

EVIDENCE-BASED REENTRY PRACTICES FOR JUSTICE-INVOLVED WOMEN

Internet Resources

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When Survivors Reenter their Communities after Jail or Prison
developed by the National Clearinghouse for the Defense of Battered Women.

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Sections

Table of Contents	iii
Introduction.....	1
Background Information.....	2
Evidence-Based Reentry Practices	5
Women-Specific Reentry Practices	5
General Reentry Practices	5
Selected Evaluated Programs for Justice-Involved Women.....	9
Government Databases of Evidence-Based Practices	12

Table of Contents

INTRODUCTION.....	1
BACKGROUND INFORMATION	2
Evidence-Based Strategies for Working With Offenders	2
Evidence-Based Practices in the Criminal Justice System: An Annotated Bibliography.....	2
New Evidence-Based Practice (EBP) FACTSHEETS	2
A Checklist for Implementing Evidence-Based Practices and Programs for Justice-Involved Adults With Behavioral Health Disorders.....	4
EVIDENCE-BASED REENTRY PRACTICES.....	5
WOMEN-SPECIFIC REENTRY PRACTICES	5
Reentry Considerations for Women Offenders – One In a Series of Coaching Packets Designed to Assist Jurisdictions in the Implementation of Effective Practices that Will Support Successful Offender Outcomes.....	5
Gender-Responsive Reentry in Rhode Island: A Long and Winding Road	5
GENERAL REENTRY PRACTICES.....	5
Evaluation of the Allegheny County Jail Collaborative Reentry Programs Findings and Recommendations.....	5
National Institute of Corrections Report to the Nation FY 2013: Protecting the Promise: Serving America's Correctional Systems, Chapter Five: Evidence-Based Practices.....	6
What Works and What Doesn't in Reducing Recidivism with Youthful Offenders	6
Toward Evidence-Based Decision Making in Community Corrections: Research and Strategies for Successful Implementation.....	7
Finding Out 'What Works' in Reentry: Discovering Evidence-Based Practices.....	7
A Guide to Evidence-Based Prisoner Reentry Practices.....	7
Implementing Evidence-Based Practices: Coaching Packets	7
How to Prevent Prisoner Re-entry Programs from Failing: Insights from Evidence-Based Corrections.....	8
SELECTED EVALUATED PROGRAMS FOR JUSTICE-INVOLVED WOMEN.....	9
Gender-Responsive Drug Court Treatment: A Randomized Controlled Trial.....	9
Gender-Responsive Lessons Learned and Policy Implications for Women in Prison: A Review.....	9
Seeking Safety: An Intervention for Trauma-Exposed Incarcerated Women?	9
Implementing Gender-Responsive Treatment for Women in a Prison Setting: Client and Staff Perspectives	10
A Randomized Experimental Study of Gender-Responsive Substance Abuse Treatment for Women in Prison.....	10
Evaluation of a Trauma-Informed and Gender-Responsive Intervention for Women in Drug Treatment	10
Randomized Controlled Pilot Study of Cognitive-Behavioral Therapy in a Sample of Incarcerated Women With Substance Use Disorder and PTSD	11
Women Offender Transition and Reentry: Gender Responsive Approaches to Transitioning Women Offenders from Prison to the Community	11

Table of Contents

Outcome Evaluation of the Forever Free Substance Abuse Treatment Program: One-Year Post-Release Outcomes.....	11
GOVERNMENT DATABASES OF EVIDENCE-BASED PRACTICES.....	12
Evidence-Based Practices (EBP) Web Guide.....	12
The National Registry of Evidence-Based Programs and Practices (NREPP)	12

Introduction

Despite growing interest in and research about “what works” for reentering and justice-involved people, the internet currently has relatively few resources that address evidence-based reentry practices, and almost none that focus on evidence-based reentry practices specifically for women. The majority of the evidence-based practices resources that we included here regarding reentry could be applicable to both men and women. In this listing we have included resources about:

- Evidence-based reentry practices that are women specific;
- General evidence-based reentry practices
- Evidence-based practices for justice-involved people;
- Selected evaluated programs; although not specific to reentry, this information should be helpful to practitioners working with reentering women; and
- Government databases of evidence-based practices.

AUDIENCE

Practitioners and policymakers working with reentering and justice-involved people.

A NOTE ON LANGUAGE

Labels can often stigmatize people and create barriers between those using the labels and those being labeled. Some of the resources included in this listing use the term “offender” for women returning home from jails and prisons. It is not a term we use at the National Clearinghouse. Many incarcerated and formerly incarcerated women have objected to that term. We believe it is critical that individuals not be defined by their crime/alleged crime. Instead, we use terms such as “reentering woman,” “person returning from jail/prison,” or “formerly incarcerated woman.”

In this resource listing we changed words like “offender” or “inmate” when they did not appear in the title and when it did not affect the integrity of the document being described.

If you know of additional online resources that should be added to this list, please contact the National Clearinghouse. We would also like to know if you find errors or changes in any of the web addresses. Thanks.

This resource is part of a series of internet listings about When Survivors Reenter their Communities after Jail or Prison published by the National Clearinghouse for the Defense of Battered Women. Copies of these resources are available at www.ncdbw.org/reentry_resources.htm. Or email us at ncdbw@ncdbw.org and we will forward copies.

Background Information

This section includes general background information about evidence-based practices in the criminal justice system. These resources are not intended to be a complete primer on the topic, but we include them here as a starting point for those seeking a basic overview.

NOTE: The materials in each section are listed by year from the most recently published to those published longest ago. Within each year, they are listed alphabetically by title.



EVIDENCE-BASED STRATEGIES FOR WORKING WITH OFFENDERS

by Michael Rempel for the Center for Court Innovation (2014)

Excerpt: “Over the last 20 years, a critical mass of social science evidence has accumulated challenging what had previously been the prevailing notion that “nothing works” in the rehabilitation of [justice-involved individuals]. Findings from academic and program evaluation literatures in the fields of psychology, criminal justice, sociology, and public policy suggest that evidence-based interventions, which effectively combine the core principles of rehabilitation (risk-need-responsivity), deterrence, procedural justice, and collaboration, can significantly reduce recidivism. Additionally, emerging treatments for previously undertreated and underpublicized criminogenic needs (i.e., cognitive behavioral therapy for criminal thinking) are proving feasible and effective with [prisoner] populations in the United States and abroad. This fact sheet seeks to distill a growing body of research about evidence-based strategies in five areas for reducing recidivism among criminal [justice-involved individuals]: (1) assessment, (2) treatment, (3) deterrence, (4) procedural justice, and (5) collaboration.”

<http://www.courtinnovation.org/sites/default/files/documents/Evid%20Based%20Strategies.pdf>

EVIDENCE-BASED PRACTICES IN THE CRIMINAL JUSTICE SYSTEM: AN ANNOTATED BIBLIOGRAPHY

by the National Institute of Corrections (2013)

Excerpt: “Evidence-based policy and practice is focused on reducing [justice-involved individual] risk, which in turn reduces new crime and improves public safety. Of the many available approaches to community supervision, a few core principles stand out as proven risk reduction strategies. Though not all of the principles are supported by the same weight of evidence, each has been proven to influence positive behavior change. To organize the research, these core principles have been compiled . . . into the 8 Principles of evidence-based practice in corrections. This bibliography is not a complete list of ‘EBP’ citations, but a . . . selection based on questions received at the National Institute of Corrections Information Center.”

<http://nicic.gov/Library/026917>

NEW EVIDENCE-BASED PRACTICE (EBP) FACTSHEETS

by Alex M. Blandford and Fred C. Osher for SAMHSA’s GAINS Center (2013)

Excerpt: “In the field of behavioral health, the term evidence-based practices (EBPs) refers to interventions that have been rigorously tested, have yielded consistent, replicable results, and have proven safe, beneficial, and effective for most people diagnosed with mental illness and substance use disorders. Several years ago, SAMHSA’s GAINS Center convened expert panel meetings to assess the empirical evidence on the applicability of several key EBPs for justice-involved persons. The lead expert for each of these panels created summary EBP briefs subsequent to these meetings.

Recognizing the ever-changing nature of the field and the rapid pace of research developments, the GAINS Center reached out to these same experts to update these briefs.”

http://gainscenter.samhsa.gov/topical_resources/ebps.asp

Updated Briefs:

- ***Forensic Assertive Community Treatment: Updating the Evidence***
by Joseph P. Morrissey (2013)
Excerpt: “Forensic assertive community treatment (FACT) is an adaptation of the traditional assertive community treatment (ACT) model for people with serious mental illness who are involved with the criminal justice system. . . . FACT teams seek to leverage the ACT model by adding various practices designed (1) to interface with criminal justice processes at key sequential intercept points . . . and (2) to help people avoid future criminal justice involvement.”
<http://gainscenter.samhsa.gov/cms-assets/documents/141801-618932.fact-fact-sheet---joe-morrissey.pdf>
- ***Illness Management and Recovery***
by Kim T. Mueser (2013)
Excerpt: “This brief (1) describes the IMR [Illness Management and Recovery] program, (2) summarizes recent research on the IMR program, and (3) considers benefits and potential adaptations for providing IMR to individuals involved in the criminal justice system.”
<http://gainscenter.samhsa.gov/cms-assets/documents/141803-531013.imr-fact-sheet---kim-mueser.pdf>
- ***Integrating Mental Health and Substance Abuse Services for Justice-Involved Persons with Co-Occurring Disorders***
by Fred C. Osher (2013)
This brief argues for the application and evidence-based effectiveness of carefully integrating services – both treatment and programs – to contend with the extremely high “prevalence of co-occurring mental and addictive disorders (COD) among persons in jails and prisons.”
<http://gainscenter.samhsa.gov/cms-assets/documents/141810-590294.integrating-services.pdf>
- ***Reducing Criminal Recidivism for Justice-Involved Persons with Mental Illness: Risk/Needs/Responsivity and Cognitive-Behavioral Interventions***
by Merrill Rotter and W. Amory Carr (2013)
The authors of this brief “focus on criminal thinking, one of the identified ‘needs,’ and structured cognitive-behavioral interventions from the worlds of criminal justice and mental health that were created or adapted to specifically target the thoughts, feelings, and behaviors associated with criminal recidivism.”
<http://gainscenter.samhsa.gov/cms-assets/documents/141805-776469.cbt-fact-sheet---merrill-rotter.pdf>
- ***Supported Employment for Justice-Involved People with Mental Illness***
by Gary Bond (2013)
Excerpt: “This brief (1) describes the IPS [Individual Placement and Support] model and its evidence base, (2) identifies current trends in IPS services for justice-involved people, (3) summarizes studies of employment services for justice-involved people, and (4) suggests IPS adaptations for justice-involved people with mental illness.”
<http://gainscenter.samhsa.gov/cms-assets/documents/141809-655224.supported-employment.pdf>

Additional fact sheets:

- ***Motivational Interviewing (2011)***

Excerpt: “Motivational interviewing is a client-centered, goal-oriented approach to counseling, with the objective to increase a person’s intrinsic motivation for behavior change through the exploration and resolution of ambivalence.”

<http://gainscenter.samhsa.gov/pdfs/ebp/MotivationalInterviewing2011.pdf>

- ***Trauma-Specific Interventions for Justice-Involved Individuals (2011)***

Excerpt: “[T]rauma-specific interventions have been found to improve substance use, mental health symptoms, and coping skills . . . [and] have been adapted and implemented for use with justice-involved individuals and veterans. Preliminary findings on the effectiveness of these approaches for justice involved individuals are promising. Future research is needed. . . .”

<http://gainscenter.samhsa.gov/pdfs/ebp/TraumaSpecificInterventions.pdf>

- ***Moving Toward Evidence-Based Programs for Persons with Mental Illness in Contact with the Justice System***

by Caterina Gouvis Roman (2009)

Excerpt: “This fact sheet is based on a larger discussion paper, developed for and reviewed by an expert panel convened by the National GAINS Center [that] . . . provides a detailed synthesis of the criminal justice and housing and homelessness literature as it pertains to reentry housing, and describes seven promising reentry housing programs that serve persons with mental illness.”

<http://gainscenter.samhsa.gov/pdfs/ebp/MovingTowardEvidence-BasedHousing.pdf>

A CHECKLIST FOR IMPLEMENTING EVIDENCE-BASED PRACTICES AND PROGRAMS FOR JUSTICE-INVOLVED ADULTS WITH BEHAVIORAL HEALTH DISORDERS

by Alex M. Blandford and Fred C. Osher (2012)

Excerpt: [This is an] “easy-to-use checklist to help behavioral health agencies assess their utilization of EBPs associated with positive public safety and public health outcomes. The checklist is divided into two sections: Section One: Building a Cross-Collaborative System to Support the Implementation of EBPs helps behavioral health agencies determine if critical elements are in place in their systems to effectively implement EBPs and address the needs of clients who are involved in the criminal justice system. Section Two: Assessing and Implementing Effective Programs contains a list of EBPs and promising practices and programs for justice-involved clients. Providers should identify whether their agency utilizes these key practices and programs, or whether they should be prioritized for future implementation.”

<http://csgjusticecenter.org/mental-health/publications/a-checklist-for-implementing-evidence-based-practices-and-programs-for-justice-involved-adults-with-behavioral-health-disorders-2/>

Evidence-Based Reentry Practices

NOTE: The materials in each section are listed by year from the most recently published to those published longest ago. Within each year, they are listed alphabetically by title.



Women-Specific Reentry Practices

REENTRY CONSIDERATIONS FOR WOMEN OFFENDERS – ONE IN A SERIES OF COACHING PACKETS DESIGNED TO ASSIST JURISDICTIONS IN THE IMPLEMENTATION OF EFFECTIVE PRACTICES THAT WILL SUPPORT SUCCESSFUL OFFENDER OUTCOMES

by Phyllis Modley and Rachelle Giguere, Center for Effective Public Policy (2010)

Excerpt: “This Coaching Packet was originally developed to assist grant teams that were established to manage local PRI [Prisoner Reentry Initiative] initiatives. The teams were composed of representatives from institutional and community corrections and faith-based or community organizations involved in the delivery of pre- and post-release services to [justice-involved individuals] transitioning from prison to the community. The content of these Coaching Packets has much broader application, however; the information and tools contained within this Coaching Packet can also be used by teams of criminal justice professionals and their partners to assess the status of their efforts in implementing evidence-based practices and effective reentry services to [prisoners]. . . . Research on the differences between male and female [justice-involved individuals] invites institutional corrections and community supervision agencies to review the extent to which current practices acknowledge how women’s experiences within and outside of the criminal justice system are different from their male counterparts. Through an understanding of these critical differences, corrections agencies can focus on those policies and programs that will maximize the success of women reentering the community.”

<http://cepp.com/documents/Reentry%20Considerations%20for%20Women.pdf>

GENDER-RESPONSIVE REENTRY IN RHODE ISLAND: A LONG AND WINDING ROAD

by Bree Derrick (2007)

Excerpt: “Our planned adoption of a new gender-responsive assessment tool is an exciting opportunity for RIDOC [Rhode Island Department of Corrections] to incorporate evidence-based decision making into the heart of daily operations. The new, dynamic assessment tool will be a vast improvement over the current instrument, which contains primarily static criminal history items and fails to account for mental health or substance abuse treatment needs in women’s custody placement. Once adopted, it can potentially provide seamless assessment and reassessment from institution through pre-release planning to the community for probationers and parolees.”

<http://static.nicic.gov/Library/022786.pdf>

General Reentry Practices

EVALUATION OF THE ALLEGHENY COUNTY JAIL COLLABORATIVE REENTRY PROGRAMS FINDINGS AND RECOMMENDATIONS

by Janeen Buck Willison, Samuel Bieler, KiDeux Kim for the Urban Institute (2014)

Excerpt: “In 2010 and 2011, Allegheny County, Pennsylvania, launched local reentry programs under the auspices of the Bureau of Justice Assistance Second Chance Act Adult Offender Reentry

Demonstration Programs initiative. Designed to reduce recidivism and improve [prisoners'] transition to the community, the first of these two programs (Reentry1) linked sentenced Allegheny County jail [prisoners] to Reentry Specialists who coordinated reentry services and programming both in jail and the community. The second program (Reentry2) connected [prisoners] to designated reentry Probation Officers before release, who then engaged [prisoners] in prerelease reentry planning and supervised them in the community after release. Both programs attempted to reduce reoffending through the use of risk/needs assessment, coordinated reentry planning, and delivery of evidence-based programs and practices. In September 2012, researchers in the Urban Institute's Justice Policy Center (Urban-JPC) initiated a 12-month process and outcome evaluation of both reentry programs to answer critical questions about program performance and effectiveness. The study's process evaluation examined program fidelity and alignment with core correctional practices. This report summarizes the study's findings. . . . and sets them in the context of extant research on reentry and evidence-based correctional practices. As such, this report begins with a review of reentry efforts in Allegheny County, including the Reentry1 and Reentry2 programs, and then briefly consults the research literature on reentry to set the current study and its results in context. Next, we discuss the study's objectives, methods, key evaluation components, and core evaluation activities. Results from the fidelity assessment are then presented, followed by the impact analysis and its findings. The report concludes by offering a series of actionable recommendations for research, practice, and programming drawn from the study's findings." <http://www.urban.org/UploadedPDF/413252-Evaluation-of-the-Allegheny-County-Jail-Collaborative-Reentry-Programs.pdf>

NATIONAL INSTITUTE OF CORRECTIONS REPORT TO THE NATION FY 2013: PROTECTING THE PROMISE: SERVING AMERICA'S CORRECTIONAL SYSTEMS, CHAPTER FIVE: EVIDENCE-BASED PRACTICES

by the National Institute of Corrections (2014)

Excerpt: "In this chapter, we review a short list of reentry-related initiatives demonstrating the National Institute of Corrections' (NIC) use of evidence-based practice in the field. For NIC, reentry begins when [individuals] become involved in the criminal justice system. We understand that simple things like whether [justice-involved individuals] have a place to stay upon release or whether they have received training to find and keep a job are paramount to their success in the community. It helps ensure that they do not return to crime as a means of resolving their personal issues. NIC's programs help organizations, communities, and criminal justice systems create solutions that help people find stability in their lives and reduce their risk to reoffend."

<https://s3.amazonaws.com/static.nicic.gov/Library/028144.pdf>

WHAT WORKS AND WHAT DOESN'T IN REDUCING RECIDIVISM WITH YOUTHFUL OFFENDERS

by Edward J. Latessa (2014)

Annotation by National Institute of Corrections: "This is a great introduction about how to effectively reduce [justice-involved youth] recidivism. Topics discussed include: the meaning of evidence based practice (EBP); five things EBP requires; what research tells us; principles for effective interventions—risk (who), need (what), treatment (how), and fidelity (how well); risk principle—"Risk refers to the risk of reoffending not the seriousness of the offense", target higher risk youth, provide most intensive interventions to higher risk youth, and providing intensive treatment for low risk youth will often increase their recidivism; risk and need factors; the necessity for assessments--Youthful Level of Service/Case Management Inventory, Youth Assessment and Screening Instrument (YASI), and the Ohio Youth Assessment System (OYAS); dynamic and static factors; treatment principle—most effective are behavioral models (i.e., structured social learning, family-based intervention, and cognitive intervention); ineffective approaches with [justice-involved youth]; fidelity principle—ensuring the program is implemented

as it was designed; a new model of probation officer (PO) and [justice-involved individual] interaction--Effective Practices in Correctional Supervision (EPICS); and some lessons learned from research.”

<http://www.attendicadd.com/2014/speaker/latessa1.pdf>

TOWARD EVIDENCE-BASED DECISION MAKING IN COMMUNITY CORRECTIONS: RESEARCH AND STRATEGIES FOR SUCCESSFUL IMPLEMENTATION

edited by Stephen M. Haas (2013)

Excerpt: “This special issue of Justice Research and Policy contains invited articles on community corrections, with special emphasis on successful implementation strategies. A common thread that runs through these articles relates to what is needed to better ensure fidelity to evidence-based practices in community supervision and treatment. The research and implementation strategies shared by the authors should provide greater guidance to agency and program administrators working to assimilate evidence-based practices into their organizations, . . . We are now at a critical point in community corrections, transitioning from ‘get tough,’ punishment-oriented strategies to [prisoner] rehabilitation, risk reduction, community reintegration, and evidence-based approaches to controlling crime. The long-term prospects of the current evidence-based movement hinge on our ability to address known barriers to successful implementation.”

http://www.jrsa.org/pubs/jrp-digest/jrp-digest-vol_15-no_1.pdf

FINDING OUT ‘WHAT WORKS’ IN REENTRY: DISCOVERING EVIDENCE-BASED PRACTICES

by Tiffany Mease (2012)

Author’s Abstract: “Prisoner reentry has recently returned to the policymaking agenda, as the need to remedy the cycle of incarceration is being acknowledged and addressed. With this renewed interest in reentry come federal funds and an effort to rigorously evaluate programs aimed at helping prisoners successfully reintegrate into their communities. This paper examines these initiatives, describing lessons learned and identifying obstacles of both program implementation and evaluation. The goal is to provide insights and recommendations for policymakers and practitioners in order to facilitate the development of evidence-based practices. I find that many implementation obstacles are related to issues of coordination and communication, as various service providers struggle to provide continuous, comprehensive services. Scientifically rigorous outcome evaluations are emerging, which provide useful examples of the types of studies that will help identify ‘what works’. In the conclusion, I provide several recommendations for moving forward.”

<https://www.american.edu/spa/publicpurpose/upload/Finding-Out-What-Works-in-Reentry.pdf>

A GUIDE TO EVIDENCE-BASED PRISONER REENTRY PRACTICES

compiled by Barbara Glassheim for the Michigan Prisoner Reentry Initiative (2011)

Excerpt: “This guide is based on a review of the voluminous and robust base of literature on effective correctional practices as well as research from relevant social sciences. It is intended to inform local policy and practice and promote the maximization of resources. While aimed at corrections, it is hoped that all partners in reentry will find useful information.”

<https://www.sccmha.org/userfiles/filemanager/278/>

IMPLEMENTING EVIDENCE-BASED PRACTICES: COACHING PACKETS

by Frank Domurad and Mark Carey, edited by Madeline M. Carter (2010)

Excerpt: “As a part of its technical assistance delivery to the PRI grantees, the Center developed a series of tools to assist grantees in specific areas of their reentry work. The final products of this work include eleven Coaching Packets in three series. These Coaching Packets offer practical value

beyond the jurisdictions involved in this initiative and are available to criminal justice professionals and their partners interested in enhancing their strategies for reducing recidivism and improving [prisoner] outcomes. Each Coaching Packet provides an overview of a specific topic as it relates to successful [prisoner] reentry, and offers tools and resources for those interested in exploring the topic in greater depth. Series 1 provides a blueprint for an effective [prisoner] reentry system. This series provides a conceptual framework for addressing prisoner reentry at the policy level; outlines a strategic planning process to support implementation efforts; and explores the establishment of successful collaborative partnerships at the policy and case management levels. Series 2 addresses key issues related to the delivery of evidence-based services to [prisoners]. This series summarizes the key literature with regard to implementing evidence-based practices; explores advances in approaches to case management; addresses the important role of staff in changing [prisoner] behavior; and summarizes research and practice as it relates to working with women [prisoners], engaging families, and mentoring. Series 3 provides guidance and tools to ensure that reentry efforts achieve their intended outcomes. This series describes methods to assess the effectiveness of reentry efforts and offers strategies for achieving continuous quality improvement.”

<http://www.cepp.com/documents/Implementing%20Evidence%20Based%20Practices.pdf>

HOW TO PREVENT PRISONER RE-ENTRY PROGRAMS FROM FAILING: INSIGHTS FROM EVIDENCE-BASED CORRECTIONS

by Shelley Johnson Listwan, Francis T. Cullen, and Edward J. Latessa (2006)

Excerpt: “Although many persuasive ideas are being put forward and promising programs implemented, we are concerned that insufficient attention is being given to an important development in corrections: the increasing knowledge about ‘what works’ to change [prisoner] conduct, knowledge that is based on the ‘principles of effective correctional intervention’ (Cullen & Gendreau, 2000). Informed by this perspective, we attempt to outline how this knowledge base can help inform current attempts to design and implement efficacious re-entry programs. We also caution that a failure to heed evidence-based correctional practice is likely to result in re-entry programs that do not reach their full potential and, perhaps, simply do not work (MacKenzie, 2000; Latessa, Cullen, & Gendreau, 2002).”

<http://www.uc.edu/content/dam/uc/ics/docs/ListwanCullenLatessaHowToPrevent.pdf>

Selected Evaluated Programs for Justice-Involved Women

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GENDER-RESPONSIVE DRUG COURT TREATMENT: A RANDOMIZED CONTROLLED TRIAL

by Nena Messina, Stacy Calhoun, and Umme Warda (2012)

Excerpt: “This pilot study outcomes for 94 [justice-involved women] in San Diego County, California, who participated in four drug court programs. Women were randomized to gender-responsive (GR) programs (Helping Women Recover and Beyond Trauma) or standard mixed-gender treatment. Results show some beneficial effects of adding treatment components oriented toward women’s needs: GR participants had better in-treatment performance, more positive perceptions related to their treatment experience, and trends indicating reductions in posttraumatic stress disorder (PTSD) symptomology.”

<http://cjb.sagepub.com/content/39/12/1539.full.pdf+html>

GENDER-RESPONSIVE LESSONS LEARNED AND POLICY IMPLICATIONS FOR WOMEN IN PRISON: A REVIEW

by Emily M. Wright, Patricia Van Voorhis, Emily J. Salisbury and Ashley Bauman (2012)

Author’s Abstract: “The authors review evidence of gender-responsive factors for women in prisons. Some gender responsive needs function as risk factors in prison settings and contribute to women’s maladjustment to prison; guided by these findings, the authors outline ways in which prison management, staff members, and programming can better serve female prisoners by being more gender informed. The authors suggest that prisons provide treatment and programming services aimed at reducing women’s criminogenic need factors, use gendered assessments to place women into appropriate interventions and to appropriately plan for women’s successful reentry into the community, and train staff members to be gender responsive.”

[http://www.uc.edu/content/dam/uc/womenoffenders/docs/Wright,%20Van%20Voorhis,%20Salisbury,%20%26%20Bauman%20\(2012\)%20-%20GR%20Lessons%20Learned%20copy.pdf](http://www.uc.edu/content/dam/uc/womenoffenders/docs/Wright,%20Van%20Voorhis,%20Salisbury,%20%26%20Bauman%20(2012)%20-%20GR%20Lessons%20Learned%20copy.pdf)

SEEKING SAFETY: AN INTERVENTION FOR TRAUMA-EXPOSED INCARCERATED WOMEN?

by Shannon M. Lynch, Nicole M. Heath, Kathleen C. Matthews, and Galatia J. Cepeda (2012)

Author’s Abstract: “Recent guidelines for incarcerated women’s programming have called for integrated interventions that address [prisoners’] traumatic experiences, posttraumatic stress disorder (PTSD), and substance use. Seeking Safety (SS) is a manualized, empirically supported cognitive behavioral treatment for individuals with PTSD and substance use disorders. This study examined the effectiveness of SS with 59 incarcerated women who completed the intervention and 55 who were waitlisted. Participants in SS demonstrated greater symptom improvement in PTSD and depression as well as improved interpersonal functioning and coping as compared to waitlisted [prisoners].”

http://www.researchgate.net/publication/51974686_Seeking_safety_an_intervention_for_trauma-exposed_incarcerated_women

IMPLEMENTING GENDER-RESPONSIVE TREATMENT FOR WOMEN IN A PRISON SETTING: CLIENT AND STAFF PERSPECTIVES

by Stacy Calhoun, Nena Messina, Jerome Cartier, and Stephanie Torres (2010)

Excerpt: “Women tend to define themselves and their self-worth in terms of their relationships, and drug relapses are often related to ongoing and/or failed relationships (Covington & Surrey 1997; Stevens & Glider, 1994). The findings from the client focus groups confirmed that relationships played an important part in the lives of the women in the women-focused program. They all agreed that in order to get their lives on track they had to work through their relationship issues. Thus the curriculum based on relational theory proved to be a good fit for this group of women. . . . In order for this curriculum to be truly effective, it has to be delivered in a stable, safe, and supportive environment that allows the women to feel comfortable to fully disclose and process what is going on in their lives. This is difficult to do in a prison setting for various reasons.”
<http://www.uscourts.gov/uscourts/FederalCourts/PPS/Fedprob/2010-12/implementing.html>

A RANDOMIZED EXPERIMENTAL STUDY OF GENDER-RESPONSIVE SUBSTANCE ABUSE TREATMENT FOR WOMEN IN PRISON

by Nena Messina, Christine E. Grella, Jerry Cartier, and Stephanie Torres (2009)

Author’s Abstract: “This experimental pilot study compared post-release outcomes for 115 women who participated in prison-based substance abuse treatment. Women were randomized to a gender-responsive treatment (GRT) program using manualized curricula (Helping Women Recover and Beyond Trauma) or a standard prison-based therapeutic community. Data were collected from the participants at prison program entry and 6 and 12 months after release. Findings show the beneficial effects of treatment components oriented toward women’s needs and support the integration of GRT in prison programs for women.”

<http://www.ncbi.nlm.nih.gov/pmc/articles/PMC2815183/>

EVALUATION OF A TRAUMA-INFORMED AND GENDER-RESPONSIVE INTERVENTION FOR WOMEN IN DRUG TREATMENT

by Stephanie S. Covington, Cynthia Burke, Sandy Keaton, and Candice Norcott (2008)

Author’s Abstract: “There is growing recognition of the complex needs of women with dual diagnoses of substance abuse and mental health disorders. Recent research indicates that 55% to 99% of women with co-occurring disorders have experienced trauma from abuse and that abused women tend to engage in self-destructive behaviors. These women often are not well served by the services found in their communities, which separate substance abuse and mental health programs, despite the fact that research shows that integrated, trauma-informed treatment services will increase the success of their recovery. A recent study examined the use of two gender-responsive, trauma-informed curricula presented in a residential facility for women, 55% of whom had criminal histories. Helping Women Recover and Beyond Trauma are both manualized programs founded on research and clinical practice and are grounded in the theories of addiction, trauma, and women’s psychological development. This treatment model is named ‘Women’s Integrated Treatment’ (WIT). Women who successfully completed the programs were assessed at several points in time on several scales, including trauma symptomology, depression, and substance use before and after the programs. The findings indicated less substance use, less depression, and fewer trauma symptoms ($p \leq .05$) – including anxiety, sleep disturbances, and dissociation – after participation in the WIT curricula.”

<http://www.stephaniecovington.com/assets/files/Covington%20%20Burke%20%20Keaton%20%20and%20Norcott%20SARC.pdf>

RANDOMIZED CONTROLLED PILOT STUDY OF COGNITIVE-BEHAVIORAL THERAPY IN A SAMPLE OF INCARCERATED WOMEN WITH SUBSTANCE USE DISORDER AND PTSD

by Caron Zlotnick, Jennifer Johnson, and Lisa M. Najavits (2008)

Excerpt: "This randomized controlled pilot study that compared a cognitive-behavioral therapy, Seeking Safety (SS), plus treatment-as-usual (TAU) to TAU-alone in 49 incarcerated women with substance use disorder (SUD) and posttraumatic stress disorder (PTSD; full or subthreshold). Seeking Safety consisted of a voluntary group treatment during incarceration and individual treatment after prison release. TAU was required in the prison and comprised 180 to 240 hours of individual and group treatment over 6 to 8 weeks. . . . Satisfaction with SS was high, and a greater number of SS sessions was associated with greater improvement on PTSD and drug use. . . . The complex needs of this population are discussed."

<http://www.ncbi.nlm.nih.gov/pmc/articles/PMC3031094/>

WOMEN OFFENDER TRANSITION AND REENTRY: GENDER RESPONSIVE APPROACHES TO TRANSITIONING WOMEN OFFENDERS FROM PRISON TO THE COMMUNITY

by Judith Berman; Center for Effective Public Policy and the National Institute of Corrections (2005)

Written for practitioners in corrections, this resource discusses how systems' stakeholders' understanding of the needs of women can encourage a safer and more successful reentry. Excerpt: "The rapidly increasing population of women under correctional supervision, and their differences from [justice-involved men] in terms of the crimes and pathways that bring them into the system, their risks and needs, and their role in the community from which they've come and to which they will return suggest that stakeholders in the transition process need to think differently about how to promote women's successful reentry. The National Institute of Corrections (NIC) has been working in the areas of [prisoner] transition and [reentering women] for many years, providing support to jurisdictions in thinking about and implementing best practices in both of these arenas. This document attempts to synthesize these two bodies of experience and learning by addressing gender responsive approaches to transition, using the system change model developed for NIC's Transition from Prison to Community (TPC) Initiative."

<http://static.nicic.gov/Library/021815.pdf>

OUTCOME EVALUATION OF THE FOREVER FREE SUBSTANCE ABUSE TREATMENT PROGRAM: ONE-YEAR POST-RELEASE OUTCOMES

by Michael Prendergast (2001)

Excerpt: "This study demonstrates the effectiveness of the cognitive-behaviorally-oriented Forever Free program. Most research on prison-based treatment involves programs based on the therapeutic community model. We recommend that additional research be undertaken on the effectiveness of psycho-educational or cognitive-behavioral models of treatment in contrast to therapeutic community treatment within criminal justice settings. In addition, therapeutic community treatment programs typically are 12 months in length. That the Forever Free program, which was only 6 months in duration at the time of the study, was able to demonstrate its effectiveness may indicate that considerable cost savings could be achieved. Additional research needs to be undertaken on the composition and duration of programs for women in the criminal, justice system."

http://www.in.gov/idoc/files/NCRJS_Outcome_Eval.pdf

Government Databases of Evidence-Based Practices

These are online resources that include databases of wide-ranging evidence-based practices (EBP). Though not specific to reentering people, we encourage you to explore these databases, as they may include information relevant to those working with reentering women (and men).



EVIDENCE-BASED PRACTICES (EBP) WEB GUIDE

Organizational Description: “The Evidence-Based Practices (EBP) Web Guide features research findings and details about EBPs used to prevent and treat mental and substance use disorders. EBPs integrate clinical expertise; expert opinion; external scientific evidence; and client, patient, and caregiver perspectives so that providers can offer high-quality services that reflect the interests, values, needs, and choices of the individuals served.” This is a joint project of SAMHSA and the U.S. Department of Health and Human Services (HHS).

<http://www.samhsa.gov/ebp-web-guide>

THE NATIONAL REGISTRY OF EVIDENCE-BASED PROGRAMS AND PRACTICES (NREPP)

Organizational Description: “NREPP is a searchable online database of mental health and substance abuse interventions. NREPP is a project of SAMSHA (Substance Abuse and Mental Health Services Administration). All interventions in the registry have met NREPP’s minimum requirements for review and have been independently assessed and rated for Quality of Research and Readiness for Dissemination. The purpose of NREPP is to help the public learn more about available evidence-based programs and practices and determine which of these may best meet their needs. NREPP is one way that SAMHSA is working to improve access to information on evaluated interventions and reduce the lag time between the creation of scientific knowledge and its practical application in the field.”

<http://www.nrepp.samhsa.gov/Index.aspx>