internal psychological state; in other words, all behaviors are propelled by psychological factors that are influenced by gender, culture and trauma.
- Understanding resident behaviors in terms of survival is critical.
- Responding to resident behaviors from a place of understanding and empathy, especially when it is the most difficult for us, is essential.
- Environment cues behavior.
- The language we use in facilities makes a difference in the cognitive processing and affective experiences of staff and residents.

“There is considerable evidence that when clients perceive unconditional positive regard and empathic understanding...their self concepts become more positive and realistic, they become more self expressive and self directed, they become more open and free in their experiencing, their behavior is rated as more mature, and they cope more effectively with stress” (Corsini & Wedding, 2010).

The CORE Gender-specific Behavior Motivation Paradigm for Females: Primary Goals

1. Build staff understanding of female resident behaviors and, in turn, their competency in working with them.

Examples:

- Acknowledge that external behaviors reflect an internal psychological state that is related to past experiences AND the current environment.
- Acknowledge female pathways, including risks, strengths and needs, as well as gender-specific responses to specific environmental cues and staff interventions.
- Understand basic concepts from cutting edge research on trauma, relational theory and practice, cognitive and affective neuroscience, somatic psychology and other relevant disciplines.
- Apply above learning to real time work and interventions with females.

2. Create facility safety through preventive, gender responsive policies and operational practices.

Examples:

- Make distinctions between physical and emotional safety (utilize an expanded definition of facility safety that includes physical AND psychological/emotional determinants).
- Emphasize individual safety first, then safety with others/ community.
- Have clear values, rules and expectations; ensure consistent enforcement within and across shifts.

3. Motivate individual residents and the community to adopt basic values and behaviors that relate to those values.

Examples:

- Promote unconditional positive regard for staff and residents (we can respect each other as human beings apart from the behaviors we see).
- Affirm all efforts to make healthy choices (this can happen even while administering a sanction).
- Motivate females' increasing access to community activities, gender-specific responsibilities and relevant privileges as they demonstrate safe, responsible and effective behaviors (see ©CORE *Circle of Behavior Motivation for Females*).
- Focuses on earning, not losing; de-emphasizes status, hierarchy (e.g., levels).

4. Foster healthy connections, or, “respect and rapport.”

Examples:

- Utilize team building strategies to strengthen the female resident culture and the staff culture.
- Implement a productive program/facility schedule to optimize resident interactions that are based on learning and growth versus boredom.
- Educate female residents about healthy relationships and how to cope with feelings of isolation, coercion, etc.

5. Cultivate healthy power at the individual and community (unit/pod) levels.

Examples:

- Create an atmosphere of empowerment for residents and staff.
- Attend to trauma-informed practice at all times.
- Allow female residents to safely exercise healthy power and control (e.g., let females influence decisions that impact the visual space).
- Emphasizes acts of discipline (acts of teaching and support), not punishment (acts that temporarily suppress behaviors).
- Employ sanctions in a way that empowers females to consider new behaviors versus shaming or punishing them into compliance.

6. Build on existing skills, teach new skills and celebrate small and large successes.

Examples:

- Emphasizes resident assets and acknowledge survival skills.
- Build skills in the individual, relational and community domains.
- Develop cultural competence and apply relevant understanding at all times.
- Avoids use of words such as “positive,” “negative,” “good,” “bad,” “appropriate,” and “inappropriate” to describe behavior and instead use descriptive, specific phraseology and words such as “safe,” “effective,” “helpful” “supportive,” “productive” and “readiness.”
- Require resident and staff growth and accountability.

7. Encourage self-management and discipline.

Examples:

- Encourage residents to harness strengths to overcome challenges.
- Teach skills prior to and as part of sanctioning.
- Require that residents build skills and complete relevant tasks (including those related to self and other restoration) as part of sanctioning; ensure sanction requirements are relevant to real life, where possible.

8. Have static and dynamic features.

Examples:

- Ensure fidelity to the philosophy and principles of gender responsive behavior motivation and discipline while creating dynamic features that allow staff and residents to adapt methods to their service setting; this allows for creative and relevant implementation at each facility.
- Facilitate consistency among staff in their dealings with residents while allowing for essential individualizing.
- Offer methods that are practical and realistic.
- Implement the concept of “bridging” – facilitate a dialogue between all community members about the application of every aspect of the behavior motivation approach to real life.

Implementing a Behavior Motivation Paradigm: *The CORE Principles of Behavior Motivation for Females*

The first and most fundamental step in creating a new paradigm of motivation is implementation of the following CORE Principles of Behavior Motivation for Females.

Principle #1: Actively Create an Environment that Meets Underlying Needs

Driven by an awareness of Maslow's hierarchy of needs, female development, and best practices in gender-specific programming and approaches, **CORE Principle #1** involves actively creating an environment that fosters feelings of safety and belonging. This means proactively creating daily living experiences that provide opportunities for females to have their needs met, learn about themselves, and make healthy connections with others. Specifically, it includes utilizing processes and procedures that maintain physical and emotional safety and give females healthy control in their environment. **CORE Principle #1** involves implementation of the *gender responsive policies and practices* which, when introduced and implemented in a gender responsive manner, proactively create a safe program culture/milieu.

Some Important Questions:

1. *What operational practices create fear in females? What practices create safety for females?*
2. *What values do we hope to teach and reinforce that are particularly important for females?*
3. *What rules and expectations are relevant to facility safety AND are transferable to real life for females?*

Principle #2: Create Interactions in the Environment that Meet Underlying Needs

CORE Principle #2 involves facilitating interactions between all program community members that are safe, trauma-informed, relationship-centered, strengths-based, holistic, and culturally competent (see the Five CORE Practice Areas, 2005). The focus of Principle #2 is on all community interactions – management-staff, management-resident, staff-staff, staff-resident and resident-resident. Interactions with and between visitors and external stakeholders are also viewed as important and influential. Additionally, Principle #2 essentially involves staff a) fostering healthy interactions between female residents, b) interacting with female residents within healthy and professional boundaries, c) skill building with residents, d) implementing essential policies and procedures (e.g., touch) in a gender responsive manner, and e) setting limits with residents and holding residents accountable within a gender responsive approach. Principle 2 also includes, but is not limited to:

- *Using Relational and Strengths-based Language (Benedict, 2002)*
- *Balancing Support and Limit Setting (Benedict, 2004)*
- *Maintaining Boundaries: Being in Relationship Responsibly (Benedict, 2004)*

Some Important Questions:

1. *Does my program have a touch policy? Is it gender responsive AND trauma-informed? Does it apply to staff?*
2. *How do staff set limits?*
3. *What types of interactions motivate females? Are the current staff-staff interactions motivating? Resident-resident?*

Principle #3: Intentionally Respond Using a Gender Responsive Approach

CORE Principle#3 involves consciously responding to all behaviors and implementing a gender-specific behavior motivation approach. Note that the implementation of a response approach comes AFTER Principles 1 and 2 have been implemented. Many programs believe that behavior motivation approaches begin and end with Principle 3, meaning, a system of rewards and sanctions is seen as the behavior motivation approach. Without Principles 1 and 2 in place, even the best behavior motivation/resident self-management approach is likely to fail.

“Discipline means to teach. The goal of discipline is to teach a [person] to have her/his own internal discipline based on a positive self-concept, not on fear or shame. [Residents] need to learn to take care of their own behavior for themselves not to please, placate, or be rewarded by others” (J. Illsley Clark).

Important Questions:

1. *What are typical responses to resident behaviors that violate a rule?*
2. *Do staff members reinforce healthy resident behaviors?*
3. *Are staff responses relatively consistent within and between shifts?*
4. *Are privileges and motivators used? Are they gender responsive?*

Implementing a Behavior Motivation Paradigm: Essential Methods

Staff Training

Examples:

- Train staff on gender responsive philosophy and principles.
- Build staff members' gender responsive "on the floor" skills using strategies such as role playing and coaching.

Community Building

Examples:

- Work with staff and residents to create Community Values and a Community Mission Statement.
- Work with staff and residents to create Community Expectations (rules that define how the mission can be achieved).

Communication

Examples:

- Implement formal opportunities for staff-resident communication (e.g., daily/weekly Resident Check-ins offer time to build rapport outside of crisis).
- Document resident daily/weekly successes, challenges and outcomes.

Consistency

Examples:

- Consistently use (between and within shifts) clear Resident Support Strategies.
- Consistently use gender responsive discipline and sanctions.

Productivity

Examples:

- Use Resident Action Planning (plans that define what a resident is working on to enhance her self and other awareness and coping strategies).
- Use restoration.

Privileges and Responsibilities

Examples:

- Create Clusters of Gender Responsive Privileges and Responsibilities.
- Create Individualized Safety and Support Plans.

Quality Assurance and Evaluation

Examples:

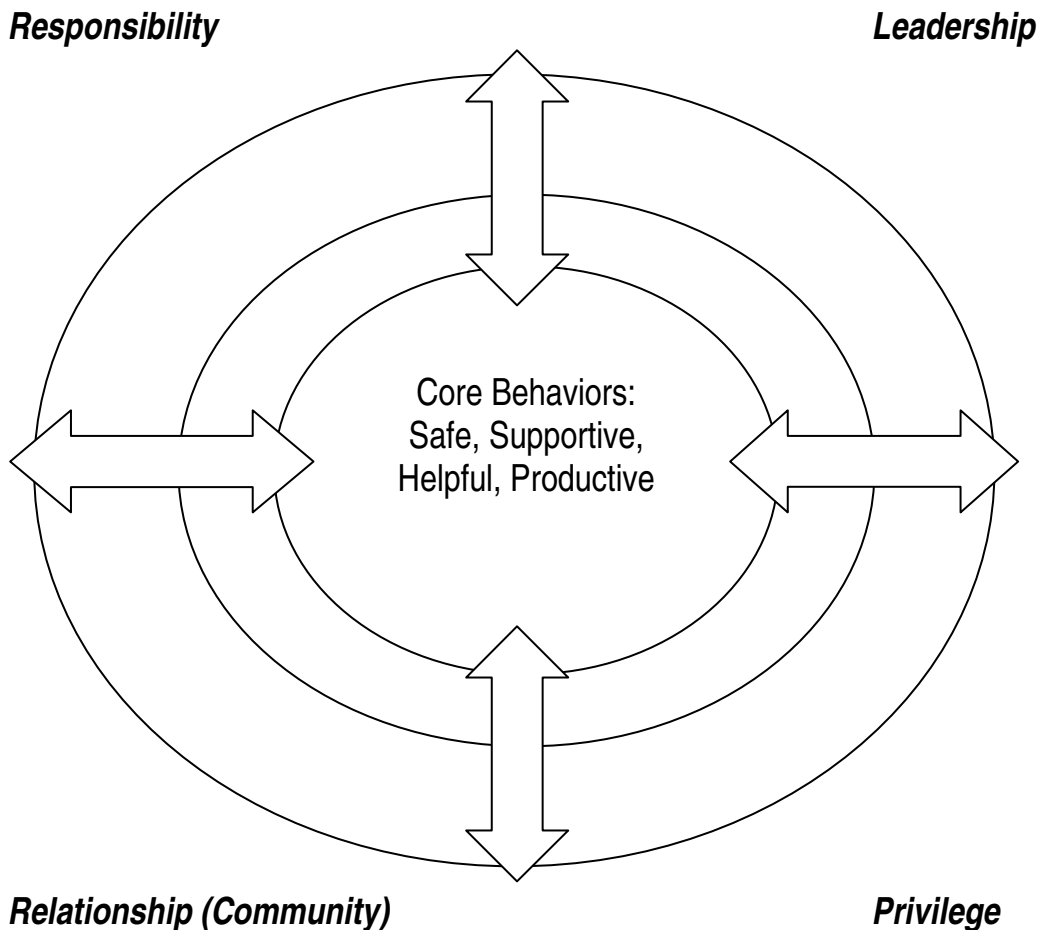
- Monitor accurate implementation.
- Evaluate methods.
- Make adjustments accordingly.

Implementing a Behavior Motivation Paradigm: Using the CORE Principles of Behavior Motivation as a Guide (Examples)

CORE Principle 1: <i>Actively Create an Environment that Meets Underlying Needs</i>	CORE Principle 2: <i>Create Interactions in the Environment that Meet Underlying Needs</i>	CORE Principle 3: <i>Intentionally Respond Using a Gender-Responsive Approach</i>
Examples	Examples	Examples
Ensure residents spend time in smaller groupings (where possible).	Attend to the importance of all levels of community interactions (e.g., management-staff, management-resident, staff-staff, staff-resident, resident-resident). *Actively facilitate interactions that attend to each of the Five CORE Practice Areas (see below).	Revise sanctions and disciplinary processes <i>according to the principles of gender responsive practice.</i>
Create and maintain a predictable, productive facility schedule.	Implement a Relational Approach as part of day to day interactions by using relational language.	Implement Relevant and Gender Responsive Resident Motivators (e.g., residents who are consistently safe and supportive can co-facilitate community meetings, orient new residents to the unit).
Develop a Community Mission Statement with residents that offers the type of community residents and staff can create together.	Implement a Strengths-based Approach as part of day to day interactions by seeing at least one strength in every resident behavior and by using strengths-based language.	Implement a Resident Check-in Protocol where staff proactively meet with residents at least once per week (i.e., versus waiting for an infraction/crisis).
Develop Community Expectations with residents that are positively stated and intentionally address topics that are important for females (e.g., self care, healthy relationship building).	Implement a Trauma-informed Approach as part of day to day interactions by avoiding triggering language and methods.	Implement a Staff Interventions Protocol to ensure consistent staff member responses to safe, supportive and effective behaviors AND consistent staff responses to unsafe, unsupportive and ineffective (challenging) behaviors.
*Create Gender Responsive Policies and Procedures for (examples): -Welcome/ Intake -Searches -Orientation -Assessment and Classification -Transitions/Resident Movement -Unit Arrivals and Departures -Shift Change -Community/Unit Meetings -Critical Incident Debriefs -Resident Release/Farewell -Grievances -Submitting Ideas for Facility Improvement	Implement a Culturally Competent Approach as part of day to day interactions by taking the time to learn about residents without imposing values and belief systems.	Implement Clusters of Privileges and Responsibilities <i>that residents can access</i> depending on their level of safety in the facility (e.g., use "Circles," Phases," "Stages," or Teams (e.g., use "Circles," Phases," "Stages," or Teams and "Teams," as opposed to over reliance on levels and points).
Enhance the physical and visual spaces so that they reflect respect and promote values that are important for females.	Implement a Holistic Approach as part of day to day interactions by seeing the broader context of each resident's behaviors.	Implement an Individualizing Protocol that addresses how to individualize based on individual resident needs (e.g., related to psychiatric/ psychological functioning, emotional/ developmental functioning, and cognitive functioning); "wrapping the Model around the client."

Enhance language used in the facility (e.g., how staff refer to residents and different facility/program areas)	Define behaviors using terms such as “safe, effective, and supportive” versus “good,” and Define what is meant by “appropriate” and “respectful.”	Implement Precursors to Sanctions that hold residents accountable while building skills and offering opportunities for success (e.g., using the least restrictive methods while maintaining safety).
Create a Resident Council	Maintain healthy and professional boundaries with residents and staff	Implement Affirmation Protocols that allow staff and resident to acknowledge and celebrate resident successes and improvements.
Maximize out of room/cell time within safety parameters	Encourage accountability to values versus people	Set limits and hold residents accountable using a gender responsive approach (e.g., use supportive versus punitive language when administering a consequence; require restoration to self and relevant others).
Check in with residents and staff regularly on issues of physical and emotional safety, concerns, and facility strengths	Encourage residents to adhere to values, expectations and rules for their own benefit as well as others’	Identify trends in resident behaviors (e.g., most frequent disciplines and when they occur).

**Implementing a Behavior Motivation Paradigm:
Using the CORE Circle of Behavior Motivation for Females as a Guide**



The Circle of Behavior Motivation is one visual that can help us shift our mindset from behavior management and sanctions to motivation and accountability. It also offers a whole new way of thinking and talking about expected behaviors, “rewards” and consequences. “Core Behaviors” are at the center of the concentric circles and four “Primary Motivators” are outside the concentric circles. The double headed arrows represent expanded and restricted access to the Primary Motivators. When administering a sanction, for example, staff can speak in terms of “core behaviors” that are important for facility safety and personal growth.

If a female resident has exhibited one or more of these behaviors, she has demonstrated to herself and to others (e.g., staff) that she is “ready” for “more access” to what the community has to offer (e.g., the community activities and interactions, privileges, responsibilities and leadership opportunities). When she has not exhibited one or more core behaviors, she is reflecting a need to “spend time” on getting safe, identifying and harnessing “strengths” and “building new coping skills.” This naturally means that she has less (or in some cases no) “access” to what the community has to offer and needs time and support. The natural consequence of not exhibiting one or more core behaviors is that the time and energy formerly spent on other things (e.g., leadership opportunities such as co-facilitating a community meeting) is diverted to other priorities (e.g., learning and practicing coping

skills). This diversion should, where possible, be temporary, and access to responsibility, etc. can be regained when safety has been restored, coping methods are being used, and the resident and staff agree that she is ready.

Implementing a Behavior Motivation Paradigm: Essential Supports (Examples)

The following are examples of procedural documents that often require enhancement (or introduction if they do not exist) as part of new paradigm implementation:

- Gender responsive behavior motivation policies, procedures and accompanying documents
- Quality assurance policies, procedures and accompanying documents
- Resident Handbook
- Staff Handbook

Wherever possible, procedures and documents should be integrated with the current documentation and procedural infrastructure.

The Importance of Tailoring the Behavior Motivation Paradigm to the Uniqueness of the Facility

Implementation of a Behavior Motivation Paradigm will necessarily look different based on the unique characteristics of the program/facility. The following is a sample list of some facility characteristics that must influence implementation:

- ✓ Size
- ✓ Security level
- ✓ Staffing
- ✓ Capacity
- ✓ Population homogeneity/heterogeneity
- ✓ Mental health status and acuity of residents
- ✓ Program/facility physical plant and layout
- ✓ Management and staffing structure
- ✓ System context

The Importance of a Developmentally and Clinically Informed Approach

Link to Clinical/Mental Health Services

As stated earlier, implementing a new Behavior Motivation Paradigm requires that we acknowledge the well known concept that external behavior is reflective of an internal psychological state. Behaviors meet needs, and if motivation strategies (including those used as part of sanctioning) a) acknowledge those needs and, b) where relevant, encourage the resident to meet those needs using different strategies (e.g., those that don't violate accepted values, rules and expectations) we are maximizing the possibility of behavior improvement.

Acknowledging that psychological factors propel behavior also challenges us to link any behavior motivation approach to mental health/clinical services. In fact, enhancing sanction and disciplinary processes challenges us to enhance mental health services and vice versa. Attending to either program area comprehensively and holistically will naturally involve attention to the other. This can be very challenging in corrections and it is recommended that facility management and staff have an open dialogue wherein they can develop consensus on

how to ensure behavior motivation and mental health services intersect. Short term goals can help facilities to implement basic and policies procedures (e.g., when and how to involve mental health personnel for targeted resident behaviors) and long-term innovative approaches can achieve true integration of these two important program areas.

Important Opportunities to Tailor and Individualize

Implementing a gender responsive Behavior Motivation Paradigm is a challenging but critically important task given the fact that many facilities service a heterogeneous group of female residents who have various psychological and behavioral characteristics and levels of functioning. Some females may have significant psychiatric issues and some may have learned patterns of behaviors that mimic psychiatric diagnoses. Others may have simply been consistently “unsuccessful” in multiple programs wherein they have not been provided with relevant or effective services and interventions. Also, because so many female behaviors are misunderstood and mislabeled (e.g., relational aggression is often mistaken for borderline personality disorder or borderline “tendencies”), programs/facilities are likely be serving females that have been prematurely/inappropriately diagnosed with DSM-IV disorders or not provided the proper assessments when a diagnosis may be necessary. Frequently, the exact psychological and psychiatric profile of female residents is unknown in many facilities. These and other variables mean that the Behavior Motivation Paradigm needs to include a clear protocol that allows staff to design and deliver individualized approaches and methods that meet the unique needs of residents.

Outcomes on the CORE Gender Responsive Behavior Motivation Paradigm: *Examples*

Drastically improved safety as evidenced by:

- ✓ Eliminated isolation time
- ✓ Eliminated mechanical restraints
- ✓ Reduced “hands on”
- ✓ Reduced worker compensation claims
- ✓ Improved resident and staff sense of safety/quality of life
- ✓ Improved resident stability
- ✓ Changed and enhanced services offered (gender responsiveness)
- ✓ Reduced “returns” to higher security settings
- ✓ Reduced incident reports

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