International good practice: alternatives to imprisonment for women offenders

An information resource to inspire and support efforts to reduce the unnecessary imprisonment of women
Acknowledgements

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We would also particularly like to thank the Irish Penal Reform Trust for their helpful information regarding Irish policies, Janet Cobb for putting Ruby in touch with people about women with learning disabilities (although unfortunately there is very little information available), Joy Doal who runs the Anawim women’s centre and generously shared both information and insights and Olivia Rope of Penal Reform International (PRI).
Alternatives to imprisonment for women offenders

Introduction

This report presents a wide range of international examples of alternatives to custody for non-violent women offenders. It profiles a number of dynamic projects in different jurisdictions, some of which have proven to be particularly successful in reducing reoffending in women offenders. Due to both time constraints and the availability of research evidence, the report uses information from predominantly Western countries such as the United States, Canada, Australia and New Zealand. European examples are used where available and relevant.

The women’s prison population in England and Wales more than doubled between 1995 and 2010 and, although numbers are starting to decline somewhat, approximately 13,500 women are sent to prison each year in the UK. This is one of the highest rates of women’s imprisonment in Western Europe. The human, social and financial costs are considerable. Women in prison are ten times more likely than men to harm themselves. Most women are imprisoned for short periods and they have very high reconviction rates, suggesting that for many prison is neither rehabilitative nor a deterrent.

Many of the women sent to prison are mothers, compounding and prolonging the detrimental impact.1 According to one survey, six in ten women in prison had dependent children (on average two children).2 At least a third of mothers are lone parents before imprisonment. In 2010, more than 17,000 children were separated from their mothers by imprisonment.3 For eight out of ten children, it’s the first time they have been separated from their mums for more than a day or so.4 Innovative approaches are needed if these damaging impacts are to be significantly reduced. Various studies have shown that non-custodial programmes are significantly more cost-effective than imprisoning women who offender. The average annual cost of a woman’s imprisonment in England and Wales today stands at £56,415 compared to a Community Order cost of £2,800 per year, and an average of £1,300 for standalone community-based services.5

From early intervention strategies to resettlement programmes, this report outlines a range of alternatives to imprisonment for women offenders. These include inter alia women’s centres and one-stop-shops, community residential alternatives, and small units designed to accommodate women offenders. Focusing on a diverse range of alternatives emphasises the specific issues faced by women in the criminal justice systems across the world such as mental health needs, exposure to domestic and sexual abuse, drug and alcohol use, and homelessness. By addressing the factors that underlie women’s offending, we are better able to generate sustainable alternatives that have the potential to significantly reduce offending.6

1 Ministry of Justice and Department for Children, Schools and Families, Children of Offenders Review, June 2007
2 Hansard HC, 16 July 2012c548w
   www.independent.co.uk/news/uk/crime/mothers-prison-the-lost-generation-8157387.htm
This research has been exclusively desk-based and as such makes extensive use of studies undertaken and statistics presented by academics, policy-makers, and international agencies. It focuses predominantly on non-violent adult women offenders, although some reference is made to young women offenders, older women offenders, and women sentenced for serious and violent crimes. It does not present a rigorous comparative analysis of different approaches but does include as much evaluative evidence as possible for the different initiatives.

In October 2013 the United Nations Special Rapporteur on Violence against Women, its causes and consequences, presented a new report to the UN General Assembly, *Pathways to, conditions and consequences of incarceration of women*. It illustrates the strong link between violence against women and women’s imprisonment – prior to, during and after prison. That report examines the causes, conditions and consequences of women’s incarceration and is a timely and forceful reminder of why alternatives to incarceration are so badly needed.

Academic experts and practitioners concur that, if they are to work for women, services and interventions must be ‘gender-responsive’.\(^7\) Gender-responsive practice can be divided into five parts:

- **relational** - recognising that women develop self-worth through their relationships with others and are motivated by their connections with other people
- **strengths-based** - using each woman’s individual strengths to develop empowered decisions
- **trauma-informed** - recognising the ways in which histories of trauma and abuse impact upon a woman’s involvement in the criminal justice system
- **holistic** - providing a comprehensive model that addresses the multiple and complex needs of women offenders
- **culturally-informed** - services recognise and respond to the diverse cultural backgrounds of women offenders.\(^8\)

The information provided about the different programmes and services profiled in this report is organised thematically, as is evident from the chapter headings. The same service may be described under more than one heading where it provides for a range of needs or different groups. This is indicated by a cross reference at the beginning of a project. All the material is extensively referenced, enabling the reader to investigate particular projects further.

This compilation of international practice does not purport to be either exhaustive or definitive. It is provided as a resource that can help inform the efforts of all those seeking to develop effective and proportionate responses to women in the criminal justice system, as part of the Prison Reform Trust’s programme to reduce women’s imprisonment, supported by the Pilgrim Trust.

The Prison Reform Trust welcomes your feedback and additional information – womensprogramme2@prisonreformtrust.org.uk

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7 Maniglia’s definition is ‘services which intentionally allow gender identity and development to affect and guide [all aspects of] program design and service delivery’. National Institute for Corrections, Technical Assistance and training to implement a case management model for women offenders, Request for Applications, May 22, 2008 www.cj-resources.com/CJ_Female%20Offenders_pdfs/2008%20technical%20assistance%20and%20training%20to%20implement%20a%20case%20management%20model%20for%20women%20-%20NIC%202008.pdf

8 Phyllis Modley and Rachelle Giguere, Re-entry Considerations for Women Offenders, Coaching Packet, Center for Effective Public Policy, 2010 www.cepp.com/documents/Re-entry%20Considerations%20for%20Women.pdf
### Comparative rates of adult female imprisonment

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* At 1st September 2011. Source: Council of Europe Annual Penal Statistics Space 1 Survey 2011

1 Approximate average population, year to March 2009: [http://www.prisonstudies.org/country/canada](http://www.prisonstudies.org/country/canada)
2 Calculated by combining England and Wales, Northern Ireland and Scotland.
Comparing women’s imprisonment across the world

The table on page 3 shows the average annual women's prison population, and the rate of female imprisonment as a proportion of the adult female population, in the countries profiled in this report. It draws on data from a number of different sources which cover different periods in time.

Whilst the table provides a useful snapshot of changes in the use of female imprisonment over time, and an indication of how different jurisdictions use imprisonment as a criminal justice tool, it does not tell the full story of women's imprisonment in these countries. At 165 female prisoners per 100,000 adult women in the general population, for example, the USA has one of the highest rates of female imprisonment in the world. However, this national figure will likely disguise significant local variation as individual states have the power to set their own legislative framework and different laws affecting sentencing decision-making (for example the three-strikes sentencing law in California) apply in different states.

Nevertheless, it highlights the stark differences that exist across countries and should serve as a useful reference point.

Information on the use of custody for female offenders in countries which aren't featured in this report is also available in the source documents.

You can also get more information at:

- www.penalreform.org
- www.prisonstudies.org
International standards that apply in the UK

A range of United Nations and Council of Europe standards, statements, and resolutions have addressed the rights of women involved in the criminal justice system. International human rights standards and treaties, such as the UN Standard Minimum Rules for the Treatment of Prisoners, contain principles on the human rights of all prisoners. These implicitly guarantee rights for both men and women but do not distinguish the particular needs or vulnerabilities of women prisoners. However, in recent years the UN and regional systems have begun to remedy this oversight and have highlighted in particular the importance of establishing non-custodial alternatives for women offenders.

United Nations

• United Nations Rules for the Treatment of Women Prisoners and Non-custodial Measures for Women Offenders (the Bangkok Rules)\(^9\)

Rule 45
Prison authorities shall utilize options such as home leave, open prisons, half-way houses and community-based programmes to the maximum possible extent for women prisoners so as to ease their transition from prison to liberty, to reduce stigma and to re-establish their contact with their families at the earliest possible stage.

Rule 57
The provisions of the Tokyo Rules shall guide the development and implementation of appropriate responses to women offenders. Gender-specific options for diversionary measures and pretrial and sentencing alternatives shall be developed within Member States’ legal systems, taking account of the history of victimisation of many women offenders and their caretaking responsibilities.

Rule 58
Taking into account the provisions of rule 2.3 of the Tokyo Rules, women offenders shall not be separated from their families and communities without due consideration being given to their backgrounds and family ties. Alternative ways of managing women who commit offences, such as diversionary measures and pretrial and sentencing alternatives, shall be implemented wherever appropriate and possible.

Rule 60
Appropriate resources shall be made available to devise suitable alternatives for women offenders in order to combine non-custodial measures with interventions to address the most common problems leading to women’s contact with the criminal justice system. These may include therapeutic courses and counselling for victims of domestic violence and sexual abuse; suitable treatment for those with mental disability; and educational and training programmes to improve employment prospects. Such programmes shall take account of the need to provide care for children and women-only services.

Rule 61
When sentencing women offenders, courts shall have the power to consider mitigating factors such as lack of criminal history and relative non-severity and nature of the criminal conduct, in the light of women’s caretaking responsibilities and typical backgrounds.

Putting the Bangkok Rules into practice

In October 2013 Penal Reform International and the Thailand Institute of Justice launched the Toolbox on the UN Bangkok Rules, which includes a Guidance Document and Index of Implementation and a free online course, Women in Detention: Putting the UN Bangkok Rules in Practice, among other resources. These are intended to encourage And facilitate implementation of these Rules.

United Nations Standard Minimum Rules for Non-custodial Measures (the Tokyo Rules)\(^\text{10}\)

Para 2.3
In order to provide greater flexibility consistent with the nature and gravity of the offence, with the personality and background of the offender and with the protection of society and to avoid unnecessary use of imprisonment, the criminal justice system should provide a wide range of non-custodial measures, from pre-trial to post-sentencing dispositions. The number and types of non-custodial measures available should be determined in such a way that consistent sentencing remains possible.

UN Guidelines for the Alternative Care of Children\(^\text{11}\)

Para 3
‘The family being the fundamental group of society and the natural environment for the growth, well-being and protection of children, efforts should primarily be directed to enabling the child to remain in or return to the care of his/her parents, or when appropriate, other close family members.’

UN Human Rights Committee ruling against pre-trial detention\(^\text{12}\)

Para 12.3
‘it shall not be the general rule that persons awaiting trial shall be detained in custody … pretrial detention should be the exception and … bail should be granted, except in situations where the likelihood exists that the accused would abscond or destroy evidence, influence witnesses or flee from the jurisdiction of the State party.’

Committee on the Elimination of Discrimination against Women, Concluding Observations on the seventh periodic report of the United Kingdom of Great Britain and Northern Ireland.\(^\text{13}\)

Para 55
The Committee urges the state party to…

(b) Continue to develop alternative sentencing and custodial strategies, including community interventions and services for women convicted of minor offences;

(c) Improve the provision of mental health care in all prisons;

(d) Introduce measures aimed at addressing the root causes of the over-representation of black and minority ethnic women in prison;


Council of Europe, Parliamentary Assembly\(^4\)

- **Committee on Legal Affairs and Human Rights, ‘Promoting alternatives to imprisonment’, Draft resolution and recommendation adopted unanimously by the Committee in Paris on 19 March 2013\(^5\)**

  Para 6
  ‘... the Assembly invites all member states, and in particular the states with the highest rates of imprisonment, to vigorously promote the use of non-custodial sentences, in particular for first-time and non-violent offenders, young offenders and women.’

- **Parliamentary Assembly, Recommendation 1469 (2000) Mothers and babies in prison\(^6\)**

  **Rule 5**
  In view of the adverse effects of imprisonment of mothers on babies the Assembly recommends that the Committee of Ministers invite member states:
  
  i. to develop and use community-based penalties for mothers of young children and to avoid the use of prison custody;
  
  
  iii. to recognise that custody for pregnant women and mothers of young children should only ever be used as a last resort for those women convicted of the most serious offences and who represent a danger to the community;
  
  iv. to develop small scale secure and semi-secure units with social services support for the small number of mothers who do require such custody, where children can be cared for in a child-friendly environment and where the best interests of the child will be paramount, whilst guaranteeing public security;
  
  v. to ensure that fathers have more flexible visiting rights so that the child may spend a little time with its parents;
  
  vi. to ensure that staff have appropriate training in child care;
  
  vii. to develop appropriate guidelines for courts whereby they would only consider custodial sentences for pregnant women and nursing mothers when the offence was serious and violent and the woman represented a continuing danger.

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\(^4\) For more information see Council of Europe Committee of Ministers Recommendation No. R (2000) 22 on improving the implementation of the European rules on community sanctions and measures, 2000 and Council of Europe Committee of Ministers Recommendation No. R (99) 22 concerning prison overcrowding and prison population inflation, 1999

\(^5\) Committee on Legal Affairs and Human Rights, ‘Promoting alternatives to imprisonment’, Draft resolution and draft recommendation adopted unanimously by the Committee in Paris on 19 March 2013

www.assembly.coe.int/Communication/ajdoc02_2013.pdf

\(^6\) Parliamentary Assembly, Recommendation 1469 (2000) Mothers and babies in prison

http://assembly.coe.int/Main.asp?link=/Documents/AdoptedText/ta00/EREC1469.htm
Early intervention and diversion

Current research

Early intervention and diversion schemes are a central tenet of alternatives to imprisonment for women offenders. Diversion can take a number of forms, from pre-arrest diversion in which the police and others engage with individuals to divert them out of the criminal justice system altogether, to diversion following arrest that limits or mitigates an individual’s progression through the system.\(^{17}\) Diversion programmes vary from country to country, and within countries where judicial structures are governed by separate states or municipalities. They include initiatives for those with mental health problems\(^ {18}\) diversion for those with substance use issues,\(^ {19}\) and diversion for older offenders.\(^ {20}\) The material in this section is predominantly about diversion programmes in the United States and Australia as it proved difficult to find information on gender-specific diversion schemes elsewhere.

Practitioners and academics have identified a number of best practice features of diversion programmes for women offenders. For example, a study by the Victorian Government Department of Justice in Australia found that diversion programmes were more successful when participation was voluntary.\(^ {21}\) Other studies have highlighted the need to implement diversion strategies at all stages of the criminal justice process so as to respond to ongoing assessments of women offenders.\(^ {22}\) There is a growing awareness that, unless properly managed and resourced, diversion can constitute simply a diversion from the criminal justice system rather than diversion to treatment.\(^ {23}\) This is especially relevant to women offenders from indigenous or black and ethnic minority backgrounds who should be diverted into culturally-sensitive services and treatment programmes.\(^ {24}\)

17 http://gainscenter.samhsa.gov/pdfs/jail_diversion/PERF.pdf For a best practice model on pre-charge diversion see the Crisis Intervention Team (CIT) developed in Memphis, Tennessee. CIT is a nationally renowned model in which law enforcement works with a number of stakeholders including non profits and healthcare practitioners in targeted communities to divert people with mental health issues away from the criminal justice system. www.memphispolice.org/crisis%20intervention.htm


19 For example, the Court Referral Education, Drug Intervention and Treatment (CREDIT) in New South Wales, Australia diverts people charged with low-level drug offences out of the criminal justice system and into treatment. With a focus on harm reduction, this programme provides services that target specific groups including women and young people. www.nobars.org.au/criminal-court-prison-diversion.html

20 For example, the Project for Older Prisoners (POPS) operated by students and staff at George Washington University. POPS assists low risk prisoners over the age of 55 in seeking parole, pardons, or alternative forms of imprisonment. Case workers interview prisoners and prepare reports which assess the likelihood of reoffending. For suitable candidates, case workers locate housing, employment, and other support and prepare for parole hearings, www.law.gwu.edu/Academics/EL/clinics/Pages/POPS.aspx


23 Kathleen Hartford, Diversion for People with Concurrent Disorders, an edited version of a report commissioned by the Ministry of Health and Long Term Care, submitted on March 30,2007 www.lawsonresearch.com/research_themes/Mental%20Health/pdfs/v4n4-2007.pdf

24 Australian and Canadian research has a particular focus on diversion programmes for aboriginal women offenders. For example, see Jacqueline Joudo, Responding to substance abuse and offending in Indigenous communities: review of diversion programs, Australian Institute of Criminology, Research and Public Policy Series, No. 88 http://aic.gov.au/documents/1/8/0/%7B1807C117-551B-4D5A-B30C-CF07EF532F7D%7Drpp88.pdf
Early intervention programmes in the United States

The Second Chance Women's Re-entry Court program (California)

The Second Chance Women's Re-entry Court functions as an alternative to imprisonment programme and a resettlement support initiative. Set up in 2007 in Los Angeles County it is designed for women who have been charged with a crime and face a term of imprisonment, or women who have left prison and are on parole. The Court uses a multi-agency approach to provide a range of services to women while they live in a community-based residential facility.25

Following assessment by the Court, women are sent to Prototypes, a substance use treatment facility where they live for a minimum of six months. Here they develop individualised treatment plans before beginning a diverse range of programmes. The Court has a particular focus on substance use and uses an evidence-based, wraparound, Drug Courts model that takes participants from residential treatment to aftercare, and combines court-supervised treatment, mandatory drug testing, and intensive supervision. The Court uses the Seeking Safety programme, a trauma-informed substance use treatment model that assists people who have experienced trauma associated with their substance use. It is a comprehensive programme with four distinct content areas: case management, cognitive, behavioural, interpersonal.

The Court also provides support services in areas such as mental health, education, employment, and financial management. It supports survivors of domestic violence with counselling and education, and provides specific services for women offenders with children such as child welfare, family reunification services, child support, transportation and childcare. The treatment programme at Prototype costs approximately $18,000 per woman per year which is significantly lower than the cost of imprisoning a woman for one year.26 It has proved to be very successful at reducing reoffending rates for women offenders: of the 297 women who have entered the Court since it opened, only 35 have been returned to prison and over 100 have graduated the programme.27

Criminal Court Women's Diversion Program (WDP) (Center for Alternative Sentencing and Employment Services, New York)

New York State has developed a range of innovative diversion programmes and alternatives to imprisonment for low-level offenders. For example, community courts such as the Red Hook Community Justice Centre in Brooklyn: a multi-jurisdictional community court that provides a range of sanctions for low-level offences, with on-site trauma and support specialists.28 These services have proved extremely successful, generating best practice and gender-specific training initiatives that are being implemented both nationally and internationally.29

25 Messina, N. & Chand, N. (2009). Exemplary Programs for Women Offenders with Co-Occurring Disorders: Key Recommendations for Implementation and Replication. White Paper prepared for the Co-Occurring Joint Action Council (COJAC), the Department of Alcohol and Drug Programs (ADP), and Department of Mental Health (DMH). www.aodpolicy.org/Docs/Re_Entry_Program.pdf
26 Victoria Kim, ‘Court program helps women turn their lives around’, LA Times, October 19 2010 http://articles.latimes.com/2010/oct/19/local/la-me-re-entry-20101019
28 see Center for Court Innovation www.courtinnovation.org/project/red-hook-community-justice-center
29 Center for Court Innovation, Gender Initiatives: Technical Assistance http://173.231.132.82/gender-initiatives
In 2012 the Center for Alternative Sentencing and Employment Services (CASES) launched the Criminal Court Women’s Diversion Program (WDP) which provides treatment and alternative sanctions to women charged with misdemeanour offences. Targeting women with mental health and/or substance use problems, the WDP develops individualised case plans before providing a four stage gender-specific service: first, women are offered counselling that is trauma-focused and person-centred; second, women receive clinical services from CASES’ in-house psychiatrist; third, using a best practice model of peer involvement, CASES offers peer-specialist mentoring services to women; finally, the programme staff assist women to access services relating to education, child welfare, domestic violence, job training and a range of other issues.30

**Female Offender Intervention and Diversion Program (Oklahoma)**

[See also substance use; mental health; community women’s centres and one-stop-shops]

The Female Offender Intervention and Diversion Program (FOID) was developed in 2010 after Oklahoma’s female prison population was named the largest female prison population in the United States. FOID is a community-based supervision and wrap around service for women offenders with complex needs, focusing on those with mental health and substance use problems with the aim of reducing reoffending.31

Operated by a multi-sector team comprising state agencies and non-profits, FOID provides gender-specific and trauma-informed treatment and services for women including: employment training, parenting skills, counselling for domestic violence and sexual assault, and support with medical, housing and childcare needs.32 The programme consists of four phases: the first focuses on engagement with the women through case management, peer support, and crisis intervention; the second phase emphasises continued engagement, with individual, family, and group therapy; the third prepares participants for aftercare by reducing the amount of agency-based treatment and assisting the women in engaging with their communities; the final phase is aftercare which involves ongoing peer support, community group meetings, and individual and family therapy. Once the woman has completed the programme her supervision can be transferred to a lower level or terminated.33

A recent study found that at present there are approximately 150 women enrolled in the programme, and 170 children accompany their mothers. Of the current participants 61% have completed mental health treatment and 78% have completed substance abuse treatment. Since the programme began only 7% of participants have been returned to prison.34

**Early intervention programmes in Australia**

**Special Circumstances Court Diversion Program (Queensland)**

[See also homelessness; substance use; mental health]

The Special Circumstances Court Diversion Program in Queensland, Australia originated in 2006 as a special court for homeless people or people at risk of homelessness who get caught up in the criminal justice system.35 With the involvement of Sisters Inside (SIS) a local non profit organisation, the Program developed a gender-specific strategy, targeting homeless women or

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30 Center for Alternative Sentencing and Employment Services www.cases.org/programs/abh/wdp.php
32 National Centre for Justice Planning http://ncjp.org/content/targeting-resources-how-oklahoma-addressing-female-recidivism
34 Bureau of Justice Assistance www.bja.gov/Programs/JAGsuccess-FemOff.html
women at risk of homelessness who have histories of substance use and mental health problems and have come into contact with the criminal justice system. It is part of the state’s strategy to combat homelessness.

The Program enables women who have been charged with minor offences to be diverted out of the criminal justice system. They are assessed, referred to appropriate services, and assisted into accommodation in order to avoid the use of fines or imprisonment. Every week a Court meeting is held for lawyers, prosecutors, service providers, and court case coordinators to discuss sentencing options and gather pertinent information regarding programme participants. SIS participates in these meetings to contribute their expertise in the problems facing marginalised women.

A Sisters Inside 2011 report found that the programme had a 96% success rate in diverting women from prison. 239 of the 240 women on the programme between 2007-2010 had a reduced rate of reoffending during and following their involvement. Over a three year period only 4% of the participants were imprisoned for new offences. SIS has worked to make the Special Circumstances Court Diversion Program a culturally sensitive initiative with approximately 30% of the women offenders who participated coming from aboriginal or black and ethnic minority backgrounds.

Miruma (New South Wales)
[See also substance use; diversion; community residential facilities; re-settlement]
The Corrective Services department of New South Wales developed two Co-existing Disorder Residential Centres: Miruma and Biyani. These Centres function as residential diversion programmes for women offenders with mental health and substance use problems. Miruma is an 11 bed residential diversion programme offering intensive case management and supervision, and working with a range of community organisations to facilitate each woman’s re-entry into the community. With the assistance of statutory agencies such as Housing NSW and Centrelink and other organisations, Miruma promotes general life skills including health care, financial management, and nutrition. Since opening in April 2011 Miruma has supported 53 women and there is a 60% success rate for this group remaining in the community for two years.

Biyani (New South Wales)
[See also diversion; substance use; community residential facilities; re-settlement]
Biyani Cottage opened in 1994 as a small community based residential alternative to custody for women offenders with mental health needs or mild intellectual disabilities and substance use problems. It is a therapeutic alternative that forms a part of the State's commitment to reducing the number of women with mental health issues or intellectual disabilities in prison. Biyani aims to stabilise the mental health and substance use issues relating to women offenders, and enable them to access longer-term rehabilitative programmes and support in the community.

36 Sisters Inside report, ‘How we do it: Sisters Inside Special Circumstances Court Diversion Program’, 2011
Biyani accepts women from different stages of the criminal justice system: it offers a diversion programme for women at the pre-sentence stage, women who are on remand and are likely to receive a custodial sentence, and women who would be returned to prison following breach of parole. With a maximum capacity of 8 women Biyani is a 2-6 month long programme that endeavours to establish positive links with community services in order to enable independent community living.  

During their stay at Biyani, women are supervised by Community Offender Services who support them both during their stay and following their move to external rehabilitation programmes. Residents engage in case management and case planning throughout their time at Biyani. Alongside internal programmes such as general living skills and care, Biyani assists women into external support programmes including drug and alcohol counselling, therapy, and general medical appointments.

Biyani is based upon international best practice guidelines. It is gender-specific, with culturally-sensitive programmes for Aboriginal women and Torres Strait Islanders. The programme operates under the least restrictive corrective environment possible. This environment is central to their focus on maintaining relationships between mothers and their children. Biyani enables phone contact and visits to enable sustained contact between mothers and their dependents.

Neighbourhood Justice Centre (Melbourne)

[See also black and minority ethnic women; mental health; substance use; homelessness]

The Neighbourhood Justice Centre is the only community justice centre in Australia. It opened in 2007 as a multi-jurisdictional court that offers a range of community sanctions and support services to low level offenders. Studies have found that the Centre has significantly reduced reoffending rates and cut local criminal justice costs.

The Court consists of a Magistrates Court, a Children's Court, a Victorian Civil and Administrative Tribunal, and a Victims of Crime Assistance Tribunal. The Court offers the same sentencing options as all Victorian Courts, alongside the ability to defer sentences for people over the age of 25. As well as community-based sentences such as community work, the Court provides a range of support services including substance use treatment, mental health support, housing assistance, counselling, and financial management. The Centre takes a therapeutic and restorative approach, and uses problem solving strategies such as mediation. It is committed to community building and holds a monthly Community Justice Advisory Group.

The Centre has developed a range of culturally sensitive services for foreign nationals and people from Aboriginal and Torres Strait Islander communities. Refugee and migrant caseworkers support foreign national offenders to ensure they receive an adequate and supportive justice process, while caseworkers engage in outreach in local Aboriginal and Torres Strait Islander communities to develop strong relationships.

41 Ibid
The Court has proved to be very successful. A 2010 evaluation found that Court participants were 14% less likely to reoffend compared to other courts, with reoffending rates falling from 41% to 34%. Participants did an average of 105 unpaid community work, compared to the state-wide average of 68 hours and compliance with community based orders was 10% higher than the state-wide average. The Centre was also extremely successful at strengthening support offered for people attending court: a Neighbourhood Justice Officer was present at approximately 80% of criminal proceedings.
Sentencing

Most jurisdictions offer a range of sentencing options to reflect the needs and circumstances of individual offenders. For example, suspended sentences are regularly used in Germany. Any sentence of less than two years can be suspended, with a probation period lasting between 2-5 years. The Court has the power to send offenders to treatment for alcohol and substance use, whether they attend courses or live in a community-based institution. German courts suspend approximately 75% of all prison sentences of less than one year, and 60% of sentences lasting between one and two years. Research has found that two thirds of offenders successfully complete the court’s orders.44

Sentencing innovations in the United States

Mental Health Courts and Drug Courts

Mental health courts and drug courts have developed in the United States with powers to divert offenders with mental health issues into treatment rather than prison. Originating in the United States in the 1980s, Mental Health Courts have existed in their current form since the late 1990s. These Courts are based on the voluntary involvement of the offender, and take a multi-disciplinary approach that includes intensive case management and judicial overview.45

Studies have shown that Mental Health Courts are very successful in reducing reoffending: one California-based study showed that arrest rates for participants declined by 85%, conviction rates declined by 77%, and imprisonment rates declined by 83%.46 Furthermore, Mental Health Courts have proved to be extremely cost effective: in California these Courts saved the state up to $18 million47 and in Oklahoma a study found that diverting women into mental health and drug courts in one year saved the state $20,015,137 in incarceration and child fostering costs.48 Recognition of the success of these Courts has led to their development around the world, for example, the Mental Health Court Liaison Service which works within Magistrates Courts in Victoria State, Australia to divert offenders with mental health into treatment.49


45 Website of the Judicial Branch of California, California Courts www.courts.ca.gov /5982.htm


Case management

Research overview

Case management is commonly implemented as a corollary to community sanctions.\(^{50}\) Case management models have tended to be male-oriented and impervious to the gendered character of much criminal offending. This has resulted, for example, in women with complex needs being defined as high risk offenders because high risk and high need have been inappropriately conflated. In recent years gender-responsive case management has become a more common feature of policy and programmes relating to women in the criminal justice system.

Increasingly, practitioners and academics have recognised the importance of ensuring that case management models have a gender focus. For example, the “through care” approach is employed in New Zealand - an holistic model of case management in which women offenders are supervised at every stage of their involvement with the criminal justice system. Corrections (prison) staff work with ‘reintegration teams’ who instigate five step processes that take women from initial reception to post sentencing assessment to a sentence plan to managing their sentence to preparation for release. This involves a further step in which specialised case workers assist women in the transition from prison back into their communities.\(^{51}\) Case management for women, as argued by Trotter for example, should focus on their criminogenic profile, employ a problem-solving approach, and engage in pro-social modelling (whereby managers promote socially-minded activities and ways of living).\(^{52}\)

Turner et al define a number of gender-specific practice methods that have proven to be particularly effective in working with women offenders. These include vocational training, cognitive behavioural methods, a strengths-based approach, holistic and child-friendly approaches, and building community ties.\(^{53}\) Studies have shown that gender-specific case management models – in particular those that adopt reliable, supportive, and pro-social approaches – have successfully reduced recidivism rates for women offenders.\(^{54}\)

Case management models in the United States

The Women Offender Case Management Model (WOCMM), Connecticut

[See also black and minority ethnic women;]

The Women Offender Case Management Model (WOCMM) was developed in Connecticut in 2005 in response to emerging literature on the need for gender-specific offender management. The WOCMM is used throughout the criminal justice and resettlement process for women over 18 years old who have committed non-sexual offences and are categorised as medium to high risk.

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\(^{50}\) Community sanctions may include inter alia work in the community and electronic tagging. Switzerland has advocated electronic tagging for women, as it enables them to stay with and support their families and communities. www.swissinfo.ch/eng/Electronic_tagging_trial_declared_a_success.html?cid=3637762 However, an Australian study found that the wearing of electronic tags induces feelings of shame and humiliation in women offenders and does not significantly reduce reoffending over long periods: Marietta Martinovic, The Punitiveness of Electronically monitored community based programs, Paper presented at the Australian Institute of Criminology and the Probation and Community Corrections Officers' Association Inc. Perth September 2002 www.aic.gov.au/media_library/conferences/probation/martinovic.pdf


\(^{53}\) Shelley Turner, Case Management with Women Offenders: A literature review, Monash University Criminal Justice Research Consortium, April 2010

\(^{54}\) Fergus McNeill, Peter Raynor, Chris Trotter (eds), Offender Supervision: New Directions in Theory, Research and Practice (Willan Publishing: Oxon, 2010)
of reoffending. It is built on five core concepts of gender-responsive practice: relational theory, strengths based, trauma-informed, holistic, and culturally sensitive. The WOCMM combines these concepts with evidence-based practice on what works to reduce women’s reoffending including community-linkages and capacity-building, a multi-disciplinary team approach, and a focus on evaluation and monitoring of outcomes.

The WOCMM divides into four distinct phases:

1. Engage and Assess – the first phase involves a comprehensive assessment of the woman, addressing both risks and needs and recognising all the factors in women’s criminal profiles.

2. Enhance Motivation – the second phase is based on theories of intrinsic motivation which use strengths-based approaches to enable women to identify possibilities for change in their lives. This is done by identifying personal goals and ensuring consistent feedback between the women and their management team.

3. Implementing the case plan – when the woman is ready to pursue her case plan the management team should begin to deliver or arrange a range of services. These must include services that address vocational, personal, social, and life needs. The case plan should be regularly reviewed and assessed by all members of the management team.

4. Monitor Progress – the final stage is the core of the WOCMM as it ensures that the case plan is continually monitored, evaluated, and updated. This allows the woman and her management team to assess goals and action steps, review any problems or obstacles, introduce new strategies to respond to these, and develop new goals.

This four phase plan has been very successful and the WOCMM has been shown to reduce reoffending. One year follow up data showed that participants had a significantly lower rate of arrest (31.6%) compared to women in a matched control group (42.5%). It has proved particularly successful in reducing reoffending rates for black and ethnic minority women as African-American women in the WOCMM had a 35.8% re offending rate compared to 50.6% in the matched control group.

ARC Community Services Inc, TAP Case Management Unit for Women, Wisconsin

ARC Community Services Inc is a not-for-profit organisation that has provided gender-specific, community oriented wraparound services for women offenders since 1976. It offers a range of services to women offenders, especially those with substance use and mental health issues, and

57 Shelley Turner, Case Management with Women Offenders: A literature review, Monash University Criminal Justice Research Consortium, April 2010
60 Ibid
is family-oriented with a number of its services relating to women and their dependents. It is a very well respected women’s services provider, with a long history of gender-responsive programmes for women offenders.

The ARC TAP Case Management Unit for Women provides focused case management services for female offenders who engage in licit and illicit substance use. The Unit functions as part of the diversion programme to divert women with substance use issues from the criminal justice system. They offer intensive individual case management alongside coordination of external services, and group cognitive intervention sessions.61

Case Management Models in Canada

Women’s Supervision Units
Women’s Supervision Units employ a gender-sensitive, multi-disciplinary team approach to case management of women offenders. The Correctional Service of Canada (CSC) provides women-centred training alongside refresher courses for parole staff working on Women’s Supervision Units. These ensure that front-line staff receive adequate gender-specific training, alongside continued opportunities for learning while working.62

Case Management Models in Australia

The Dedicated Women’s Case Management Model (DWCM) Pilot Victoria
[See also mental health; substance use]
The Dedicated Women’s Case Management Model pilot (DWCM) was developed by Corrections Victoria in 2009. The pilot resulted from the Better Pathways report that evaluated responses to women in the criminal justice system in Victoria and was initiated in six areas. It concentrates on women with community orders who are high risk and women who have complex needs. Case managers work to divert women from prison and reduce reoffending. They are given specialised training, and are encouraged to act as female role models to the women they support as well as offering services and traditional supervision.63

The DWCM has been very successful, and has received support from a number of stakeholders including women offenders and Magistrates. Evaluations found that it had the greatest impact on women who had a high-risk of reoffending, and that it had reduced the number of cases in which women breach orders. Corrections Victoria plans to extend the pilot to three more locations.64

Multicultural Liaison Officer and the Melbourne City Mission Multicultural Offender Support Program, Victoria
[See also black and minority ethnic women; foreign national women]
The Better Pathways report also identified the need for case management that responds to the specific needs of women from culturally and linguistically diverse backgrounds. Since 2005 a Multicultural Liaison officer has provided culturally-sensitive case management to women

61 ARC Community Services Inc http://arccommserv.com/programs.html#ARC%20TAP
prisoners. This includes: supporting communication between prisoners, their families, and their communities; facilitating women’s access to programmes and services in prison; and promoting awareness and sensitivity to issues that affect women from diverse backgrounds.65

Alongside state provision for culturally aware case management, the Melbourne City Mission provides the Multicultural Offender Support Program which offers targeted support to people from culturally diverse backgrounds who are involved in community corrections.66 The Program is directed towards people who are moderate to high-risk offenders, have basic English skills or may require interpreters, and have difficulty accessing mainstream services. The Program offers individual case management, assists individuals with literacy and numeracy skills, facilitates educational training and employment, and helps individuals to access multiculturally appropriate community resources.

Community women’s centres and one-stop-shops

Current research

Women’s centres and one-stop-shops are an alternative to imprisonment for women involved in the criminal justice system. They are able to offer programmes that respond to the root causes of women’s offending – such as poverty, histories of violence and sexual exploitation, mental health issues – and provide for punishment in a community environment that allows them to take responsibility for their own lives and maintain family ties.

These centres provide a range of services for women involved in the criminal justice system including case management, mental health care, legal assistance, child care support, and legal assistance. Increasingly, women’s centres operate a wraparound approach in which services are linked and coordinated, often in one place, rather than the women experiencing disconnected interventions over a long period of time. The services provided respond to the often complex needs of the women involved, recognising their diverse roles as mothers, caregivers, wives and partners. Research has shown that the wraparound approach is a successful model for women offenders, who report a greater sense of wellbeing in safe and non-stigmatising environments. One study found that wraparound services significantly improved outcomes for women offenders with substance use issues.

The most successful wraparound women’s centres and services are those that target women’s pathways into crime by providing interventions that address intersecting issues of poverty, histories of trauma, and mental health issues; using sanctions and interventions that acknowledge the low risk status of most women offenders; and recognising the importance of social interrelatedness in women’s lives compared to their male counterparts.

A study by the Fawcett Society examined community provisions for women offenders and identified nine elements of best practice for gender-responsive services, including that they should:
- be women-only in order to foster a sense of safety and community
- take an holistic approach to the underlying social problems linked to women’s offending
- use positive role models to guide and empower women offenders, such as using peers as mentors.

68 For examples of excellent one-stop-shops in the UK see the 218 Centre in Glasgow; the Inspire project in Belfast; the Asha centre in Worcestershire; the Calderdale Women’s Centre in North Yorkshire, and Anawim centre in Birmingham.
69 Laura Moretti Challen, Sheena Sharma, Tiffany Thomas, and Mary Wingfield, ‘Wraparound Services to Drive Down Recidivism for Harris County Drug Court Clients’, May 2010 http://www.hcdcf.org/wraparound-services.pdf
74 Loraine Gelsthorpe, Gilly Sharpe, Jenny Roberts ‘Provision for women offenders in the community’, Fawcett Society Report, June 2007
In addition, many studies have reported on the need to have flexible drop-in services for women offenders as women rarely progress through programmes or services in linear ways. Studies have recommended that ‘services are funded and promoted to facilitate self referral or drop in for women to gain swift access to top up, stabilising support, in recognition of the lapses and relapses within the desistance journey.’

Above all, research on women’s centres has emphasised the importance of trauma-related programmes, and programmes that recognise the mental health and substance use needs amongst the majority of women involved in the criminal justice system.

**Women’s services in the United States**

**North Carolina – Women at Risk Program**

[See also: diversion, substance use, case management]

The Women at Risk Program is a highly respected community based ‘outpatient’ alternative to imprisonment for women offenders in North Carolina. In operation since the 1980s, the programme has proven to be extremely successful in reducing reoffending in women offenders: 90% of graduates from the programme have successfully completed it and stayed out of prison.

Clients of the programme can enter at any point in the criminal justice process: pending charges, as a condition of release from prison, or as a condition of probation. A primary feature of the Women at Risk Program is the ‘continuum of care’ that addresses each woman’s individual substance use, mental health, and history of trauma. The programme has three stages:

- First, clients complete a substance use and mental health assessment. A treatment team then work collaboratively with each woman to complete a Person Centred Plan, identify risks and needs, and set goals and objectives for their progress
- The second stage sets the plan in action through a clinical case management approach: the women work with their case managers to address issues such as housing, education, and employment
- The third component is court liaison services: programme staff work closely with clients, probation officers, and the courts including accompanying clients to court and providing monthly progress reports to probation officers.

Alongside this core programme Women at Risk also offers a weekly therapy group, a range of supportive measures for women with substance use issues, a 26 week course for women who have experienced or are at risk of domestic violence, and an adapted programme targeting young women aged 16-19 who are at risk of entering the criminal justice system.

The Women at Risk programme has been extremely successful at reducing reoffending in women offenders at a greatly reduced cost of imprisonment. In an analysis of reoffending rates for graduates of the programme compared with those who exited the program early three years after leaving the programme, the study found that 34% of graduates had been rearrested compared to 73% of those who exited early; 21% of graduates had been convicted of a new crime compared to 66% of early exits; and that only 9% of graduates had been returned to prison compared to 45% of those who exited the programme early.

75 Shelly-Ann McDermott, Moving forward: empowering women to desist from offending, The Griffin Society, Research Paper, 2012/02
76 Western Carolinians for Criminal Justice, www.wccj.org/womenatrisk.html
78 Western Carolinians for Criminal Justice, www.wccj.org/womenatrisk.html
The programme has a total operating budget of $460,020, with funding from the state and a range of grants. In 2012 the average daily cost of the Women at Risk programme per offender was $9, significantly lower than the average daily cost of imprisonment per inmate in North Carolina which stands at $74.80.

Center for Young Women’s Development, California

[See also black and minority ethnic women; young women/juvenile justice; re-entry; mothers and children; homelessness]

The Center for Young Women’s Development in San Francisco is a unique women’s centre: it is operated and used by young women who have been or continue to be involved in the criminal justice system. It offers education, re-entry guidance, and support to young women at risk of being or who have been involved in the criminal justice system.

Founded in 1993 the Center works with criminalised young women, mostly from low-income families, from minority or excluded groups, who have experienced homelessness or periods of imprisonment. With a particular focus on ending generational cycles of imprisonment and reducing the impact of poverty, the Center has developed programmes for young women based on community reintegration strategies.

In 2004 the Center founded the Girls’ Detention Advocacy Project GDAP which offers a range of support services to young women involved in all stages of the criminal justice system. For example, the GDAP provides case management and court advocacy for young women. With a commitment to finding suitable alternatives to imprisonment for each young woman, project workers engage with the young woman, her parents or guardian, the prosecutors and Judge, as well as her local community. Working together, they develop individualised care plans to divert women away from prison and into treatment and support programmes. The GDAP provides ongoing support to young women in juvenile prison. Through a three-week rolling curriculum titled Lift us up, don’t lock us down, the GDAP provides information and advice on a range of personal and social subjects. This work is bolstered by the GDAP’s court advocacy work and individualised support for young women, especially those facing adult imprisonment. Finally, the GDAP provides re-entry support for young women returning to their communities. Sisters Circles is a peer-led re-entry programme that combines weekly group counselling sessions, community building projects, and support sessions to assist young women back into their communities and away from the criminal justice system.

Stemming from the GDAP, the Young Mothers United Program is a continuous support and advocacy programme for young women in prison who are pregnant or have children. Working with young women aged between 16 and 24 the programme provides a range of services including court advocacy and accompaniment and a 12-week peer-led parenting class. Childcare is provided while the classes offer advice on child development, healthy relationships, and family violence. These mothers are also offered one-to-one counselling and advice. Alongside peer support, the programme campaigns to prevent the violation of the rights of pregnant and parenting young women, and works with state institutions to ensure that young women are informed of their legal and social rights.

80 Ibid
81 The Center for Young Women’s Development www.cywd.org/gdap.html
82 The Center for Young Women’s Development www.cywd.org/gdap.html
83 The Center for Young Women’s Development www.cywd.org/Brochure/CYWDBrochure.pdf
Also founded in 2004 the Sisters Rising programme provides intensive employment assistance to young women involved in or at risk of becoming involved in the criminal justice system. Recognising the barriers to employment that face young women with criminal records and limited education, the programme provides a paid internship which offers both an income and a chance to experience employment. Limited to 17 participants, the programme enables young women to develop skills and engage in their communities. In addition, the programme provides a wellness and empowerment component called Beyond Survival, a gender-sensitive and trauma-informed programme that enables successful re-entry into communities through practical, community-based projects.

The Center has proved to be a successful one-stop-shop for young women involved in the criminal justice system: it is a model of both peer-led advocacy, and shows how gender-specific and trauma-informed services can be targeted towards young women. More than 90% of the young women employed by the Center have successfully completed probation requirements and over 80% of participants who completed the programmes are employed or enrolled in higher education. The Center’s programmes have shown to be particularly successful. For example, the Sisters Circle component of the GDAP has worked with over 386 young women. Of those, 92% have not re-entered the juvenile justice system.

Women in Recovery Program, Oklahoma
[See also substance use; mothers and children]
The Women in Recovery Program is an innovative alternative to custody for women accused of non-violent and drug related offences in Tulsa County, Oklahoma. Initiated in 2009, Women in Recovery diverts women from imprisonment through a programme that combines supervision with comprehensive day treatment and support. The programme offers each woman a flexible individualised plan. Designed for women involved in the criminal justice system who have problems with substance use and are ineligible for other diversion and support programmes, the programme gives high priority to women with children.

Women in Recovery offers: intensive case management; education, life skills, and employment assistance; gender-responsive and trauma-informed cognitive behavioural therapy and substance use treatment. The programme has a strong commitment to maintaining links between women and their children. To this end, they provide parenting classes alongside family reunification services. The programme has proven to be more cost-effective than imprisoning women across the state.

84 National Institute of Corrections http://nicic.gov/WODP/Program/40-center-for-young-womens-development
85 The Center for Young Women’s Development www.cywd.org/rising.html
86 The Center for Young Women’s Development www.cywd.org
87 Family and Children's Services http://www.fcsok.org/services/women-in-recovery/
Community women’s centres in Canada

The Maida Duncan Women’s Drop-in Centre, Vancouver
[See also homelessness; mental health; substance use;]
The Maida Duncan Women’s Drop-in Centre in New Westminster is a volunteer-run support and resource centre for marginalised women, run by the Elizabeth Fry Society of Greater Vancouver. It is a free service, provided to women in the community who experience poverty, homelessness, mental health and substance use issues, and criminalisation.90

Opened in 2003 the Centre is intended as a continued point of contact and support for women who have been or are currently clients of Elizabeth Fry Societies. The Centre provides basic amenities including food, clothing, showers and laundry alongside more intensive support including educational classes and community resources. In contrast to other community centres and services for women, the Centre does not require women to make appointments or be referred. The Centre offers a place of safety and support to women who have been, or are at risk of becoming, involved in the criminal justice system.

Community residential facilities

Current research

Community residential facilities – such as half-way houses, Approved Premises, and community justice centres – offer structured and secure environments in which women can serve their sentence within their communities whilst maintaining links with their children and families. Increasingly, community residential facilities have introduced gender-specific models into their strategic planning. For example, Ellen House in Ontario, Canada provides a community residential facility to women offenders, offering substance use support and case management while housing women offenders in the community.91

Academics and practitioners have identified best practice in community residential facilities for women offenders. A seminal US study found that women offenders were less likely to reoffend if community residential alternatives had a clear structure and an emphasis on accountability, a case management style that used a role modelling approach, a ‘throughcare’ approach, and a managerial practice that had a clear mission statement, stable funding, and ensured ongoing evaluations.92 Expanding upon this, a recent study by the Wellesley Centers for Women found that community facilities for women offenders are particularly successful when they take an holistic, trauma-informed, strengths-based, relational, and women-centred approach.93

Funding and structuring of gender-specific community residential facilities remains a persistent problem. Research suggests that community based alternatives function more successfully when the security and support aspects are kept separate. For example, community residential facilities often work better when staffing consists of practitioners and peers rather than custodial workers: within this structure support-oriented work and security-oriented work can be kept separate. Furthermore, assessments of funding for residential facilities have found that while statutory provision offers stable funding, the voluntary sector is better placed to provide flexible, tailored, and personalised services to women offenders.94 One area where the voluntary sector is particularly strong is being able to respond more quickly to developing issues for women offenders. For example, implementing gender-specific services for homeless women and black and minority ethnic women.

Community residential facilities in the United States

Drew House - New York

[See also mothers and children; substance use; women convicted of violent crimes]

Founded in New York in 2008, Drew House is a unique residential alternative to imprisonment for women and their families. It results from an innovative partnership between the Brooklyn District Attorney’s Office and local NGO Housing + Solutions who run the day-to-day programming of the facility.95 Predominantly for women who have experienced homelessness, mental health and substance use problems, Drew House is a rare example of a centre that does not automatically exclude women who have committed higher level or violent crimes.96

92 James Austin, Barbara Bloom, and Trish Donahue, ‘Female Offenders in the Community: An Analysis of Innovative Strategies and Programs’, National Council on Crime and Delinquency, San Francisco, CA, September 1992. Although the study is over 20 years old, it is a key academic work on the subject of alternatives to imprisonment for women offenders.
95 Drew House, www.brooklynda.org/drew_house/drew_house.htm
At present, Drew House houses up to five women and their families. Unlike most community residential facilities or half-way houses, at Drew House women live with their children in home-like non-institutional apartments for which they pay a significant proportion of the rent. This has been shown to improve residential security.\(^97\) Drew House is a non-secure setting, however the residents must abide by certain rules and procedure. They sign in and out of the house with cameras monitoring their movements, they must abide by a curfew, and accept mandatory drug checks.

In general, women reside at Drew House for a period of 12 to 24 months. Alongside residential support it offers women offenders a range of gender-specific services, including help with seeking education, employment, and sustainable housing.\(^98\) Once the women in residence have completed their court mandates the charges against them are dismissed. This is intended to prevent future stigma and disenfranchisement.\(^99\)

Drew House has proved to be a cost-effective way of reducing reoffending in women offenders. It costs $34,000 a year to house a mother and two children, compared to $129,000 a year for imprisonment and foster care.\(^100\) The Drew House environment has been shown to be a positive place for the children of women offenders, with reports of improved academic performance alongside general wellbeing.\(^101\) Furthermore, it has proved to be successful in reducing reoffending. At present, none of the women who have been involved in the Drew House programme have committed another crime.\(^102\)

**Greenhope Services for Women Inc, Kandake House, New York**

[See also black and minority ethnic women; mothers and children; homelessness]

Greenhope Services for Women Inc was founded in New York in 1975 and offers alternatives to custody for women offenders, alongside support to women leaving prison and women at risk of imprisonment. Greenhope works predominantly with women of colour, especially those who have substance use issues and experience of homelessness.

In 2011 Greenhope opened Kandake House, a community residential facility that enables women offenders to carry out their sentence while remaining with their children. It can house up to 72 women, including 28 women with children.\(^103\) It takes an holistic, dynamic, and flexible approach to the care of women offenders, and has an Alumnae Association of women who have successfully ended their involvement with the criminal justice system and can guide others.

Greenhope has a recidivism rate of less than 10%, maintains a 75% rate of successful parole completion and it has very levels of job placement rates for its clientele (65%).\(^104\)

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97 Lorie S Goshin and Mary W Byrne, ‘Evaluation of a Supportive Housing Alternative to Incarceration for Women charged with a felony and their children’, Columbia University, 22 September 2011


98 Ibid


100 National Resource Centre of Justice Involved Women, http://cjinvolvedwomen.org/innovators-drew-house

101 Ibid

102 Lorie S Goshin and Mary W Byrne, ‘Evaluation of a Supportive Housing Alternative to Incarceration for Women charged with a felony and their children’, Columbia University, 22 September 2011


103 Greenhope Services, Kandake House www.greenhope.org/about/kandake_house.shtml

104 Ibid
**ARC Community Services Inc, Wisconsin**

[See also: mother and children; substance use; re-entry]

Founded in Madison in 1976, ARC Community Services Inc continues to be one of the most well respected programmes offering residential alternatives to women offenders with substance use problems in the United States.

From diversion to re-entry, ARC provides a range of services to women involved in the criminal justice system, using an approach that recognises the relational nature of women’s offending. It acknowledges the importance of having a culturally sensitive service delivery in order to reach specific groups of women who use licit and illicit substances. There are four residential alternatives for women offenders with substance use problems, each with varying degrees of treatment and support:

ARC House is a residential centre that opened in 1985 and houses 15 women offenders for a flexible length of stay. Alongside support for substance use, it provides intensive case management that supports women to find educational, employment, and housing security. In addition, it offers parenting skills support and facilitates mother-child reunification.

ARC Fond du Lac is an alternative to custody residential facility that houses up to twelve women for a 90 day length of stay. Fond du Lac functions as a diversion programme for women involved in the criminal justice system, and helps women reintegrate as responsible individuals into their communities. It provides balanced forms of support that emphasise this purpose. For example, case management is combined with a system of increasing privileges and community-based programmes strengthen a woman's ties to her family and community.

ARC Maternal and Infant Program (founded in 1993) is a community-based residential programme for women offenders who are pregnant or who have children up to one year old. Licensed by the State of Wisconsin as a Community-Based Residential Facility, the programme houses up to 12 women and their children. Women offenders are given prenatal and post natal care, parenting skills, and substance use assistance, alongside support to unite them with their children and dependents.

ARC Dayton opened in 1990 as a 12 bed, minimum-security three month residential facility for women who are transitioning from prison and are under the jurisdiction of the Wisconsin Department of Corrections and the Federal Bureau of Prisons. The programme supports women with re-entry issues by providing intensive case management alongside a range of programmes, such as education, mental health and substance use support, and assistance with employment.
Community based residential facilities in Canada

Provincial governments in Canada have implemented a range of innovative community residential alternatives for female offenders. For example, the Saskatchewan Ministry of Justice collaborates with the YWCA to provide the Supportive Justice Program for Women. Women sentenced to provincial corrections facilities are given the opportunity to serve their sentence within the community. They spend 3 weekends in the Kikinaw Residence provided by the YWCA, from 7pm on Friday evening to 7am on Monday morning. This offers a flexible approach that enables women to serve the terms of their sentence while maintaining ties with their families and communities.105

Phyllis Haslam Residence at Elizabeth Fry Toronto

[See also black and minority ethnic women]

The Correctional Service of Canada (CSC) initiated Community Based Residential Facilities which are state funded half-way houses operated by NGOs. They include a range of housing alternatives such as hostels, private home placements, alternative community beds, and supervised apartments. One study identified a number of best practice features for these facilities, including: the importance of having a broad network of residential alternatives for women involved in the criminal justice system; and the value of creating supported independent living units that combine flexibility with intensive support and supervision.106 In addition, in 2013 the CSC implemented the Women’s Supervision Unit and Mental Health Services for Women, a residential unit for women offenders. Using an interdisciplinary team of professionals, Women’s Supervision Units will provide substance use interventions directed towards the needs and risks of women in the criminal justice system. The Units offer a range of services for women offenders, including innovative individual release plans, psychological care, and support for re-entry.107

An example of a very successful and well respected Community Based Residential Facility is the Phyllis Haslam Residence at Elizabeth Fry Toronto. The Elizabeth Fry Society is a long-established and well respected NGO supporting women in trouble with the law in Canada. Elizabeth Fry Toronto has offered day-to-day and residential support to women involved in the criminal justice system in the Toronto area since the 1970s. The Phyllis Haslam Residence has been operating in Toronto for nearly 40 years, providing an alternative community facility, particularly for women on parole from federal and provincial institutions.108 The Residence employs the Integrative Model which creates an environment in which staff and residents work collaboratively to develop a safe and supportive community.109 In addition to intensive support and supervision, Phyllis Haslam has gender-specific services for indigenous women and conducts a peer leadership programme.110

107 For more information see The Women’s Supervision Unit and Mental Health Services for Women, May 4th, 2013
108 Elizabeth Fry Toronto website http://www.efrytoronto.org/n/?q=node/14
Studies have shown that this facility greatly enhances parole compliance and reduces recidivism rates, with 82.5% of women successfully completing day parole while 78.8% of women successfully completed their full parole. Elizabeth Fry Toronto houses approximately 110 women annually, at a cost of $34,462 per woman per year. This is significantly lower than the annual cost of imprisoning one woman per year, which stands at $170,684.111

Coverdale Centre for Women Inc, Nova Scotia

[See: Community Women’s Centres and One-Stop-Shops; substance use]
The Coverdale Centre for Women is a One-Stop-Shop for women involved in the criminal justice system in New Brunswick. It offers a drop-in centre which provides support, fellowship, and basic amenities for women alongside a comprehensive system of residential care. Their residential programme includes an emergency shelter, a half-way house, and a permanent residential unit for women.112

The Coverdale Centre has been working with women involved in the criminal justice system since the 1920s and has a wealth of experience in community-based alternatives. Founded on a women-centred Continuum of Care approach, the Centre offers a range of services alongside residential care, including mental health services, court support, child care assistance, and substance use services.113

Community residential facilities in Australia

Parramatta Women’s Transitional Centre, New South Wales

[See also re-entry; mothers and children; black and minority ethnic women]
Parramatta Women’s Transitional Centre is a minimum security community based residential facility or half-way house for women prisoners serving the last stage of their sentence. The Centre prepares women prisoners for their release from prison, providing a range of services to enhance community reintegration.

The Centre consists of two large houses which accommodate up to 21 women, including women with children. To be eligible, women must be Category 1 prisoners, and have between 3 and 18 months of a sentence to complete. Women with substance use issues are not admitted. Aboriginal and foreign national women are given culturally and linguistically sensitive support, and the Centre works to establish positive relationships with the local Aboriginal community.114

Women at the Centre are able to live in an open environment, residents wear their own clothes (workers do not wear uniforms) and they are given responsibility to maintain the workings of the residence, including shopping, cooking, and cleaning.115 While at the Centre, women are expected to work or volunteer in the community and they are offered a range of on-site services.
programmes and services. These include inter alia case management, counselling, mother-child programmes, employment assistance, financial management and general living skills, and educational programmes. Alongside the mother child programme, eligible women and their children are able to participate in the Occasional Residency Program in which children up to the age of 12 can stay with their mothers during weekends and school holidays.  

In a recent evaluation, Parramatta Women’s Transitional Centre was found to have significantly lower costs than traditional custodial units. At that stage only 1 of the 99 participants had gone on to reoffend in the following two years.

**Community residential facilities in Germany**

**Half-way houses**

In response to the increasing number of mothers in prison, Germany introduced community based accommodation or half-way houses for many women offenders. Mothers and children live together in these houses. The women are given a curfew and must stay within the house in the evenings and overnight but during the day they access prison training, education, and support while their children attend nursery or school. This has been recognised as an integrated approach that combines imprisonment and welfare, while protecting the rights and welfare of the children of offenders.

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Small custodial units

Research overview

Small units are often better able to address issues of mental health, substance use, and trauma than larger prisons. The 2007 Corston Review advised the UK government to replace women’s prisons with ‘suitable, geographically dispersed, small, multi-functional custodial centres’ within the next ten years.120

Small units can be situated within larger prisons or function as separate and distinct custodial units. Small, distinct units are particularly successful as they can respond to the individual needs of women offenders. For example, specialised small units can offer targeted support for women with mental health issues or substance use issues; provide age-appropriate support for older women offenders; offer safe environments for high-level, violent women offenders such as female sex offenders; provide self-care apartments that enable women to prepare for their re-entry into the community; and offer mother and child units in which women can live with their young children.

Small custodial units in the United States

Silver Fox Program at Central California Women’s Facility, California

Older female prisoners are one of the fastest growing prison populations around the world.121 Increasingly, practitioners and academics are recognising the gender-specific needs of older women prisoners and the lack of age-appropriate care. Older women prisoners are lower risk than the younger female prison population but they have a range of social and health needs. For example, studies have found that older women prisoners are more prone to loneliness and social isolation, alongside general health problems such as respiratory, degenerative, and cardiac illness.122

In recent years various jurisdictions have developed age-appropriate custodial options for older offenders such as nursing-home prisons, prison hospices, and small units attached to prisons that cater to the specific needs of older prisoners. These sites are better able to provide specialised health services to older prisoners, as well as reducing their vulnerability to victimisation by younger prisoners.123

121 A recent Australian study found that the number of female prisoners over the age of 50 has more than tripled over a ten year period (2000-2010). With an increase of 222% it far exceeds the percentage growth in the under 50 female prison population. Susan Baidawi, Shelley Turner, Christopher Trotter, Colette Browning, Paul Collier, Daniel O’Connor and Rosemary Sheehan, ‘Older prisoners – A challenge for Australian corrections’, Australian Institute of Criminology, Trends and Issues in Criminal Justice, No. 426 August 2011, http://aic.gov.au/documents/F/C/5/%7bFC556827-B995-497B-AE69-D2C28B5922C2%7dtrandi426_001.pdf
123 For best practice on services for older offenders: The geriatric prison in Singen, South Germany, a 50-bed open-design prison for older inmates which offers age-appropriate health and recreational services, increased visitation rights, and rehabilitation and re-entry programmes. For more information see article in the Digital Journal, ‘Grandpas Behind Bars - Germany’s Jail For The Elderly’, January 30th 2002 www.digitaljournal.com/article/33767 and Seniors World Chronicle, GERMANY: Prison Specializes in Older Prisoners, March 20th 2008 www.seniorsworldchronicle.com/2008/03/germany-prison-specializes-in-older.html See also the Laurel Highlands institution in Central Pennsylvania, a large minimum-security facility for elderly and ill prisoners. The prison has care units for older prisoners and a hospice for terminally ill prisoners. In addition, it provides specialised programmes designed for elderly prisoners including ones targeting substance use, life skills, and recreational programmes. For more information see OLR Research Reports, Kevin E. McCarthy, State Initiative to Address Aging Prisoners, March 4th 2013, www.cga.ct.gov/2013/rpt/2013-R-0166.htm
For example, the Central California Women’s Facility (CCWF) provides the Silver Fox Program to women prisoners over the age of 55 which gives older women certain privileges such as extra pillows and blankets or shorter routes to walk around the prison. In 2011 the CCWF developed a residential component of the programme, the Senior Living Unit, which is designed for older women prisoners. Women in this unit receive age-appropriate programmes and support groups as well as a range of extra privileges such as additional mattresses and unlimited access to the phone.

Small custodial units in Australia

Boronia Pre-Release Centre for Women Offenders, Western Australia
[See also re-entry; mothers and children; black and minority ethnic women offenders]

Australia has developed a diverse women’s prison estate that includes large state prisons, regional custodial units, and transitional centres. The majority of small units address the specific issues facing the Australian female prison population: they have a focus on mental health issues, the importance of maintaining mother-child relationships, and the need for culturally-specific residential and treatment options for Aboriginal women and black and ethnic minority women, particularly those from the Torres Strait Islands.

The Boronia Pre-Release Centre for Women Offenders in Western Australia houses minimum security women offenders in a residential style setting that is intended to facilitate their re-entry back into the community. Built on concepts derived from international comparisons and evidence, the Centre is regarded as a best-practice model. The Centre houses up to 82 women and is designed to emulate living in the community: it provides normalised residential style housing for women, with a maximum of five women in each unit. The houses are surrounded by a garden, and situated in a neighbourhood-like environment. The units include communal kitchens and living spaces, and the women have access to a café, supermarket and canteen. In general, the Centre espouses a ‘self-care’ model but intermediate care accommodation is offered to women who require extra care or supervision.

The Centre prepares women for re-entry back into their communities. Women are assigned Individual Management Plans and regularly meet with case managers who take an holistic approach to each woman’s progress. The prisoners are offered a range of programmes including those addressing domestic violence, life skills, and cognitive behavioural therapy treatment. Employment is central to the work of the Centre. All women are employed while they remain at the Centre: they can sign up for traineeships or take jobs in local businesses and NGOs. The Centre has built up strong links with the local community and volunteers are instrumental in the functioning of the unit, and women prisoners are encouraged to volunteer in the community.

Women are given autonomy to make decisions about their families, employment, education, and health. In the last 12 months of their sentence they are eligible to participate in the Reintegration Leave programme. This enables women to begin to re-establish relationships with their families and their wider communities, through programmed periods of leave from the prison. Under the care of suitable sponsors, who vouch for the prisoners while they are on leave, women are able to begin the transition back into their communities.

Boronia is also committed to ensuring that mothers maintain close relationships with their children and some children are allowed to live within the Unit with their mothers. A local NGO Extra Edge Community Services operates the Pine Tree Tots programme at the Centre. The programme consists of one-on-one support, weekly group sessions with mothers and their children, facilitated community visits prior to release, and case management support following release. The programme won the 2010 Australian Crime and Violence Prevention Award.

Silverwater Women’s Correctional Centre, New South Wales

The Silverwater Women’s Correctional Centre is the main women’s prison in New South Wales, and has developed a range of services for women with mental health issues.

The Mum Shirl Unit – is a specialised unit for women offenders with complex psychological, personality, and behavioural issues. The Mum Shirl is a 19 bed unit that contains an 8 bed crisis unit with observation cells, stimulus deprived environments and an 11 bed unit for long-term care of women who are deemed both high risk and high need, often those with Borderline Personality Disorder. Through intensive case management and post-release planning and placement, the Unit aims to integrate women into mainstream services.

The Mental Health Step Down Unit – is a purpose-built 10 bed unit designed to accommodate women offenders in order to assist them with their mental health management plans. This Unit is staffed by Custodial staff of New South Wales.

Small custodial units in the United States

Massachusetts Correctional Institution (MCI) Framingham

MCI Framingham is a medium level security prison for women in Massachusetts. The facility houses women at various stages of the criminal justice process; women awaiting trial, women convicted in county courts, and women sentenced in state courts. In recent years MCI Framingham has moved towards a trauma-informed prison environment approach, including an Intensive Treatment Unit for women with mental health issues.

129 Report of an Announced Inspection of Boronia Pre-release Centre for Women, July 2012, Office of the Inspector of Custodial Services, Western Australia

130 Boronia Pre-Release Centre for Women Offenders Guiding Philosophy


The Intensive Treatment Unit (ITU) was opened in April 2012. It is designed for prisoners with mental health needs, such as those on suicide watch or facing crisis intervention, and offers a phased system of management for their care. The ITU emerged from an increasing awareness of the different needs and risks of women with mental health and substance use problems. MCI Framingham found it necessary to separate incoming prisoners with different requirements.\textsuperscript{133}

Management at MCI Framingham ensure that staff are trained in, accepting of and actively involved in the delivery of trauma-informed services. Clinical staff provide a range of services to women living in the ITU.\textsuperscript{134} For example, they provide treatment groups, meet daily with each prisoner to review her behaviour and progress, and follow up assessments by assigning women to one of four phases: one-to-one watch; a 15 minute watch; prisoners who are allowed to join the community for meals, exercise and various structured and unstructured activities; and prisoners who can leave the unit at intervals in order to attend programmes in the general prison population. Staff have found that incentive plans rather than formal disciplinary procedures have been more effective in changing problematic behaviours.

Since its opening the ITU has made significant positive changes. There has been a 15% reduction in self-harming behaviour; a 33% reduction in days women spent on constant mental watch; and a 60% decrease in suicide attempts.\textsuperscript{135} In addition, MCI Framingham has reported a significant decrease in prisoner-on-staff and prisoner-on-prisoner assaults and the use of segregation.

Small custodial units in Canada

\textbf{Grand Valley Institution for Women, Ontario}
[See also mothers and children; re-entry]

The Grand Valley Institution for Women is a multi-level custodial unit for women, one of five regional facilities implemented by the federal government following the 1991 Creating Choices report that radically transformed the female prison estate in Canada.

Women at Grand Valley live in an open environment in individual units that house up to ten women. Designed to be light and well-ventilated, all contain a communal living area, kitchen, and bedrooms. These houses are situated in a horseshoe shape around a communal garden. Women wear their own clothes, have free access to laundry and bathing facilities, and have keys to their own houses and rooms. Alongside units for individual women, there are houses specifically designated for women with babies, new arrivals, and women who need extra assistance or supervision.\textsuperscript{136}

Grand Valley offers a wide variety of programmes, implemented by prison staff or by external organisations. The Council of Elizabeth Fry Societies of Ontario provides a range of services including weekly appointments with women to address legal queries, plans for release, and deportation concerns; a one-to-one programme that matches prisoners with community

\textsuperscript{133} National Resource Centre of Justice Involved Women, MCI Framingham http://cjinvolvedwomen.org/innovator-massachusetts-correctional-institution-at-framingham
\textsuperscript{134} Ibid
\textsuperscript{135} National Resource Center on Justice Involved Women Newsletter, June 2013 http://cjinvolvedwomen.org/sites/all/Newsletters/NRCJIWJune2013Newsletter.html
volunteers in a befriending mentoring programme; an anger management course; a shoplifting-fraud programme that aims to address the root causes of women’s offending; and a mother-child programme which provides pre and post-natal care to mothers in the unit.\textsuperscript{137}

In recent years external factors have changed the structure and focus of the Institution. Overcrowding has become a persistent problem, and consequently security issues have overtaken rehabilitation as the main focus of the Institution. Kim Pate from the Canadian Organization of Elizabeth Fry Societies argues that Canadian legislation in recent years has eroded welfare support for socio-economically disadvantaged women, while the justice system has seen an increase in the use of short-term sentences, especially for women with mental health issues.\textsuperscript{138} Grand Valley is moving away from its original operating methods and ethos, and increasing its use of larger-scale secure units. However, useful lessons can be learnt from the founding principles of the Grand Valley Institution for Women even if it has moved away from its original design.

**Small custodial units in New Zealand**

**Self-care units: Auckland, Wellington, and Christchurch**

[See also mother and children; re-entry]

The Auckland Region Women’s Corrections Facility, alongside the Arohata prison in Wellington and the Christchurch Women’s prison in the south island of New Zealand, contain self-care units for eligible prisoners. Self-care units are residential style facilities designed for women prisoners nearing their release, giving them the opportunity to develop and practice skills for living independently after their release. In certain cases women nearing release are able to live in these self-care units with their babies.\textsuperscript{139}

**Small custodial units in Germany**

The German penal system has a range of prison options, including Erstvollzug which are prisons for first time offenders. These are prisons for individuals who have never been imprisoned before or who have been imprisoned for a maximum of three months. Repeat offenders are held in separate institutions.

**Frondenberg, North Rhine-Westphalia**

[See also mother and children;]

The mother-child unit at Frondenberg prison is widely viewed as a best practice programme for women offenders with children. The prison runs an open unit for 16 women who live with children up to the age of six in self contained flats.

This facility does not resemble a prison from the outside as it has no bars on the windows or fences. It is designed to be as open as possible and many of the children involved have reported not knowing they were in a prison. Prison staff do not wear uniform as they want the environment to be as normal and unthreatening as possible. If a woman disobeys a rule or displays...
problematic behaviour staff attempt to resolve the situation with her alone and avoid having the child present. They believe that if children see their mothers being punished mothers will lose their authority over their children and the relationship will be damaged.140

Women imprisoned at Frodenberg have commonly been imprisoned for low level non-violent offences such as theft or fraud. If they are deemed suitable, mothers are able to go outside and play with their children, take day trips, and have the use of vacation days where they can leave the prison alone.141 The mother child unit is small but has been shown to be successful, with participants having a significantly lower rate of reoffending than women who are not housed with their children.142

Small custodial unit in Ireland

The Dóchas Centre, Dublin
The Dóchas Centre is a small unit for women offenders situated within Mountjoy prison for men in Dublin. The Centre has an open design that attempts to limit a strong institutional feel: there are six individual houses with single rooms, a pre-release unit and a health care unit.143

Management works to generate a relaxed environment so staff wear civilian clothes, prisoners are given responsibility to manage various aspects of their living arrangements, and they are not handcuffed even when being escorted to court.144 The Dóchas Centre is an innovative unit, however in recent years persistent overcrowding has limited its rehabilitative capabilities and while it provides a number of treatment and training programmes, none of these have a gender-specific focus.145

Resettlement in the community

Research overview

The resettlement difficulties faced by many prisoners returning to the community after a period of imprisonment are compounded for women by the common neglect of their particular needs. Women typically experience a range of vulnerabilities: they usually lack money, resources, and life skills, and suffer from physical and mental health problems. They must find suitable housing, seek education and employment (with the added barriers of childcare needs and lack of qualifications), and attempt to reunite with their children and families. Many women face homelessness, living in violent or unsafe living environments, and a return to criminal activity. Research has shown that women are less likely to reoffend following release when they are offered a coordinated and holistic range of services including basic amenities such as housing support, education, employment assistance, and reunification with their children alongside longer-term assistance such as peer-mentoring and trauma-informed counselling.

There is a good example of gender-specific mentoring in the Women and Mentoring programme at the Neighbourhood Justice Centre in Yarra, Victoria (Australia). Operated by Women and Mentoring (WAM), a local organisation, it offers women offenders support to guide them through the court process and assist them in finding practical help through community resources. Gender-specific strategies are mainstreamed into every facet of the programme, from the training of mentors to involvement with the wider community and various stakeholders. Evaluations of the programme found that it is a unique and cost effective programme that significantly reduced the number of breaches of parole and the number of women returning to prison.

Evidence-based research highlights a crucial feature of re-entry programming for women: re-entry planning should begin at the point of entry to an institution and finish at long-lasting sustainable success. Rather than starting in the final months of a prisoner’s stay, re-entry planning should immediately influence the programmes made available to prisoners, continue in their supervised release, and end only once the individual finds stability and self-sufficiency. The US based Center for Effective Public Policy defined the necessary interventions for the three stages of the re-entry process for women offenders: the Incarceration phase, the Transitional phase, and the Community phase:

150 Judith Berman, ‘Women Offender Transition and Re-entry: Gender Responsive Approaches to Transitioning Women Offenders from Prison to the Community’, Center for Effective Public Policy for the National Institute of Corrections http://static.nicic.gov/Library/021815.pdf
151 Phyllis Modley and Rachelle Giguere, Re-entry Considerations for Women Offenders, Coaching Packet, Center for Effective Public Policy, 2010 www.cepp.com/documents/Re-entry%20Considerations%20for%20Women.pdf
In the Incarceration phase prison staff are advised to inter alia implement gender-responsive programmes; establish case plans for each woman; initiate policies that help women sustain or build prosocial relationships with their families through, for example, working with child welfare services to ensure women offenders retain parental rights.

In the Transition stage case management teams are advised to address the immediate survival needs of women to ensure they are prepared for their first few weeks back in their communities; establish contacts with community-based programmes that might continue to provide services to women following their release; guaranteeing that housing plans consider the safety of the women, for example ensuring they will be free from domestic violence or able to live in a drug and alcohol free environment; assisting in family reunification by enabling families to prepare for the mother’s release e.g. informational meetings or family counselling.

In the Community Phase support services for women are advised to inter alia provide women with substance use and mental health services immediately after release to ensure continuity of care; offer support, legal assistance and transportation for women meeting custody requirements of their children; involve family and friends of women offenders in their ongoing supervision; continue to support women while preparing them for discharge from formal supervision into a network of community resources during their aftercare phase.

Resettlement programmes In the United States

A number of gender-responsive services address specific resettlement needs of women. For example, the Women’s Centre in New Bedford, Massachusetts provides housing, counselling, and transitional support for women offenders who have experienced domestic or family violence. Women and children are able to stay at the Centre for up to two years, during which they are offered gender-specific and trauma-informed support to help them re-enter their communities.¹⁵²

For a best practice example of re-entry support that addresses a woman’s reunification with her children, see the Sarah Powell Huntington House in New York. Opened in 1993 in response to a law that prevents substance using women from reclaiming their children after imprisonment unless they have adequate housing, the Sarah Powell Huntington House provides transitional housing and support services for women re-entering the community. The House has a significant success rate: in the last ten years, it has served 328 women and of those living with their children in the House 80% obtained permanent housing and only 4% returned to the shelter system.¹⁵³

The United States National Institute of Correction’s Transition from Prison to Community (TPC) initiative is a collaborative, multidisciplinary process that has developed a strong gender-specific practice built on a through-care approach. The TPC Model covers pre release to aftercare, including the Planning stage in which an individualised Transitional Accountability Plan (TAP) is developed for each prisoner, designed as a roadmap from their point of entry through to post-release and based on women-led goals; the Release stage in which the TPC model provides women with essential survival needs on their release including paperwork such as her TAP, a schedule for the first week, gate money, transportation to her new residence, and assistance with continued medication for physical and mental health needs; and an innovative aftercare response after a woman has been stabilised back into her community, which includes peer mentoring, developing community partnerships, and some continued minimum community supervision.¹⁵⁴


¹⁵⁴ For more information see Judith Berman, ‘Women Offender Transition and Re-entry: Gender Responsive Approaches to Transitioning Women Offenders from Prison to the Community’, Center for Effective Public Policy for the National Institute of Corrections http://static.nicic.gov/Library/021815.pdf
Harriet's House - North Carolina
[See also community residential facilities; mothers and children; substance use]

Harriet’s House is a long established and highly respected re-entry programme for women offenders. It was cited as an example programme in the U.S. Department of Justice’s Guide for Developing Housing for Ex-Offenders and has won numerous awards including the Outstanding Criminal Justice Program award from the National Criminal Justice Association for reducing recidivism.155

Harriet’s House offers a 24 month programme to women offenders re-entering the community. It provides a comprehensive wraparound service that includes intensive case management, peer support, substance use counselling, family reunification and parenting classes, and assistance with employment, housing, and budgeting.156 Alongside intensive support services, Harriet’s House offers a four stage housing assistance programme, preceded by structured intake planning that begins three months before a woman is released:

- The first phase is Supervised Living which lasts for the first six months. In this phase, women live in shared supervised living quarters where they are subject to curfews and urine screenings. They are supported by on-site case managers who assist them with educational training, employment, and budgeting. At this stage they are able to have weekend visits with their children, increasing to longer visits as the woman progresses through the phase.
- The second phase – Transitional Living – lasts for 6-12 months while women continue to live in a clustered community but now they stay in their own units with their children. Mothers are fully reunited with their children but they remain in a secure and stable environment. Case management continues, alongside a lower level of security checks, while women are assessed for permanent housing.
- In the third Community Living phase, women and their families are assisted into permanent affordable housing for a period of six months. The woman is fully employed, caring for herself and her family with decreasing support from case management. Continued support is still offered.
- The final Aftercare phase lasts for six months. At this stage women should be living in permanent housing with their families, managing all areas of their own life including parenting, substance use, employment, and finances.157

Harriet’s House has been successful at reducing reoffending. In a three year period (2005-2008) 79 women and their children were supported and when they left the programme 75% of the women were able to maintain employment and 74% remained in permanent housing. Overall, Harriet’s House has an 80-85% success rate or a 15-20% rate of reoffending, significantly lower than the national average.158

155 Passage Home website www.passagehome.org/programs/housing/re-entry.aspx
157 Passage Home website www.passagehome.org/programs/housing/re-entry.aspx
Resettlement programmes in Canada

Elizabeth Fry Societies, Columbia Place, Vancouver
[See also mothers and children]
Operated by the Elizabeth Fry Society, and funded by the Correctional Service of Canada, Columbia House provides a gender-specific residential re-entry programme for women in the greater Vancouver area. ¹⁵⁹

The 12 bed facility provides semi-independent apartments for women who pay rent to live there while they transition to fully independent housing. Case workers provide support and individual case management.

Alongside accommodation and basic amenities, Columbia House provides a range of gender-specific services, including: the Pathways second stage housing programme, educational advice, vocational training, and peer support. Operating under a gender-responsive holistic approach, the facility provides support to women with complex needs and addresses issues around childcare and reunification with families. ¹⁶⁰ Through intensive case management and peer-led support, Columbia House works to build pro-social networks of support for women offenders re-entering the community.

For best practice in employment support for women offenders leaving prison see the Elizabeth Fry Society of Greater Vancouver, Asphalt Gals Recycling Ltd program. Asphalt Gals is a social enterprise started in 2011 that works in collaboration with the roofing sector, employing female ex-prisoners to clean up roofing companies’ job sites. Identifying a gap in the market, this innovative programme provides women ex-offenders with a living wage while they gain job training and marketable skills, including team work and leadership skills. ¹⁶¹

Resettlement programmes in Australia

Melbourne Citymission, Victoria
[See also mothers and children; substance use; re-entry; black and ethnic minority women]
The Melbourne Citymission is the largest provider of women’s prison services in Victoria. Providing support to women both in prison and on their release, the Citymission has established gender-specific re-entry programmes for women. It is an unusual programme in that women can self-refer as well as be referred both prior to or following release. Working in collaboration with other NGOs and the Victorian government, the Melbourne City Mission provides three re-entry programmes for women offenders developed following the Better Pathways strategy: the Support for Women Exiting Prison programme (SWEP), the Women’s Integrated Support Programme (WISP), and the Women 4 Work programme (W4W).

The Support for Women Exiting Prison programme (SWEP) was established in 1998 and provides pre and post release support services, including short term case management and counselling. SWEP case workers address issues such as housing, reunification with children and families, and substance use. SWEP provides support to women who have left prison and are residing in the Citymission-run secure accommodation, Cairnlea. Alongside housing and family support, SWEP provides a recreational programme for women that tackles social isolation: Women About offers creative activities for the women and their families which are designed to facilitate community integration and prevent the isolation of women returning to their communities.

The Women 4 Work programme (W4W) provides pre and post release employment support for women leaving prison and those with community orders. Their employment service within women's prisons uses one-to-one meetings to encourage women to find jobs, work on CVs, practice for interviews, and meet potential employers. This programme has proven to be successful. For example, in 2009-10 none of the participants returned to prison, all remained in stable accommodation, and none of the children were taken into child protective services.

The Women Integrated Support Programme (WISP) is funded by Better Pathways as one of its three Intensive Transitional Support Programmes and is provided by the Melbourne Citymission and the Jesuit Social Services. WISP is a wraparound service, providing 8-12 weeks of pre release support and 12 months of post release support for women offenders re-entering the community. It is a voluntary programme, intended for women with multiple and complex needs who are at a high risk of reoffending. WISP provides intensive case management, identifying transitional needs and making plans for their post release life. They engage with community partners to resolve problems with housing, family reunification, substance use, education, employment, and general healthcare. Alongside its gender-specific focus, WISP ensures a culturally-sensitive programme delivery with specific services directed towards aboriginal women who are commonly ignored in offender planning.

Resettlement programmes in Australia

Guthrie House, New South Wales

[See also substance use; mothers and children; homelessness; community residential facilities]

Guthrie House opened in 1979 and is a long-established re-entry and residential substance use programme for women involved in the criminal justice system in New South Wales. Guthrie House is a hybrid service, offering both residential accommodation and a drug/alcohol rehabilitation programme. It accepts homeless women (and their children) at all stages of the criminal justice process, who are currently on pharmacotherapy treatment. Clients must be currently facing criminal charges; or on parole, bail, or court imposed bonds; or recently released from prison. At present, Guthrie House accommodates up to ten women with their pre-school age children. There is always a high demand for this service as it is the only one of its kind.

162 Melbourne Citymission, supporter Newsletter, spring 2009
164 Ibid
This community based facility focuses predominantly on securing permanent housing for the women who come through its doors. It provides a structured programme, individual case management, and group work. The structured programme typically lasts three months and provides services that include: residential accommodation; twenty-four hour support and supervision; substance use treatment; case management; and group work. Women can also access domestic violence services, parenting programmes, and life skills support. Following the structured programme, Guthrie House offers aftercare support which assists women in housing, employment, and substance use needs. To this date, all participants have gone into permanent and stable housing.

Resettlement programmes In the Netherlands

Ter Peel – 'Balancing the Future, a new Challenge', Development Partnership Programme

[See also mothers and children]

Recognising the diverse and complex needs of women re-entering the community the Ter Peel prison in Evertsoord implemented the Balancing the Future, a new Challenge, Development Partnership programme (DP). Ter Peel is one of three prisons for women offenders in the Netherlands. Ter Peel is divided into four sections: remand, a closed prison, a small section for high security prisoners, and a special section where women live with their children.

The DP programme is a comprehensive re-entry and resettlement programme for women prisoners. The programme participants are predominantly from a socially disadvantaged black and ethnic minority background, and approximately 15% have a debilitating physical disability that prevents them from working. The programme is managed by the Ministry of Justice female prisons and project agency, but is operated by a number of local NGOs. The DP programme takes a holistic approach, but has a specific focus on employment as Dutch statistics have shown that women prisoners are 70% less likely to reoffend when they have a job.

Prior to release the organisation Individualised Vocational Guidance provides re-entry support for women and conducts individual assessments that analyse issues such as housing, employment, health, and welfare. This work is supported by the organisation Delinquency and Society, a trusted organisation in the prison providing the prisoners with information about the work of Individualised Vocational Guidance.

The Individualised Vocational Guidance is followed by the Detention Trajectory Plan which is continually updated to ensure a throughcare approach in the transition from prison to release into the community. Three months before release, a job coach from the NGO Care Concept begins to work with women offenders to plan for employment following their release from prison. This involves engaging in employment-focused activities within the prison as well as looking for job opportunities once the prisoner is released. This support lasts between 6-12 months following a woman’s release from prison. Alongside employment concerns, the organisation Exodus assists in housing issues for women offenders and provides a community residential accommodation for up to nine months following release from prison. In addition, the NGO Humanitas offers support relating to child care and child reunification.

170 Guthrie House website http://guthriehouse.com/
The Programme has proved to be extremely successful. Approximately 50-70 women have been assisted every year since its inception in 2002 and it is estimated that only 7% of participants have reoffended, compared to the average reoffending rate in female offenders of 35%.  

This commitment to innovative through-care re-entry approaches is a European trend. For example, the Finnish criminal justice system provides two initiatives that are designed to assist prisoners in re-entering the community: open prisons and the Supervised Probationary Freedom programme. Open prisons, available for both female and male offenders, are institutions designed to provide a greater level of freedom and responsibility for prisoners. Inmates in open prisons must be free from all substances and promote responsible behaviour. Prisoners wear their own clothes, work both inside and outside the prison, and are able to take prison leave. Prisoners are paid for their work, and that salary goes towards their food and housing in prison, alongside their taxes. Open prisons are used as part of a gradual release scheme by which prisoners are slowly released back into their communities. Prisoners nearing the end of their sentence at a closed prison are able to move to an open prison for a short period before re-entering the community. This enables them to experience carefully-modulated levels of freedom before they are released back into society, ensuring that the re-entry process is not destabilised. This process is supported by the Supervised Probationary Freedom initiative. Beginning in Finland in 2006 the Supervised Probationary Freedom programme is an innovative gradual release scheme. Developed on a voluntary basis prisoners in the last six months of their sentence are able to exit prison and return to their communities. Following an individual sentence plan, prisoners return to their communities and engage in meaningful activities such as employment, education, or care-giving. These released prisoners retain some sanctions: they have a curfew, and must phone their probation officers at least once a day. Travelling parole units undertake sporadic drug tests to ensure that the prisoners remain substance free. This process has proved to be more successful than traditional parole structures, and is often used for women offenders as it enables them to return to their children and families.

173 For more information see Finnish Criminal Sanctions Agency, Open Prisons www.rikosseuraamus.fi/17488.htm  
174 For more information see Leena Mäkipää, ‘Enforcement and Applicability of Supervised Probationary Freedom in Finland’, National Research Institute Research Report No. 249, Helsinki 2010  
www.internationalpenalandpenitentiaryfoundation.org/Site/documents/Stavern/17_Stavern_Report%20Finland.pdf
Mothers and children

Research overview

Many women in the criminal justice system have children or young dependents. The impact of imprisonment is not felt by mothers alone: imprisoning mothers has a profoundly destructive impact on both women and their children. For example, Craig notes that children separated from their mothers by imprisonment face a range of developmental risks that can lead to academic problems and increased risk of delinquency.

Research has shown that women in prison who are separated from their children require targeted assistance to help them to maintain contact with their children. This includes: flexibility on approved numbers they can call, as children can be transferred to various foster homes; ability to work with legal services that specialise in child-reunification; the ability to copy cards and letters sent to children in order to prove contact. Across different jurisdictions there are now a range of programmes designed to maintain the bond between mothers and their children. For example, certain women’s prisons in Canada and Australia operate residence programmes that enable children to stay with their mothers at weekends or during school holidays, while Norway has a unique and rigorous policy of not imprisoning women with children.

Alongside flexible prison strategies, states have developed innovative community residential facilities, small units, and policies to maintain connections between women prisoners and their children. For example, prison nurseries in the United States have proved to be extremely successful in reducing reoffending in women offenders: women involved in the nursery at the Washington Corrections Center for Women have a 11-17% rate of reoffending compared to 40% in the general prison population. Community residential facilities and non custodial alternatives have been successful at reducing reoffending for women and the likelihood of future offending in their children. The NEF report found that the likelihood of children of women prisoners becoming NEET (Not in Education, Employment or Training) or becoming involved in crime is greatly reduced if women are given non-custodial sentences.

177 Judith Berman, ‘Women Offender Transition and Re-entry: Gender Responsive Approaches to Transitioning Women Offenders from Prison to the Community’, Center for Effective Public Policy for the National Institute of Corrections http://static.nicic.gov/Library/021815.pdf
Programmes for women with children - United States

Drew House New York
[See also community residential facilities; homelessness; substance use; mental health]
Drew House is a unique residential alternative to imprisonment for women and their families that was founded in New York in 2008, set up as an innovative partnership between the Brooklyn District Attorney’s Office and a local NGO Housing + Solutions who run the day-to-day programming of the facility.

Drew House offers a clear alternative to custody for women offenders, enabling them to fulfil their sentence requirements while living with their children in supported accommodation.182 Predominantly targeted to women who have experienced homelessness, mental health issues, and substance use, Drew House is rare in that women who have committed more serious or violent crimes are not automatically excluded.183

At present it houses up to five women and their families. Unlike most community residential facilities or half way houses women at Drew House live with their children in home-like non-institutional apartments for which they pay a significant proportion of the rent.184 Drew House is a non-secure setting, however the residents must abide by certain rules and procedures: women sign in and out of the house with cameras monitoring their movements, they must abide by a curfew, and accept mandatory drug checks.

In general, women reside at Drew House for a period of 12 to 24 months. Alongside residential support Drew House offers women offenders a range of gender-specific services. Using a strengths-based, pro-social, and gender-responsive case management practice Drew House staff assist women in seeking education, employment, and sustainable housing.185 Once the women in residence have completed their court mandates the charges against them are dismissed.186

The Drew House environment has become a positive place for the children of women offenders, with reports of improved academic performance alongside general wellbeing.187 Drew House has proven to be an extremely successful and cost-effective way of reducing reoffending in women offenders: it costs $34,000 a year to house a mother and two children, compared to $129,000 a year for imprisonment and foster care.188 Furthermore, at present, none of the women who have been involved in the programme have committed another crime.189

JusticeHome, New York
[See also substance use]
Following the success of Drew House, the Brooklyn District Attorney has piloted an alternative to imprisonment programme that will enable women offenders to stay with their families. JusticeHome is operated by the Women’s Prison Association (WPA) who have a long history of providing community based programmes for women and children involved in the criminal justice system in New York.

182 Drew House www.brooklynda.org/drew_house/drew_house.htm
185 Ibid
187 Ibid
JusticeHome enables women facing at least six months in prison to serve their sentence from home. They receive intensive supervision and community-based support while remaining in an environment in which they can maintain custody of their children and a stake in their community. JusticeHome includes: intake assessment and evaluation; court advocacy; referrals to specialized programs and services; and regular reports and drug checks. These justice-based services are supplemented by intensive work with the women in their homes, including: supervision, intensive home-based interventions; assessment of family structures and child wellbeing; parenting skills advice; and community-based support.

The WPA provides targeted support, including trauma-informed therapy and cognitive behavioural interventions for women with co-occurring mental health and substance use issues. At present JusticeHome has funding to support 45 women. Average participation in the programme is 6-8 months but the women involved are offered continued support following the completion of their sentence.

**Bedford Hills Correctional Facility, Mother and Baby Unit, New York**

**[See also small units]**

The Bedford Hills Correctional Facility for Women is the only maximum security prison for women in New York. It has the oldest prison nursery in the United States which opened in 1901, and is viewed as a best practice programme with numerous prison nurseries across the United States using it as a model. The Children’s Center at Bedford Hills is contracted out to the NGO Catholic Charities which operates the day-to-day running of the programmes and has a sound working relationship with the prison.

The Children’s Center provides a prenatal centre, a mother and infant nursery, an infant day care centre, a parenting centre, and a child advocacy office. The Center caters for up to 29 mother/child pairs: children can stay with their mothers up to the age of 12 months, or 18 months if the mother is paroled. A woman prisoner must give birth while in custody to qualify for the programme, and those who have committed arson or who have histories of child abuse are not able to participate. Prior to involvement in the nursery, several aspects of a woman’s past are examined including: the length of her sentence, the nature of her crime, any history of imprisonment, who is going to have custody of the child, and whether the mother has been involved with the child welfare system.

The Children’s Center provides diverse services to women and their children directed towards different stages of child development. The Mother and Infant nursery is a housing unit for mothers and their children, and pregnant women who are keeping their children in the nursery after the birth. When they are not undertaking programmes or treatment, mothers and children have access to a play area where they can safely interact with their children outside of their rooms. The Infant care centre provides day care services for mothers involved in the programme when they are attending programmes and other services. The Parenting Centre provides a literacy, education, and parenting programme (LEAP) to inmates which offers education, literacy and parenting classes. The Playroom is situated in the children’s visiting centre, and is available for mothers enrolled in the programme as well as mothers and their children who are not able to participate. Catholic Charities works in the

190 www.wpaonline.org/services/alternatives.htm
Playroom, providing parenting skills for children of all ages including special pre-teen and teen programmes, and assisting mothers to communicate with schools and foster agencies. Finally, the programme addresses release and post-release support for women and their children: a release advocate works with inmates on their release plans, while NGO Hour Children provides aftercare to mothers and their children, ensuring a through-care approach.194

ARC Center for Women & Children and the Maternal and Infant Program, Wisconsin

[See also community residential facilities; substance use]

ARC Community Services is an innovative gender-responsive and family oriented wraparound service for women offenders. Founded in Madison in 1976, ARC Community Services, Inc continues to be one of the most well respected programmes offering residential alternatives to women offenders with substance use issues in the United States.

The ARC Center for Women & Children is a community-based day treatment programme for women offenders with substance use issues, offering services designed for the children of the women involved. The treatment programme provides gender-specific substance use services beginning with case management prior to entry and ending in an aftercare programme. Services for children include an onsite child care facility for children up to the age of 5, child and family therapy, community child care placement, parenting skills classes, and substance use prevention services targeted at children. The services are gender-responsive and alive to the wellbeing needs of the children: providing substance use treatment within a family context, and supporting the bond between mothers and children; supporting women with childcare and custody barriers while they seek treatment; and provide parenting and family support to stop the cycle of abuse and neglect associated with female substance use. Alongside women specific and family-oriented substance use treatment, the Center provides case management; support with basic living needs such as food, shelter, and medical support; and assistance with employment.

The ARC Maternal & Infant Program is a long-established community-based residential programme for pregnant female offenders or mothers with children up to the age of one. In operation since 1993, this six month programme provides a safe and stable environment for women to bond with their children and develop parenting skills while they are on remand. Licenced by the State of Wisconsin as a twelve bed residential facility, the programme includes prenatal and postpartum care, parenting support, and referral to relevant services. In addition, the programme provides gender-specific services targeting areas such as substance use, employment and financial management, histories of trauma such as physical and sexual abuse, child reunification, cognitive interventions; and general medical assistance.195

194 Hour Children website http://hourchildren.org/
Programmes for women with children in Australia

The Childcare and Transport Subsidy Program, Victoria
In its Better Pathways strategy Corrections Victoria identified gaps in services for women offenders. Research showed that women were more likely to breach community supervision orders by failing to meet conditions of the order, rather than by reoffending. Many were unable to fully comply with their conditions because of competing primary carer responsibilities and transport difficulties.\(^\text{196}\) In response, Corrections Victoria implemented the Childcare and Transport Subsidy in 2006.

The Childcare and Transport Subsidy is an innovative service, designed to support women offenders with children and other dependents. Funded by Corrections Victoria in partnership with the Victorian Association for the Care and Resettlement of Offenders (VACRO) the Program provides practical financial support to women on supervised community-based orders.\(^\text{197}\) This enables them to take their children to and from school, and get to appointments. Since 2006, VACRO has provided more than 2000 subsidies to women offenders.\(^\text{198}\)

Programmes for women with children In New Zealand

Wellington, and Christchurch – Selfcare and Baby bonding Units, Auckland
[See also small units]
The three women’s prisons in New Zealand have special self care units where certain prisoners are eligible to live with their children under the age of nine months. New Zealand is unique in its approach to the children of imprisoned women: the New Zealand Mothers and Babies Amendment Act embedded the best interests of the child into Department of Corrections legislation.\(^\text{199}\)

The Auckland Region Women’s Corrections Facility (ARWCF) in Manukau, south Auckland has a specialist baby bonding unit where women prisoners have daily visits and can spend up to 12 hours a day with their babies. Women whose babies are aged under nine months and are being cared for in the community are permitted daily visits in secure and purpose-build facilities where they can bond with their child. The facility replicates a domestic setting with a bathroom, kitchen, and room for the baby to sleep. This unit enables women to maintain close and regular contact with their children, while simultaneously enabling the baby to bond with their caregiver in the community.\(^\text{200}\)

The ARWCF, alongside the Arohata prison in Wellington and the Christchurch Women’s prison, contain self-care units for eligible prisoners. Self-care units are residential style facilities designed for women prisoners nearing their release, giving them the opportunity to develop and practice skills for living independently after they leave prison. In certain cases women coming up to their release date are able to live in these self-care units with their baby.\(^\text{201}\)

196 Rosemary Sheehan, Gill McIvor, and Chris Trotter, (Eds) Working with Women Offenders in the Community, Taylor and Francis, 2011
197 Victorian Association for the Care and Resettlement of Offenders (VACRO) website www.vacro.org.au/SERVICES/PEOPLELEAVINGPRISON.aspx
Programmes for women with children in Germany

Preungsheim, Frankfurt
[See also small units]
Germany has implemented some innovative practices and programmes for women offenders with children. These include allowing women an annual 21 days leave to maintain contact with their children,\(^{202}\) and providing half-way houses where women can live with their children, working in the community while their children attend school.\(^{203}\)

The mother-child programme at Preungsheim, the maximum security prison for women in Frankfurt, is a highly regarded model for mothers in prison. The programme enables women to live with their children in a closed mother-child house in the prison grounds. High-security prisoners can live with their children up until the age of 3, and lower-security prisoners up to the age of 5. Babies stay with their mothers during the day but older children go to nurseries in the community or stay in the open mother child house which is situated closer to the neighbouring community. Mothers who are deemed lower-security live with their children in the open mother-child house. During the day the children are cared for by professional child care workers while the mothers work in the house or have work placements in the local community.\(^{204}\)

Preungsheim views parenting as a form of employment and consequently women who are eligible for work release are able to leave the prison on a daily basis to support their families. A work-release prisoner rises at 5am and takes public transport to her home every weekday morning to get the children ready for school. Once she has taken and collected the children from school the mother is responsible for caring for the children, cooking and cleaning, and organising doctor and school appointments. After she has put the children to bed she leaves them in the care of another family member or responsible adult and returns to the prison for the night. If women need to leave their homes for more than an hour during the day they have to call the prison for permission. This programme enables women to maintain connection with their children and retain responsibility for their welfare while they serve their sentence.\(^{205}\)

Frondenberg North Rhine-Westphalia
[See also small units]
The prison runs a well-regarded open unit for 16 women with children up to the age of 6. Mothers live with their children in self contained flats. This facility does not resemble a prison from the outside as it has no bars on the windows or fences. The prison is designed to be as open as possible and many of the children involved have reported not knowing they were in prison. Prison staff do not wear uniform as they want the environment to be as normal and unthreatening as possible. They endeavour to support and strengthen the mother–child relationship and reinforce the mother’s authority.\(^{206}\)

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204 G. Larry Mays and Latham Thomas Winfree, Essentials of Corrections, (Wadsworth: California, 2009)
www.thefreelibrary.com/MOTHERS+PRISON.-a079589793
206 International Centre for Prison Studies, International profile of women’s prisons, April 2008,
Women imprisoned at Frodenberg have commonly been imprisoned for low level offences such as theft or fraud. If they are deemed safe and responsible, mothers are able to go outside and play with their children, take day trips, and have the use of vacation days where they can leave the prison alone.\(^{207}\) The mother child unit is small but has been shown to be extremely successful: women participants have a significantly lower rate of reoffending than women who are not housed with their children.\(^{208}\)

**Half-way Houses**
[See also community residential alternatives;]
In response to the increasing number of mothers in prison, Germany introduced community based accommodation or ‘half-way houses’ for many women offenders. Mothers and children live together in these houses.\(^{209}\) The women are given a curfew and must stay within the house in the evenings and overnight but during the day they access prison training, education, and support while their children attend nursery or school.\(^{210}\) This has been recognised as an innovative approach that minimises the harm of a mother’s imprisonment on children while ensuring that women serve their sentence.\(^{211}\)

**Programmes for women with children in the Netherlands**

**Evertsoord – Better Start and the Ter Peel mother child unit**
In recent years the Dutch government has come to recognise the intergenerational impact of imprisonment on the children of female offenders. In response, in 2007 the Ministry of Justice commissioned the University of Utrecht to undertake the Better Start project which examined educational support in months preceding and following the release from prison of women with children aged 2 to 10. Preliminary results have shown a reduction in reoffending by the women participants, and a reduced risk of reoffending and problematic behaviour by their children in the future.\(^{212}\)

The mother child unit at the Ter Peel prison for women is internationally recognised as a strong and successful model. Ter Peel in Evertsoord is one of three prisons for women offenders in the Netherlands. It is divided into four sections: remand, a closed prison, a small section for high security prisoners, and a special section where women live with their children. It is the largest women’s prison with up to 250 prisoners. In most prisons and detention centres women can have their children with them up to the age of nine months. In Ter Peel, children can stay with their mothers up to the age of 4.\(^{213}\)

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210 Ibid


Mental health and women offenders

Research overview

A large proportion of women involved in the criminal justice system have mental health issues, ranging from depression and eating disorders to Post Traumatic Stress Disorder (PTSD). Studies have indicated that women offenders are five times more likely to experience mental health issues than women in the general population, and are at significantly greater risk of mental health problems than their male counterparts. Women in the criminal justice system are more likely than men to report histories of sexual, physical, or emotional abuse; research has shown that there are strong links between childhood abuse and adult mental health issues.

Mental health problems are not only a cause of criminal behaviour but also a common response to a woman’s involvement in the criminal justice system. Self-harming is a widespread practice in most women’s prisons. Studies in the UK have found that women in prison are ten times more likely than men in prison to self harm and account for 28% of all self-harm in prison despite comprising only 5% of the prison population.

Services and programmes that address the mental health care of women involved in the criminal justice system divide into two groups: those designed to divert women with mental health issues out of the criminal justice system, and those intended to support women with mental health issues as they go through the system.

Mental health and women offenders in United States

In recent years a number of innovative programmes have developed for women with mental health needs in the criminal justice system in the US. For example, the Albany County Rapid Assessment, Intervention and Linkage Program in New York that provides intensive case management and treatment support for women offenders with mental health issues and the Community Mental Health Affiliates - Women’s Jail Diversion Program in Connecticut which provides intensive outreach, treatment, and child care support services for women offenders with mental health issues.

The San Francisco Behavioural Health Court’s Women’s Integrated Skills and Health (WISH) Project, California

The San Francisco Behavioural Health Court is one of the renowned Mental Health Courts in the United States. It uses a continuum of care or a ‘throughcare’ approach, supporting people with mental health issues at every stage of the criminal justice process. The Court has reported reduced recidivism rates, with Court participants 26% less likely to commit another crime, and 55% as less
likely to commit a new violent crime, than in the general criminal justice population. The Behavioural Health Court developed the Women’s Integrated Skills and Health (WISH) Project. The WISH project is designed to divert women offenders with co-occurring mental health issues from prison to mental health treatment services. At present, the Court is one of the only mental health courts to have developed gender-specific treatment.

Massachusetts Correctional Institution, Framingham

[See also small units]

MCI Framingham is a medium level security prison for women in Massachusetts. The facility houses women at various stages of the criminal justice process: women awaiting trial, women convicted in county courts, and women sentenced in state courts. In recent years MCI Framingham has moved towards a trauma-informed approach, with a peer support system and an Intensive Treatment Unit for women with mental health issues.

The Peer Mentoring programme developed from a growing awareness that custodial staff were increasingly referring women to mental health crisis clinicians for non-crisis situations. In response to this growing problem staff at MCI Framingham interviewed prisoners and selected 30 women, predominantly from the long term or lifer prison population, to train as peer supporters. The National Center for Trauma Informed Care trained the peer mentors, using the guide they developed titled Engaging Women in Trauma-Informed Peer Support: A Guidebook. Clinical staff meet the peer mentors on a weekly basis to provide ongoing support. The system works as follows: women put in a slip to request a meeting with a peer mentor. A mental health clinician assesses the slips and assigns appropriate peer mentors. In the general population prisoners have one-on-one sessions with peer mentors and drop in to “office hour” sessions to talk to the peer mentor on duty. In the Intensive Treatment Unit, prisoners can participate in groups led by two peer mentors under the supervision of a mental health clinician.

The Intensive Treatment Unit (ITU) was opened in April 2012. It is designed for women with mental health needs, such as those on suicide watch or facing crisis intervention, and offers a phased system of management for their care. The ITU emerged from an increasing awareness of the different needs and risks of prisoners with mental health needs and prisoners with substance use issues: MCI Framingham found it necessary to separate incoming prisoners with different requirements.

Management at MCI Framingham have acknowledged the importance of training staff in trauma-informed strategies, and ensuring that staff are accepting of and actively involved in the transmission of trauma-informed services. Clinical staff provide a range of services to women living in the ITU. For example, they provide treatment groups within the Unit, meet daily with each prisoner to review her behaviour and progress, and follow up assessments by assigning women to one of four phases: prisoners who are on one-to-one watch; prisoners on a 15 minute watch; prisoners who are allowed to join the community for meals, exercise and various structured and unstructured activities; and prisoners who can leave the unit at intervals in order to attend programmes in the general prison population. Staff have found that the use of incentive plans rather than formal disciplinary procedures have been more effective in changing problematic behaviours.

222 National Association of State Mental Health Program Directors, www.nasmhpd.org/publications/engagingWomen.aspx
223 National Resource Center on Justice Involved Women, MCI Framingham http://cjinvolvedwomen.org/innovator-massachusetts-correctional-institution-at-framingham
224 Ibid
Since its opening the ITU has made significant positive changes. There has been a 15% reduction in self-harming behaviour; a 33% reduction in days women spent on constant mental watch; and a 60% decrease in suicide attempts. In addition, MCI Framingham has reported a significant decrease in prisoner-on-staff and prisoner-on-prisoner assaults and the use of segregation.

**Mental health and women offenders in Canada**

**Structured Living Environments, Federal Prisons**

[See also small units]

The Correctional Service of Canada (CSC) has increasingly come to recognise the specific needs of women offenders with mental health issues. The proportion of women offenders with mental health issues has risen significantly in recent years, from 13% in 1996/7 to 29% in 2008/9. In response the CSC implemented a range of initiatives: Structured Living Environments (discussed below), Mental health teams and/or Coordinated Care Committees in every region to coordinate services for women offenders; an Intensive Health Program at the Regional Psychiatric Centre; and multi-agency coordination with psychiatric hospitals and emergency services.

Operating in all four federal prisons for women in Canada, Structured Living Environments (SLEs) are separate small custodial units for lower risk women prisoners with mental health issues. SLEs contain living spaces, programme spaces, and places built for therapeutic quiet. They are staffed by an inter-disciplinary team who provide intensive residential and mental health support: Primary Workers who facilitate group work; dedicated Behavioural Counsellors who facilitate the Dialectical Behaviour Therapy and work with women individually; and a Community integration worker who develops individualised plans to help transition women back into their communities.

SLEs utilise two distinct programme models: the first is an intensive psychosocial rehabilitation model and the second is an intensive dialectical behaviour therapy model. This dual model recognises the diverse needs of women with mental health issues. For example, women with learning disabilities can be adversely affected by living with women with severe or volatile mental health issues.

**SLEs are founded on five principles:**

1. **Wellness** – ensuring that women develop their own personal goals through holistic support that focuses on wellbeing rather than pathology.

2. **Access** – SLEs provide access to intensive mental health services in a women-centred environment that uses timely interventions to reduce harmful crisis situations.

3. **Women-centred** – SLEs take a women-centred approach that reflect an understanding of trauma and abuse in the lives of many women in the criminal justice system.

4. **Client Participation** – client participation is central to SLEs, reducing the more troubling effects of institutionalisation, and ensuring that women are developing their personal goals.

5. **Least Restrictive Intervention** – SLEs work under the principle of using the least intensive forms of intervention with the lowest level of security as possible.
Structured Living Environments have been shown to be successful in offering targeted and sustainable support to women with mental health issues in the criminal justice system. For example, an evaluation of the use of Dialectical Behaviour Therapy in Structured Living Environments found that women involved in the programme reported fewer incidents of self-harm and increased feelings of well-being. Moreover, rates of reoffending for women in Structured Living Environments was significantly lower than women who had not been involved in the programme.227

**Mental health and women offenders in Australia**

**Silverwater Women’s Correctional Centre, New South Wales**

*See also small units*

The Silverwater Women’s Correctional Centre is the main women’s prison in New South Wales, and has the following services for women with mental health issues:

- **The Mental Health Screening Unit** – This is a purpose-built unit designed to assess, treat, and manage women offenders with mental health issues. It has 24 hour custodial supervision, and a multi-disciplinary team who also work with the Justice Health Courts Liaison Service.

- **The Mum Shirl Unit** – The Mum Shirl is a specialised unit for women offenders with complex psychological, personality, and behavioural issues: it is a 19 bed unit that contains an 8 bed crisis unit with observation cells, stimulus deprived environments and an 11 bed unit for long-term care of women who are deemed both high risk and high need, often those with Borderline Personality Disorder. Through intensive case management, post-release planning and placement the Unit aims to integrate women into mainstream services.

- **The Mental Health Step Down Unit** – The Mental Health Step Down Unit is a purpose-built 10 bed unit designed to accommodate women offenders in order to assist them with their mental health management plans. This Unit is staffed by custodial staff of New South Wales.

- **The Personality and Behaviour Disorders Unit** – this is a mobile team which provides training to custodial centres treating women with mental health issues. The Personality and Behaviour Disorders Unit develops individualised intervention plans to ensure behavioural stabilisation and enable women to return to less restrictive housing. The Unit focuses in particular on Borderline Personality Disorder, and trains staff on this area. The work of the Unit, alongside the Mum Shirl Unit, has significantly reduced the number of incidents of self harm and violence, and reduced a reliance on restrictive housing for women offenders with mental health issues.228

**Miruma, New South Wales**

*See also substance use issues; diversion; community residential facilities; re-entry*

Recognising the specific risks and needs of women offenders with mental health and substance use issues, the Corrective Services of New South Wales developed two Co-existing Disorder Residential Centres: Miruma and Biyani. These Centres function as residential diversion programmes for women offenders with mental health and substance use issues. They are designed to support women to adjust to non-criminal life in their communities through facilitating women into rehabilitation programmes, housing, and substance use services.

228 Department of Attorney General and Justice, Annual Report 2011-12
Miruma is an 11 bed residential diversion programme for women offenders with mental health and substance use issues. Miruma offers intensive case management and supervision, and works with a range of community organisations to facilitate each woman’s re-entry into the community. With the assistance of organisations such as Housing NSW and Centrelink, Miruma promotes general life skills including health care, financial management, and nutrition. Since opening in April 2011 Miruma has held 53 women and there is a 60% success rate for this group remaining in the community for two years.\(^{229}\)

**Biyani, New South Wales**

*See also diversion; substance use; community residential facilities; re-entry*

Biyani Cottage opened in 1994 as a community based residential alternative to custody for women offenders with mental health needs or mild intellectual disabilities and substance use problems. It is a therapeutic alternative that forms a part of the State’s commitment to reducing the number of women with mental health issues or intellectual disabilities in prison.\(^{230}\) Biyani aims to stabilise the mental health and substance use problems faced by women offenders, and enable them to access longer-term rehabilitative programmes and support in the community.\(^{231}\)

Forming part of the State's *Throughcare* initiative, Biyani accepts women from all stages of the criminal justice system. It offers a diversion programme for women at the pre-sentence stage; women who are on remand and are likely to receive a custodial sentence; and women who would be returned to prison following breach of parole. With a maximum capacity of 8 women Biyani is a 2-6 month long programme that endeavours to establish positive links with community services in order to enable independent community living.\(^{232}\)

During their stay at Biyani women are supervised by Community Offender Services who support women both during their stay and following their entry to external rehabilitation programmes. Residents engage in case management and case planning throughout their time at Biyani. Alongside offering life skills programmes, Biyani helps women find support programmes based in the community that address issues such as substance use and general health.\(^{233}\)

Biyani is based upon international best practice guidelines. It is gender-specific, with culturally-sensitive programmes for Aboriginal women and Torres Strait Islanders. The programme operates under the least restrictive corrective environment possible which reflects their commitment to upholding the relationship between women and their children. Biyani enables phone calls and visits to enable sustained contact between mothers and their children.\(^{234}\)


\(^{233}\) Ibid

Substance use

Research overview

A corollary to the high number of women in prison for drug-related crimes is the high rate of substance use amongst women involved in the criminal justice system. Studies have shown that the profiles of women in the criminal justice system and profiles of women who use drugs frequently intersect: they are often poor women from socially disadvantaged and ethnic minority backgrounds, with few employment opportunities and limited educational experience.235

In comparison to their male counterparts, women with substance use problems commonly have histories of trauma, long-term experiences of physical and sexual abuse, and a range of mental health issues. Furthermore, women are often introduced to drugs through their male partners and continue to use them in order to perpetuate a relationship.236 These issues are compounded when they enter the criminal justice system.237

In recent years there has been recognition of the need to develop gender-specific harm reduction-based substance use programmes for women involved in the criminal justice system.238 Women-only services that address the root causes of women’s substance use are necessary as mixed settings and non-gender specific services do not enable women to do this in safe and supportive ways.239 For example, the US-based programmes Helping Women Recover, Beyond Trauma, and Seeking Safety developed by the renowned expert Stephanie Covington have proved to be best practice in gender-specific substance use programmes for women. A 2010 evaluation of these programmes found that of the 115 women participating in the study those that had undertaken Helping Women Recover and Beyond Trauma had reduced rates of drug use and were significantly less likely to return to prison after one year than those who had not participated in the programmes.240 Alongside substance use programmes for women in the criminal justice system there are a growing number of initiatives designed for women offenders. For example, drug courts have developed in the United States in recent years and increasingly are developing a gender focus.

235 Briefing to the Committee on the Elimination of Discrimination Against Women on the Sixth periodic report of Italy: Drug dependence, HIV/AIDS and the criminal justice system, Articles 2 and 12 of the Convention, Submitted jointly by Itaca Association, Associazione Antigone, Associazione Nazionale Giuristi Democratici, Canadian HIV/AIDS Legal Network and Harm Reduction International June 2011
www.ohchr.org/eng/ bodies/cedaw/docs/ngos/Joint_NGO_submission_for_the_session_Italy_CEDAW49.pdf

236 Phyllis Modley and Rachelle Giguere, Re-entry Considerations for Women Offenders, Coaching Packet, Center for Effective Public Policy, 2010 www.cepp.com/documents/Re-entry%20Considerations%20for%20Women.pdf


238 Harm Reduction International defines Harm Reduction as ‘policies, programmes and practices that aim to reduce the harms associated with the use of psychoactive drugs in people unable or unwilling to stop.’ What is Harm Reduction? A position statement from the International, Harm Reduction Association, www.ihra.net/files/2010/08/10/Briefing_What_is_HR_English.pdf


Substance use programmes in United States

ARC Community Services Inc Wisconsin

[See also mother and children; re-entry; mental health; community residential facilities]

Founded in Madison in 1976, ARC Community Services, Inc continues to be one of the most well respected programmes offering residential alternatives to women offenders with substance use issues in the United States. ARC, Inc provides a range of services to women involved in the criminal justice system: it uses a gender-specific and strengths-based approach and is unusual in that it provides family-oriented treatment programmes.

ARC, Inc has implemented a range of programmes for women and their children, including Smart Start which aims to reduce Fetal Alcohol Spectrum Disorder; Fond du Lac Women’s & Children Day Treatment Services which provides a wraparound family oriented and gender-specific day treatment service for women with substance use issues; and the ARC Integrated AODA Work Services for Women & their Families which functions as a multi-disciplinary, family-oriented, and strengths-based case management programme that recognises the need for gender-specific and culturally-sensitive services for women offenders. Finally, ARC Healthy Beginnings is a day treatment programme that has been in operation since 1994 and works specifically with pregnant and postpartum women who are involved in the criminal justice system and have a history of licit and illicit substance use. Women attend the day treatment programme for four months before being transferred to a part time aftercare programme. Services include inter alia gender-specific substance use treatment, child care for children up to the age of 5, parenting skills and support, case management to address employment and educational issues, mental health care services, and step-down aftercare services.

In addition ARC, Inc operates a stand-alone case management unit and numerous outpatient and residential alternatives for women offenders with substance use issues, each with varying degrees of treatment and support:

The ARC TAP Case Management Unit for Women provides focused case management services for female offenders who engage in licit and illicit substance use. The Unit functions as part of the diversion programme to divert women with substance use issues from the criminal justice system. They offer intensive individual case management alongside coordination of external services, and group cognitive intervention sessions.241

Opening in 1985 ARC House is a four-month residential programme for women offenders with substance use issues. It houses 15 women offenders who have been assessed as having significant alcohol and substance use problems. ARC House provides substance use-oriented education and counselling for women offenders alongside intensive gender-specific case management that supports women to find educational, employment, and housing security. In addition, the House offers a range of gender-specific services including trauma-informed programmes, parenting and family reunification support, and health services.

241 ARC Community Services Inc http://arccommserv.com/programs.html#ARC%20TAP
**Demeter House at Phoenix House, Virginia**

[See also community residential facilities; mothers and children; mental health]

Demeter House functions under the auspices of Phoenix House, the United States’ leading non-government provider of substance use services. When it opened in 1989 it was one of the first residential treatment centres to provide gender-specific programmes for pregnant and postpartum women offenders in the United States. The residential facility typically houses up to 20 women at any given time: women are either referred from prison or after developing problems during parole or probation. Participating women and children stay at the house for a flexible period of time: funding uncertainty has reduced the typical length of time from 6 months to a year to between 30-60 days.

Demeter House uses a cognitive behavioural 12-step approach that includes medication management and medication-assisted treatment. Residents follow individualised treatment plans and engage in individual, family, and group counselling. All programme elements are designed around gender-specific trauma-informed methodologies that address the root causes of substance use in women. Demeter House also provides mental health and general medical assistance, alongside a range of prenatal and postnatal programmes: older children are looked after on-site while pregnant women receive treatment and mothers with young babies receive all necessary care. After women have left the residential programme they continue to receive aftercare support and staff at Demeter House attempt to place women in residential units or half-way houses.

Demeter House has proven to be successful in reducing reoffending. Studies have indicated that 73% of participants have not reoffended or used drugs in the three months after leaving the programme. Data from 2012 showed that the programme completion rate was 65%, compared to the national average of 54%.

**Centre for Community Alternatives, Crossroads for Women Programme, New York**

[See also mental health; case management]

The Centre for Community Alternatives (CCA) in New York has established a number of programmes for women involved in the criminal justice system. The CCA's Crossroads programme is a day treatment service for women with substance use issues. Renowned as an innovative best practice model, it is a holistic and gender-specific service that functions as an alternative to imprisonment for women offenders in New York state.

Women participants are referred to Crossroads by lawyers, judges, and parole officers. Crossroads provides regular reports to the court or parole board, detailing each woman’s treatment progress, and advocating for alternative sanctions. The Crossroads programme lasts from 6-12 months, and includes three phases of treatment: assessment and stabilisation, treatment, and community transition into aftercare. Women at Crossroads are offered a range of services including: intensive case management involving one-to-one counselling, Individualised Treatment Plans, and a comprehensive after-care planning component; group services targeting specific issues such as parenting, domestic violence, mental health and general medical care;

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242 Phoenix House website www.phoenixhouse.org/locations/virginia/demeter-house/
243 National Resource Centre of Justice Involved Women, Demeter House http://cjinvolvedwomen.org/innovators-demeter-house
244 National Resource Centre of Justice Involved Women, Newsletters http://cjinvolvedwomen.org/sites/all/Newsletters/NRCJIWApril2013Newsletter.html
245 National Resource Centre of Justice Involved Women, Demeter House http://cjinvolvedwomen.org/innovators-demeter-house
and employment issues. Crossroads also provides specialised treatment programmes for pregnant women and women with HIV. Crossroads is committed to the use of peer workers and employs recent Crossroads graduates to provide support to clients.247

Substance use programmes in Canada

The Women Offender Substance Abuse Programme (WOSAP)

[See also mental health; case management]

Implemented in 2003, the Women Offender Substance Abuse Programme (WOSAP) is a successful substance use treatment programme designed for women with varying levels of involvement with the criminal justice system. It is available in all Canadian women’s correctional institutions and is intended for women who are deemed to have a moderate to high need of substance use treatment.248

WOSAP is a holistic, multi-disciplinary, and community-oriented programme with distinct institutional and community phases.249 There are three institutional treatment modules – engagement and education, intensive therapeutic treatment, and Relapse Prevention and Maintenance – and the Community Relapse Prevention and Maintenance programme, the community aftercare component of the programme.250 WOSAP is unique in its approach in Canada: it is gender-specific and anchored in a broad theoretical framework including relational theory, harm reduction, and cognitive-behavioural therapy; it is a holistic programme, recognising the complex and co-occurring issues connected with substance use; it applies a continuum of care approach, ensuring a throughcare treatment intervention.

The Community Relapse Prevention and Maintenance programme (CRPM) has proved to be an extremely successful component of WOSAP. CRPM is offered to women who are on parole and consists of 20 weekly group sessions. Studies have shown that women are particularly vulnerable to substance use relapse in the first 1-2 weeks after release from prison so community aftercare treatment facilitators meet with women individually immediately following their release and prior to group sessions in order to increase the successful completion of the programme.251 However, there are no time limits to the programme and participants are able to undertake as many cycles of the 20 sessions as are deemed necessary. Participants develop individualised drug relapse prevention plans as well as engaging in group work that combines cognitive-behavioural treatment with life skills. There is a strong community focus: community building strategies include peer support and self-help groups.

The CRPM has proven to significantly reduce reoffending. Studies have shown that women who engaged in the programme had a 5% reoffending rate after one year; women who were not involved in the programme were more than ten times as likely to return to prison after one year following release. Furthermore, 6 months after release approximately one third of women who were not involved in the programme were returned to prison.252 WOSAP is a successful gender-specific substance use programme that is now in operation across Canada.

247 Centre for Community Alternative, Crossroads programme www.communityalternatives.org/programs/crossroadsWomen.html
249 In addition, community parole officers are encouraged to use the programme as a risk management tool.
252 Ibid
Substance use programmes in Australia

Jarrah House, New South Wales

[See also community residential facilities; mothers and children; mental health]

Started in 1987 Jarrah House was the first residential substance use treatment programme for women and their children in New South Wales. It is a highly respected gender-specific and holistic treatment programme that has been recognised by the UN as setting a benchmark for gender-responsive substance use treatment.253

Women are self-referred or referred to Jarrah House, and the centre has long-established connections with the courts and the Department of Community Services. Jarrah House provides a three-phase programme: first, women undertake a medically supervised withdrawal management programme (detoxification). Following detoxification they are enrolled in a short term 21 day rehabilitation programme which engages with issues of substance use, trauma, and mental health. This section involves group therapy using cognitive behavioural therapy and dialectical behavioural therapy. Finally, Jarrah House provides a discharge planning and follow-up service for women once they have left the programme: for example, Jarrah House operates an alumnus programme which offers continued support to ex-clients.

The child care and parenting services at Jarrah House are unique in Australia: children attending with their mothers are considered clients, monitored regularly, and situated in a structured and child-centred environment. Child care is offered seven days a week while mothers engage in substance use treatment.

Homelessness

Current research

Homelessness is both a cause and an outcome of women’s involvement in the criminal justice system. Many women become caught in a cycle of homelessness, victimisation, and involvement in the criminal justice system. Women can become homeless for a range of reasons including domestic violence, various forms of abuse, mental health and substance use problems, and involvement in criminal activity. Once they are homeless women are even more vulnerable to violence, exploitation, and victimisation. A Canadian study found that homeless women are more likely to have been abused, raped, and physically assaulted than the general population with one third of homeless women reporting experiences of severe violence while homeless.

There are numerous pathways into criminal behaviour for homeless women. Shoplifting or prostitution for example are often viewed as necessary for survival when living on the streets. Moreover, characteristics of homelessness such as sleeping, begging, or loitering are increasingly becoming criminalised. This has resulted in a rising number of homeless women entering the criminal justice system. A recent UK Ministry of Justice report found that prisoners who were homeless prior to custody were more likely to reoffend on release compared to those who were not previously homeless (79% compared to 47% in the first year, and 84% compared to 60% in the second year following release).

Many women offenders, not only those who were homeless prior to imprisonment, are vulnerable to homelessness on leaving prison. They require transitional housing alongside support to find longer term and sustainable living arrangements. Studies have shown that women offenders require a range of services to reduce their vulnerability to homelessness, including: affordable housing, adequate incomes, childcare, and support for substance use. In addition, peer support and communal living arrangements have been shown to be effective in transitioning women from prison to the community, preventing homelessness, and reducing reoffending.

www.stleonards.ca/sitefiles/H2H%20RESEARCH%20FINDINGS%20REPORT_Homes%20for%20the%20Hard%20to%20House_SLSC%202012.pdf
www.pacenterofexcellence.pitt.edu/documents/Justice_and_Injustice_UToronto.pdf
www.stleonards.ca/sitefiles/H2H%20RESEARCH%20FINDINGS%20REPORT_Homes%20for%20the%20Hard%20to%20House_SLSC%202012.pdf
Recognising the risks of homelessness for offenders leaving prison the Danish government has laid out plans to ensure that all municipalities have accommodation arranged for an offender before they are released from prison. Similarly, the Swedish government has developed half-way houses, controlled by the Prison and Probation Service, which provides accommodation for all individuals leaving prison while giving them support and helping them to access services.

The ‘Housing First’ approach has emerged as a best practice model in combatting chronic homelessness and associated offending behaviour. Developed in New York in the early 1990s, Housing First is predicated on the belief that vulnerable homeless people are more receptive to longer-term support once they have permanent or stable housing. Housing First strategy moves homeless people into affordable and permanent housing and then begins provision of other rehabilitative support activities. Housing First has four primary stages: Crisis Intervention and short-term stabilisation, in which individuals and families are helped to access emergency shelters; a screening, intake, and needs assessment, in which homeless individuals are assessed and action plans are developed; provision of housing, in which homeless individuals and families are assisted into stable accommodation; and provision of case management, in which now-housed individuals are helped with longer-term care plans and support. The Housing First strategy has been shown to have a 77% reduction in imprisonment rates and costs, and a 42% reduction in chronic homelessness.

Homelessness programmes in United States

Iyana House, New York

[See also mental health; substance use community residential facilities]

Opened in Manhattan in 2004, Iyana House is an innovative programme that provides housing and support for women offenders with a history of homelessness and severe mental health issues. It offers through-care support to women in prison, with a team that offers advice and support on transitioning back into their communities. Following their release from prison Iyana House provides housing alongside a wraparound service.

Iyana House contains 16 apartments, with community spaces for the women to share. Alongside a strict curfew, there is a dedicated parole officer in the building who has extensive training in mental health issues. The women are offered a range of services including intensive case management, vocational support, substance use support, an intensive psychiatric rehabilitative treatment programme, and a day-treatment programme. The annual cost for operation and services is approximately $12,900 per bed with funding from state and philanthropic organisations. As of January 2009 Iyana House had assisted 38 women.

264 Housing First, Ending family homelessness website www.beyonddshelter.org/aaa_initiatives/ending_homelessness.shtml
266 The Bridge website www.thebridgeteny.org/who-and-what/housing/specialized-housing/138-housing-for-women
Returning Home, Ohio

[See also substance use; mental health]

Returning Home was developed in five communities in Ohio as a pilot programme in 2007. It operates as a permanent supportive housing initiative for offenders who were homeless prior to imprisonment and are at risk of homelessness on their release. The programme is designed to address the specific needs of offenders who have experienced chronic homelessness alongside a disabling condition such as mental health issues, learning disabilities, or substance use. It serves male and female prisoners, the latter from the Ohio Reformatory for Women.

Women offenders on the programme were housed in Amethyst Inc, a supported housing programme in Columbus, Ohio which works as a partner of Returning Home Ohio offering emergency and permanent housing support for women with severe mental health issues and histories of homelessness. Amethyst Inc combines supported housing with substance use and mental health support for women and their families who can stay at the centre for an average of 23 months. The programme includes a Rapid Stabilisation Program, a transitional housing programme for homeless women and their families who require a safe and drug-free environment to respond to their substance use. Amethyst also provides permanent supportive housing through their 101 housing units situated across Columbus, Ohio. The apartments are fully furnished with on-site resident managers ensuring that women and their children receive all their necessary material needs as the women address their substance use issues. Amethyst has been functioning for over 25 years, and has won numerous awards for its gender specific work with homeless women and women offenders.

The Returning Home programme has been shown to significantly reduce recidivism rates, and reduce rates of imprisonment. Participants in the programme were 40% less likely to reoffend, with 60% less likely to return to prison. In addition, only a small number returned to emergency shelters. Most participants, exited supported housing and entered permanent accommodation.

Homelessness programmes in Canada

Elizabeth Fry, Toronto

Elizabeth Fry Toronto has offered day-to-day and residential support to women involved in the criminal justice system in the Toronto area since the 1970s. In 2006 they developed programmes to support criminalised homeless women and women leaving the prison system who are at risk of homelessness. The BEST Pre-employment Program offers strengths-based support to homeless women with a criminal record, assisting them with housing and employment issues. The Post Incarceration Housing Program supports homeless women who are released from prison by assisting them in finding affordable and permanent housing.

269 Ibid
271 Amethyst Inc website www.amethyst-inc.org/index.php/Homes
Homelessness programmes in Australia

**Transitional Housing Management - Corrections Housing Pathways Initiative, Victoria**

The Transitional Housing Management – Corrections Housing Pathways Initiative (THM-CHPI) was piloted in Victoria state in 2001. The THM-CHPI, through its participating organisation Women’s Housing Ltd, is a gender-specific multidisciplinary model that provides supported housing and assistance to women and men in the criminal justice system who have a history or risk of homelessness.\(^{274}\)

With a focus on reducing reoffending the THM-CHPI uses intervention strategies that address the prisoner’s criminogenic needs while simultaneously building their resources and assisting them into supported housing.\(^{275}\) Case managers develop individualised pre-release housing plans with offenders, connect offenders with appropriate services and assist them in a range of housing and support needs. An evaluation of the programme found that 27.1% of participants had reoffended compared to 45.9% of non-participating offenders. In addition, over a nine month period 16.7% of participants were returned to prison compared to 61.5% of non-participants.\(^{276}\)

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