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Executive Summary NJL #96-CE-VX-0012
Collaborative Development of Individual Discharge Planning for
Incarcerated Women (1/1/97-12/31/98, extended to 12/31/99)
December 31, 2000

1. Statement of the Problem

All women incarcerated in RI are brought to one prison facility, whose population in RIDOC is comparable to national statistics on women in the criminal justice system (e.g., Snell, 1994). In 1992, women in RI served an average of 6.76 months, and almost half have returned to prison within 3 years. To break the cycle of recidivism and improve the lives of the inmates and their families, the Rhode Island Department of Corrections (RIDOC) Women's Facility instituted an intensive discharge planning process, with a menu of interventions. The present project was funded to develop a collaborative partnership between the University of Rhode Island (URI) and RIDOC to evaluate this individual discharge planning.

2. Background

URI team members, representing a variety of disciplines and specializations, were: Kathryn Quina, principal investigator; Jody Brown, John Stevenson, Ann Varna Garis, Co-investigators; John Boulmetis, Leo Carroll, Maria Garrido, Consultants; Kimberly Mitchell, Cheryl Hevey, Jennifer Landry, Graduate Researchers. Jeffrey Renzi (Director of Planning) and Roberta Richman (Director of Women's Facilities) led the RIDOC team members.

The twelve programs offered to incarcerated women were developed by RIDOC staff or contracted from community agencies, largely on the basis of published literature and staff experience. Education and job training (EJT) programs were fairly typical for women's facilities, including GED courses, special education, basic job training, and work release. Substance abuse (SA) interventions included AA/NA meetings (although these were not consistently available), and an intensive 90-day holistic therapeutic community called Discovery run by a community based treatment center. Emotional and social (ES) needs were addressed in groups for survivors of sexual abuse and domestic violence; parenting classes; mental health counseling (only available to a few); and the Mentor program, which paired inmates with a woman from the community. Health (HL) programs were NIDA-funded programs focused on HIV-positive and at-risk women (Vigilante et al., 1999).

Our project adapted the Transtheoretical Model of Change approach (Prochaska, Norcross, & DiClemente, 1995) to examine whether knowing an individual's "readiness to change" illegal behaviors could inform discharge planning. In this model, utilized with other maladaptive behaviors such as smoking, individuals make smaller changes, moving through five stages, from "precontemplation" to "action," and ultimately "maintenance," sometimes relapsing along the way. Illegal behaviors are complex, and take place in contexts of economic and social constraints; nevertheless, Brown has applied this approach successfully with battered women making the decision to leave abusive husbands.

3. Objectives of this Project

We proposed to

- 1) Evaluate the impact of RIDOC interventions on recidivism.
- 2) Quantify outcomes of the discharge planning process;
- 3) Explore the usefulness of "readiness to change" approach;
- 4) Determine whether a simple assessment procedure could facilitate discharge planning, or whether increased information would be helpful; and
- 5) Establish an ongoing partnership for research and training between URI and RIDOC.

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4. Methodology

Institutional Review Board (IRB) approval was obtained for each stage of the research, and the Informed Consent form was worded to be understandable and appropriate. Triple coding was protected confidentiality, and names were not attached to data.

Three surveys were given: soon after sentencing (T1, n=234), within 2 weeks of release (T2, n=106), and 3 months after release (T3, n=45, of whom 21 were reincarcerated). The criterion for participation at T2-T3 was 2 - 18 months remaining to serve; thus our longitudinal sample included mostly women with short sentences. Other women were offered the opportunity to participate in the first survey, hence the T1 data are more representative. Upon completion of the third survey a participant was paid \$25 (if reincarcerated, she was paid after release). Generalizations from T3 data should be limited to the populations accessed -- women released after short sentences who were either at stable addresses or reincarcerated.

Most survey items were fifth grade reading level. Oral and Spanish versions were offered. Survey 1 covered background and previous experiences, perceived needs, psychosocial status, and readiness to change. Survey 2 focused on program participation, satisfaction, outcomes (readiness to change and confidence in life skills), and post-release needs. Survey 3 added questions about postrelease functioning and aftercare. From the RIDOC database, arrest histories were obtained for all T1 participants, and 6-month post-release incarcerations for 105 women who completed T2.

5. Meeting Project Objectives: Actions, Analyses, Results

Objective 1. Evaluate the impact of RIDOC interventions on recidivism.

Defining recidivism as "reincarcerated during the first 6 months post-release," logistic regression was used to contrast "recidivists" and "nonrecidivists" on age, education, program participation, and readiness for change (T2). Only age and number of previous incarcerations were significant predictors of recidivism, although ES and HL participation approached significance. Since initial problem levels were higher among women who sought help in programs, effects may be difficult to recognize. Furthermore, this analysis does not assess smaller changes women made.

T3 participants were grouped into "in" vs. "out" at 3 months post-release, and compared on all variables. Those who had been reincarcerated had experienced more childhood victimization; they reported more postrelease drug use, intimate partner violence, and stress, less support from family and friends, more temptations which prevented change, and fewer basic needs met. They were less likely to be from an ethnic minority group.

Objective 2: Quantify the outcomes of discharge planning.

Were women receiving the services they need? We confirmed a high level of needs, consistent with other research (e.g., Bloom, Chesney-Lind, & Owen, 1994; Fletcher, Shaver, & Moon, 1993). Almost 50% had not completed high school; 57% were unemployed at the time of arrest. Prior to incarceration 28% were using alcohol and 52% were using hard drugs several times a week. Prior abuse was rampant: as children, 47% had been sexually abused as children (40% by 3 or more abusers) and 58% were physically abused; 91% had been abused by their most recent husband or dating partner. 81% were mothers of dependent children; of these, about half were already involved with the state. Few ethnic differences of consequence to this analysis were observed.

Participation in programs was strong: 70% for EJT, 51% for SA, 71% for ES, and 24% for HL. Women best knew their needs for EJT -- those without education or training were more likely to participate. Proportionally fewer women reporting histories of substance abuse, domestic violence, or sexual assault felt that they needed treatment or participated in

the SA or ES programs. The most common reason for participating was a belief that it would help them after release. Perceived barriers to participation were: perceived lack of appropriateness of programs; perceived lack of need; and lack of trust or unwillingness to talk about personal issues. About 20% of the women felt the program they needed wasn't offered; personal counseling was most often requested. About 25% reported they were not incarcerated long enough to get involved with the programs.

Having basic needs met after release emerged as crucial. Prior to release 56% had a counselor or sponsor, 65% had substance abuse treatment, 34% had a mentor, and 23% had aftercare at the prison lined up for postrelease. On the other hand, 33% had no place to live, 46% had no supportive family, 58% no supportive friends, 66% no job or job interview, 68% no financial support, and 68% no medical care.

Does program participation lead to measurable outcomes? To assess the effects of participation, we chose to explore specific ways in which women's lives were changing. We developed two scales, based on interviews with inmates and program staff, both subsequently psychometrically assessed.

The Confidence in Life Skills Scale, developed from staff descriptions of program goals and objectives, assessed confidence that, upon release, the woman could get and keep a job, maintain healthy relationships, remain drug and alcohol problem-free, and stay out of trouble with the law. Women who had the greatest participation rates in EJT programs reported higher confidence that they could obtain and keep a job; greater participation in SA programs led to higher reports of confidence in avoiding substance abuse problems (as well as better ability to obtain and hold a job and to stay out of trouble with the law).

Items assessing the Transtheoretical Model of Change constructs -- stage of change, pros and cons of changing, and self-efficacy (temptations not to change and confidence in ability to resist temptations) -- were developed from intensive interviews with inmates about how they made changes in their lives, what changes they felt they needed to make, and what made changing hard for them. Factor analyses did not reveal the typical five "stages" of readiness to change. Rather, the analyses resulted in three stages: Precontemplation, Contemplation with Relapse Concerns, and Action. Scores on these 3 factors were cluster-analyzed, resulting in 5-6 staging cluster profiles that were remarkably consistent across all 3 survey time points: Precontemplation, Reluctance, Uninvolved, Decision-Making, Action, and Participation (at T3 these last two merged into one Action profile). Analyses at T3 showed that women with Action cluster profile remained out of prison longer following release than women with Precontemplation or Uninvolved profiles.

Greater program participation was associated with lower frequency of alcohol and drug use post-release, particularly for women who had participated in SA programs.

Objective 3: Explore the usefulness of a "readiness to change" approach for discharge planning.

Significant correlations were found between several Transtheoretical Construct measures (T1) and levels of program participation (T2): women were more likely to participate in interventions if they perceived fewer negatives ("cons") of changing their lives, foresaw fewer temptations that would prevent change, had more confidence in their ability to resist temptations, and were in higher in their level of readiness to change. At T3, reincarcerated women rated post-release temptations far higher than nonreincarcerated women. These data suggest that increased self-awareness about areas of resistance and temptations might help the inmate and her discharge planner select appropriate interventions, and that programming could be adjusted to the woman's profile (e.g., a precontemplator might be encouraged to recognize more reasons to change, while Decision-Making women could work on skills for resisting temptations). However, the "readiness for change" approach should not be used to determine whether a woman participates in programming, or is ready for release.

Objective 4: Determine whether a simple assessment procedure could facilitate discharge planning, or whether increased information would be helpful.

The present study did not find any measure which offered strong predictive power for program participation or successful personal change. However, discharge planning can be enhanced through a better understanding of an individual's background and psychosocial functioning. For example, we found:

- Very strong associations among all forms of abuse, from childhood through adulthood, suggesting that abuse issues across the lifespan need to be addressed.
 - Childhood and adult violence experiences and family substance abuse were associated with lower purpose and meaning in life, more avoidant/passive coping strategies, and greater adult substance use.
 - Abusive partners were notable among the women reincarcerated within 3 months.
- Given the lack of alternatives for these women, support for making changes inside and outside of prison, particularly to reduce reliance on an abusive partner, is essential.

Objective 5: Establish an ongoing partnership for research and training between URI and RIDOC.

A formal URI-RIDOC Partnership was established as a result of this project. However, the success of any professional relationship rests on relationships between individuals. Ten URI faculty and graduate researchers brought a range of backgrounds and interests to this project, and RIDOC administrators and program staff were actively involved in many phases of the research (except data collection and analyses). We developed continuing professional relationships, including joint conference presentations and plans for future collaborative research.

In the spring of 1997, the URI team offered an academic course on evaluation research, enrolling 21 undergraduate and graduate students. RIDOC officials spoke to classes about their work, and students toured the RIDOC facilities. Over the 3 years of the project, 30 undergraduate and 11 graduate students volunteers earned service learning experience and credits. One student interviewed other volunteers and wrote an award-winning honor's thesis about students' very positive experiences, which shattered myths and stereotypes about prisons and inmates, and led them to incorporate corrections into their future career plans.

Other collaborations evolved out of this project. For example, changes in the discharge planning process (involving a discharge planner earlier in the decision making process, making assignments more equitably) were made by the Director and staff after problem areas became evident during the development of our flowchart. Our graduate assistant created a database for the program staff which served their record-keeping needs as well as ours. URI's Institutional Review Board agreed to serve as RIDOC's research monitor; and members of our research team have served as (unpaid) research consultants, assisted in planning a regional conference on the links between research and policy, and offered joint workshops on topics of effective evaluation research design, assessing change, multicultural considerations, and ethical issues in research within prison systems.

6. Project Summary and Conclusions

Overall, the results of this research demonstrate that programs offered to incarcerated women are well attended and appear to produce some positive changes, such as increased confidence in skills and reduced substance use, particularly considering the seriousness of problems at entry. However, problems after release clearly can overwhelm changes made prior to release. Many women who were recidivists were generally unequipped to deal with the routine stress of daily life in the community and would require strong support postrelease. Supervised transition settings safe from violent partners, with opportunities to practice skills learned in prison, would be appropriate. There is also a high need for mental health services,

particularly around abuse issues. Certainly our data support what others have asserted: that the traditional approach of providing a bed, regular food and a chance to get outside briefly each day is not helpful in breaking the cycle of women's criminal behaviors.

The readiness to change approach can inform choices about programming, such as more emphasis on decision-making and skills for avoiding temptations. However, decisions about participation must not be based on one's "stage." Furthermore, the extraordinary levels of abuse, particularly partner abuse among women who recommit their offenses, demands consideration. Change may be impossible if a partner or society prevent her from putting her new skills into action.

The URI investigators brought to this partnership expertise in evaluation research and the Transtheoretical Model of Change; access to clinical and research psychologists; and ongoing collaborations in evaluation and other research. However, we feel we have gained far more than we have given. Each of us has expanded our awareness far beyond our previous work, and none of us -- or the students we teach and the professional colleagues we address in our work -- will ever be the same. We are continuing our collaboration, including a larger, more comprehensive review of the information gathered from this project in a book format.

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