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to 33 percent of untreated inmates.

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## Special Needs of Women in the Criminal Justice System

—Brenda V. Smith, Senior Counsel and Director, Women in Prison Project, National Women's Law Center, Washington, D.C.

Incarcerated women, many with alcohol and drug problems, have pressing needs. It is an absolute necessity that incarcerated women who have alcohol and drug problems receive comprehensive treatment and support services. The need is even greater for incarcerated pregnant women who are alcohol and drug dependent.

Routinely in the past, when criminal justice discussions occurred, women were not mentioned. Women would have remained invisible, but for the large recent increase in their numbers. In the past 12 years, the female population in Federal and State prisons has increased by 250 percent (13,420 to 47,691).

There are many reasons for this marked increase in the number of incarcerated women. Primary among them is the advent of mandatory minimum sentencing for drug offenses both at the State and Federal levels. While drug offenses accounted for 22 percent of all admissions to Federal prisons in fiscal year 1980, they accounted for 48 percent of all admissions in 1990.

**It is an absolute necessity that incarcerated women who have alcohol and drug problems receive comprehensive treatment and support services.**

Women are more likely than men to be serving sentences for drug

This article is adapted from presentations made before the Select Committee on Women, Youth and Families and the Media Roundtable of the National Press Club.

offenses; they are overwhelmingly convicted of nonviolent offenses which arise from economic motives, such as theft, fraud, prostitution, drug offenses, and forgery.

**The percentage of women in prison for drug offenses exceeds that for men ... Women are more likely than men to have used heroin or cocaine both daily and in the month preceding the current offense.**

In both the 1979 and 1986 Surveys of Inmates in Correctional Facilities, the percentage of women in prison for drug offenses exceeds that for men. Currently, 64 percent of women in Federal prisons and 34 percent of women in jail are serving sentences for drug offenses. In 1986, 54 percent of State prisoners reported that they were under the influence of either illicit drugs or alcohol at the time they committed the offense for which they were sentenced. Women are more likely than men to have used heroin or cocaine both daily and in the month preceding the current offense.

### Profile of women offenders

These sentenced women are by and large single heads of households struggling with both addiction and poverty. They are overwhelmingly low-income women and disproportionately women of color who are caring for dependent children with little family or social support. A look at the common characteristics of these women

underscores their need for specific interventions targeted to their needs.

- **Other incarcerated family members:** There is often a pattern of inter- and intra-generational incarceration, with 44 percent of women in jail reporting that a family member—for 34 percent, a brother or sister—has been incarcerated.
- **Physically or sexually abused:** More than 40 percent of women prisoners and women in jail report being either physically or sexually abused prior to age 18.
- **Unemployed:** The majority of women prisoners (53 percent) and women in jail (74 percent) were unemployed prior to their incarceration.
- **Custodial parents:** Eighty percent of women prisoners have children and 85 percent of them had custody of their dependent children before being incarcerated (compared to 60 percent and 47 percent, respectively, among male prisoners).
- **Childcare:** Parents or other relatives take over childcare responsibilities for 67 percent of incarcerated women, with the child's father assuming responsibility in only 22 percent of cases (with incarcerated men, 89 percent of their children are cared for by the child's mother).
- **Pregnancy:** Approximately one in four women is either pregnant or postpartum when she enters prison.
- **Medical problems:** Women enter prisons and jails with a host of medical concerns, including drug addiction, pregnancy, HIV/AIDS,

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other sexually transmitted diseases, and tuberculosis.

Rates of HIV infection among all prisoners is much higher than for the general population because of the concentration of individuals who engage in high-risk behaviors, such as needle-sharing, multiple sexual partners, and unprotected sex with infected partners. In most systems, the rate of infection among women prisoners is higher than the rate for men. As in the general population, Latinas and African-American women are more likely than white women to be infected with the HIV virus.

### **Treatment services for women**

Crafting effective responses to these complex concerns requires a coordinated multidisciplinary approach which involves advocates, service providers, policymakers, and former and current women prisoners and their families. There is a serious shortage of comprehensive drug

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treatment programs in the Nation's communities in general.

That shortage is even more pronounced in the prison setting. Generally, the only service offered is Alcoholics Anonymous or Narcotics

Anonymous conducted by volunteers. Although these groups provide valuable emotional and peer support for women attempting to overcome alcohol and drug problems, they do not provide the kind of intensive, comprehensive substance abuse treatment and the supervised medical attention many women need to get off drugs.

It is possible to provide comprehensive, effective drug and alcohol treatment to women prisoners. These programs are cost-efficient. They cost about the same as incarceration, and their benefits have been shown to far exceed those of simple incarceration.

One comprehensive program with a 5-year history of placing sentenced women with children and infants in community alternatives to incarceration—the California Mother Infant Care Program—reports a 20 percent lower recidivism rate among women participants. For pregnant women prisoners, benefits of comprehensive drug and alcohol treatment in lieu of incarceration include: increased birth weight of babies born to mothers in these programs; a lower percentage of children born with disabilities; and a higher percentage of women in recovery.

### **Components of successful programs**

Several communities have responded to the need for comprehensive drug treatment for pregnant alcohol and drug dependent women, and these programs provide a means of identifying the components of successful treatment programs.

First, all of the successful programs use a multi-disciplinary, multi-pronged approach to provide comprehensive services for women under their care. This includes providing prenatal and obstetric care

either directly or through linkages with other agencies, housing for women and their children, childcare, parenting education, counseling, and educational and vocational training.

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Additionally, these programs have relationships with social service agencies to provide other needed services to women and their children, such as educating the mothers about child development and the special needs of drug-exposed children.

Over the past 15 years, organizations that have advocated for women prisoners have focused on issues related to conditions of confinement and maintaining relations with children. We must now expand our focus and advocate not only for services and programs to assist women with strengthening and sustaining their bonds with their children.

We must be in the forefront of advocating for policy priorities and services that increase women's chances of being able to support themselves and keep their families intact. These services include alcohol and drug treatment, housing, educational and vocational training, and access to comprehensive preventive and chronic medical care.

Strategies recommended by the National Women's Law Center to address core needs of women prisoners are shown on the facing page.