

# Criminal justice assignment



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Recidivism and Resettlement: Determining the Level of Satisfaction in the Needs and Accommodations in Preventing Recidivism and establishing Resettlement for Female Offenders Luis A Cintron Argosy University, Honolulu Campus W7000 – Advanced Academic Study and Writing Professor Lyons June 25, 2010 Table of Contents

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25 Abstract An area that has been overlooked in the discussion of female

offenders is the issue of needs and accommodations in preventing recidivism. This paper will report the results of an initial review on recidivism.

The result of the literature-reviewed will examined different needs and accommodations among female offenders and how recidivism is formed. Various studies and ways to prevent recidivism will be explained from discouraging a revolving door for female offenders. Several factors will be examined such as, institution programs, families, and the community that contributes in forming recidivism among the female populations. Finally, research questions for future investigation will be proposed on preventing recidivism and establishing a resettlement program among female offenders.

Keywords: individual liability, gynecological, information continuity, management continuity, morbidities, negligence, planned behavior, recidivism, relationship continuity, resettlement Determining the Level of Satisfaction in the Needs and Accommodations in Preventing Recidivism and establishing Resettlement for Female Offenders This literature reviewed will examine how to prevent recidivism through the needs and accommodations that female offenders rely on while incarceration. Recidivism has become a natural norm for many female inmates.

Many federal and state prisons are becoming over crowded due to a high volume of recidivism among female offenders. For many of the female offenders, it becomes difficult for them to reintegrate into the community without the proper skills and accommodations due to gender differences. These differences are “ females who are involved in the criminal justice system present different circumstances and needs than those of their male

counterparts" (National Data Analysis System, 2006). This is becoming a growing trend among the female populations.

The female offender populations have been increasing at a higher rate within the past several years. Many programs and facilities are being developed and upgraded to meet the needs of this expanding population. According to the U. S. General Accounting Office (2009) (GAO), there has been a 500% increased in the number of female offenders in state/federal correctional systems between the 1980 through 1999. The U. S. Department of Justice Federal Bureau of Prisons (2008), reported between 1980 and 1989, both male and female population has doubled within the federal prisons, from about 24, 000 inmates to 58, 000.

The population doubled again between 1990 and 1999. By the end of Fiscal Year (FY) 1999, the Bureau of Prisons (BOP) inmates' population had reached 134, 000. Less than 10 years later, the population surpassed 200, 000 inmates. This trend continues to grow and grow with no end in sight. One of the main causes to this continuing growing concern is the lack of programs within the prisons system to resettle offenders into the community once released from incarceration, therefore increasing recidivism among offenders.

The Bureau of Justice Statistics Special Report (1987) conducted a study in 1983 of 108, 580 inmates who were released from prison in 11 states prisons to determine if there was a pattern of recidivism among the different states. Within 3 years after their released date from prison in 1983, an estimated 62. 5% of released prisoners had been rearrested; 46. 8% had been

reconvicted; and 41.4% had been reincarcerated. These findings were based on a “sample of more than 16,000 released prisoners, representing all those released from prison in 11 states during 1983” (Bureau of Justice Statistics, 1987, p. ). Table 1 shows how recidivism of state prisoners released in 1983, recidivated to prison within a time frame of six months to three years after released. Table 1 Recidivism of State prisoners released in 1983, by time after release Percent of released prisoners who were:

Time after released	Rearrested	Reconvicted	Reincarcerated
6 months	25.0%	11.3%	8.4%
1 year	39.3%	23.1%	18.6%
2 years	54.5%	38.3%	32.8%
3 years	62.5%	46.8%	41.4%

Note: Adapted from (Bureau of Justice Statistics Special Report, 1987, p. 3)

To fully understand recidivism, it must first be defined. Gobeil and Barrett (2007), defined recidivism “as any revocation of conditional release within two years of release from a federal institution, with any new conviction within two years, and any new conviction for a violent offence within two years” (p. 11). Many offenders find themselves returning back to prison due to lack of needs and accommodation that will help them prepared them for reintegration into the community.

One main concern are inmates who are bound for released with wrongful conviction due to their appeal process and found innocents, are left to defend for themselves once released from prison. Many of these prisoners have spent very long periods within the prison system and have not undergone any programs prior to release to prepare them gradually for that experience. Reason being the probation service has no statutory responsibility to render any assistance to them after released.

According to Shore (1999), he viewed 15 to 20 cases of inmates bound for released due to being wrongly accused and found each individual who have been released following a miscarriage of justice experience very served and long standing difficulties in their family relationship and in close relations with others. These released prisoners show features of enduring personality change and chronic posttraumatic stress symptom due to the long-term imprisonment, which often experience financial circumstances and accommodations needs.

For many of these inmates they lack the necessity to reintegrated back into modern society. They do not receive proper help with programs subject to released, leaving them to defend for themselves, which causes them to recidivated back to prison. This problem can be examined through a theory known as planned behavior (habit theory). Planned behavior is defined as a “ human social behavior that is reasonable and a conceptual framework for an intervention to effect change in behavior” (Bamberg, Ajzen, and Schmidt , 2003, p. 176).

According to Bamberg, Ajzen, and Schmidt (2003), people’s beliefs may be unfounded or biased, their attitudes, subjective norms, and perceptions of behavioral control are assumed to follow reasonably from these beliefs. It produces a corresponding behavioral intention, and ultimately results in behavior that is consistent with the overall tenor of the beliefs. With this stable of behavior, it allows offenders to repeat offenses due to frequency of previous behaviors, which in turn explains the direct link to later behavior and therefore later crime.

This in turn creates a habit for crime due to the stability of the behavior therefore creating a revolving door into prison. By understanding the behavior of female offenders it should be possible to influence intentions and behaviors by designing programs and interventions that have significant effects on one or more of the antecedent factors, that is, on attitudes toward behavior, subjective norms, and perceptions of behavioral control. This can help to reduce recidivism among offenders and establish resettlement attitudes toward the community.

However, this is not the case for many offenders that fall short in receiving the proper programs and interventions. Many leave the prison system without the proper skills or accommodations to help them reintegrate into the community. These underdeveloped accommodations fall under a condition known as continuity of care, which is an issue that has been overlooked at the federal/state level. Keil and Samele (2009) have explored three types of continuity of care at a federal prison in the United Kingdom: Federal Adult Women Prisons (UKFAWP).

What they measured within the healthcare UK women prison showed them the level of care that is given to female offenders before leaving the prison system. All three types of continuity are defined as such: Relationship continuity “is achieved when service users have the opportunity to develop a therapeutic relationship with a named professional” (Keil & Samele, 2009, p. 29).

Management continuity “involves the delivery of services that are well coordinated and appropriated to each service user’s needs” (Keil & Samele, 2009, p. 29).

Information continuity “ ensures there is effective communication between different care providers, and information about a service user’s care follows them through the healthcare system” (Keil & Samele, 2009, p. 29). What their research found is that stable accommodation can reduced reconviction rates by over 20%. However, they noted that only 19% of prisoners did received helped with accommodation before leaving prison, and only 33% of those who were homeless received help looking for accommodation after their sentenced was completed.

This continuing issued becomes a resettlement problem for many offenders that are released from prison and have no support to accommodate their physical, mental, and emotional needs. The three continuity of care only explains a small portion of why many fall back to recidivism. However, other needs and accommodations such as education, visitation, work assignments, and other medical needs, must be look at within the federal/state prison programs to determine if these contributed to female offenders referring back to recidivism.

This is beneficial for federal correctional officers to learn about the unique needs and accommodation of female offenders as well as the underlying causes of their criminal history. There are many factors such as emotions, family problems, level of educations, age, health concerns, substances abuse, mental and physical abuse that affects the behavior of female offenders that leads back to recidivism. Many officers will work with this population and will be required to use skills different from those used when working with male offenders.



However, to fully understand what leads offenders to recidivism and how to deal with its symptoms, the history of the female offender within the federal prison system must first be looked closely. History of Female Offenders within the Bureau of Prisons (BOP) Before the 1890's, there were no federal prisons. Federal offenders, male and female, were boarded at state prisons and county jails. The overcrowding and harsh conditions in these facilities as well as a growing reluctance of state and county governments to continue housing federal offenders led the U.

S. Congress to pass the Three Prisons Act in 1891. The Three Prisons Act allowed, “ legislation to authorized the first federal penitentiaries and marked the beginning of the Federal Prison System. The first federal prisons were intended to house male inmates” (Sallyport Bureau of Prisons, 2004, p. 89). Although the passage of the Three Prisons Act was enacted, female inmates were not sent to federal prison until 1921. During the late 1890's and early 1900's, there were only a few female federal prisoners.

By May 1910, there were only 26 female prisoners in which “ the practice of boarding federal female prisoners in sometimes unsatisfactory state prisons and local jails continued into the 1920s” (Sallyport Bureau of Prisons, 2004, p. 90). However, finding appropriate accommodation for the females proved difficult. Some women were incarcerated in special quarters at the United States Penitentiaries (U. S. P. ) Leavenworth and U. S. P. McNeill Island, both male facilities. Most female federal prisoners were still boarded in women units of state facilities, just as they had been before the passage of the Three Prisons Act

In 1921, Mabel Walker Willebrandt was appointed Assistant Attorney General and given authority over federal prison operations. Ms. Mabel Willebrandt was the highest-ranking woman in the federal government at the time. She was committed to providing more conditions that are suitable for female prisoners by “ marshaling the support of prison reform groups and women’s organizations, Willebrandt won Congressional approval to establish the first federal women’s prison” (Sallyport Bureau of Prisons, 2004, p. 79) That prison originally called the U.

S. Industrial Reformatory for Women was opened in 1927 in Alderson, West Virginia. Starting in the 1930’s, the Bureau attempted to provide additional accommodations for female prisoners. During this era, other facilities began women units, which operated at Federal Correction Institute (FCI) in Milan. The population of women within the FCI was very small. The FCI in Seagoville was the next to operate as a women’s prison. Until then, federal prisons have been stable until the 1980’s, which double for both male and female inmates.

Due to the growing number of female offenders, accommodating medical issues for females needed to be addressed and the bureau provided the first Federal Medical Center (FMC) at FMC Carswell, which received its first female offender in 1994. Other institutional facilities followed suit now offering educational, psychological, substance abuse, vocational, religious, and recreational programs as well as special services for pregnant offenders. The bureau created a special needs offender section in the Correctional Programs Division Central Office (CPDCO) to address the needs of female offenders in BOP facilities.

This is important due to gender differences among male and female offenders. How Gender Causes Differences for Female Offenders While Incarcerated Many correctional officers find that one of the most challenging aspects of working with female offenders is the necessity of communicating verbally and nonverbally in an effective manner. Many female offenders do not understand chain of command or following orders. For many of these offenders, they were one of the ones who ran the homes when the man was not around. Communication in a correctional environment is a critical element in maintaining security and safety.

Females in general are more verbal than males, which creates an increased emphasis on active listening by correctional officers. In a prison setting, male offenders are more direct and more accepting of quick answers as no, whereas females seek empathy or validation of their concerns and problems. For many female offenders they seek immediate attention and gratification and are less apt to accept no as an answer. (U. S. Department of Justice Federal Bureau of Prisons, 2003, pg 48). These offenders demand explanations of an officer's decision and pursued all available avenues in an attempt to achieve the response they want.

Females will often group together and support each other's issues when possible. For many correctional officers, working with female offenders can be time consuming and sometimes frustrating due to their need to engage in extensive verbal interaction. Simple patience and understanding by correctional officers during communication will allowed the offenders to feel validated about their issues therefore, " causing an increased level of emotion displayed by female offenders, as women show their feelings more

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readily than men” (U. S. Department of Justice Federal Bureau of Prisons, 2003, pg 48).

While an outburst from a male offender may result in an escalation of the situation, this is often not the case with a female. An increased emphasis on interpersonal communication skills may assist in daily dealings with female offenders. In addition, the use of a confrontational style of supervision may unintentionally trigger an emotional response in a female offender. This is why policies and procedures were implemented to use the proper techniques when dealing with female offenders. Policies and Procedures that Female Inmates Must Followed Historically, female offenders are a small percentage of the inmate population in the BOP.

For this reason, most bureau facilities, policies, programs, and services were not designed with the unique needs of female offenders in mind. In recent years, the agency began exploring the issues of female offenders in-depth with the intent of implementing changes where appropriate. When conditions under which female and other offenders were residing were compared, female offenders received far more inferior care. The U. S. Department of Justice Federal Bureau of Prisons (2003) reported, “ women had fewer educational and vocational programs and less opportunity for work release, recreation and visitation.

Institutional job assignments were often more limited in number and type and were often classified according to criteria established for men” (p. 13). Additionally, the misconception existed that female offenders enjoyed less rigid conditions, when in actuality they were frequently subjected to higher

levels of security and stricter discipline. These inequalities have been challenged in the courts. Two lawsuits *Glover v. Johnson* (1999b) and *Judy Butler v. Janet Reno* (1999a) challenged the contrast and the conditions of male and female facilities.

Over the past few years, courts have accepted the arguments that women's conditions were poorer, violating the Constitution of the United States. Under Constitution law," the courts have issued opinions which challenged the ways correctional systems allocated funds, designed programs, and made institution assignments" (Lectric Law Library's, 2009). This practice has change since the ruling by the courts. Federal courts have ruled that programs must be made available in female facilities that are substantially similar to those offered in male facilities.

Most recently, courts have directed that parity in actual programs and services is less important than ensuring the agency has parity in the process by which programs and services are established, and how resources are allocated for delivery of the programs and services. This has lead inmate Mary Glover to take up this measure in the courts. The leading court case at the state level was *Glover v. Johnson* in which, " issue in the case was the question of whether Michigan had to offer a four year college degree program to female offenders because one was available to males" (U. S. Court of Appeals, 1999 b).

The state argued that female offenders accounted for only 3% of the offenders in the correctional system, and the cost per inmate would be much greater for the females as compared to the males. However, the court held

that if such a program was offered to male offenders, it then had to be made available to female offenders as well. This ruling was a big win for female offenders. It allowed females to a four-year college education that male inmates received, therefore allowing them to succeed in the community and slowed down the rate of recidivism from occurring once released from prison.

In a federal court case, *Judy Butler v. Janet Reno*, the sixth Circuit Court of Appeals upheld the finding that prison officials were in contempt for failing to comply with prior orders requiring them to provide female offenders with educational opportunities comparable to those offered to male offenders. Federal prison did not give equal opportunity to female inmates, until “female offenders brought suit in 1984 against the FBOP for gender discrimination in providing comparable facilities, programs, and services to those offered at male facilities” (U. S. Court of Appeals, 1999 a).

A court appointed an examiner to review the documentation and visited female facilities on standards and conditions on federal programs to include programs for female offenders’ children on parenting skills. Relationship between Female Offenders and Their Children According to Naser and La Vigne (2006), incarcerated males generally count on the children’s mother to take care of them. However, incarcerated females do not always have this luxury. The children are generally turned over to the offender’s parents, other relatives, or state agencies. This creates additional burden and stress in female offenders as well as their families.

Incarceration has detrimental separation effects on the children of the incarcerated mother. Children of female offenders are often shuttled

between extended family members and the foster care system, causing instability in the child's life. The National Data Analysis System (2006) reported that older children who have had little or no contact with their incarcerated mother are five times more likely to suffer depression, do poorly in school, join gangs, or engaged in risky behaviors than children who have bonded with their mother. With this in mind, the need exists to correct negative consequences caused by a lack of mother-child bonding.

Parenting programs for incarcerated female offenders strengthen family relationships, enabled the mother to develop practical parenting skills, and help break the generational cycle of crime and recidivism. A study by the All Business (2009), explains that literacy education programs emphasizes the importance of keeping families together. These programs consist of components offered at several different federal institutions on the Parenting Pilot Program. This helps those mothers who need reading skills and provides them the opportunity to improve these skills.

It allows the mother and child a special time even while separated, and stresses the importance of reading to the child. Many low level institutions utilized tape recording so the child can replay their mother's reading as often as they like. This is important to incarcerated mothers. Delcour (2005) explains that children are more likely to abuse substance, engage in anti-social behaviors and experience greater levels of depression, anxiety, attention deficit disorders, aggression and poor academic performance. However, mothers must be enrolled in the program and only during visitation hours.

The visitation component allows interactive communication between the incarcerated mother and her children. Most institutions have a separate area in the visiting room where the mothers and children can play together and participate in structured activities. In addition, female offenders are offered social and medical services component within the community to link organizations that promote and enhanced human welfare services to the offender once released from prison. This is an important concern, because without a stable mother at home, the child is more likely to follow the path of their incarcerated mother.

**Health Care Issues of Female Offenders** One of the most significant differences in the managing the needs of female offenders involves medical care. Females have different medical needs and concerns, most notably arising from biological differences, such as gynecological care. Merriam Webster, (2010) defined gynecological as a branch of medicine that deals with the disease and routine physical care of the reproductive system of women. Medical requirements for females are more extensive than their male counterparts, and adequate resources must be made available to meet those needs.

Given the basic differences in diagnostic procedures, medical care is clearly a more expensive and time consuming matter for women. In addition, there are the added issues of care for pregnant offenders as well as the placement and care of newborns. According to Medical Care (2006), females in our society report more illness and utilized medical facilities more often than males. In federal institutions, doctors due to the number of sick calls that female offenders often request may not take females as seriously.



It is important to note that bona fide differences in healthcare needs do exist, and it is necessary to treat females differently than males. In fact, “older female prisoners make up 2.4% of the prison population in the United States. They tend to have more substantial psychiatric and physical morbidities than those of their peers in the community or younger offenders” (Collins & O’Neil, 2006, p. 368). This is a growing concern with the BOP due to older offenders becoming incarcerated with medical conditions or health problems returning back to prison due to free health care that is provided to them at taxpayer expense.

According to Merriam Webster (2010), morbidities is defined as the relative incidence of disease. Incarcerated females are likely to have many of the same medical complaints as their non-incarcerated females. However, females in prison may be highly suspicious about the quality of medical care they expect to receive while incarcerated. Failure to provide adequate medical care to an inmate can result in two different types of liability: negligence, for which the government will be responsible, or individual liability, for which the employee is responsible. This can lead an employee to be personally responsible for negligence.

Negligence is defined “as the medical malpractice, such as someone fails to act reasonably in providing or not providing medical care” (Lectric Law Library, 2009). Individual liability defined as “the legal bond that an individual or company is responsible for paying the debt of a wrongful act they may have committed” (Investor Words, 2010). Any action based on medical negligence within a federal prison, must be brought under the Federal Tort Claims Act, against the Federal Government. This could lead to <https://assignbuster.com/criminal-justice-assignment/>

individual liability when an employee acts with deliberate indifference to an inmate's serious medical needs.

A major fraction against a prison could lead to inmate programs being cut from the budget. Programs for Female Offenders Historically, the combination of society's expectations and the relatively small number of female offenders in federal institutions resulted in limited programming opportunities. Early era programs reinforced homemaking skills while offering vocational training in largely traditional female occupations, such as stenography and typing. Around the 1940's, programs expanded with training in music, knitting, dressmaking, weaving, laundry, and nursing. However, these were still stereotypical occupations for females.

Women offenders have experienced a long history of indifference and neglect in the development and implementation of correctional programs. In several federal prisons, " programs have not been specifically targeted for this population instead, they have been cloned from programs implemented for male offenders and provided to women offenders without consideration as to whether they were appropriate for women" (Richmond, 2009, p. 21). This has change over the years due to court's ruling such as Glover v. Johnson and Judy Butler v. Janet Reno on federal and state programs among male and female offenders.

However, social changes in the 1960's and 1970's saw a shift in program emphasis. Females prefer a greater variety of recreational programs and demonstrated a greater interest in culturally diverse programs, especially those relating to holiday celebrations. In many prison facilities " team sports

and weight lifting are prevalent in male facilities, but few females choose to participate in programs of this type” (U. S. Department of Justice Federal Bureau of Prisons, 2003, p. 84). For most females, recreation preferences are cooperative rather than competitive, creative rather than athletic.

This is why the majority of female offenders participate in jobs ranging from data processing to machinery repair and electronics assembly. Education and vocational programs for female offenders began to expand. An emphasis on non-traditional vocational programs took place. Current vocational programs available in female facilities throughout the BOP included accounting, cosmetology, horticulture, building trades/maintenance, and computer programs that were heavily attended in a female facility and are instrumental in reducing inmate idleness.

Although these programs were only given to men at one time, all federal and state facilities have implemented these programs into all women prisons. Having programs such these will allow females to learn a trade that can be used within the community therefore preventing recidivism from occurring. This gives female a fighting chance to make something of themselves once released from prison and not fall back into a revolving door. Identified Challenges in Preventing Recidivism Their are many challenges noted within the literature review that must be taken into account that constitutes to recidivism.

Many of the special needs and accommodations that were identified within the literature are not provided to many female offenders. For many of the female offenders, it becomes difficult for them to reintegrated back into the

community without the proper skills and accommodations. In addition, many find their way back into the prison systems due to failing to make it on the outside. There have been many studies about recidivism on female offenders at other federal/state institutions (Gobeil & Barrett, 2007; Keil & Samele, 2008; Shore, 2001; Vigilante, et al. 1999). However, it has been noted that more researched is needed on what causes recidivism and whether not if programs within these prison facilities are helping or hurting with their needs and accommodation in order to make a transition into society. Gaps in the Literature and Future Research Directions This literature reviewed reveals major gaps that have been identified within research on recidivism. One major gap that must be noted is programs to fasciculate needs and accommodations within the community once a female is released from prison.

Once a female offender is released from prison, the prison system no longer is obligated to help with any needs or accommodations for that inmate. The community is left to pick up the pieces and provided serves to that female offender. Resettlement is something that must be look at within the prison systems and the community to establish a certain foundation for released prisoners. Resettlement: defines as the continuity of care for prisoners due for release and whether any support received was through formal services or informal networks such as family and friends (Keil & Samele, 2008). Based on this, three research questions are proposed:

RQ1: How can the prison systems provided the same programs for resettlement to female offenders once released from prison? RQ2: What is the level of satisfaction with programs that female offenders are provided

with once released from incarceration? RQ3: Is there an association between unequal gender services in federal prisons and female inmate recidivism?

The elucidation of these factors should provide more insight on how to prevent recidivism from reoccurring among female offenders and established a resettlement program for offenders to receive the same or better types of needs and accommodations once released from incarceration.

Appendix A Key Terms Defined Individual liability: the legal bind that an individual or company is responsible for paying the debt of a wrongful act they may have committed (Investor Words, 2010). Gynecological: defined as a branch of medicine that deals with the disease and routine physical care of the reproductive system of women (Merriam Webster, 2010). Information continuity: ensures there is effective communication between different care providers, and information about a service user's care follows them through the healthcare system (Keil & Samele, 2008, p. 29).

Management continuity: involves the delivery of services that are well coordinated and appropriated to each service user's needs (Keil & Samele, 2008, p. 29). Morbidities: defined as the relative incidence of disease (Merriam Webster 2010). Negligence: commonly referred to as the medical malpractice, such as someone fails to act reasonably in providing or not providing medical care (Lectric Law Library, 2009). Planned behavior: defined as a human social behavior that is reasonable and a conceptual framework for an intervention to effect change in behavior (Bamberg, Ajzen, and Schmidt , 2003, p. 176).

Recidivism: defined variously as any revocation of conditional release within two years of release from a federal institution, with any new conviction within two years, and any new conviction for a violent offence within two years (Gobeil, 2007, p. 11). Relationship continuity: defined as when service users have the opportunity to develop a therapeutic relationship with a named professional (Keil & Samele, 2008, p. 29). Resettlement: defines as the continuity of care for prisoners due for release and whether any support received was through formal services or informal networks such as family and friends (Keil & Samele, 2008).

Appendix B Databases The database used for this search were PsycINFO, Journal of Forensic Psychiatry and Psychology, Journal of Women’s Health, EBSCOhost, Basic and Applied Social Psychology, World Editorial Writer, Journal of Offender Rehabilitation, Dissertation Abstracts International Section, National Institute of Corrections, US Court of Appeals, Federal Bureau of Prisons, The Management and Specialty Training Center, and Sallyport. Keywords used were offenders or inmates (Abstract) and correctional officer (Text), and bureau of prison (Text).

Additionally Criminal Justice Collection was searched using the terms recidivism or resettlement, which returned 1, 319 items. Of these items, articles deemed most pertinent to current recidivism and resettlement were reviewed. Appendix C Abbreviations BOP – Bureau of Prisons FBOP – Federal Bureau of Prisons CPDCO – Correctional Programs Division Central Office FCI – Federal Correctional Institution FDC – Federal Detention Center FMC – Federal Medical Center GAO – General Accounting Office UK – United Kingdom UKFAWP – United Kingdom Federal Adult Women Prisons

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