Appendix: Research Findings

The following synopsis provides a discussion of the foundational research findings that form the basis for the concepts and recommendations discussed throughout the Guide. Specifically, four areas of research are discussed:

- Women’s Pathways to the Criminal Justice System
- Women’s Psychological Development
- Trauma and its Effects on Women Inmates’ Behavior
- Evidence-based Strategies that Motivate, Build Skills and Create Behavioral Success with Women

These research areas have contributed to innovations and improved outcomes in the areas of assessment and classification, case management, and intervention for women offenders (for a review see Ney, Ramirez, & Van Dielen, 2012). This information can also be used to guide the development of discipline and sanctions policies and practices. Taken together, they tell an important story about women inmates and provide a clear rationale for realigning discipline and sanctions in women’s facilities in order to achieve more successful outcomes, including improved facility safety and security.

Women’s Pathways to the Criminal Justice System

The research on women’s psychosocial development reveals the significance of relationships in women’s lives. This is an important context for understanding women’s offending patterns, including the range of behaviors and violations that occur within correctional facilities. The body of research on women’s pathways suggests that relational disruptions can catalyze a woman’s trajectory into crime. Such disruptions can include abuse and/or neglect, often by family members or trusted persons, and difficulties with interpersonal relationships may persist into adulthood (e.g., Benda, 2005; Dehart, 2005; Lanctot, Cernkovich, & Giordano, 2007; Salisbury & Van Voorhis, 2009). Given the pivotal role relationships play in healthy female development,

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1 To engage in an informed and robust policy analysis process (see Section 2), readers are encouraged to become familiar with and conversant about the research findings discussed herein first before proceeding to Sections 3 and 4 of the Guide.

2 The implications of the research findings for reviewing and revising discipline and sanctions policies and practices are contained in Section 3 of the Guide.

3 For more information, see below, Women’s Psychological Development.

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disruptions in them can have a variety of consequences, such as feelings of disempowerment, guilt, and low self-esteem (Miller, 1986). As a result, women may engage in maladaptive coping behaviors that can help them to manage difficult thoughts and feelings in the moment, but that may also cause more long term problems (e.g., substance abuse and criminal justice involvement). This section reviews important research on women’s pathways to offending which can guide the improvement of discipline policies and practices.

Women have life experiences that create different pathways to crime. Pathways research shows that a common trajectory into crime for women starts with abuse and is followed by self-preservation behaviors (e.g., quitting school, prostitution, drug trafficking, and other criminal behaviors such as theft) that can lead to additional victimization, accompanying mental health problems, and entrenchment in the criminal justice system (Blanchette & Taylor, 2009; Jones, 2011; Salisbury & Van Voorhis, 2009; Van Voorhis et al., 2010; Veysey & Hamilton, 2007). Figure 1 illustrates three pathways that women might follow that lead them into crime and eventually the criminal justice system. The factors that impact women’s trajectories into crime also affect the behaviors they exhibit in facilities. Research shows that misconduct in women’s facilities is influenced by time, place, culture, interpersonal relationships, and staff actions (Owen et al., 2008). “Ongoing tensions and conflicts, lack of economic opportunity, and few therapeutic options to address past victimization or to treat destructive relationship patterns, contribute to the potential for violence in women’s facilities” (Owen et al., 2008, p. iv). Belknap (2010) notes that deficient responses to incarcerated women have existed historically and persist today, and explanations for criminal offending must be considered in the proper context. This context, informed by pathways research, shows that women’s criminal offending occurs within adverse socio-economic conditions, extreme poverty, and devastating traumatic experiences (Belknap, 2010).
The behaviors that emanate from these experiences, though problematic in correctional facilities, are being reframed as survival behaviors, and this new perspective is transforming services in corrections and mental health (Benedict, 2014; Miller & Najavits, 2012). This shift can lead to the design and delivery of disciplinary interventions that acknowledge and focus on assets and protective factors as much as deficiencies and risk factors.

**Women inmates tend to be less violent than men.**
Women typically enter the criminal justice system for nonviolent crimes, and are much less likely than men to be arrested for crimes against persons such as murder, robbery, or assault (Deschenes, Owen, & Crow, 2006; FBI, 2010; Greenfeld & Snell, 1999; West et al., 2010). The nature and context of violent crime committed by women frequently differ as well. Relative to men, when women do commit aggressive acts, these incidents typically involve assaults of lesser severity that are reactive or defensive in nature, rather than calculated or premeditated (Mordell, Viljoen, & Douglas, 2012). Within facility settings, women inmates are less likely to meet the objective criteria for assignment to maximum security housing, and incidents of violence and aggression committed by incarcerated women are extremely low (Wright, Van Voorhis, Salisbury & Bauman, 2009). Women offenders are less violent in communities and facilities compared to their male counterparts; however, many disciplinary policies and practices do not account for their unique behavior patterns and administer harsh penalties for behaviors that are not well understood (e.g., arguing, defiance, gossiping).

**Women inmates tend to have substance abuse problems and mental health needs that are linked to traumatic experiences.**
Women are more likely to be incarcerated for a drug related offense then a violent crime (FBI, 2010; Greenfeld & Snell, 1999; West et al., 2010). Women inmates are more likely to have used drugs, and are more frequent users of drugs, than male inmates (Snell, 1994). A 2006 Bureau of Justice Statistics (BJS) study indicated that over 60% of women reported a problem with drugs in the year preceding their incarceration (Mumola & Karberg, 2006). In addition, women are more likely to have mental health needs. A BJS special report showed that women inmates in state and federal correctional facilities had much higher rates of mental health problems than men (James & Glaze, 2008). Estimates suggest that 25% to 60% of incarcerated women require mental health services (Owen et al., 2008). In fact, trauma and mental health issues are often associated with the onset of crime (Lynch, et al. 2013).

Oftentimes, substance abuse problems and mental illness co-occur in justice-involved women. Seventy-five percent of women who suffer from mental illness also have a substance abuse disorder (Bloom, Owen, & Covington, 2003). Several researchers suggest that women offenders’ mental health and substance use issues are interrelated, and often tied to past abusive and traumatic experiences (Bloom, Owen, & Covington, 2005; Lynch et al., 2013; Miller & Najavits, 2012). Incarcerated women with the greatest mental health needs have

[http://cjinvolvedwomen.org/discipline-guide](http://cjinvolvedwomen.org/discipline-guide)
experienced the greatest levels of violence as children, and have had few social supports (James and Glaze, 2006; Lord, 2008).

Researchers, practitioners, and advocates note that adequate mental health and substance abuse services for women inmates are either lacking or, where they exist, are not gender responsive. Additionally, such services may not be coordinated despite the fact that both substance use and mental health challenges are often tied to early—in many cases, ongoing—abusive experiences in women inmates’ lives. Research suggests that there is a need to coordinate mental health services and other correctional interventions for women, especially when applying discipline and sanctions (Lord, 2008). Women inmates who struggle with difficult mental health and/or addiction symptoms may have great difficulty adhering to facility expectations (Lord, 2008; Miller & Najavits, 2012).

For example, in one correctional facility for women, about 80% of all unusual incidents involved inmates who were on mental health caseloads, and many of these incidents involved self-harm or disruptive behavior (Lord, 2008). Self-harm and disruptive behaviors can easily be viewed as intentional acts of defiance. Often, these and other problematic behaviors that women inmates display in correctional facilities formed long before they were incarcerated (Benedict, 2014; Lord, 2008; Miller & Najavits, 2012). To maximize their effectiveness, disciplinary interventions can be designed to help women make modifications to behaviors that have kept them safe in their communities and other programs and systems they have been involved with.

**A focus on protective factors and strengths improves outcomes with women offenders in correctional facilities and the community.**

The literature on criminal desistance is an important complement to pathways research. It emphasizes the importance of identifying strengths such as pro-social bonds and optimism regarding one’s ability to lead a productive life in an effort to facilitate pathways out of crime (Jones, 2011). These strengths are also called “protective factors” because they interact with one or more risk factors to reduce the probability of a negative outcome (Jones, 2011). The underlying premise of a strengths-based approach is that all women—regardless of history, experience, level of risk, or crime committed—have strengths that can be mobilized to enhance

In many ways, the dynamic aspects of women offenders’ mental health and mental illness are just beginning to be understood. As more and more research looks specifically at women offenders’ experiences, findings suggest that mental health services and diagnoses need to be applied differently than they are for men (e.g., the role of PTSD in women needs to be understood). Likewise, ongoing multidisciplinary discussions of the types of facility supports that are needed to maintain safe, humane, and effective environments for women inmates and staff are long overdue.
positive outcomes. Werner and Smith (1992) have demonstrated that protective factors can serve as buffers to mediate the impact of adversity, and may have a more profound influence on criminal justice outcomes than specific risk factors. A recent monograph written by Smith (2006) provides a comprehensive exploration of the history and theory underlying a strengths-based approach. She defines a strength as *that which helps a person to cope with life or that which makes life more fulfilling for oneself or others*.

Strengths-based approaches and resiliency models have become increasingly popular in corrections, and have been integrated into standardized risk need assessments (Barnoski, 2004); case planning and reentry models (Robinson, Millson, & Van Dieten, 2010; Van Dieten & Robinson, 2009); and are often used in conjunction with Cognitive-Behavioral interventions to enhance treatment readiness (Moyers & Houck, 2011). Finally, a number of strengths-based treatment approaches have emerged such as the Good-Lives Model (Ward, 2010). The Good Lives Model is premised on the belief that by working with the offender to build capabilities and strengths, corrections professionals are more likely to reduce their risk of reoffending. Sorbello, Eccleston, Ward, and Jones (2002) argue that an emphasis on criminogenic needs may fail to capture many of the real-life issues faced by justice-involved women. They suggest that by focusing on the enhancement of strengths, corrections professionals can better assist a woman to lead a more fulfilling and balanced life. For example, as a woman’s ability to engage in meaningful interactions with others increases, she is more likely to thrive in the community, which in turn reduces recidivism.

The use of a strengths-based approach may be particularly important in working with justice-involved women who are also more likely to have mental health issues and a history of victimization and trauma (Cloitre, Cohen & Koenen, 2006; Covington, 2003). The intervention model developed by Cloitre and her colleagues (2006) requires the professional to acknowledge that trauma, abuse, and negative environmental factors such as poverty can have an adverse impact on the lives of women. It also encourages the professional to view behavioral and emotional reactions typically labelled as non-adaptive from a strengths-based lens. Once staff members understand why a women inmate engages in maladaptive or harmful behaviors they can work in collaboration with her to explore, mobilize, and build more adaptive responses. They can also work to reinforce and affirm all efforts to use alternative strategies.

Women’s Psychological Development

*Historically, the research on psychological development focused on males and did not account for the unique experiences and developmental pathways of women and diverse cultural groups. Decades of research has led to a more comprehensive understanding of women’s experiences,*

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Strengths and needs. Awareness that relationships and societally-created barriers play a unique role in female development and offending can help improve approaches to discipline and sanctions in women’s facilities.

Relationships are a focal point for women, and women inmates’ behaviors are often linked to relationship violations and disconnections.

Relationships play a key role in women’s healthy development and healing from challenging life circumstances (Belenky et al., 1997; Brown & Gilligan, 1992; Gilligan, 1993; Gilligan, Ward & Taylor, 1998; Jordan, 1997; Jordan et al., 1991; Miller, 1986; Robb, 2007). Women’s growth is optimized in a relational context that includes mutuality, empathy, and empowerment, and is stunted when relationships are abusive or non-mutual (see Cozolino, 2014; Jordan, 2009; 1997; Jordan et al., 1991; Miller, 1986). Relationships are also a dominant theme in women’s criminal offending as many of the crimes that women commit are linked to the dynamics of their relationships with significant others. Women inmates often enter facilities with deep relational wounds that are the result of the multiple relationship violations they have experienced as children and adults (Bloom, Owen, & Covington, 2005; Chesney-Lind & Pasko, 2004; Institute for Health and Recovery, 2011). These violations can create profound feelings of disconnection from one’s self and others and are often experienced as traumatic. Further, being in a facility places automatic limitations on the connections women inmates can have with loved ones and supports, and introduces them to a complex environment wherein it is very difficult to meet basic needs for connection and support. This can cause problems in women’s facilities. For example, in an attempt to fulfill basic psychological needs, women inmates may seek out connections with others, even if such connections are risky. Further, they may be punished for attempts to connect and not given any behavioral alternative. The following are some examples of the tension that exists between women’s psychological needs and the requirements of correctional facilities:

- Connections with others are important for women, yet the forming of healthy relationships among women inmates can be stunted by traditional security policies (e.g., no talking during movement, prohibition of casual touching like handshakes).
- Physical contact is a primary part of a woman’s interpersonal relationships with her family members, especially children, yet being in a correctional facility often restricts such contact in general and as part of visits and phone calls.
- The power differentials women have experienced in their communities are often replicated in facilities (e.g., staff have power over women inmates), thus reinforcing negative and disempowering socialization messages.

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While some facility practices that conflict with women’s developmental needs are necessary, others are either not necessary or can be adapted to be more gender responsive while upholding requirements for safety and security. New gender responsive interventions that actively address relationships and connections have been developed and implemented with growing success in some facilities (e.g., peer support programs, collaborative case management)\(^4\). These interventions acknowledge and address the importance of relationships in the lives of women inmates and employ methods that create relational safety and offer opportunities for healthy relationship building. Consequently, they facilitate opportunities for growth and positive behavior change.

**Negative societal messages about women can complicate women inmates’ growth and recovery, and impact staff attitudes.**

While negative societal messages about women can limit their self-esteem and growth (i.e., women are of a lesser value than men and have limited capabilities), the effects may be compounded for women inmates who are likely to have experienced trauma or relationship violations in their lives, and are likely to be of minority status (e.g., ethnicity, socio-economic class, sexual orientation). Furthermore, women are socialized to be nurturers and are encouraged to have relational competence, yet they are often criticized for the emphasis they place on relationships (Jones, 2011). As a result, women may be pathologized as inherently needy, overly emotional, and dependent (Broverman et al., 1970; Gilligan, 1993; Jordan et al., 1991; Miller, 1976; Miller & Stiver, 1997).

Within correctional facilities, traditional facility policies and practices unwittingly may punish women’s healthy attempts to connect, and correctional professionals may miss opportunities to help women cultivate healthy personal, relational and interactional skills. Research conducted in both juvenile and adult settings reveals that certain behaviors are viewed as more severe when displayed by women (Belknap, 2001; Chesney-Lind & Pasko, 2004; Chesney-Lind & Sheldon, 1998). For example, an inmate who spreads a rumor about a new inmate may be labeled as “catty,” “petty,” or “mean.” However, it may be that the woman inmate felt threatened by statements made by the new inmate—statements of which the staff was not aware. Spreading a rumor may be a way for the inmate to maintain alliances with other inmates and keep herself safe.

\(^4\) See e.g., *Engaging Women in Trauma-Informed Peer Support: A Guidebook* and the *Women Offender Case Management Model*. 

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As staff members introduce intentional operational practices to create safety for women inmates (e.g., procedures for introducing a new inmate into the culture), inmates will feel less compelled to create safety on their own terms (Benedict, 2010). Furthermore, as the research specific to women increases, corrections professionals will better understand women inmate behavior and be able to capitalize on the importance of relationships to facilitate their engagement in programs and positive community networks both within the facility and upon release.

**Brain research shows that connection is a basic human motive, and essential for growth and change.**

Brain research (i.e., research in neuroanatomy, neurophysiology, and neuropsychology) describes connectedness as a basic human motive (Cozolino, 2014; Schore, 2009; Siegel, 2008; Siegel, 2007), and supports the notion that healthy human development occurs in relationship with others. Psychologist Louis Cozolino (2014) notes, “...relationships impact the functioning and growth of the brain’s neural circuitry” (p. 13). In fact, practitioners’ verbal and nonverbal behavior can shape the thoughts, feelings and behaviors of those they are trying to help (Schore, 2009). Taken together, this research suggests that interactions between staff and women inmates that are built upon safety and respect may produce changes in the brain that are important for healthy development and growth. Therefore, in correctional terms, “behavior change,” “positive growth,” or “rehabilitation,” occurs in healthy relationships with staff, as well as other inmates.

**Trauma and its Effect on Women Inmates**

The research on trauma, including emerging information regarding trauma’s impact on the brain and body, is transforming how services are provided in a variety of fields, including corrections. Studies like the Adverse Childhood Experiences (ACE) Study, pioneering brain research, and a plethora of research on women offenders and trauma is informing correctional practices. For example, research reveals that understanding what trauma is and how it impacts human beings can help explain why women inmates often behave the way they do, and can help corrections staff to employ interventions that achieve improved outcomes with them. This section reviews important research on trauma, including its impact on brain function and body physiology, which can guide the improvement of discipline policies and practices.

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5 For more information on trauma see the NRCJIW publication: [Using Trauma-informed Strategies to Improve Safety and Security in Female Correctional Facilities.](http://cjinvolvedwomen.org/discipline-guide)

6 See [www.acestudy.org](http://www.acestudy.org).
Trauma is prevalent among women inmates.

Women inmates are more likely to report victimization in childhood, and much more likely to report violent victimization, than non-incarcerated women (Owen et al., 2008). This finding has been replicated in studies of probation, jail, and prison populations (Bloom, Owen & Covington, 2003; McClellan, Farabee & Crouch, 1997; Owen, 1998; Owen et al., 2008; Pollock, 2002; Snell, 1994). The likelihood of victimization in adulthood is also higher among justice-involved women than among women in the general public (Battle et al., 2002; Blackburn et al., 2008; Raj et al., 2008; Zlotnick et al., 2003). Consider the following (see Owen et al., 2008 for review):

- In a sample of 150 New York women prisoners, 59% had been sexually abused and 70% had been physically abused as children; 49% had been raped as an adult; and 70% had experienced severe intimate partner abuse (Browne, Miller & Maguin, 1999).
- Other researchers have reported that about a third of incarcerated women have experienced violent trauma and exhibit signs of Post-Traumatic Stress Disorder (PTSD), and that women who have experienced abuse are about twice as likely to exhibit signs of mental illness (Jordan et al., 1996; Powell, 1999).
- Researchers who surveyed jail inmates report similar findings (Haywood et al., 2000; Veysey, 1998). For instance, Green et al. (2005) found in their jail sample that 98% of women had experienced trauma exposure at some point in their lives, 36% reported some current mental disorder, and 74% had some type of drug/alcohol problem.

The high prevalence of trauma among women inmates can pose a significant challenge to corrections staff and their implementation of operational practices. Past trauma also challenges women inmates’ coping capacities and can contribute to complex responses and relational dynamics between women inmates, and between women inmates and staff. Understanding the struggles and needs of women inmate survivors can help corrections professionals to create a stabilizing facility culture and offer trauma-informed services and supports as part of discipline and sanctions practices.

Trauma creates changes in the brain and body that are designed to keep survivors safe.

Exposure to traumatic events—those involving threat of significant personal harm and helplessness—change the brain-body’s typical stress identification and response system (Cloitre, 2009; Cloitre et al., 2009; Emerson & Hopper, 2011; Van der Kolk, 2005). After a traumatic event(s), the nervous system has difficulty resetting itself and can remain in a consistently depressed or “hyper-vigilant” state. Further, various
events can be experienced as triggers (reminders) of a traumatic event, and create the same neurobiological reactions that were present at the time of the original trauma. These reactions are normal—they are the brain-body’s way of protecting us from harm—but they take a toll on the mind and body and, in correctional facilities, these reactions can create safety problems. Victims of trauma frequently feel unsafe in relation to others, as well as within their own bodies. This can lead to additional trauma. Further, victims’ cognitions and emotions are self-perceived to be chaotic and out of control. This holds true for survivors of many different types of traumatic events, including combat veterans, battered women, and rape survivors (Salisbury & Van Voorhis, 2009).

Because trauma survivors are easily triggered into a psychological state of self-protection, it is important to create facility environments that minimize triggers. The experience of basic safety within one’s own mind and body and within the surrounding environment creates stability and facilitates inmates’ engagement in services and interventions. Yet several trauma triggers are routinely present in a correctional environment, such as the banging of doors, loud voices, unfamiliar persons, and various disciplinary practices. As a result, many women inmates live day to day somewhere along a continuum of a depressed or heightened state of nervous system activity. Further, inmates’ traumatic responses to stressors in correctional facilities are often unconscious. For example, a rape survivor may carry a network of neurons that are prepared to respond to the perception of any cues that were present during the rape. If she experiences one or more of these cues, she will experience the same cascade of neurochemicals that were triggered during the actual event (Lisak, 2002). Unconscious responses are designed to keep us safe; they are governed by the brain’s fear-response system and allow us to respond to a threat quickly and without thinking (Levine 1997; Lisak, 2002). It is therefore important to avoid routine disciplinary practices that, though designed to change behavior, can actually trigger inmate survival behaviors. It is also important to have clear strategies that facilitate inmates’ safety and stability when they are triggered.

**Traumatic histories are often embedded in women inmates’ behaviors; these behaviors represent their best attempts to cope with the effects of trauma.**

The trauma and victimization that so many women inmates have experienced overwhelms their neurophysiological response systems and psyches, creating what Levine (1997) calls “an unresolved impact” (p. 129). The challenging behaviors so often displayed by women inmates—from isolating to aggression—are often linked to this response. Trauma can trigger inmate survival behaviors that are easily misinterpreted as pathological if their cause is not apparent (Benedict, 2013; Root, 1992; Salisbury & Van Voorhis, 2009). Exhibit 1 provides some examples of the types of behaviors and coping skills exhibited by women inmates in response to the traumatic events they have been exposed to.

Becoming knowledgeable about trauma and its impact can help correctional facility staff to gain a greater understanding of and appreciation for the kinds of behaviors they observe in the women inmates they manage. Maeve (2000) explains that incarceration can recreate trauma
and aggravate the symptoms of PTSD. For example, routine procedures in correctional facilities such as pat-downs and strip searches can trigger memories of childhood sexual abuse and sexual assault for women. In fact, research shows that women inmates’ violence, dissociation, depression, and self-harming behaviors can be predicted based on their prior trauma histories (Maeve, 2000). Individuals who have experienced trauma (Emerson & Hopper, 2011):

- Learn that the world is dangerous;
- Operate in self-defense mode and have great difficulty shifting from defensive reactions; and
- Experience threat as omnipresent (e.g., everyone in the environment is viewed a potential threat to one’s physical or psychological safety).

<table>
<thead>
<tr>
<th>Exhibit 1: Common Coping/Survival Behaviors Among Justice-Involved Women (Benedict, 2013)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Behaviors Observed Among Women Prior to Incarceration</strong></td>
</tr>
<tr>
<td>• Substance abuse</td>
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<tr>
<td>• Self-injurious and suicidal behaviors</td>
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<tr>
<td>• Compromised social and interpersonal functioning</td>
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<tr>
<td>• Mistrust of others</td>
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<tr>
<td>• Aggression</td>
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<tr>
<td>• High risk sexual behavior</td>
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<tr>
<td>• Trouble coping with stress</td>
</tr>
<tr>
<td>• Vulnerability to further abuse</td>
</tr>
<tr>
<td>• Compromised intellectual performance</td>
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<tr>
<td>• Prostitution</td>
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Perceived dangers may be real or not, and can include environmental and relational dangers and internal distress. At any given point in time, women inmates may be struggling with one or more of these dangers. Unable to speak about them, survival behaviors are triggered that can cause problems in a correctional setting. Exhibit 2 illustrates how inmate behaviors may be triggered by past trauma.
### Exhibit 2: Examples of How Inmate Behaviors Might Result from Trauma-Influenced Responses

<table>
<thead>
<tr>
<th>Perceived Danger (a person or event that may or may not be dangerous)</th>
<th>Inmate Trigger (thought and feeling; may or may not be consciously experienced)</th>
<th>Inmate Behavior (trauma-influenced response)</th>
</tr>
</thead>
</table>
| **Environmental**  
During group, an inmate notices that a door is open in the dayroom. | That door is never open.  
What or who is in there? | During group the inmate says, “This group is stupid; I’m leaving.” |
| **Relational**  
During recreation time an inmate notices that two inmates are holding hands while watching television. | I don’t want anybody touching me in here. | When an inmate comes to sit next to her the inmates shoves her away. |
| **Internal**  
After a visit with her mother an inmate has cycling thoughts about the abuse she endured from her father. | I feel agitated and unglued. I don’t want to be in that cell again tonight. | The inmate refuses nighttime hygiene. As staff react she escalates and becomes more aggressive. |

In sum, traumatic histories can influence how women inmates’ respond in certain situations and may explain some behaviors which would otherwise be misunderstood. Knowing that there are some correctional practices or elements of the facility environment that may act as trauma triggers, correctional leadership and staff can take steps to minimize re-traumatization and ultimately contribute to her healing and growth.

**Women inmates’ traumatic responses can be affected by how others respond to them and the availability of ongoing support and resources.**  
The psychological effects of trauma can be worsened by post trauma interactions with others, such as how staff respond to disclosure, how staff respond to hyper-vigilance, and other behaviors that are linked to traumatic experiences. The environment and access to support and resources can render trauma more or less intense and complex, and create barriers to or facilitate positive behavior and growth. Research shows that emotional and psychological support makes a difference, and that disclosures of trauma should be followed by non-blaming, accepting, and non-stigmatizing responses (Herman, 1997; Klein, 2012). Trauma expert Judith Herman notes that relationships can be powerful tools for healing, and emphasizes how important it is to create safe and protected spaces with survivors. “Creating a protected space where survivors can speak their truth is an act of liberation” (Herman, 1997, p. 246). This means that staff interactions have the capacity to create safety and stability for women inmates with trauma histories.
Evidence-based Strategies that Motivate, Build Skills and Create Behavioral Success with Women

National research and feedback from corrections professionals indicate that there is a need to enhance discipline practices with women inmates. There is a growing awareness that traditional approaches do not achieve desired results, and that gender responsive, trauma-informed, evidence-based practices can be used to improve facility safety, security, and effectiveness. This section offers information on the limitations of approaches currently used in many correctional facilities, and proposes alternative strategies that can be used to enhance discipline and sanctions with women inmates.

Punishment-oriented approaches are limited and can have unintended consequences.
In corrections, “discipline” is typically equated with “punishment,” which often results in sanctions. Punishment may include the removal of something (e.g., loss of privileges, contact with others, recreation, freedom of movement), which is a common form of discipline in correctional facilities. However, sanctions—without an accompanying intervention to address criminogenic needs—do not change offender behavior or reduce recidivism (Andrews, 2007; Gendreau, Goggin, & Cullen, 1999; Gendreau, et al., 2001; Lipsey & Cullen, 2007; Smith, Goggin & Gendreau, 2002). In reality, the use of punishment can result in unwanted side effects, including an increase in other undesirable behaviors and a decrease in desired behaviors. Discipline and sanctions systems that have a punitive orientation often produce the following unwanted side effects (Dr. Michael Nietzel’s testimony from Canterino v. Wilson, 1982):

- Fear and tension/anxiety (resulting in sleep disturbance and depression)
- Learned helplessness (apathy, loss of will to change)
- Resentment
- Escape and avoidance behaviors

“...the belief that harsh treatment [is] good for offenders is simply untrue...reducing resistance has the potential to provide criminal justice workers with skills that could increase the effectiveness of their interactions with offenders and improve the climate of the criminal justice system...” (Miller & Rollnick, 2002, p. 356)

Punitive and isolating behaviors tend to be associated with a significant increase in negative behaviors and significant decrease in positive behaviors.

Source: Natta et al., 1990; Papolos & Papolos, 1999

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- Viewing staff as antagonists
- Aggression (anger, jealousy, friction)
- Underground behavior (complying with rules while authorities are present, than undermining the system when unobserved)

These unintended outcomes may compromise inmate management and growth, and facility safety and security. Research and evaluations that have focused specifically on women’s correctional facilities have shown that discipline and sanctions systems are often not gender responsive (Carlen, 2011). Many of these systems have been in existence for many years, and were originally designed to deal with a largely male population. As mentioned previously, men and women have different pathways into the criminal justice system and have different experiences and needs within the system; approaches to discipline and sanctions should account for these differences. Many discipline and sanctions systems are also not trauma-informed. However unwittingly, these systems tend to trigger traumatic reactions that can lead to problems at the individual and facility levels. Finally, many discipline and sanctions systems do not reflect basic principles of behavior modification, such as:

- Clear and consistent expectations for behavior;
- Strategies specifically designed to prevent problems before they arise;
- Positive reinforcement;
- Skill-building opportunities; and
- Timely responses to problem behavior.
Further, these systems:

- Are primarily punitive in their orientation;
- Rely primarily on external controls to maintain compliance versus implementing methods that prepare women for effective actions in and outside of the facility;
- Overuse inmate confinement/segregation as a tool to change behavior;
- Produce frustration among staff and inmates alike;
- Are weakened by excessive subjectivity;
- Are inconsistently implemented;
- May not account for mental health needs;
- Often remove basic human needs (e.g., contact with family and other supports); and
- Can create either disdain for authority and retaliatory behaviors, or inmate withdrawal behaviors, both of which can be accompanied by a range of complex symptoms and reactions that complicate facility supervision and management.

Overuse of segregation, solitary confinement, and restraints can cause mental and physical distress in women inmates, impair the social interactions that motivate effective behavior, and create safety and security problems. Research shows that segregation can lead to various negative outcomes for all inmates, not just those who have clear distress responses when placed in segregation (ACLU, 2014; Smith, 2010; Smith, 2006). Women are more likely to harm themselves than to harm others, and the overuse of segregation, solitary confinement, and restraints can have unintended and sometimes detrimental consequences (see e.g., ACLU, 2014; United Nations General Assembly, 2011). Facility-based research (see Hardyman & Van Voorhis, 2004) reveals overall lower rates of major, violent misconducts by women compared to men, yet greater use of major sanctions. Female development research has shown that relationships are significant for women, and

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7 The Vera Institute’s Segregation Reduction Project works with states to decrease the number of people they hold in segregation, provides recommendations tailored to their specific circumstances and needs, and continues to assist them while they plan and implement change. Also, SAMHSA’s Promoting Alternatives to Seclusion and Restraint through Trauma-Informed Practices project provides technical assistance to reduce or eliminate the use of seclusion and restraint in systems serving people with mental illness and substance use disorders.
healthy interpersonal interactions can be a source of personal development and growth. Overuse of segregation, solitary confinement, and restraints removes opportunities for healthy interactions with staff, peers, and family that can stabilize and motivate behavior; the research on trauma and its effects suggests that segregation and solitary confinement can be palpable triggers for survivors of trauma (Huckshorn, 2010; NETI, 2005).

The following negative psychological and behavioral effects of segregation have been documented (Huckshorn, 2010; NETI, 2005; Sailas & Fenton, 2000; Smith, 2010; Smith, 2006):

- Health problems
- Depression
- Anxiety
- Stomach and muscle pains
- Inability to concentrate
- Self-harming behavior
- Psychiatric morbidity
- Increased psychopathological symptoms

It is important to note that these reactions are the same as those reported by individuals who have suffered from trauma. Additionally, while these negative effects begin with the inmates, they reach into the facility culture as well (Browne, Cambier & Agha, 2011). Inmates may cope with these adverse psychological and physical experiences by interacting with others in ineffective ways and exhibiting additional misconduct.

While the multitude of behaviors that can lead to segregation or solitary confinement are often thought to be initiated by inmates, studies have illuminated the role of the environment in cueing many more problem behaviors than previously thought (Cooke & Johnstone, 2012; Duxbury, 2002; Richter & Whittington, 2006). According to Gadon and her colleagues (2006, p. 9), “human behavior does not occur in a vacuum…” Research suggests that much of the conflict in facility settings occurs as a result of interpersonal interactions (e.g., inmate-inmate, staff-inmate) and staff attitudes (NETI, 2005). The corrections research on sexual violence in women’s facilities and the Prison Rape Elimination Act (PREA) support the notion that the facility environment plays a significant role in the development and continuation of various inmate behaviors (McNabb, 2008; Moss, 2007; Owen et al., 2008). Facilities that acknowledge this, develop improvement plans, and implement changes, have realized reductions in restraints and seclusions (NETI, 2005).

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Using more rewards than sanctions, and adopting core behavior modification principles is more effective in reducing women’s rule-violating behaviors.

There is growing attention in corrections regarding the importance of applying evidence-based practices in correctional settings. A set of core correctional practices identified in the research includes the appropriate use of authority, modeling and reinforcing pro-social behaviors, teaching problem solving skills, and establishing a positive, professional relationship with offenders, among others (Dowden & Andrews, 2004; Millson, Robinson, & Van Dieten, 2010; Orbis Partners, 2006). Key findings on the use of rewards and sanctions, which is supported by the gender-neutral and gender-informed research, indicate that (adapted from Carey, 2009):

- **Letting offenders know which behaviors are desired and not desired is important.** Offenders are more likely to adhere to facility expectations when they know the rules and consequences ahead of time. Further, they are less likely to resist the consequences when the rules are broken and a sanction is imposed.

- **The consistency of responses to rule violating behaviors is critical.** Staff should make attempts to respond in some way to every rule violation (Grasmack & Bryjak, 1980; Nichols & Ross, 1990; Paternoster, 1989). This does not mean that all rule violations require the same response or that all violations require a sanction. It does mean that some response is necessary so that inmates can learn and be clear about the rules. Ignoring rule violations sends the message that rules are not taken seriously and can encourage more violations, however unintentional they may be (Carter, 2010).

- **The quality of responses to rule violations matters.** While responses are indeed important, the quality of the response is equally important and can either facilitate or inhibit effective inmate behavior. As stated above, responses can include respectful reminders, taking a moment to teach a new skill, and/or communicating a consequence. While some violations may require more significant responses, and may even need to include a consequence or sanction, respectful interactions and skill building should also be present (Andrews, 2007; Orbis Partners, 2006).

- **Responses to rule violations should be prompt.** Responses to violations should occur respectfully and as soon as possible in order to improve adherence to facility

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8 This research originates from the growing body of knowledge on developing effective responses to probation and parole violations.
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expectations (Rhine, 1993). In fact, swift and certain responses are more effective than severe responses in changing behavior. Research demonstrates that responses are most effective when they are delivered quickly and when they seek to positively change behavior, rather than punish (Carter, 2010).

• **Responses should be proportionate to the seriousness of the behavior.** In other words, responses to behaviors should not be more punitive then necessary (Von Hirsch, 1993).

• **Similar behaviors should be responded to similarly across staff and shifts** (Paternoster et al., 1997). It is important for staff to have a shared knowledge about what types of behaviors require what types of responses. This ensures that a stable and predictable environment is created for staff and inmates. Staff might utilize a decision making instrument, like violation decision making matrices used by probation officers or staff intervention protocols in facilities, to produce more consistent results (see Carter, 2010 and Benedict, 2010, respectively).

Importantly, these same rules apply when utilizing rewards to reinforce effective behaviors among inmates. Research indicates that, in order to change behavior, positive reinforcement and incentives should be utilized more than negative reinforcement or sanctions (Andrews & Bonta, 2006; Flora, 2004; Gendreau & Goggin, 1996; Wodahl et al., 2011). Positive reinforcement is much more likely to produce desired outcomes and experts recommend that correctional staff utilize a 4:1 ratio of positive or affirming statements/responses for every sanction or expression of disapproval (Wodahl et al., 2011). Rewards are best facilitated through a positive relationship between the offender and staff, and collaborative work with offenders improves outcomes (Burke 2004; Orbis Partners, 2006). Ultimately, the use of incentives can enhance motivation among offenders in meeting a variety of goals (Andrews & Bonta, 2006; Orbis Partners, 2006). Gender-informed evidence supports these notions and also incorporates practices that have been specifically designed to improve approaches with women offenders given their unique developmental pathways, risks, strengths, and needs.⁹

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⁹ See e.g., the [process](http://cjinvolvedwomen.org/discipline-guide) and [outcome](http://cjinvolvedwomen.org/discipline-guide) evaluations on the Women Offender Case Management Model.
Staff can be successful in impacting women’s behavior through the quality of their interactions.

Research has shown that the rapport between staff and the person with whom they are interacting has a significant impact on behavior change (Andrews & Bonta, 2006; Corsini & Wedding, 2011; Dowden & Andrews, 2004; Miller & Rollnick, 2002). Dowden and Andrews (2004) suggest that the qualities in a working relationship between correctional staff and inmates should include mutual respect, openess, empathy, genuineness, flexibility, and be solution-focused. Research has also shown that these characteristics are more likely than individual traits to predict outcomes (Castonguay & Beutler, 2006; Miller & Rollnick, 2002).

A positive working relationship, or “helping alliance,” is one of the factors consistently associated with positive outcomes (Asay & Lambert, 1999, cited in Corsini & Wedding, 2011). In fact, many studies support the notion that while authoritative interactions increase resistance, collaborative interactions motivate (Ginsberg et al., 2002; Hubble, Duncan & Miller, 1999; Miller & Rollnick, 2002; Millson et al., 2009; Rollnick, Mason & Butler, 1999; Tomlin & Richardson, 2004). Carl Rogers (1913; 1957; 1951) revolutionized psychological interventions with human beings in all settings when he asserted that a practitioner who expresses attitudes of unconditional positive regard and empathic understanding within a genuine relationship will catalyze personality change. Showing respect and understanding requires that we hold at least two beliefs:

- Every person deserves respect and has inner resources for growth and change in spite of apparent impairments or environmental limitations (Corsini & Wedding, 2011).
- If we genuinely engage every person and strive to understand their experiences and feelings, and what they mean to the person, we can achieve more positive outcomes.

These two maxims have enormous implications for corrections and the management of women inmates. According to Miller and Rollnick (2002), “the overarching culture that exists within [many] criminal justice systems often hinders offenders’ motivation” (p. 355). Many within and outside of the correctional field believe that punishment reduces recidivism. This belief is often reflected in the severity of sanctions used by agencies and the confrontational style employed when sanctions are administered. Yet the research suggests that more promising results can be achieved when a balanced approach based on respect (i.e., establishing a working alliance) and

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responsibility (i.e., holding individuals accountable) is established (Andrews & Bonta, 2006; Robinson, Van Dieten & Millson, 2012).

**Cultivating intrinsic motivation, skills, and self-efficacy impacts women inmates’ immediate and long-term behavior.**

Women inmates are less likely to adopt behaviors that are externally controlled versus behaviors that are internally motivated (Miller & Rollnick, 2002; Ryan & Deci, 2000). To increase motivation, inmates need to feel that they can control their own behavior, that others value their thoughts and feelings, and that they are succeeding in achieving desired outcomes. Correctional staff can be “change agents” who can create environments that support inmates’ intrinsic motivation by attending to the following basic human needs (Carlen, 2011; Miller & Rollnick, 2002):

- **Personal control**: The need to experience one’s behavior as under one’s own control rather than under the control of external forces.

- **Healthy relationships**: The need for relatedness or believing that others value one’s thoughts, beliefs and feelings.

- **Self-efficacy**: The need for competence or believing that one’s behavior is efficacious in producing desired outcomes.

Attending to these needs among women inmates helps to create intrinsic motivation and the potential for behavior change, both of which can contribute to facility and community safety. Finally, one of the most important findings from research on women offenders is that self-efficacy impacts recidivism (Orbis Partners, 2006; Van Voorhis et al., 2009). This is an important distinction. It is not enough for women inmates to have positive attitudes about themselves; they also need opportunities to experience and build success while incarcerated. Corrections research focusing on women shows that there is a significant correlation between lower self-efficacy and new charges and new convictions post discharge, and that women offenders with higher self-efficacy are less likely to recidivate (Sperber, n.d.; Van Voorhis et al., 2009). This has significant implications for women’s correctional facilities which, by design, de-emphasize personal agency in an effort to manage large groups of women. The challenge, then, is to build opportunities for women to enhance self-efficacy while incarcerated. This is one of the principle outcomes of intervention strategies such as the Women Offender Case Management Model (Orbis Partners, 2006) and cognitive-behavioral programs like Seeking Safety (Najavits, 2002; Zlotnick et al., 2003) and Moving On (Gehring, Van Voorhis & Bell, 2010). Other opportunities to build self-efficacy can be realized through vocational programs, work details, and the like.
Creating opportunities to build women inmates’ skills and self-efficacy is essential to positive behavior change. Women inmates can begin to heal from negative and disempowering experiences when provided opportunities to build their self-efficacy. An approach that promotes self-efficacy requires that staff view women inmates as capable individuals, with important insights and ideas about the solutions to their problems (Case & Fasenfest, 2004; Morash, Bynum & Koons, 1998; Schram & Morash, 2002; Wright, Salisbury, Van Voorhis, 2007. Psychological data clearly indicates that when individuals are given opportunities to exercise choice and action in their environment, they move out of old behavior patterns into new ways of being that facilitate personal and interpersonal success (Corsini & Wedding, 2011). Conversely, coercion and force, for example, while appearing on the surface to extinguish negative behaviors, elicits change that is often temporary (Carter et al., 2007). Further, they are more likely to deepen the problems and increase their frequency.

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