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**DESIGN CONSIDERATIONS  
IN THE BUILDING  
OF WOMEN'S PRISONS**

Submitted to the National Institute of Corrections

by

Scarlett V. Carp  
Joyce A. Davis

(Technical Assistance Contract #89P003)

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Scarlett V. Carp and Joyce A. Davis  
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## INTRODUCTION

This document presents issues specific to the design of a correctional facility for women. As the female inmate population grows, the inadequacy of existing institutions for them has become a more pressing issue. There is a strong temptation to build facilities that duplicate men's prototype facilities--and replicate the inadequacies of those facilities--because such construction can be accomplished relatively quickly and economically. As one expert interviewed for this study put it, "There's a tendency to build male facilities without urinals and call them female facilities. That's not enough." If the experience of incarceration is to mean anything more than punishment and incapacitation, both the facilities themselves and the activities that go on within them must respond to those who will use them--the inmates.

This is particularly the case with women's institutions; it is the need for different management techniques and programming that characterizes a women's facility as unique, just as much as it is differences in design and features. Female offenders' roles as parents, their histories of abuse, their involvement with crime because of distorted perceptions of their relations with men, their low skill and education levels and poor work histories--all these characteristics need to be addressed programmatically. The well-designed facility will support these programs and encourage the practice of skills taught in them: self-sufficiency, improved relationships, responsible behavior. The physical environment can and does influence behavior by imposing its own set of expectations and limitations. A well-designed women's facility, therefore, will impose a set of expectations that support programming goals rather than contradict them.

This document is not intended to be exhaustive. Rather, its purpose is to identify design issues and heighten the awareness of correctional administrators who are contemplating the construction of a women's prison. It does not attempt to address the positives and negatives of co-correctional facilities or the effects of co-joining a women's and men's facility; the objective of the task at hand was to focus on design considerations for free-standing women's prisons.

The lack of information and research on this topic made this study both interesting and frustrating to conduct. Administrative staff in the facilities surveyed showed a great deal of interest in the project, as did others who were contacted for opinions and advice. Many of these individuals agreed that more information about the needs of incarcerated women, and the optimal way to provide them with an environment that is conducive to programming and rehabilitation, is desperately needed--particularly in light of the accelerating number of women who are being incarcerated. This report, then, may also be viewed as providing suggestions for areas of further research.

The primary research instrument used in this study was a telephone survey of seven women's institutions. This sample of institutions was selected to represent diverse characteristics; the only criteria for selection were that the facilities could not be co-correctional and must have undergone construction or renovation since 1980. The survey was completed by telephone interview and is described in more detail below.

This report contains the following sections:

- I. **Research Findings.** This section provides a brief literature review to establish a profile of the female offender, a review of recent litigation involving female offenders that may affect design, and a summary of relevant research on the relationship between environment and behavior. The primary source of information for this report was a survey of seven women's correctional facilities; the survey methodology is explained, and surveyed institutions are introduced, at the conclusion of this section.
- II. **The Planning Process.** This section presents an overview of the steps that should be taken in planning a women's facility and the issues that should be addressed.
- III. **Issues in Building Prisons for Women.** This section presents survey results and discusses the issues encountered in constructing and operating a women's facility. It does not attempt to "solve" all the problems or answer all the questions raised; rather, it delineates what should be present in a women's facility and what was present in the facilities surveyed. The section contains discussions of management options, design issues, programs, and services. Exemplary programs are also identified in some areas.
- IV. **Design Options.** The final section of the report offers some suggestions for concepts that can be employed in building a women's facility. Some innovative designs are presented, as well as discussions of design philosophy, the delivery system concept for providing programs and services, and cost containment measures.

## SECTION I: RESEARCH FINDINGS

### PROFILE OF THE FEMALE OFFENDER

This study was not intended to provide new data on the profile of the female offender; nevertheless, a review of literature was conducted to summarize existing research on the characteristics of incarcerated women. Much of the existing research is descriptive in nature and involves small, localized population samples. Research that is national in character is needed to supplement and update Glick and Neto's landmark 1977 study.

#### Who is the Female Offender?

On any given day, approximately 17,000 women are incarcerated in state or Federal prisons; they represent 4.4 percent of the population of those facilities. Most of these women were sentenced for property crimes or robbery (52%), murder or manslaughter (20 percent), or drug offenses (12 percent); about half of them are recidivists (Goetting, 1983; U.S. Dept. of Justice, 1988).

Black women account for slightly more than half of the female offender population (U.S. Dept. of Justice, 1988). The "typical" female offender is likely to be a young (under 30), Black, poorly educated (an average of tenth grade education or less), unemployed or low-skilled worker (Glick and Neto, 1977; Goetting, 1983; Wolfe, 1984). Over half of the women in prison have children (more exact estimates vary significantly); the mean number of minor children is 1.7 (Goetting, 1983).

The number of women in prison has doubled since the early 1970s (U.S. Dept. of Justice, 1988). Opinion is divided on why that has happened. Iacovetta (1978) and other theorists have argued that the women's liberation movement has led to women assuming more "masculine" roles and, therefore, that the crime rate among women has risen closer to the crime rate for men. Arguments have also been advanced that rising female criminality is due to decreasing opportunities for women, particularly working-class women, as the overall educational level of the labor force has risen (Williams, 1984). Studies have indicated that there is no great movement by women toward male-dominated crimes such as murder, weapons offenses, or burglary (U.S. General Accounting Office, 1979; Williams, 1984); in fact, between 1979 and 1984, the percentage of women incarcerated for violent crimes actually decreased 8 percent (U.S. Dept. of Justice, 1988). Consequently, the women's liberation movement cannot be said to have an obviously significant effect on either the crime rate or offense patterns among women. It may, however, have had an effect on the attitudes of the judges sentencing women (Kempinen, 1983); perhaps more women are being sentenced as attitudes about equality and sex roles change.

Between 1979 and 1984, the rate at which women were sentenced rose 60 percent (U.S. Dept. of Justice, 1988).

It should also be noted that the number of incarcerated women rose most sharply during the period when the percentage of the population between the ages of 18 and 30 (that is, the age of most incarcerated women) also dramatically increased. The number of male prisoners has also doubled since the early 1970s (U.S. Dept. of Justice, 1988). There are more women of the age at which most crimes are commonly committed, and more women are being sentenced for the crimes they commit.

If it is arguable that the women's liberation movement has given women more opportunity to commit crimes, it is even more dubious that women's liberation has affected the attitudes or characteristics of female criminals. Epperson (1982) found that educational level, IQ score, and personality profile information obtained on women admitted to an Iowa prison in 1960, 1970, and 1980 were remarkably similar. The female offender may commit crime out of economic necessity, but she still believes that men should be the primary support of the household (U.S. General Accounting Office, 1979). Very few female offenders have stable marriages or similar relationships; a pattern of short-term relationships or multiple marriages is very common (U.S. General Accounting Office, 1979), and almost all female offenders are the sole support of their children (Glick and Neto, 1977). A woman's crime is likely to have an economic motive, but that motive is much more often supporting children or being part of a male-female team than it is the independent "achievement" of crime. As Ginsburg puts it, "[T]here are no feminists in prison" (1981:54).

A significant number of female offenders come from backgrounds of poverty, neglect, and abuse (Ginsburg, 1981; U.S. General Accounting Office, 1979). They are likely to have a history of emotional problems linked with drug or alcohol abuse (Glick and Neto, 1977; Ramsey, 1980; U.S. General Accounting Office, 1979). Their physical health is generally poor (U.S. General Accounting Office, 1979). Consequently, they often arrive in prison frightened, ill, and unable to cope with the circumstances confronting them.

Women adapt to prison very differently than men. They are much less likely to engage in violence during incarceration. Instead, they seek to re-create (or, in some cases, to establish) the kinds of relationships they are most familiar with: family bonds. Women are much more likely than men to retain regular family contact by visit, phone, or mail (Goetting, 1983). Larson (1984) found that the fewer "outside" contacts a woman has--the greater her dependence on other inmates--the more likely she is to maintain a negative attitude toward the law. Women who participate most fully in the insular "prison culture" are most likely to think of themselves as criminals.



Certainly, one of the most striking characteristics of the female offender is her dependency. She usually arrives in prison with a long history of unmet needs, perhaps the most crucial of which is the need for independence. She wants to gain economic independence by acquiring better job skills (U.S. General Accounting Office, 1979); she admires women who can "look after their own" (Mahan, 1984). Unfortunately, the system in which she is incarcerated very often discourages her from attaining that goal.

### The Prison and the Prisoner

Feinman (1983) has discussed how the present prison environment and recent theories of female criminality reinforce the "traditional" female roles of wife, mother, and homemaker. She points out that most vocational programs available to female inmates concentrate on low-paying areas that are consistent with this traditional conception: sewing, cleaning, food service, beautician, etc. Moreover, the inmate is not prepared to face the challenges of returning to the outside world. Even if she is very successful in acquiring one of the skills offered to her, she may be unable to use it. Who will care for her children? How can she support herself on the wages she will earn? These issues very often go unaddressed in correctional programming. The idea that she will not have to face reality, that she can find someone to "take care of her" is thus reinforced. Even if attitudes toward women have changed, then, attitudes toward women offenders have not--or, at best, are changing at a much slower pace.

The culture of a women's prison often supports this traditional, dependent role as well. The tightly-structured prison environment deprives the woman of control over many basic decisions, such as where she will live (and with whom), what she will eat (and when) and how her day will be structured (Mahan, 1984:123). The pattern of re-creating family relationships also reinforces dependency.

Women in prison are most likely to be involved in some form of academic or vocational training and/or a work assignment in prison maintenance (food service, janitorial, laundry/dry cleaning, gardening) (U.S. Dept. of Justice, 1988). Given that the majority of available training programs emphasize "female" occupations, the inmate is likely to find it difficult to escape reinforcement of the idea that she should be a homemaker or low-skilled worker. The correctional environment becomes very much like the environment the woman left; often, she receives the same kind of job training that led to her being underemployed or unemployed in the first place, and her educational deficits are left unaddressed (U.S. General Accounting Office, 1979). In addition, the woman's feelings of powerlessness and inadequacy may be reinforced by

substance abuse and/or belonging to a minority group (Ramsey, 1980).

Sobel concludes that women's prisons "tend to be more punitive and punishment-oriented and to lack the opportunities for vocational, educational, social, and personal development that are present in many prisons for male offenders" (1979:108). This is due at least as much to programming emphasis as it is to actual quantity of programs available, although women's facilities lag far behind men's in that area as well.

The stress and anxiety of such an environment has been found to influence the health of female offenders. Sobel (1980) notes that female prisoners are more likely to take psychotropic medication or tranquilizers than male prisoners; she also notes that most women's facilities lack psychiatric and/or psychological services to provide treatment as well as medication. The female offender who is judged criminally insane is far less likely to receive treatment than her male counterpart.

Gynecological services have also been found to be inadequate in many facilities (Leonard, 1983; Sobel, 1980). This is of particular importance because a significant percentage of the female prison population is pregnant at admission (Leonard, 1983).

One of the female offender's most urgent concerns is for her children. Most offenders lived with their children prior to incarceration, and most expect to return to them upon release (Datesman, 1983). Usually, the children live with a relative while their mother is in prison, though Hunter (1983) reports that as many as one child in eight is placed in foster care. The offender is often worried about the loss of parental rights, which are sometimes terminated because the mother is judged "unfit" due to her incarceration (Leonard, 1983). Efforts made to keep the mother and children together, and to ensure both contact while in prison and a healthy environment upon release, vary widely from state to state (Sobel, 1980).

Most inmate mothers maintain frequent contact with their children through telephone calls or visits, though they sometimes worry about the effect the prison setting will have on visiting children (Datesman, 1983). Bresler (1983) adds that the frequency of contact is much higher for Black women prisoners. The children's caretaker may also worry about the setting and therefore be more reluctant to bring the child to visit. Conversely, a pleasant, non-threatening setting makes mothers more likely to encourage their children to visit (Datesman, 1983). While an increasing number of states are establishing overnight visits for children, very few states allow inmate mothers to keep their newborns in the facility; most must leave their babies when they leave the hospital (Leonard, 1983).

## LEGAL ISSUES<sup>1</sup>

It is not surprising that women have traditionally engaged in much less litigation aimed at improving their conditions in prison than men. Since the 1970s, however, the tide has begun to turn; an increasing number of female offenders are turning to the courts to help them gain improved conditions and programs while incarcerated. It should be remembered that litigation is usually a long, slow process that brings little change to daily prison life (Leonard, 1983; Schweber, 1985). Corrections officials are often slow in implementing court-ordered changes, and because corrections is largely a self-regulating field, there are few checks to see that changes are made (Leonard, 1983).

### Areas of Litigation

"Parity" is the primary legal issue that is being raised by courts as the adequacy of women's programs, services, and conditions of confinement are evaluated. Although relatively few cases have addressed this issue to date, experts agree that there is a trend toward increased litigation in this area--and that the results will have a tremendous impact on corrections administration and design.

The concept of "parity" is grounded in the Equal Protection clause of the Fourteenth Amendment. In Craig v. Boren<sup>2</sup> the U.S. Supreme Court concluded that to survive an equal protection challenge, classifications based on gender must serve important objectives and be substantially related to those objectives. Ironically, Boren asserted the rights of males who were subjected to a higher drinking age than females under an Oklahoma law. Many federal district courts have considered the parity issue in the corrections context; all have concluded that any differences between facilities and programs provided to men and women must be justified by important governmental objectives.

One of the first corrections cases that compared conditions for females to those of males was Mitchell v. Untreiner<sup>3</sup>. In that Florida jail case, the federal district court decided female inmates were denied equal protection because they were not provided with the same privileges as male inmates.

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<sup>1</sup>The authors gratefully acknowledge the contribution of Rod Miller to this section of the report.

<sup>2</sup>Craig v. Boren, 429 U.S. 190 (1976).

<sup>3</sup>Mitchell v. Untreiner, 421 F.Supp. 386 (N.D. Fla., 1976).

In Glover v. Johnson<sup>4</sup>, a federal court examined the constitutional adequacy of a women's correctional facility in Michigan. The district court concluded that women's programs must be "...substantially equivalent in substance if not form."

The court ordered sweeping improvements for women, requiring additional vocational programs, industries opportunities, and alternatives to incarceration. The court was not persuaded by the state's arguments that providing the same range--and quality--of programs was not feasible because of the smaller number of female inmates. When the state was slow to implement the court's order, extraordinary measures were ordered (639 F.Supp. 621). The court empowered a court-appointed administrator to design and implement educational programs for females "...on a parity with male inmates" and gave the administrator full power to contract for services. In effect, the court gave its agent a key to the state treasury.

According to William Collins, "...parity of programs for female inmates is an issue of potentially tremendous impact on correctional administration, yet one perplexingly slow to develop."<sup>5</sup> While it is clear that federal district courts demand good reasons for not providing parity of programs and facilities, the caselaw is still evolving. As courts require greater per capita expenditures for women inmates as a result of parity cases, Collins wonders if eventually male inmates will claim discrimination.

In Canterino v. Wilson<sup>6</sup>, the federal district court found that Kentucky's correctional facility for women provided disparate treatment, denying appropriate vocational, training and educational opportunities. The court also ordered the provision of exceptional legal facilities and assistance, which were greater than those provided to male inmates. When this was challenged by the state, the court affirmed the requirement, noting that past deficiencies denied women inmates the opportunity to gain experience and skills comparable to their male "writ-writer" counterparts.

Sometimes, parity requires the provision of additional settings and opportunities. In McMurry v. Phelps<sup>7</sup>, the court required arrangements for women to be housed at a less restrictive prison

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<sup>4</sup>Glover v. Johnson, 478 F.Supp. 1075 (E.D. Mich., 1979).

<sup>5</sup>Collins, William. Collins Correctional Law 1986. Washington, D.C.: 1986.

<sup>6</sup>Canterino v. Wilson, 644 F.Supp. 733 (W.D. Ky. 1986).

<sup>7</sup>McMurry v. Phelps, 633 F.Supp. 742 (W.D. La. 1982).

fair and for women to be allowed to attain trustee status. In Olvnick v. Taylor<sup>8</sup>, the court found that women were being denied equal protection because they were not given work release privileges. However, a federal district court noted that while certain hardships were imposed on District of Columbia female inmates because the District did not operate a women's facility, their constitutional rights were not violated.<sup>9</sup> In that case, the women were housed in a federal facility which was found to have adequate programs; its location in West Virginia was viewed as a hardship by the court.

The scope of equal protection issues is still being defined by the courts. To date, litigation concerning female prisoners has raised concerns with programs, services, medical care, visits, staffing, searches, exercise, cell occupancy, diet, religion, sanitation, failure to protect, and classification.

Courts have rejected arguments that women offenders cannot be provided with equal programs and facilities because of the smaller size of the female population and the greater cost associated with providing parity. In Bukhari v. Hutto<sup>10</sup>, a federal district court concluded that, while it was sympathetic to fiscal concerns, such "practical" considerations could not be used to justify operating a system that violates equal protection.

**Male Officers in Women's Facilities.** In recent years, courts have decided that an employee's right to equal employment opportunity is of greater concern than an inmate's right to privacy. As a result, courts have ordered female employees to be assigned throughout male facilities--even if assignment involves occasional views of male inmates in the nude.

As this caselaw becomes firmly rooted as the basis for correctional employee practices, it is increasingly common to find male employees assigned throughout female facilities. While it is possible to establish, to the courts' satisfaction, that certain posts (usually involving observing inmates in the nude) legitimately require "same sex" staff assignment, it is difficult to establish gender as a "bono fide occupational qualification" (BFOQ) in correctional facilities.

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<sup>8</sup>Solnick v. Taylor County, 643 F.Supp. 742 (W.D. La. 1982).

<sup>9</sup>Pitts v. Meese, 684 F.Supp. 303 (D. D.C. 1987).

<sup>10</sup>Bukhari v. Hutto, 487 F.Supp. 1162 (E.D. Vir. 1980).

In Edwards v. Department of Corrections<sup>11</sup>, a male employee successfully claimed that he had been denied a promotion at a women's prison because of his gender; the court found that a BFOQ could not be upheld in this case. In Torres v. Wisc. Dept. of Health and Social Services<sup>12</sup> a federal appeals court upheld the lower court finding that the state had not established a BFOQ and was discriminating against male employees at a women's maximum security prison.

**Conditions of Confinement.** Many cases have challenged the conditions of confinement for male inmates; these have been thoroughly analyzed in a recent research report prepared for the National Institute of Justice.<sup>13</sup> That research underscores the need to examine the "totality" of conditions of confinement, as the courts do in determining constitutional adequacy. The report provides specific instruments that will be used by the American Correctional Association to assess conditions of confinement. Research suggests that the following physical plant components are examined by the courts:

- **Facility Size**
- **Cells** (size, fixtures/furniture, light, number of occupants)
- **Dayrooms** (size, fixtures/furniture, light)
- **Support Areas** (exercise/recreation, education, programming, medical, visiting, work)
- **Environmental Conditions** (light, temperature, noise, ventilation, plumbing)

Through a careful analysis of nearly 100 decisions, the courts were found to systematically "connect" or consider the following operational issues when determining the adequacy of conditions of confinement:

- **Supervision** (type, frequency of health and welfare checks, use of closed circuit television, etc.)
- **Staffing** (staff levels, training)
- **Circulation/Movement**
- **Classification and Separation**
- **Security** (internal, external, equipment)

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<sup>11</sup>Edwards v. Department of Corrections, 615 F.Supp. 806 (D. Ala. 1985).

<sup>12</sup>Torres v. Wis. Dept. of Health and Social Services, 838 F.2d. 944 (7th Cir. 1988).

<sup>13</sup>Carter, Miller, and Wender. Research Findings and Recommendations: Conditions of Confinement Physical Plant Standards Revision, American Correctional Assn., 1989.

- **Operations** (sanitation, classification, safety, security, length of confinement)
- **Inmate Activities/Programs** (activities, programs, medical services, food services, idleness/plan of day, out-of-cell time, visiting, recreation)

**Prisoner Privacy.** While most of the cases that have challenged conditions of confinement have been brought against male facilities, the emerging trend demanding "parity" for women's conditions can be expected to visit these same issues in women's facilities.

### Conclusion

Court decisions provide ample justification for designing and operating women's facilities in new and creative ways. It is likely that this pressure will eventually create better conditions for female inmates, exceeding those provided for males.

Consider this scenario: (1) women sue to gain parity with men; (2) in achieving parity, women increasingly secure better facilities and programs than men; (3) males sue to gain parity with the "new" standard set by women. Such a "whipsaw" scenario actually occurred when female staff began to sue for access to jobs in men's facilities.

It may be encouraging to think that the conditions of confinement provided for women in coming years may become one of the most potent forces for improving conditions in men's prisons as well.

### DESIGN RESEARCH<sup>14</sup>

Very little research has been conducted specific to the needs of women in institutional settings. As the female prison population increases, new facilities will have to be built and old ones renovated. Work needs to be done to determine how facilities for women can best meet their needs and support beneficial activities and programs.

Ruback (1984) found that crowding affects female prisoners somewhat differently than male prisoners... Women tend to spend more time in their cells and to get more deeply involved with their roommates; therefore, living conditions may influence their behavior more strongly than it does men's. In Ruback's study, women who

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<sup>14</sup>The authors gratefully acknowledge the contribution of Richard Wener, Ph.D. to this section of the report.

perceived that they had more control over their physical environment (fewer roommates, ability to control lighting, a sense of private space) were generally happier with their environment than those who felt they had less control. Similarly, women who liked their living quarters reported less anxiety, depression, and stress than those who did not.

A similar study conducted with male inmates (Wener, 1980) found that some sense of ownership of space and satisfaction with surroundings contributed to fewer disciplinary reports, greater socialization, and less damage to the institution. Both studies indicated that overcrowding is directly related to disciplinary actions:

More than merely providing pleasant surroundings, however, the prison environment can encourage women to regain some of the control they feel they have lost. Research in design of mental health milieus indicates that use of natural materials, maximizing natural light, and adopting color schemes mixing neutral and "earth" tones can have significant positive effects on patients' socialization and level of anxiety (Davis, 1979). The designs of long-term psychiatric facilities and correctional facilities have many similarities; these points might be taken into account in building or renovating women's correctional facilities. In addition, allowing inmates to control lighting in their cells, using as much movable furniture as possible, and permitting flexibility in personal decoration may have positive effects on the inmates because such practices restore some degree of personal control and relieve feelings of frustration and helplessness (Lacy, 1981). It might also be possible to allow inmates some say in redecoration or repainting, particularly if they do the work themselves (Lacy, 1981). The sense of control might also be increased by encouraging offenders to attend to such tasks as personal laundry, fixing snacks or a meal on the unit, and maintaining the dayroom or other common area (Lupton, 1987). While such tasks do not provide an expanded or "non-traditional" role for the inmates, they do allow them to take some responsibility for their lives while incarcerated.

Space for parent/child visiting is also important. Contact visiting for mothers and children, and insuring that children have as positive an experience within the facility as possible, are crucial to the well-being of both parties (Lupton, 1987). Since women's facilities tend to be small, designing many multi-purpose or flexible spaces ensures that a variety of activities can be accomplished without specifically dedicated space.

Because women tend to use medical services more than male prisoners (Lupton, 1987), it is important to design this component to be accessible to all inmates. Particular attention should be paid to accommodating gynecological examinations and pre-natal care. The physiological differences of women lead to other design



# ORGANIZATIONAL CHART OF A UNIT MANAGEMENT CONCEPT

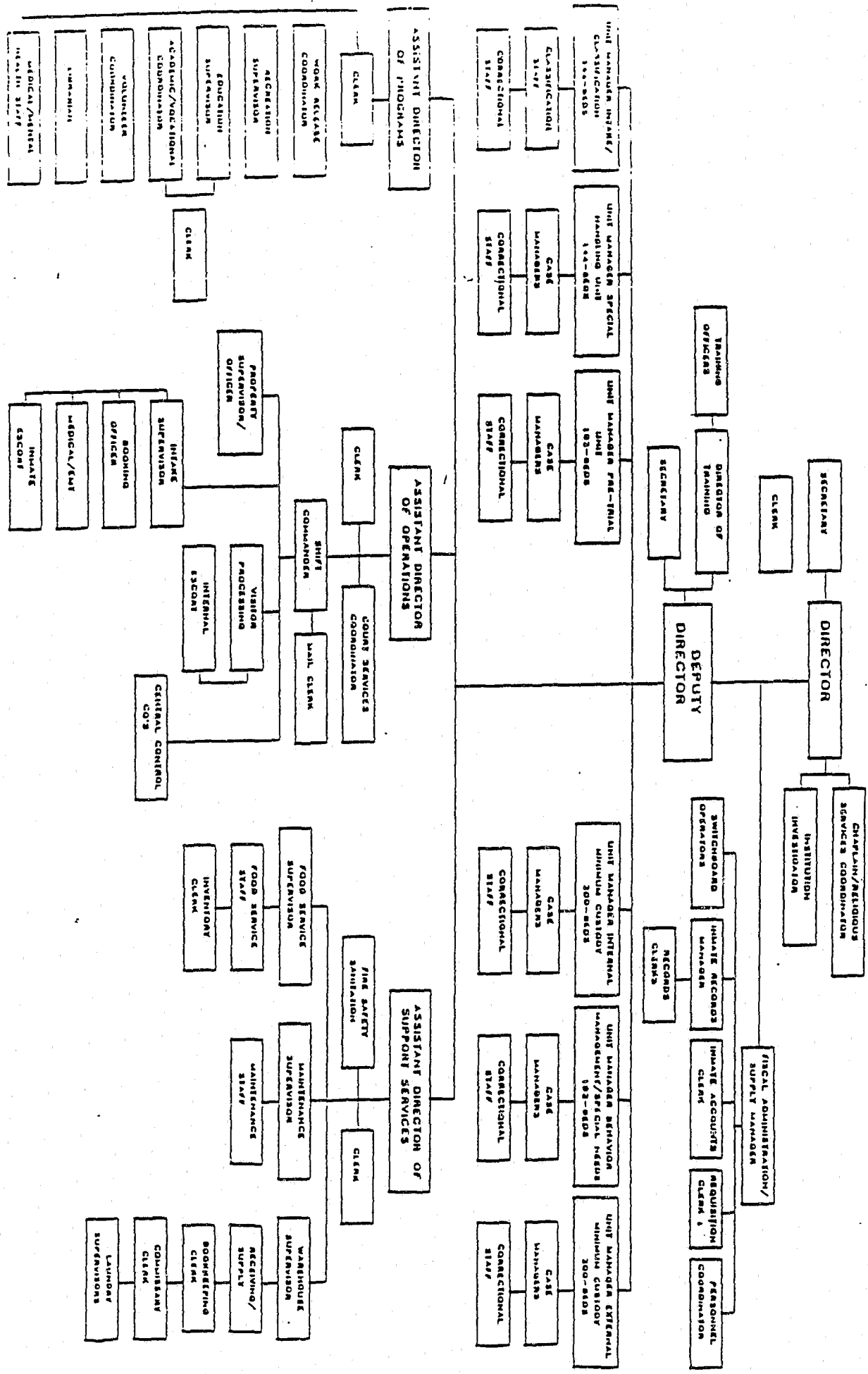


Figure 2

considerations. The stress and discomforts of pregnancy may place added emphasis on the need for privacy in rooms (Wener, 1989).

Also, there are culture differences in some aspects of hygiene. Women use bathtubs more frequently than men (a fact reflected by the plumbing code). Providing only showers, then, may be seen as a hardship for women, while not so for men.

The correctional environment can help to foster an independence most incarcerated women lack and can support and facilitate useful programming. The survey that follows was designed to determine how correctional environments are currently meeting these challenges. It offers insight into how jurisdictions that are planning new construction or renovation could improve their efforts to provide an environment that is secure but not restrictive, nurturing but not paternalistic, and that facilitates the operation of necessary programming.

### Environment and Behavior

The effects of environment upon behavior have been documented in new, direct supervision institutions. Direct supervision is a relatively recent innovation involving both management style and physical design, in which correctional officers are in constant, direct contact with inmates. Because many women's facilities are conversions or renovations, and not originally designed as prisons, indirect supervision of female prisoners is not the norm. However, these new facilities typically have eliminated the enclosed or off-unit control station. They provide officers with the capability of a high level of surveillance from a central unit area. Inmates in these facilities have considerable freedom of movement within the "pod" or living unit, and utilize various on-unit activity and program spaces.

The guiding assumption in direct supervision is that direct contact provides officers with the ability to know what is going on in all sections of the living area, and to stay in constant and casual contact with inmates. Thus, officers are able to understand inmate problems and often prevent the occurrence of disruptive behavior.

Another important element of direct supervision is that these living units usually provide inmates with increased options for privacy. They can usually go into their cells and close doors, often without officer aid. This provides increased ability to avoid potentially difficult encounters, and to control stressors, such as noise.

Several evaluative studies have indicated that these kinds of direct supervision facilities have less violence, less vandalism, and less stress than traditional facilities (Wener, Farbstein, and Frazier, 1985; Farbstein and Wener, 1989). Several women's units

were included in the studies cited above, and all evidence indicates that, in these respects, female inmates respond in the same positive way as did male inmates.

The environment may also have indirect, but nevertheless powerful, effects on behavior. For example, new direct supervision facilities have been innovative in using "normalized" furniture and fixtures--in an attempt to break traditional correctional environment stereotypes. They often use color schemes, furniture, and fixtures similar to home or work environments. These changes, when supported by staff behavior and management policy, help provide different behavioral expectations for both inmates and officers. They imply a normative expectation that reasonable care will be given to the environment and that property destruction or physical aggression will not be accepted.

This approach in some respects follows suggestions, such as those by Somers (1969), that "hard" settings (physically hard and difficult to personalize) challenge people to change them and dare users to vandalize, thus eliciting that behavior. By contrast, "soft" settings, by virtue of their human dimensions and fragility, encourage caretaking.

Again, as in male living units, female housing areas designed along these lines typically have been remarkably free of destruction and graffiti. If anything, women may be more sensitive to these normative expectations reinforced by environmental design features (Wener, 1989). Since, as is noted below, women tend to be less likely to respond to stress aggressively or by destroying the environment, it may be even easier to avoid "hard" surfaces and materials for their spaces.

Males and females respond differently to physical environments, and these differences may have impacts on some elements of environmental design. For example, there are studies from a variety of settings which suggest that women are less likely than men to resort to aggression as a means of dealing with interpersonal difficulties (see Gifford, 1988). Women are more likely to respond to stress by acting cooperatively rather than competitively. This is also true in laboratory crowding experiments, in which women respond cooperatively to a crowding threat, whereas men act competitively or aggressively. Such findings should not be interpreted as suggesting that crowding is a positive experience for women. Crowding can still result in significant psychological stress. Rather, it may be less likely to evoke violent responses among women. In fact, in dormitory studies women have shown greater discomfort (but not greater aggression levels) than men when living in two and three person rooms, at least partly because women spend more time in their rooms, whereas men respond to crowded rooms by avoiding them.

**Differences in Space Use.** It is difficult to discern the line between designing for culturally preferred behavior and reinforcing cultural stereotypes. For example, women traditionally engage in cooking as a family support and social activity. Providing spaces for cooking can be positive, but providing only such areas would limit women to their traditional activities. Facility design should allow, but not restrict women to, such traditional roles.

Customarily, women have the role of planning, organizing, and maintaining control over domestic environments. Maintaining at least some of that control may be important in helping incarcerated women to maintain self-esteem and sense of competence. Women's correctional settings, therefore, may allow inmates to modify and personalize their space through choice over color, furniture layout, pictures, etc. Women tend to be more sensitive to variation in their aesthetic environments than are men. Hence, aesthetic aspects of environmental design (e.g., color scheme) may be more critical to female inmates.

In addition, women often show less preference for large muscle activities; they may be more interested in engaging in activities requiring fine motor coordination. Thus, large recreation yards may be less critical or appropriate, and might be replaced with spaces which can be modified for a variety of uses. A ball field might be less important, for instance, than an area which can be used for gardening and socializing.

Because women respond to stressful situations more affiliatively, it may be important to pay more attention to designing spaces which support social needs. Useful designs might provide social areas for small groups with furniture arrangements.

It must be repeated that there is little data on many of the areas commented on here, including women's recreational needs and use of institutional space. Research in this area is sorely needed.

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## SURVEY METHODOLOGY

This study includes data collected in a survey of seven women's correctional facilities located throughout the United States. An attempt was made to identify diverse facilities; thus, the survey incorporates both a 45-bed, one-building institution in Montana and a 600-bed campus-style facility in North Carolina.

The primary focus of the survey was to identify design inadequacies in these facilities and to obtain information about the planning process that should be used for a women's facility. The survey contained a large number of open-ended questions, inviting unstructured participant responses. It was conducted through a telephone interview with one respondent, usually the institution warden.

Survey results are incorporated throughout the sections that follow. Because the survey instrument asked respondents to address the different operational areas of their institutions, results will be presented under those areas. The survey was designed to define what participants felt a women's institution needs, and how well they feel their institutions met these requirements.

While the survey was not designed to provide a comprehensive picture of program and service offerings at the sample institutions, a lot of information was gained about these offerings. This material is incorporated into the discussions that follow.

Characteristics of the institutions surveyed are summarized in Table 1, and brief descriptions are presented below.

**Louisiana Correctional Institute for Women (St. Gabriel).** This 522-bed facility houses women in maximum, medium, and minimum security classifications. At the time of the survey, the population was approximately 500; 50 maximum security inmates, 250 medium security, and 200 minimum security.

The institution was built in 1973 to house approximately 220 inmates; renovation and expansion have been ongoing since 1981. Three medium security dormitories and a 48-bed single-cell maximum security unit have been added. In addition, the visiting area has been expanded, a new infirmary and a vocational education building have been added, and the kitchen has been remodeled. An additional 24 maximum security/segregation cells are scheduled to open within six months.

The facility was originally built around a central quadrangle containing the administration building, a school/chapel building, and one large dormitory. Kitchen facilities and all subsequent expansion surround this main quadrangle.



**Kentucky Correctional Institution for Women (Pewee Valley).** This 224-bed facility houses women in maximum, medium, and minimum custody classifications. At the time of the survey, the population was six maximum custody inmates, 108 medium, 94 minimum, and 16 close custody. Minimum custody inmates are housed in a modular unit outside the institution's secure perimeter.

The original facility was built in 1938. Construction and renovation have been ongoing since the early 1970s, when a dairy barn was converted to recreation and visiting space and a vocational school was added. Subsequent additions include a chapel (1978), entrance station (1979), two honor units (1982), visiting building (1984) and four modular units (1986). A minimum unit housing 108 inmates will open in early 1989. Administration and vocational/industries buildings are also planned; both new additions should open in early 1990.

The facility is organized around the entrance station and main building, which contains administration, the infirmary, and some program space.

**Minnesota State Correctional Facility (Shakopee).** This 132-bed prison houses inmates in maximum, close, medium, and minimum custody classifications. The current population is 2 maximum inmates, 44 medium, 37 minimum, and 42 close custody. An additional eight inmates from the Federal Bureau of Prisons system are housed at the institution.

The facility was built in 1986. The main building houses all program and service components; five living units surround the main building.

**Iowa Correctional Facility for Women (Mitchellville).** This 124-bed structure was converted for use as a women's correctional facility in 1982. It houses women in maximum, medium, and minimum security classifications. At the time of the survey, approximately 10 inmates were classified as maximum custody, 64 as medium, and 50 as minimum.

At the time of conversion (the facility was originally a juvenile reform school), central dining facilities were remodeled and new security equipment installed. Twenty-four additional beds were added in 1985.

**Montana Women's Correctional Center (Warm Springs).** This 45-bed facility currently houses inmates of maximum, close, medium, and minimum security classification, as well as serving as the women's reception center. Currently, no inmates are classified as maximum, 19 are close, 12 medium, 12 minimum, and 3 are in reception status.

The facility was built in the 1950s as a dormitory for nursing students and was converted to a prison in 1982. At that time, part

of the building was remodeled into a secure lock-down unit. Security doors, alarms, and other security equipment were also added.

The facility is located on the grounds of the state mental hospital. Some services, such as recreation and medical services, are shared with the hospital.

**Pennsylvania Correctional Institution for Women (Muncy).** This facility, originally built in 1920 as a women's reformatory, has a rated capacity of 348 but currently houses 546 inmates in a five-level classification system: (I) Maximum, (II) Close Supervision, (III) Medium, (IV) Minimum, and (V) Pre-Release. At the time of the survey, four inmates were classified as Level I, with an additional eight inmates in administrative segregation. Twenty-two inmates were classified at Level V; no inmates were at Level II. The remaining 512 inmates were classified at Levels III or IV.

The most recent facility expansion was the addition of two 60-bed modular unit in 1985. A mental health unit and infirmary have also been added since 1980. Organized as a campus, the prison complex contains 12 housing units (one was closed for renovation at the time of the survey) and a total of 44 buildings.

**North Carolina Women's Correctional Institution (Raleigh).** This facility was originally built in 1936; cottage-style dormitories were added in the 1950s. The facility currently has a capacity of 600 inmates. At the time of the survey, it housed 600 inmates, 60 in close custody, 360 in medium custody, and 180 in minimum custody.

Extensive renovation and expansion have been ongoing through the 1980s. A 28-bed single cell close custody unit was added in 1982, followed by a vocational building in 1983. A 104-bed dormitory and a new medical services component opened in the spring of 1989.

The facility consists of approximately 20 buildings in a campus-style configuration.

Table 1. Survey Participants

State Location	Capacity	Custody Levels and Population	Date Built	Date Renovated/ Expanded
Louisiana St. Gabriel	522	50 maximum 10% 250 medium 50% 200 minimum 40% --- 500 total	1973	Ongoing since 1981
Kentucky Pewee Valley	224	6 maximum 3% 16 close 7% 108 medium 50% 94 minimum 40% --- 214 total	1938	Ongoing since 1978
Minnesota Shakopee	132	2 maximum 2% 42 close 32% 44 medium 33% 37 minimum 27% 8 FBP 6% --- 133 total	1986	
Iowa Mitchell- ville	124	10 maximum 8% 64 medium 52% 50 minimum 40% --- 124 total	Converted for use as correctional facility in 1982	1985
Montana Warm Springs	45	19 close 41% 12 medium 26% 12 minimum 26% 3 receptn. 7% --- 46	Converted for use as correctional facility in 1982	

Table 1 continued

Facility	Capacity	Custody Levels and Population	Date Built	Date Renovated/ Expanded
Pennsylvania Muncy	348	1% 4 maximum 2% 8 admin. seg. 93% 512 med.-min. 4% 22 pre-release --- 546 total	1920	Ongoing since 1981
North Carolina Raleigh	476	10% 60 close 60% 360 medium 30% 180 minimum --- 600 total	1936 (main campus)  1955 (4 cottages)	Ongoing since 1983

## SECTION II: THE PLANNING PROCESS

Planning the construction of a new correctional facility, or the renovation or conversion of an existing institution, presents a jurisdiction with both opportunities and responsibilities. The planning process is the cornerstone of the facility; a safe, secure, humane, orderly, and efficient facility only results from careful, thorough planning. A new facility, renovation or conversion also represents a substantial investment of public funds; planners need to know how to get the most for the money and where financial resources should be concentrated.

Some jurisdictions contract a planning firm to provide this service; others may expect it to be provided by the architect. Regardless of which option is followed, however, senior corrections department officials and selected operations staff from the existing women's facility should be integrally involved in the planning process. This ensures that policy issues that arise during planning are quickly addressed and that the personnel who will operate the facility have input into its development. It is also critical that this planning phase be given the time and attention that is its due. Failure to do so can result in an unsatisfactory facility that lacks needed program space and does not operate efficiently from a staffing standpoint.

The following is not intended to provide a comprehensive discussion of the planning process; rather, the intent is to outline the key steps in planning and provide a sense of what is involved. The discussion is directed toward planning for a new facility, but planning for renovation or an addition of an existing facility is no less important. Figure 1 provides a model for the most important steps in the planning process.

**Needs Assessment.** It is impossible to develop a cohesive and manageable facility plan without clearly defining the needs the institution is to meet. This includes projecting the number of beds the system will need for women and the size of the facility, as well as examining whom the facility is going to serve.

Forecasting and Profiling. Data collection to develop a statistical base for analysis of historical trends and projection of the rate at which the incarcerated female population will grow are essential elements of this process. As the incarcerated female population is increasing at a higher rate than males, a jurisdiction cannot rely on current proportions of incarcerated females to males and overall prison population projections. The database should track inmates from admission through release so that an average length of stay can be calculated; felony arrests and conviction rate trends, sentencing trends and the impact of good time credit on length of sentence are all variables that will influence the development of accurate population projections.

## THE PLANNING PROCESS

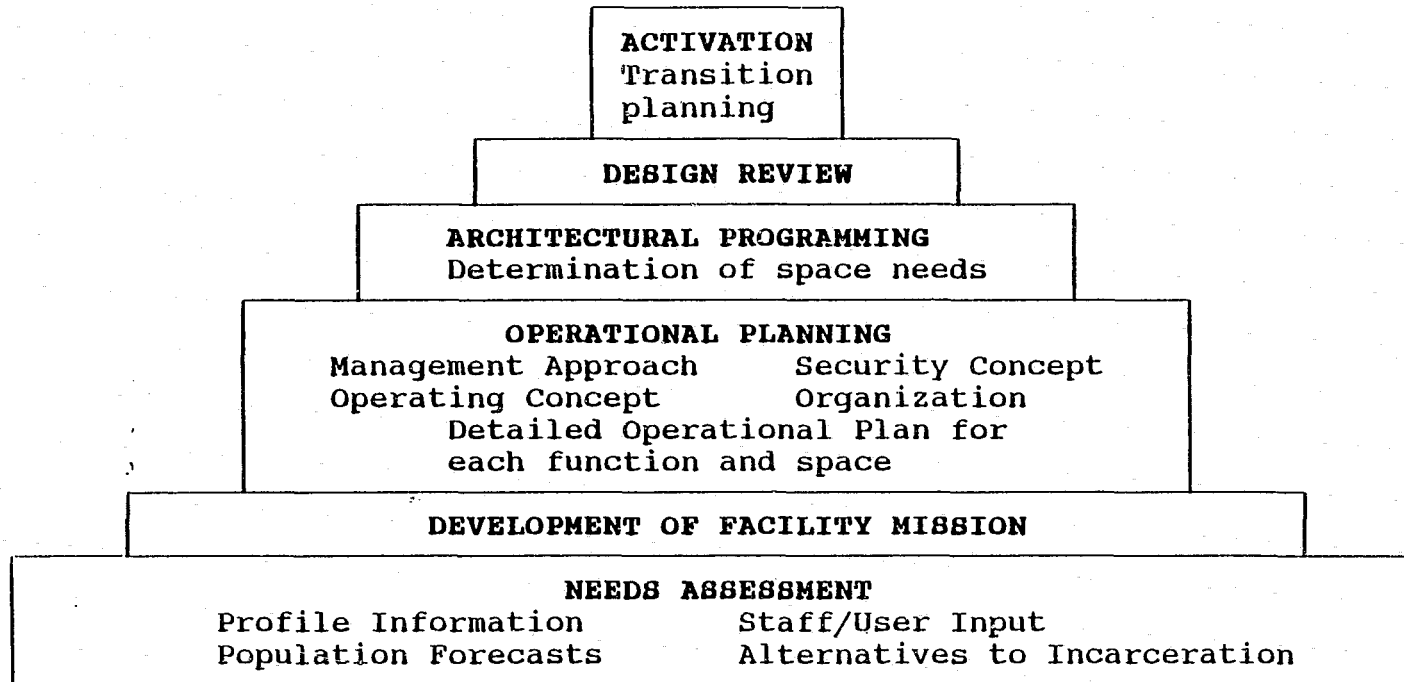


Figure 1.

Once population forecasts are developed, the anticipated proportion of inmates in each security level should be determined based on an objective classification system. The feasibility of developing alternatives to incarceration for minimum custody inmates should be explored at this time. A jurisdiction may find a community alternative more cost-effective than building and operating a minimum security component as part of the new facility. Optimally the size of the facility should be such that it will be built to accommodate the projected population. However, the availability of construction dollars frequently determines the actual number of beds that can be built; therefore, planning for alternatives is well advised.

Forecasting the security level of the future female population is only part of the needs assessment process. The profile of the projected population must also be studied. What offenses are women being incarcerated for? What programs are they most likely to need? What proportion need special services--pre-natal care, mental health treatment, substance abuse treatment, special education, services for the handicapped, etc.? What level or type of security is most likely to be needed? The facility should be responsive to the needs of its residents, both in terms of design (the spaces it contains) and programming (what is done in those spaces).

Therefore, in planning housing units according to custody levels, it is important to include not only the traditional categories, such as maximum and medium, but also to quantify the bed space needs for special populations or inmates with similar programming needs. This should include, for example, assessment of whether to develop dedicated housing for treatment of the mentally-emotionally disturbed, special housing for women who are pregnant, a dedicated unit for intensive substance abuse treatment, and a determination of the number of infirmary beds. Program space should be planned to be flexible, so that activities can change in response to inmate need and other factors.

How should needs assessment be conducted? One of the most effective resources is the existing inmate population. File searches, interviews, and structured work sessions (possibly through the establishment of an inmate advisory committee) can result in a thorough, accurate profile of the current offender, and can uncover information previously unquantified. While anecdotal information and staff perceptions are very useful during this process, they cannot be relied upon as a substitute for hard data.

Current needs are not necessarily an accurate prediction of future needs. Policy initiatives that may affect prosecution and sentencing must be analyzed to determine their potential effect on the inmate population. Flexibility can be built into the facility to accommodate unanticipated changes in inmate needs.

**Development of the Facility Mission.** One of the most important steps in establishing a new facility is to define its mission. In conjunction with system goals, the mission statement determines the focus of the entire planning process. Most correctional jurisdictions have a mission statement; it should be re-examined and, perhaps, refined when a new facility is to be built. A new facility represents a considerable resource to corrections; its mission defines how it can best be used within the current system of correctional services. Whether the mission is to be primarily custodial or rehabilitative will influence the overall design. In a women's institution, for example, the mission statement should incorporate meeting the specific security needs of female offenders in addition to being rehabilitative.

**Operational Planning.** Crucial to planning a new (or renovating an old) facility is development of an operational program, which defines in detail how the facility will function. This includes defining the management approach and operating philosophy, as well as analysis, identification, and definition of each component and activity that will take place in the facility. From this overall concept an architectural program is developed that identifies and defines the number, size, and location of each space to be included in the facility; this program is later used by the architect to develop preliminary construction plans.

The first step is to define the facility's operational concept. This usually includes the type of management approach under which the facility will operate, which in conjunction with the facility mission establishes the direction for the remaining tasks in development of the plan. It includes examination and decision-making on issues such as centralized or decentralized management, direct supervision, organizational structure, and security.

The security concept includes building construction type, security zoning for facility operations, type of security technology to be used, perimeter security (perimeter fence, lighting, access and egress, pedestrian and vehicular access) and the various security levels of the housing components. Security decisions are made in conjunction with the classification and custody level information and the operational concept.

Following determination of the conceptual approach to management and operations, the functional organization of the facility is determined. This entails deciding housing unit size based on the total number of beds at each level of classification. If a decentralized management approach is to be used, the decision to cluster certain types of housing units according to classification or function needs to be made. Administrative, security, program, service, and support functions that will take place in the facility are identified and the decision is made as to whether they will be centralized or decentralized.



It is important that the types of programs to be provided in the facility are identified at this time so that appropriately sized spaces can be planned to accommodate them. This holds true for all activities that will take place in the facility.

The next step in the development of the operational program is to determine in detail where each of the functional components of the facility will be located; what functions need to be in close proximity to each other or co-located, etc. Then each activity that will take place in every component of the facility should be defined in terms of operational scenarios. The flow of inmates from reception to living unit to discharge should be defined as part of the operational planning process; this allows the planning team to determine staff efficient ways to operate. Mode of program and service delivery must also be considered at this time. During this process, preliminary estimates of the number and types of staff needed to operate the facility are determined. This provides a very concrete way for the jurisdiction to assess future staffing costs. This in turn drives the planning team to consider how the facility can be operated in the most cost effective way and still provide quality programs and services for the women. The architectural space program is subsequently developed from the information provided in the operational program.

**Architectural Programming.** Using appropriate standards and guidelines, the architectural program provides a list of each space required in the facility and the square footage to be assigned to each space. Functional adjacencies and relationships identified in the operational program are noted and a building "footprint" emerges which allows investigation of site requirements. Capital cost estimates are drawn from this. Again, review of these spaces by the "user agency" is important to ensure that the space program reflects the desired operation. Preliminary estimates of capital and operating costs result from this work, which provides the facility owner with an understanding of the overall costs required over the life of the facility.

**Design Review.** The planning process does not end with development of the architectural program. Senior corrections staff who will operate the facility should also be part of the design review process to ensure that the intent of the operating and architectural program is interpreted into design. In addition, in the event overall square footage must be cut from the design to meet budget guidelines, these decisions should include the "user". As the design is refined, staffing needs can be more accurately assessed and posts defined. During this phase the user also becomes involved in equipment and furnishings selections, and selection of colors and materials for wall coverings and floors. This is an important part of the planning process because of the psychological impact the immediate environment has on the behavior and mood of the women who will be incarcerated there.

**Activation.** Finally, while the facility is under construction the corrections department should begin the process of planning the activation of the new facility. If the management/operational concept of the new facility is different from the existing facility and that facility is to be vacated when the new one comes on line, adequate planning for occupation is critical; planning for occupation is also necessary when the style of management does not change. A transition team including the facility administrator and other key senior staff who will work in the new facility, should be assembled to plan for the facility opening. Tasks associated with this include refining staffing patterns, development of hiring schedules, defining position responsibilities, developing procedural and operational manuals, development of staff training, inmate orientation, and the many other details of a smooth transition.

**Setting Priorities.** As plans become more specific, it is rare that needs and resources will align without conflict. If a budget limit has already been set and what is considered optimal exceeds the limit, then decisions need to be made regarding how cost will be contained; this usually requires some scaling down in such areas as programs and services, equipment, security technology, and construction materials.

The prioritization of where costs can and cannot be cut will be different for a women's facility. In a women's facility, as noted above, the medical and mental health areas and services are very important; women use medical services at a higher rate than male inmate populations. Another priority that should not be sacrificed to cost is development of smaller and more intimate housing units. While male inmates, for the most part, function well in large housing units and more impersonal surroundings, women do not. Programming and space related to parenting and child visitation should also be considered a priority because of the sensitivity of women to separation from their children. Self-improvement programs are equally significant for incarcerated females who, as profile research indicates, need and want to become self-sufficient.

On the other side, the need for costly "hard" perimeter security, hardware, building materials, and high technology security systems is lower in a women's facility. Therefore, economies can be realized in these areas in women's facilities which will offset the additional square footage needed to meet other needs.

In addition, options for economizing can include some paring down of square footage, the use of lower-grade manual locking systems as opposed to automated systems, phasing-in of bed construction to allow cost phasing, and the development of non-structural alternatives for women who are considered minimum custody. Decisions as to which options to use in prioritized order should be made by persons at the policy level (with input from operations and program personnel); policymakers should remain fully informed

of the operational impacts of their decisions.

**Time Considerations.** The amount of time required for adequate planning is short compared to the benefits gained from it. In the haste to construct because of court pressure, this important phase can be shortened and inadequately conducted, which more often than not results in inadequate facilities. Of the facilities surveyed, only three respondents reported any involvement in planning; the degree of their involvement varied and the extent of the planning process itself varied. The Minnesota facility at Shakopee reported the most involvement and the highest level of satisfaction with the resulting facility. While it may appear that this is obvious, given the fact that the Minnesota facility was the newest in the survey, equal planning and care should be devoted to renovation.

**Planning and Legal Issues.** The types of litigation being pursued by inmates--both male and female--serve as a basis for identifying potential problems for those who plan, design and operate women's facilities. The courts provide few specific design imperatives, but indicate many important design principles that should be considered. While it is virtually impossible to design a "litigation-proof" facility, the following suggestions may help keep jurisdictions conscious of the important issues being raised in the courts.

- **View the Facility in its Totality.** Designers should avoid focusing too closely on specific design elements or features in an effort to meet court requirements. Rather, it is clear that courts will evaluate the entire physical and operational environment to determine its adequacy. Therefore, while providing additional toilets, showers, or a bathtub might seem reasonable attempts to be sensitive to the special needs of women, failure to provide proper staffing, programs or services can quickly obviate such design features.
- **Provide Flexibility.** Caselaw in this area is evolving slowly. It is impossible to predict what requirements may be established in the future--just as the future character of inmate populations is difficult to predict. Therefore, facilities should be designed to permit flexibility for future operators. For example, an industry that seems well-suited for female inmates today may be found to be discriminatory in the future--requiring a change in the use of the industry space. There are many ways to design and construct a correctional facility to provide options for changing users and uses; all of these should be systematically employed in a women's facility.
- **Prepare for Diversity of Programs.** Some recent cases suggest that vocational, educational and even industries programs must be provided with comparable diversity for women. Designers should consider the need to deliver many different programs,

even though the number of female inmates may seem too low to make them efficient. It may not be unusual to find several small classes required at the same time.

**Prepare for Crowding.** Many corrections experts believe that crowding is more severe for women inmates than for their male counterparts. When this is true, the likelihood that litigation will be initiated is much higher. Some believe that female populations will grow disproportionately faster than the male population. If this is the case, new women's facilities may face space pressures sooner than expected. Again, there are many design techniques that can be used to anticipate crowding and mitigate its impact; all of these must be employed for women's facilities. Further, the ability to efficiently expand such facilities must be ensured.

**Location.** There are hints in recent litigation that the location of a women's facility may be considered in the determination of parity. Be sure that women's facilities are not located in remote regions, causing hardships for family, friends, and counsel. Carefully consider the location decision, and document the process to demonstrate that it was done properly.

**Diversity of Classification.** Courts have demanded that all levels of classification and all types of "alternatives" be provided to female inmates. While the number of male inmates in a system would allow separate facilities to be constructed for each distinct classification, smaller women's facilities must necessarily provide this diversity on one site or in one structure. Designers must be sure that a full range of settings are available, including low-security options (e.g., pre-release, work release). It may not be sufficient to house work-release inmates with other classifications.

**Provide Privacy from Male Staff.** Designers would be wise to assume that male staff will work in all areas of a facility. With that in mind, provisions should be made to offer female inmates a degree of privacy without compromising security. This will be especially important in housing areas. Further, sufficient staff facilities should be provided for both genders.

**Legal Materials.** Facilities and services approved for male inmates by the courts may not be found to be sufficient for women. Designers should make provisions to expand legal libraries and legal assistance activities.

**Per Capita Cost.** Courts have stated that parity for women will be achieved, regardless of costs. Design, construction and operating expenses may be significantly higher when measured on a per capita basis because of the lack of

economies of scale enjoyed in men's facilities. When costs threaten to constrain a design, careful consideration should be given to potential legal ramifications. When in doubt, risk avoidance would suggest that it is better to provide the space (or other design feature) than risk triggering expensive court inquiry into the entire operation.

### SECTION III: ISSUES IN BUILDING

#### MANAGEMENT

Planning a new facility, or renovating or converting an existing one, allows correctional jurisdictions to consider alternative approaches to management and the delivery of programs and services to inmates. Management considerations that will directly influence facility design include: centralization or decentralization of management responsibility, organizational structure, and staffing configuration.

Five of the seven facilities surveyed report using a centralized management approach; three of these facilities housed less than 225 inmates. Minnesota and Louisiana use a decentralized approach; Pennsylvania and Kentucky report a combination of both approaches.

#### Centralization/Decentralization of Management.

The choice of management style will greatly influence the character and atmosphere of the institution and the behavior of its inmates. Management approach can also increase both staff and inmate perceptions of the environment as safe and secure. Environments that foster this perception permit direct supervision without architectural barriers that can inhibit the development of mutually beneficial relationships between them. Regardless of the style of management, all the surveyed institutions report using direct supervision. *at all custody levels?*

If the female inmate population is large or expanding rapidly, a decentralized approach to management should be considered as it has potential for resulting in a smoother running facility. Roy E. Gerard provides a succinct definition of unit management:

Unit Management is an approach to inmate and institutional management designed to improve control and relationships by dividing a large institution population into smaller, more manageable groups, in order to improve the delivery of correctional services.

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<sup>1</sup>Roy E. Gerard (1988). "Unit Management." Paper presented at National Workshop on Unit Management sponsored by National Institute of Corrections.

Selection of a decentralized management approach must, in addition to the size of the population, consider the following elements if it is to be implemented successfully (Gerard and Levinson, 1988):<sup>2</sup>

**Delegation of Authority.** The unit manager and his/her staff have specific decision making authority, that is stipulated in written policy, over the functions and activities of the inmates designated to the unit; the unit functions like a mini-prison within the larger prison environment.

**Staff are Assigned to Specific Units.** Multi-disciplinary staff are assigned to a unit and work with the inmates housed there as members of the unit's management team. This includes defining the roles of unit management staff so that inmates know who they must go to for resolution on different issues and staff know who to redirect inmates to, to avoid being played one against the other.

**Staff Offices are located on or near the unit.** In addition to correctional staff who are assigned to work in the housing unit, the offices of case managers, counseling, and program staff are located close to or in the housing units to provide proximity to the inmates to facilitate interaction between them, which results in a better working relationship.

**Assignment of inmates to units is rationalized.** Housing assignments are based on criteria that house inmates with similar profiles together which reduces friction and allows staff to manage better. It also provides cues for inmate program planning.

If a decentralized approach is chosen, the overall facility design should be reflects that approach. A campus design, with smaller and less traditionally institutional building, will facilitate this approach. Consideration should be given to clustering groups of housing together according to like security designations or missions. For example, medium custody housing can be grouped into one or two management units, depending on the size of the medium custody population. Medium security clusters can also be designated special missions that characterize the populations; one could be designated for inmates who are older and more stable and work in industries or institutional cadre, another for women who are newer to the institution and may have a high involvement in education.

Many of the services that are traditionally centralized, such as dining and recreation, can be decentralized. Each housing cluster can be designed with its own unit activity center, which is directly accessed by inmates in that cluster. The unit activity center can contain spaces within which decentralized services, such

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<sup>2</sup>Roy E. Gerard and Robert Levinson (1988). "Concept Refinement." National Workshop on Unit Management, op cit.

as counseling, education, and inmate services are provided. In addition, the unit activity center houses unit management staff offices and conference space. Organizing housing and the unit activity center together in a cluster promotes staff-inmate interaction, enhances inmate access to programs and services, and minimizes the escort function.

The following provides an example of the division of centralized and decentralized functions in a 500-bed facility that used a unit management/decentralized approach to delivery:

#### Centralized Activities

- Facility administration
- Security operations
- Staff services
- Receiving and discharge
- Library services (law)
- Medical/infirmary
- Intensive Mental Health
- Kitchen
- Institution laundry
- Vocational training
- Prison industries
- Intensive Substance Abuse
- Pre-natal/health education
- Overnight child visitation
- Facility management/warehouse

#### Decentralized Activities

- Inmate dining
- case management
- Recreation
- Arts and crafts
- Library services (general)
- Sick call
- Psychological services
- Unit management
- Personal laundry
- Visiting
- Academic education
- Substance abuse education
- Religious services

The above listing is not intended to be exhaustive; further discussion on facility layout and environmental design is provided below.

#### Organizational Structure

Choosing a management approach also brings into focus additional related issues, such as the type of organizational structure that is needed to support it. The traditional organizational structure that defines top management as responsible for functional areas throughout the entire institution (i.e., security, programs, support, etc.) is supplanted under the unit management system to a flatter organizational structure that has unit managers reporting directly to the institution administrator or his/her deputy. Staff responsible for functional areas take on more of a support and coordinator role, because unit managers and their staff are responsible for all functions that occur within that housing cluster. In general, unit managers are at the same level in the chain of command as other department heads in the institution. Figure 2 provides an sample organizational chart for decentralized management.



Implementing a decentralized management approach reduces span of control and effectively divides it to allow decision making pertinent to the inmate population be made by the persons most familiar with them. This in turn requires that thought be given to the size of a management unit. At the National Workshop on Unit Management Concept Refinement held in 1988 in Columbus, Ohio, staff from correctional jurisdictions using a unit management approach considered the optimal number of inmates to be included in a unit management cluster to vary from 72 to 300 inmates, the overall ideal being 160. Staffing per unit, excluding 24 hour correctional officer coverage, ranged from 3 to 7 staff, the average being 5 and the mode 6. Staff-to-inmate ratios ranged from 1:14 to 1:58, the average being 1:32 (Gerard and Levinson, 1988).

As management functions and positions are decentralized, decisions that will impact design follow. For example, the number and type of staff assigned to a housing cluster will impact the location of offices and conference space for unit management team meetings. Whether inmate records are to be centralized or decentralized will impact the size of the records area and type of construction that should be considered. Some jurisdictions choose to keep a day-to-day working record at the unit level, with a centralized records area for the "main" record. If the record is to be managed this way, the centralized records office and staff would be smaller than if the records function were completely centralized, because the unit clerk and unit staff are taking over its maintenance. Records storage at the unit level, however, must be secure.

**Staffing Configuration.** The type and number of staff positions that will be needed to operate a new facility is also influenced by the management concept. Under a decentralized, unit management, approach, a unit manager heads up the unit management team that comprises a case manager(s), correctional counselor(s), a unit clerk, and the correctional staff who are responsible for 24 hour coverage in the housing units. Education, medical, and mental health staff may provide services to more than one unit cluster in the spaces provided in the unit's activity center or in centralized space, depending on the degree of decentralization.

The impact of the management approach on staffing and training needs will vary according to the model adopted; this in turn will impact the sizing of spaces required to support the staff, i.e., lockers and shower facilities, staff exercise area, the size of spaces for training and role call. These issues are further discussed below.

## SECURITY OPERATIONS

**Perimeter Security.** The type and extent of perimeter security impacts the image of the facility both to inmates and to the public. While perimeter security must insure--and must project the

image--that the inmate population is contained and the public protected, it also must be able to alert security staff of attempts to breach the security of the facility. The perimeter should be developed according to the type of inmates housed there and their security needs. In the case of a women's facility, alternative perimeter designs should be considered.

The perimeter security system can be envisioned as the integration of the following components: security fences, intrusion systems and/or electronic detection devices, lighting, and access and egress controls. The use of towers is not necessary; perimeter checks should be made via 24-hour mobile patrols. If the decision is made to keep the internal environment fairly "open" and to use mainly conventional institutional construction techniques (as might be appropriate for a minimum/medium security women's facility), then a stronger perimeter security system should be considered. In a women's facility, both a strong perimeter system and strong internal system are not generally necessary because the maximum custody population is so small.

A separate housing unit could be isolated from the others for inmates classified as maximum. This unit would have a different character and "harder" environment. A second fence with razor wire can be placed around this unit alone, rather than around the entire facility. An electronic sensing system can be installed between this second security fence and the outer perimeter. This could result in substantial cost savings compared with the alternative of a double fence and sensing system around the entire facility complex.

Medium security housing generally requires a single fence with optional razor wire. A perimeter patrol would be required periodically to inspect the fence. The decision of whether or not to fence the entire complex depends on several factors: first, the distribution of the facility population over the various custody levels; second, the historical rate of escapes; third, the location of the facility; fourth, expected public perception of the facility and anticipated reaction to an escape. A secure perimeter fence alerts the public to keep out as well as deterring escape attempts. If the facility is in a highly populated area, a single fence without razor wire may be considered as an alternative to avoid the "hard" appearance and the accompanying perception that the inmates are "hardened" criminals. Of course, safety should never be compromised for the sake of appearance. But the profile of the female offender should be considered during the security planning process. For example, women are less likely to attempt escape than men, and those escapes that are attempted are more likely to be impulse actions; the inmate will not have planned very far in advance and will generally act alone. Therefore, adequate staff supervision and control of internal movement is at least as important to controlling escape attempts as a double fence.

Generally, it is not feasible to isolate minimum security housing, although these units could be located outside the fence. If the facility is designed primarily for minimum security inmates, however, perimeter fencing could be eliminated because inmates in this classification are likely to work, attend school, or have furloughs in the community; their behavior will not warrant perimeter security beyond a "nuisance" fence (designed more to keep intruders out than inmates in).

**Security Hardware.** Hardware is not a substitute for supervision, and it cannot guarantee a trouble-free facility. In women's institutions, construction costs can be reduced by choosing appropriate hardware, which is generally far less expensive than for a men's institution.

The maximum and segregation units of any facility must be equipped with appropriate hardware for lockdown, and the design of these units must consider the possibility that inmates will be potentially violent and destructive. Secure furniture, steel commodes, high-security locks, and reinforced construction will probably be necessary. However, in most women's facilities, these cells represent a very small percentage of the total. The majority of the facility can be constructed using less secure hardware and more normative fixtures. In construction, vertical and horizontal reinforcements would be used for structural rather than security purposes. Particularly in minimum security units, toilet facilities can be centrally located (rather than having "wet" cells) and dormitories can be considered.

**Electronic Technology.** In a correctional setting electronic technology can be used to enhance security; however, in no instance should electronic surveillance be used as a substitute for direct staff supervision. Areas such as housing units, outdoor recreation, and contact visitation, for example, require direct staff supervision. While electronic surveillance can supplement staff supervision, it cannot be considered an adequate replacement for it.

Electronic surveillance may be a key component of the perimeter security system. In addition, closed-circuit television (CCTV) may be used to monitor vehicle and pedestrian sally ports, as well as areas that are not appropriate for continual staff surveillance (such as passing through internal sallyports or barriers from one secure zone to another).

Electronic alarms may also be used for doors or windows of rooms that contain sensitive, dangerous, or controlled substances, equipment, or records. Examples of this include the pharmacy, any weapons storage, central computer facilities, and central records.

A card access system will allow staff access to selected areas of the facility without a key or central control room intervention.

These programmable cards also provide a management tool by developing a computerized record of when and by whom each designated door was used.

Electronic technology can also be used to ensure the safety of staff and inmates within the facility. The life-safety system within the housing units and other selected areas of the facility can include various electronic components, ranging from sprinkler monitoring to individual duress alarm devices.

**Security Zoning.** Under this concept, areas of the facility are grouped according to function, their use at certain times of the day, and security level. This impacts the circulation of staff, inmates, and visitors and allows staffing economies to be realized at certain times of the day, when certain zones (or sections of zones) are off-limits to inmates and do not have to be supervised.

The first zone, for example, can be defined as the perimeter and associated spaces that constitute the first level of security and controlled access as the facility is approached. It includes the reception area for all pedestrians entering the facility, perimeter sally ports, the perimeter road, fence, and any buildings associated with the exterior of the facility (such as the power plant). The second zone could include areas of frequent public access within the facility, such as administrative offices, visiting rooms, etc. The third zone is comprised of those activities and functions outside of the housing clusters that are often accessed by inmates, such as central recreation and dining, classrooms, industries areas, and institution support areas where inmates work. The fourth zone consists primarily of the housing clusters, and the fifth and innermost zone is the housing unit itself.

Through the use of zone movement, regulated and controlled by staff observation and in some cases secure construction and technology, inmates move from one zone or sub-zone to the other under a pass or escort system. Inmates could be allowed access to one zone and denied access to another based on classification designation. They could also be allowed access to one zone under a pass system but require escort to access another.

The security zoning concept has several advantages: it allows the primary security focus to be on areas of the facility rather than individual rooms, and therefore promotes cost savings in the less secure zones. It allows zones to be isolated in the event of a disturbance; maximum custody housing could be located in the same zone as close custody housing, for example. Program space for inmates in these units could be located directly adjacent to the housing; if necessary, the entire unit could be separated from the rest of the facility. However, the zones must be clearly defined during the planning stages and the facility layout developed to facilitate this concept.

**Custody Classification.** Female inmate populations are generally assigned to the same custody levels as their male counterparts--maximum, close, medium, or minimum, which can be further subdivided into institutional minimum and community minimum (work release from a halfway house located in the community). Because female inmates represent a small percentage of the total inmate population in any jurisdiction, usually all custody levels (except for community minimum) will be housed within one institution.

Female inmate classification variables are more likely to be linked to behavior patterns rather than offense categories; where male inmates are generally assigned to a higher custody level and "earn" their way to a lower, women tend to be classified at the lower level first. Therefore, women classified as maximum custody are likely to have exhibited behavior--destruction of property, assault or abuse of officers or other inmates, etc.--that influenced their reclassification. In most facilities, unless there were indications in the profile information to the contrary, the maximum security unit would be designated as the disciplinary segregation unit because it would be unlikely that a regular maximum security unit would be needed. Close custody inmates can be managed with a higher level of supervision and control in housing unit environments designed and constructed to house medium security inmates.

Historically, the percentage of female inmates who fall within these custody levels is different from males. There would appear to be a smaller percentage of the total that may require maximum custody classification, usually five percent or less. Approximately 50 percent may require medium custody consideration, and the remainder would fall within minimum custody guidelines.

#### **ENVIRONMENTAL AND FACILITY DESIGN ISSUES**

While this report attempts to provide some discussion of design-related issues in the sections dealing with programs and services, the design process itself raises some issues of particular concern to female offenders. These issues are examined here.

The design of a facility is influenced by many factors: funds, site, size, mission, population characteristics, etc. Several survey respondents indicated that it is ill-advised to use a prototype for a men's facility as the design for a women's facility; therefore, a discussion of the issues that should be considered in designing a facility specifically for women is presented here. The issues involved in designing any correctional facility are still valid for a women's facility, but the way decisions are made, the priorities that are set, and the resulting allocation of construction funds should be influenced by the concerns of this particular population. For example, since women's

facilities do not appear to require a full-size, centralized gymnasium, money should not be spent to build one. Rather, those funds could be devoted to landscaping walking trails in the outdoor recreation area or providing exercise equipment on the housing units. Since women's facilities do not require a high percentage of segregation cells with indestructable toilet facilities and highly secure lockdown capability, the cost per cell in the most secure unit should be relatively small.

This section, then, presents discussion of general design issues as they relate particularly to women's facilities. Relevant survey findings are incorporated throughout.

**Facility Site.** Literature indicates that approximately 75 percent of incarcerated females have children and that concern for their well-being is the inmates' most important concern. Studies have also shown that females, in general, receive fewer visitors than males. Consequently, women's correctional facilities should be located close to urbanized areas, where the inmates' families are most likely to live.

Several of the surveyed facilities cited location as a problem, particularly where visitation was concerned. The Pennsylvania facility in particular is very far from the state's large population centers, and special buses have to be run for visitors.

**Facility Size and Scale.** In determining size and scale issues, as well as many other issues in this section, the prevailing philosophy should be that women should receive no less than that already provided for men; where appropriate, the unique needs of women should be accommodated.

Good management practices, proven by experience, have shown that 500 beds is an optimal size for a facility, providing an efficient ratio of beds to infrastructure support. An allocation of between 450 and 500 gross square feet per inmates ensures such an institution will have sufficient program and support space.

Correctional facilities are generally low-rise, single level facilities with varying degrees of centralized and decentralized services. Generally, the movement of populations requiring higher security will be more restricted to the immediate housing environments, while the medium and lower security populations will have more freedom of movement and out-of-cell time. Climate will also have an effect on the layout of the facility, which can vary in concept from free-standing housing units, modules or cottages with outdoor routes to program and support areas to institutions which have housing pods internally linked to program and support buildings.

The interior scale of the facility should reflect as normalized, or residential, an environment as possible. For example, if

housing units are split-level and organized around a dayroom, a sloping ceiling might be used to reduce the height of the dayroom. The public reception and visiting areas should also reflect a normalized, non-threatening atmosphere. Since women will be likely to receive children as visitors, it is important that the areas to which children are exposed to should be away from the innermost parts of the institutions, and the character of these areas should be residential. Overnight visiting areas should also reflect a normalized environment, which is visually and physically separated from the more "institutional" portions of the institution. One way to achieve this is through the use of trailers or modular units for parent/child visiting (see "Programs" below).

**Facility Image.** It would be desirable to eliminate, or at least minimize, the impact of the security perimeter system in a women's facility. Where possible, the buildings themselves should provide the security envelope. Outdoor areas which need to be secured should be well-enclosed where possible, and the use of double fencing with razor wire coils should be avoided if at all possible. Normal fencing design with electronic sensing devices and full-time supervision of inmates in these areas by staff should be considered.

In addition to the issue of perimeter security, the exterior design of the facility has an impact on public perception. If, as recommended above, the facility is located near an urban area, public perception will assume increased importance. Attention should be given to designing a non-threatening exterior, avoiding the blank, virtually windowless facades that characterize many modern correctional facilities. Particularly in urban areas, it is important to develop a design that is congruent with its surroundings. If the area is characterized by a certain style of architecture, then the facility should, as far as possible, complement that style. A non-threatening building that fits in with its surroundings is much less likely to cause apprehension for either inmates or visitors; this should particularly be kept in mind given the number of children likely to visit a women's facility.

**Living Unit Size and Configuration.** Women exhibit a strong desire for private space in their living areas. This should be reflected in the facility design by incorporating as many single cells as possible. In addition, women seem to interact better in small groups; therefore, the living unit design might incorporate small lounges as well as a larger dayroom. The Minnesota facility at Shakopee has incorporated this need into its housing unit design by subdividing each 32-bed unit into "wings" of 4 to 7 beds and providing a small lounge in each wing. The respondent reported that this configuration reduces tension substantially on the unit. If additional dayroom or lounge space is provided, some of it should be reserved for quiet activities.

The desire to provide as normalized an environment as possible on the unit can be incorporated into the location of unit service areas. Laundry facilities, for example, can be located in an alcove or semi-enclosed space with glazing to permit observation and adequate space for a washer, dryer, and ironing table. Since female offenders should be encouraged to maintain their personal hygiene and appearance, a grooming alcove could be provided with wall-mounted hair dryers and mirrors to supplement space in the bathroom. If hair care services are to be provided on the unit, a room should be equipped with a deep sink, chair, mirrors, and storage. The principle is this: Since women tend to be more comfortable in smaller groups and smaller spaces, and since the design should reflect a normalized environment, efforts should be made to subdivide large spaces into functional areas and equip them for specific activities, rather than simply putting all necessary equipment into the central dayroom.

In terms of an optimum number of beds that a women's housing unit should contain, it is desirable to keep the unit at a manageable size--a maximum of 48 beds. A larger housing unit increases the difficulties of unit management and decreases the "community" atmosphere. Smaller housing units can be configured to share program space, which would be located in an activity center between the units and accessed on a scheduled basis.

Depending on the management approach, program space can contain academic classrooms, a recreation room, case manager offices, work areas for support staff, dining areas, etc. The configuration of program space primarily depends on which services are centralized and which are decentralized to the units. In smaller facilities, more services are likely to be centralized to lower construction costs and staff requirements.

At a minimum, housing units should contain one multi-purpose room for every 15-20 residents. This room should be furnished with movable furniture, such as stacking chairs, folding tables, etc., so that it can be used for support groups, tutoring, exercise classes, and other activities. It is advisable to keep the room small (sized to accommodate a maximum of 20) so that the surroundings will support the activities likely to take place in them. An unassigned office should be available for individual counseling.

The housing units should also contain a kitchenette/beverage area with a refrigerator for the preparation of meals and snacks. This could be particularly valuable in a minimum security or pre-release housing unit as it would encourage the practice of independent living skills and promote positive socialization. Four of the surveyed facilities provided at least a soda machine on the unit. The minimum-security apartments in the Minnesota facility contain kitchen facilities, and a beverage station is available on the unit. Beverage stations should be equipped to provide juice, diet



soda, milk, or other reduced-calorie or nutritive drinks. This is particularly important in units housing pregnant women.

A medical triage area should also be incorporated into unit design to facilitate the sick call process. (For further discussion, see "Medical Services" below.)

Survey results reflected a strong desire for private space. The respondent from North Carolina noted that the majority of disciplinary problems occur on the facility's cell blocks, not in the cottages. The respondent from Pennsylvania noted that double-bunking has created storage problems (personal property has had to be limited) and that this has resulted in a rise in disputes among inmates. All respondents agreed that private space can have a positive effect on the inmate because it reinforces her sense of ability to exercise a degree of control over her environment. Surveyed facilities did not have substantial space on the housing units. Even Minnesota, which is a unit-managed facility, had mostly centralized space because of the small size of the facility. Dayrooms were judged to be inadequately sized in the larger facilities.

Dimensions of cells, program spaces, and dayrooms should be in accordance with American Correctional Association standards. These standards do not address the need for additional space to meet female inmates' needs, such as laundry and grooming stations. Therefore, planners should factor in these spaces as additions to, rather than part of, ACA guidelines.

Storage was also cited by survey respondents as a critical need in housing units. Secure storage is necessary if records or other confidential material is to be decentralized to the unit management staff office areas. Adequate storage for any food kept on the unit is also essential.

**Type of Supervision.** The advantages of direct supervision and unit management have been discussed elsewhere in this report. Direct supervision has been proven to promote a more normalized environment and foster better staff-inmate communication. Within the housing units, officer stations should be as open as possible or eliminated altogether; inmate cells or rooms can be accessed by key rather than from behind an open officer station rather than building an enclosed control "bubble". The housing unit officer should be able to observe all cells and most other areas from any point in the unit. Two survey respondents reported that, because their housing units were poorly designed and it was not feasible to station two officers on the unit, the upper level of cells had to be off-limits to inmates during certain hours. This type of configuration, which limits inmate access to cells, severely undermines the unit atmosphere and the inmates' privacy; they should be able to enter their cells at all times, even if they cannot always close the cell door. Privacy locks that can be

controlled by the inmate from the inside with a staff override should be considered.

**Interior Design.** The following suggestions for interior design of housing units are based on preferences indicated in the survey results:

- Provide furniture, upholstery, carpeting, incandescent lighting, colors and finishes which resemble the home or office rather than a traditional "hard" institutional environment. Survey respondents reported that built-in wood furniture works well in inmate cells when combined with some movable pieces (such as chairs); in addition, heavy wood furniture can be obtained for the dayroom. Natural light and plants should also be used to establish a "softer" environment. Attention will have to be paid to durability and maintenance costs, but the environment should encourage inmates to take care of it and should support their efforts to care for themselves.

Most of the surveyed institutions, particularly the older facilities, reported that dayrooms were furnished haphazardly, with a combination of plastic, vinyl, metal and wood furniture. Such an arrangement does not encourage caretaking.

- Allow for some flexibility in arrangement of cell furnishings and customization of personal as well as communal space.
- Provide materials and finishes which contribute to the mitigation of noise. Laundry areas, for example, should be insulated against noise.
- Allow residents as much autonomy as possible with lighting control.

**Environmental Controls.** Studies in office buildings have shown that women are considerably more sensitive to thermal conditions than men. In high-rise buildings and correctional facilities, particularly where the exterior glazing is inoperable, problems are exacerbated. The solutions to the problem, which require individual room thermostatic controls and heating/air conditioning units, are very costly and subject to vandalism. This is an area where more thoughtful engineering and research must be done. Not surprisingly, five surveyed institutions reported temperature as a source of complaint within the housing units.

## **PROGRAMS**

Programs serve several functions in the correctional environment. They reduce inmate idleness, thus reducing tension and potential security problems. They provide inmates with opportunities to gain

skills and begin the process of change that is necessary for successful re-integration into the community. In short, programs are the key to making incarceration a meaningful experience for the inmate.

The type and extent of programs to be offered is a critical planning issue. These decisions will affect staffing, design, and operation of the facility. To the extent possible, flexibility should be the ideal in planning; the ability to try new programs and new approaches should not be limited by the facility design. Of course, some programs will require dedicated, specially equipped space; these range from academic and vocational classrooms to dedicated mental health housing and treatment units. A careful study of the population to be served and a thorough understanding of resources available to meet their needs are essential to planning effective programs--and designing effective program space. It is unwise, for example, to build dedicated mental health housing unless a need has been shown to exist for it. It is unwise to equip vocational education or industries space for one type of equipment, failing to take into account that program offerings may change. While space cannot be infinitely flexible, the planning process should take into account that programs offerings will probably not remain constant throughout the life of the facility.

In this section, seven program areas are discussed: Education, Industries, Family Programs, Mental Health, Substance Abuse, Recreation, and Counseling. Survey results are incorporated into the discussion.

### **Education Programs**

**Academic Education.** All surveyed institutions offered a variety of academic education, including Adult Basic Education (ABE), GED preparation and examination, and college courses. Some facilities offered additional programs: Pennsylvania, for example, offers two special reading/literacy programs and preparation for the SAT. An average of 48.6 percent of a facility's population was involved in full- or part-time academic education, ranging from a low of 20 percent (Kentucky) to a high of 75 percent (North Carolina) and 78 percent (Montana).

Only Pennsylvania reported that participation in academic education was mandatory (and then only if the inmate is younger than 17); the Pennsylvania facility was the only institution housing inmates under 18. Several respondents indicated that inmates are strongly encouraged to participate in education during the classification process, and that good time credit can be earned for class attendance.

Six of the seven respondents rated academic space as adequate (Pennsylvania said demand for classes is greater than available

space will accommodate). The average classroom accommodated 15 people; an average of 4.5 academic classrooms were available in each facility. Five facilities used the library for academic classes which was not considered optimal by the respondents in that it inhibited use by inmates while classes were in session. Several respondents noted that staff shortages rather than space accounted for limited educational offerings. The respondent from North Carolina indicated that a dedicated audio-visual room, where students could use equipment independently, would be desirable. She also noted the need for a bigger library.

The most critical concern in the planning and design of academic program space is that it be large enough to accommodate the desired number of classes, and that the environment be conducive to learning. Because female inmates with poor academic skills did not do well in the traditional school system, it is important to develop a learning environment that is not intimidating and is not merely a duplicate of that system. Some jurisdictions reported that more intimate learning groups have proven more successful with incarcerated women. Therefore, consideration should be given to development of smaller learning environments for eight to ten inmates, or larger rooms that can be sub-divided.

Computer-assisted learning has also proven to be effective for adults who may be sensitive to displaying their deficits in front of others. Therefore, some classroom space should be appropriately sized and designed to accommodate learning carrels equipped with computers. These carrels should be acoustically treated to buffer sound and promote a sense of intimacy and privacy. Classrooms should also contain appropriate space and wiring for audio-visual equipment.

Because female inmates exhibit poor literacy skills, special attention should be given to basic literacy training, including space for one-on-one tutoring. Tutoring--whether from other inmates, volunteers, or staff--has proven to be especially effective in basic literacy instruction because it allows the inmate to have individualized, personal attention while respecting her unwillingness to display her poor skills in front of a class or her peers.

Libraries and other non-classroom areas related to academic education should be designed to facilitate the functions that will take place in them; they should only be used as classroom space as a last resort. Sizing of these areas should be determined in the planning phases of new construction based on the size of the population and scheduled hours of usage.

Law library space is best organized separately yet contained in the same space as the general library for supervision purposes by library staff. An alcove equipped with carrels and typewriters that is separated off from the rest of the library through the use

of glazing is recommended. The glazing and the use of acoustical materials in this area will buffer sound from the rest of the library area. The librarian's office and a workroom to receive and catalogue books is best located behind a reception type counter located at the entrance to the library. The work room should be equipped with a small sink. Wall shelving can be planned to allow for glazed side lights to be strategically located to allow casual supervision of the library area from the corridor by passing staff. The use of low shelving for free standing bookcases in the library area will also facilitate supervision.

Other specialized non-classroom spaces, such rooms equipped with audio-visual equipment, must be planned for and considered into design to ensure that the space is sized and wired adequately. Again, the use of carrels and acoustical treatments is appropriate.

**Vocational Education.** The objective of vocational training programs offered in correctional facilities for women is that they be responsive to the changing demand for marketable skills in the community and to the move away from traditionally "female" occupations. To meet this objective, jurisdictions planning new vocational space in an existing facility or for new construction should plan the space to be flexible in its use to avoid constraints when changing vocational training programs.

For the most part, vocational space should not be designed around a specific program, but designed as a large open space that can be easily subdivided and can accommodate a variety of equipment. Attention should be paid to providing sufficient height to ceilings and for the provision of utility hook-ups to accommodate alternative power source types and plumbing. Small vocational labs located adjacent to the vocational training area are recommended to provide a more appropriate environment for related classroom instruction. Adequate secure storage for tools, raw materials, and combustible materials must be planned and included into the design. Construction materials should be of the type typically used for light industrial shops.

Vocational training space for the computer sciences and other classroom based training opportunities can be accommodated in a more traditional classroom environment fitted and equipped for the program. As the U.S. market becomes more computer and service oriented, these types of vocational training programs are likely to grow in demand.

Vocational program offerings in the surveyed institutions are summarized in Table B. The range of offerings, while fairly wide, tends to cluster around traditionally "female" occupations such as cosmetology, secretarial, food service, garment manufacturing, and nursing aide.

Three respondents indicated a need for more vocational programming

space, and two identified their vocational space as poorly designed. Three respondents considered their vocational space to be poorly designed in that the configuration of existing space had hampered their ability to convert to accommodate new programs. An average of 6.2 vocational classrooms were available in the six facilities with vocational space (Montana has no vocational education, but offers an on-the-job training program with the adjoining state mental hospital).

**Table B. Summary of Vocational Program Offerings**

STATE	PROGRAM OFFERINGS
Louisiana	Upholstery, Office Skills, Sewing, Print Shop (planned)
Kentucky	Business Skills, Computer Skills, Auto Mechanics
Minnesota	Electronic Office, Nurses Aide
Iowa	Printing
Montana	Food Service, Secretary, Library Aide, Law Clerk (on-the-job training program with state mental hospital; no class component)
Pennsylvania	Cosmetology, Mini-Computer Operations, Secretarial/Word Processing, Bookkeeping, Care of Elderly, Food Service
North Carolina	Cosmetology, Secretarial Science, Computer Science, Culinary Arts, Upholstery, Welding, Electrical Wiring

**Life Skills Training.** This type of education encompasses a number of areas: financial management, employment application and interviewing, how to find adequate housing and child care, budgeting and household management, banking, buying on credit, etc. These skills are extremely important to breaking the cycle of dependency that is common among female offenders, and every effort should be made to provide them with the opportunity to practice them.

The Minnesota facility has developed an innovative approach to teaching life skills: minimum custody, pre-release inmates are housed in apartments within the facility. Each apartment for three inmates contains two bedrooms, a living room, and a kitchen. Inmates are expected to keep their apartments clean and cook for

themselves (food is supplied). This arrangement allows inmates to practice living in a group situation, which many will probably do after release.

At a minimum, provisions should be made for a life skills lab in the facility. This room should accommodate 20-30 people and should contain work tables, an apartment-style kitchen unit, a blackboard/flip chart, and a screen to show films or filmstrips. The room should also contain adequate open space for role-playing exercises and group activities. Video recording and play back capability is a valuable feed back tool for role-plays. A special environment for this instruction emphasizes its importance and promotes hands-on learning.

Job Readiness. This is a particularly important aspect of life skills training. Female offenders generally have poor employment histories and are worried about finding employment that will enable them to support themselves and their children. While the provision of such training does not necessarily impact facility design, it is important to mention that these services are important to the female offender. Job Readiness activities could include interview role-play, practice sessions on filling out job applications, and bringing speakers into the facility to talk about career options.

In addition to the more easily recognized practical life skills mentioned above, the general area of life skills training can be used to address the critical issue of how a woman effectively deals with the opposite sex. An argument can be made that this issue is better addressed in the counseling arena; if we are to even begin to scratch the surface, however, it must be addressed at every opportunity in as many ways as possible in every program the inmate participates in. Using the life skills format, the inmate can be taught a variety of personal relationship skills, much the same as she would be taught job readiness skills. She can be taught what she should expect to do for herself and what is realistic and unrealistic to expect from the opposite sex, from casual contact through a relationship. How she can discriminate between supportive versus exploitive attention, what types of behavior provides cues to the opposite sex, how to effectively deflect unwanted attention, and how to attract attention appropriately are few of the many skills that are important for her to learn. It is important to use role-playing techniques and have video recording and playback capability; the feedback this affords is a powerful tool in assisting the inmate to effectively change unconscious behavior.

## Industries

**Choosing Industries.** The choice of Prison Industries programs is influenced by several factors: the need of the correctional jurisdiction to have the inmates manufacture goods for use in the prison environment, the area marketplace, the constraints imposed by legislation that can requires prison industries to only provide goods and services for government agencies, the level of training demanded by a potential industry, and the amount of space and resources the jurisdiction decides to dedicate to its development. In addition, the mission of the Prison Industries component must be defined: Are the industries to be profit-making business enterprises, are they to provide needed products or services to correctional department facilities and be break-even operations, or are they to be designated to run at a loss because their benefit is to augment vocational training and/or reduce inmate idleness? Furthermore, special programs that include involvement of the private sector can also be considered. The mission or missions of Prison Industries will affect the industries selected for inclusion in the women's prison, the amount of space devoted to it, and the way in which it is designed.

Industries in women's facilities have tended to cluster around occupations traditionally viewed as "female": sewing, food service, secretarial skills, nursing aide, etc. In recent years (and in response to recent litigation), efforts have been made to introduce "heavier" industries to the female population (construction trades, auto mechanics, etc.). While the move toward parity of Industries opportunities to those provided in prisons for men is understandable, it should be noted that these programs may not equip female inmates to find employment in the community any better than traditionally "female" Industries. Both the garment industry and heavy industrial jobs are steadily declining; secretarial positions demand an increasing skill level. As the economy becomes more technology and service oriented, the correctional system needs to re-evaluate what Prison Industries should be--both to continue providing meaningful job training and to run commercially viable shops.

The required skill level of a potential industry deserves special consideration. Telemarketing, for example, may provide a cost effective operation and meaningful job experience, but a fairly high level of verbal skills--and, often, some computer skills--are required to get a telemarketing job in the community. Data entry presents similar problems. Unless the jurisdiction is willing to commit substantial resources and time to training industries participants, these industries may not prove viable because the number of inmates with adequate skills may not be large enough. In addition, industries work should be available to more inmates than just the few who are highly skilled and better educated. Therefore, jurisdictions should consider planning for several industries shops, even though, in a women's facility, those shops



are likely to be small. A garment shop, a food service program, and a data entry or telemarketing shop, for example, could provide work experience for inmates with varying skill levels and interests.

Prison Industries offerings, like vocational education, varied widely among the facilities surveyed, although they tended to cluster around traditionally "female" occupations such as sewing and sit-down assembly work. The states running Tourism Package Assembly industries (Kentucky, Minnesota, and North Carolina) reported that these industries do very well; in North Carolina, inmates will soon begin staffing an "800" phone line to answer questions about the state's tourism opportunities. The survey respondent reported that this should enable inmates to gain customer service skills.

Three respondents indicated the need for expanded industries programming and identified parity with industrial offerings in male correctional institutions as an important issue in identifying new programs.

Industries offerings are summarized in Table C.

**Table C. Summary of Industries Offerings**

STATE	INDUSTRY OFFERINGS
Louisiana	Garment factory
Kentucky	Printing, Tourism Package Assembly
Minnesota	Data Entry, Telemarketing, Tourism Package Assembly, Textiles
Iowa	Printing
Montana	None
Pennsylvania	Farm, Sewing, Engraving, New Commitment Package Assembly
North Carolina	Garment Factory, Tourism Package Assembly, Upholstery

**Number of Participants.** The number of inmates who will be employed in Prison Industries is influenced by available space, the type of program, and whether or not double shifts will be operated. Some industries, such as engraving or upholstery, are labor-intensive and do not employ a high number of inmates. Others, such as a garment factory, employ more inmates but do not necessarily offer

meaningful job training. Telemarketing, customer service/tourism, and data entry provide the most viable "middle ground"--employing a fairly large number of inmates while offering a meaningful job experience. The six surveyed institutions with Industries operations employed an average of 19.6 percent of the population.

**Design/Environmental Concerns.** Like vocational training, Prison Industries space should be flexible to accommodate changing and expanding programs; the ability to expand being particularly important since female inmate populations are anticipated to continue to grow and additions to existing facilities is not uncommon. Jurisdictions adding space to existing facilities or planning to construct new facilities should plan industrial shops and facilities that are adequately sized to accommodate such expansion. Attention should be paid to the provision of wiring and electrical voltage that will accommodate a variety of industrial opportunities to allow for flexibility and change; the ability to accommodate oversize equipment is also important. Noise levels in a large space can be reduced through acoustical treatments on walls and ceilings; space can also be subdivided with materials that absorb sound.

If the jurisdiction intends to install industries that will require the delivery and pick-up of a large amount of materials and goods, the industries component should be located in close proximity to the service vehicular entrance and be equipped with its own loading dock. Adequate spaces should also be provided for receiving, inventory, and bookkeeping functions. The inventory and bookkeeping spaces should be designed for computerization.

The respondent from Minnesota reported the most problems with the facility's industries space. In that facility, the data entry and telemarketing industries run two shifts to accommodate the number of inmates eligible for work; the respondent reported that it would be preferable to run one larger shift, but that the space will not accommodate more workers. Both Iowa and Montana reported a desire for more (or, in Montana, any) industries offerings, but that space or other considerations (e.g., inadequate wiring) hampered the installation of new equipment or set-up of new shops.

Exemplary Programs. Particularly considering its limited space, the Minnesota facility runs industries programs that provide training in marketable skills. While parity is an issue, it should be noted that overall trends indicate that "heavy" industry will become increasingly less important in the economy and that service jobs or computer applications will grow. Therefore, the Minnesota programs in data entry and telemarketing are good industrial choices for female inmates, as is North Carolina's addition of the inmate-staffed "800" telephone service.

## Family Programs

The majority of incarcerated women are mothers, and they tend to be very anxious about the effect their incarceration will have on their children. In addition, custody problems may complicate parent-child relations, and the isolated location of many correctional facilities may decrease the frequency of visits. Family (and particularly parent-child) programs are essential to helping female inmates deal with their anxiety, maintain strong relationships with their children, and become more effective parents.

The provision of these programs has a significant impact on facility design. The facility should not be an intimidating place for children, and inmates should feel comfortable bringing their children to it. In addition, space should be available so that mothers and children can spend private time together in a normalized, home-like atmosphere.

**Parent-Child Programs.** The most important parent-child activity that takes place in the facility is visiting. Survey respondents agreed that, if possible, these visits should take place in a dedicated environment. The surveyed facilities have met this need in several different ways: in Pennsylvania, for example, parent-child visits are held in a trailer on the facility grounds. The trailer is divided into areas for infants, young children, and adolescents, and inmates conduct visits under the supervision of a social worker. Minnesota has incorporated trundle beds into the cell design, allowing overnight visits on the housing unit. Kentucky and Montana offer overnight visiting, but space is extremely limited. Both facilities must limit participation to one inmate per week, and in Kentucky, the inmate and her visiting children sleep on mattresses in the chapel. The Minnesota, Iowa, and Pennsylvania facilities provided some dedicated space for children in the general visiting area; the other respondents indicated that such space would be desirable. North Carolina did not have any indoor children's space, but a landscaped playground was available on the facility grounds.

Two respondents raised questions about the effectiveness of special holiday activities, picnics, or other large-scale family activities. These events tend not to be well-attended; the respondents added that they thought this was partially because of the location of the facility and partially because caretakers are reluctant to allow children to interact with many inmates and many children--distrust of other mothers is difficult to overcome, particularly if these mothers are also incarcerated women. Smaller-scale or more private activities tend to work better, they reported.

Additional space for parent-child programs can be obtained economically if trailers or a small modular unit can be placed on

the facility grounds (such as the trailer used at the Pennsylvania facility). A dedicated modular unit could accommodate visiting (including a number of rooms for overnight visits) and play areas and provide a more normalized or "home-like" atmosphere away from the main institution. The child can be taken on a tour of the main facility or can attend activities there, but the visit can be kept private; moreover, the child need not disrupt regular visiting and facility routines.

New facilities should incorporate space for play, day visits, and overnight visiting. Multi-purpose rooms can be used for some of these activities, but it is important that children can feel comfortable in the facility--and that process is helped by having dedicated space furnished for children.

Other types of programs can also foster better relationships between parents and children. Letter-writing, phone calls, and using craft classes to make gifts for children allow inmate mothers to feel closer to their children and to improve their communication with their children.

**Parenting Classes.** All of the surveyed facilities offered some parenting classes; in Minnesota, completion of the STEP (Systematic Training for Effective Parenting) course was a pre-requisite for participation in overnight visiting. The Minnesota and Pennsylvania facilities also offered parent support groups outside of formalized classes. All respondents reported that demand for these classes was high. These programs should provide a specific focus on teaching the mother how to deal with her children during the transition period when she first returns home; few packaged parenting programs provide this critical information. Home visits during the pre-release stages and work release should be debriefed with knowledgeable staff to facilitate this process.

Parenting classes do not necessarily require a specialized environment. Academic classrooms, the Life Skills lab, or a multi-purpose room can be used. Sufficient space should be available for role play activities and the showing of films.

### **Mental Health**

The surveyed institution respondents agreed that ready access to mental health services were critical in women's facilities. These jurisdictions provided for their mentally ill inmates in a variety of ways: several facilities reported problems with arranging transfers for these inmates; treatment beds in other facilities are often filled, and the inmate must wait longer than is advisable for transfer. Respondents agreed that a multi-level system of mental health intervention is most advisable, and that a sheltered workshop would be beneficial as a component of mental health programming.

Only the Pennsylvania Women's Facility at Muncy had dedicated mental health housing (beyond infirmary or psychiatric observation housing). This facility operates a state-licensed 12-bed mental health facility on the grounds of the institution that serves the facility population of 546 inmates.. This unit has a complete psychiatric staff and dedicated space for counseling and other activities. Patients can be held there for up to 25 days pending a hearing for transfer to a state psychiatric facility. The respondent noted that this unit is adequate "at the moment" but that she sees the need for more mental health housing in the institution.

North Carolina will begin construction in the fall of 1989 on a 30-bed dedicated mental health unit providing three levels of treatment programming.

Jurisdictions have several options for managing treatment of their mentally ill female inmates. If the corrections department already operates or is planning a special needs or mental health facility, treatment units can be dedicated for women requiring inpatient care. In some jurisdictions, routinely transferring more highly disturbed women to state hospitals may be the best solution because there are not sufficient numbers of them to warrant a dedicated treatment unit. However, if this is the case, then a sheltered and supportive living environment for them when they return should be planned. Regardless of the inpatient solution, however, a continuum of mental health service delivery should be developed to identify and support the mentally-emotionally disturbed female according to her level of need. This includes the provision of transition and linkage services to prepare the mentally-emotionally disturbed inmate for her return to the community on parole.

**Inpatient Mental Health Care.** The decision to include an environment in which to provide intensive treatment for the mentally ill female inmate population in-house is influenced by several factors: the size of the mentally ill population, their level of dysfunction, the proximity of the facility to a professional community from which mental health staff can be hired, local community treatment resources, and correctional department policy. Because mentally ill women form a very small percentage of a jurisdiction's inmate population, development of intensive inpatient treatment services for them in the correctional environment has not, until recently, been seen as a priority; older facilities have not been designed to accommodate them.

The ability of correctional jurisdictions to treat an inmate in acute crisis against her will varies. For the most part, strict administrative rules or legislation govern this process to prevent abuse in the correctional setting; traditionally the mission of corrections has not been to provide mental health treatment. The experience of many correctional jurisdictions is that the system

of due process to get the inmate to be accepted into the mental hospital is long and arduous to negotiate, meanwhile the inmate suffers unduly. For the most part, this is resolved through an emergency transfer to a local community or state mental health facility, based on a finding by two psychiatrists that the inmate is an immediate "danger to herself or others" ; and due process take place after the fact.

Once in the hospital environment the inmate is assessed, force medicated, quickly stabilized and then returned to the correctional institution. Unfortunately, unless the correctional jurisdiction has a dedicated mental health unit, the inmate is returned to general population or placed in protective custody, which is not the optimal solution. Despite the best attempts on the part of medical and psychology staff to provide support in this environment, the inmate often decompensates and the cycle begins anew; transfer to the mental hospital becomes a revolving door. Therefore, at minimum, a dedicated housing unit designed to facilitate the delivery of a higher level of mental health care than is available in general population is advisable.

If a jurisdiction is committed to planning a special unit within its women's facility for mental health treatment, levels of care must be defined and a database developed to quantify the services that it will be necessary to provide. This in turn provides the information necessary to define the number of beds required for inpatient care. This information is vital to the unit design, treatment planning, and unit staffing. Moreover, treatment beds represent an expensive resource and, as such, should be considered the most intensive option in a continuum of services; therefore, assessment of need will help to insure that enough beds are built and that plans have been made to use them effectively.

In planning a special mental health treatment unit, it is important to clearly define the population to be served in this unit in behavioral terms. If the institution will be required to hold women in acute crisis pending authority to transfer her to a mental hospital for treatment, a higher number of cells that are sized to accommodate the use of medical restraints will be needed than if inmates can be treated against her will in this mental health unit. Acute crisis beds also need to be located so that direct observation by staff is facilitated; they also need to be stripped of all equipment that the inmate could use to harm herself. A separate acute care unit for women in mental health crisis is desirable, but may not be feasible if the female inmate population is small. If this is the case, then care should be taken to develop an acute care area within the unit that provides visible access, but which also has some sound separation.

An acute mental health unit should be located adjacent to an intermediate treatment unit that provides a less restrictive environment and a more active treatment program. Both of these

units should be located close to the medical infirmary to facilitate the proximity of medical and mental health staff in the care of mutual clients. Care should be taken to make the mental health environment as "normalized" as is feasible and attention should be paid to development of the interior of the unit so that it is conducive to treatment and does not exacerbate symptoms. For example, colors used in the unit are important and should be chosen with care as certain colors can overstimulate an aggressive patient and under stimulate a depressed one; attention should be paid to the provision of acoustical treatments to buffer sound; textures are also important.

The jurisdiction also needs to determine the treatment approach, model, and mode of service delivery, because this will impact the number and type of spaces to be included in the design. For example, if the facility chooses to develop a therapeutic environment in which to provide intensive treatment, the jurisdiction should include offices for the treatment staff and rooms in which to conduct group therapy and therapeutic recreation in the housing unit, instead of separating the treatment staff from the inmates, which is more traditionally the case in correctional institutions. Placing treatment staff in the housing unit promotes behavioral observation and interaction between patients and these staff, which creates a more supportive therapeutic milieu, provides treatment staff with a higher degree of familiarity with the patient and her issues, and decreases the tensions and fears that exacerbates acting out behavior. When treatment staff are separated from the population they serve, there is a tendency for them to only interact with the patient by appointment and the above benefits are lost.

The process through which mentally ill inmates are assessed and assigned to these beds also requires definition. A diagnostic process should be established to insure that mentally ill inmates are identified and assigned to the appropriate level of care in the least restrictive environment; a mentally ill woman should not be kept in an intensive treatment environment if she is sufficiently stable to be treated in an environment that allows her to be more actively involved in everyday programs and activities. The intake process should include a mental health screening and, even though she may not be in need of services at that time, a system for periodic checking and referral for evaluation should be in place throughout the inmate's sentence in the event she begins to exhibit signs of decompensation.

**General Population Services.** Inpatient treatment beds alone are not sufficient to meet the needs of mentally ill inmates. Follow-up mental health services need to be provided for women when they are discharged from the special mental health unit and return to general population. Just as the discharged mental patient must find support in the community (specialized housing, clinics, therapy, etc.), the inmate who is discharged from inpatient care

must find support in the institution. Services for mentally-emotionally disturbed women who may never be sufficiently disturbed to be housed in a special mental health unit are equally important. Institutional programming should include psychological services, psychiatric review, medication monitoring, counseling or follow-up therapy, and transition/linkage services, as need dictates. This could also include a sheltered living situation, where inmates live together but receive day treatment services or mainstream into general population activities during the day. A mental health clinic area could be located adjacent to the mental health unit that provides space in which inmates in general population to receive these services. It should be designed to accommodate group therapy, individual counseling, and therapeutic recreation. This will facilitate the ability of mental health staff located in the mental health unit to provide some of these services.

Decisions regarding the management and treatment of mentally ill inmates can have tremendous spatial impact. A jurisdiction must carefully evaluate the extent of services needed and make decisions regarding the type of treatment and the delivery system in order to cost effectively meet the needs of these inmates. Augmenting general population services, contracting local mental health beds in the community, and providing a sheltered living environment in the institution, for example, may prove more cost effective in a jurisdiction without a high number of acutely dysfunctional inmates. If the facility is being renovated or expanded, existing housing units can be modified to include spaces in which to provide mental health services and redesignated for inmates requiring a sheltered living environment, rather than investing in construction of new treatment beds. Housing the more acute and chronically mentally-emotionally disturbed population together, assigning specialized staff to that unit, and providing a higher level of programming for these inmates than is available to those in general population may enable a jurisdiction to meet its needs with minimal construction costs.

### **Substance Abuse**

As with mental health care, the type of substance abuse treatment programming that will be provided in the institution must be planned so that space in which to provide it can be included in the facility design. The possibilities for substance abuse treatment run along a continuum of services ranging from education programs to support groups (such as Narcotics Anonymous), to time limited counseling programs for women in general population to intensive transitional inpatient treatment; the jurisdiction must select which options it wishes to implement, given the needs of the population and the goals of the jurisdiction regarding the amount of resources it wishes to dedicate to substance abuse treatment.

All surveyed institutions provided some level of substance abuse



counseling; however, the survey instrument did not attempt to determine the level or intensity of treatment. No surveyed facility had dedicated intensive substance abuse treatment units. North Carolina ran a three to four week program, during which time the women participating in the program were housed together. Treatment included Alcoholics Anonymous and Narcotics Anonymous groups at all facilities. Minnesota ran a day treatment program but did not house participants together.

Increasing proportions of women are being incarcerated for drug-related offenses; therefore, substance abuse treatment should be given the same emphasis for female inmates that it is receiving for male inmates. In addition, female offenders typically exhibit a higher rate of alcohol abuse than male offenders, so treatment for women needs to address both alcohol and drugs.

A comprehensive substance abuse service delivery system should include a addiction severity assessment at the diagnostic stage at intake, mandatory substance abuse education, substance abuse counseling for inmates in general population, and intensive treatment when the inmate nears release which provides transition and linkage services for follow-up in the community to which she will return. The intensive treatment option is, of course, the most costly and the one few jurisdictions will attempt. Alternatively, the facility can decide to house together the women who are interested in receiving substance abuse counseling. Doing this fosters the development of a therapeutic environment, which may be reinforced by adopting the principles of the therapeutic community. Women who demonstrate an unwillingness to abide by these principles are returned to general population. With a motivated group of women in a supportive environment it is possible to address some of the deeper underlying issues of substance abuse and low self esteem, such as child sexual abuse experiences, that cannot be addressed in general population.

There are spatial implications to providing substance abuse programming regardless of the degree of intensity. AA and NA meetings require an appropriately sized room; general population education and counseling services require space; a dedicated housing unit also must be designed to provide rooms for group therapy and one-to-one counseling. Multi-purpose rooms can be used in most cases for substance abuse services for women in general population, however, it is important to realistically assess all the uses that multi-purpose rooms are being used for during the planning process; often an insufficient number of these rooms are planned and they end up being heavily scheduled and programs are curtailed as a result.

In larger facilities it is recommended that multi-purpose space be designed into the housing unit to allow services to come to the inmate. This provides the highest degree of flexibility; it minimizes escort and correctional officer supervision and allows

services, particularly volunteer services, to occur during evening hours when staffing is lower but the availability of volunteers is higher. Alternatively, or in addition, if management is decentralized and housing is designed in clusters, each with its own activity center, multi-purpose counseling and group meeting space can be located in the activity center and shared by women from several units. Again, overall use of these rooms must be assessed to ensure that there will be sufficient space available for service delivery to take place

## **Recreation**

Recreational activities form an important part of the prison environment; they provide needed release of tension and allow opportunities for physical exercise. Female inmates exhibit different preferences and needs in recreation programming than male inmates. Women do not typically participate in team sports, and they are more drawn to hobby and craft activities than men. These preferences have significant impact on the design of the facility.

**Type of Program and Facilities.** Given the preferences of female inmates, decisions need to be made during the planning process about the types of programs that will be offered. Physical exercise alternatives could include aerobics classes, exercise rooms with stationary bicycles, treadmills, and weight equipment. Similarly, hobby/craft activities can range from macrame, (which requires no dedicated space) to weaving (which requires special equipment but not special rooms) to ceramics, leathercraft, or jewelry making (which requires special equipment, dedicated space, and supervision/security for the use of potentially dangerous materials and equipment).

Because female inmates tend to be less interested in team sports, a centralized gymnasium is not necessarily essential to an effective recreation program. However, if a gymnasium is not planned, alternative facilities should be provided to cover activities that are often held in a gymnasium, such as those which require an auditorium and stage. Activities that require more expensive equipment, such ceramics which require kiln and pottery wheels, would be centralized, as would an auditorium, dance studio, or other specialized space; however, an exercise room could also be incorporated into the housing unit design to allow some equipment (exercise bicycles, weights) and classes to be held on the unit. Outdoor recreation space can also be provided off the housing units.

All survey respondents noted the different preferences of women regarding recreation programs. One respondent pointed out that, since women's institutions tend to house a broad range of ages and lengths of sentence, recreation programming needs to be sensitive to the different requirements of different sub-populations.

Four of the seven institutions surveyed rated their recreation facilities as adequate. The three facilities without gymnasiums (Iowa and Montana had none; Pennsylvania had a half-court gym which was closed for renovation at the time of the survey) indicated a need for one. These facilities were currently using outdoor recreation and other spaces (auditorium, visiting room, etc.) for small-group activities or individual exercise. Hobby and craft activities were reported to be very popular with the women, but the need for dedicated space sometimes limited ability to provide a full program. The Minnesota facility incorporated a bowling alley into the facility design.

Exemplary Programs. The Montana Women's Correctional Facility, despite its lack of a gymnasium, runs a mandatory physical fitness program. Once cleared by a physician, the inmate participates in an exercise program that is both competitive and individualized--inmate proceed at their own pace, but the respondent reported that competition exists among the inmates to become proficient at a particular exercise area (running, sit-ups, etc.). The respondent also reported that this program has increased inmates' self-esteem, fostered health-consciousness, and actually decreased sick call contacts.

Outdoor Recreation. Women's preferences in recreational programming can be incorporated into the design of outdoor recreation areas as well. Large spaces, such as would be used for football, could be landscaped into walking/jogging trails. Seating could be placed in the outdoor recreation area. While the opportunity for some team sports (e.g., softball) should still be available, planners should take into account that, on the whole, women enjoy being outdoors more than they enjoy playing outdoors, and that women tend to pursue individualized exercise programs.

### Counseling

Perhaps more than any other correctional population, female inmates need the personal attention and support provided by counseling. Counseling is different from mental health treatment--it is usually not as formalized, it does not involve physicians, and it can take a variety of forms. Three particular types of counseling--spiritual, situational, and support groups--are discussed below.

Spiritual Counseling. No evidence exists to suggest that female inmates are more likely to attend religious services or access religious counseling than male inmates. Religious services and chaplain counseling should be available to accommodate inmates of all faiths; the facility should, if at all possible, have a dedicated chapel and dedicated chaplain offices and/or counseling rooms. In addition, if need is indicated, alternative spiritual

activities and resources (meditation, tai ch'i, etc.) may be explored.

**Situational Counseling.** Inmates need help dealing with day-to-day concerns, both inside the institution and issues involving their families, legal status, etc. This counseling often takes the form of contact with case managers or correctional counselors and constitutes the inmate's primary point of contact with institution staff. Correctional officers or other unit staff also perform this function to some extent.

Situational counseling can be provided either through regularly scheduled sessions or on an as-needed basis; a combination of these approaches is recommended, with additional contacts according to inmate need. Inmates new to the system, for example, will probably require more frequent counselor contacts, as will inmates with special needs (mental health, substance abuse, legal or custody issues, etc.). These inmates may be assigned to a particular case manager/counselor, who carries a smaller caseload because these inmates need more attention. Inmates who are low functioning should be assigned to a case manager/counselor who has a smaller caseload, because these inmates require time and attention over and above that required by inmates of average intelligence.

Depending on the facility's management approach, case manager/counselor offices can be located either on the housing unit (decentralized) or centrally. Placing case managers close to inmates fosters beneficial inmate-staff relationships and provides casual supervision. Alternatively, if housing is organized into clusters and unit management office space is provided in the unit activity center, case managers/counselors will be located here; if this approach is adopted, offices, secure records storage for the inmate working files (the main inmate record may be kept in a central records area or could be kept in this location), and a staff room should be available. Most case manager/ inmate contacts would take place in the case manager's office, which should be sized to accommodate the staff member and two clients and should be sound-isolated to ensure confidentiality. At least one or two counseling office should be designed into each housing unit, depending on the number of inmates it is designed to accommodate. Centralized counseling/case management services would require larger spaces for records storage, support staff, and inmate waiting.

**Support Groups.** One of the most effective ways in which inmate can receive counseling is through support groups. These groups allow inmates to discuss topics of mutual concern in a non-threatening, open atmosphere. The decision to provide support group programming--whether those groups are formal and run by a psychotherapist or informal peer groups--increases the facility's need for flexible or multi-purpose space. Support or peer groups generally do not require specialized facilities, but they do

require quiet, private space. Multi-purpose rooms located in the housing unit that can be reserved for these activities are recommended.

Incorporating support group space into a facility's mental health environment is not recommended, particularly if severely disturbed inmates are housed within that environment. In addition, centralizing support group space makes it necessary for inmates to move to attend the group, which may entail escort. Traffic flow should be minimal in a dedicated mental health unit both to insure security and to facilitate the development of a therapeutic treatment culture on that unit.

Furnishings in support counseling spaces should be limited to sufficient chairs to seat the desired number of participants without creating barriers between them through the presence of tables. If the support group counseling sessions are such that inmates are expected to take notes, desk/chair units are recommended.

All of the surveyed facilities provided some level of support group programming. Respondents indicated that female inmates were in particular need this kind of small-group interaction and that important common issues can be addressed effectively in this format.

The survey was not designed to assess the variety or effectiveness of each facility's programming; rather, it was intended to discern what kind of space is best for these programs and whether each facility felt its space to be adequate. Therefore, exemplary programs are not discussed here.

Survey respondents reported that locations for support groups ranged from specially designated rooms in a mental health setting to a facility's auditorium or visiting rooms; facilities with at least some designated counseling space generally offered a wider range of programming and rated their space as more adequate than those that operated support groups in spaces intended for other activities. Only the Minnesota facility had dedicated program space on the housing units. All other facilities used centralized space for support groups.

Support group programming should include groups dedicated to specific women's issues, particularly the issue of abuse. The majority of female inmates have experienced some level of physical, sexual, or psychological abuse; the support group format has been proven very effective in addressing these issues.

Summary of Program Services

SERVICE	LA	KY	MN	IO	MT	PA	NC
Adult Basic Education	.	.	.	.	.	.	.
GED preparation and exam	.	.	.	.	.	.	.
College courses	.	.	.	.	.	.	.
Vocational education*	.	.	.	.	.	.	.
Substance Abuse programming	.	.	.			.	.
Support Groups	.	.	.		.	.	.
Gymnasium	.	.	.#				.
Number of academic classrooms	2	1	2	4	2	15	6
Number of vocational classrooms	4	4	1	0	0	15	7
Percentage participating in academic programs (full- and part-time)	NA	20	78	50	45	24	75
Percentage participating in vocational programs (full- and part-time)	NA	23	31	8	NA	38	25
Percentage employed in Industries**	12	7	54	20	0	6	19

\* See Table B for a summary of vocational offerings.

\*\* See Table C for a summary of Industries offerings.

# Inmates in this facility use the gymnasium in the state hospital. The facility is located on the state hospital campus.

NA = not available

## INSTITUTION SERVICES

Correctional facilities are communities in miniature: they provide the housing, food, health care, employment, and recreation that community residents access in many different locations and through many different methods in one centralized location. While program offerings are an essential part of the correctional environment, institution services are also essential to meeting inmates' basic needs. Well-planned service components contribute to the smooth operation of the facility.

Three important service areas are discussed in this section. Medical care is perhaps the single most important service a women's correctional facility provides. The unique needs of a female population has direct impact on the types of care provided and the physical environment. Food service and institutional support are also affected by the characteristics of a female population. Each of these areas is discussed separately, with survey results incorporated under the topic.

### Medical Services

Historically, female inmates use prison health services much more often than male inmates. Women also have additional health care needs, such as gynecological examinations and pre-natal care. Much of the litigation initiated by female inmates concerns their right to access adequate health care. All these concerns have contributed to the increased emphasis on health care in women's facilities, and jurisdictions planning to construct a women's facility should pay particular attention to defining the health care delivery system that will be used and designing an environment that will support that system.

Chief among planning concerns is the need to determine which services will be provided in-house and which will be accessed in community hospitals, clinics, or doctors' offices. These decisions are based on a variety of factors: the projected size and population of the facility, the availability of qualified professionals to staff an in-house component, the number of inmates housed in the correctional facility, the feasibility of contracting services to be provided in-house, etc.

For a very small facility, it may prove cost-effective to escort inmates to community appointments; in larger facilities, it is usually less expensive to bring specialists into the facility. If the decision is made to establish specialty clinics within the facility, sufficient examination rooms and equipment must be provided.

Another critical planning decision involves the extent to which inpatient care will be available within the facility. While all

facilities should have the capability to provide infirmary care for emergencies, minor illnesses and post-hospitalization recovery, it may not be desirable to invest in equipment and staff to handle more intensive care.

The type of facility under consideration also affects which health care services are provided. For example, a converted or renovated facility may not be able to accommodate the range of services possible in a new facility, thus resulting in more community care.

If the facility is to accommodate a continuum of health care services such that only acute medical care is to be provided in the community, space must be provided for screening, assessment, ambulatory care, and infirmary care. This is true whether the jurisdiction plans to staff the medical component themselves or contract it entirely. Administrators must also consider whether they want the design of the full-service infirmary to meet Joint Commission on the Accreditation of Health Care Organizations (JCAHO) standards.

The location and design of a medical services component can inhibit or facilitate service delivery. Ideally, the medical component should be located in relatively close proximity to the housing units to facilitate inmate access to it. It must also be located to allow for easy access by an ambulance in the event an inmate must be transferred from the medical component to a hospital. If the facility is sufficiently large, it may be feasible to design a special needs housing cluster that would locate the ambulatory care, infirmary care, and mental health components together. The ambulatory and inpatient care components of medical services should be separated. This can either be achieved through physical barriers or through the location of a nurses station between the two areas.

Appointment scheduling for ambulatory care services allows staff to control extraneous inmate movement through the ambulatory care area. In addition, access to the medical care component can be through a controlled sallyport. A secure waiting area, sized to accommodate the projected number of inmates who would be waiting at any given time for medical services appointments, could be located to connect directly with the sallyport. Entrance to the ambulatory care area from the secure waiting area is then regulated to occur only when the inmate's presence is requested by the health care staff. Installation of an intercom could decrease the need for officer escort.

The survey revealed a wide variety of health care arrangements at the institutions examined. All the institutions rated their medical services as adequate and provided some level of inpatient care, at least during daytime hours. All facilities had some in-house sick call and physical examination procedures in place. Only four of the facilities offered on-site gynecological examinations,



and only one had on-site examination by a specialist other than a podiatrist or optometrist.

The North Carolina respondent, having recently supervised the construction of their new medical services component, reinforced the point that provision of services in-house is, in the long run, economical because it greatly reduces the number of correctional officer hours spent in transport of patients.

The following areas are important in the design and functioning of a medical component. Relevant survey results are included in the discussion.

**Health Care Planning and Education.** The average female offender has neglected her health prior to becoming incarcerated; therefore, she is likely to need both medical attention and preventive education to help her develop skills to care for herself better in the community after release. Sex education should be an important element of this curriculum. In addition, pre-natal education is an essential part of women's health care (see "Pre-Natal Care" below). None of the surveyed facilities had extensive health education programs in place, though several respondents acknowledged the need for these programs.

The provision of these programs does not have a significant impact on facility design. Classes can be conducted during evening hours in vacant classrooms or multi-purpose rooms.

**Sick Call.** The sick call process usually begins on the housing unit, where inmates request to see medical staff. An efficient, effective sick call screening process can save time and reduce congestion in the medical services area. If possible, a nurse should conduct sick call screening on a daily basis; a small triage area with a sink should be incorporated into the housing unit design for this purpose. The nurse can screen complaints and schedule appointments with a physician, physician's assistant, or nurse practitioner as appropriate. The nurse can also dispense over-the-counter and prescription medication during sick call; the triage area should contain adequate circulation space for this purpose. The poor written communication skills of many female inmate make a written request for medical attention less effective than triage by medical staff on the housing unit.

Providing sick call on the housing unit need not have a significant spatial impact. Screening staff will not conduct physical examinations on the unit, so a specially equipped exam room is not necessary. A medication cart is recommended for use to eliminate the need for secure medication storage or refrigeration on the unit. Housing unit staff can schedule screening to minimize congestion.

**Pre-Natal Care.** All surveyed facilities housed pregnant inmates

in general population (in Pennsylvania, the inmate was moved to the infirmary for the last two weeks of term). The average number of pregnant inmates (at any given time) for all facilities was 7, ranging from a low of 2 (Iowa, Minnesota, and Montana) to a high of 23 (North Carolina). All facilities also provided some level of pre-natal care; five offered in-house care, while two used community providers.

Adequate pre-natal care should encompass more than periodic physical examination. Education is also an important component of such care. In addition, the special needs of pregnant inmates should be considered. The North Carolina facility (which has the highest number of pregnant inmates of the surveyed institutions) has dedicated a housing unit to pregnant women; this unit has special furniture, classroom space, and additional "quiet" space. The respondent reported that inmates find the unit very helpful in handling the physical and emotional demands of pregnancy, and that the inmates there tend to form strong bonds that help them after delivery.

All surveyed institutions transferred inmates to community hospitals for delivery. The possibility of complications necessitating the use of special equipment or procedures makes delivery in the facility highly undesirable.

**Examination and Clinic Facilities.** Adequate (and adequately equipped) examination space is an important factor in the design of a facility's health care component. As mentioned above, a jurisdiction must define the extent to which medical services will be provided in the facility before the design process begins. At a minimum, basic exam rooms should be available for ambulatory, non-emergency care. Special equipment (for podiatric, orthopedic, neurological, dermatological, or other specialist appointments) may not be necessary if the jurisdiction plans to make these services available in another location--whether a community hospital/clinic or another correctional facility. It should be noted, however, that extra exam rooms are easier to add during new construction than later; that is, the jurisdiction may want to consider adding space to give themselves the option of providing more in-house services at a later date.

Proximity of available care is an important factor in determining whether to provide a service in-house or in the community. Montana, for example, contracts most medical services with the state mental hospital because its facility is located on the hospital grounds. In Iowa, inmates are transported 100 miles for scheduled physician appointments in Iowa City. The average distance to a hospital for emergency services was 6.4 miles; for scheduled appointments, 22 miles. An average of 2.2 exam rooms was available in each surveyed facility.

Optometry and dental equipment should be available in the facility,

since a significant number of inmates are likely to require these services and it would probably be most cost-effective to provide them in-house. Gynecological and pre-natal examinations should be available as a standard in-house service.

The examination area should be designed around a central nursing station that provides a barrier to control and direct inmate movement into the various examination and service areas. After completion of the examination or procedure the inmate is escorted back to the nursing station by the health care practitioner; interventions ordered by the practitioner are transcribed, and additional or return appointments are scheduled, at that time.

Minor outpatient surgical procedures, such as suturing, can be handled in-house if the facility is designed and equipped to provide them. More comprehensive surgery is better managed through a local provider. To accommodate this need, one special examination room should be designed for special procedures (electrocardiograms, minor suturing, cast change, emergency trauma interventions). This room should be at least 240 square feet in size to allow for a high intensity ceiling light and 360 degree access to the examination table and storage for special equipment and supplies. This special procedure room would not be used as a general examination room. The special procedure room should be secured when not in use, although emergency access must be available to health care staff.

The examination/clinic area should also contain space for storage of records and equipment. The central medication storage area or pharmacy should also be located close to this area.

**Infirmiry Care.** All surveyed institutions made some attempt to provide infirmiry care. This ranged from a new medical services building in North Carolina containing 36 infirmiry beds (5 semi-private rooms, 3 four-bed wards, 2 isolation rooms, 2 maximum custody rooms with lockdown capability, and 6 mental health beds) to day infirmiry care only (due to staff shortages) in Minnesota. Pennsylvania, Kentucky, and North Carolina had all recently completed or were currently undergoing expansion of infirmiry beds because of their rising facility populations.

Infirmiry care should be available for women who are too sick to remain in their housing unit but who do not require hospitalization. Smaller facilities may choose to locate acute mental health housing in the infirmiry to minimize staffing. The number of beds to be included in an infirmiry will depend on the number of women it is to serve; if there is the likelihood of housing being added at a later date, the infirmiry should be oversized to accommodate the added population.

The infirmiry care component should be designed with a mix of single cells for high custody inmates and multiple-occupancy rooms

for lower custody patients. These cells or rooms should be designed to insure maximum visibility from the nursing station; glazing may be used to facilitate this. Installation of a nurse call system is also recommended for all infirmary beds.

Single occupancy isolation rooms should also be included in the design to allow for women with infectious diseases to be cared for in the infirmary setting. Of the total number of isolation rooms required, half should be designed for body fluid isolation with appropriate clean and dirty linen disposal, and half for respiratory isolation (negative pressure) with vestibules equipped with a sink and clean/dirty linen disposal, storage for linen, and other direct care supplies.

Attention should be paid to adequate sizing of the nursing station if medication dispensing is to take place there, or for a separate medication dispensing area. Survey respondents cited inadequate medication space as a major deficiency of their medical areas.

Corridors and doors in the medical component should be designed to allow sufficient space for wheelchairs and for inmates to be moved on a gurney to an ambulance in the event of transfer to a hospital.

**Exemplary Programs.** In addition to the expressed need for more in-house medical capability, respondents expressed concern regarding the need for the medical services area to be designed to serve the dual needs of both treatment and security and control of inmate flow through the medical services area. Visibility from the nurses station was also considered a problem as was the inability for inmates to contact the nursing staff from an infirmary bed if they needed to do so. Circulation space for the dispensing of medication was also cited as a problem. In addition, an efficient way to transfer inmates to a hospital was considered desirable.

The North Carolina Women's Facility at Raleigh completed construction of a new medical services component in 1989. This medical services component is designed to provide a complete range of ambulatory and inpatient basic nursing care for 600 inmates. The component provides for a variety of security levels and a wide range of inpatient services: it contains 5 examination rooms, 1 triage room, and outpatient surgical facilities.

The North Carolina medical component was the result of three years of planning and has responded to many of the special considerations posed by providing health care in a prison environment. Not every jurisdiction would need such an extensive health care system; Montana, for example, has a hospital less than 100 yards from the women's facility. However, careful planning and, as the respondent reported, "a sharp eye for the wisest way to spend your money" have resulted in a well-designed and responsive system in North Carolina.

In-House Health Services

SERVICE	LA	KY	MN	IO	MT	PA	NC
Sick Call	.	.	.	.	.	.	.
Physical Examination	.	.	.	.	.	.	.
Overnight Infirmary	.	.			.	.	.
Isolation	.	.	.	.		.	.
Physical Therapy		.	.			.	.
Specialist Exam							.
Gynecological Exam	.			.		.	.
Pre-Natal Care	.		.	.		.	.
Dental Care	.	.	.	.		.	.
Laboratory Services	.		.				.
Dedicated Inpatient MH Rooms	.					.	.
Counseling Services	.	.	.	.	.	.	.
Number of Inpatient Infirmary Beds	13	11	3*	0	2	22	36
Number of Inpatient MH Beds	1	0	0	0	0	12	6

\* Infirmary is staffed for day coverage only.

## Visiting

Female offenders are typically less likely to receive visitors than their male counterparts; this may in part be due to the isolated locations of many women's facilities. Nevertheless, visiting plays an important role in helping the inmate maintain contact with family and friends, and should be considered an important institutional service.

All surveyed institutions provided primarily contact visitation; a total of four non-contact visiting booths in all surveyed facilities. Since contact visiting is the norm in women's facilities, visiting areas should be subdivided into conversation groups to allow some measure of privacy.

The surveyed institutions reported a variety of problems with visiting. Most concerns centered on lack of dedicated visiting space or the effect crowding had on the number of visitors. Three of the facilities had to restrict the number of visitors allowed, and one had to restrict the length of the visit. Two facilities offered visiting only on weekends because of lack of space.

The survey revealed that dedicated visiting space should be considered a priority in building a new women's facility, and that adequate visiting arrangements are essential when planning a renovation or conversion. Institutions built for uses other than correctional facilities rarely contain suitable spaces for visiting; therefore, visiting space should be high on the list for renovation or expansion.

The major security issue in visiting is the potential for visitors to bring contraband into the facility. In women's facilities, where a larger number of children will be visiting, staff face particular problems in dealing with the difficult issue of conducting adequate screening while being sensitive to the visitor. All visitors are screened upon entrance into the facility. Lockers should be available for storage of visitors' coats and valuables, and visitors should pass through a metal detector. If more extensive search procedures are required, female officers should be on duty to pat search children.

## Food Service

All survey respondents indicated that female inmates have different food service needs than male inmates. Respondents also indicated that women take a greater interest in how well food is prepared, presented, and served. The major areas of concern in food service are discussed below.

**Dining Area Location.** All the surveyed facilities had centralized dining rooms. While this is common in both older and smaller

facilities, new facilities are often locating dining on the housing unit if a decentralized management concept is adopted. Decentralized dining allows for a more intimate atmosphere and minimizes inmate movement. If it is adopted, a dining area must be incorporated into the housing unit design; unit seating, with four or six benches attached to a table, is recommended for dedicated dining areas, while stacking chairs are recommended if the dining area is to be used for another purpose as well. In a facility with larger housing units, multi-purpose dining rooms may provide useful space for other activities.

If decentralized dining is adopted, meals can either be transported from the central kitchen to the unit in pre-portioned thermal trays or a serving line could be located in the unit. Alternatively, if the facility is designed to cluster housing units together to facilitate unit management, a dining room could be located in the unit activity center and a serving line set up in it that uses a steam table and includes a salad bar. Smaller facilities would generally choose to centralize dining or use the pre-portioned tray method of food distribution; in either case, the dining area should contain a beverage station and storage for some dry goods (cold cereal, crackers, etc.). If dining is not done in the housing unit, a beverage station should be located there so that the women can access juice, coffee, or other beverages between meals.

Centralized dining rooms provide easier food distribution but can necessitate scheduling meals in shifts. If centralized dining is used, long "institutional" tables seating more than twelve inmates should be avoided in favor of smaller, more conversational groupings.

**Nutritional/Dietary Concerns.** All survey respondents said female inmates require a lower-calorie menu with more salads, fruit and vegetables. Menus planned for male inmates typically are high in fat and starch, and this can result in weight gain for female inmates, who generally exhibit fairly low levels of physical activity. Centralized dining rooms should incorporate a salad bar into their design; if dining is decentralized, a pre-portioned salad could be available as a standard option for lunch or dinner. In addition, pregnant inmates have special nutritional needs that must be accommodated, and female inmates are more likely than males to be on a special diet for medical reasons (high blood pressure or cholesterol, for example). Overall, menu planning for female inmates is likely to be more individualized than for male inmates; kitchens should be equipped to accommodate these needs.

**Commissary/Canteen and Inmate Services.** As with menu planning, commissary/canteen stock should reflect the different needs of female inmates. Fruit should be available for purchase, along with reduced-calorie drinks and snacks. This may result in a women's facility having a canteen purchasing operation that is separate from the men's facilities, and refrigerated storage may need to be

available for canteen stock.

The commissary/canteen operation can be located in the housing unit activity center in facilities with unit management. Another option is to create an area of the facility that simulates a "town square", with the inmate canteen, a "fast food" cafe, a newsstand, a shop area for inmate crafts, a hair care center, etc. This area should contain seating for adults and children, and it may be adjacent to an outdoor visiting/recreation area. Inmates can gain work experience in "real-world" situations by staffing these areas, which can be used both during visiting hours to provide the most normal type of visit possible, and during recreation periods for socializing and leisure skills development. Staff can act as shop supervisors and provide casual supervision of the area. If such an area is incorporated into the facility design, a staff control area or formal officer's station should not be part of it.

### Facility Support

A full-time equivalent of approximately 20 to 25 percent of the inmate population is generally required to provide an adequate level of facility support. In a women's facility, this figure may be slightly lower if more strenuous work (painting, portering, plumbing repairs, etc.) is done by male inmates from another facility or maintenance staff; however, administrators may choose to assign a higher proportion of inmates to clerical positions in this facility than they would in a men's facility, so the overall percentage of inmates involved in support work may not vary as much as anticipated.

If possible, work assignments should link with vocational training. Inmates enrolled in a horticulture program, for example, may also work on the grounds maintenance crew. Vocational training in culinary arts may link with kitchen work assignments. While such decisions do not have a significant spatial impact, they are important elements of the planning process if the goal is to provide inmates with meaningful training that can lead to jobs in the community.

Every effort should be made to minimize the number of male inmates or outside workers employed in institutional support--not just to minimize cost, but to offer the inmates useful job experience. Female offenders typically have minimal employment histories, so the opportunity to provide some job experience should be utilized.

The use of inmates for facility support impacts architectural design only in the sense that some equipment may need to be different than it would be in a men's facility. Kitchen equipment, for example, should be downsized, as women probably would not be able to handle very large or heavy utensils (e.g., 80-gallon kettles). For the groundskeeping crew, smaller riding lawnmowers



may be purchased. These considerations should be kept in mind during the planning process. It is possible to employ women to do most of the maintenance work in the facility; simple equipment modifications can easily be made to facilitate that process.

#### **COST CONTAINMENT MEASURES**

Women's correctional facilities are similar to men's facilities when considering total construction cost. Women's facilities must meet the same requirements as men's facilities in terms of American Correctional Association Standards, building codes, safety standards, etc. For this reason, it is essential that the mission of the institution be defined during planning; confusion over the role or responsibility of the facility can add to construction costs through over-incorporation of security hardware and physical barriers, which in turn reduces the flexibility of the design. Moreover, technology generally has not resulted in reducing staff or improving communication between staff and inmates. A thorough plan for managing and operating the facility will assist in determining the appropriate level of technology needed. The staff cost of using and maintaining the technology specified should be factored into its original price.

The type of construction, level of technology, and equipment choices are all directly influenced by the classification of inmates. The difference in construction cost per cell between a medium and a maximum custody institution can range from less than \$35,000 to more than \$100,000. If the institution is minimum security, some states allow more dormitory space, bringing the construction cost down even more. Dormitory space that incorporates private rooms or areas may be particularly suitable for female inmates.

At a conservative construction cost estimate of \$55,000 per bed, any new correctional facility represents a major expenditure. Nothing is inexpensive in the corrections field, but through careful planning and consideration of all available alternatives, administrators can realize some economies and ultimately get the most for their construction dollar.

The following areas should be considered for cost savings:

- **Labor.** Local costs represent a significant percentage of total construction expenditure. The cost and availability of local labor influences the type of construction used. For example, if labor is relatively inexpensive and easy to obtain, block or brick construction is usually used; in areas where labor is more expensive or scarcer, precast concrete and other types of prefabricated construction should be considered.

- **Facility Size.** The smaller housing units recommended for female facilities do not generally result in lower construction costs; a smaller facility will demand more security separation walls at a higher cost. Items unique to a women's facility--grooming areas, overnight visitation areas, etc.-- can also increase total construction cost. Planners must define security zones thoughtfully in order to place appropriate security barriers where necessary.

- **Security Hardware.** Along with careful definition of security zones, accurate coordination and location of security hardware, glazing, and security hollow metal may save thousands of construction dollars.

Proper classification of inmates will minimize the amount of specialized high-security vandal proof furnishings and fixtures that must be used. This allows the designer to use more conventional construction methods and provide more beds for the dollar. The "typical" high-security cell that meets American Correctional Association standards costs approximately \$20,000; careful allocation of these expensive cells is essential.

Careful programming of spaces will also allow security hardware to be reduced substantially. For example, if inmates are permitted to mingle with one another and with staff in dining, educational, and recreational settings, than constructing cells with stainless steel fixtures and high security locking sliding doors is probably an overreaction to security levels.

- **Construction Materials.** Some conditions of confinement in a women's facility allow for spaces to be separated into many smaller areas. Depending on classification, materials such as sheetrock and metal studs can be used for minimum security areas. Walls and ceilings may not require reinforcement except for structural purposes.

- **Site.** The first land to come available is not necessarily the best land for a correctional facility. Choosing the least desirable site may make it easier to acquire the property and gain community acceptance; however, correctional construction is especially sensitive to such factors as topography, surrounding land use, available utilities, access and climatological conditions. Saving money on acquiring the site can very well result in a substantial increase in overall construction costs as it becomes necessary for the design to overcome site inadequacies.

- **Management Approach.** Management approach can have a major impact on construction cost: the fewer the barriers between staff and inmates, the more money that can be saved on the

initial construction cost. This also reduces the amount of security equipment that must be maintained.

**Project Control and Coordination.** It is essential to determine the size and purpose of the institution before construction begins in order to avoid excessive spending. At each step in the planning, design, construction, and opening process, rigid control procedures should be followed. While some surprises and change orders are inevitable, history shows that the greater the emphasis on project control, the fewer the cost overruns. One important element of project control is coordination between the design team, the user agency, and special consultants in such areas as operational planning or food service. If all concerned parties work together to determine what the facility should contain, design decisions will be easier to adhere to and change orders will be minimized.

**Use of Prototypes.** It is not advisable to use a prototype of a men's facility for women, and many jurisdictions only build one female facility. Development of prototype women's facilities is not feasible on a state level. However, research should be done on the national level to facilitate development of prototype women's facilities suitable for medium, minimum, or mixed custody levels. South Carolina has recently developed a prototype method of construction allowing single-cell prisons to be built for approximately \$30,000 per bed (as compared to the \$55,000 national average); such a design could conceivably be modified for female offenders.

## SECTION IV: PROGRAMMING AND DESIGN OPTIONS

### THE PROGRAM DELIVERY SYSTEM CONCEPT

As the profile of the female offender indicates, the incarcerated woman is likely to come from a background of poverty, neglect, and abuse. She may have a history of emotional problems linked with drug and/or alcohol abuse, as well as poor academic and vocational skills and a minimal work history. Female offenders tend to recreate "family" relationships with other prisoners, they are less likely to engage in violence in the prison setting even in the face of crowding, and they maintain family and community ties. As has been noted earlier in this document, their behavior is strongly influenced by dependency.

Although some female offenders will identify with the criminal culture and may not be open to changing their behavior, the potential for a large percentage of this population to benefit from programming is high. Therefore, a strong treatment emphasis or program delivery system has potential for reducing recidivism.

Most women's prisons attempt to deliver some programs and services, and efforts are being made toward reaching parity with male prisons while maintaining a sensitivity to parent/child issues. However, correctional systems are slow to change, and existing facilities were not designed to facilitate new approaches. If a jurisdiction is going to build a new facility, the opportunity exists to implement innovative approaches to incarceration by designing a comprehensive and integrated program delivery system approach.

The key to a service delivery system is integration. Programs, services, and inmate activities combine to provide the prisoner with instruction and experiences to combat her deficits on all levels. Every experience the inmate has in the institution--from classroom work to job assignment to housing unit atmosphere--is part of the treatment experience. Because the inmate's deficits began at an early age, distorted perceptions and experiences from childhood contribute to her low sense of self-esteem, her feelings of dependency, and her perceived inability to take control of her life. These problems cannot be addressed simply through the provision of education and vocational training alone. It is necessary to help prisoners change their values and perceptions to encourage the belief that education and training will make a difference in her life. Therefore, programming should seek to break through the myths that support continued dependency; it should impart a cohesive message to the inmate that she can choose to take control of her future. Further, the system should offer practical opportunities for the inmate to develop to develop literacy, vocational, parenting, social, and leisure skills; that counseling and treatment are available to address problems associated with substance abuse, mental-emotional disturbance,

self-confidence, and self esteem.

To structure this process, the inmate's period of incarceration is viewed as having several phases. The first phase of her imprisonment is diagnostic; she is assessed and her needs defined. The second stage is the incarceration phase which focuses on problem resolution and skill development. The third phase is pre-release, when the prisoner begins to focus on preparing herself for work-release in the community. The last phase is work-release, where the focus is on reintegration into the community.

Optimally, this means developing a consistent and total treatment environment that provides the inmate with the opportunity to make choices and experience the consequences of her decisions. If the inmate does not choose to use the opportunities available to her, she can be prevented from negatively influencing those who do by being housed and managed in the manner her behavior requires. All personnel should be trained to support this philosophical approach in their communication with inmates so that a consistent message is given in everyday interactions between staff and inmates.

The physical design implications of this approach relies on removal of barriers that separate staff and inmates; counselor and program staff offices are placed in the housing units where inmates will be spending the majority of their time. Every effort is made to promote positive staff-inmate interaction. This concept also requires designing the facility so that inmates at the same stage of progress can be housed together to promote peer support.

Following describes how the environment would be organized in terms of sequencing diagnostic assessment, programs, services, and activities.

### Reception and Diagnostic Component

The programming process begins at intake. The newly admitted woman is housed in a diagnostic unit during this period where a comprehensive diagnostic profile is assembled. This includes social, psychological, academic and vocational, substance abuse severity testing, social functioning and a comprehensive medical evaluations are conducted. The medical evaluation is extremely important, not only to assess deleterious effects of substance abuse, but also to determine if the woman has sight or hearing deficiencies that may interfere with her ability to learn. This information is used by classification in developing each inmate's comprehensive program plan.

While the woman is housed in this unit, the facility requires that she attend an orientation class; this is the beginning of the program delivery system. It orients the women to the facility's philosophy and expectation that she will choose to avail herself

of the programming opportunities offered, provides an overview of each component, and describes her progression through them. A segment of the module speaks to the generic profile of the female offender and the forces that come into play to keep her dependent and repeating her cycle of self-destructive behavior, and how the programs in the institution can assist her in breaking this pattern. A staff representative from each program area, assisted by an inmate participant, should present the various programs offered. At this point the new inmate is also advised of the consequences of non-participation, which should be presented in a non-punitive way, as a natural consequence of her choice. A segment of this module can be dedicated to the usual orientation of inmates to rules and regulations, but it should be presented as housekeeping facts and not take precedence over the central message of the module.

The woman's first direct involvement in choosing to use what is there for her in the system is in development of her individual program plan. At this time, given her assessed deficits, strengths, and interests, a case manager works with her to develop a preliminary program of activity that begins to address her needs. This is used by classification staff in determining her initial housing assignment. The program plan is developed with incremental measurable goals so that the inmate can experience her progress. It is regularly updated with her case manager.

The Reception and Diagnostic housing unit should be designed and furnished attractively to reinforce the overall facility mission. Offices for the diagnostic staff, and spaces for group testing and the delivery of orientation modules should be located in it, or adjacent to it separated only by large double doors that are left open during the day and evening.

### **Housing Assignments**

Inmates should be assigned to a housing unit or cluster of units based on such considerations as security needs, custody level, and program plan. As they demonstrate involvement and progress they are reassigned so that the more motivated are housed together. These inmates are also provided with a higher level of privileges than others. Inmates requiring a higher level of security because they are predatory or demonstrate acting out behavior are housed together in a separate zone or housing cluster that contains required support space.

Housing should be designed to provide some measures of privacy; single cells or rooms are optimal, preferable in groupings of eight around a small dayroom/lounge type area within a larger housing unit. This will facilitate the development of peer cohorts that can have positive programming implications. Multi-purpose rooms and individual counseling spaces should be provided in the housing

unit.

### **Academic and Vocational Education, Institution Support Work, and Prison Industries**

A definite progression exists between literacy, academic education, vocational training, and prison industries should be developed that links the inmate's assessed academic competency and vocational skill level and interests. For example, if a woman has a very low literacy level she may not be at a level where she can participate in vocational training that requires her to read technical material. In this case, her programming should initially focus on literacy training and/or ABE, with a high level of tutorial work, balanced by participation in institution support work. A woman who has a higher literacy level but does not have her GED may participate in a split program of vocational training and academic education, with a half-day in each. A woman who has her GED, but has no work skills, may have a full time vocational program (which may incorporate institution support work, i.e., food service) and an evening or part-time advanced literacy training or higher education program. A woman who has completed vocational training, or who already has work skills when she enters the facility, may work in prison industries and pursue an evening or part-time advanced literacy training or higher education.

Whatever the combination, the objective is to develop a program plan with the inmate that puts the inmate into programming that will address her level of development. We know that she missed significant developmental steps; therefore, she must retrace those steps. First she must become literate, then learn a skill, then be provided with the opportunity to practice that skill in a work setting. Because communication skills are key to managing social and work situations, regardless of the individual's level of education, she should be expected to upgrade her literacy skills while incarcerated.

In addition to the comments on design for these program areas provided elsewhere in this document, facility plans would emphasize the provision of tutorial space in the housing units for volunteers to work with inmates on an individualized basis if this approach were used.

### **Programming for Special Needs**

Programming to address mental or emotional disturbance and substance abuse is an important part of the inmate's overall program plan. Unless the underlying issues to these problems are addressed, it is unlikely that the inmate's ability to maintain in the community will last regardless of how her ability to function on an academic and vocational level have improved.

If the woman is mentally ill, her program plan must be developed in conjunction with the mental health staff who are responsible for her treatment plan so that both are compatible and target realistic goals. This is important not only while she is in the institution, but also for preparing her return to the community on parole; aftercare planning will be a significant issue for these inmates when they reach pre-release.

Emotional disturbance is common among female prisoners and will need to be addressed in the general counseling arena or, depending on severity, through mental health counseling. Women who have been sexually abused or undergone some other significant physical abuse must receive counseling that focuses specifically on these issues. Resolution of them is key to her development of self esteem and her perceived ability to keep control of her life once she has returned to the community, where she will have to combat the very forces that contributed to her self perception in the first place. These same issues often underlie substance abuse, which is a problem for a large percentage of the female population.

Treatment for substance abuse and emotional disturbance should be addressed in conjunction with the inmate's need to develop other skills and so should be interwoven into her overall plan. As she moves into the work release phase of her incarceration, transition and linkage to community-based resources must be made so that she can continue to receive the support and services she will need as she reintegrates back into the community. If a woman's addiction problem is severe, she will need intensive treatment that is transitional in nature (provides intensive residential, pre-release, and community aftercare programming), which provides the extra support she will need to successfully transition back into the community. If this is not available in the correctional system, her program plan may be developed to include admission to an intensive community based residential treatment program instead of work release.

Development of specialized treatment units, mental health counseling space to serve inmates in general population, and the provision of adequate individual and group counseling space in the housing units, are described more comprehensively under "Programs", above.

### **Socialization Programs**

A significant proportion of female offenders become incarcerated because of crimes they committed as accessories to crimes committed by men with whom they were involved. In addition, female offenders often exhibit distorted perceptions of their roles and their relationships with men. The fact that physical, sexual, and mental abuse have characterized these relationships does little to change



inmates' ability to break the self-destructive cycle. It is widely acknowledged that incarcerated women suffer from low self-esteem. One of the keys to this problem lies in the inmate's view of herself in this context. Socialization programs provide a strong vehicle for teaching female inmates new values pertinent to their roles as women.

Socialization programs include parenting/family programs, life skills, and job readiness, they are key elements of the program service delivery system. All of the program offerings discussed in this document should emphasize teaching appropriate social interactions, good work habits, and development of the kind of behavior needed to hold a job in the community. The parenting program should be a pre-requisite for inmates wanting to participate in an overnight child visitation program, if the facility decides to develop one. The life skills and job readiness programs are emphasized when the inmate is in the pre-release phase of her incarceration.

As part of this phase and life skills programming the inmate should also begin to develop concrete plans for her release that will be incorporated into her parole plan. This plan is developed with the inmates case manager and should address, in realistic and concrete terms, work, family, social, and recreational goals for her to achieve while in work release and on parole. This plan transfers with her when she moves to work release in the community.

A specially designed life skills lab and alternative design options for the child visitation program are discussed in the "Programs" section of this report.

### **Work Release**

During the work release phase of incarceration, it is essential that the program services delivery system include continued support for these women as they begin to transition back into the community. As part of her planning process the inmate will have identified realistic goals for herself and will need encouragement and assistance to achieve them. She will also need continued support group, substance abuse, and other counseling assistance which can either be provided in-house or through linkage to community agencies. Optimally, some support of this kind should be provided by community corrections staff to ease her transition from corrections to community based support.

One of the most important services offered in this phase is job development assistance to open up employment opportunities for these women that will use the skills they have learned while incarcerated. Although it may take longer for these women to find work using these skills, it is important that job development staff not succumb to the temptation of urging the women to take the first

available work opportunity if it does not; the benefits of such actions are usually short lived in that the woman will not remain in the job if it is not satisfying.

If the work release center is to operate out of the new or converted facility, design of this minimum custody space should include sufficient multi-purpose space to accommodate support groups and meetings. In addition, offices for job development staff will be needed and a work room with telephones and typewriters for the to women to make the telephone calls and write the letters necessary as part of their job search effort. Housing at this stage of their incarceration can be similar to the apartments used for minimum custody women in the Minnesota Facility at Shakopee; dormitory space arranged to provide some privacy is also acceptable.

#### **A DESIGN PHILOSOPHY FOR WOMEN'S INSTITUTIONS**

Managing female inmates requires a different approach from the typical men's facility. Similarly, the design of a facility dedicated to female prisoners should be responsive to those differences. It should use the opportunity to create an environment that is conducive to changing the inmate's pattern of criminality while assuring the safety and security of the public, staff, and other prisoners. Several aspects of a facility design are different when planning environments for incarcerated females. The following summarizes the major points of this report.

#### **Facility Image**

Assuming that the stated and publicly accepted mission of the facility to be designed is the incarceration of female offenders, the institution's image can project a more residential, rather than institutional, atmosphere. Without compromising the security of the facility, the design of a women's institution offers the unique opportunity to translate programmatic requirements for smaller spaces into an image that more closely resembles a college campus. The facility need not convey the traditionally foreboding prison image. Rather, it should suggest an environment where habits can be changed to enhance the potential for a crime-free life following incarceration.

From the staff's perspective, the image of a women's facility can be supported by an architectural design that reflects a higher degree of decentralization of services and programs. Each housing unit should become more centrally focused as the prime area within which living, working, learning, recreation, and self-improvement activities occur. The staff in a newly designed women's facility should expect that its scale, use of materials, colors, and types of space will reflect interest in increased communication and

interaction both between staff and inmates and among the inmates themselves.

Similar to the staff's perspective, the inmates of the new facility should perceive it to foster a higher degree of personal interaction and attention to individual needs. This should be reflected in a design that provides an adequate number and type of spaces for individual and small group counseling. An inmate incarcerated within a newly designed women's facility should find security measures and devices, but their presence should reflect less emphasis upon the traditional (male) institutional approach. The image of the women's facility of the '90s should stress, through both design and management, programming and opportunities for self-improvement rather than incapacitation and suppression. This can come about through choice of materials, equipment, furnishings, colors, and unobtrusive security.

### **Security Concept**

Traditionally, security and its concomitant design and construction have placed a high degree of emphasis upon barriers and control devices. In the women's facility of the 90s, security should be achieved first through the operational/interactional concept of the facility and, secondly, through barriers. While security should not be minimized in a women's facility, the perimeter need not be characterized by a traditional double fence/razor ribbon enclosure. Although perimeter fencing will be required for certain security levels, a direct transfer of the double-fence configuration from men's to women's facilities should be carefully studied prior to its automatic acceptance as the correct design response. A single fence--in excess of twelve feet in height and with climbing restraints--should not only meet the security requirements of a facility for women but should also represent a much smaller capital investment.

The internal security features of a women's facility can place less emphasis upon traditional barriers (e.g., sallyports, motion detection devices, and tightly controlled circulation corridors). Without compromising security, the interior design should capitalize on the effectiveness and low cost associated with the use of industrial rather than high security hardware. Overall, one might expect less emphasis upon devices and barriers and a higher level of design attention given to direct and casual supervision of female activities by institutional staff.

### **Operations**

The benefits of decentralized management that have been demonstrated in men's facilities can also be transferred to women's institutions. To accomplish programmatic and rehabilitative

objectives, the higher the degree of decentralization of activities and programs to the housing units, the greater the opportunity for enhanced staff/inmate interaction. In all likelihood, the programmatic requirements in women's institutions will focus less on large industry-scale work programs and more on an office or residential type of environment for inmate work activities. This offers a unique opportunity to develop smaller, more human scale spaces for the majority of operations and services.

The design of the housing unit is key to facilitating the overall decentralized programming concept that can be more effective in the operation of women's facilities. Each housing unit becomes a central focus for most of the inmate's daily routine.

### Programs

Supporting the wide range of programs and services that should be available to the female offender, the design of the women's institution should provide more individual and small group spaces. These spaces should be designed using materials, furniture, and colors that encourage communication and support the programmatic concept of choice and change.

Continuing the linkage between the female offender and her family (and/or outside support system) is essential in support of the rehabilitative process. Family visitation offers a unique opportunity to orchestrate the inmate's eventual re-entry into society and possible return to the family setting. To encourage this, visitation areas should be designed to take into account the greater number of children that will participate. Smaller, more intimate, and more residential scale visiting space should be encouraged by the design. Although controversial among some facility operators, the women's prison of the 90s should explore the possibility of creating family visitation centers which permit overnight supervised visits within the institutional setting. Again, design emphasis should be upon the creation of more residential, rather than institutional, "climates."

Recreation is a key component of an inmate's daily routine. However, differing from the traditional male institution, the typical female offender normally would be involved in aerobic, rather than team, activities. This will affect the need for a large open playing field which so often characterizes men's institutions but are generally under-utilized in women's facilities. Outdoor spaces that encourage walking, group conversation, and private reflection are more important than traditional softball- or football-sized fields.

Similar to the emphasis in outdoor recreation being on more intimately sized spaces, the design of indoor areas, such as the gymnasium and dayroom, should reflect a desire to decentralize

activities and encourage small group interaction. While the large traditional gymnasium affords a multi-use type space, the substitution of a multi-purpose room could be very appropriate.

### Conclusion

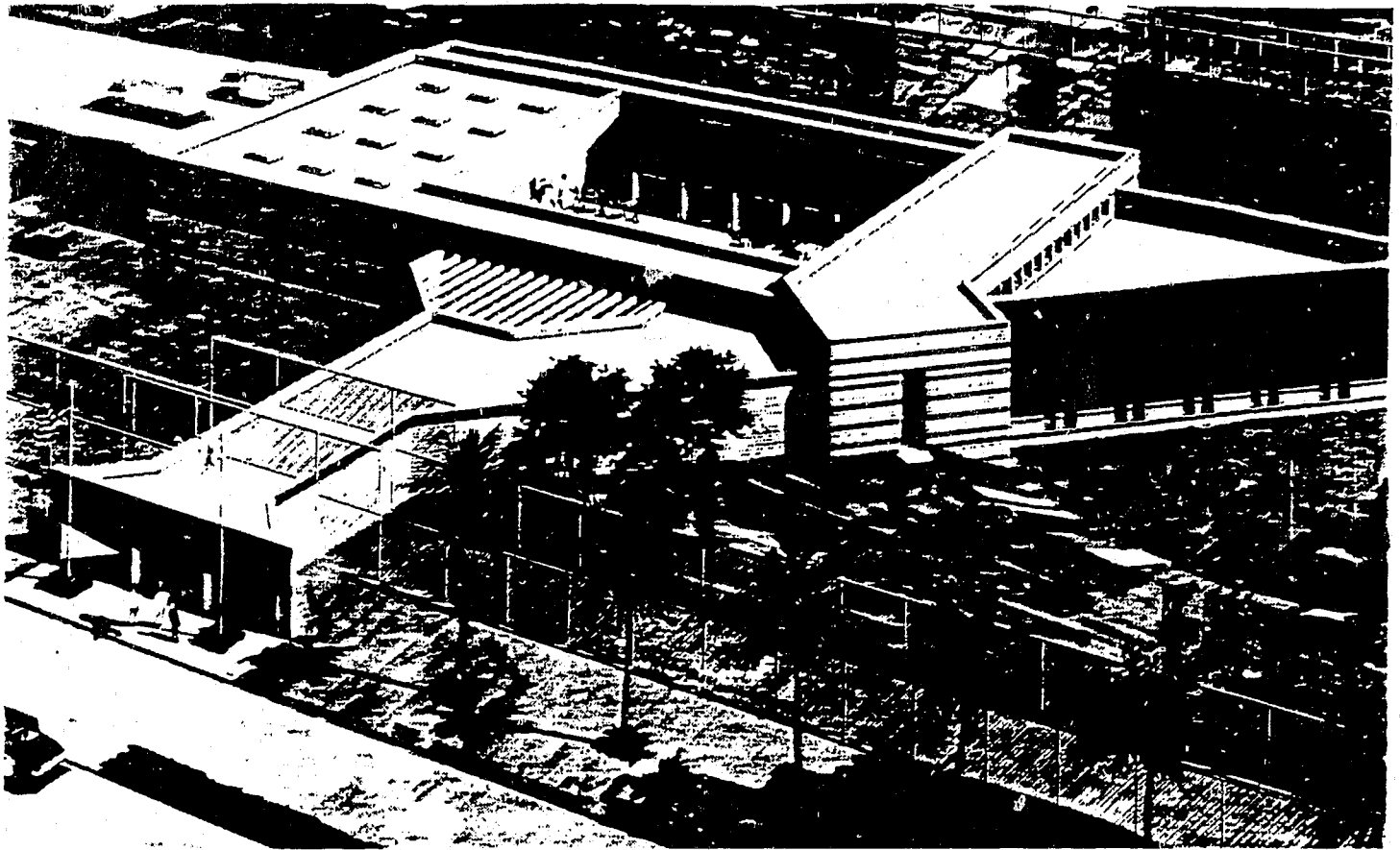
One of the great difficulties facing the designer of women's institutions is the desire of many departments of correction to create "flexibility" that permits the ultimate use of women's facilities for male inmates. Many of the decentralized service benefits for women also apply to men. However, if the initial and long-term planned use of the facility is for female offenders, then the designer should recognize the historical physiological and biological differences between men and women and develop design solutions that maximize the opportunities associated with these differences. This can mean less emphasis upon expensive barriers, hardware, and institutionalized spaces and a greater degree of commitment to a more normative and residential environment.

Designing a women's facility for the 90s offers a greater opportunity to make the totality of the environment support a treatment-oriented program. One might expect that the more traditional double-tiered open dayroom concept (found in men's facilities constructed during the 1970s and 80s) could be replaced by a single-story, smaller living unit of a more residential scale. In addition, the use of open space for circulation, colors to support different types of environmental conditions, and furnishings that reflect the generally accepted behavioral characteristics of women might not only foster the opportunity for self-improvement but also result in institutions that are less expensive to construct and maintain.

**APPENDIX A:**

**INNOVATIVE FACILITY DESIGNS**

**Maximum Security  
Facility for Women  
Marianna, Florida**

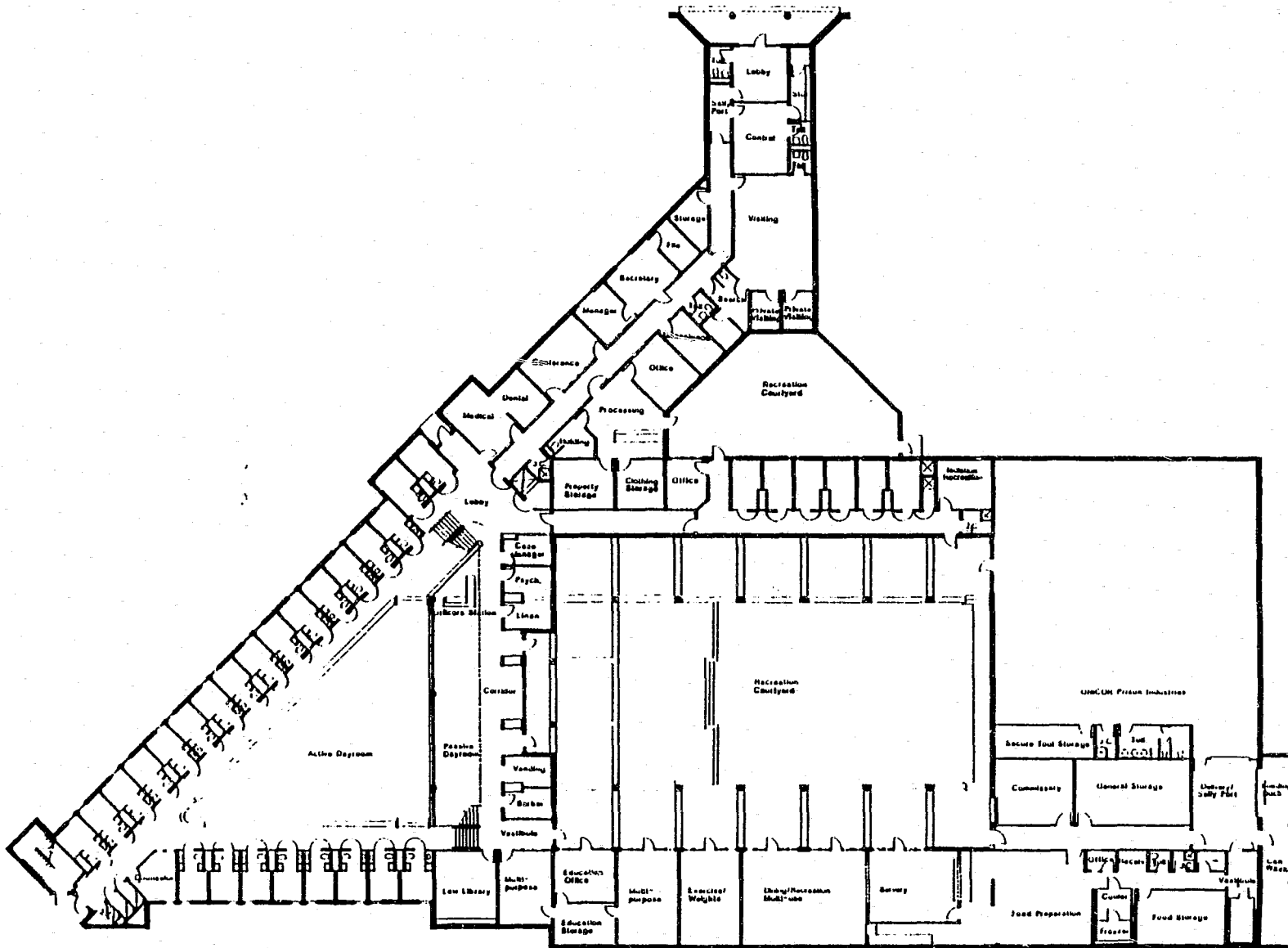


The maximum security 54 bed confinement facility for Federal female inmates is separated from the main Federal Correctional Institution but located within its perimeter fence. The introverted plan, modelled on a monastary concept, is designed as an autonomous prison with full support facilities including education, UNICOR industry, food service, recreation, medical and a six-bed administrative detention/segregation area. The buildings enclose a central secure courtyard, which allows circulation between activity areas and maintains visual and verbal isolation from the main prison. The Unit maintains a separate control center and vehicle and pedestrian sallyport.

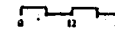
SOUTH CAROLINA DEPARTMENT OF CORRECTIONS

WOMEN'S FACILITY SCHEMATIC DESIGNS

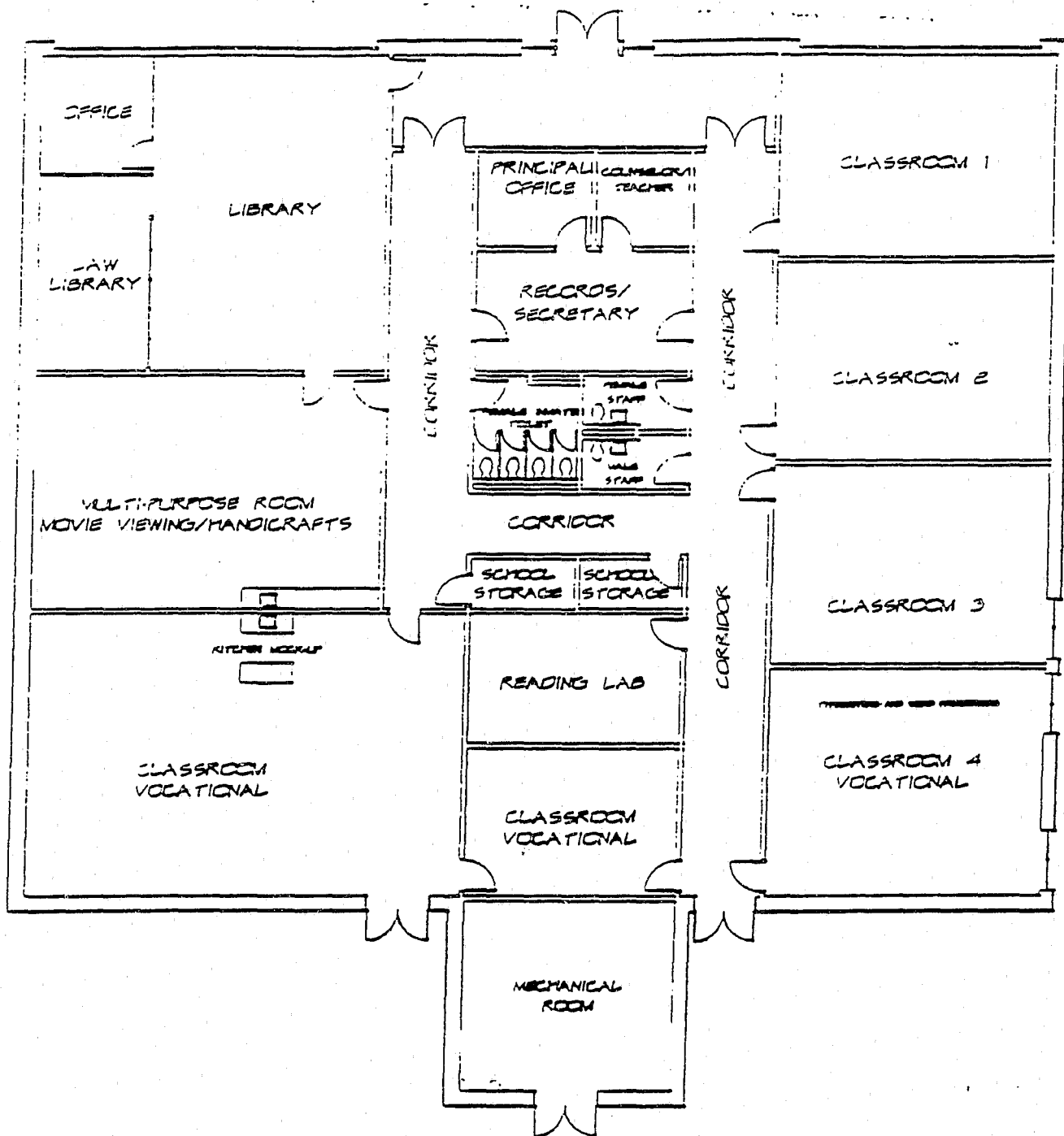




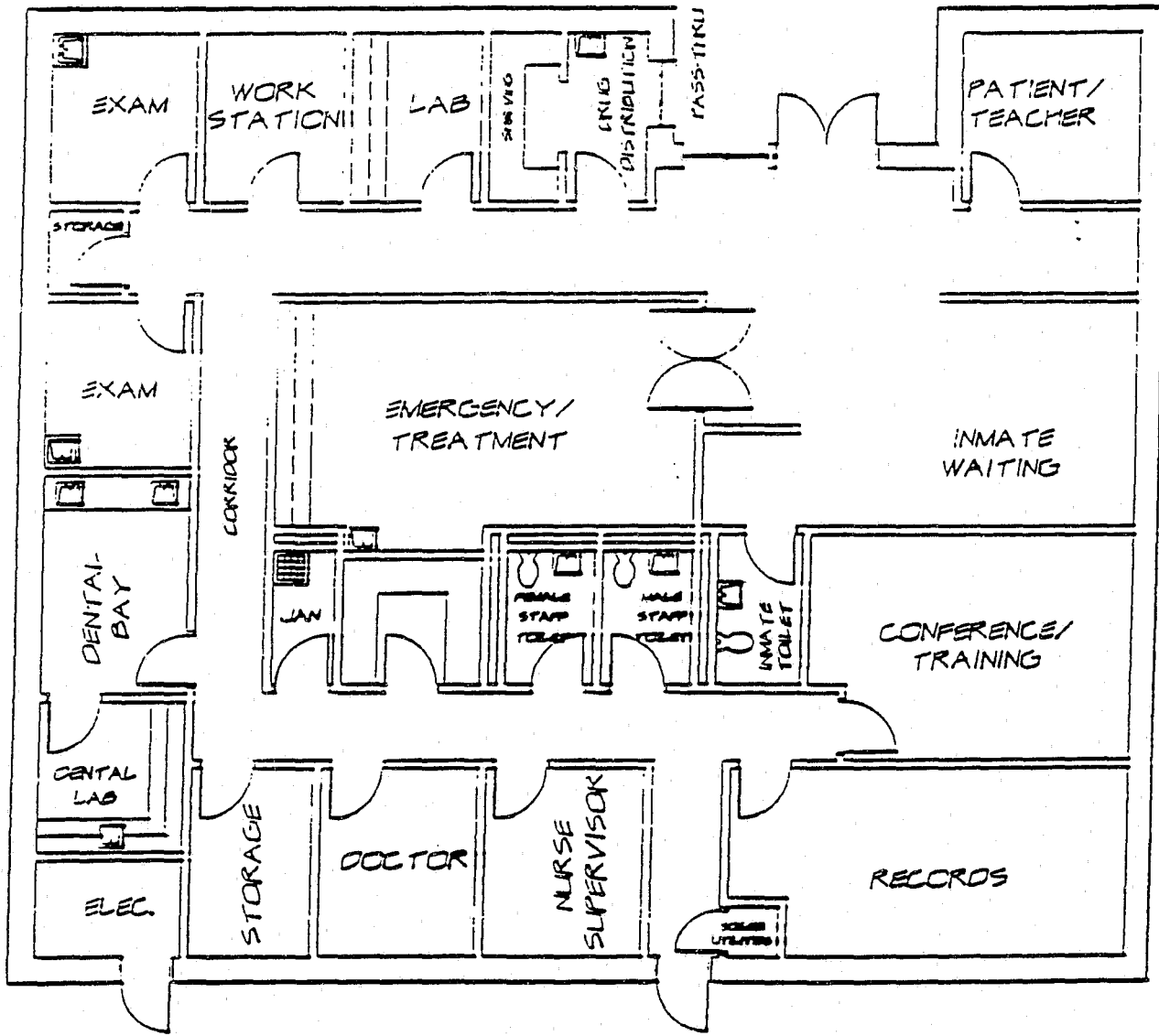
MAXIMUM SECURITY FEMALE OFFENDER FLOOR PLAN



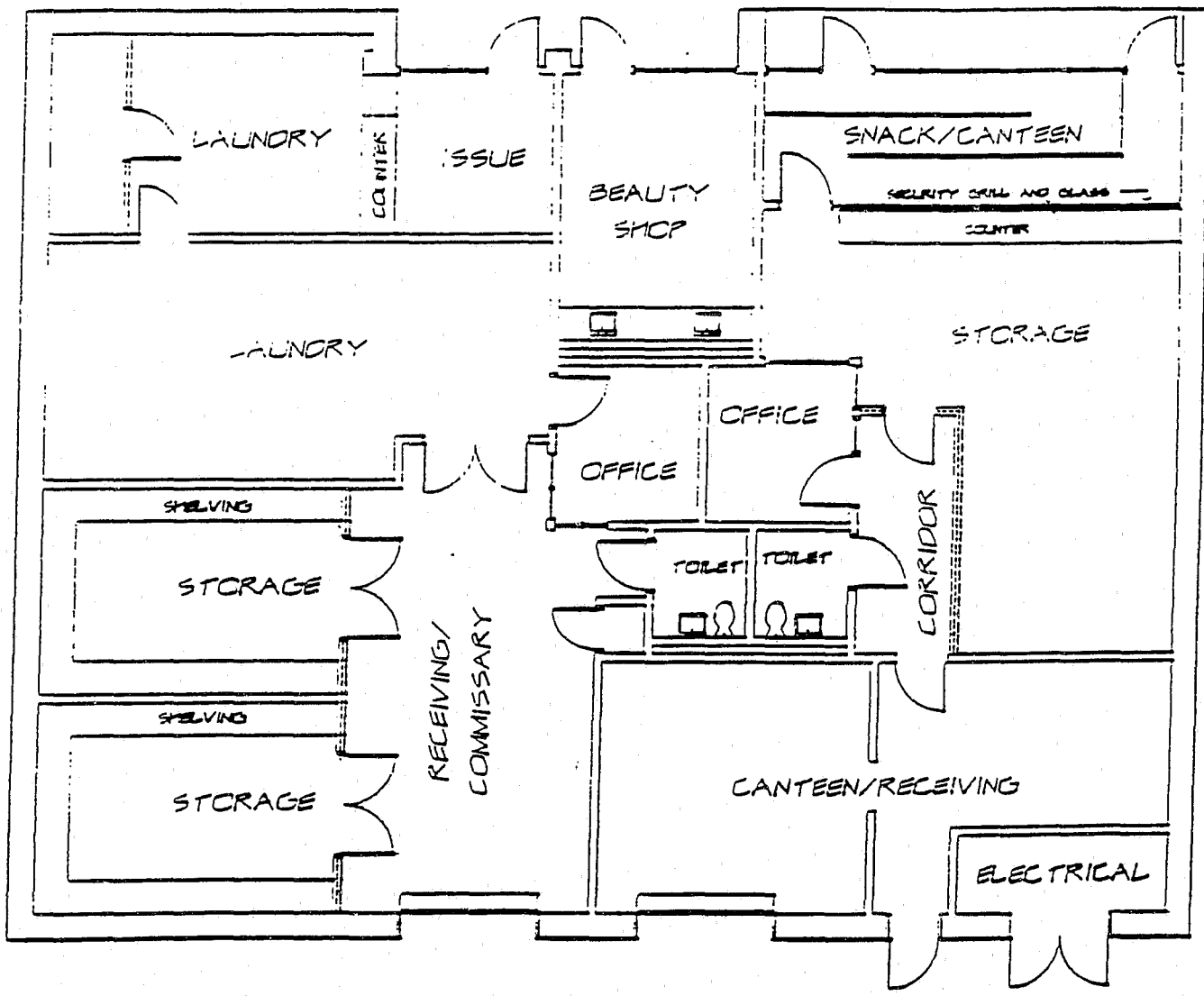
FEDERAL CORRECTIONAL INSTITUTION



EDUCATIONAL/VOCATIONAL BUILDING



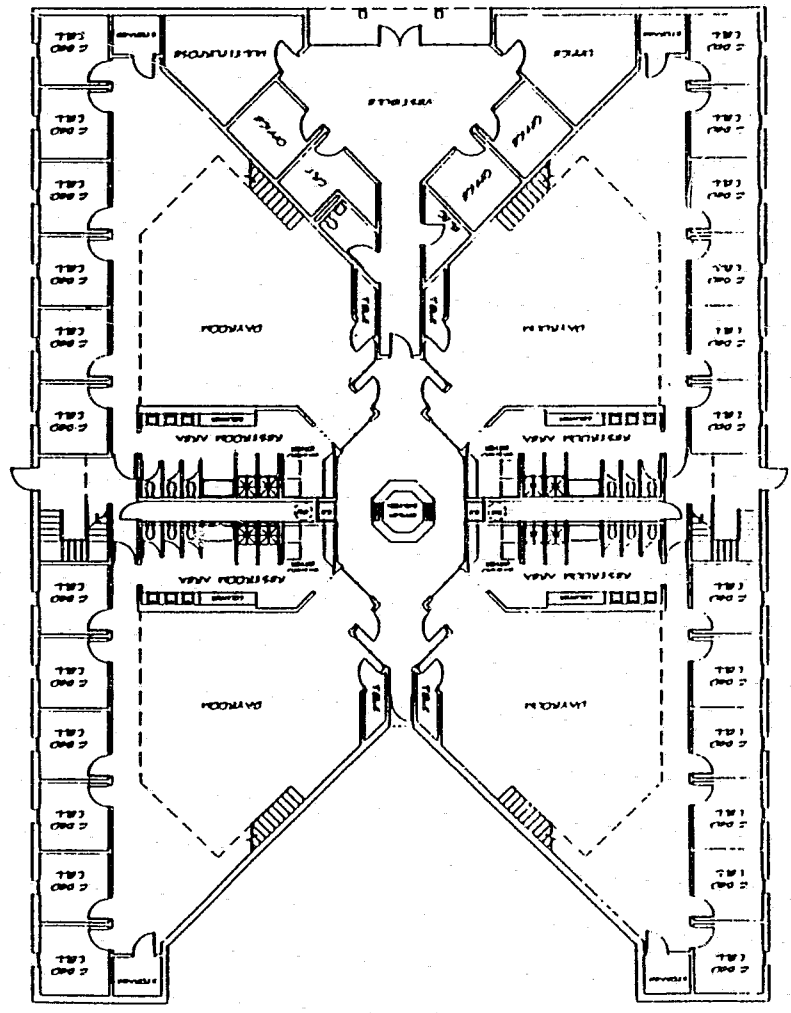
MEDICAL SERVICES



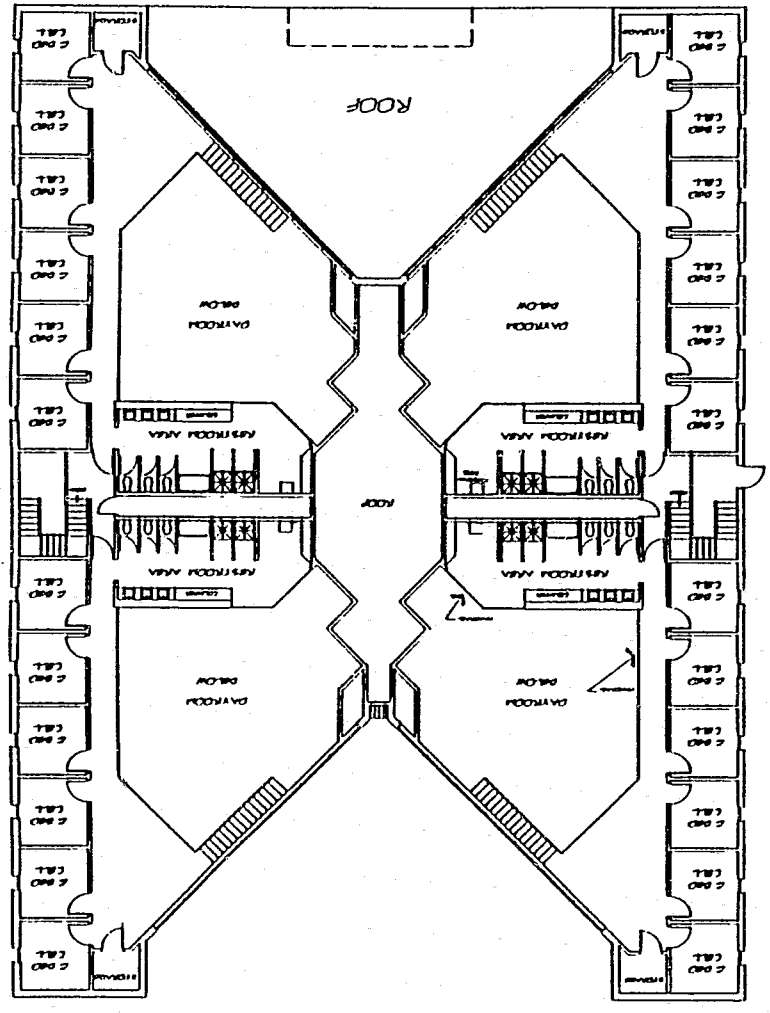
COMMISSARY/CANTEEN

TYPICAL HOUSING UNIT SCHEMATIC DESIGNS

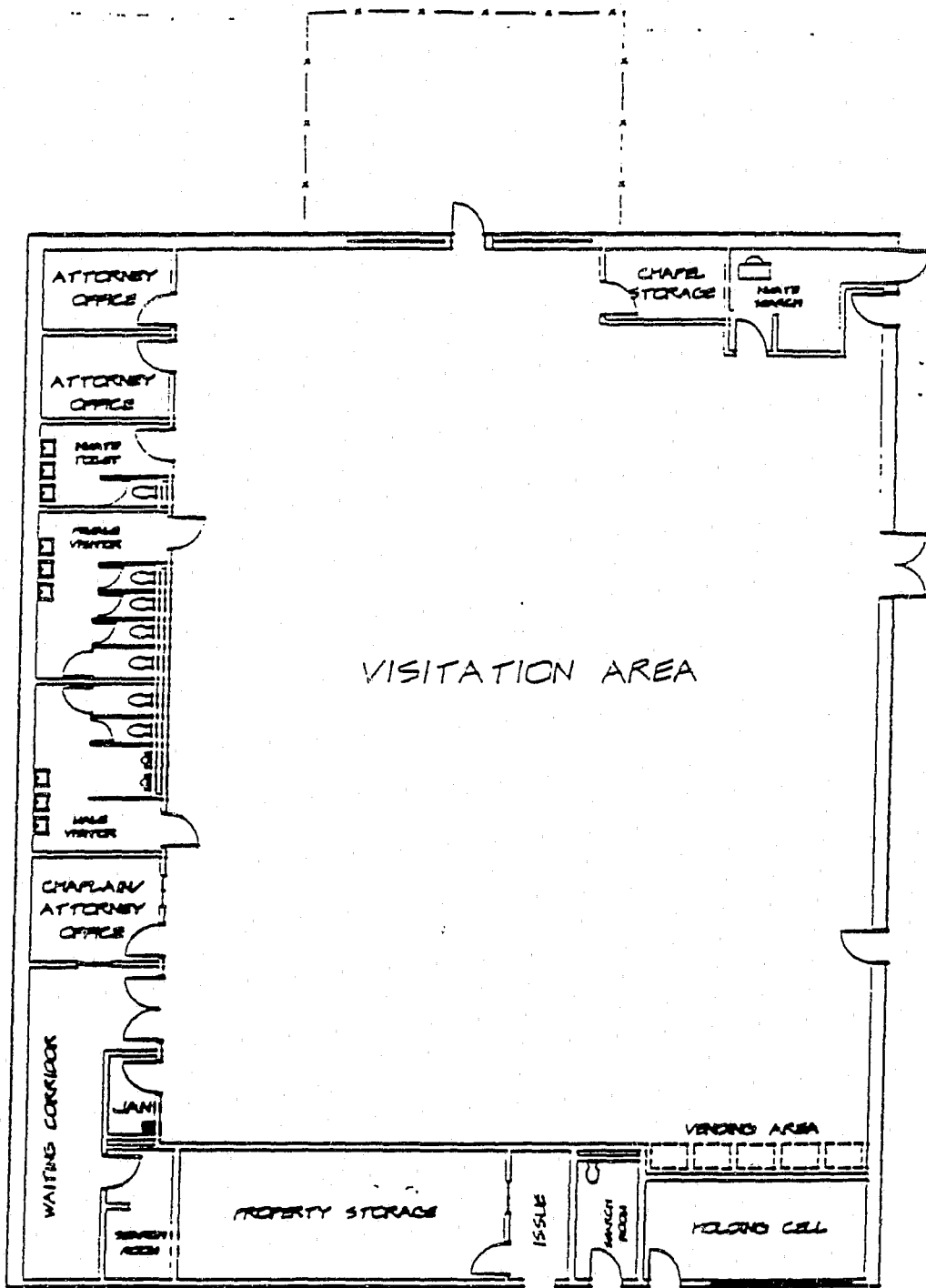
FIRST FLOOR  
12,072 SQUARE FEET  
1/8" = 1'-0"



SECOND FLOOR  
2,666 SQUARE FEET

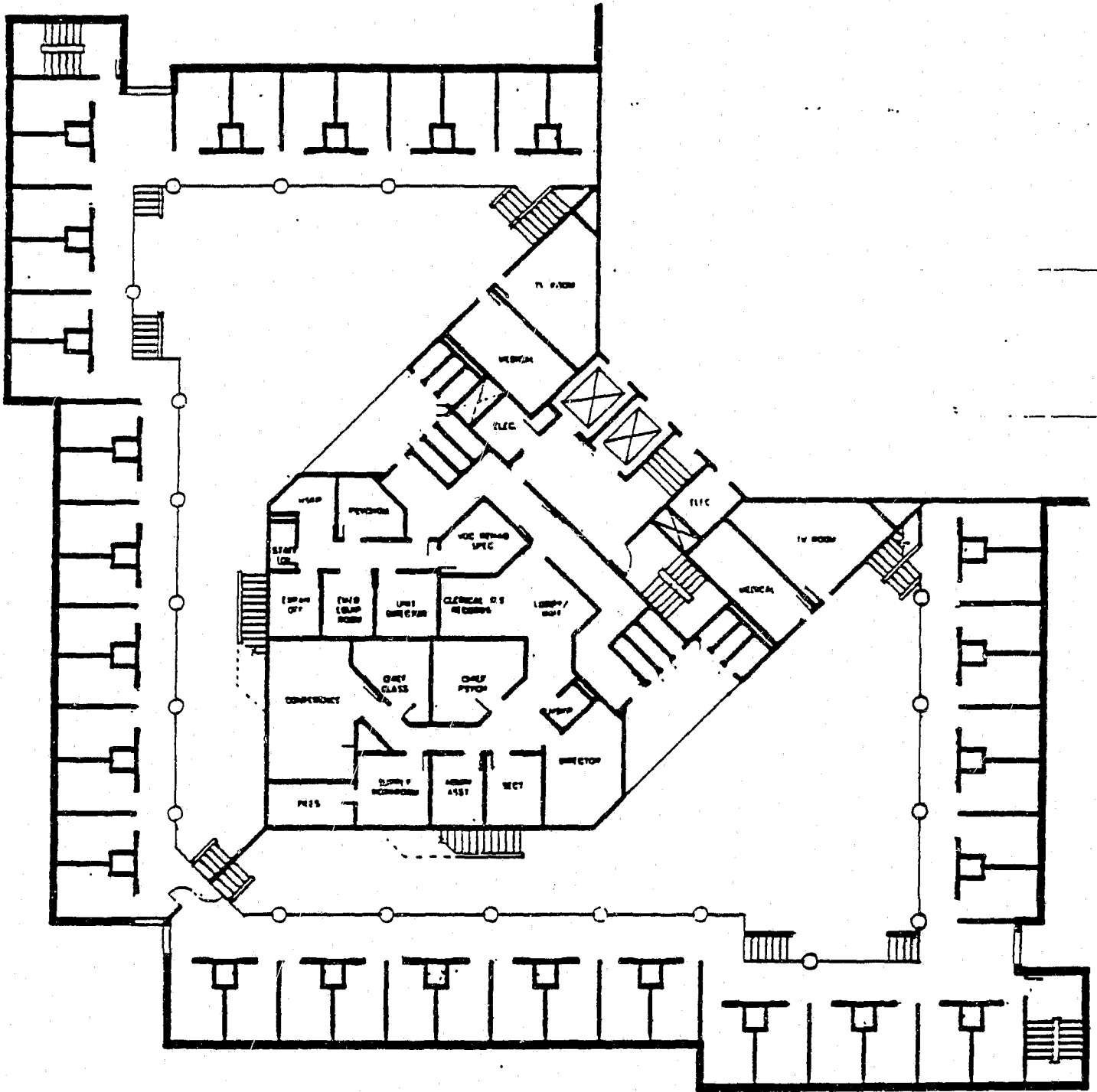


TOTAL BUILDING X 1.05 = 17,181 GROSS S/F  
CARTER COBLE ASSOCIATES, INC. / (REVISED: 7/27/09)



VISITATION AREA

VISITATION AREA



DISTRICT OF COLUMBIA CORRECTIONAL TREATMENT FACILITY  
 Reception and Diagnostic Typical Housing Level

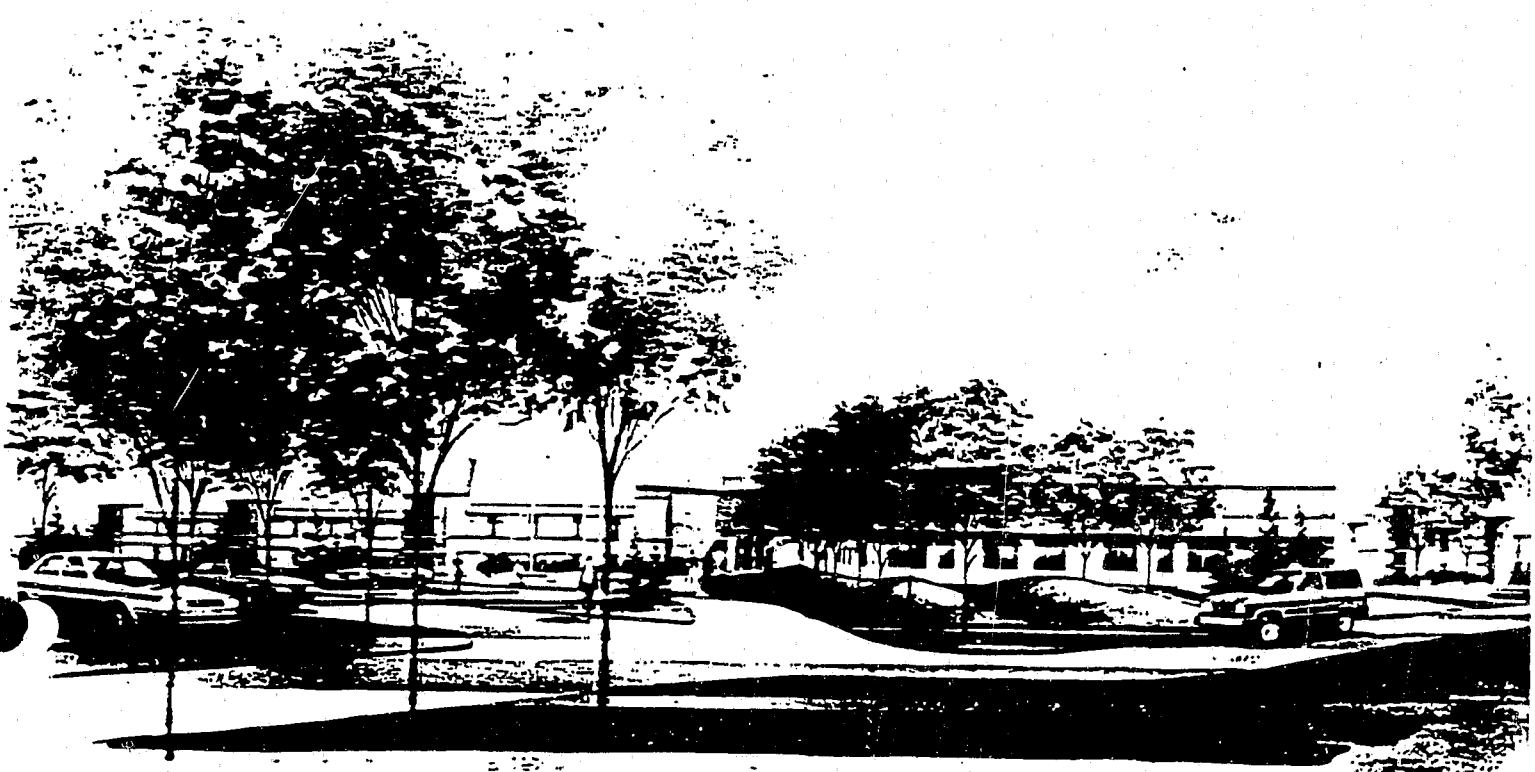
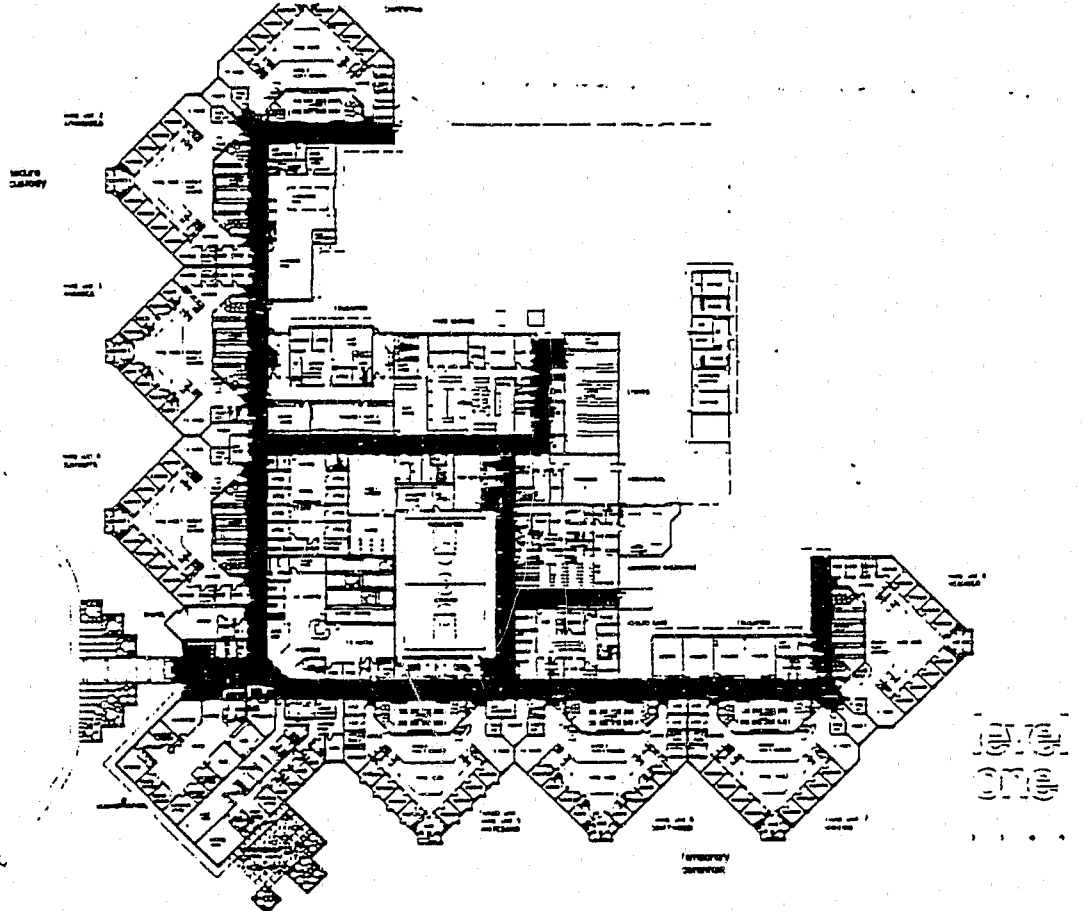
# Edmonton Young Offender Centre ■ Edmonton, Alberta, Canada

## ARCHITECT'S STATEMENT

This facility has been designed to provide both temporary detention and secure custody beds for the 12- to 17-year-old youths who now come under the new Young Offenders Act introduced in 1984.

The building security is achieved through the use of the building envelope that forms the line of security in lieu of an exterior fenced compound. The outdoor playing fields, however, will be within a fenced security space, and in the event of total evacuation, all those exiting the building will do so to a controlled area.

The residential area, developed on the living unit concept, features two groupings to house two classifications of residents. These groupings are separated from each other, but share facilities for education, recreation, health care, chapel, visiting, and food services. A low-profile, one-story building, this facility has sloped roofs over the living units to provide a residential and homelike environment.





**APPENDIX B:**  
**DESIGN CHECKLIST**

## WOMEN'S FACILITY DESIGN CHECKLIST

This checklist was developed from the Proposed Third Edition of American Correctional Association Standards, Facility Design Checklist. Modifications were made to accommodate the unique requirements necessary for designing a women's correctional facility.

### I. Perimeter Security and Site

- Does the perimeter security system provide for no more than 45 seconds between the enunciation of a perimeter alarm event and a response/interception by a perimeter patrol officer?
- Does the building envelope provide the primary security perimeter?
- Are there no more than two access/egress points through the perimeter security fence?
- Does the building footprint occupy 20 percent or less of the site area?
- Does the site permit adequate site circulation and service/delivery area?
- Is there adequate staff and visitor parking, and is the parking located near the appropriate access point?

### II. Facility Administration

- Is the administrative area directly accessible to the public?
- Does the design of the administrative area permit casual observation of inmate areas?

### III. Security Services

- Can the communication/control center console be operated by one person?
- Is the central control area impenetrable, providing at least one hour's protection against an assault?
- Does the design provide adequate space for full-shift training and/or muster?

#### IV. Support Services

##### A. Food Service

- Does the design of the food service area permit up to four days' worth of food items to be stored adjacent to the food preparation area?
- If dining is centralized, is there casual observation of this area from a staff dining area?
- Is 20 to 25 net square feet of space provided per inmate in the central dining area, based on the maximum number of inmates that would be present at one time?
- Are there accommodations for salad bars?

##### B. Medical/Health Care

- Does the design provide both a clinic (for sick call and outpatient treatment) and an infirmary (for inpatient care)?
- Is the medical area located in close proximity to the housing units?
- Is the pharmacy area properly secured from inmate access?
- Are there separate areas for examination and treatment in the clinic areas?
- Are records stored with restricted access?
- Does the nurses' station have direct sight lines to all inmate areas in the medical areas?
- Is the infirmary located furthest from routine inmate access in the medical area?
- Is there dedicated space for gynecological and pre-natal care?
- Is there training space for health education?
- Is there dedicated space for mental health treatment?
- Is there triage space located in the housing unit?

##### C. Laundry Services

- Is the laundry located in close proximity to the clothing issue area?

Is the laundry located near a loading dock?

- Are laundry facilities located on the housing unit for personal laundry?

D. Commissary

- Is the commissary storage/preparation/distribution area located in a central secured area near a loading dock?
- Is the commissary menu-driven, with appropriate accommodations for items women need?

E. Mechanical/Storage Areas

- Are the mechanical and storage areas centrally located?
- Are the mechanical and storage areas secure, with restricted inmate access?

F. Maintenance Shops

- Are the tool storage areas in the maintenance shops secure?
- Is there a separate storage area for paint and other flammable material?
- Are the maintenance shops located centrally near a loading dock?

V. Program Services

A. Recreation

- Are there outdoor recreation courtyards adjacent to each dayroom in the housing units?
- Is there a centralized multi-purpose recreation area?
- Is an exercise trail available to inmates within the compound?
- Are small areas dedicated to passive recreation?
- Is there space for aerobic exercise and exercise equipment?
- Does the recreation supervisor's office permit casual and/or direct observation of recreation areas?
- Is the centralized recreation area located in close proximity to the housing units?

- Has additional personal grooming space been provided beyond that available near the bathroom sinks?
- Are appropriate electrical outlets available for the use hair dryers and other personal care appliances with casual supervision?
- Does the design and placement of the officer's station permit direct observation of all areas in the living unit, including the outdoor recreation courtyard?
- Is there a minimum of 12 square feet of window with a view to the outside and an additional one square foot of window for each windowless cell provided in the dayroom?
- Are all close or maximum custody cells single occupancy?

#### VII. Circulation and Sight Lines

- Does the facility promote the orderly movement of inmates from one area to another?
- Is public access into secure areas limited?
- Have all "blind spots" been eliminated?

#### VIII. Environmental Conditions

- Does the facility provide the number of fixtures required in the Third Edition Standards?
- Can the facility maintain the established comfort range of 68F to 84F for all seasons operations?
- Has a qualified acoustical specialist evaluated the facility (plans) to confirm compliance with the Third Edition Standards?
- Has a qualified ventilation specialist confirmed the air exchange requirements established in the Third Edition Standards?
- Are provisions made to allow inmates maximum control over temperature and lighting in the living units?