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RESEARCH REPORT

WOMEN OFFENDERS:
CHARACTERISTICS, NEEDS AND
IMPACTS OF TRANSITIONAL HOUSING

**EXTERNAL
RESEARCH
PROGRAM**



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Women Offenders: Characteristics, Needs and Impacts of Transitional Housing

Final Research Report

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Abstract

This research project examines the personal characteristics, housing and housing-related needs of women offenders in Canada and the impact of post-prison transitional housing on their community re-integration.

There are three components to this research project. A longitudinal study component compared criminal justice, health, housing, family relationship and other characteristics of a small group of women who had received post-prison transitional housing at Pathways with those who had not, at three points of time. Pathways is a nine unit specialized transitional housing program located in the Vancouver region. The comparison group was drawn from Columbia House, a community residential facility for women on parole.

The research also included a review of the international literature addressing the subject of women offenders, their characteristics and housing-related needs. The third component was a survey of key respondents in BC who work directly with women offenders.

The most significant improvements in the Pathways group in comparison to the Columbia House group were related to the lack of subsequent criminal charges or returns to custody, the increase in stable, non-transient, safe and secure housing, improvements in health and nutritional status, the increased ability of women to prepare food at home and reduced levels of self-described drug/alcohol misuse. Pathways participants were slightly more involved in specific job training programs and had experienced fewer problems finding a place to sleep at night. Pathways women also reported fewer mental health disorders at the final interview.

Levels of income decreased for both groups during the study (possibly due to less reliance on illegal forms of income), but there was a significant improvement in the number and frequency of personal and family contacts in both groups. There were also improvements in feelings of self-worth and a sense of hopefulness in both groups. However, at the final interview three out of seven of the Pathways participants still felt that they had problems making decisions or lacked sufficient skills to handle life well.

The evidence from the study indicates that planned, safe, secure, affordable and program enhanced transitional housing helps women to reintegrate in the community and may reduce recidivism.

TABLE OF CONTENTS

Table of Contents	i
List of Tables and figures.....	iii
Executive Summary.....	v
Acknowledgements.....	ix
1.0 Introduction and Organization of this Report	1
1.1 Introduction.....	1
1.2 Description of Pathways & Comparison Group.....	1
1.3 Organization of the Comparative Study Report	2
2.0 Background to the Research	3
2.1 Characteristics and Needs of Women Offenders.....	3
3.0 Research Design	4
3.1 Objective of the Research	4
3.2 Research Design	4
3.2.1 Methodology.....	4
3.2.2 Research Participant Selection	5
3.2.3 Retention of Participants in the Study	6
3.2.4 Consent Process.....	7
3.3 Research Challenges	7
3.3.1 Changes to Length of Residency at Pathways.....	7
3.3.2 Selection of Characteristics of Comparison Group.....	7
3.3.3 Retention of Participants in the Study	8
3.3.4 Limitations of Baseline Data.....	8
4.0 Demographic Data: Baseline	9
4.1 Age of Participants	9
4.2 Number of Children and Dependent Children while in Custody.....	9
4.3 Ethnic Background	9
5.0 Educational & Training Characteristics	10
6.0 Criminal Justice Background and New Charges.....	12
6.1 Charges and Length of Incarceration	12
6.2 New Charges.....	12
6.3 Return to Custody.....	13
7.0 Housing and Housing Stability.....	14
7.1 Overview of Housing Patterns	14
7.2 Previous Housing Instability.....	14
7.3 Influence of Pathways on Housing Stability	15
7.4 Use of Homeless Shelters/Finding a Place to Sleep at Night	15

7.5	Type and Quality of Housing	15
7.6	Quality of Housing	16
8.0	Changes to Health Status.....	17
8.1	Overview of Health Issues	17
8.2	Respondent Assessment of General Health Status.....	17
8.3	Food and Nutritional Issues	18
8.4	Mental Health Issues	19
8.4.1	Overview	19
8.4.2	Types of Mental Health Issues	20
9.0	Alcohol and Drug Issues.....	21
9.1	Prevalence and Seriousness of Alcohol/Drug Issues	21
10.0	Use of Health Care Resources	22
11.0	Employment and Economic Status.....	25
11.1	Employment Status	25
11.2	Main Source of Income.....	26
11.3	Level of Income	26
12.0	Personal and Family Relationships	28
12.1	Family Relationships	28
12.2	Personal Friendships and Support Networks.....	29
13.0	Self-Assessments.....	30
14.0	Knowledge of or Involvement in Community resources	32
15.0	Participant Rating of Housing and Program Support	33
16.0	Conclusions.....	35

APPENDICES

- Appendix I: Women Offenders: Characteristics, Needs and Impacts of Transitional Housing: Literature Review
- Appendix II: Women Offenders: Characteristics, Needs and Impacts of Transitional Housing: Key Respondent Summary.
- Appendix III: Information and Consent Forms

LIST OF TABLES AND FIGURES

Figures

Figure 1:	Origin of Pathways & Comparison Groups	5
Figure 2:	Pattern of Housing Stability of A Women Offender in the Comparison Group (Columbia House).....	14

Tables

Table 1:	Location of Respondents at Each Interview Phase	6
Table 2:	Number and Type of Respondents.....	6
Table 3:	Ages of Participants.....	9
Table 4:	Ethnic Background of Participants.....	9
Table 5:	Education Level of Baseline	10
Table 6:	Training and Education Participation Levels.....	10
Table 7:	Conviction descriptions.....	12
Table 8:	Length of Incarceration over Past 5 – 10 years	12
Table 9:	Comparison of New Charge Rate.....	13
Table 10:	Stability of Housing between Second and Final Interviews.....	15
Table 11:	Type of Housing at Final Interview	16
Table 12:	Quality of Housing	16
Table 13:	Respondent Assessment of Health	17
Table 14:	Body Weight Status (as an Indicator of Health).....	18
Table 15:	Meal Sources.....	19
Table 16:	Number of Respondents with Mental Health Problems	20
Table 17:	Alcohol/Drug Use and Treatments.....	21
Table 18:	Use of Health Care Resources: Pre-incarceration and Final Interview.....	23

Table 19:	Participant Use of Health Services	24
Table 20:	Employment Status	25
Table 21:	Main Sources of Income	26
Table 22:	Income Level	27
Table 23:	Respondent Assessment of Relationship with Family Members	28
Table 24:	Frequency of Contact with Family Members.....	28
Table 25:	Self-Assessment.....	31
Table 26:	Awareness of Community Programs and Resources	32
Table 27:	Comparison of Pre-Incarceration and Final Outcomes for Pathways and Comparison Groups	35

EXECUTIVE SUMMARY

This document presents the findings of a research project that examined the personal characteristics, housing and housing-related needs of women offenders and the importance of post-prison transitional housing in helping women offenders successfully reintegrate into the community.

There were three parts to this research project. A longitudinal study component compared criminal justice, housing, health and other outcomes of a small group of women who had received transitional post-prison housing with women who had not received this type of housing support. The second component was a literature review which reviewed the characteristics of women offenders, their housing and housing-related needs, and the impacts of being involved in post-prison transitional housing. A survey of seventeen key respondents working with women offenders in the Vancouver region was also undertaken to identify the housing related needs of women offenders and housing services that are available.

The longitudinal comparison study involved women who resided at Pathways, a nine unit transitional housing program for women who have left the custodial environment (prison and parole facilities) and who require assistance with reintegration in order to successfully function in the community. Pathways is managed and staffed by the Elizabeth Fry Society of Greater Vancouver. The comparison group was drawn from Columbia House residents. Columbia House is a community residential facility for women on parole that offers some support, counseling and assistance as well as housing with 24 hour staffing.

The goal of Pathways is to provide stable transitional safe, secure and flexible housing, supportive programs and counseling for high risk women offenders in order to increase their ability to live independently and to assist in their social integration into the community so that they do not commit further crimes or return to prison.

The Literature Review found that research on women offenders has been limited due to the relatively small proportion of women in the criminal justice system and the fact that women are less likely to commit serious violent crimes. The literature that does exist indicates that women offenders are seriously disadvantaged in most aspects of their lives. On every significant measure women offenders have serious personal barriers that limit their successful re-integration into the community after prison. A majority have complex histories of physical and sexual abuse and serious general health, mental health and addiction problems. Many are single parents, have limited education or employment skills, are isolated and lack family support. The results of the Key Respondents Survey also reflected these finds.

Both the Literature Review and Key Respondent survey concluded that safe, private, secure and stable transitional housing is critical for women who are leaving prison and re-entering the community. Women lack money, family support, life skills, identification papers and suffer acute and chronic general and mental health problems as well as addiction when leaving prison. Most have childcare responsibilities. Program supported housing is a priority if re-offending is to be avoided.

The characteristics of women offenders that were examined and compared in the longitudinal comparative components of this research project were:

- Criminal practice background and incarceration history;*
- Mental and physical health status;*

- *The use of the health care system – particularly the use of stable versus emergency health services;*
- *History and changes to income and employment patterns;*
- *Substance use and misuse;*
- *Mental health issues;*
- *History of education and employment training;*
- *Duration, safety and stability of housing;*
- *Food intake, food sources and nutritional status;*
- *Quality and stability of family relationships;*
- *Involvement in and knowledge of the community;*
- *Quality of life and self-assessment of confidence and worth.*

The methodology used in the comparative research was a set of comprehensive interviews to collect information about the status of women prior to incarceration, at the first research contact stage post-incarceration (September 2003) and 6-12 months later. The interviews were lengthy and were done in person or by telephone. The pre-incarceration and September 2003 data were collected at the same interview.

Eight Pathways participants participated in the baseline and first interview; seven in the final interview. Nine women from Columbia House were involved in the first two interviews; seven women completed the final interview.

This research had a number of limitations. The sample size for both groups was small, there were difficulties tracking and retaining subjects in the study and the duration of stay for residents at Pathways was longer than expected, making the assessment of community outcomes difficult.

The comparison group was drawn from women who had stayed at Columbia House, a parole facility. The selection of this site was necessary in order to be able to identify appropriate respondents for the study but meant that the comparison group had also received housing and some level of program support. The average stay for residents at Columbia House is approximately 6 months.

Baseline data for the study was drawn from the period prior to each woman's incarceration. Women were asked to recall their status and situation at that time. The quality of some of this data may be affected by the time lag.

The Pathways and comparison group participants were similar in terms of age, number of children and ethnic background. Three women in the study were from ethnic minorities, including two Aboriginal women. It is well known that there is a disproportionate number of Aboriginal women in the Canadian prison population.

Conclusions from the comparison study reinforce the findings from the literature review and key respondent survey describing the characteristics of women offenders. The educational status for most of the women in this study was low: only 9/17 had completed grades 8-10, many had extensive criminal backgrounds, low levels of employment and had experienced a high degree of housing instability. Almost half the women had moved 6-10 times in the last five years. Six of the seventeen women said they had spent periods of 1-18 months prior to incarceration living with others (this is labeled "couch surfing" by some). Most rated the condition, safety and cleanliness of their housing prior to their last major incarceration in the low to moderate range.

Most of the Pathways and half of the comparison group described themselves as having serious health problems prior to incarceration. All the women in the Pathways group defined their health as poor. The major health problems cited were Hepatitis C, drug addiction, depression/anxiety and malnutrition. Six out of eight of the Pathways women described themselves as severely underweight at pre-incarceration. Seven out of eight Pathways and 5/9 comparison group members said they had problems affording food for substantial periods of time. Few of the women prepared their food at home: 12/17 ate at community food programs or restaurants or ate only snack food. Most of the women lacked stable housing in which to prepare food and few had food purchase and food preparation skills.

Prior to incarceration four out of eight Pathways and two out of nine comparison group members also described themselves as being diagnosed with mental health disorders, anxiety or depression. As the study progressed more women were diagnosed with mental health problems such as post traumatic stress disorders. The increased level of diagnoses was probably due to continuing contacts with services or the justice system where these issues may be identified.

Sixteen out of the seventeen participants in both groups described themselves as having serious alcohol and drug misuse problems at the pre-incarceration stage.

At the pre-incarceration stage the family and personal relationships of women in both groups were very poor. Only four out of seventeen women described their family relationships as good and the circle of reliable friends each woman described as being able to call upon was small: only 1.3 contacts for the Pathways group.

The women in the two groups were also relatively infrequent users of health care services. Only four out of seventeen women described themselves as seeing a family doctor regularly and none visited a dentist on a regular basis. Despite serious drug or alcohol problems described by most of the participants, only two women frequently visited a needle exchange.

In terms of self and life assessment no woman in either group described her life as moving forward in a positive direction at pre-incarceration; most felt very hopeless, and that they were not persons of worth and value.

Changes in these characteristics were measured at the second (September 2003) and final interviews (May-June, 2004). It should be emphasized that the changes noted were, in most cases, modest and that the sample sizes were too small for the findings to be considered conclusive. In some cases, positive changes were also seen in the comparison group. This may be because comparison group members had received some counseling and program support during their stay at Columbia House.

The most significant improvements in the Pathways group in comparison to the Columbia House group were related to the lack of subsequent criminal charges or returns to custody, the increase in stable, non-transient, safe and secure housing, improvements in health and nutritional status, the increased ability of women to prepare food at home and reduced levels of self-described drug/alcohol misuse. Pathways participants were slightly more involved in specific job training programs and had experienced fewer problems finding a place to sleep at night. Pathways women also reported fewer mental health disorders at the final interview.

Levels of income decreased for both groups during the study (possibly due to less reliance on illegal forms of income), but there was a significant improvement in the number and frequency of personal and family contacts in both groups. There were also improvements in feelings of self-worth and a sense of hopefulness in both groups. However, at the final interview, three out of seven of the Pathways participants still felt that they had problems making decisions or lacked sufficient skills to handle life well.

Pathways participants rated the value of Pathways very highly (6.9 out of a possible scale of 7) at the second interview. This rating dropped to 5.9 at the final interview after most women had left the facility. Despite this reduced rating all of the women had specific comments about the value of Pathways in terms of their successful adjustment to and reintegration into the community. These comments stressed the value of the flexibility of the program, acceptance and support from staff, the provision of specific services and a safe and secure environment.

It was impossible to differentiate the relative value of stable housing provided by Pathways and the staff support provided by the program. The burden of issues and problems experienced by most women offenders suggests that program support and counseling needs to be delivered in conjunction with transitional housing. Without the provision of stable and safe housing, it is doubtful whether issues related to health, addictions, mental health, relationships and other, can be addressed.

RÉSUMÉ

Évaluation des incidences du logement d'hébergement de deuxième étape sur les femmes exposées à des risques élevés et qui ont été aux prises avec la justice

Le présent document expose les constatations d'un projet de recherche sur les caractéristiques personnelles, le logement et les besoins en matière de logement des délinquantes et l'importance du logement de transition après l'incarcération pour aider celles-ci à réussir leur réintégration à la société.

Ce projet de recherche comprenait trois volets. Dans le cadre d'une étude longitudinale, on a comparé les résultats en matière de justice pénale, de logement, de santé et autres d'un petit groupe de femmes qui avaient vécu dans un logement de transition après leur incarcération, à ceux d'un groupe de femmes qui n'avaient pas reçu ce genre d'aide au logement. Le deuxième volet consistait en une analyse documentaire axée sur les caractéristiques des délinquantes, leur logement et leurs besoins en matière de logement, ainsi que sur les répercussions de la vie dans une maison de transition après l'incarcération. Une enquête auprès de dix-sept répondants clés qui travaillent avec des délinquantes dans la région de Vancouver a également eu lieu, afin de déterminer les besoins en matière de logement des délinquantes et les services de logement disponibles.

L'étude comparative longitudinale a porté sur des femmes qui habitaient à Pathways, un programme offrant neuf logements dans une maison de transition pour les femmes qui ont quitté le milieu de détention (établissements de détention et de libération conditionnelle) et qui ont besoin d'aide à la réintégration pour réussir à fonctionner dans la société. Le programme Pathways est géré et doté en personnel par la Société Elizabeth Fry de l'agglomération de Vancouver. Le groupe témoin a été constitué à partir de résidentes de la Columbia House. Celle-ci est un établissement de libération conditionnelle, qui offre un peu de soutien, de counselling et d'aide, ainsi qu'un logement supervisé jour et nuit.

L'objectif du programme Pathways est d'offrir un logement de transition stable, sûr et souple, des programmes de soutien et des services de counselling aux délinquantes à risque élevé, afin d'accroître leur capacité de mener une vie autonome et de les aider à réintégrer socialement la collectivité, de sorte qu'elles ne récidivent pas ou qu'elles ne soient pas de nouveau incarcérées.

L'analyse documentaire a révélé que peu de recherche a été faite sur les délinquantes en raison de la proportion relativement faible de femmes dans le système de justice pénale et du fait que les femmes sont moins susceptibles de commettre des crimes violents graves. Les documents existants révèlent que les délinquantes sont sérieusement défavorisées dans la plupart des aspects de leur vie. Toutes les mesures importantes indiquent que les délinquantes se heurtent à des obstacles personnels graves, qui limitent la réussite de leur réintégration dans la collectivité après leur incarcération. Une majorité d'entre elles a un historique complexe de violence physique et sexuelle, ainsi que de graves problèmes de santé générale, de santé mentale et de toxicomanie. Nombre d'entre elles sont des parents seuls, ont une instruction ou une employabilité limitées, sont isolées et ne

jouissent d'aucun soutien familial. Les résultats de l'enquête auprès des répondants clés corroborent ces constatations.

L'analyse documentaire et l'enquête auprès des répondants clés ont toutes deux permis de conclure que le logement de transition sûr, privé et stable est important pour les femmes qui quittent un établissement de détention et réintègrent la collectivité. Les femmes manquent d'argent, de soutien familial, de connaissances élémentaires, de pièces d'identité et ont des problèmes graves et chroniques de santé générale et mentale, ainsi que des problèmes de toxicomanie, lorsqu'elles quittent un établissement de détention. La plupart d'entre elles doivent élever des enfants. Il est essentiel de leur offrir un programme de soutien, si l'on veut éviter la récidive.

Voici les caractéristiques des délinquantes qui ont été examinées et comparées dans le volet étude longitudinale comparative de la présente recherche :

- Antécédents criminels et historique d'incarcération;*
- Diagnostic de problème de santé physique et mentale;*
- Utilisation du système de soins de santé – en particulier l'utilisation de services de santé stables par opposition à l'urgence;*
- Historique de changement de revenu et d'emploi;*
- Consommation de drogues et d'alcool;*
- Problèmes de santé mentale;*
- Historique d'éducation et de formation professionnelle;*
- Durée, sécurité et stabilité du logement;*
- Problèmes de consommation d'aliments, de sources d'alimentation et nutritionnels;*
- Qualité et stabilité des relations familiales;*
- Participation à la collectivité et connaissance de celle-ci;*
- Qualité de la vie et autoévaluation de la confiance et de la valeur.*

La méthodologie utilisée dans la recherche comparative consistait en une série d'entrevues exhaustives, afin de recueillir des renseignements sur la situation des femmes avant leur incarcération, au moment du premier contact postérieur à leur incarcération dans le cadre de la recherche (septembre 2003) et entre six et douze mois plus tard. Les entrevues, qui étaient longues, ont été faites en personne ou au téléphone. Les données antérieures à l'incarcération et de septembre 2003 ont été recueillies lors de la même entrevue.

Huit participantes au programme Pathways ont pris part à l'entrevue de base et à la première entrevue, et sept, à l'entrevue finale. Neuf femmes de la Columbia House ont participé aux deux premières entrevues, alors que sept d'entre elles ont participé à l'entrevue finale.

La présente recherche avait un certain nombre de limites. La taille de l'échantillon des deux groupes était faible, des difficultés ont été éprouvées pour retrouver et retenir les participants à l'étude et la durée du séjour des résidentes du programme Pathways était

plus longue que prévu, ce qui a rendu difficile l'évaluation des résultats au sein de la collectivité.

Le groupe témoin se composait de femmes qui avaient séjourné à la Columbia House, un établissement de libération conditionnelle. Il a été nécessaire de choisir cet établissement pour être en mesure d'identifier les répondants pertinents pour l'étude, mais cela signifiait que les membres du groupe témoin avaient également reçu une aide au logement et un certain niveau de soutien du programme. Les résidentes de la Columbia House y séjournent environ six mois, en moyenne.

Les données de base de l'étude provenaient de la période antérieure à l'incarcération de chaque femme. On a demandé aux femmes de se souvenir de leur situation à cette époque-là. Le temps écoulé peut influencer négativement sur la qualité de certaines de ces données.

Les caractéristiques des participantes du groupe de femmes de Pathways et du groupe témoin étaient les mêmes en ce qui concerne l'âge, le nombre d'enfants et l'horizon ethnique. Trois femmes étaient membres de minorités ethniques, y compris deux femmes autochtones. Il est notoriété publique que la population carcérale canadienne comprend un nombre disproportionné de femmes autochtones.

Les conclusions de l'étude comparative renforcent les constatations de l'analyse documentaire et de l'enquête auprès des répondants clés décrivant les caractéristiques des délinquantes. La plupart des femmes visées par l'étude avaient un faible niveau d'instruction : seulement neuf femmes sur dix-sept avaient décroché après la huitième à la dixième année, nombre d'entre elles avaient de lourds antécédents criminels, de faibles niveaux d'emploi et avaient connu beaucoup d'instabilité en ce qui concerne le logement. Près de la moitié des femmes avaient déménagé entre six et dix fois au cours des cinq dernières années. Six des dix-sept femmes ont déclaré avoir habité pendant un à dix-huit mois chez d'autres personnes avant leur incarcération (c'est ce que certaines appellent le « squat du canapé »). La plupart des femmes ont indiqué que l'état, la sécurité et la salubrité de leur logement étaient de mauvais à moyens avant leur dernière longue incarcération.

La plupart des femmes du groupe de Pathways et la moitié des membres du groupe témoin ont indiqué avoir des problèmes de santé graves avant leur incarcération. Toutes les femmes du groupe de Pathways ont indiqué être en mauvaise santé. Les principaux problèmes de santé mentionnés étaient l'Hépatite C, la toxicomanie, la dépression et l'anxiété, et la malnutrition. Six femmes du groupe de Pathways sur huit ont indiqué qu'elles avaient un poids nettement inférieur à la norme avant leur incarcération. Sept femmes du groupe de Pathways sur huit et cinq membres du groupe témoin sur neuf ont dit avoir éprouvé des difficultés à se payer de la nourriture pendant de longues périodes. Peu de femmes préparaient leurs repas chez elles : douze femmes sur dix-sept mangeaient grâce à des programmes alimentaires communautaires ou dans des restaurants, ou ne faisaient que grignoter. La plupart des femmes n'avaient pas de

logement où préparer des repas et un faible nombre d'entre elles savaient acheter et préparer des aliments.

Avant leur incarcération, quatre femmes du groupe de Pathways sur huit et deux membres du groupe témoin sur neuf ont également indiqué qu'on leur a diagnostiqué des troubles de santé mentale, de l'anxiété ou une dépression. Au fur et à mesure que l'étude avançait, on a diagnostiqué à un nombre croissant de femmes des problèmes de santé mentale, comme le syndrome de stress post-traumatique. Le niveau croissant de diagnostics était probablement dû à la poursuite des contacts avec les services ou le système de justice, où ces problèmes peuvent être décelés.

Seize participantes des deux groupes sur dix-sept ont indiqué avoir de graves problèmes d'alcoolisme et de toxicomanie avant leur incarcération.

Les relations familiales et personnelles des femmes des deux groupes étaient très mauvaises avant leur incarcération. Quatre femmes seulement sur dix-sept ont indiqué entretenir de bonnes relations familiales et le cercle d'amis fiables auquel chaque femme pouvait faire appel était restreint : seulement 1,3 contact pour les femmes membres du groupe de Pathways.

En outre, les femmes des deux groupes utilisaient relativement peu les services de soins de santé. Quatre femmes seulement sur dix-sept ont indiqué qu'elles consultaient régulièrement un médecin de famille et aucune d'entre elles n'allait régulièrement chez le dentiste. Malgré les graves problèmes de toxicomanie et d'alcoolisme décrits par la plupart des participantes, deux femmes seulement se rendaient fréquemment dans un centre d'échange de seringues.

Pour ce qui est de l'évaluation d'elles-mêmes et de leur vie, aucune femme des deux groupes n'a indiqué que sa vie prenait une orientation positive avant son incarcération; la plupart d'entre elles se sentaient très désespérées et pensaient qu'elles n'avaient aucune valeur.

L'évolution de ces caractéristiques a été mesurée à la deuxième (septembre 2003) et à la troisième entrevues (mai-juin 2004). Il conviendrait de souligner que les changements notés étaient, dans la plupart des cas, modestes et que la taille des échantillons était trop faible pour considérer que les constatations étaient concluantes. Dans certains cas, des changements positifs ont également été constatés dans le groupe témoin. Ce s'explique peut-être par le fait que les membres de ce groupe avaient reçu un peu de counselling et d'aide du programme durant leur séjour à la Columbia House.

Les améliorations les plus marquantes parmi les membres du groupe de Pathways en comparaison avec les membres du groupe témoin de la Columbia House étaient l'absence d'accusation au pénal ou d'incarcération subséquentes, un logement plus stable, plus permanent et plus sûr, un meilleur état de santé et une meilleure nutrition, une capacité accrue des femmes de préparer des aliments chez elles et une baisse admise de l'alcoolisme et de la toxicomanie. Les membres du groupe de Pathways participaient

légèrement plus à des programmes de formation professionnelle précise et avaient moins de difficultés à trouver un lieu où passer la nuit. En outre, les femmes du groupe de Pathways ont déclaré avoir moins de troubles de santé mentale à l'entrevue finale.

Le revenu des membres des deux groupes a baissé au cours de l'étude (probablement en raison de la dépendance moindre de formes illégales de revenu), mais le nombre et la fréquence des contacts personnels et familiaux étaient beaucoup plus élevés pour les membres des deux groupes. En outre, les membres des deux groupes avaient davantage confiance en elles et avaient de l'espoir. Cependant, à l'entrevue finale, trois participantes de Pathways sur sept ont indiqué penser encore qu'elles avaient de la difficulté à prendre des décisions ou qu'elles manquaient de connaissances élémentaires pour bien gérer leur vie.

Les participantes de Pathways ont très bien coté ce programme (6,9 sur une échelle possible de 7) à la deuxième entrevue. Cette note a chuté à 5,9 à l'entrevue finale, après que la plupart des femmes ont quitté l'établissement. Malgré cette note plus faible, toutes les femmes ont fait des commentaires précis sur la valeur du programme Pathways en ce qui concerne la réussite de leur adaptation et de leur réintégration à la collectivité. Ces commentaires ont fait ressortir l'importance de la souplesse du programme, de l'acceptation et du soutien du personnel, de la prestation de services précis et d'un milieu sûr.

Il a été impossible de faire la distinction entre l'importance relative du logement stable fourni par le programme Pathways et le soutien du personnel que ce programme a apporté. L'ampleur des enjeux et des problèmes que vivent la plupart des délinquantes laisse supposer qu'il faut offrir un programme de soutien et de counselling conjointement avec un logement de transition. Si un logement stable et sûr n'est pas offert, il est permis de douter de la possibilité de résoudre les problèmes de santé, de toxicomanie et d'alcoolisme, de santé mentale, de relations, et d'autres problèmes encore.



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1.0 INTRODUCTION AND ORGANIZATION OF THIS REPORT

1.1 Introduction

This document presents the findings of a research project that examined the personal characteristics, housing and housing-related needs of women offenders and the importance of transitional post-prison housing in helping women offenders re-integrate into the community. There were three components of this research project.

- A literature review that looked at the characteristics, housing and housing-related needs of women offenders. *Women Offenders: Characteristics, Needs and Impacts of Transitional Housing: A Literature Review*. This report is located in Appendix I;
- A key respondent survey that asked seventeen service providers working with women offenders to identify the needs of women offenders at the post-prison phase and to describe services currently available to meet these needs: *Women Offenders: Characteristics, Needs and Impacts of Transitional Housing: Key Respondent Survey*. This report is located in Appendix II.
- A longitudinal study component that compared the criminal justice, housing and related outcomes of two small groups of women offenders over three periods of time. The group who received post-prison transitional housing support through the Pathways Transitional Housing Program was compared with a group of women who had received limited support at a community residential facility for women on parole, Columbia House. The results of this component of the research are included in the main part of this document.

The research was done in collaboration with the Elizabeth Fry Society of Greater Vancouver (serving Vancouver, Burnaby, New Westminster and adjacent areas). Elizabeth Fry manages and staff Pathways, Columbia House and related services for women offenders.

1.2 Description of Pathways & Comparison Group

Pathways is a nine unit transitional housing service for women who have left the custodial environment (prison and half-way houses) and who require assistance with reintegration in order to successfully function in the community so that they do not return to prison. Pathways was developed in May 2000, is funded, coordinated and staffed by the Elizabeth Fry Society of Greater Vancouver.

The objective of Pathways is to provide transitional, safe, secure and flexible transitional housing, supportive programs and counseling for high risk women offenders in order to increase their ability to live independently and to assist in their social integration into the community. Although the provision of stable and secure independent housing constitutes the core of the Pathways program, staff provide a range of services, direction, referrals and training which address skill areas related to family and child care, budgeting, employment, training, food purchase and preparation.

While there is a communal kitchen at Pathways, private units are structured as independent apartments. There is also some provision for the housing of small children and babies with their mothers. Pathways is the only transitional housing facility specially designed for women offenders in BC.

The transitional housing period for the majority of residents was originally estimated to be approximately 6 to 36 months post-prison. The period of residency at Pathways was extended for many residents because of their significant personal, health and related needs. The extension of the residency period influenced some of the conclusions that can be drawn from the research.

The comparison group was drawn from women who were residing at Columbia House, a community residential facility for women on parole. Columbia House is staffed on a 24 hour awake basis and provides individual support, goal planning, and assistance to women. Women reside at the facility while they complete their parole and seek work opportunities or skills to assist in their successful integration into the community upon completion of their sentence. While Columbia House staff provide support, counseling and program referrals, it is not considered transitional housing which has, as its main goal, preparation for successful community integration and living.

1.3 Organization of the Comparative Study Report

This report is divided into fifteen main sections. Section 2.0 provides information on the characteristics of women offenders. Section 3.0 describes the research design: objectives, processes, methodology and limitations. Section 4.0 presents basic demographic data on the participants and Sections 5 – 15 present the findings of the study. Section 16.0 summarizes the major conclusions. This includes a summary of the outcomes of the two groups of women in the areas of education/training, health, criminal justice, housing, employment, personal and family relationships, self assessment and involvement in the community.

2.0 BACKGROUND TO THE RESEARCH

2.1 Characteristics and Needs of Women Offenders

Research on women offenders has been limited. This is due to the proportionally small number of women in the criminal justice system and the fact that most women offenders do not usually commit violent crimes. The literature indicates, however, that the proportion of women in the criminal justice system is rising and that women offenders are disadvantaged in most aspects of their lives. Women offenders are typically young, single parents, unattached and isolated, poorly educated and lacking work force skills.

On every significant measure women offenders have serious personal barriers that limit their successful re-integration into the community after prison. A majority have complex histories of physical and sexual victimization beginning in childhood, mental health and substance misuse issues and a range of chronic and life-threatening health problems (including serious dental, Hepatitis C, reproductive and HIV/AIDS issues).

Women offenders are typically involved in caring for their children and feel guilty for abandoning them. They are described as lonely with few supportive, non-criminal intimate relationships. Many are involved in violent relationships as adults. From being victims as children, to survivors as adults, most women offenders then become victimized for the rest of their lives.

In the research exploring the needs of women offenders after leaving prison, the need for safe, stable and affordable housing is listed as a priority. Optimally this housing would include program elements such as drug/alcohol and mental health counseling, job support, financial aid, social skills and employment training. A recent Australian study on post-prison housing has concluded that stable housing for offenders is a key ingredient in preventing recidivism.

Stable, socially supported housing was clearly associated with staying out of prison and increased social reintegration. The converse, not having such housing, was associated both in participants comments and in the quantitative results with slipping back into the transitory life style, problematic drug use and being re-arrested and re-incarcerated (Baldry, 2003, iii).

3.0 RESEARCH DESIGN

3.1 Objective of the Research

The objective of this study is to describe the characteristics and compare the outcomes of women offenders who lived in transitional housing (Pathways) with those women who did not have access to this type of supported non-custodial housing. The characteristics of the women offenders that were examined and compared consisted of the following:

- Criminal practice background and incarceration history;
- Mental and physical health status;
- The use of the health care system – particularly the use of stable versus emergency services;
- History and changes to income and employment patterns;
- Substance use and misuse patterns;
- Mental health issues;
- History of education and employment training;
- Safety, duration and stability of housing;
- Food intake, food sources and nutritional status;
- Quality and stability of family relationships;
- Involvement in and knowledge of the community;
- Self-assessment of personal worth, hopefulness and confidence.

Participants in the research were also asked to comment on the support they received from Pathways staff and whether this had helped in their reintegration into the community.

3.2 Research Design

3.2.1 Methodology

The original design for the research project proposed that 16-20 Pathways and comparison group would be tracked for approximately one year or more post residence to determine their status in relation to the areas defined above (Section 3.1). It was anticipated that the comparison group would be selected from women who had left prison recently and who had not received any type of housing support post-prison. These women would be identified with the assistance of The Elizabeth Fry Society.

A prior baseline for the health, housing, demographic and other characteristics defined above (Section 3.1) was established by asking respondents to recall their status and living situation prior to their last major incarceration. The baseline period varied for each participant depending on their time previous history, including the time they had spent in jail. It was expected that the second and third interviews would be conducted after women had left Pathways and were living in the community.

Although it was originally envisaged that most of the Pathways residents would be able to successfully transition back to the community during the research time period, for some women this proved impossible because of their serious health or mental health related problems. The lack of post-transitional housing in the community has provided pressure on Pathways to become “end stage” housing for some of their

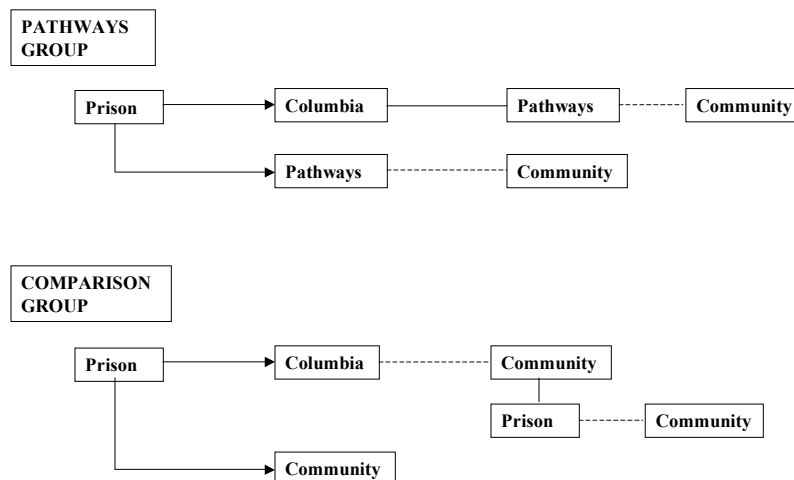
residents. This factor affected the findings from the second and final interviews and the conclusions that can be drawn from the study.

Interviews with participants from both groups lasted approximately two hours and were conducted in person or by telephone. The interviews were comprehensive and asked women to describe their characteristics and/or current status in the substantive areas described above. Two questionnaires were used: a baseline questionnaire collected pre-incarceration and the 2nd interview data and a final questionnaire was used for the 6 – 12 month follow-up interview.

3.2.2 Research Participant Selection

Participants for the two groups were identified with the assistance of staff from the Elizabeth Fry Society of Greater Vancouver. The comparison group consisted of women who had not had access to Pathways transitional housing. Originally, it was expected that many women in the comparison group would arrive in the community directly from prison. However, due to the difficulties in locating women leaving directly from prison it was decided to approach women who had left or were about to leave Columbia House, a community residential facility for women on parole, also managed by Elizabeth Fry.

Figure 1: Origin of Pathways & Comparison Groups



The instability and transience of many of the study participants made it difficult to control for the entry and exit points for the study. Some women continued to live at Pathways during the entire research period, making a post-Pathways comparison difficult. Three of the comparison group members returned to prison at some point in the research period.

In addition, none of the comparison women came to the community directly from the street but were drawn from the residents of Columbia House. Columbia House does not provide “transitional housing” but is a resource for women who are serving part or all of their sentences. Some women who stay at Columbia

House go on to Pathways for more specific help with reintegration. Table 1 describes the location of the respondents at each interview period.

Table 1: Location of Respondents at Each Interview Phase

Location	Prior to Incarceration		Second Interview		Final Interview	
	Pathways	Comparison	Pathways	Comparison	Pathways	Comparison
In community - apartment, own home, other's home	5	8	4	5	5	4
Pathways			4		2	
Parole Facility (Columbia House)				2		1
Hospital or treatment facility		1				
Prison				2		1
Recovery home/ specialized housing	2					1
On street	1					
TOTAL	8	9	8	9	7	7

Eight pathways participants and nine comparison group participants were initially involved in the study. Three participants could not be contacted at the second interview: one from Pathways and two from the comparison group (Table 2).

Table 2: Number and Type of Respondents

Group	Prior to Incarceration	Second Interview	Final Interview
Pathways	8	8	7
Comparison Group	9	9	7
	17	17	14

3.2.3 Retention of Participants in the Study

Maintaining participants during the 6-12 month study period was difficult. An attempt was made to maintain contact with the participants using the following methods:

- Verifying alternative contact numbers for each woman at the outset of the research;
- Offering a \$10.00 honorarium for each completed interview;
- Following up each of the interviews with a thank you card;

- Stressing the importance of maintaining contact at the time of the interview;
- Sending each participant a Seasons Greeting card between the interview periods;
- Re-contacting each participant 2-4 weeks the scheduling of the final interview;
- Maintaining contact with Elizabeth Fry Staff (to ascertain address changes).

Offering \$10.00 to each participant in the study for each completed interview was a helpful incentive and was appreciated by participants.

3.2.4 Consent Process

There were two part of the consent process. Elizabeth Fry staff provided the preliminary information about the study to each identified participant. This was done by telephone or in person. A consent form was given to each participant to read and sign along with written information about the research. Prior to each interview issues around confidentiality were reviewed (see Appendix III: Information and Consent Forms).

3.3 Research Challenges

3.3.1 Changes to Length of Residency at Pathways

There were a number of challenges involved in the implementation of this research. One of the most significant was a change to the length of stay of most of those in the Pathways group. It was originally anticipated that Pathways residents would return to the community by the time of the second interview. Two assessments post-Pathways would be possible making it possible to observe changes in health, housing stability and community re-integration levels throughout the research period. However, at the point when Pathways residents were selected as participants for the study, it became apparent that only a limited number of residents were planning to move or had moved to the community. This was because most Pathways residents were considered to have such serious health or mental health challenges that a move into the community was considered to be high risk. This meant that the personal and housing characteristics of women could not be measured in the community for the length of time that was originally anticipated.

3.3.2 Selection of Characteristics of Comparison Group

The identification and involvement of women offenders for the comparison group was difficult. The original intention was to involve women who had left prison and returned to the community without any type of housing support. It was hoped that Elizabeth Fry, in conjunction with the assistance of parole officers, could help us identify, locate and involve this group of women.

In subsequent discussions with Elizabeth Fry it was determined that it would be very difficult to locate a group of women directly after their discharge from prison or to persuade them to be involved in the study. In addition, no formal relationships had been established with prison staff or parole officers which would have assisted with this identification or contact process. To address this issue, Elizabeth Fry staff recommended that the most likely and responsive comparison group would be those with whom they had had previous contacts. These were women who had stayed for short periods at Columbia House, a community residential facility for women on parole. All the women finally selected to be in the comparison group had spent a period of time at Columbia House.

While not transitional housing, there are aspects of Columbia House that provide short-term stable housing and counseling, referrals and assistance that support community integration. Unlike Pathways, Columbia

House is a semi-custodial facility where women are strictly monitored. If parole conditions are not met, residents may be sent back to prison. Women usually reside at Columbia Housing for a shorter period of time than at Pathways.

Involving Columbia House residents has meant that a strict housing program / no housing program comparison was not feasible. This kind of strict comparison is difficult to achieve in any case; most women offenders have had some level of history or involvement in semi-custodial housing in the past.

3.3.3 *Retention of Participants in the Study*

Tracking and maintaining involvement of the participants was difficult. Once in the community women offenders are highly transient, live in substandard housing with variable telephone service and are often in and out of prison. Many women had serious health and addiction problems. Of the seventeen original participants in the study only fourteen women could be contacted for the final interview.

3.3.4 *Limitations of Baseline Data*

Baseline data was drawn from the period prior to the last major incarceration of respondents and before they had stayed at Pathways or Columbia. This retrospective information was based on the recall of participants and may have been affected by memory.

4.0 DEMOGRAPHIC DATA: BASELINE

4.1 Age of Participants

At baseline there were eight participants in the Pathways group and nine in the comparison group. Ages of participants ranged from 22 – 55. The Pathways participants were somewhat older than women from the comparison group.

Table 3: Ages of Participants

Age	Pathways	Comparison Group
22 – 30	2	4
31 – 40	2	3
41 – 50	2	2
51 – 60	2	0
TOTAL	8	9

4.2 Number of Children and Dependent Children while in Custody

Over half (9/17) of the women in the study had children (4/8 of the Pathways group and 5/9 of the comparison group). Four women had three children and three of these were from the Pathways group. Of the nine women with children, six had dependent children (under the age of nineteen) while they were in custody (2 from Pathways, 4 in the comparison group). This data is consistent with the findings from the Literature Review and Key Respondent Survey that many women offenders have dependent children while in custody.

4.3 Ethnic Background

Three women in the baseline sample (3/17 or 18%) were from ethnic minorities; two women were Aboriginal. It is known that there is a high percentage of Aboriginal women in the Canadian prison population.

One women in the comparison group was a foreign national who was residing at Columbia House.

Table 4: Ethnic Background of Participants

Ethnic Background	Pathways	Comparison Group
Caucasian	6	7
Asian	1	1
Aboriginal	1	1
TOTAL	8	9

5.0 EDUCATIONAL & TRAINING CHARACTERISTICS

Participants had generally achieved only low levels of education (Table 5). Nine of the seventeen women had completed grades eight, nine or ten. Two women had some post-graduate education, only one had graduated from university. Some members of the Pathways group had completed a higher level of education than the comparison group.

Table 5: Education Level of Baseline

Level of Education	Pathways	Comparison Group
Completed Grades 1-8		2
Completed Grades 9-10	4	3
Completed Grades 11-12	2	4
Some post high school education	1	
Completed College/University	1	
TOTAL	8	9

Participants were asked what types of training they had taken prior to incarceration and whether they had taken additional training by the second and final interviews. The number and types of training or educational programs are described in Table 6.

Data on the specifics of some types of training taken by participants and when it had occurred was difficult to validate. Dates, length and exact names of programs were not easy for participants to recall.

While in prison, some of the participants had been involved in a variety of programs, primarily related to life or cognitive skills, and substance abuse treatment.

Table 6: Training and Education Participation Levels

Type of Training	Pathways N=8		N=7	Comparison Group N=9		N=8
	Prior to Incarceration	First Interview	Final Interview	Prior to incarceration	First Interview	Final Interview
In-prison Programs (e.g. substance abuse, cognitive skills)	1	0	0	4	0	0
Job Training Programs	1	2	3	4	0	0
High School courses/ GED		3	1	2	1	0
First Aid	2	0	0	0	0	0
Life Skills	1	4	1	0	1	0
University courses	1	1	1	0	0	2
Diploma oriented courses	0	0	1	0	0	1
Addiction/Substance Abuse Programs	0	0	0	1	3	0
Anger Management Relationship Skills	0	0	1	0	2	0

*Some participants had been involved in more than one type of training.

The results from Table 6 suggest several patterns. In both groups there was a small percentage who had received some form of training in the 2 – 4 years prior to incarceration. In the Columbia House group there was a higher involvement of participants in in-prison programs. There was a higher proportion of participants in the Pathways group who were involved in job training and high school completion programs as well as in life skills. A higher proportion of comparison group members had been exposed to programs like substance abuse treatment or counseling. There was slightly more employment-directed training activity at the third interview in the Pathways group suggesting that residing at Pathways may have supported or facilitated involvement in job-oriented skills development.

6.0 CRIMINAL JUSTICE BACKGROUND AND NEW CHARGES

6.1 Charges and Length of Incarceration

Most of the women in both groups had extensive criminal justice backgrounds. The most common convictions were for assault, theft, fraud and forgery. Crimes were often drug-related. A number of the women had been convicted of first or second degree murder or manslaughter. Table 7 describes criminal justice histories categorized by the most serious conviction. Both groups were roughly comparable in terms of the type and severity of convictions.

Table 7: Conviction descriptions

Most serious charge	Pathways	Comparison Group
Assault	2	3
Drug Charges	0	1
Fraud and Forgery	0	1
Theft	3	2
First/second degree murder/manslaughter	2	2
No criminal history*	1	0

*The researcher was unaware this participant had not been in prison at the time of participant selection because she was a resident of Pathways. Transitional Housing was required because of serious mental and other health problems.

All of the women, with the exception of one Pathways participant, had spent time in custody or in a parole facility over the past 5 – 10 years. Within this time period, the average length of time women had spent in prison was 35 months for the Pathways group and 42 months for the comparison group. The total time in custody ranged from 6 months to over 10 years.

Table 8: Length of Incarceration over Past 5 – 10 years

Length of time in past 5 – 10 years	Pathways	Comparison Group
Under 6 months	2	0
From 6 months to under 18 months	1	2
From 18 months to under 3 years	0	3
From 3 years to under 5 years	2	3
For 5 years to under 10 years	1	1
Over 10 years	1	0
No time in prison	1	0

6.2 New Charges

Because of the high level of movement (in and out of prison), of some comparison group members, it was difficult to track the frequency of new charges. Participants were asked whether there were any new criminal charges at the 2nd and final interviews. None of the Pathways group had further charges since being involved in Pathways while 3/9 of the comparison group were involved in additional arrests. While

small, these numbers indicate a higher degree of stabilization in the Pathways group, although this group had not spent enough time in the community to determine criminal justice trends.

Table 9: Comparison of New Charge Rate

New Charges	Second Interview		Final Interview	
	Pathways	Comparison	Pathways	Comparison
Yes	0	2	0	1
No	8	6	7	6
N/A	0	1	0	0

6.3 Return to Custody

Three of the nine women in the comparison group were in custody at the second and final interview phase, but no women in the Pathways group returned to prison during the research time period.

Although limited, these data suggest that the women residing at Pathways were less likely than the women in the comparison group to return to prison, engage in further criminal activities, or be charged with parole violations.

7.0 HOUSING AND HOUSING STABILITY

7.1 Overview of Housing Patterns

A review of the literature presented in Appendix I of this report suggests that women offenders are highly transient and lack housing stability and that this instability may contribute to recidivism. A lack of permanent housing, living in sub-standard housing and frequent returns to prison characterize many women offenders. Some of these patterns were apparent in both the Pathways and comparison groups. About a third of the women in the comparison group showed a number of returns to custody within the study period. Many women offenders move back and forth between custody, semi-custodial care and various locations on the street. A “case history,” of one of the comparison group members illustrating this pattern is presented in Figure 2.

Figure 2: Pattern of Housing Stability of A Woman Offender in the Comparison Group (Columbia House)



7.2 Previous Housing Instability

Most of the women in both groups experienced high housing transience in the five years prior to the start of the research. Women in the Pathways group moved an average of 5.5 times from 1999 to 2004; the comparison group moved an average of 5.2 times during the same time period. Seven of the 17 women moved 6 to 10 times during this period. In most cases some of the “housing” women spent time in was custodial (prison).

7.3 Influence of Pathways on Housing Stability

Between the second and final interviews, the comparison group was somewhat more transient than the group who had resided at Pathways. Only 2/9 members of the comparison group had remained in stable housing in comparison to 4/8 women in the Pathways group.

Table 10: Stability of Housing between Second and Final Interviews

Level of Transience	Pathways	Comparison Group
No moves	4*	2
1 move	2	3
2 –3 moves	1	1
4 – 5 moves	0	1

*Two women were still residing at Pathways at the final interview

7.4 Use of Homeless Shelters/Finding a Place to Sleep at Night

None of the women in either group said that they had used emergency housing, or homeless shelters in the recent past or prior to incarceration. This was a surprising outcome because 6/17 women said that they had had problems finding a place to sleep at night during the pre-incarceration period. This problem was experienced more frequently by the Pathways group. For three out of four Pathways women finding a place to sleep was a *regular* problem – occurring once a week or more. This level of frequency was noted by only 2/9 of the comparison group and only one woman mentioned it being a regular problem. For the six women with severe housing problems, drug use and its effects were related as being the main problem in finding accommodation.

At the final interview none of the Pathways women said that they had had recent problems finding a place to spend the night; one comparison group participant still noted problems in this area, and said that these problems occurred regularly.

7.5 Type and Quality of Housing

Prior to incarceration many of the “homes” women had lived in were the apartments of others. Six of the seventeen women said they spent periods ranging from 1 – 18 months living with others. Most of these women were members of the comparison group.

By the final interview Pathways participants appeared to be living in more stable and private housing than the comparison group. Six out of seven were living in their own accommodation or at Pathways, compared to only 1/8 of the comparison group.

Table 11: Type of Housing at Final Interview

Type of Housing	Pathways Group	Comparison Group
Own house or mobile home	3	1
Custody/semi-custodial facility	0	2
Other treatment facilities (e.g. alcohol/ drug)	0	1
Pathways	2	0
Apartment	1	3
Social Housing	1	0
Unknown	1	2

7.6 Quality of Housing

Respondents rated the quality of the housing they had stayed in prior to their incarceration and at the second and final interviews. Ratings were made on a scale of 1 (poor) to 7 (excellent). All housing ratings improved suggesting that both groups were more satisfied with the quality of their more recent housing. The ratings of the Pathways group improved somewhat more than those of the comparison group.

Table 12: Quality of Housing

Item Rating 1-7 1 = poor, 7 = excellent	Prior to Incarceration		Final Interview	
	Pathways	Comparison	Pathways	Comparison
Housing Safety & Security	4.8	4.2	6.9	6.0
Condition and Repair	4.4	4.6	6.9	6.8
Cleanliness	4.4	4.7	6.9	6.6
Average rating – all aspects	4.5	4.5	6.9	6.5

8.0 CHANGES TO HEALTH STATUS

8.1 Overview of Health Issues

The literature suggests that most women suffer from a range of acute and chronic health issues such as mental health, reproductive health, Hepatitis C, HIV/AIDS, infections and dental problems. Malnutrition and weight problems are also frequently cited. This research looked at the general health, mental health and nutritional status of women and tried to establish whether living at Pathways had led to health improvements among the residents.

It was difficult to track the evolution of health problems among the women throughout the study. Everyone in the Pathways group described themselves as being affected by one or more significant health problems compared to only 4/9 of the comparison group at the pre-incarceration stage.

Four of the seventeen women had serious health programs, one had HIV/AIDS, and two women had cancer. These illnesses were evenly dispersed between the two groups. Many of the women listed malnutrition as a health problem. This symptom improved dramatically during the research period, particularly within the Pathways group.

8.2 Respondent Assessment of General Health Status

Participants were asked to assess their general health prior to incarceration, at the first interview and 6 – 12 months later (final interview).

Data in Table 13 suggests that most of the Pathways women (6/8) defined their health as poor or very poor prior to incarceration compared to only 2/9 women in the comparison group. Seven out of eight of the Pathways women said they had major specific health problems compared to 5/9 comparison group women. Major problems cited were Hepatitis C, TB, and malnutrition. This suggests that the Pathways women were, or at least perceived themselves to be, significantly more affected by health problems prior to entering Pathways.

Table 13: Respondent Assessment of Health

Health Rating	Prior to Incarceration		Second Interview		Final Interview	
	Pathways	Comparison	Pathways	Comparison	Pathways	Comparison
Very Good	0	3	2	5	1	3
Good	1	1	3	3	3	3
Fair	1	3	3	0	2	0
Poor	1	0	0	1	1	1
Very poor	5	2	0	0	0	0

Most women in the comparison group self-reported good or very good health throughout the study; this could be partly due to the fact that some comparison group women were in prison or semi-custodial

facilities for parts of the study period. It is known that health significantly improves for women when they are in prison because they have access to health care, receive regular meals and medication, if required.

The Pathways women showed marked improvements in their overall assessment of personal health as the study progressed; by the final interview only one participant in each group described her health as poor.

8.3 Food and Nutritional Issues

Malnutrition and weight problems (including eating disorders) are frequent among women offenders and are an indication of general health status. Underweight may be exacerbated by alcohol/drug use, by housing instability and lack of access to regular meals. Respondents were asked to describe their body weight issues over the life of the study.

Table 14: Body Weight Status (as an Indicator of Health)

Indicator	Prior to Incarceration		Second Interview		Final Interview	
	Pathways	Comparison	Pathways	Comparison	Pathways	Comparison
Severely underweight	6	1	0	0	1	0
Slightly under weight	1	1	1	1	0	2
Healthy weighty	0	4	2	2	2	1
Somewhat over weight	1	2	5	2	4	4
Over weight	0	1	0	4	0	0

Table 14 indicates that most Pathways women described themselves as severely underweight prior to incarceration. At the second interview a greater proportion of the Pathways women described themselves as somewhat overweight. Since these women were receiving Pathways services the change was likely due to improved access to regular meals and nutritional food. By the final interview most Pathways women described themselves as being in a healthy weight range.

A majority of the women (13/17) said that they had problems maintaining a healthy diet prior to incarceration (7/8 Pathways, 6/9 comparison group). At the final interview this number had dropped in both cases. Some women, (3/7 Pathways and 2/7 comparison group members), said that they were still having problems maintaining a healthy diet.

One of the main causes of malnutrition is not having enough money to afford food. Prior to incarceration 12/17 women (7/8 Pathways and 5/9 comparison group members) said that they had ongoing problems getting, or affording sufficient food. This was a problem for an *average* of 26 out of 30 days a month for the Pathways group and 20 out of 30 days a month for the comparison group. At the second interview no comparison group member reported having problems finding enough to eat while 2/8 women in the Pathways group still reported having problems. At the final interview two women from each group reported

problems but the number of days women were having problems finding enough to eat was significantly less.

Besides poverty, another issue affecting the health and nutrition of women offenders is lack of access to a private kitchen in which to prepare food. Because of their long- term problems with housing many women offenders lack basic food purchase and preparation skills. Both of these skills are specifically encouraged and facilitated at Pathways.

Table 15 indicates that prior to their last major incarceration only 5/17 women prepared their meals at home, 12/17 had most of their meals at restaurants, at community food programs, or ate only snack food. Living at Pathways, where women are expected to purchase food and prepare regular meals, dramatically stabilized food sources and the potential for proper food preparation for residents. This stability was maintained for this group at the final interview stage.

Table 15: Meal Sources

Primary Meal Sources	Prior to Incarceration		Second Interview		Final Interview	
	Pathways	Comparison	Pathways	Comparison	Pathways	Comparison
Meals prepared at home by participant	2	3	8	4	7	3
Restaurant/hotel meals	0	2	0	1	0	0
Snack food	3	3	0	0	0	1
Community food program	3	1	0	0	0	1
In prison/ custodial facility	0	0	0	4	0	0
No data	0	0	0	0	0	2

8.4 Mental Health Issues

8.4.1 Overview

The literature indicates that many women offenders have been sexually, physically and emotionally abused since infancy. These abusive relationships often continue through adulthood. This and other factors help explain the high prevalence of mental health and addiction problems among women offenders. The study looked at whether women in the two groups had been diagnosed with a mental health disorder, were anxious or depressed, what treatment was involved and whether there were improvements during the research period. We also asked women to identify any prescription drugs being taken because adverse drug reactions may also result in psychological or other symptoms.

8.4.2 Types of Mental Health Issues

Prior to incarceration, 4/8 Pathways and 2/9 comparison group described themselves as being diagnosed with a mental health disorder or having depression or anxiety. The diagnoses included Attention Deficit Disorders/Learning Difficulties, schizophrenia and bi-polar disorders. By the final interview, almost twice as many women (9/17) had been diagnosed with mental health disorders in the comparison group. The most common diagnosis was post-traumatic stress disorders (Table 16).

Table 16: Number of Respondents with Mental Health Problems

Mental Health Problem	Prior to Incarceration		Second Interview		Final Interview	
	Pathways	Comparison	Pathways	Comparison	Pathways	Comparison
Bi-polar Diagnosis	2	0	1	0	1	0
Schizophrenia	2	0	1	0	1	0
Anxiety or Depression	4	4	2	4	1	0
Attention Deficit Disorder	2	0	0	0	0	2
Post Traumatic Stress	0	0	0	2	1	0
Other	1	0	0	0	0	0
Total number of women reporting mental health problems	7	4	3	6	3	5

*some respondents described multiple mental health problems

A review of data from all of the interviews revealed that 12/17 of the women in the study had at one time been diagnosed with a mental illness or anxiety and/or depression. Table 16 describes changes to these diagnoses throughout the research period. At the pre-incarceration stage 11/17 women described themselves as having mental health problems, ranging from depression/anxiety to schizophrenia. The prevalence rate was higher in the Pathways group.

At the second interview the rate of reported mental health problems diminished in the Pathways group but expanded in the comparison group. This trend was maintained at the final interview.

In terms of treatment few clear trends emerged. SSRI anti-depressants were the most common treatment for a range of disorders (8/17 women had prescriptions). At the second interview, more counseling therapy was taking place, especially for the comparison group, five out of six women were receiving some form of counseling.

9.0 ALCOHOL AND DRUG ISSUES

9.1 Prevalence and Seriousness of Alcohol/Drug Issues

According to the Literature Review and Key Respondent Survey, most women offenders have serious alcohol and drug misuse problems. This pattern was also reflected in this study: 16/17 of the women described themselves as having serious alcohol/drug problems. Only one woman, from the comparison group, said that she had no problems with alcohol or drugs prior to incarceration.

Women were asked to rate the level of seriousness of their alcohol/drug use problems on a scale of 1 (not serious) to 7 (extremely serious). Prior to incarceration, the Pathways women rated their problems at 7 and the comparison group at 6.5. Three women said that they were receiving treatment at this time; one in the Pathways group and two in the comparison group.

Throughout the study there was a steady reduction in the extent to which the women considered themselves to have an alcohol drug/problem, particularly in the Pathways group. By the final interview none of the Pathways women considered themselves to have an “active” drug/alcohol problem (Table 17).

Table 17: Alcohol/Drug Use and Treatments

Item	Prior to Incarceration		First Interview		Final Interview	
	Pathways	Comparison	Pathways	Comparison	Pathways	Comparison
Problems with Drugs/Alcohol	0	0	0	0	0	0
Yes	8	8	6	2	0	2
No	0	1	2	7	7	5
Average rating of seriousness of problem (1 – not serious, 7 – very serious)	7	6.5	4.7	4.3	0	5
Number of women receiving treatment	1	2	6	1	3	1

Methadone was being used by most of the women at Pathways at the second interview, suggesting an organized response to drug addiction. However, the number of women using methadone had declined to 3/7 by the final interview. Prescription drug use in general remained high in the Pathways group throughout the study in comparison to the comparison group.

10.0 USE OF HEALTH CARE RESOURCES

As noted in Section 8, most of the women in the study had multiple general and mental health problems. Due to a lack of housing and community stability many women also lacked access to stable health care resources and services. The study also explored the use and stability of health care services over the research period to see whether patterns of use changed. Of particular interest was whether women became less reliant on emergency services such as the hospital emergency room.

Use data is reported on ten types of health services:

- Consultations with a family physician
- Consultations with specialist (s)
- Consultations with a dentist
- Consultations with the downtown health clinic
- Visits to the emergency room
- Visits to TB clinic
- Visits to or use of a needle exchange service
- Overnight stays in hospital
- Use of ambulance service
- Visits to physiotherapist services

A comparison was done between the general level of use of services prior to incarceration and at the final interview. Not all respondents were able to recall or provide information on their use of health services.

Table 18: Use of Health Care Resources: Pre-incarceration and Final Interview

Type of Services		Prior to Incarceration		Final Interview	
		Pathways	Comparison	Pathways	Comparison
Consultation with Doctor					
	Never	3	2	3	2
	Infrequent	4	2	1	3
	Regular	1	3	0	2
	Frequent	0	0	3	0
Consultation with Specialists					
	Never	4	5	4	5
	Infrequent	4	1	1	1
	Regular	0	1	0	0
	Frequent	0	1	2	1
Consultation with Dentist					
	Never	5	6	3	5
	Infrequent	3	2	4	1
	Regular	0	0	0	1
	Frequent	0	0	0	0
Consultation with Downtown Clinic					
	Never	5	8	6	5
	Infrequent	3	0	0	1
	Regular	0	0	0	1
	Frequent	0	0	1	0
Visit to ER					
	Never	2	1	5	6
	Infrequent	4	6	1	1
	Regular	0	1	1	0
	Frequent	1	0	0	0
	Very Frequent	0	0	0	0
Visit to TB Clinic					
	Never	6	8	7	7
	Infrequent	2	0	0	0
	Regular	0	0	0	0
	Frequent	0	0	0	0
	Very Frequent	0	0	0	0
Visit to Needle Exchange					
	Never	4	7	7	6
	Infrequent	2	1	0	0
	Regular	0	0	0	0
	Frequent	0	0	0	0
	Very Frequent	2	0	0	1
Overnight Stay in Hospital					
	Never	4	4	7	6
	Infrequent	4	4	0	0
	Regular	0	0	0	0
	Frequent	0	0	0	0
	Very Frequent	0	0	0	1

Table 19: Participant Use of Health Services

Type of Services		Prior to Incarceration		Final Interview	
		Pathways	Comparison	Pathways	Comparison
Use of ambulance service					
	Never	3	5	5	7
	Infrequent	4	2	2	
	Regular	0	0	0	0
	Frequent	0	1	0	0
	Very Frequent	1	0	0	0
Physiotherapist					
	Never	6	5	6	7
	Infrequent	2	2	1	0
	Regular	0	0	0	0
	Frequent	0	0	0	0
	Very Frequent	0	0	0	0

Although the sample sizes are small and some data is missing, several modest trends can be discerned from the health care data:

- In general, women from both groups were infrequent users of most health care services.
- Women from the Pathways group visited doctors slightly more frequently at the final interview when compared to the pre-incarceration period. Three out of seven women, however, never visited a general physician.
- Although many women offenders have dental problems few see dentists on a regular basis. This pattern did not change during the study and was true for both groups.
- In both groups there was a slightly decreased use of emergency services as a major provider of health care throughout the life of the project.
- Pathways women were not using the Needle Exchange by the final interview. This is likely due to the increased number of women who said that they were on methadone maintenance.
- The frequency of overnight hospital stays also slightly declined in the Pathways group as did use of ambulance services by both groups. Again this suggests less reliance on emergency, generic health services.

This data suggests a small shift from the use of irregular to more stable services. These shifts are small however, and it is evident that most of the women offenders in the study lack access to normalized health services such as family doctors or dentists despite their serious and chronic health problems.

11.0 EMPLOYMENT AND ECONOMIC STATUS

11.1 Employment Status

Prior to incarceration most of the women in both groups were unemployed. Nine women described themselves as unemployed and unable to look for work, likely because of health problems or addiction. Although some women had received employment training skills while at Pathways or Columbia, training in most cases was minimal or not specifically job related.

There was a small decrease in the number of women who were unemployed and unable to look for work between the pre-incarceration and second interviews but fewer changes were apparent at the final interview.

Table 20: Employment Status

Employment Status	Prior to Incarceration		Second Interview		Final Interview	
	Pathways	Comparison	Pathways	Comparison	Pathways	Comparison
Unemployed – unable to look for work	5	4	1	1	3	2
Unemployed and looking for work	0	0	1	0	0	0
Employed occasionally (part-time)	0	0	0	0	1	1
Employed regularly part-time	3	3	2	1	0	1
Employed regularly full-time	0	0	2	1	2	1
Other	0	2	2	6*	1	2

*Some women were incarcerated or living in a parole facility.

11.2 Main Source of Income

Prior to incarceration women in both groups derived most of their income from welfare, part or full time employment or criminal activities. By the final interview those patterns had significantly changed in both groups. There were no women from Pathways on welfare at the final interview; 3/7 were on regular disability benefits and no women, from either group, described their income as being criminally related (although one comparison group women continued to work as a prostitute). Three women in the comparison group were attending school and living on student loans.

Table 21: Main Sources of Income

Sources of Income	Prior to Incarceration		Final Interview	
	Pathways	Comparison	Pathways	Comparison
Welfare	4	2	0	2
Prostitution	1	1	0	1
Full or Part Time Employment	4	4	3	2
Criminal Activities	2	3	0	0
Disability Payments	1	0	3	1
Spousal Support	1	1	1	1
Other Family Support	0	1	0	0
Student Loan	0	0	0	3
Number of Women with Multiple Sources of Income	3	3	0	3

*Only pre-incarceration and final interview data is recorded. There was incomplete data at the second interview.

11.3 Level of Income

The income of women in both of the groups *decreased* as the study progressed, particularly among the Pathways women. At the pre-incarceration phase 11/17 women reported earning over \$2,000 a month, by the final interview only two women were in this income category; 11/14 women were in very low income categories (under \$1,500.00 per month). This drop in income may be partially due to a decreased reliance on illegal types of income deriving from prostitution or drug trafficking not mentioned during the interviews. Specific reasons for these decreases were not explored.

Table 22: Income Level

Amount of Income/month	Prior to Incarceration		Second Interview		Final Interview	
	Pathways	Comparison	Pathways	Comparison	Pathways	Comparison
Under \$500 per month	0	0	1	1	0	1
From \$500 to under \$800/month	1	1	1	1	3	2
From \$800 to under \$1,200/month	0	2	2	2	1	3
From \$1,200 to under \$1,500/month	0	0	0	0	1	0
From \$1,500 to under \$2,000/month	1	1	2	1	1	0
From \$2,000 to under \$2,500/month	0	3	0	1	0	1
Over \$2,500 per month	6	2	1	0	1	0
N/A				3		

12.0 PERSONAL AND FAMILY RELATIONSHIPS

12.1 Family Relationships

The Literature Review described most women offenders as being isolated, often alienated from family members and having few friends outside of those involved in criminal activities. The comparative study examined the status of family relationships and how these changed throughout the life of the research. Respondents were also asked to describe the level of their personal support network.

Data indicates that most women were alienated from, or had difficulties with immediate family members. Eleven of the 17 respondents described relationships with families as poor or very poor prior to their last major incarceration. Table 23 shows a dramatic change towards improved family relationships within both groups of women by the first interview. This trend was maintained at the final interview.

Table 23: Respondent Assessment of Relationship with Family Members

Assessment	Prior to Incarceration		Second Interview		Final Interview	
	Pathways	Comparison	Pathways	Comparison	Pathways	Comparison
Very poor	3	4	1	2	1	2
Poor	3	1	0	1	1	0
Fair	0	1	0	0	0	0
Good	2	1	3	2	4	3
Very Good	0	1	4	3	1	1
NA (Parents dead)	0	1	0	1	0	1

By the end of the project only 4/13 women described relationships with family members as poor or very poor; 9/13 described them as good or very good. This trend was apparent in both groups. Table 24 indicates that the frequency of contact with family members also increased, suggesting that isolation may have been reduced for these women.

Table 24: Frequency of Contact with Family Members

Frequency of Contact	Prior to Incarceration		Second Interview		Final Interview	
	Pathways	Comparison	Pathways	Comparison	Pathways	Comparison
Regular contact	2	3	4	4	5	5
Occasional contact	3	1	2	1	2	1
Rare contact	2	1	1	1	0	0
No contact	1	3	1	2	0	0

12.2 Personal Friendships and Support Networks

The Literature Review also indicated that women offenders lack non-criminal personal friendships and support systems. To assess changes to personal networks, respondents were asked to describe the number of people they could call upon for support if a problem arose in their lives. Prior to incarceration the average number of people the Pathways group said they could rely upon was 1.3. This rose dramatically to 10.6 at the second interview and remained at 10 for the final interview. There were also improvements in the comparison group for this measure; they described an average of 3.6 helpful contacts at pre-incarceration and 13.4 at the first interview. In comparison to the Pathways group, this high level was not sustained at the final interview where it dropped to an average of 8.7 contacts per person.

13.0 SELF-ASSESSMENTS

The study attempted to explore how the respondents felt about their sense of well-being, confidence, skill levels and hopefulness about the future prior to incarceration and during the life of the project. Five questions were asked in order to assess these issues. These were:

- Do you feel your life is moving in a positive direction?
- Do you feel you are a person of worth and value?
- Do you feel hopeful about your future?
- Do you feel you are making good decisions about your life?
- Do you feel that you have the skills to handle your life well?

No woman in either group felt that her life was moving ahead in a positive direction at the pre-incarceration stage. By the final interview, there was a strong shift in this perception – 11/14 women said that they felt their lives were moving in a positive direction. This change was seen equally in the Pathways and comparison groups.

By the final interview, women in both groups also felt an increased sense of personal worth and value, increased hope about the future and an improved belief that they were making good decisions. In the latter category the positive change was more pronounced in the comparison group. Three out of eight Pathways members said that they did not feel that they had the skills to handle life well and this remained unchanged throughout the research (Table 25).

Table 25: Self-Assessment

Assessment Categories	Prior to Incarceration		Second Interview		Final Interview	
	Pathways	Comparison	Pathways	Comparison	Pathways	Comparison
<i>Respondent feels life is moving in a positive direction.</i>						
Strongly agree	0	0	3	6	4	3
Agree	0	0	3	3	1	3
Strongly Disagree	8	7	0	0	0	1
Disagree	0	2	2	0	2	0
<i>Respondent feels she is a person of worth and value.</i>						
Strongly agree	0	0	3	3	2	4
Agree	0	3	5	5	5	2
Strongly Disagree	6	6	0	1	0	1
Disagree	2	0	0	0	0	0
<i>Respondent feels hopeful about the future.</i>						
Strongly agree	0	0	4	7	2	4
Agree	0	0	4	1	4	2
Strongly Disagree	7	6	0	0	0	1
Disagree	1	3	0	1	1	0
<i>Respondent feels she is making good decisions.</i>						
Strongly agree	0	0	4	5	3	2
Agree	0	1	3	4	1	4
Strongly Disagree	6	5	0	0	0	1
Disagree	2	3	1	0	3	0
<i>Respondent feels she has the skills to handle life well.</i>						
Strongly agree	0	0	3	5	2	3
Agree	0	4	2	4	2	3
Strongly Disagree	5	4	0	0	0	1
Disagree	3	1	3	0	3	0

14.0 KNOWLEDGE OF OR INVOLVEMENT IN COMMUNITY RESOURCES

Key respondents who were interviewed for the Key Respondent Survey (Appendix II) noted that women offenders are often unaware of community resources and programs or don't know how to access or use them effectively. Women offenders are frequently not involved in, nor do they see themselves as part of, the "non-criminal community." This alienation is a barrier to the successful re-integration of women offenders into the community

This study examined several questions related to this issue. Women were asked whether they had an awareness of community programs, whether they were a member of any community organization or were involved in any volunteer work. Volunteer work offers women an opportunity to become involved in, and give back to, the community if they are not employed or employable because of disabilities or other problems.

Table 26 indicates that there was a very low level of knowledge about community programs within both groups of participants at the pre-incarceration phase but that awareness increased at the second interview. By the final interview general awareness had fallen off in both groups and slightly more so in the Pathways group.

There was an increase in the involvement of women in community organizations throughout the life of the project. Only four women (two from Pathways and two from the comparison group) had been involved in a community organization prior to incarceration, this number increased to nine at the second interview and decreased to six by the final interview.

A slight increase in volunteer activity was also noted at the second interview but this was not maintained.

Table 26: Awareness of Community Programs and Resources

Awareness	Prior to Incarceration		Second Interview		Final Interview	
	Pathways	Comparison	Pathways	Comparison	Pathways	Comparison
Very familiar	0	1	8	8	4	4
Somewhat familiar	2	1	0	1	1	2
Not very familiar	2	1	0	0	2	0
Don't know anything about community programs	4	6	0	0	0	1

15.0 PARTICIPANT RATING OF HOUSING AND PROGRAM SUPPORT

Participants in the Pathways group were asked to rate how helpful the transitional housing program was to them at the second and final interviews. A scale of 1 to 7 was used (1 = Pathways not helpful, 7 = Pathways very helpful). At the second interview, when half of the women were staying at Pathways, the rating was high: 6.9 out of 7.0. By the second interview when more of the women were living in the community, this rating had dropped to 5.9.

Participants were asked to identify the specific aspects of Pathways that had been helpful to them at the second and final interviews. Each Pathways woman spoke of the profound importance Pathways had had in their lives. They described it as having provided stable housing, psychological help, a network of support and security, an opportunity to build resources and strengths, and a community to belong to. Specific comments from the Pathways residents are presented below:

- *Pathways allowed me to have my baby live there. I had counseling and was integrated into the community and network of support. There were lots of family functions; Elizabeth Fry was like a second family to me.*
- *I came off the start and went to detox for 6 months. Then panic due to worry about being on own. Second-stage housing was perfect for me; it gave me community and security at the same time. After Pathways, I felt I had earned the right to go back into the community. Pathways provided many resources, comfort and encouragement. At Pathways I knew I might trip and fall, but there would be someone there to catch me. I am very happy now on my own, am coping well and decreasing my methadone.*
- *Staff had a vested interest in me. Helped me with schooling, counseling and finding work. Helped with day to day life. The independent living skills were excellent. I had no idea of how to do anything when I came into recovery.*
- *Pathways got me prepared to go out on my own. Gave me lots of help and support. I feel I can have continuing help and support when I need it. It's a really good program for people who need to relearn skills such as shopping, etc.*
- *Provided physical and emotional support in a safe environment. Provided a transition from the institutional setting of prison and a regular home setting. Provided a place to rebalance myself while dealing with all of the issues related to reintegration with society after my time in prison.*
- *Elizabeth Fry set up a free humanities course from UBC that was so stimulating for me. It made me feel needed. Toward the end I was not stimulated much and am now happy to be out of there. Helped me to move to my new place. Feel I could call them even now if I needed to.*
- *Pathways gave me so many resources. Lots of feedback about my behaviour. Not so isolated anymore, found many new friends there. Helpful with financial problems. Lots of community interactions. It has rules which gave me structure and I had new neighbours to talk to.*

At the final interview one woman in the Pathways group said that she felt less supported by staff, partly due to the changes in staffing at Elizabeth Fry.

At the second interview, five of the nine comparison group members also identified ways that they felt they had been helped at Columbia House. Residents identified the supportive attitude of staff and the assistance they received reintegrating into the community as the most important aspects of the program. Comments made by Columbia House residents were not as positive as those made by the Pathways group. They do suggest that this facility also had positive effects and was valued by most of the women who resided there.

16.0 CONCLUSIONS

The objective of this study was to assess whether the lives of women offenders had improved as a result of staying at Pathways transitional housing and whether these improvements could be measured when compared with other women offenders who had not received transitional housing support.

The sample size of the Pathways and comparison groups was small and there was some attrition (from 17 respondents to 14) between the first and final interviews. Changes and improvements were seen more frequently in the Pathways group particularly in relation to decreased recidivism, improved housing stability, improved health status and a lessening of (perceived) problems with drugs and alcohol. In some cases improvements were also seen in the comparison group. The areas of most significant change in the Pathways group are highlighted in bold in Table 27. Due to the small size of the samples, the changes described in this table should not be seen as conclusive but only suggestive of trends which may require further study.

Due to the short time between the second and third interviews, immediate and longer-term outcomes cannot be differentiated.

Table 27: Comparison of Pre-Incarceration and Final Outcomes for Pathways and Comparison Groups

Characteristics	Outcomes for Pathways Group	Outcomes for Comparison Groups
Training and education participation levels	<ul style="list-style-type: none"> Increased involvement and job oriented courses and training. 	<ul style="list-style-type: none"> Increase in enrollment in university oriented courses.
New criminal charges	<ul style="list-style-type: none"> No further criminal charges during research period. 	<ul style="list-style-type: none"> 3/9 participants had new charges.
Return to custody	<ul style="list-style-type: none"> No women returned to custody. 	<ul style="list-style-type: none"> 3/9 women returned to custody on new charges or breach of parole.
Housing stability	<ul style="list-style-type: none"> 4/8 remained in stable housing between the second and final interview. At the final interview 6/7 women were living in stable accommodation. 	<ul style="list-style-type: none"> 2/9 remained in stable housing between the second and final interviews. At final interview only one participant lived in her own apartment.
Quality of housing	<ul style="list-style-type: none"> Assessment of quality and safety of housing averaged 4.3 out of 7 (on a seven point scale) at pre-incarceration. This increased to 6.9 out of 7 at final interview. 	<ul style="list-style-type: none"> Assessment of quality of housing increased from 4.5 to 6.4 on a seven point scale.
Finding a place to sleep at night	<ul style="list-style-type: none"> Number of women with this as a major issue was reduced from four to zero. 	<ul style="list-style-type: none"> Two women had this as a major issue. Remained a major issue for one woman at the final interview.

Characteristics	Outcomes for Pathways Group	Outcomes for Comparison Groups
Health issues	<ul style="list-style-type: none"> 8/8 Pathways respondents said they had serious health problems at pre-incarceration. 6/8 women defined their health as poor or very poor. At final interview only one woman described her health as poor. 	<ul style="list-style-type: none"> 4/9 women said they had serious health problems at pre-incarceration. 2/9 women defined their health as poor or very poor at pre-incarceration. At the final interview only one respondent described her health as poor. 6/7 women described their health as good or very good.
Food and nutrition	<ul style="list-style-type: none"> 6/8 women described themselves as severely underweight at the pre-incarceration stage. Only 1/8 described themselves as severely underweight at final interview. 7/8 women in the Pathways group had problems maintaining a healthy diet at pre-incarceration. This dropped to 3/7 participants at final interview. 7/8 women had problems getting or affording enough to eat at pre-incarceration: this changed to 2/7 women at the final interview. At pre-incarceration only 2/8 women prepared their meals themselves “at home”: this increased to 7/7 at the final interview. 	<ul style="list-style-type: none"> No woman described herself as severely underweight at pre-incarceration. There was no deterioration in weight at final interview. 6/9 comparison group members had problems maintaining a healthy diet at pre-incarceration. This dropped to 2/7 participants at final interview. 5/9 comparison group members said they had problems getting enough to eat. At final interview 2/7 comparison group members still had problems getting enough to eat. At pre-incarceration 3/7 women prepared their meals at home. This remained unchanged at final interviews.
Mental health issues	<ul style="list-style-type: none"> At pre-incarceration 7/7 women described themselves as having a mental health disorder. At the final interview 3/7 women said that they had a mental health disorder. 	<ul style="list-style-type: none"> At pre-incarceration 4/9 women described themselves as having a mental health disorder. At the final interview 5/7 women reported mental health disorders
Alcohol & drug issues	<ul style="list-style-type: none"> All women described themselves as having serious addiction problems at pre-incarceration. No Pathways woman described herself as having addiction problems at final interview (some women were on methadone maintenance). 	<ul style="list-style-type: none"> 8/9 women described themselves as having addiction problems at pre-incarceration. 2/7 women described themselves as having a serious addiction problem at the final interview.
Use of health care resources and services	<ul style="list-style-type: none"> There was a slight increase in visits to doctors and specialists at final interview. There was no improvement in use of some health care resources (e.g., dentists). There was slightly less reliance on emergency services by the final interview. 	<ul style="list-style-type: none"> There was no improvement in use of many health care resources (e.g., dentists). There was slightly less reliance on emergency services by the final interview.

Characteristics	Outcomes for Pathways Group	Outcomes for Comparison Groups
Employment/ income	<ul style="list-style-type: none"> Levels of part time and full time employment remained basically the same. Fewer women were on welfare by the third interview; more were on disability Levels of income decreased throughout the study period. 	<ul style="list-style-type: none"> At pre-incarceration 4/9 participants were unemployed. This decreased to 2/9 at the final interview. Levels of income decreased throughout the study period. More women were supported by student loans.
Personal and Family Relationships	<ul style="list-style-type: none"> At pre-incarceration 6/8 respondents described their family relationships as poor or very poor. At final interview only 2/7 respondents described family relationships as poor. Contact with family members increased during research period. At pre-incarceration participants identified 1.3 people as close contacts. This rose to 10 at the final interview. 	<ul style="list-style-type: none"> At pre-incarceration 5/9 participants described their family relationships as poor or very poor. At the final interview 2/7 women described their relationships as poor. Contact with family members increased during the research period. The level of close, reliable contacts was 3.5 at pre-incarceration and increased to 8.7 at final interview.
Self assessment	<ul style="list-style-type: none"> 8/8 women felt their lives were not moving ahead in a positive direction at pre-incarceration. Only 2/7 felt this way at the final interview. 	<ul style="list-style-type: none"> 9/9 women felt their lives were not moving ahead in a positive direction at pre-incarceration. This decreased to 1/7 at the final interview.
Feeling of worth and value	<ul style="list-style-type: none"> 8/8 women at pre-incarceration felt their lives were of little worth or value. At the final interview 7/7 women felt their lives were of worth and value. 	<ul style="list-style-type: none"> At pre-incarceration 6/9 respondents felt that their lives were not of worth or value. At the final interview only 1/9 of the respondents felt that their lives were not of worth and value.
Hopefulness about the future	<ul style="list-style-type: none"> At pre-incarceration 8/8 women expressed hopelessness about the future. At the final interview 6/7 women felt hopefulness about the future. 	<ul style="list-style-type: none"> At pre-incarceration all women felt hopelessness about the future. At the final interview 6/7 women felt hopefulness about the future.
Making good decisions	<ul style="list-style-type: none"> At pre-incarceration 8/8 respondents felt that they were not making good decisions. At the final interview 3/7 respondents still felt that they were not making good decisions. 	<ul style="list-style-type: none"> At pre-incarceration 3/9 respondents felt that they were not making good decisions about their lives. At the final interview 1/7 respondents said they still had problems making good decisions.
Respondent feels she has the skills to handle life well	<ul style="list-style-type: none"> At pre-incarceration 8/8 women felt that they did not have the skills to handle life well. At the final interview 3/7 women felt that they did not have the skills to handle life well. 	<ul style="list-style-type: none"> At pre-incarceration 3/9 women felt that they did not have the skills to handle life well. Only 1/7 women felt that they did not have the skills to handle life well at the final interview.

The most significant improvements in the Pathways group in comparison to the comparison group were related to the lack of subsequent criminal charges or returns to custody, the increase in stable, non-transient, safe and secure housing, improvements in general health, mental health and nutritional status, increased ability to prepare food at home and decreases in levels of self-described drug/alcohol misuse.

Levels of income decreased for both groups during the study (possibly due to less reliance on illegal forms of income), but there was a significant improvement in the number, quality and frequency of personal and family contacts in both groups. There were improvements in feelings of self-worth and a sense of hopefulness in both groups. However, at the final interview 3/7 of the Pathways respondents still felt that they had problems making decisions and lacked the skills to manage life well.

It was impossible to differentiate between the effects of transitional housing and the staff support provided by the Pathways program in terms of the improvements made by the Pathways group. It is clear, however, that the Pathways women had serious health, addiction, mental health, housing, criminal justice and relationship issues at pre-incarceration. The decision to extend the residence time at Pathways for many of the residents was seen as necessary in order to address these problems.

Data from the Literature Review and Key Respondent Survey suggests that the provision of housing cannot be separated from housing-related program support and counseling for women offenders. Women offenders are seriously disadvantaged in almost every aspect of their lives and have significant socio-economic, health and other personal barriers that limit their re-integration into society. Almost all have complex histories of physical and sexual abuse and chronic health and addiction problems. The *burden* of these issues suggests that, without stable housing, changes in these areas might be very difficult. One of the most dramatic examples of this can be seen in the area of health, nutritional status and food preparation. At pre-incarceration 6/8 of the Pathways women described themselves as being severely underweight and 7/8 said they had frequent problems getting enough food to eat. Most ate snack foods, at restaurants, or used community meal programs. All of these problems were dramatically reduced by the final interview, suggesting that access to private kitchens, meal preparation, budget and shopping support, all played a part in improving the basic health of these women.

Although the sample sizes of the both the Pathways and comparison group were small and the tracking period limited, the results of this study suggest that the provision of longer-term transitional post prison housing reduced recidivism rates and improved the housing, health, relationships and self-worth of the women offenders who received it. Whether or not these improvements are maintained over the longer term when women face more challenges in the community is unknown.

APPENDICES

APPENDIX I

Women Offenders: Characteristics, Needs and Impacts of Transitional Housing: Literature Review

Women Offenders
Characteristics, Needs and Impacts of Transitional Housing
Literature Review



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Table of Contents

Executive Summary	iii
1.0 Introduction and Background.....	1
2.0 Description of the Literature Review.....	2
2.1 Contents.....	2
2.2 Literature Sources Used	2
2.3 Scope of the Literature.....	3
3.0 Characteristics of Women Prisoners	4
3.1 Number and Proportion of Women Prisoners.....	4
3.2 Demographic Characteristics	4
3.2.1 Age and Ethnicity	5
3.2.2 Marital and Parenting Status	5
3.2.3 Educational and Employment Status.....	5
3.3 Offense Characteristics.....	6
3.4 Gender Related Characteristics	6
3.4.1 Exposure to Sexual and Physical Violence	6
3.4.2 Substance Abuse	8
3.4.3 High Prevalence of Mental Health Disorders.....	8
3.4.4 Rates of Physical Illness and Disability	9
3.4.5 Child and Family Issues	9

4.0 Specific Issues Related to Women Offenders at Re-Entry 10

 4.1 Impact of Incarceration..... 10

 4.2 Stigma and Discrimination 11

5.0 Needs of Women Offenders at Community Re-Entry 11

 5.1 Specific Service Needs 11

 5.2 Program Quality Characteristics..... 16

6.0 Significance and Impacts of Housing in the Post-Release Period 17

7.0 Summary 21

8.0 References 22

EXECUTIVE SUMMARY

This document looks at the characteristics of women offenders and the importance of housing and housing-related services in relation to needs and issues such as social re-integration.

The research on women offenders is limited due to the proportionally small number of women in the prison population (5-10%), and the fact that women are less likely to commit violent crimes. In most cases, prison or re-entry programs for women are usually adapted from those for men and are not gender-specific. Even housing literature addressing issues such as homelessness does not identify women offenders as a specific high-risk, high-need group.

Women offenders are typically young, single parents, unattached and isolated, poorly educated and lacking workforce skills. Most women offenders are responsible for the care of their children before and after incarceration.

On every significant measure women offenders have serious personal barriers which limit community re-integration. A majority have complex histories of physical and sexual violence which typically begin in childhood and which affect current mental health (trauma) and choice of partner. Many have a history of substance misuse, psychiatric illnesses and a range of medical problems (STDs, HIV, gynecological and dental). One author describes a continuum by which women become victimized while very young. Their attempts to survive with limited options lead to the criminalization of those options and result in offending behaviour.

Women offenders are isolated, have few functioning family relationships and feel extremely guilty for abandoning their children. Several authors describe the extreme stigmatization of women offenders both in the prison system and at re-entry into the community.

A number of authors have described the most significant needs of women offenders at re-entry. The need for housing is listed as a priority need in most studies where needs are identified by women offenders. The types of housing mentioned or housing services prioritized are half-way houses, public and co-operative housing, pre-release housing and pre and post release housing assistance. Drug/alcohol counselling, mental health counselling, job support, financial aid, social skills training are the most frequent types of services mentioned as being required. Several studies prioritized the importance of addressing housing needs prior to release.

Many studies emphasized the importance of basic skills development training for women offenders. Specific skills would include basic household management, relationship awareness training, parenting, budgeting, shopping, and employment readiness. These data suggest the value of combining housing support with this type of skill development.

Limited literature was available on the impact of housing on women offenders at release. An Australian study which looked at the issue of housing and reintegration/recidivism found that women offenders were at high risk of returning to prison simply because of gender and that the following housing characteristics were specifically linked with poor social re-integration and recidivism.

- High level of housing transience;
- Homelessness (both permanent and episodic);
- Living in isolation - offenders living with family members and women living with their children were less likely to return to prison;
- Positive assessment (by the ex-prisoner) of the suitability of the housing. This suggests that women themselves are the best judges of suitable housing support post release.

Three types of housing were associated with successful ex-prisoner re-entry in the Australian study: accommodation with the family, long term public housing and boarding house accommodation. The study concluded that even short term imprisonment destabilizes the housing of at least half those imprisoned which is likely to result in re-offending and re-incarceration.

Stable, socially supported housing was clearly associated with staying out of prison and increased social reintegration. The converse, not having such housing, was associated, both in participants comments and in the quantitative results, with slipping back into transitory life style, problematic drug use and being re-arrested and re-incarcerated. (Baldry, 2003:ii)

1.0 INTRODUCTION AND BACKGROUND

This Literature Review is part of a research project, now being conducted for Canada Mortgage and Housing, on Women Offenders: Characteristics, Needs and Impacts of Transitional Housing. Another component of the study is research comparing the outcomes of female offenders who have stayed at *Pathways*, a second stage housing facility managed by the Elizabeth Fry Society of Greater Vancouver, with women who have minimal or only semi-custodial (half-way house) accommodation post release.

Data for this study is being collected through two comprehensive interviews with respondents pre and post incarceration. The interviews are collecting data on respondent housing stability and safety, health status, contact with health resources, mental health status, drug and alcohol use, family relationships and self assessment of hopefulness and quality of life.

The two primary research questions addressed in the research are:

- What are the personal, housing and housing related characteristics of high risk women who have been in contact with the law?
- What are the impacts and outcomes of Pathways Second Stage Housing on the level of functioning and social integration of residents?

Secondary research questions are:

- What are some of the cost implications of providing transitional housing to women?
- What is the overall size and characteristics of this at risk population group in BC and the numbers and housing resources that provide transitional housing?
- What are the transitional housing related needs of women who are ex-offenders as defined in the literature?

This literature review addresses the first and last of these questions.

2.0 DESCRIPTION OF THE LITERATURE REVIEW

2.1 Contents

The international literature on the housing needs of women offenders is extremely limited. For this reason the literature review takes a broad view of the issue and includes a description of the characteristics and broader needs of women offenders. The review includes:

- A discussion of the scope and availability of literature related to housing and women prisoners;
- A description of the general characteristics and needs of women offenders ;
- A description of the specific needs of women offenders at re-entry to the community;
- A discussion of the importance of housing and its relationship to issues such as social reintegration or social stability as defined in the literature.

2.2 Literature Sources Used

Literature used in this review was drawn from four sources.

- AN OVID search using key words such as women, offenders, housing, housing support and second stage or transitional housing was used to define preliminary documents and sources. This identified over one hundred potential articles and documents for the initial review;
- A review of organizational databases which deal with offenders (and more specifically, women offenders), was conducted. Sources included:
 - Australian Institute of Criminology;
 - Elizabeth Fry (Canada);
 - Center for Housing Policy (University of York);
 - Access CMHC: The Housing Connection;
 - National Institute of Justice (NCJRS) Abstracts Database;
 - Women’s Prison Association and Home Inc.;
 - National Institute of Corrections (Women Offender Issues).
- A review of specific offender data from government departments or ministries including:
 - Corrections Branch
 - BC Ministry of Solicitor General and Public Safety;
 - BC Housing;
 - Solicitor General, (Canada);
 - Department of Justice, (Canada);
 - National Parole Board (Canada).

- Internet, Web-Based Search - a broad internet search was conducted using the key words defined above. This search primarily yielded descriptions on *specific* programs serving women offenders.

2.3 Scope of the Literature

The literature related to the housing needs of women offenders is limited in both scope and breadth. According to Baldry et. al (2003) the international literature looking at offenders and housing is characterized by:

- A lack of studies and research in general;
- A lack of research on the specific housing needs of high needs of groups such as women ex-offenders;
- Few empirical studies with samples of sufficient size to be representative of this group;
- A lack of theoretically and statistically supported research into the influence of housing on factors such as recidivism and social reintegration.

Singer (1995) notes that various factors account for the limited research in this area. Although the population of women in prison is growing (see Section 4.1) it is still a relatively small percentage of the total prison or community release population (under 5-10%). Women generally commit non-violent crimes and are not perceived as a danger to society (and hence receive less research attention). These factors and the diminished economic and political status of women has meant that they have had unequal access to both services and research.

Unfortunately our society has paid little attention to the female inmate population. They have been seen as "expendable," "evil," "women gone bad," "not really women," and "incapable of change." Yet in truth we know too little about women serving time. There have been a paltry number of clinical and research investigations of this population, and the services rendered to them have been woefully deficient. (Singer, 1995:103)

Gilfus (1992) also notes that the literature focuses more on male offenders who are considered more likely to be considered "career offenders." Richie (2001) concludes that invisibility of women in the field has seriously affected program initiatives.

Reflecting the broader relative invisibility of women in the field of criminology and the criminal justice literature, the lack of knowledge about (and perhaps, interest in) gender as an important variable in re-entry has significantly limited intervention initiatives (Richie 2001:368).

Covington (2001) also reinforces the view that women prisoners tend to be an invisible part of the population.

Some of the most neglected, misunderstood and unseen women in our society are those in jails, prisons and community corrections (Covington, 200:85).

Bloom et al. (2003) in a recent study looking at gender-responsive strategies in the corrections system, note that not only have most programs been simply transferred from men to women (with no gender adaptation) but that there is a general prejudice within the corrections system towards women offenders. In a number of surveys Bloom notes that a "male inmate preference" can be seen. Female offenders are considered to be harder to work with, more demanding and complaining and more likely to refuse orders. Working with female offenders is also considered to be a low-status assignment within the corrections system.

Although women offenders are likely to make up a significant proportion of permanent or episodic homeless women, the housing literature related to homelessness does not identify women offenders as a high risk, high need sub-group. For example recent housing reports such as Common Occurrence: The Impact of Homeless on Women's Health (Sistering, 2002) and On the Rough Edge, (Novac, 1999) do not discuss the specific characteristics or needs of women offenders.

3.0 CHARACTERISTICS OF WOMEN PRISONERS

3.1 Number and Proportion of women prisoners

Women historically make up a small proportion of those involved in crime. In the past twenty years, however, there has been an increased proportion of women who are incarcerated as a result of criminal activity. In some cases the growth in the number of women offenders is proportionally larger than for men. For example, in the United States, the number of women offenders in state and federal and community correctional facilities grew from 604,418 in 1990 to 1,093,786 in 2002, an increase of 81%, while the male prison population grew by 45% (Bloom, 2003).

An increase in the proportion of women prisoners is also evident in Canada. Over the past twenty years the proportion of women charged with a criminal offence has increased from 14% to 18%. The number of women admitted to provincial-territorial custody has increased from 5 to 9%, and in federal custody from 3% to 5% (Trevethan, 1999:1). In relation to the *total* offender population in Canada the number of female prisoners has been growing.

While the total offender population decreased between 1995/96 to 1999/00 by 2.7%, the total female offender population increased by 31.1% during the same time period (from 649 to 851) (National Parole Board, 2000:2)

A population profile developed by Correctional Services Canada indicates that, in 2001, there were 866 women offenders serving a federal sentence either within an institution or in the community. In the fiscal year 2001-2002 there were 880 female admissions to the BC provincial correctional system and 2,673 admissions to community supervision¹.

3.2 Demographic Characteristics

In terms of demographic characteristics female prisoners can be described as being young, with a substantial proportion coming from minority communities, with poor education and lacking in skills, more likely to be unattached (single, divorced, separated, widowed), having children and being poor.

3.2.1 Age and Ethnicity

Within the BC Corrections system 43% of incarcerated women are between the ages of 25 and 34. The main age of both community and institutional offenders is 32. Fifty-five percent of federal incarcerated female offenders are in the 20-34 age range.

Although Aboriginal people make up 2-3% of the general Canadian population, Aboriginal women are significantly over-represented in the prison population. They constitute one-third of all provincially incarcerated prisoners and 20% of the women in the federal corrections system. Aboriginal female offenders have the lowest grant rate for day and full parole and are the least successful group on conditional release within the female offender population. They are also the ethnic group within the female offender population that is more likely to be incarcerated than being given conditional release (National Parole Board 2000:1).

Black female offenders are also highly over-represented in the federal system, representing 12% of the female population.

3.2.2 Marital and Parenting Status

Female offenders are more likely to be unattached (single, divorced, separated or widowed) than male offenders. A federal study of intake records of Canadian women offenders in March 2001 indicated that 64% described themselves as single. Travis (2001) found that nearly half of all women in (US) state prisons have never been married and another 20% are divorced. Among the general population only 21% of women 18 or over have never been married.

The federal study of Canadian women offenders found that most women (65-81%) had at least one child. Over half the women had primary responsibility for their children prior to incarceration and that 85% of these were single parents. (Eljdupovic - Guzina, 1999).

Bloom et al. (2003) found that among the US female offender population 70% had at least one child under 18 years of age and two thirds of incarcerated women had minor children. Grandparents (of the mother) are most likely to be the caregivers of the children of female offenders and it is assumed that the mother

¹ Admissions include admissions only, not individual totals.

will resume care post release. About 10% of children of incarcerated mothers are in foster or other forms of care.

3.2.3 Educational and Employment Status

Female prisoners have low educational levels when compared with the population of Canada as a whole. In 1996, 35% of Canadian female provincial inmates and 48% of federal inmates had a grade nine education or less (Trethevan, 1999). *Current BC Correctional data indicates a comparable picture: almost 60% of incarcerated female inmates had a grade ten education or less, 20% had completed only grades 7-8.*

A 1996 profile of federal women inmates indicates that 64% in provincial-territorial facilities and 80% of females in federal facilities were unemployed at the time of admission. This was higher than the rate of unemployment for the male prison population. (Bloom et al. 2003) note that most jobs held by incarcerated women are low skill, entry-level, low paid jobs. Two-thirds of the women surveyed in her report had *never* held a job that paid more than \$6.50 an hour (US\$).

In an in-depth study of fourteen female offenders (Maeve, 2001) found that twelve of the fourteen women studied had never had any type of meaningful employment.

Economically, those women survived through illegal activities or through the inconsistent good graces of others. Most had not completed high school and did not describe any real marketable skills. (Maeve, 2001:132)

3.3 offense characteristics

Women's pattern of criminal activity differ markedly from that of men. Smith (n.d.) and Gilfus (1992) note that women are overwhelmingly convicted of non-violent offenses which typically arise from economic motives.

The offenses for which women are arrested and incarcerated are primarily non-violent and minor property offenses: shoplifting, larceny, check or credit card fraud, prostitution and drug possession. When women do commit acts of violence, it is most likely against family members and in a context of self defense. (Gilfus, 1992:64)

Federal female offenders in Canada are more likely to be incarcerated for violent offenses (15% of federal offenders were serving time for murder). Those in provincial institutions are primarily incarcerated for non-violent crimes : 75% were convicted of administrative crimes, fraud, possession of stolen property and theft.

3.4 Gender related CHARACTERISTICS

A number of broader personal and historical characteristics are strongly associated with women offenders. These characteristics, alone or in combination, help to establish the barriers and challenges faced by women when they re-enter the community after release. They are also germane to the program, support services and resources that are required during this transition period. These characteristics are described below.

3.4.1 Exposure to Sexual and Physical Violence

In a summary of the literature Bloom et al. (2003) note that 60-80% of women offenders have been victims of physical and sexual violence. This is a rate 5-8 times more than for male offenders.

Browne et al. (1999) provide a detailed analysis of the prevalence and severity of the lifetime victimization among incarcerated women. In a comprehensive study of female offenders housed in a US maximum security prison she found that women had been victims of severe interpersonal violence at all stages of their lives, beginning in childhood. The study concluded that,

- 70% of women experienced severe physical violence from a childhood or adolescent caretaker or parent;
- Over half of all respondents (59%) reported some form of sexual abuse during adolescence (41% of the respondents reported vaginal, oral or anal penetration);
- 27% of this group reported biological, adoptive or step fathers as the perpetrators of sexual violence;
- Over half of those reporting childhood or adolescent sexual abuse reported that their first molestation occurred between the ages of 0-9. For 42% of this group the abuse lasted more than one year;
- 75% of the respondents reported experiences of severe physical abuse by partners in adulthood. In many cases this abuse was severe (being choked, strangled or hit with an object);
- One third of the women reported marital rape;
- 53% reported that a partner had threatened to kill them, 62% had been injured by physical attacks;
- 37% had obtained a court order (no contact) related to protection;
- 77% reported they had been victimized by others: 47% had been mugged, 28% had been knifed or shot at.

These findings suggest that,

Violence across the lifespan for women incarcerated in the general population of a maximum security prison is pervasive and severe. Lifetime prevalence rates of severe violence by inmates reported in this study far exceed those for all actions of physical violence reported in the general female population. (Browne et al., 1999:316-317)

Canadian data appears to support these conclusions. In a study of female offenders Eljduporic - Guzina (1999) found that 78-82% indicated they had suffered some form of abuse or violence.

Childhood victimization strongly predicts re-victimization later in life. Women offenders who reported severe physical violence by parental figures were 29% more likely to become involved with an intimate adult figure who was physically violent (Browne, 1999:317). There is also a strong linkage between drug/alcohol abuse and physical and sexual victimization. Bonta (1997) notes that a history of physical abuse as an adult is a significant predictor of recidivism for female offenders in Canada.

Gilfus (1992) describes a compelling association between physical and sexual violence and later criminality. The women offenders she surveyed moved from being children with high rates of victimization (sexual abuse, neglect, violence) to "survival" which usually meant running away from home with no realistic housing or employment options. Survival strategies become "criminalized" due to the lack of options so that women then began a life of street crime involving the use of drugs. Maintenance in a life of criminality was supported by early motherhood and the need to find money and some form of support (usually with violent criminal partners).

The women in this study were victims of an overwhelming amount of violence as children and adults, yet they were on the whole committed to not harming others in their criminal activities. In spite of, or perhaps because of, those early experiences of violence, the women adopted roles and identities as caretakers and protectors, often remaining loyal to parents (and later to partners) who abused and exploited them. During adolescence the young women responded to those violations by striking out on their own, running away literally as well as symbolically through the use of drugs, but in doing so, their chances of achieving normative transitions to adult roles and responsibilities were derailed. What may have appeared to be the best available means of escape from violence meant that as young runaways they had to begin illegal "work" simply in order to survive, thus linking victimization to "criminalization" and blurring the boundaries between victim and offender. These early experiences of violence may have had a strong socializing impact on the women's development of highly gender stereotyped identities centered around distorted notions of relational and caretaking obligations. Consistent and repeated victimization by violence from early childhood into adulthood apparently seasons women well for the world of illegal street work where women's work is still highly exploited. (Gilfus, 1992:85)

3.4.2 Substance Abuse

There is a strong link between female criminality and drug use. Substance abuse is also related to trauma, violence and mental health problems. Bloom et al. (2003) note that 80% of women in US state prisons have substance abuse problems. The National Centre on Addiction and Substance Abuse found that 54% of offenders in state prisons had used an illicit drug during the month before they had committed their crimes compared to 4.1% of the use rate in the general population. On every measure of drug use women offenders reported higher drug use patterns than did their male counterparts.

Higher substance abuse related arrest rates are the driving force behind the escalation of arrest of women offenders in the United States. For example in 1994 80% of the women inmates in California were serving sentences for property offenses. A high rate of drug or related offenses also exists among Canadian women offenders.

3.4.3 High Prevalence of Mental Health Disorders

There is a high level of psychiatric and dual disorders among women who are incarcerated. Teplin's study (1999) of 1272 female jail detainees found that 80% of the sample met the criteria for one or more lifetime psychiatric disorders and 70% were recently symptomatic. The most common disorders were drug/alcohol dependence and post traumatic disorders and depression. Those female offenders with schizophrenia, manic episodes or major depressive episodes had a high rate of arrest for non-violent crimes, mainly misdemeanors.

A study of women offenders in Australia found that 77% of all the women had identifiable case evidence of a psychiatric illness. Not only were women offenders found to have poorer mental health than women in the general population but when compared with those in the population with a psychiatric illness, their illnesses were significantly worse.

Mood altering drugs are prescribed two to three times for women in jail than for men (Singer, et al., 1995). Lewis et al. (1997) found that there was a significant level of benzodiazepine dependency.

3.4.4 Rates of Physical Illness and Disability

Women who enter prison are often in poor health due to poverty, inadequate nutrition, drug/alcohol abuse and inadequate health care.

Five to six percent of women are pregnant when they enter jails and many of those pregnancies are high risk. Women prisoners are 50% more likely to be HIV positive and are at greater risk for breast, lung and cervical cancers. (Bloom et al., 2003).

In Maeve's (1992) study of women offenders three areas of health needs were identified: gynecologic/reproductive health problems, dental needs and mental health issues. Although many women had problems chewing due to missing teeth and chronic toothaches, the normal dental treatment they received was tooth extraction. All of the women used the Emergency Ward as their primary source of health care. They had no information about sexually transmitted diseases although all had had sex with numerous partners in order to get food, drugs or housing.

Although women in prison often have an improvement in chronic health conditions while in prison they typically leave prison with no clear knowledge about dealing with their health problems.

A study by Singer et al. (1995) of 201 randomly selected female inmates corroborated these findings. Of the 28 women in her survey who were pregnant 20 had received no pre-natal care.

Other health problems, including sexual transmitted diseases, may remain undiagnosed and untreated, thus increasing the likelihood that these women will suffer serious, chronic and costly health problems. (Singer, 1995:110)

3.4.5 Child and Family Issues

The relationships of women offenders with their children and families have profound affects on their needs for services at re-entry.

As noted above (Section 4.2.2) most women offenders are not married or attached but are mothers with responsibilities for their children. Because mothers are usually the primary caregiver a child's placement after a mother leaves prison is more uncertain than when the father is imprisoned. In most cases caregivers are the women's own parents especially their mothers. (Eljdupovic – Guzina, 1999)

More than half of the children of women prisoners never visit their mothers while they are in jail. (Richie, 2001:291). As well as feeling loss women offenders feel guilt, worry and shame in relation to their inability to perform their parenting roles.

It is said that when a man goes to prison, he loses his freedom but when a women goes to prison, she loses her children. While women are incarcerated their families suffer. Children are sent to live with relatives or friends or placed in foster homes, sometimes separated from their siblings. These children are at higher risk for future involvement with the juvenile and/or adult corrections systems than their peers. (Austin, 1992:5)

Travis (2001) notes that in many cases parent-child relationships may be difficult or impossible to re-establish.

Re-establishing relationships with children after incarceration is difficult. Research shows that incarceration of a mother results in emotional, financial and social suffering for children and that often mother-child relationships are beyond repair after a period of incarceration. It may be more difficult for mothers to have personal visits with their children while incarcerated because they are typically located in distant facilities . . . (Travis, 2001:13)

In addition to issues related to parenting and involvement with children, women offenders described problematic relationships with family members especially with their mothers.

The women (offenders) frequently described their desire for the ideal relationship with their mothers, but years of difficulty were virtually impossible to overcome, especially in terms of their daughters' recent criminal activity and its consequences. One particular thread in many of women's stories about their relationships with their mothers included their mothers' failure to protect them from (and sometimes overt facilitation of) the sexual abuse that the participants experienced as children. (Maeve, 2001:159)

4.0 SPECIFIC ISSUES RELATED TO WOMEN AT RE-ENTRY

Women face two specific issues at re-entry which may impede the transition or re-integration process. One relates to the traumatic impact of incarceration, the other to the stigma attached to women offenders .

4.1 Impact of Incarceration

Incarceration itself has significant impacts on all prisoners. The prison experience may exacerbate physical and/or psychological trauma (Travis, 2001). Lasovitch quotes a study by Kandace Faith noting that womens' experience in prison results in "lethargy, claustrophobia, depression, self-injurious behaviour and suicide." (Lasovitch, 1996:13)

One of the effects of incarceration is to weaken the informal social structures long associated with crime prevention. These include strong family relationships, individual support mechanisms and workforce participation. The impact of incarceration may also exacerbate a sense of isolation in women offenders. Dodge (2001) notes that women in prison "experience an unparralled sense of isolation" (43) related to the isolation of imprisonment, the inability to take care of their children and the fact that so many are unattached without the support of a partner.

The release from prison, while eagerly awaited in most cases, also results in a heightening of stress, fear and anxiety.

Following release from prison, inmates are moved directly from a very controlled environment to a low level of supervision or complete freedom. They may immediately be exposed to high-risk places, persons and situations. Few have developed relapse prevention skills during their incarceration to deal with these risks. (Travis, 2001:18)

4.2 Stigma and Discrimination

All women who have spent time in prison face the stigma of being in prison and experience internal shame and guilt which leads to feelings of degradation both of which can hinder reintegration.

The stigmatization that imprisoned and paroled women experience carries great costs. The stigma associated with criminality becomes what Becker refers to as one's master status. Women who are labeled as criminals find confirmation of their deviant master status as they undergo the process of community reintegration with few social bonds. The difficulty, if not impossibility, of attempting to disavow one's deviant label is a formidable task for many women offenders (Dodge et al., 2001:42).

This stigma leads to women offenders "being treated as outcasts, excluded from the job market and judged for their past criminal behaviour" (Dodge et al., 2001:43).

Several authors have spoken about the weight or "burden" on women at re-entry. This consists of a constellation of personal and criminal characteristics which *in combination* create an almost unsupportable level of problems. In addition to this burden many women offenders will return to neighborhoods which are troubled and lacking in the specific resources they need.

Maeve's research found that women offenders did not, in fact, successfully achieve transition back into the community in ways that supported themselves, their families, or the larger community. Rather, the offenders in her study,

. . . experienced an onward and downward momentum of health status or "devolution" of the following processes: economic status, physical and mental health status, intimate and family relationships and general social functioning (Maeve, 2001:151)

One of the most significant areas of devolution she describes was in the area of housing.

Ultimately, the women came to jail poor and re-entered our community with even less economic resources on which to depend. Their economic status thus continued onward and downward. In order to remain free, the women needed an income adequate to provide food, clothing and housing for themselves and their children. Realistically, however, the women in this study embodied the "feminization of poverty" made even more difficult by the stigma of incarceration. (Maeve, 2001:153-154)

5.0 NEEDS OF WOMEN OFFENDERS AT COMMUNITY RE-ENTRY

5.1 Specific Service Needs

Several studies examined the priority program/service needs of women at the period of community re-entry. In almost all cases, housing is rated as the first or a major priority.

O'Brien (2001) looked at women who successfully negotiated the transition from prison to the community in order to identify the resources essential to their success. Respondents identified five categories of services that they considered to be priorities. These were:

- Finding shelter;
- Obtaining employment and a legal income;
- Reconstructing connections with others;
- Developing community membership;
- Identifying consciousness and confidence in self.

Women noted that transitional housing (even semi-custodial half-way houses) were an important step back to the community. Since many women are forced to find accommodation with family and friends, transitional housing helped establish independence.

Singer (1995) interviewed 201 randomly selected female inmates incarcerated at a municipal jail to determine their needs. The most stated need was the need for suitable housing (see Table 1), noted by the largest group of respondents (39%). Table 1 describes the primary needs identified by this group of female prisoners.

Table 28: Primary Services Needed by Women Prisoners at Re-entry n=183

NEEDS	NUMBER IDENTIFYING	PERCENTAGE
Housing	71	39%
Drug Counselling	66	36%
Mental Health Counselling	39	21%
Financial Aid	26	14%
Alcohol Counselling	24	13%
Education and Training	20	11%
Medical Care	13	7%

Family Support	12	7%
Specific Items (e.g. food, clothing)	12	7%
Help Getting Children Back	8	4%
Child Care	6	3%
Parenting Classes	6	3%
Religious / Church Support	4	2%
Legal Help	3	2%
Other	6	3%

A release study of 57 federal Canadian women inmates quoted in Lasovitch (1996) noted that a range of different types of housing was needed. This included more availability of half-way houses, organized alternatives to half-way houses, satellite, low cost or cooperative housing and assistance in finding housing.

Taylor (1996) addressed the treatment related issues incarcerated women bring to the community at re-entry including the lack of a social and vocational definition, psychological dependence, poorly developed social skills and conflicts in relationships. Using case histories as examples he prioritized the psycho-educational and skills-training needs of women including:

- Social Skills Training e.g. personal dress and hygiene, filing out applications, acting successfully with a landlord, managing money, meal-planning.
- Educational Services - completion of education, literacy training, parenting skills, safety.
- Vocational Services - vocational assessment, counselling, job finding skills, resource utilization.
- Quality of Life - physical exercise, social activities.

Parsons (2001) studied factors associated with successful transition using data drawn from a faith-based transition program. In this group she found the dominant factors to be a spiritual belief/practice and freedom from addiction.

Maeve (2001) noted that the first few hours and weeks after release are critical periods in which women either relapse or reconnect with their communities in ways that are supportive.

Managing addictions, chronic illnesses and violent reactivity to life stressors is a monumental challenge to women who suddenly find themselves in the free world after having been kept in highly controlled situations within jail. Not only must they learn to manage these conditions if they are to remain free, but they must also find housing and employment and likely must resume their roles as a single mother to dependent children. (Maeve, 2001: 145)

In Maeve's study all of the women identified housing and money as inter-connected priorities.

As others have noted, housing is an enormous issue for women leaving jail. Incarceration, even for a relatively short period of time means that women often lose all possessions including clothing and personal effects. A not uncommon scenario among participants was that women who were arrested and kept in jail could not pay their rents, and during their absence are either evicted or the space that they had occupied within their family home was taken by someone else. Either way, personal possessions were often lost in the shuffle. Many women, then, did not actively have anywhere to go upon their release and had no money that they could apply toward rent. (Maeve, 2001:152)

Travis (2001) in a comprehensive review of male and female re-entry identifies housing as one of the most over looked challenges facing returning prisoners. He cites a number of significant barriers to funding and retaining housing including:

- A lack of financial resources necessary to compete in the private housing market;
- Exclusion from some social housing programs;
- Inability to use family support housing (because of alienation or strained relationships);
- Linkage of social housing with "drug free" use. Many offenders are not drug free.

Given the restrictions of the private housing market, the policies of public housing and the list of other issues returning prisoners face, it is perhaps not surprising that many of them live on the streets. (Travis et al., 2001:35-36).

The author quotes a study indicating that 25% of homeless individuals were offenders .

In a summary of Australian and international literature related to the needs of ex-offenders Baldy et al. (2003) identified a number of housing specific needs of offenders culled from the research. These are:

- The need for specialized housing and post release through care in all prisons;
- The need for housing issues to be dealt with as a priority at induction (reception into prison);
- Changes in housing benefits to enable social housing to be retained by prisoners;
- Allowing day release prior to final release to enable prisoners to undertake housing search/inspection;
- The design of a flexible system of housing able to cater to varied needs, but still based on a core of supported accommodation;

- Less institutionalized ex-prisoner only accommodation;
- Programs for keeping homeless individuals out of prison in the first instance (Baldy et al., 2003:4).

Alemagno (2001) also established a hierarchy of needs related to 165 women incarcerated in a large urban jail. She asked women at all stages of the judicial process what services they would need when they got out of jail. Fifty percent needed drug abuse treatment services but 84% said housing was a significant need, 40% said it was their priority.

When we further examined housing status, women in the treatment-seeking group were the most likely to indicate a lack of stable housing (staying in a hotel, boarding house, on the street or homeless, or in a shelter) before their arrest. Women in the treatment seeking group reported more transition in their living situation in the past year (35% moved 3 or more times). More than ¼ of the treatment seeking groups did not know where they would go on being released from jail. (Alemagno, 2001:799)

Lasovitch (1996), in a study looking at housing and related needs of women in BC, defined multiple problem areas related to access, affordability, planning and availability. She notes that, “when imprisoned women have been asked what they need to make the transition from prison into the community, their replies universally include safe and affordable housing.” (Lasovitch, 1996:28). However, most women who leave the BC Correctional Centre for Women end up in sub-standard housing in the most socially disadvantaged area of Vancouver.

For homeless women released from the BCCW shelter can only be found in the Downtown Eastside ghetto, where human misery is synonymous with the street intersection of Main and Hastings. Housing is a slum hotel room infested with rats and cockroaches, doors with no locks, the constant fear of rape and robbery, drugs to numb the pain. (Op.Cit: 7)

Lasovitch’s report documents an extensive list of issues and needs related to housing and adjunctive services for women. Her research conclusions and recommendations are summarized below:

- The need for extended pre-release and post-release services in the realm of housing, employment, parenting or substance abuse;
- The need to focus on the housing needs of specific groups of high risk women offenders. These include: the needs of federally sentenced women, those returning to the Downtown Eastside of Vancouver, women with mental illness and who are HIV positive;
- The need to develop housing that will accept injection drug users;

- A variety of low cost housing options;

For many women, housing costs are beyond their welfare check in all but the poorest and most dangerous areas of the city. Even those who have marketable job skills may need to have time and support to readjust to the freedoms and responsibilities of living in the community. Options which women prisoners and offenders have repeatedly said are needed include satellite apartments, co-operative housing and low cost rental accommodation. (Lasovitch, 1996:23)

- Emergency post-release accommodation to provide a safe environment from which to search for stable housing and employment.
- Provision to offenders of documentation and start-up funding to facilitate transition (e.g. ID, first welfare cheque). Lasovitch notes that, some women are released directly to the streets from BCCW, or are given a bus ticket and sent on their way, with neither financial assistance nor a support network in place. At sentence expiry, they are somehow expected to magically transform themselves into capable, self-reliant and law-abiding citizens (Lasovitch, 1996:113)
- Information about resources in the community. A study cited by Lasovitch found almost 20% of prison staff did not provide enough information about community resources to women when they were released.
- Opportunity to use day passes prior to release to assist with housing search.
- Increased coordination of housing, and other post-release services
- More overall emphasis on release planning. There are limited release planning services in most prisons.
- Greater availability of half-way houses.
- Opportunity to opt for alternate to half-way houses (e.g. family accommodation, supported lodgings or home placements)
- Support to carry through with the housing release plan. Lasovitch found that 16/22 women prisoners surveyed were not able to carry through with their housing plan.
- Direct involvement of offenders in providing housing support services.

5.2 Program quality Characteristics

The literature identifies the most important characteristics of services offered to women offenders at re-entry. Richie (2001) notes the importance of front-loading services within the first few hours and weeks after release. Many authors (Baldry, 2001, Bloom, 2003) stress the importance of putting housing into the

equation far before the termination of sentence and organizing the pre-release period so that housing options can be explored.

Covington (2001), Bloom (2003) and Koons (1997) stress the importance of a gender specific focus when addressing program treatment or re-entry needs of women. According to Covington women's programs differ from men on six major dimensions which need to be addressed in program/service planning.

- Nature of crime - crimes committed by women are primarily non-violent alcohol, drugs or property offenses;
- Responsiveness to treatment - women are more responsive to treatment than men if treatment is made available;
- Demographics - Most women "are poor, undereducated, unskilled single mothers and a disproportionate number of them are minorities" (Covington, 2001:85-86);
- Health and mental illness - high levels of illness must be considered and addressed;
- Motherhood - most female offenders are responsible for children;
- Abuse and victimization – most women offenders have histories of physical and sexual abuse.

These gender-related characteristics require the design of programs/services to include a focus on issues such as the physiological and mental impacts of addiction, relationships and attachments, interpersonal violence, eating disorders, grief work, isolation, child care and custody. Bloom et al. (2003) takes a broader view on gender issues suggesting that aspects of gender affect every aspect of incarceration, release planning and re-entry into the community and community integration including criminal justice processing (crime definition, reporting, arrest, sentencing), staff sexual misconduct and screening and assessment as well as program development and re-entry. In terms of community re-entry and reintegration she identifies five broader gender related issues that increase the "level of burden" on women in their search for housing, economic support and relationships issues. These are all linked to relationship loss and rebuilding.

- The need to immediately take full responsibility for children without partner support;
- Family expectations that the released women will take custody of children immediately;
- The need to reunify with children of all ages;
- If child in care, the need of the mother to demonstrate that she has the skills and capacity to take care of her children;
- Poor relationships with families that affect over-all re-integration.

As well as being gender responsive, the literature notes the importance of wrap-around services and key planning prior to release. Richie (2001) emphasizes the importance of the engagement of women in jail prior to their release.

Programs can use the time of incarceration to engage women and to build a trusting relationship, then take advantage of this bond to help women through the difficult transitional period after release. (Richie, 2001: 299)

Koons (1997) describes program characteristics that must be addressed when developing any type of program for women offenders:

- Qualified and dedicated staff with representation from ex-offenders;
- Comprehensive focus addressing rudimentary needs;
- Attractive programs that invite high levels of participation;
- Programs that build upon peer support and modeling;
- Clear, individually oriented goals;
- Structure, screening and assessment;
- Equipment, space and resources;
- The focus of programs on acquisition of real skills, thinking, reasoning, life skills;
- A homey environment, good communication between staff-clients;
- Small size;
- Programs that address self esteem, domestic violence, self-suffering;
- Non-aggressive management style;
- Non-threatening security, safety;
- Outside partnerships and inter-agency cooperation.

6.0 SIGNIFICANCE AND IMPACTS OF HOUSING IN THE POST-RELEASE PERIOD

The current research literature does not address the specific impacts of transitional housing on women offenders . However, several studies address the general relevance and impact of housing post-release for ex-offenders and for women.

Carlisle (1996), in a study of the housing needs of offenders in Britain, found that secure and available housing immediately post release was vital to successful rehabilitation of offenders because it:

- Provided an address which was required to claim employment or welfare benefits;
- Increased the social and emotional well-being of offenders ;
- Enhanced independence;
- Decreased social isolation.

McIvor (1994) looked at 128 male and female ex-offenders with housing problems. He found that only one in three homeless ex-offenders in the study had their needs met through supported housing. Supported accommodation was found to provide shelter, structure and a breathing space.

The area of Scotland where the study was conducted has a higher level of supported housing relative to its crime rate than any area in Scotland. Although offenders were able to stay up to one year in supported housing the average length of stay was only five months. The opportunities to deal with the complexity of offender issues was therefore restricted.

Over one-third of the offenders were asked to leave supported housing due to rent arrears or repeated minor infringements; one fifth left with no forwarding address and 10% returned to prison. Only 5/74 study participants were able to move into their own tenancy despite a mechanism to provide follow-up accommodation. Some of the problems related to successful transitional housing identified in the study were:

- A lack of accommodation information included in the prison release planning process;
- No systematic assessment of ex-prisoner needs or demands for the preferred housing areas (there was a demand for housing in the surrounding rural areas);
- A lack of funding for a range of supported housing alternatives;
- A lack of recognition of the links between homelessness and offending;
- Inadequate policies at the local level which recognize the vulnerability of ex-offenders and which have the goal of decreasing recidivism.

Baldry et al. (2002, 2003) have completed the most detailed research on the impact of housing on offenders which addresses the question of the importance of different forms of housing on social reintegration. Social reintegration is considered fundamental to helping offenders stay out of prison.

Their study was conducted with over 200 ex-offenders in two Australian states. An over-representation of female offenders was included. Offenders were interviewed at release and three, six and nine months post release. The study found that a poor social reintegration was significantly associated with recidivism. The housing factors most associated with recidivism were:

- High level transience in accommodation - 41% of the offenders moved two or more times between interview periods. Within this highly transient group almost 60% returned to prison. Some prisoners moved 8-20 times in the nine month study period.
- Homelessness - Being without stable housing was significantly related to recidivism. Homeless rates for participants increased from 18% prior to incarceration to 21.4% post release. Episodic homelessness was experienced by half the participants.

- Type of shared accommodation - Those who were living with their parents, partners or other family members were less likely to return to prison.
- Whether women were living with children - 31% of the participants in the research had dependant children. There was a marked association between the participant living at least some stage of the post release follow-up with their children and the decreased likelihood of returning to jail.
- Debt – Ex-offenders who had debt were more likely to recidivate
- Assessment of social support as helpful - Although many respondents received social service support, simply receiving it was not the main factor in not returning to jail. Instead, defining the support as positive was the main criteria linked to staying out of prison.
- Types of Housing - Three types of housing were most associated with staying out of jail. In order of effectiveness these were:
 1. Family accommodation
 2. Long term public or assisted rental housing
 3. Boarding houses

According to the authors,

Long-term public and rental assisted housing are associated with secure stable housing which is by definition associated with not moving often. The latter is associated with staying out of prison. (Baldry, 2003:15)

- Assessment of the suitability of housing - Self assessment of the suitability of housing was correlated with staying out of prison. In other words,

“ . . . offenders own estimation of the suitability of their accommodation is a very reliable guide to . . . staying out of prison” (Baldry, 2003: 15)

- Contact with specialized relief agencies - Those offenders who had contact with specialist post-release agencies are less likely to return to prison. Those who attended programs were also less likely to recidivate. However, those who attended drug rehabilitation programs were more likely to return to prison.
- Employment - Those who had employment were less likely to return to prison. There was also a significant association between stable housing and employment.
- Self reported increased drug use was correlated with recidivism - Many respondents associated this increased use with a lack of stable housing and support. Increased drug use was correlated with returning to prison.

Recidivism was also associated with several demographic characteristics. Being aboriginal and being female were associated with recidivism.

The lack of housing was a significant factor for women.

Women participants were more likely to return to prison in the nine month study period than their male counterparts . . . Women appear to have had greater problems . . . securing suitable accommodation. (Baldry, 2003:20)

The study notes that the association between housing and recidivism has important implications for short term prisoners. A brief prison term may completely destabilize housing leading to an increased likelihood of the offender returning to prison.

As far as housing is concerned, the policy of imprisonment for short sentences for petty crime seriously destabilizes at least half of those imprisoned and results in re-offending and re-incarceration. (Baldry, 2003:29)

To support social-integration through housing policies and practices the authors recommend:

- Pre-release case planning so offender housing and support needs can be identified;
- The provision of current, accurate post release housing information;
- A multi-agency team approach to housing, health, mental health, alcohol/drug, and employment issues;
- Support to parents and other family members if the prisoner is living at home;
- Training and advocacy of support workers;
- Supporting a strengths-based approach.

Several recommendations apply specifically to types of housing. The report recommends the development of specialized indigenous housing and that a continuum of housing be developed which would include 24 hour low intensive support housing up to independent housing.

The study strongly concludes that,

Stable, socially supported housing was clearly associated with staying out of prison and increased social reintegration. The converse, not having such housing, was associated both in participants' comments and in the quantitative results with slipping back into transitory life style, problematic drug use and being re-arrested and re-incarcerated. (Baldry, 2003:ii)

7.0 SUMMARY

This review of the literature indicates that women offenders, although comprising a small (but growing offender population) have extensive and complex needs related to their personal histories, impacts of incarceration and to the stress of release. Women offenders are typically victims of child and adult violence, have multiple mental/physical health problems and drug/alcohol misuse problems. One of the most complex issues they must deal with is their relationship with their children for whom they are usually the primary care-giver.

Most studies and women themselves define housing as the most important component of post release. However, availability of housing is not seen in isolation. Instead pre-release housing planning and wrap-around services linked to housing are considered priorities.

There are few studies that link housing with successful re-integration of offenders although many studies suggest the importance and value of housing. In one post release housing study Baldry et al. found high levels of transience, homelessness and unsuitable housing (as evaluated by the offenders) all associated with a lack of social re-integration and recidivism.

Many studies also address the life skill gaps among women offenders who turned to criminal behaviour at a young age in order to survive victimization. These life skill needs (which include life management, relationship support and pre-employment training) underscore the importance of linking stable housing with additional personal support and life skill components.

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APPENDIX II

**Women Offenders: Characteristics, Needs and Impacts of
Transitional Housing: Key Respondent Summary**

Women Offenders

Characteristics, Needs and Impacts of Transitional Housing:

Key Respondent Summary Report



April 2004

TABLE OF CONTENTS

Table of Contents	i
Acknowledgements.....	iii
Executive Summary.....	iv
1.0 Introduction and Background to this Report.....	1
2.0 Description and Number of Respondents	2
3.0 Questions Addressed in the Research	3
4.0 Characteristics of Women Offenders	4
4.1 History of Abuse and Trauma	4
4.2 Alcohol and Drug Misuse and Mental Disorders	4
4.3 Relationships with Children	4
4.4 Lack of Life Skills	5
4.5 Health Problems	5
4.6 Stigma and Isolation	6
5.0 Immediate Needs of Women After They Have Left Prison	7
5.1 Pre-Release, Community Re-Integration Planning	7
5.2 Need for Community Advocacy	7
5.3 Need for Formal Identification Papers	7
5.4 Need for Safe and Stable Housing	8
5.5 Needs Related to Food	9
5.6 Income, Support, Employment and Transportation	9
5.7 Health Maintenance.....	9
6.0 Specific Groups of Women With Specialized Needs	10
6.1 Older Women	10
6.2 HIV/AIDS Users.....	10
6.3 Drug Users Especially Those on Methadone Maintenance	10
6.4 Aboriginal Women	11
6.5 Women with Children	11
6.6 Women Released on Statutory Release.....	11
7.0 Housing and Housing-Related Needs of Women Offenders.....	12
7.1 Assistance in Planning for or Explaining Housing Options Prior to Leaving Prison	12
7.2 Income Sufficient to Access Safe and Stable Housing	12
7.3 Education/Information about Tenancy Rights	12
7.4 A Need for Transitional or Staged Housing	12

7.5	Provision of End-Stage Housing	14
7.6	Inclusion of Cultural Elements or Adaptations	14
8.0	Existing Programs and Services	15
9.0	The Significance of Housing and Housing-Related Programs for Women Offenders	16
APPENDIX I	17

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EXECUTIVE SUMMARY

This report presents a summary of interviews held with service providers from the justice and housing sectors to discuss the housing and housing related needs of women offenders after they leave prison. This summary report is part of a larger research project looking at the housing and related needs of women offenders.

Respondents participating in the interviews included staff working in community corrections, in closed custody and within housing services and programs in the Lower Mainland of BC (Vancouver, Burnaby, New Westminister and adjacent areas). Seventeen respondents were involved in the study by telephone interview or in focus group discussions.

The interviews explored common characteristics of women offenders, the needs of specific sub-groups, and their housing and housing related needs. The supported housing that now exists to serve women offenders was identified. Information about these existing resources was compiled from respondent comments and not from an inventory of services and may therefore not be comprehensive.

Key respondents defined seven characteristics as being common to many if not all women offenders. These are:

- An extensive background of abuse and trauma originating from childhood;*
- A high incidence of drug and alcohol misuse;*
- A high incidence of mental health disorders;*
- Being mothers and responsible for children who may have trauma or behavioural problems resulting from the mother's imprisonment;*
- A lack of basic life skills – e.g. in the areas of food preparation, budgeting and time management;*
- A high incidence of acute and chronic health problems;*
- Feelings of isolation due to a lack of stable (non-abusive) relationships and stigmatization from society.*

Respondents identified a number of needs of women offenders prior to and after leaving prison. It was stressed by all respondents that pre-release planning must include exploration of housing options and assistance in finding housing as well as the development of plans to transfer medication to community pharmacies and methods to access income support. All too often women, especially those serving provincial sentences, are sent back to the community with no preparation. The need for access to a community advocate in the transition period to the community was noted.

Women also frequently lack the most basic identity papers when they leave prison. This limits their access to income assistance, health services or accommodation.

The need for basic income support to pay for stable and safe housing and for food were considered priorities, as were ways to support maintenance of health. While the health of women offenders usually improves in prison there is no follow-up when women return to the community. One respondent noted that a BC Coroner's report has concluded that a high number of women released from prison die or require hospitalization shortly after leaving prison.

Older women, Aboriginal women, women with HIV/Aids, drug users on methadone maintenance, women released on statutory release and women with young children were all described as sub-groups with more intense and complex needs.

As well as requiring assistance with pre-release housing planning and information about tenancy rights women offenders also need access to transitional housing. Only one transitional housing (other than parole facilities) program for women offenders (Pathways) exists in the Lower Mainland. Although Pathways was designed to be a mid-stay transitional program many residents have ended up staying for longer periods of time because they are unable to function in independent housing. Co-ed parole facilities are available in some communities but most respondents felt that these were not appropriate due to the problems many women offenders have had in abusive relationships in the past.

Respondents described a number of structural or program elements that they felt should be included in transitional housing support program. These are:

- The provision of a private space for each woman resident with access to kitchen facilities;*
- A safe and secure environment with controlled access and locks on doors;*
- Facilities which are able to accommodate children over two years of age;*
- Programs for women offenders so that they can access life skills, employment and educational upgrading. Employment training needs to be focused on realistic options with adequate income potential;*
- Methods to assist women to handle health problems and medications independently;*
- Spiritual exploration and teaching;*
- A cultural component which includes the involvement of elders and aboriginal ceremonies;*
- Support staff who can mentor and act as effective role models especially where parenting is concerned;*
- Opportunities for residents to participate in volunteer activities which “give back” to the community;*
- A focus on self esteem and the building of confidence;*
- A homelike structure with books and other aspects of the environment that suggest stability and comfort.*

Several respondents indicated that the provision of long-term or end-stage supported housing is also important for women offenders. Women with chronic medical or mental disabilities, older women or women with no capacity to live independently may require supported housing for the rest of their lives.

Respondents felt that the provision of housing and housing related services was a priority if recidivism was to be prevented. It was also noted that the children of women offenders are at high risk of becoming involved in criminal activity. Providing services to women offenders so that they can function better as parents may yield positive long-term results for society over several generations.

1.0 INTRODUCTION AND BACKGROUND TO THIS REPORT

This report presents a summary of interviews held with service providers in the Lower Mainland of BC to discuss the housing and related needs of women offenders after they leave prison.

This *Key Respondent Summary Report* is part of a larger research project that is examining the housing and related needs of women offenders. The first part of this research project, completed in December 2003, (Appendix I) consisted of a literature review which summarized the international literature describing the characteristics of women offenders and their needs for housing and housing relating services.

Another component of the research project consisted of a comparison of the outcomes of women offenders who have had no transitional housing with women who have stayed at Pathways, a transitional housing resource. The results of this study are presented in the main part of this document.

This document summarizes the comments of respondents working in the housing, service and criminal justice sectors. Respondents described the characteristics of women offenders, their housing and housing related needs and priorities and the programs currently available in the Lower Mainland.

2.0 DESCRIPTION AND NUMBER OF RESPONDENTS

Respondents who participated in the key respondent survey included staff working in community corrections, at closed custody facilities and at housing programs and services in the Lower Mainland. All of those involved in this survey had direct experience and expertise working with women offenders before or after their release from prison.

Interviews with respondents were done face to face or by focus group. Two focus groups were held with members of the *Female Offender Focus Group*. This group, which meets monthly, is made up of community corrections and other justice staff who have a particular interest in and concern with women offenders. Because of its mandate and scope of membership, it was identified as an important source of information for this survey. Altogether the views of 17 respondents were included in this study. A respondent, who coordinates a service oriented to Aboriginal women offenders, was also included in order to explore the housing related needs of Aboriginal women in more detail.

3.0 QUESTIONS ADDRESSED IN THE RESEARCH

The key respondent interviews and focus groups explored the following broad questions:

- What are the major characteristics of women offenders? What major health, mental health, substance use, abuse backgrounds, employment, housing or parenting characteristics describe this group?
- Are there specific sub-groups of women who have specific characteristics and needs? Who are these groups and what are their needs?
- What are the immediate needs of women after they leave prison?
- What specific types of housing or housing related needs do women have after they leave prison? What are the characteristics of this housing?
- How important is stable and supported housing to women offenders?
- What types of housing and housing related services currently exist in the Lower Mainland of BC to address the needs of women offenders?

4.0 CHARACTERISTICS OF WOMEN OFFENDERS

Respondents described a number of characteristics that they felt applied to many, if not most women offenders. Six characteristics were described.

4.1 History of Abuse and Trauma

Respondents indicated that the vast majority of women offenders (over 85%) have extensive abuse and trauma histories. Abuse includes sexual, physical and emotional abuse. Sexual abuse, starting from a young age was described as being very frequent among Aboriginal women offenders.

Abuse beginning in childhood continues throughout life and dramatically affects self-esteem and sense of self. As a consequence, in adulthood, women offenders may find it difficult to set personal boundaries. They frequently become victimized or re-victimized by their partners and others.

Many women offenders are also abused or stigmatized in the prison environment or in society. Stigmatization is sometimes exacerbated by their appearance or evidence of chronic health problems. As a consequence of their long-term abuse some women offenders become abusers of others.

4.2 Alcohol and Drug Misuse and Mental Disorders

The majority of women offenders were described as having serious problems with drugs and/or alcohol. Many women are on or require methadone maintenance. A significant proportion of women also have mental health issues, most commonly, depression and anxiety although some may have more serious disorders (e.g. bipolar).

4.3 Relationships with Children

Family ties between women offenders are usually very fragile. Most women offenders have children. But relationships with children have often been fractured because of the absenteeism of the parent and because of the inability of the prison structure to accommodate children or to promote child visits in a normalized environment

Some women are sole parents whose children stay with family members while they are in prison. Other mothers, without custody, still try to keep in touch with their children. Respondents said there were very few women with children who did not have some form of on-going contact with them. Respondents described seeing women offenders who were trying to parent their children through telephone calls because they rarely saw them face-to-face.

It was noted by respondents that when women are sentenced to prison their children are often sentenced along with them. A child's right of access to his/her parents is not recognized by the justice system. Children frequently develop behavioural issues as a result of the abandonment or trauma they experience. Drug use, truancy and adjustment problems that arise in children must be dealt with by the mother when she leaves prison and has very few resources or skills to do so.

4.4 Lack of Life Skills

Respondents noted that most women offenders lack the basic life skills that would allow them to function effectively in society. Knowing how to shop, use transit or open a bank account were all problematic issues for women offenders. One respondent mentioned that many of her clients did not realize that they had to pay for Sky Train (Vancouver transit) because the tickets aren't collected in a standard way. Women can be accused of illegal activities simply because they do not understand how systems work..

A lack of employment skills and inability to find balance in life were also mentioned as skill deficits. Getting up in the morning on time, planning the day and finding ways to experience real leisure (not drug or alcohol related) were noted as important issues for women offenders. The lack of employment skills and employment history may be inter-generational. Women offenders typically lack successful models and mentors who have had sustained employment.

4.5 Health Problems

In addition to mental health issues most women offenders have both acute and chronic health problems.

Common health problems are related to drug detoxification, blood pressure, HIV/AIDS, reproductive health (STD), hepatitis, and chronic diseases. Aboriginal women offenders have a high level of Foetal Alcohol Spectrum Disorder and ADD.

Dental problems were mentioned as a serious problem for women offenders. Most women offenders have missing teeth due to the minimal dental care provided in prison or through social assistance. It was noted, for example, that the budget for dental care for a person on social assistance was \$200.00 every two years. Most dental care for women in the community is provided by the emergency department and consists of tooth extraction. A lack of teeth makes eating a healthy diet difficult and also contributes to the poor appearance and stigmatization associated with women offenders.

Although health generally improves in prison chronic health problems re-emerge after discharge when women have few or no resources to pay for treatment. One respondent noted that a recent BC Coroner's reported indicated that there is an alarming rate of death or hospitalization of women who have recently been released from prison.

In prison women have access to birth control and medication for chronic conditions but usually do not have the resources to continue these medications after being released. In addition there are often problems transferring orders for medication or methadone to outside pharmacies. Women on methadone maintenance may begin their post release period by going into rapid (and unsupported) detoxification. These structural problems also leave women with mental disorders who are taking medications at increased risk.

Several respondents mentioned food issues as being significant for many women offenders. Women offenders have poor self-care habits. They frequently lack basic shopping or food preparation skills. Many do not have access to their own kitchens in which to prepare meals. Many woman offenders can't afford a healthy diet and a significant number have eating disorders.

4.6 Stigma and Isolation

Women offenders were described as being very isolated with few supportive and many fractured relationships. Friendships are drawn from other offenders. Male partners tend to be abusive and engaged in criminal or drug-related activities. Women offenders are also stigmatized by society at large, often because of their appearance,

A woman offender may have few or no teeth, is often wearing old second-hand clothes, may have multiple piercings and sometimes track marks and have obvious signs of poor health (such as skin abscesses). People tend to avoid them.

Several respondents said that women offenders seem to arouse a specific kind of negative reaction different from that shown to male offenders. Women offenders are seen as “fallen women,” because they do not meet social norms and expectations. As one respondent noted,

Good women are seen as being in relationships and are caring for others.

Anyone who is in contact with women offenders (including some Corrections staff) may unconsciously judge women offenders in this critical way.

5.0 IMMEDIATE NEEDS OF WOMEN AFTER THEY HAVE LEFT PRISON

Key respondents identified seven major immediate needs of women offenders before and after leaving prison. Stable, affordable, private and safe housing is a significant need and is described below. Housing is also discussed in more detail in Section 7.0

5.1 Pre-Release, Community Re-Integration Planning

There was a consensus among all the respondents that women offenders require concrete pre-release planning far *before* leaving prison and returning to the community. In most cases, especially for short sentence provincial offenders, in-prison pre-release planning is inadequate or non-existent. It should be noted that the average provincial in-prison stay is approximately 60 days. In these cases effective pre-release planning should begin at the moment an offender enters prison.

It was the view of respondents that, to be effective, pre-release planning needs to include the following components:

- Methods and procedures for accessing social assistance or other types of income support immediately upon release;
- Completion of intent to rent forms;
- Information about and the exploration of housing options and the availability of housing in the community (e.g. access to housing inventories);
- Development of employment or employment training plans or plans for continuing education. This includes plans for completion of Grade 12 certification;
- Transference of methadone or medication prescriptions to outside pharmacies;
- Issuing of identification papers so that women can access the health, income or other services they require.

Respondents noted that most woman lack the knowledge, skills and confidence to access and utilize social services. They need to have clear (and written) information about services and how to use them before they leave prison (see 5.2)

5.2 Need for Community Advocacy

Most women offenders do not know how to access services and resources or how to be assertive when their needs are not met. Access to a community advocacy service that could offer advice or provide representation when needed is required. A model of community advocacy used in the past for those with mental disorders was described as a useful form of support.

5.3 Need for Formal Identification Papers

According to respondents one of the most significant problems for women offenders upon leaving prison is not having any formal identity papers. Most women lack even the most basic ID such as a birth certificate, driver's license, or health card. Without this identification women may not be able to register or receive other critical services.

It is also common for women to lose their identification papers. A central depository for copies of basic documents is essential because often women have no fixed address. A lack of proper identification also further stigmatizes women offenders and limits their ability to be self-reliant.

5.4 Need for Safe and Stable Housing

Shelter and food were described as the most basic needs of women when they leave prison. Safe, affordable and secure housing is not only an essential human need but can help women establish new relationships. Independent (non-communal) housing can also give women a sense of independence that they have not had in prison.

It was noted that many women after they leave prison end up “couch surfing” -moving from friend to friend sleeping on couches, without accommodation of their own. This type of accommodation is unstable and may be dependent on a woman engaging in criminal activities or exchanging sex to maintain it.

Most respondents stressed that it was important that housing for women offenders be available in areas away from past criminal activities. Although single room occupancy hotel rooms are available in the Downtown Eastside moving back to the area means re-establishing old criminal and abusive relationships. Finding affordable housing outside of the DTES, however, is difficult. In most cases women lack the income to pay for decent housing in other communities. One notable exception is a small community outside of Vancouver that offers some form of subsidized housing.

Social housing is also rarely an option for women offenders. Currently there is a two-year wait list for some types of social housing in the Lower Mainland. Women offenders who are using alcohol or drugs or are on methadone maintenance are not eligible for social housing.

It was emphasized that women offenders have distinct housing needs related to gender. Women have strong needs for privacy. Independent housing provides the potential for self-care and comfort and the building of sustainable non-criminal relationships. It was stressed that women need “their own space” no matter how small this space is so that they can feel like functioning and independent members of society.

For women offenders peer relationships tend often tend to be negative. Women need to be in control of their own environment.

In the past women have also had negative relationships around food and work in the kitchen. Many women have experienced their own food being stolen in the past. The need for a private food preparation space was considered essential.

A specific need for post-prison transitional housing was emphasized by respondents. It was noted that leaving prison is a huge shock for most women. Offenders go from a prison environment where everything is provided to an environment where they have nothing (see Section 7.0).

Without transitional housing women will go back to what they have previously done before even if they have done prison time because of it and know that it is not healthy. They will simply go back to their comfort zone.

5.5 Needs Related to Food

Food is a critical need for survival. Most respondents said that food had a special meaning for women offenders. Many women have dysfunctional relationships with food; lack shopping or food preparation skills and a substantial number have eating disorders. Food is also tied to addictions. Women leaving prison go from an environment where there is too much food to one where there is not enough or no consistent access to food. Access to food becomes symbolic of safety, comfort and stability.

5.6 Income, Support, Employment and Transportation

Most women offenders lack a consistent income or any means of support after they have left prison. Pre-release planning is needed so that they can access social assistance as soon as they are discharged.

Current BC welfare policy stipulates that people are ineligible for social assistance for 3 weeks after they apply in order to meet job search provisions. Although this rule has been waived in the Lower Mainland for women just released from prison it is not always applied to those who return to smaller communities.

Women offenders also lack transportation or the means to get transportation to arrange for the things they need such as housing, welfare, food and assistance with childcare. In addition, transportation is costly and women offenders often do not know how to use existing transportation systems.

5.7 Health Maintenance

Most women leave prison with chronic or life-threatening health problems such as STDs, HIV/AIDS, hepatitis, or dental problems. These problems may have improved while women are in prison because of access to health care and regular prescription medication. It was noted that structural problems related to release planning often make it difficult for women to obtain the medications they need after they are released. For some women this places them seriously at risk and, at the very least, compromises their ability to function. Access to free contraception is also critical. Many of the partners of women refuse to wear condoms. The prevention of sexually transmitted diseases is left solely up to women.

6.0 SPECIFIC GROUPS OF WOMEN WITH SPECIALIZED NEEDS

Respondents identified six groups of women with specialized needs above and beyond those of the general population of women offenders. These groups are:

- Older women;
- Women with HIV/AIDS;
- Women on methadone maintenance;
- Women with dual diagnoses;
- Aboriginal women;
- Women released on Statutory Release.

6.1 Older Women

Older women (65+) are a growing proportion of the women offender population. Respondents described contact with a women offender as old as ninety in the prison system. Many older women offenders are long-term substance abusers. These women have very low self-esteem and confidence and have usually lived at a minimal standard of living for many years. They typically have serious chronic health problems and disabilities related to aging. These disabilities limit their ability to find and use resources in the community.

Respondents indicated that it was unlikely that most older offenders would be able to live independently after leaving prison. Most would require some form of supported housing, adapted to their disabilities, for the remainder of their lives.

6.2 HIV/AIDS Users

Women offenders typically have many long-term chronic health problems. A significant number also have HIV/AIDS. Respondents noted that the overall *burden* of health problems for women with HIV/AIDS was overwhelming. It was difficult for women with HIV/AIDS to obtain and stabilize on medication. This group's needs were often unmet and they were described as "falling between the cracks" in terms of prison or post prison programs.

6.3 Drug Users Especially Those on Methadone Maintenance

Most women who are drug/alcohol users are ineligible for social housing. Women who are on methadone maintenance are also ineligible for other forms of housing, including recovery housing, despite the fact that they are using methadone for treatment purposes.

In general, respondents felt that women on methadone maintenance are not well supported. They often cannot afford dispensing fees. There are only a small number of outlets that dispense methadone. The limited number of outlets means women need the money, time and transportation to access methadone. Taking time to access methadone may limit the time that could be spent on upgrading, employment training

or in employment. Women who live in outlying areas may not have access to methadone or may find it impossible to get permission to carry the drug.

6.4 Aboriginal Women

Aboriginal women are over-represented in the criminal justice system. It was noted that aboriginal women have experienced high rates of violence, particularly sexual violence, in their backgrounds. They are doubly stigmatized because of their offender status and because they are Aboriginal.

Aboriginal women returning to their reserves have access to few services that are appropriate to them. Off reserve programs typically have little or no cultural content or relevance.

6.5 Women with Children

Women offenders with young children are not supported in their parenting roles. When women are in prison visiting with children is often problematic. Many women are kept in secure provincial facilities with no child oriented visiting areas. Few semi-custodial post prison programs (e.g., halfway houses) can accommodate children except for short periods. This was particularly the case where children are over two years of age. It was noted by respondents that not only do women have significant needs for support in terms of parenting but also that their children also have significant needs. Having a mother in jail is traumatic; children have no way of understanding of the situation and there are few ways of maintaining a normal relationship.

One respondent said that children of offenders are 6 to 7 times more likely to become involved in criminal activities themselves. It is projected that these children will *replace* their mothers in the prison system when they reach adulthood. From a cost-benefit point of view society needs to support existing parent-child relationships in order to avoid inter-generational involvement with the criminal justice system.

The children of women offenders are often taken into custody by the Ministry of Children & Family Development. There is a lack of support to enable these mothers to parent effectively or to handle the transition if children came back into parental care.

6.6 Women Released on Statutory Release

A certain percentage of women offenders will be released from prison without parole or access to halfway house facilities. Because these women are denied parole it is likely that most have serious, unresolved problems and/or needs. These women leave prison with limited help to reintegrate.

Women released from provincial institutions are primarily short stay prisoners. They typically receive little formal assistance that would assist them in reintegrating into the community and avoiding recidivism.

All that women get is a bus ticket to go back to their communities.

One respondent noted that of 30,000 women offenders in provincial and federal institutions, only about 500 receive any formal type of assistance (such as half way or transitional housing) after they leave prison.

7.0 HOUSING AND HOUSING-RELATED NEEDS OF WOMEN OFFENDERS

Respondents identified a number of housing and housing related needs of women offenders that are not currently being met. This includes needs for programs and services prior to being released from prison.

7.1 Assistance in Planning for or Explaining Housing Options Prior to Leaving Prison

Respondents stressed that planning for post-release housing must take place before women leave prison and be seen as an essential component of pre-release planning. In provincial institutions, most of which typically involve short sentences, planning for housing should take place at the point of admission to prison. Planning would include access to information and resources describing available housing options, including private housing; apartments or supported housing (BC Housing); and information and assistance on how to access or to be waitlisted for housing. A roster of housing resources should also include facilities that accommodate children. Intent to rent forms should be accessed and assistance provided on how and when these should be completed. It was recommended that this housing information be made available to women several months before they leave prison.

7.2 Income Sufficient to Access Safe and Stable Housing

The majority of women offenders have multiple health problems, lack skills, have limited employment capacities and histories and few supportive relationships. Most have limited income support and are reliant on social assistance. Without access to subsidized housing, few women can afford clean, safe and stable accommodation away from the Downtown Eastside (DTES). Even within the DTES minimal, sub-standard housing will require a large proportion of a woman's social assistance benefits. Returning to live in the DTES also means returning to drug/alcohol use and having contact with others who are involved in criminal activities.

7.3 Education/Information about Tenancy Rights

Women offenders require information on tenancy rights. The BC Landlord Tenancy Act has recently been changed and without knowledge of current laws or regulations, women offenders are often taken advantage of. They may be asked for excessive damage deposits or be denied the return of deposits without recourse. Information on tenant rights should be provided in both the pre and post release stage.

7.4 A Need for Transitional or Staged Housing

Women offenders require staged housing with built in supports in order to reintegrate successfully into the community. Staged or transitional housing can enable women to gradually take on responsibilities and make adjustments after moving from the controlled environment of prison to the community.

Respondents stated that women offenders should be seen as a group with unique needs who require safety and stability in order to function independently. If women are not supported during this transition period it is highly likely they will return to criminal activities and to prison.

A number of important structural elements of transitional housing were identified. According to the respondents transitional housing should include:

- Independent private space for each woman so that women can experience independent, rather than communal living. Most women offenders have lived with others in prison and on the street and have experienced little privacy;
- Access to kitchens in order to allow for independent preparation of food. Food and food preparation issues were described as very important to women. Food is an aspect of self-care but many women offenders do not have basic food preparation skills and a significant number have eating disorders;
- Safe & secure environment – most of the housing available to and used by offenders (e.g., single room occupancy hotel rooms) are unsafe. Within these facilities, women are often victimized physically and their possessions are frequently stolen. A transitional housing facility must ensure safety through effective security arrangements, entry-way screening and locks on all doors;
- Facilities to accommodate children (especially children over 2 who are more active). Approximately 65% of female offenders have children and most are in contact with them or have some kind of parenting role.

Although programmatic elements of transitional housing were not addressed in detail by respondents some components were identified:

- The opportunity to access education, particularly employment training and upgrading;
- Accessibility to employment training in sustainable employment sectors. It was noted that some employment programs for women offenders exist in sectors where set-up resources are required or where wages are minimal (e.g., dog grooming). Other industries (e.g., horticulture) may be more appropriate;
- A life skills training component – how to shop, budget;
- Ways to assist women so that they can handle medications or health problems independently;
- A spiritual exploration and teaching component;
- Supportive staff who can mentor and act as effective role models, particularly where parenting is concerned;
- A homelike structure. One respondent emphasized the importance of books as a symbol of home and home making for women. Having access to books in the home appeared to be highly important to this group of women. Books also suggest permanency of housing;
- Opportunities for volunteer activities so that women can gain skills and explore communication with others. Some women offenders are not employable. For these women, volunteer opportunities may provide a sense of worth;
- A focus on building feelings of self-esteem and accomplishment. It was noted by some respondents that emphasizing what women can and have accomplished is more important than setting up unrealistic goals that cannot be achieved.

Women shouldn't be written off because they can't work outside of raising children. Some people have just enough skills to support families. Raising children well is an important accomplishment and should be recognized as such.

7.5 Provision of End-Stage Housing

Although staged or transitional housing is important for many women offenders, respondents noted that some women will never be able to function in independent housing but will require supported programs with attached housing for the rest of their lives. These are women with serious and chronic health problems, concurrent disorders, and disabilities with limited skills.

7.6 Inclusion of Cultural Elements or Adaptations

Aboriginal women need a focus on, and support for, healing. It is important for aboriginal women to have regular contact with elders who have healed. Access to aboriginal healing ceremonies such as smudges and sweats is also important and should be included in all housing programs and services.

8.0 EXISTING PROGRAMS AND SERVICES

According to respondents included in this survey, few housing services in the Lower Mainland are specifically oriented to women offenders. Pathways (transitional housing) and Columbia House (parole facility) were identified as the two main post-incarceration housing resources. Both have limited access for children over two years of age.

Although Pathways was originally conceptualized as transitional housing, a substantial number of residents have stayed there on a longer-term basis. Because of chronic health or related problems and because of the lack of long term supported housing these women have not been able to move to independent housing.

Transition Houses for women who have suffered from domestic violence may provide housing for limited periods of time for women offenders. They are usually not available to women with mental health, alcohol or drug problems. Recovery Houses that have various types of programs are additional option. They are considered to be helpful for women with limited problems but will not accept women on methadone maintenance.

Some larger co-ed halfway houses exist which are open to both men and women. Many respondents felt that these were not good resources for women offenders who often have had problems with male/female relationships in the past and who have been victimized by men. Respondents noted that women's relationships with men need to be normalized but this cannot be done in a parole facility. Co-ed housing programs are also unlikely to include women-oriented programs.

Respondents listed other services that are helpful to women offenders in the community but which do not provide accommodation. These include Friendship Centres, Job Start, FryWorks, sexual assault, relapse prevention and drug treatment programs. A complete inventory of all of these services was beyond the scope of this project.

9.0 THE SIGNIFICANCE OF HOUSING AND HOUSING-RELATED PROGRAMS FOR WOMEN OFFENDERS

Respondents identified safe, secure, affordable and program supported housing as critical to women offenders. Without stable and affordable housing, it is likely women will return to sub-standard, non-permanent housing (including shelters) in the Downtown Eastside and to criminal or exploitive relationships.

Women leaving prison are at risk and according to one respondent, face an elevated likelihood of death or hospital admission immediately post release. It was the opinion of some respondents that the provision of appropriate transitional housing to women offenders saves lives as well as decreases recidivism.

If things are going to change women must have transitional housing as soon as they leave prison. Some of the programs in prison are great but they are quickly forgotten as soon as women leave prison. Being in transitional housing also helps women be aware of, and protect, their boundaries.

APPENDIX I

KEY RESPONDENT SURVEY

Participants

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Kathy Solkowski, VCRT

Selma Swaab, Abbotsford Regional Community Office

Shirley Chow, Tri-Cities Parole Office

Vicki Green, Surrey South Parole Office

Monica Matsi, Tri-Cities Parole Office

Stephanie Lewis, Maple Ridge Parole Office

Sheila Veller, Delta West Surrey CC

Barb Fenton, New West CC

Brenda Tole, ACCW (Custody Center for Women)

APPENDIX III

Information and Consent Forms



100 Viaduct Ave W
Victoria, BC V9E 1J3
Tel: (250) 479-2962
Fax: (250) 479-2961
Email: focus@coastnet.com

INFORMED CONSENT
TRANSITIONAL HOUSING STUDY

I have received a copy of the description of the study and I understand it in full. I have been assured that Janet Currie, Director of Focus Consultants, will respond to any questions or concerns I have about the study at any time.

I know that I can refuse to answer any questions and may withdraw my consent to be involved in the study at any time. If I withdraw my consent, I understand that any data already obtained will be destroyed.

I understand that all the information I provide in the interviews will be private and confidential and that I will never be identified. I have been fully informed of the nature of the study and any risks that may be involved in the project as stated above.

I hereby agree to participate in the Transitional Housing Study.

(Signature of Participant)

(Date)

(Printed Name of Participant)

(Date)

(Signature of Researcher)

(Date)



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Dear Study Participant:

The Elizabeth Fry Society of Greater Vancouver has given us your name as a person they feel would be a very helpful participant in a study looking at the needs of women who have been in prison. *The purpose of the study is to find out what kinds of needs women have when they leave prison and whether transitional programs like Pathways can be helpful.*

How will the study be done and what would my participation be?

Being a participant in the study will involve you being interviewed twice over the next year. The interviews will each be 1-2 hours long and you will be paid a small honorarium of \$10.00 for each interview.

Either Peggie-Ann Kirk or Janet Currie will meet you at a time and place convenient to you for the interview. If you prefer, the interview can be held at the Elizabeth Fry office in New Westminster. If you live out of town we will do the interview by telephone. We will pay for the calls.

The interviews will ask you to talk about your life situation before and after you were incarcerated and what your situation is now. You will be asked questions about where you are living, your health, family concerns and other issues.

Why the study and your participation is important!

Your participation in the study is very important. There are no studies done in Canada that look at the needs of women who have been in prison or the value of transitional housing. Your participation in the study will help programs like Elizabeth Fry and government develop services that meet the needs of women like yourself. The Elizabeth Fry Society of Greater Vancouver is co-sponsoring this study and is very interested in your opinions.

Who is doing the study?

The study is being done by Focus Consultants, a private research company in Victoria that has completed many studies looking at the needs of women and families. Focus Consultants is being funded by the federal government (Canada Mortgage & Housing) to do the study. Elizabeth Fry is a co-sponsor of the study. However, Focus Consultants has no connection with Elizabeth Fry Society and is not a part of any government program.

Where will the results of the study go?

The results of the study will be put together in a final report which will then be sent to Central Mortgage and Housing (CMHC). CMHC provides summaries of its reports to community groups and government and places copies of its reports in its library which anyone can access. Elizabeth Fry Society will also receive copies of the report that you can look at.

Are there any risks to my participation?

There are no major risks. For some people some questions may cause some embarrassment or other uncomfortable feelings. Please remember that you do not have to answer any questions you do not want to. All your answers will be kept confidential (private) and will be known only to the two research staff. We will arrange an interview place that is private and convenient for you.

For the final report your answers will be combined with all the other answers given by others who have been interviewed so that nobody will be identified.

No provincial government program or agency is involved in the study and so your participation will not affect any payments (such as welfare or maintenance) that you now receive. No government program will be told that you are involved in this research.

Do I have to participate?

Participation in the study is voluntary. You can also choose to participate in the study but not to answer specific questions.

During the study, if you have any questions or concerns we will be available to discuss them at any time.

Janet Currie
Director
Focus Consultants
Victoria
Phone: 250-479-2962
Focus@coastnet.com

Peggie Ann Kirk
Researcher

Phone: 604-269-3626
Vancouver
E-mail: pakirk@telus.net

Thank you for agreeing to be part of this research.

Janet Currie
Director
Focus Consultants

Visit our home page at www.cmhc.ca