



Promising Gender-Responsive, Community-Based Programs for Women Offenders in Massachusetts: A Resource for Policymakers

July 2010

Erika Kates, Ph.D.
With assistance from Crystal An
Wellesley Centers for Women

This report is a product of work undertaken by the Wellesley Centers for Women and the Women in Prison Resource Coalition with funding from the Gardiner Howland Shaw Foundation.



35 Years of Research and Action

©Kates, E., (2010) Wellesley Centers for Women, Wellesley College

Promising Gender-Responsive, Community-Based Programs for Women Offenders in Massachusetts: A Resource for Policymakers

TABLE OF CONTENTS

Acknowledgements	1
I. Introduction: Women in Prison in Massachusetts	
Population, offenses and sentences.....	2
Gender-specific concerns.....	3
Community-based resources.....	6
II. The Women in Prison Resource Coalition (WIPRC)	
Background and goals.....	7
III. Project Method	
Defining the key terms.....	8
Identifying program sites.....	9
Program data collection.....	10
Supplemental data collection.....	10
IV. Project Findings	
Program specialties.....	11
Gender-responsive, community-based criteria	12
V. Promising Program Models	
Steppingstone	15
The Women’s Center	16
Square One.....	16
After Incarceration Support Systems (AISS)	17
Realizing Individual Success through Empowerment (RISE)	18
Project Place/CREW.....	19
Girls Scouts Beyond Bars.....	20
VI. Unmet Needs	22
VII. Conclusions	24
VIII. Policy Implications	26
Appendices	
A. Coalition Members.....	27
B. Detailed Chart of Programs, Specialties, and Gender-responsive Criteria.....	28
C. Community-based Programs, Contact Information.....	32
Data Sources	35

Acknowledgements

Penny Belisle	Support Coordinator, After Incarceration Support Systems
Sue Bergeron	Support Coordinator, After Incarceration Support Systems
Robert Cadigan	Associate Professor, Boston University Prison Education Program
Karen Cavanaugh	Executive Director, Womanshelter/Companeras
Sister Maureen Clark	Director, Reentry Program, Prison Ministries, MCI-Framingham
Nicole Collymore	Case Manager, McGrath House
Beth Connolly	Director of Women in Transition Program, South Middlesex Opportunity Council
Shelly Dunner	Career Coach, Project Place
Jane Flynn	Clinical Director, The Women's Center
Debbie Flynn-Gonzalez	Family Services Supervisor, Square One
Gail Fortes	Executive Director, YWCA of Southeastern Massachusetts
Ellie Hadley	Reentry Program, MCI-Framingham
Nusirat Hassan	Caseworker, Women's Program Services, Suffolk County House of Correction
Susan Hubert	Domestic Violence Unit, Department of Children and Families
Sally Johnson Van Wright	Assistant Deputy Superintendent, Western Massachusetts Regional Women's Correctional Center
Judith Jordan	Director of Jean Baker Miller Learning Institute
Dorothea Keeling	Prevention and Education Coordinator, ABCD
Laura Lamontagne	Office Coordinator, Steppingstone, Inc.
Devin Larkin	Prevention and Reentry Program Manager, Mom's Project
Veronica Madden	Associate Commissioner of Reentry and Reintegration, Department of Correction
Chris Mitchell	Program Services Director, Department of Correction
Helena Marques	Executive Director, Immigrants Assistance Center
Carmen Montalvo	Advocate, Womanshelter/Companeras
Patricia Murphy	Assistant Superintendent, Western Massachusetts Regional Women's Correctional Center
Karen Murray	Reentry Program, MCI-Framingham
Kim Nuttall	Director of Client Services, Project Place
Iliana Ojeda-Rivera	Program Director, Mom's Project
Carlene Pavlos	Director, Division of Violence and Injury Prevention, Department of Public Health
Janaya Pierre-Mike	Counselor, McGrath House
Mary Reardon-Johnson	Executive Director, YWCA of Western Massachusetts
Jessia Roffi	Coordinator, Girl Scouts Beyond Bars
Christina Ruccio	Director of Women's Program Services, Suffolk County House of Correction
Jennifer Sordi	Assistant Deputy Superintendent, After Incarceration Support Systems
Brenda Souza	Clinical Director, Positive Action Against Chemical Addiction
Bethany Vanemburgh	Supervisor, Steps to Recovery/Spectrum Health Services, MCI- Framingham
Joan Whitaker	Director of Health Services, ABCD
Ilana Zablow	Life Skills Coach, Project Place
Kimberly Zouzoua	Director of Community Collaborations, Girl Scouts Beyond Bars

Promising Gender-Responsive, Community-Based Programs for Women Offenders in Massachusetts: A Resource for Policymakers

I. Introduction: Women in Prison in Massachusetts

There are important differences in the characteristics, offenses, and circumstances of incarcerated men and women. Nevertheless, for decades women's particular conditions and needs have been neglected. This situation was typically explained by the relatively small number of women in prison compared to the very large and growing number of incarcerated men. This disregard of women is slowly changing in response to their rapidly growing population and a better understanding of their backgrounds and circumstances. There is also more awareness of the negative effects of mothers' incarceration on their children, and an increased sense of urgency to address the high rates of recidivism and costs of incarceration.

Certainly, the number of women in prison in the US has grown very rapidly. It increased from 14,000 in 1980 to 203,100 in 2008, and the proportion of the female incarcerated population doubled from 5% to 10%.

Population, offenses and sentences

Massachusetts mirrors the national trends in significant ways. The annual number of court commitments to state and county facilities increased from 236 in 1980 to 1,976 in 2007 – an increase of over 800 percent; and doubled in the five years between 2003 and 2007. In 1980, women made up 19 percent of the state's total commitments and in 2008 they made up 33 percent of commitments.

In 2008, 84 percent of women in the Department of Correction's (DOC) custody committed non-violent offenses. This category includes 33 percent for drug-related offenses; and 32 percent for "other" offenses (28 percent of which were for prostitution and public indecency). Sixty (60) percent of women received sentences of less than one year, with many facing such imprisonment because they could not pay fines. No men were sentenced to state facilities for less than one year.

Women of color, especially Latinas, are represented disproportionately. They make up 21 percent of the incarcerated women compared to 8 percent in the general population; Black women make up 17 percent of incarcerated women compared to 7 percent in the general population; and white women are underrepresented at 61 percent of the incarcerated population compared to 80 percent in the general population.

Gender-specific concerns

County time served in a state facility. DOC data reveal that in 2008, 89 percent of the women who were sentenced to county time went instead to the single state prison for women -- Massachusetts Correctional Facility-Framingham (MCI-F) -- because their counties do not have houses of correction that hold women. This compares to 0.2 percent of men who serve county sentences in a state prison. The majority of these women come from Essex County (24 percent), Worcester County (22 percent), and Middlesex County (17 percent).

Overcrowding. In November 2009, almost 600 hundred women were held in county houses of correction and almost 900 women were held at MCI-F (including the neighboring South Middlesex Correctional Center) (see Figure 1). Of these, 22% were awaiting trial in the Awaiting Trial Unit (ATU), compared to 7 percent of men who were in a state ATU facility. Many women are held in the ATU because they cannot make bail, or there is no other place to hold them.

DOC carefully monitors its facilities' bed capacity. Typically, at MCI-F the ATU is at 250-290 percent of capacity, the sentenced women are at 105-112 percent of capacity, and the pre-release women are at 115-125 percent of capacity.

The daily count of around 1,400 incarcerated women can easily lead to underestimating their annual count. Because of the short sentences given to a sizable majority of women, there is considerable population turnover at all correction's facilities. It is likely that the annual figure is six times the daily count (based on data provided by the DOC, 2004) or about 8,400.

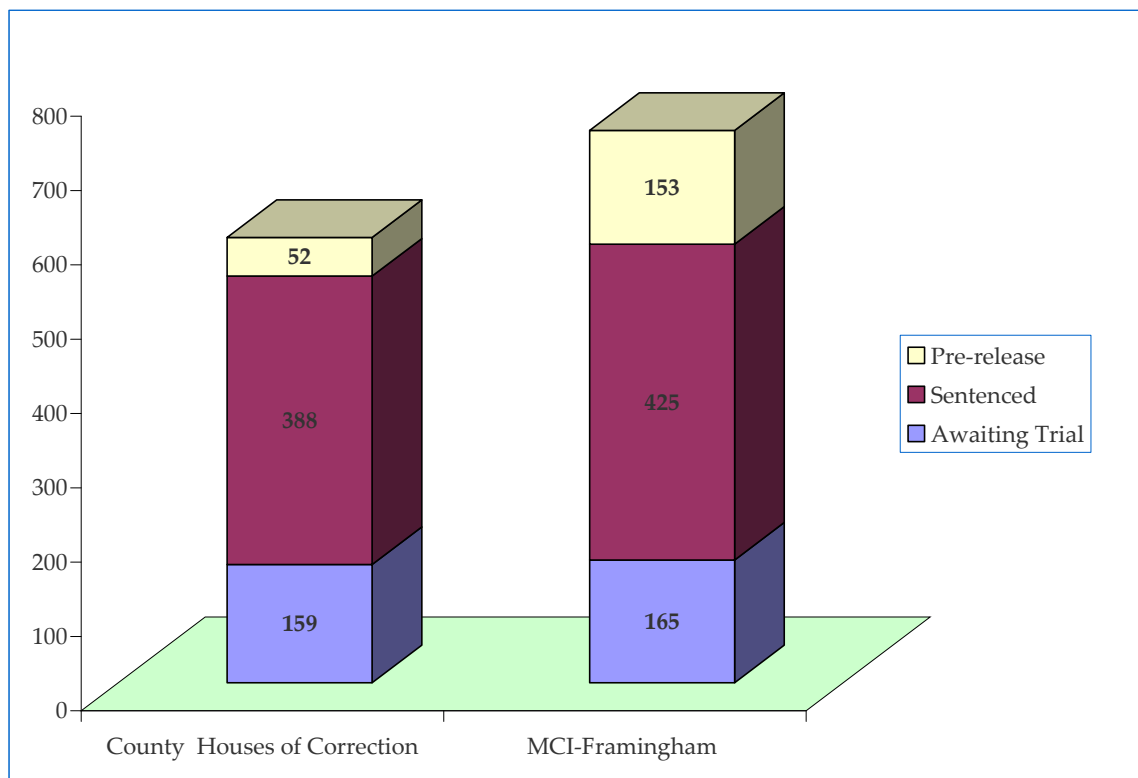


Figure 1. Women Incarcerated in State and County Facilities, November, 2009

A growing body of research reveals that often women have specific life experiences that are critical to understanding the nature of the offenses they commit and their concerns during incarceration.

Poor physical and mental health. Studies elsewhere have noted that over half of the women prisoners had experienced physical and sexual abuse, most before the age of eighteen; and 84 percent have histories of substance abuse. In Massachusetts, too, many women have previous traumatic experiences including physical, mental and sexual abuse. A large proportion of women offenders have substance abuse problems and this affects their general health and well-being. They are more vulnerable to HIV/AIDS. In addition, two thirds of the women in prison in MCI-F have open mental health cases compared to 27.3% of the male population. These experiences are deeply based in, and reflective of, their relationships with parents, siblings, and male partners. They are manifested in anger, destructive behavior, mistrust, and shame. There is a growing recognition that treating women effectively requires different approaches than for men. The methods now regarded as effective for women are based on relational-cultural theory; dual or even triple diagnoses of mental illness, domestic violence, and substance abuse; and trauma-informed treatment.

Family connections. In 1998, a national survey estimated the percentage of prisoners who were parents, and the numbers of children affected by their parents' incarceration. The study showed that 65- 75 percent of women in prison have children and that the majority had custody of their children prior to being arrested.

In 2005, this report's author applied the premises of this 1998 survey (2.3 children for 75 percent of the women who are mothers) to project the likely annual number of children in Massachusetts affected by their mothers' incarceration. A similar estimate for 2009 places the number of children affected annually by their mothers' incarceration at around 14,000.

No. of Women: Daily Count, Nov	No. Women Held Annually (Estimate)	No. Mothers Held Annually (Estimate)	No. Children Affected (Estimate)
1,342	8,052	6,039	13,890

Table 1. Estimated Number of Incarcerated Mothers and Their Children, MA. 2009

In 2007, the author conducted a study of MCI-F inmates' family connections to determine who took on the children's care giving responsibilities, and the type and frequency of connections between mothers and their children. The findings (based on a random sample of forty-six sentenced women) revealed that children moved into a variety of different situations. The percentage of children moving to live with their grandparent doubled, as it did for those moving to foster care. The percentage of children living with their fathers tripled, as did the rate of children who were adopted (see Table 2).

Caregiver	Percent Pre- Incar.	Percent Post-Incar.
Mother	50	0
Grandparent	15	39
Father/joint	11	14
Dept. Children & Families	8	17
Adoption	5	12
Other Family	3	8
Other	8	10

Table 2. Children's Caregivers, Pre-and Post-Incarceration, Ma, 2006, N=46

Although many inmates' corresponded with their children (79 percent) or had phone contact (82 percent), almost half (49 percent) of the inmates never had visits from their children. Distance is one factor for low visiting rates: one quarter of the children lived more than sixty mile away, almost a half lived twenty to fifty miles away and less than 10 percent lived within 20 miles. This lack of contact causes ongoing anxiety and distress for many of the women. Further, since Speedy Adoption laws were enacted during the late 1990's, women who do not demonstrate parental interest (i.e., have regular contact with their children) are more likely to lose custody permanently.

Recidivism and cost. Although Massachusetts does not have a high incarceration rate compared to most states, its cost for housing inmates is very high, reaching approximately \$43,000 a year. Recidivism rates are also high, with one report in 2007 estimating that 40 percent of the women released in 2002 were re-incarcerated within three years.

Reducing recidivism and the cost of corrections is now the goal of most correction systems. In 2008, the Second Chance Act provided significant federal funding to encourage states to develop innovative reentry approaches. It is important that, in the push to take advantage of these funds to improve reentry resources and reduce recidivism, women's needs and circumstances not be overlooked, particularly since their crimes are mostly non-violent.

Community-based resources.

The author of this report conducted the 2007 study of inmates at MCI-F mentioned above. The research included an inventory of the programs available to women inmates and the responses revealed that a sizable number of the prison programs were offered by outside agencies. Two of these programs facilitated family connections by bringing children to visit their mothers, providing parenting support and information on child custody issues, and helping caregivers with their responsibilities. These findings led to questions about the use of similar resources in other institutions:

- Do other correctional facilities benefit from similar resources offered by community-based programs?
- To what extent do community-based programs incorporate gender-responsive and trauma-informed approaches?
- Do programs that provide resources to women in prison continue to provide resources to women in reentry?

This work of the Women in Prison Resource Coalition and the research described in this report represents an exploration of these questions.

II. The Women in Prison Resource Coalition (WIPRC)

Background and goals

The Women in Prison Resource Coalition (WIPRC) began its work in July 2009, when the project director, Erika Kates, of the Wellesley Centers for Women, met with the five-member Advisory Group to discuss Project goals and suggest additional members for the Coalition.

The Advisory Group included Representative Kay Khan; Len Engel, of the Crime and Justice Institute; Kira Dunn, of the Massachusetts Women's Commission and previously the Parole Board; Kate DeCou, Springfield College, and previously Assistant Superintendent, Hampden County House of Correction; and Maureen Norton-Hawke, Suffolk University.

By September 2009, the Coalition had fifteen members (see Appendix A for the Coalition list) and held its first meeting. Crystal An, a graduate student at the University of Massachusetts Boston, was hired as Project Coordinator.

Coalition members are experts in gender-responsive approaches, including relational-cultural theory, trauma-informed practice, co-occurring substance abuse and mental health treatment, and family connections frameworks. They all have had extensive knowledge of the gender-specific needs of female offenders, and expertise in policymaking, research, and human services.

Their responsibilities were to attend 4-5 Coalition meetings during the project's 12-month period, and assist the project in meeting its goals:

- To identify 10-12 gender-responsive, community-based programs throughout Massachusetts that provide resources to women in prison and assist in women's reentry transition to the community
- To select a sample of 3-5 these programs to be highlighted as 'potential models' as a resource for policymakers
- To present information on gender-responsive, community-based programs to policymakers, state agency administrators, program directors, advocates, and community leaders
- To contribute to a broader policy dialogue on improving resources for, and developing alternatives to, incarceration for women offenders in Massachusetts

III. Project Method

Defining the key terms

The Coalition's first task was to establish a shared definition of "**gender-responsive**" and "**community-based**" programs. Coalition members quickly reached agreement on the core elements of both gender-responsive and community-based programs and on the necessity for a 'data collection' component to strengthen evidence-based practice.

Programs were considered to be **gender-responsive** when they:

- Incorporate a trauma-informed treatment and holistic approach to women's co-occurring problems with violence, substance abuse, and mental illness
- Utilize a client strength-based approach
- Recognize the crucial role of maintaining connections with children and caregivers
- Maintain staff stability and small caseloads
- Encourage staff to 'model' desirable behavior
- Empower women offenders by involving them in program development
- Maintain program flexibility to encourage women's participation
- Recognize the significance for women of criminal offender record (CORI) reviews and other barriers to resources
- Collect information on client characteristics and outcomes

Programs were considered to be **community-based** when they:

- Conduct active outreach to women offenders during incarceration and upon reentry
- Have extensive knowledge of, and linkages with, a wide range of community resources
- Provide appropriate resources to women offenders and other women with similar needs
- Strive for a multicultural staff and inclusion of ex-offenders
- Receive funding and support from public and private sources
- Utilize and train volunteers to provide additional support
- Have a solid reputation in the community

Project staff reformulated these characteristics to create nine criteria that would constitute the basis for data collection tools that would identify how programs:

- 1) Connect with Criminal Justice and Corrections institutions
- 2) Utilize gender-responsive and holistic treatment models
- 3) Create safe communities for women
- 4) Facilitate connections between women and their children
- 5) Facilitate connections between women and their children's caregivers
- 6) Create an extensive resource network
- 7) Expand limited program resources with trained volunteers
- 8) Collect data on client characteristics and program outcomes

- 9) Miscellaneous: hire ex-offenders; have links with statewide networks; create a multicultural environment; and advocate for resources

Identifying program sites

Coalition members played a key role in recommending program they thought would meet these criteria. The project staff conducted site visits to fourteen programs they suggested and added three based on the recommendations of programs they visited. The Coalition members actively facilitated the site visits which took place between December 2009 and May 2010. Table 3 shows the Programs' locations and the major resources they provide to women offenders and former inmates.

Table 3. Programs by Location and Primary Resource Provided

County	Program	Resource Provided
Bristol	<i>Steppingstone</i> New Bedford	Housing, treatment for mental illness and substance abuse
	<i>The Women's Center</i> New Bedford	Housing, treatment for domestic violence and substance abuse
	YWCA New Bedford	Long-term housing for employed women
	<i>PAACA¹, Step-up</i> New Bedford	Long-term housing for women, sober for six months and employed
	<i>Immigrants' Assistance Center</i> New Bedford	Easing deportation process, and assisting children who stay in US
Hampden	<i>SquareOne, Turning Point, Fresh Start</i> Springfield	Parenting workshops, childcare, support groups for mothers
	YWCA Springfield	Housing for women and children with domestic violence histories
	<i>AISS²</i> Springfield	Case-management, peer support groups
	<i>Womanshelter/Companeras</i> Holyoke	Housing, safety workshops for women with domestic violence histories
Suffolk	<i>McGrath House</i> Boston	Housing, reentry workshops, case-management
	<i>Project Place</i> Boston	Employment counseling and placement and support
	<i>BPHC³, Mom's Project</i> Boston	Workshops, support for young mothers with histories of substance abuse.
	<i>ABCD⁴, RISE, ROSES,</i> Boston	Reproductive health, and HIV/AIDS prevention workshops
	<i>Boston University, Prison Program</i> Boston	Higher education courses
	<i>GSEM⁵, Girl Scouts Beyond Bars</i> Boston	Helping daughters to visit, parenting workshops, outreach to caregivers
Middlesex	<i>Reentry Program</i> Framingham	Individual support for women during pre-release and reentry
	<i>SMOC⁶, Women in Transition</i> Natick	Case-management

¹ Program for Alcohol and Addictions; ² After Incarceration Support Services; ³ Boston Public Medical Health Center; ⁴ Action for Boston Community Development; ⁵ Girl Scouts of Eastern MA; ⁶ South Middlesex Opportunity Council

Program data collection

The following findings are based on information gained through single site visits and meetings with program staff – usually, but not exclusively, with program directors – as well as follow up communications to clarify and expand on the data obtained in site visits. Some program directors invited former inmates who were current or former program clients to participate in these meetings. Such exchanges with former inmates occurred at the After Incarceration Support Services (AISS) program, Springfield, and at a YWCA hostel, New Bedford. They also occurred in discussions with two program directors who were former inmates, and over the phone with a former participant in the Boston University College program.

Supplemental data collection

The Project Director and Coordinator met with a number of experts to gain background information on current trends and policies in corrections. These meetings took place with the Deputy Commissioner of Reentry, Department of Correction, with personnel at three correctional institutions, including the state prison, and two county houses of correction. All have recently instituted programming changes for women.

Correctional institutions

- In 2004, the **South Bay Correctional Center (SBCC)** created a special unit for women on two floors to separate female and male inmates. It holds pre-trial and sentenced women. All can participate in programs which are offered in phases to accommodate women with very short stays. Women have a choice of participating in either the Community Reentry for Women (CREW) program or Realizing Individual Success through Empowerment (RISE). External groups and organizations run all the facility's workshops. SBCC publishes a Women's Resource Guide for reentry women.
- Completed in 2007, the **Western Massachusetts Regional Women's Correctional Center (WCC)** is specifically built for women. It replaces the limited space for women at the Hampden County House of Correction, Ludlow and accepts women from other counties in Western Massachusetts. Women are assessed on intake and provided with plans designed to take them to the reentry stage at which point they are referred to the After Incarceration Support Systems (AISS) program funded by the Hampden County Sheriff's office.
- In 2009, the **Massachusetts Correctional Institution-Framingham (MCI-F)** added a Reentry Planning Workshop. Its coordinator is a Spectrum Health Systems employee who also supervises the addictions treatment program, Steps to Recovery. Inmates take a series of two-hour workshops for ten days prior to their release. Reentry counselors refer them to treatment and job skills programs and attempt to find them housing. Community-based programs are important for providing inmate resources, and many have had years of experience working with MCI-F.

In addition, the Project Director met with personnel at the Domestic Violence Unit, the Department of Children and Families; the Director of the Violence and Injury Prevention, the Department of Public Health; the Director of Trauma Integrated Training, the Institute of Health and Recovery, Cambridge; and the Director of the Jean Baker Miller Training Institute, Wellesley Centers for Women.

IV. Project Findings

A review of the seventeen (17) programs reveals that a wide range of gender-responsive, community-based resources is available to women offenders in Massachusetts. However, this is a small, purposive sample of programs concentrated in only four of Massachusetts fourteen counties, and is not a representative sample. Finally, the findings are descriptive and not evaluative (i.e., they are neither assessments of program efficiency nor performance).

Program specialties

All programs specialize in providing at least one resource (see Table 4). Many also help women to connect with other resources, including the Department of Children and Families (DCF) caseworkers to help with child visitation and custody concerns; agencies that provide advice on CORI barriers concerning employment and housing; and organizations that assist women with obtaining basic resources, such as identification documents, money, medications, food, and clothing.

Of the seventeen (17) programs, seven (7) provide either transitional or long-term housing, with two (2) providing temporary housing and treatment for women with histories of substance abuse and mental illness, three (3) offering temporary shelter from women with histories of domestic violence (and/or substance abuse), and two (2) providing long term housing for single women.

Four (4) programs directly address family connections through the provision of parenting workshops, assisting with children's visits, establishing relationships with children's caregivers, and referrals for legal advice on child custody concerns.

Three (3) programs provide primarily case-management and inmate reentry counseling and support.

One (1) program provides college level courses, and works closely with volunteer tutors; one (1) program provides in-depth health and sexuality counseling; and one (1) provides employment counseling and placement.

Type of Program	No. of Programs
Housing/treatment	2
Housing/safety	3
Housing/long term	2
Family connections	4
Case-management/support	3
Education	1
Employment	1
Health	1
Total	17

Table 4. Summary of Resource Specialties

Gender-responsive, community-based criteria

All the programs met at least six (6) of the nine (9) criteria the Coalition used to identify gender-responsive and community-based programs. Table 5 summarizes programs by gender-responsive criteria, and Appendix B illustrates in detail how individual programs meet these criteria.

Gender-responsive, Community-based Criteria	No. of Programs
Relationship with CJ and Corrections	17
Utilize gender-responsive models	17
Create safe communities	16
Facilitate connections with children	10
Facilitate connections with caregivers	12
Create extensive resource network	12
Utilize volunteers	13
Collect data on clients and outcomes	16
Other*	16

Table 5. Summary of Programs Meeting Gender-responsive Criteria

* Multicultural, employ ex-offenders, produce resource guides, statewide provider network

1) Relationship with Criminal Justice and Corrections. All seventeen (17) community-based programs have direct connections with at least one of three correctional institutions, SBCC, WCC, and MCI-F. The level of access a program has to inmates is defined by the relationship between the program and the correctional institution. The correctional centers' security rating, location, and history of community connection are key factors in negotiating access to "outside" programs.

Three (3) programs receive referrals from corrections; five (5) programs engage in active outreach to correctional institutions by providing orientation sessions at the institutions; and nine (9) are regular providers of workshops and classes within the institutions. This interaction enables program staff to learn about specific women's concerns and identify the resources they should offer to them on their release. Fourteen (14) programs continue their relationship with women post-release.

The relationship between two of the correctional institutions and selected community-based programs is *integrated*. At SBCC personnel from Project Place and ABCD move seamlessly between their programs (CREW and RISE respectively) and the correctional facility.

Similarly, WCC and AISS have a close relationship. Women inmates' service plans are developed at WCC and women who choose to participate in aftercare are expected to contact AISS resources on their release. WCC developed a computerized inventory of resources for women throughout the state. The Sheriff's department pays both AISS and WCC staff. In both cases the corrections personnel view the community-based programs as complementary to their

work and mission, while the community-based programs regard the easy access they have to women inmates as critical to their work.

The relationship between MCI-F and community-based programs is more complex, because women come from, and return to, cities and towns throughout the state. The Department of Correction's recently developed computerized resource directory is designed to facilitate referrals as women leave. Efforts to accommodate programs at the facility include regular room assignments and smoother entry for staff (BU college program); and in some instances, adjustments to visiting rules (for example, for Girl Scouts Beyond Bars). Project Reentry is one of the few programs with a strong inside/outside connection. Volunteers meet with women offenders six months prior to release, and having established a relationship with them, support the former inmates during the difficult reentry period and beyond.

Five (5) programs receive referrals directly from the police, judges, probation, and parole.

2) Utilize gender-responsive and holistic treatment models. All seventeen (17) programs adopt service-delivery styles that are relevant to women offenders' lives. Program directors refer to these approaches as *trauma-informed, dual-diagnosis, strength-based, flexible, holistic, empowering, instilling leadership, relational, and women-centered*. Most programs use psycho-educational rather than didactic teaching models. Instead of being "lectured at," women are encouraged to talk in groups about their concerns, role-play, and problem-solve their concerns with the aid of peer group encouragement and support. Numerous programs hold support groups, including: Mom's Project for young mothers with histories of substance abuse; McGrath House for pre-release women and parolees; health workshops at RISE and ROSES; Project Place for women seeking employment; Girl Scouts Beyond Bars for inmate mothers' parenting groups; and AISS where the community-based group is open to all women who are former inmates.

3) Create safe communities for women. Sixteen (16) program models create safe spaces for women. Some provide safe housing for women who have experienced domestic violence. Program directors at Steppingstone, The Women's Place, the two YWCAs, PAACA, and Womanshelter/Companeras discuss their *"supportive or healing communities," "bonding relationships," "recovery networks,"* and *"lifetime communities."* The director of the BU college program described the classroom as creating its *"own world."* Programs achieve this goal because women are able to bond in close quarters with the assistance of professional and other personnel who are trained to be sensitive to women's trauma and avoid "triggering" behaviors.

4) Facilitate connections between women and their children. Incarcerated women do not receive many visits from their children, and much of their effort to re (establish) relationships with them takes place on reentry. Shelters permitting women and their children are very important for women, particularly as they struggle to improve their parenting skills with competing needs for treatment, work and permanent housing. Four (4) shelters allow children to stay with their mothers; two (2) permit infants and toddlers (Steppingstone; the Women's Place), and two (2) permit older children, including teenage boys (YWCA Springfield; Womanshelter/Companeras, Holyoke. Two (2) others allow visits to take place at the shelters

(YWCA, New Bedford; McGrath House). Two (2) programs provide parenting workshops to women in prison and hold workshops to encourage families to correspond and visit (Square One; Womanshelter/Companeras). Two (2) programs offer childcare and parent support groups to reentry women (Mom's Project; Square One).

5) *Facilitate connections between women and their children's caregivers.* Eleven (11) programs facilitate inmates' connections with their children by helping women to clarify their parental goals; to negotiate terms for reunification and visitation with DCF caseworkers; and to understand foster care and adoption proceedings. Only one program works directly with children's caregivers in order to obtain permission for daughters to visit their mothers regularly in prison (Girls Scouts Beyond Bars). One (1) program helps parents undergoing deportation to find alternative caregivers for their citizen children who wish to remain in the U.S. (ICA).

6) *Create an extensive resource network.* Three programs specialize in case-management (SMOC; AISS; McGrath House). However, the majority of programs (12) have developed extensive networks of service providers on whom they can call for extra support and resources. Because many women are released with inadequate money, clothes, documentation, and medications, program personnel 'hustle' to connect clients to state and private agencies to meet these immediate needs, regardless of whether this work is part of their agencies' missions. Since most shelters require women to have employment within a specific time-period, program personnel link women with employers and workforce development agencies. In some instances, agencies create "resource clusters" of formal and informal networks -- local and statewide -- enabling referrals within and between communities throughout the state.

7) *Expand limited program resources with trained volunteers.* Nearly all programs are understaffed, and several lost staff in recent state budget cuts. Thirteen (13) programs recruit and train volunteers to augment their staff. Volunteers include student interns, people affiliated with faith-based agencies, retiree groups, and others. They provide tutoring for college preparation courses, conduct intake interviews in treatment facilities, teach crafts, job skills, and provide transportation to children visiting their mothers. One program relies exclusively on volunteer visitors to meet with women in prison, and support them on their release (Project Reentry).

8) *Collect data on client characteristics and program outcomes.* Sixteen (16) programs collect some data on women's demographics. Treatment programs keep detailed therapeutic plans and notes while case-management programs collect data on individuals' service plans and referrals. However, only four (4) programs have the capacity to collect follow-up data through their funding sources (CREW, Project Place, Mom's Place, RISE).

9) *Miscellaneous.* Eleven (11) programs have a strong multicultural and multilingual capacity. Their personnel reflect their programs' diverse constituencies, especially in areas with immigrant and minority populations. In addition, three programs employ former offenders to work with clients. This diversity helps the program develop cultural sensitivity, and heightens trust building between clients and program staff. Three (3) programs produced resource guides for their clients (McGrath House, CREW, AISS).

V. Promising Program Models

It is notable that all programs *met at least six of the nine gender-responsive, community-based criteria mentioned above*. All the programs provide women offenders with much-needed resources, and while it is difficult to single out any programs for special attention, the seven programs described below are selected because they represent geographic and programmatic diversity.

1) Steppingstone, Inc. A Therapeutic Community for Women

"They arrive confused, sometimes in shackles, with no resources; they've forgotten how to be themselves."

Steppingstone began in 1972 in Fall River, MA; opening the Women's Treatment Program, New Bedford, in 1998, and the Women's Graduate Program, New Bedford, in 2002.

The Treatment Program provides housing for up to twenty women and four infants, together with treatment for chemical dependency and mental illness. Most women have a dual diagnosis, and typically stay in the shelter for a period of three to twelve months while they receive intensive counseling and substance abuse treatment. Up to nine women who complete the Treatment Program can join the Graduate Program and stay an additional two years. Family connections are facilitated through the project's links with DCF caseworkers who help women to contact their children, and, where appropriate, to work towards reunification. Women living in the shelter provide support to each other, often forming a tight community and lifelong friendships.

All women are expected to be employed within thirty days in treatment in either a paid or a volunteer position; and case managers assist them in locating job training and placements. Since women often arrive without any resources, they receive help in obtaining clothing and other essentials from local programs.

Steppingstone personnel visit women offenders in the Bristol County HOC to inform them of the program, and sometimes women are delivered directly to the program on their release. The program is well known and women are referred to the program from throughout the state by correctional facilities, parole, drug court, and federal probation officers. Some are self-referrals. Steppingstone usually has a one month long waiting list.

The staff of nine consists of counseling professionals, volunteers and interns. Volunteers are trained to help with administrative tasks, and student interns assist with intake interviews, and group sessions. Former offenders are employed in a program funded by the Department of Public Health.

The program collects detailed case-history data and keeps follow-up data on women's progress.

The program receives funding from a wide range of public sources -- including the Massachusetts Department of Public Health, Bureau of Substance Abuse Services, United States Department of Housing and Urban Development, New Bedford Office of Housing and Community Development Agency -- and private contributions.

2) The Women's Center, New Bedford

The New Bedford Women's Center opened in 1973, and began offering programs for incarcerated women in 1992. In 2000, it opened the Incarcerated Battered Women's Program.

The Women's Center offers housing and trauma-informed counseling for formerly incarcerated women who are victims of domestic violence and have substance abuse problems. Women can stay in the shelter for up to two years, and it meets women's need for longer-term housing to aid recovery and stability. The program offers safety planning, outreach services, and assists with legal advocacy for child custody issues. One of its most effective programs, Art Therapy, has become mandatory for some groups of women. The program provides *Empowering Women for Success* workshops for women in Bristol County HOC, where it runs groups on money management, increasing self-esteem, preventing domestic violence, and basic education. Women referred by the Bristol County HOC Reentry program are encouraged to write to the Women's Center prior to their release. The program works with about 100 women offenders annually and another three hundred outpatients. Currently, eight women are in residence, and another thirty participate in counseling. The housing accommodates some children, and assists women who are separated from their children to work with DCF on visitation and child custody concerns.

The Center has a staff of over 80. The professional counselors have either Master or Bachelor degrees and the advocates must have at least a High School Diploma. The staff is multilingual and participates in an extensive training program. The program has about 18-24 trained volunteers who perform administrative work and coordinate activities.

The program is funded by numerous public funding sources: Massachusetts Executive Office of Health and Human Services, Department of Children and Families, Massachusetts Office of Victim Assistance, U.S. Department of Justice, Massachusetts Office of Public Safety and the Massachusetts Bar Foundation.

3) Square One, Springfield

Square One had its beginnings over 150 years ago as the Springfield Day Nursery, changing its name to Family Services in 2005, and to its current name in 2007.

The program provides comprehensive childcare services for families living in Springfield, many of whom are low-income. It has developed special programs for women offenders in Hampden County. *Turning Point* is a program offering parenting workshops for women held in the Western Massachusetts Regional Women's Correctional Center (WCC), Chicopee. It specializes in working with inmates who have toddlers, using a curriculum developed by a Texas company. Because many mothers do not receive visits from their children, Square One counselors provide *Write from the Heart* kits to encourage

mothers to correspond with their children; they also provide stamps, and facilitate the mailings. In addition, Square One created *Activity Packs* –backpacks with colorful toys, books and educational tools for different age groups. These packs are available for loan during family visiting times at WCC to help mothers engage effectively with their children. The prison groups have ten participants per class for each eight-week session, with two groups operating during each session. Two groups are offered in the community, one at the After Incarceration Support Services (AISS) center; and a drop-in bilingual group at the Light of Restoration Ministries, Holyoke. The workshop leaders establish personal contact with women and encourage them to contact Square One on their release; and help women to set up a case conference with DCF within the first month.

Through a special funding effort, the program also helps children who attended the childcare center prior to their mothers' incarceration to remain in the childcare center when they are moved to the care of DCF or family members. The *Fresh Start* program assists women offenders in recovery by providing home treatment and therapy to pregnant and post-partum women and mothers of young children. Mothers are rewarded for their parenting efforts with 'Square Bucks,' which they redeem in the rewards store for home goods, toys, and children's clothing.

Currently five staff members work with female offenders: a director, social worker, and three interns. The personnel include social workers with Master or Bachelor degrees, people with extensive experience working with children and families, and interns from Westfield, Springfield and Holyoke Community Colleges, and Americorps. All receive intensive training. Recently, a former offender recently was hired to become a parent mentor.

The Program works with almost four hundred female offenders each year. It receives multiple sources of funds: Hampden Sheriff's Department, Department of Public Health, Davis Foundation, Women's Fund of Western Massachusetts, and a local Community Foundation; and Community Block Grant Development funds to keep children in childcare during their parents' incarceration.

4) After Incarceration Support Systems (AISS), Springfield

"We do not control the women we work with: they make decisions on their own."

"They provide touch love with gentle hands." (a former inmate)

AISS was established in 1996 by the Hampden County sheriff's department, following the staff's review of reentry programs throughout the US. It provides reentry resources to men and women leaving Hampden County correctional facilities.

AISS bridges women's incarceration and reentry experiences through a referral process that is facilitated by the fact that both programs are under the auspices of the sheriff's department. Prior to an offender's release, she works with the Release Coordinator to

develop a Release Plan, and meets with AISS staff. Since 2007, women who are released from both minimum and medium security are eligible for pre-release planning

AISS provides intensive case-management to help women obtain resources and offers weekly drop-in support groups for former offenders. Women's participation is voluntary. The group sessions are of one and a half hours duration, and women can meet before and after to develop friendships and provide encouragement to each other. The groups take place in English and Spanish. The program's primary goals are to build relationships with its clients, and to form a network of service providers that can assist women with the resources they need. Case managers provide individually responsive and flexible assistance to women and often develop a long-term connection with their clients. Clients are considered to "have a lifetime membership." Many counselors from other programs convene at regular network meetings held at AISS. AISS once provided housing, but its residential component has been closed due to lack of funding

AISS has 20 staff, including five ex-offenders who are trained to be senior mentors. There are also 133 unpaid volunteers and mentors. In 2009, AISS worked with almost 400 hundred women. At any time, about 38 women attend the weekly Aftercare Support group, about 20 receive intense case management, and about 25 receive ongoing support outreach. The Sheriff's Department collects extensive data on inmate characteristics, on program participation, and on recidivism rates. The Hampden County Sheriff's Department financially supports the program.

5) Action for Boston Community Development (ABCD) Health Services, Boston

"We accept the women where they're at...we're non-judgmental."

ABCD was established in 1962 and has fifteen neighborhood centers throughout Boston offering services to help low-income families. The Health Services Department offered the first reproductive health curriculum for women offenders in 2002. It now offers four program components to women. *Realizing Individual Success through Empowerment (RISE)* is a four-week discharge-planning workshop offered to both detained and sentenced women at the South Bay Correctional Center (SBCC). RISE offers an alternative channel towards recovery and reentry for women who are not ready to make the commitment to CREW's reentry goal of job placement. RISE is also available to sentenced women at MCI-F, and pre-release women South Middlesex Correctional Center (SMCC).

Reclaiming Our Sexuality (ROSES) is the first reproductive health curriculum for women. It addresses sexual abuse, trauma, family planning, and safe sex. It is offered at SBCC to women scheduled for release within ninety days. ROSES encourages women to support each other in healing sexually and making safe sexuality and lifestyle choices. Staff meets with women prior to release, focusing on the first forty-eight hours after discharge when women are most vulnerable to relapse. They provide transportation from the HOC, if necessary and gift cards for toiletries and food. The program utilizes a system of rewards and incentives, adapted from programs working with HIV/AIDS. Women are given access many other resources through the connection with ABCD and its network of agencies throughout Boston.

Project START offers two individual pre-release sessions and four post-release sessions for women at South Bay. It is similar to the *Women's Reentry and Prevention Project* offered at MCI-Framingham and SMCC. This approach increases the likelihood that women will follow through with services on their release. ABCD staff have priority access to the SBCC, and their ID's permit easy access to women in their units.

The program has a current caseload of about thirty-five at South Bay, twenty-five at MCI-F and six at SMCC, and could recruit more clients. The program has an extensive data collection component because it is partly funded by SAMSHA which has strong requirements for data collection and accountability. A consulting firm is responsible for the data collection and analysis. A professional staff of three is responsible for the workshops and counseling. They are required to undergo a five-day intensive training by SAMSHA, and training is reviewed every 6 months. SAMSHA does not encourage the use of volunteers or ex-offenders, but ABCD has an open policy regarding hiring ex-offenders.

Funding comes from SAMSHA, Massachusetts Department of Public Health, and the Boston Public Health Commission.

6) Project Place, Boston

"Once a part of CREW, always a part of CREW."

Project Place was established in 1967. Its current focus on employment dates from 1995/1996 when welfare and workforce development policy changed their emphasis to a "work first" approach.

Project Place runs nine programs offering housing, and employment assistance to low-income people. The Program has fourteen studio units in its building, and runs housing programs at other sites. It also runs three businesses to provide men and women with job skills and work experience. It is one of the few programs available to actively assist former offenders in meeting their employment goals, preparing clients to anticipate employers' questions about CORI and to focus on their recovery strengths.

Project Place is crucial for McGrath House, where women in pre-release and on parole are required to work. It is also the supervising agency for the Community Reentry for Women (CREW) program at the SBCC. Its caseworkers run workshops at SBCC, and South Bay personnel attend meetings at Project Place. Project caseworkers refer women to *Dress for Success* to obtain suitable interview and work clothes. They assist women to clarify their family goals, to work with DCF on child custody issues, and to keep open lines of communication with caregivers. Finally, they refer women to *Cradles to Crayons*, a warehouse in Quincy that provides low income and homeless women with toys, books, furniture and clothing for their children.

The program model relies strongly on establishing personal relationships through peer group support and a trauma-informed relational approach to establish trust so that women feel they can call their caseworkers even when they have relapsed. Caseworkers adopt a personal style of case management, and model the code of conduct that women are expected to follow.

Project Place bridges the correctional facility and the community by having caseworkers at South Bay and Project Place. Staff meet regularly, and consider their relationship to be a 'partnership. However, former inmates do not have to have been CREW participants at South Bay to receive services. Typically, caseworkers work with reentry women for a period of eight weeks to two years, but they may work with women beyond that timeframe. Courts sometimes refer offenders to Project place/CREW.

There is a professional staff of five: a case manager, instructor and computer teacher working at Project Place, and two staff in the correctional facility. There are also three interns who teach health and computer skills. Volunteers from Mercantile Bank teach banking practices, and provide women with a certificate to permit them to open a savings account. They hire former offenders in their Social Enterprises program.

Project Place worked with over 50 women in first six months of 2010. The program collects data consistently on clients' demographics; service plans; skill level, employment, housing; and child custody status. It conducts follow up surveys for two years. The Project is supported through federal, state and city contracts, foundations, corporations (Bank of America award, 2009), individual donations, fundraising events, and income earned from their Social Enterprises.

7) Girls Scouts Beyond Bars (GSBB)

"We want them to know the Girls Scouts experience is more than cookies and camp."

The Girl Scouts Beyond Bars program began in 1992 and came to Boston in 1998. It is administered by the Girl Scouts of Eastern Massachusetts, based in Boston.

The program recruits girls ages 5-17 years whose mothers are incarcerated at MCI-F and South Middlesex Correctional Center, and provides transportation so they can visit their mothers once a month. In between the visits, the girls participate in Girl Scout troop activities, fostering leadership development, and challenging them to be in new situations, e.g., overnight camp, night hikes, and museum visits. The mothers are initially recruited through the Family Preservation program (run by Spectrum Services). They apply to the program and are screened for 'good behavior' status by correctional personnel. After acceptance into the program, mothers participate in a parenting program offered by Families First, Cambridge. The primary purpose of the program is to facilitate visits so that girls and their mothers can maintain family connections, process their feelings in a supportive environment, and prevent girls from negatively acting out their emotions. A significant and unique aspect of this work is GSBB care in working with the girls' caregivers who are often angry with the mothers, but have to give their

permission for the visits. About 50% of the caregivers are grandparents; 25% are fathers, and 25% are foster parents.

Currently, the program focuses mainly on the incarceration phase. However, it is one of the few programs that work closely with inmate mothers, their children, and their children's caregivers. Moreover, as a community-based program, it has made significant changes to the traditional visiting pattern permitted within MCI-F. For example, physical contact is permitted between mothers and daughters during the evening; snacks are allowed; and mothers plan activities in advance of the meetings. This format allows for continuity of contact and the building of relationships through group and individual conversations, welcoming and departure 'rituals', and creating a safe space to encourage peer group support.

The program is staffed by a coordinator, two part-time assistants, and four volunteer drivers. The volunteers receive training and make a one-year commitment to the program. They play an important role in developing relationships with girls and their caregivers.

Since 1998, the program has served about two hundred girls and 175 mothers. Currently, the program has 29 girls and 15 mothers. GSBB collects some data on the daughters' demographics, and plans to track girls' development over time. GSBB is funded by the Girl Scouts of Eastern Massachusetts (GSEM) as an important component of their mission to instill leadership skills in, and increase the diversity of, the Girl Scouts. GSEM engages in *public education and advocacy* with policymakers, funders, educators, and attempts to broaden program to reach more mothers and daughters.

VI. Unmet Needs

All community-based program directors identified significant areas of unmet need.

1) Housing

Housing is the most frequently mentioned unmet need. Eleven (11) of the 17 programs identified the need for:

- a. More safe beds for women with histories of domestic violence
- b. More treatment beds for substance abusing and mentally ill women
- c. More “step-down” housing for women in reentry who are not yet ready to work
- d. Permanent subsidized housing

2) Mental health resources

The second most frequently mentioned need is better mental health resources. Seven (7) programs mentioned that women leave prison without an adequate supply of medication for their mental illness. This situation is exacerbated by the fact that getting appointments with therapists may take from one to three months. This creates a situation ripe for illness and relapse.

3) Employment opportunities

It is difficult to find employers prepared to accept women with CORIs. Six (6) programs identified the lack of employment opportunities available to women with criminal histories. This situation is worsened by women’s poor job preparation, education, and training in prison. Several program directors think it is unrealistic to expect most women to find employment as soon as they leave prison.

4) CORI

Five (5) programs specifically identified CORIs as creating barriers to other resources. They prevent women from continuing their education because Pell grants are barred for people with criminal records. They prevent women from applying for welfare (TAFDC) benefits, Section 8 and other subsidized housing. They limit food (SNAP) benefits. These limitations create formidable obstacles to family reunification.

5) Visiting

Visiting remains problematic for incarcerated women, even for those held in urban settings with convenient public transportation. Although the three correction’s facilities have child-friendly visiting rooms, and both MCI-F and South Middlesex Correctional Center can accommodate visiting children overnight, there is a consensus among personnel that overall, women receive fewer visits from children than their male counterparts do. It is considered that women are at a disadvantage in reconnecting with children and establishing credibility with DCF if there is no regular visiting pattern.

6) Basic resources

Four (4) programs identified the lack of basic resources for women leaving prison. Women arrive at programs with very little or no money, street clothes, toiletries, or the identification necessary to apply for work or benefits. Women who sometimes arrive at one program still wearing shackles also struggle with the loss of another basic resource, self-esteem.

7) Other: education, mentors, transgender offenders, and deportation.

The BU College program encourages women to finish their degrees on the outside. However, because they are often overwhelmed by other needs and have problematic access to Pell grants, they are often unable to do so. Similarly, women who move to new communities to avoid the negative influences of their former homes are overwhelmed by their sense of isolation, and are likely to relapse into substance abuse and crime unless they have someone to offer support and encouragement. One program director mentioned they were seeing more transgender clients who needed specialized kinds of support and resources. Finally, women who have lived in the US for many years who are non-citizens but whose children are citizens are being deported for offenses, some of which date to their juvenile years. Although they have to return to their country of origin, they do not want their children to abandon their education, or embrace an unknown culture and place; few organizations are available to help this group of women.

VII. Conclusions

1) **Community-based programs are essential for correctional institutions and reentry initiatives.** The programs are not merely desirable “add-ons”; they are integral to effective resource provision for women offenders inside and outside correctional institutions.

2) **Community-based programs address many of the key concerns of women offenders.** This review of seventeen (17) community-based programs in four counties reveals the richness of gender responsive, community-based resources that these programs provide to women offenders who are incarcerated and on reentry to the community.

3) **Community-based programs often work in “clusters.”** Although no single program among the seventeen (17) offers a full complement of essential resources, programs often create formal and informal resource networks to meet women’s needs.

4) **Close alignment between “inside” and “outside” increases the likelihood that women will obtain critical resources.** Strong corrections/community links are critical for the effective provision of resources in prison and post-release settings. It appears that women are more likely to link up with the resources they need if they have both program information and prior contact with program personnel rather than program information alone. Such personal contact decreases the chance of women ‘falling through the cracks’ and relapsing during the difficult reentry period.

5) **Corrections facilities’ accommodate community-based programs in different ways.** There is considerable variation in the relationship between community-based programs and correctional facilities. In some instances, the relationship is mature and well integrated. In others, it is an ongoing process of negotiation between programs’ requests for dedicated rooms, regular class timetables, permission for classroom/workshop materials, and smooth entry to the facility and the correctional institutions’ concerns for security and quality control.

6) **The treatment of choice for women is now trauma-informed, holistic, and modeled on a relational-cultural approach.** Almost all the community-based programs use the terminology of these approaches; and increasingly, correctional personnel are becoming familiar with these concepts. However, the fundamental tenets of this approach – creating a supportive, non-judgmental environment -- are difficult to reinforce in a correctional institution.

7) **Women need extra support when they opt not to return to their home communities.** Women who make the hard choice to move to other communities to keep away from previous negative influences need individual support and encouragement to avoid relapsing into substance abuse and crime.

8) Policies “outside” corrections make a significant contribution to gender-responsive programming. The Violence against Women Act (VAWA, 1994, 2005) and its attendant programs have changed the landscape for women offenders by creating greater awareness of the violence and trauma in their lives, and by developing treatment for their symptoms and conditions. As a result, some domestic violence shelters accommodate women offenders. Similarly, SAMSHA funded programs make critical additions treatment available to women offenders; moreover, the high standards of accountability required by SAMSHA contributes to high program performance and an insistence on data collection that includes outcomes.

9) Some programs claim to have reduced recidivism rates through their efforts. These claims are exciting and worthy of further examination. They point to the general and critical need for a sound data collection plan that includes inmate assessments, the monitoring of individual program plans, and long-term follow-up on release.

10) Adequate resource provision for women offenders is still problematic. There are still significant areas of unmet need, particularly in effective treatment for women with histories of substance abuse and mental illness; transitional housing for women who are not ready to join the workforce; and the CORI barriers to education, subsidized housing and welfare benefits for their children.

11) Community-based programs are occasionally utilized as sentencing alternatives. All the community-based programs are utilized by correctional facilities to augment the incarceration and reentry experience for women offenders. In addition, several programs have been called upon to provide resources to women at the pre-sentencing and sentencing stages by the police and courts.

VIII. Policy Implications

The Women in Prison Resource Coalition Project documented a rich array of gender-responsive resources for women offenders in specific locations and correctional settings. Since the work was limited to a small number of programs in four Massachusetts counties, it is not feasible at this point to make general policy recommendations. However, in the spirit of fulfilling goal 4: “ To contribute to a broader policy dialogue on improving resources for, and developing alternatives to, incarceration for women offenders in Massachusetts” it would be appropriate to take the following steps:

- 1) **Disseminate project findings and promising program models to community-based programs and correctional institutions** to encourage discussion over the kinds of relationships they have and to consider whether they could/should be improved or strengthened.
- 2) **Disseminate project findings and promising program models to a broader group of criminal justice personnel** – police, probation, parole, the judiciary – and discuss their interest in and experience of making direct referrals to community-based programs, and their knowledge base of such programs.
- 3) **Expand the research to document community-based, gender-responsive programs in counties without correctional facilities** to determine whether there is a resource base for women.
- 4) **Document how “program clusters” maximize the benefits of local resources and identify the ‘focal’ agency;** and share this information with criminal justice and correction personnel.
- 5) **Encourage correctional institutions and community-based programs to share their resource databases;** and update resources for women using the gender-responsive criteria developed for this project.
- 6) **Encourage evidence-based practice by collecting consistent data on program interventions and outcomes** for women, and applying assessment tools and standardized instruments, (e.g., COMPAS) widely used elsewhere.

APPENDIX A

Women in Prison Resource Coalition Members

Kate Decou*	Assistant Director of Field Education, Springfield College School of Social Work, Former Deputy Superintendent of Women's Unit, Hampden County House of Corrections
Kira Dunn*	Adjunct Professor, Suffolk University, Former Board of Parole, Former MA Commission on Status of Women
Len Engel*	Attorney, Policy and Project Coordinator, Crime and Justice Institute
The Honorable Kay Khan*	Massachusetts State Representative
Maureen Norton-Hawke*	Professor of Sociology, Suffolk University
Gail Fortes	Executive Director, YWCA of Southeastern Massachusetts
James Greer	Deacon, Health and Prisoners Prison Ministries
Mary Reardon Johnson	Executive Director, YWCA of Western Massachusetts
Joan Kagan	President and CEO, Square One
Dorothea Keeling	Prevention and Education Coordinator, ABCD
Jacqueline Lageson	Board of Directors, And Still We Rise Productions, Professor of Sociology and Criminal Justice, University of Massachusetts Boston
Carmen Nieves	Community Educator, Womanshelter/Companeras
Mary Pfister	Consultant, Department of Children and Families, Former Clinical Supervisor, Hampden County Sheriff's Department
Laurie Markoff	Director of Trauma Integration Services, Institute for Health and Recovery
Joan Whitaker	Director of ABCD Health Services

* Advisory Group Member

Appendix B. Programs, Specialties, and Gender-Responsive Criteria

Program Name and Location	Primary Resource/s	1. Relationship with CJ and Corrections	2. Trauma-informed holistic model	3. Sense of Community	4. Children's Connections	5. Caregivers Connections	6. Resources through Volunteers	7. Resource Network	8. Demographic & follow-up data	9. Additional features
1. <i>Stepping-stone</i> New Bedford	<i>Housing and Clinical treatment for substance abuse/mental illness</i>	Outreach to BHOC & WATC Referrals from corrections, parole, probation, drug court, self referrals	Dual diagnosis Trauma informed clinical model	Creates safe community for mothers and infants	Accepts pregnant women; infants can stay with mothers for a year	Works with DCF	Trains social work students, interns	Extensive network helps women to access basic resources	Intake and treatment records; follow up	Referrals from entire state. Women save their earnings
2. <i>The Women's Center</i> , New Bedford	<i>Shelter for women with history of Domestic Violence + substance abuse</i>	Outreach to BHOC and WATC Referrals from stages from arrest to release	Dual diagnosis Safety focus Empowering	All women's environment Groups, workshops, meetings	Young children can live in the shelter	Works with DCF	Trains volunteers	Extensive network helps women to access basic resources	Intake profile and follow-up,	Produces resource guide Art therapy Multilingual
3. <i>YWCA</i> New Bedford	<i>Long-term Housing for employed women</i>	Outreach to BHOC; referrals from probation, parole Offers health workshop in BHOC	YWCA Empowerment model	Creates supportive community	Visits only			Full PAACA services & extensive local network	Demographics and CORI status	Homeless provider network
4. <i>PAACA, Step-up</i> New Bedford	<i>Long-term housing for employed women sober 6 months</i>	Referrals from police, parole, HOC, WATC, DCF	Trauma informed AA approach "feel, deal, heal"	Supportive recovery network	Parenting groups Sisters of Charity work with children	DCF voluntary cases	College students service learning	Extensive network referrals <i>For basic resources</i>	Demographics	Most caseworkers are in recovery Multicultural

Program Name and Location	Primary Resource/s	1. Relationship with CJ and Corrections	2. Trauma-informed holistic model	3. Sense of Community	4. Children's Connections	5. Caregivers Connections	6. Resources through Volunteers	7. Resource Network	8. Demographic & follow-up data	9. Additional features
5. <i>Immigrants Assistance Project</i> New Bedford	Assists with families' deportation concern	Referred by BHOC	Holistic concern for family of deportees		Helps the children deportees leave behind	Ensures children have caregivers			Data on deportees and cases	Advocates for changes in deportation proceedings
6. <i>YWCA Springfield</i>	Long term DV Shelter, must be employed Teen boys are allowed	Referrals from WMRWCC to Youth Build, as prerelease program	Emphasizes safety Strength and trauma-based	Many families live together	Children live with mothers; Home-schooling in the shelter				Demographics	
7. <i>Woman-shelter Companeras</i> Holyoke	Temporary housing For women with history of domestic violence and abuse; referrals to longer term housing	DV advocates work in local courts Pre-release talks with prison staff in HOC Inmates in safety planning workshops	Shelter movement	Peer support groups	Shelter takes children, including teenage boys		Trained volunteers work in shelter on weekends	Extensive shelter network and other resources	Demographic and follow up data	Multilingual
8. <i>After-Incarceration Support Services AISS</i> Springfield	Reentry Case-management and aftercare Weekly support groups	Linked with HOC to develop individual service release plans	Flexible and responsive to individual needs Relational model with clients & agencies	Creates a network of women "lifetime community" Involved with family	Works with Square One on childcare	Square One Works with DCF (see 9)	Ex-offenders are trained to work with clients	Regular network meetings with agencies neighborhood reentry day	Tracks individual service plans and recidivism rate	Computerized resource directory Supported by Sheriff Mentors are ex-offenders
9. <i>Square One Turning Point Fresh Start</i> Springfield	Parenting classes in prison Childcare services Family contact	Holds parenting classes in WMRWCC	Psycho-educational model Strength-based model Incentives and rewards	Peer recovery model for young mothers	Childcare Letter-writing kits to women and children Activity packs children's visits	Provide childcare assistance for caregivers, works with DCF	Students interns Girls Inc. provides mentors.	Extensive connections with many agencies	caseloads; and families	Multi-cultural ex-offender is a counselor Sheriff and diverse funding sources.

Program Name and Location	Primary Resource/s	1. Relationship with CJ and Corrections	2. Trauma-informed holistic model	3. Sense of Community	4. Children's Connections	5. Caregivers Connections	6. Resources through Volunteers	7. Resource Network	8. Demographic & follow-up data	9. Additional features
10. Boston University Metropolitan College, Boston	BA degree courses	Holds classes in prison	Curriculum tailored to women	Classroom is its own world				Network of volunteer tutors, SOAR55, Partakers; BU students	Participant numbers courses taken	BU finances program: Tutoring handbook
11. McGrath House Pre-release Boston	Shelter, Case-management for employed women	Three groups of women offenders DOC and HOC pre-release; federal parolees	Stress Empowerment Peer groups	Women live together in dorms Women's group weekly	Children can visit; and home furloughs	Caregivers bring children for visits	Federal guidelines preclude volunteers for federal prisoners	Extensive Boston network, Project Place Rosie's Place Mom's Project	Women's correctional status and demographics Data collected by Project Place	Produces own Resource guide Manages three groups under three contracts.
12. Mom's Project MORE Safe and Sound Return SISTA Boston	On-site Childcare SA treatment Parenting, Relapse prevention Levels I, II, III	Pre-offender; post conviction Reentry from HOC and McGrath House	Psycho-educational Workshops Trauma-informed.	Peer group support Woman-centered safe space, food and connection with staff	Children at program Advice on Reunification process (DCF mandated)	Reunification process	Clinical interns	Linked with research project at Northeastern U. funded by SAMSHA And extensive resource network	SAMSHA requires rigorous data collection	Multicultural
13. ABCD Project RISE ROSES START Boston	Safety Health Safe sex tests Incentive-based (SAMSHA model)	ATU, sentenced and pre-release in SHOC 48 hour transition plan to prevent relapse	Psycho-educational model to develop relationships	Women support each other in healing Accepting of women "where they are"	Not primary focus Refers to Mom's Place Where they do workshops	Not primary focus Assists with finding childcare	No volunteers SAMSHA staff training is rigorous	Entire ABCD program network	Collect data on intakes. JSI keeps data for SAMSHA funded projects	Integral part of HOC and ABCD, it's a partnership; they have easy access to the SHOC Multicultural advocate for women within institution

Program Name and Location	Primary Resource/s	1. Relationship with CJ and Corrections	2. Trauma-informed holistic model	3. Sense of Community	4. Children's Connections	5. Caregivers Connections	6. Resources through Volunteers	7. Resource Network	8. Demographic & follow-up data	9. Additional features
14 <i>Project Place</i> Boston	<i>Jobs, housing</i> <i>Preparatory workshops in SHOC</i>	Joint project with CREW, co-project directors Incarcerated; pre-release, reentry; occasional probation/judge referral	Relational approach encourages peer support	Mutual support in workshops Women meet up post-incarceration	Helps women to clarify reunification goals; obtain resources for children	Contact with caregivers; encourage visits	Uses student interns; bank volunteers	Extensive Boston provider network	Keeps data on all clients: demographics case notes, Two years of follow-up	Real 'partnership' collaboration between 2 agencies Multi-cultural
15 <i>Girl Scouts Beyond Bars</i> Boston	Daughters visit mothers in prison, and learn skills Mothers have parenting classes with Families First	Incarcerated women referred through MCI-F Family Preservation program	Girl scout values Relational model of mothers and daughters Mothers empowered by planning meetings	Girls meet between prison visits and bond on trips to prison Mothers develop support groups	Daughters ages 5-17 involved in program	Staff work with daughters' caregivers to permit visits	Volunteers drive girls from throughout MA. to visit mothers	Data on daughters	Multicultural Public Policy advocacy	
16 <i>South Middlesex Opportunity Council</i> <i>Women in Transition</i> Framingham	<i>Case-Management and assistance with CORI and housing</i>	Attend pre-release meetings at from MCI-F	Peer support among women is key		Assists with decision-making re: custody	Assists with DCF connections	Intern volunteers	Linked with all SMOC agencies	Demographics Service plans	Ex-offender on staff Advocates for women with agencies
17 <i>Reentry Program</i> Framingham	Visits women in prison prior to release and provides follow up support on release	Visits in prison for 6 months pre-release; and then post-release; prison program refers inmates to visitors	Flexible, support driven by women's requests	Visitors have monthly support group meetings	Visitors assist with family stresses	Visitors advise on women's family issues	All visitors are volunteers; receive orientation from experienced visitors			Faith-based group

APPENDIX C

SITE VISIT CONTACTS

Bristol County

Steppingstone, Inc.:

Laura Lamontagne
Office Coordinator
(508)984-1880

llamontagne@steppingstoneinc.org

Women's Center:

Jane Flynn
Clinical Director
(508) 996-3343

jflynn@thewomenscenteresc.com

YWCA of Southeastern Massachusetts

Gail Fortes
Executive Director
(508) 999-3255

gfortes@ywcasema.org

Immigrants Assistance Center:

Helena Marques
Executive Director
(508) 996-8113

mrq729@aol.com

PAACA: Positive Action Against Chemical Addiction

Brenda Souza
Clinical Director
(508)997-9051x111

bsouza@paaca.org

Hampden County

YWCA of Western Massachusetts

Mary Reardon-Johnson
Executive Director
(413)755-3101

mrj@ywworks.org

Square One Child Care Center

Debbie Flynn-Gonzalez
Family Services Supervisor
(413) 858-3129

dgonzalez@startsatsquareone.org

After Incarceration Support Systems

Jennifer Sordi
Assistant Deputy Superintendent
(413)781-2050

jen.sordi@sdh.state.ma.us

Penny Belisle
Support Coordinator
(413)781-2050x.8312

Sue Bergeron
Support Coordinator
(413)781-2050

Womanshelter/Companeras

Karen Cavanaugh
Executive Director
(413)538-9717

Kbcavanaugh@womanshelter.org

Carmen Montalvo
Advocate
(413)536-1629

Cmontalvo@womanshelter.org

Middlesex County

Aftercare Reentry Program:

Sister Maureen Clark
Prison Ministries- MCI Framingham
(508)380-4662
mlccsj@aol.com

South Middlesex Opportunity Council:

Beth Connolly
Director of Women in Transition Program
(508)620-2607
Bethc@smoc.org

Suffolk County

R.I.S.E and R.O.S.E.S: ABCD

Dorothea Keeling
Prevention and Education Coordinator
(617) 348-6416
keeling@bostonabcd.org

Joan Whitaker
Director of Health Services
(617)348-6260
Whitaker@bostonabcd.org

Girl Scouts Beyond Bars

Kimberly Zouzoua
Director of Community Collaborations
(508)923-0800
kzouzoua@girlscoutseasternmass.org

Jessia Roffi
GSBB Coordinator
(508)923-0800
jroffi@girlscoutseasternmass.org

Boston University- Prison Education Program

Robert Cadigan, Ph.D.
Associate Professor
Department of Applied Social Science
(617) 353-5945
rcadigan@bu.edu

Mom's Project: M.O.R.E. Program

Devin Larkin
Prevention and Reentry Program Manager
(617)534-7411
dlarkin@bphc.org

Iliana Ojeda-Rivera
Program Director
(617)534-7411
iojedarivera@bphc.org

McGrath House

Jamaya Pierre-Mike
Counselor
(617)445-0450
jpierre-mike@crj.org

Nicole
Case Manager
(617)445-0450

Project Place

Kim Nuttall
Director of Client Services
(617)542-3470 x273
knuttall@projectplace.org

Shelly Dunner
Career Coach
(617)542-3470 x431
sdunner@projectplace.org

Ilana Zablow
Life skills instructor
(617)542-3470 x432

Nusirat Hassan
Caseworker, Women's Program Services, Suffolk
County HOC
(617)635-1000 x. 2210
nhassan@scsdma.org

CORRECTIONS, TRAINING CENTERS, AND AGENCIES

DCF- Department of Children and Families

Susan Hubert
Domestic Violence Unit
Susan.Hubert@state.ma.us

DPH- Department of Public Health

Carlene Pavlos
Director, Division of Violence and Injury
Prevention
(617) 624-5463
carlene.pavlos@state.ma.us

Stone Center

Judith Jordan, Ph.D.
Director of Jean Baker Miller Learning Institute
(781)283-3800
jjordan@wellesley.edu

Institute of Health and Recovery

Laurie Markoff
Director of Trauma Integration Services
Lauriemarkoff@healthrecovery.org
(617)661-3991

Western Massachusetts Regional Women's Correctional Center

Patricia A. Murphy
Assistant Superintendent
(413)730-6801
patty.murphy@sdh.stae.ma.us

Sally Johnson Van Wright
Assistant Deputy Superintendent
(412)730-6800

Suffolk County HOC

Christina Ruccio
Director of Women's Program Services
(617)635-1000x2205
ruccio@scsdma.org

MCI-Framingham

Bethany Vanemburgh
Supervisor, Steps to Recovery/ Spectrum Health
Services
(508)532-5100x118
Bethany.Vanemburgh@spectrumhealthsystems.org

DOC- Department of Corrections

Veronica Madden, J.D.
Associate Commissioner of Reentry and
Reintegration
(508)422-3300
Veronica.Madden@state.ma.us

DATA SOURCES

- Antoniewicz, A. (2004). "The MA Department of Correction (DOC) by the Number." Retrieved 5 Dec. 2007, 2007, from http://www.cjpc.org/doc_doc_stats.htm.
- Bureau of Prisons (1980). National Prison Statistics, Criminal Justice Yearbook Washington DC.
- Calia, C. (2009). 2008 Court Commitments to the Massachusetts Department of Correction Massachusetts Department of Correction.
- Covington, S. (2008). Gender Matters: Creating Services for Women and Girls. First Annual Forensic Mental health conference. University of Massachusetts Boston.
- Dallaire, D. H. (2007). "Children with incarcerated mothers: Developmental outcomes, special challenges and recommendations." Journal of Applied Developmental Psychology 28(1): 15-24.
- Kates, E., S. Mignon, et al. (2007). Parenting from Prison: Family Relationships of Incarcerated Women in Massachusetts. Boston University of Massachusetts Boston
- Kates, E., P. Ransford, et al. (2005). Women in Prison in Massachusetts: Maintaining Family Connections, University of Massachusetts Boston.
- Massachusetts, D. O. C. (1981). 1980 Court Commitments to the Massachusetts Department of Correction. Boston
- Massachusetts, D. O. C. (2006). Female Offenders Returning to the Commonwealth: Strategic Planning and Research Brief
- Massachusetts, D. O. C. (2009). January 1, 2009 Inmate Statistics. Boston Department of Correction, Research and Planning Division
- Massachusetts, D. O. C. (2009). Weekly Count Sheet. Boston, MA, Massachusetts Department of Correction
- Mathews, H. and C. Calia (2009). Recidivism of 2002 Released Department of Correction Inmates. Boston, MA, Massachusetts Department of Correction
- Morton, J. B. (2007). "Providing Gender-Responsive Services for Women and Girls." Corrections Today 2.
- Mumola, C. J. (2000). Incarcerated Parents and their Children. Washington, DC, U.S. Department of Justice, Office of Justice Programs, Bureau of Justice Statistics: 12.
- Van Voorhis, P., E. Salisbury, et al. (2008). Achieving Accurate Pictures of Risk and Identifying Gender Responsive Needs: Two New Assessments for Women Offenders.