



SOCIAL WORK
CONFERENCE

Women & the Criminal Justice system

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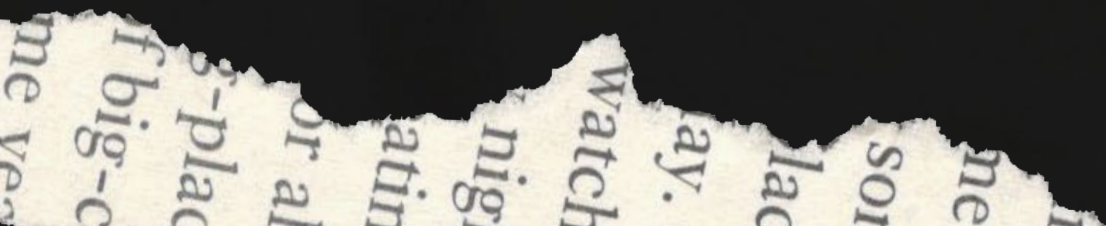
speaker introductions



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Today's Agenda

- Describe the state of incarceration for women.
- Identify specific concerns related to women who are incarcerated.
- Outline strategies for improving care that align with the values of social work.



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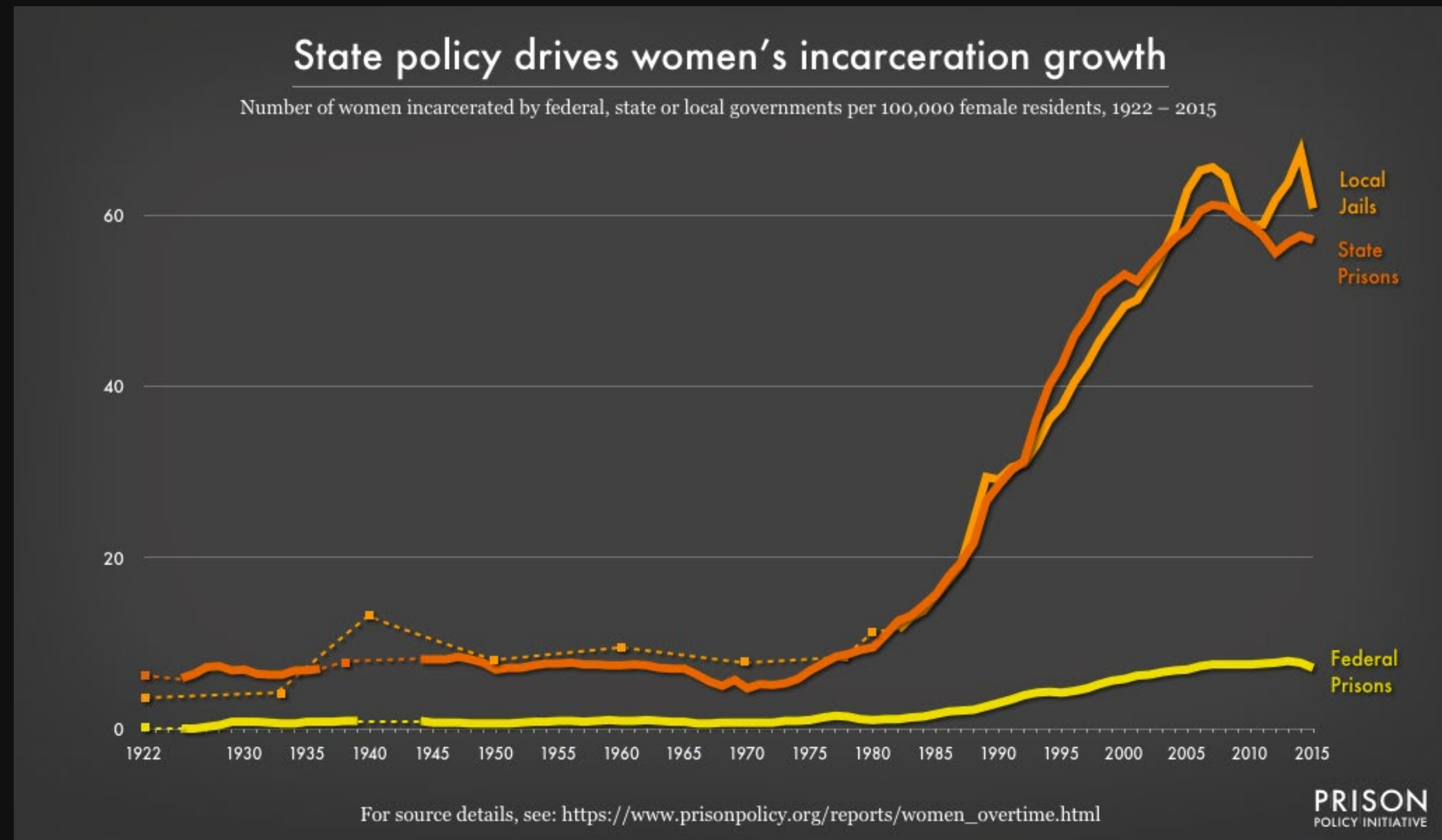
incarceration of women

HELPFUL DEFINITIONS

- **Jail** - short term detention for people awaiting pre-trial, sentencing, or who have committed minor crimes (fewer security measures; ran by local government)
- **Prison** - long term incarceration following conviction/ sentencing (security measures vary greatly; ran by state or federal government or private owned)
- **Community Supervision** - supervision of individuals who have been convicted of crimes in the community (i.e., probation; parole)
- **Incarcerated** - to be confined in jail or prison
- **Justice Involved** - someone who interacts with the criminal justice system (e.g., incarcerated, community supervision)

HOW MANY WOMEN ARE INCARCERATED IN THE U.S.?

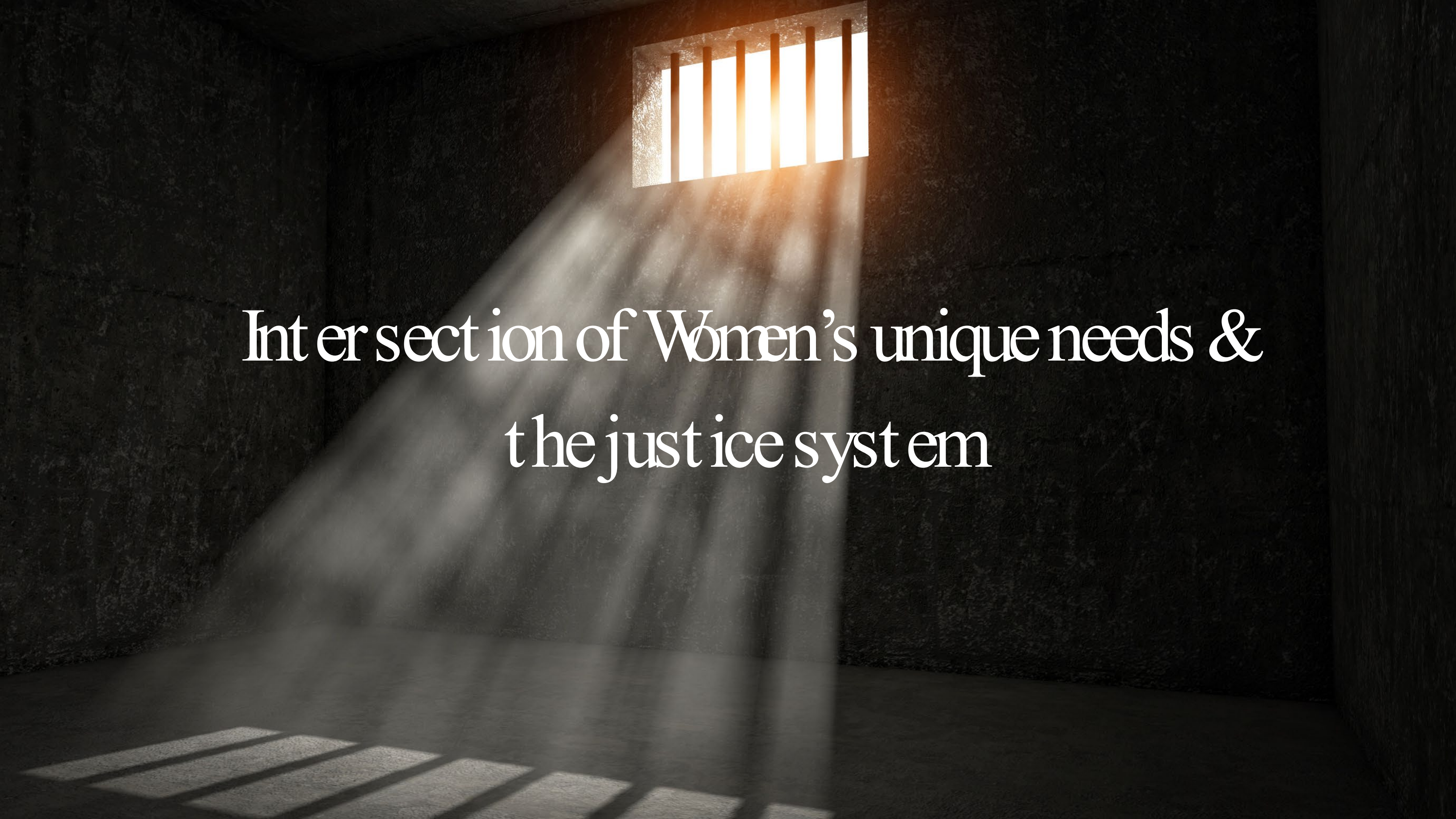
- Approximately 173,000
- Incarceration rates have grown at twice the rate of men
- Disproportionately located in jails
- ~60% being held have not been convicted
- Harder time affording money for bail than men
- More likely once convicted to serve a sentence in jail
- Due to type of crime being most likely property or Drug related



CHARACTERISTICS OF INCARCERATED WOMEN

- Total adult female population of the U.S. as of 7/1/22:
 - 59% white, 13% Black, 19% Hispanic, 0.7% American Indian or Alaska Native, 6% Asian, and 3% other (2.4% were two or more races and 0.2% were Native Hawaiian or Pacific Islander)
- More likely than men to be incarcerated for a drug or property offense
 - 25% of women in prison have been convicted of a drug offense compared to 12% of men in prison
 - 19% of incarcerated women have been convicted of a property crime compared to 13% among incarcerated men
 - The proportion of imprisoned women convicted of a drug offense has increased from 12% in 1986 to 25% in 2020. (Carson, 2022)
- Prior to incarceration likely to be young, earn low wages, be under- or unemployed, and have restricted educational opportunities (Heimer et al., 2023)

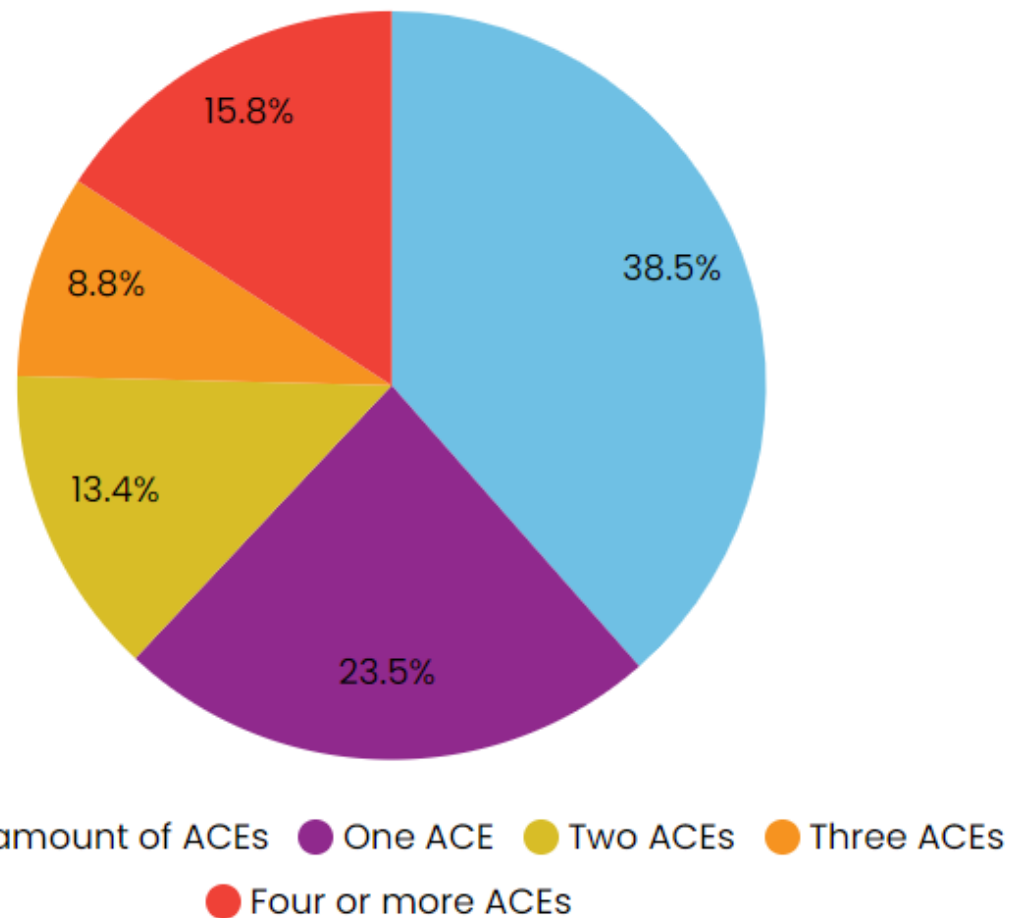


A dark, textured prison cell with a barred window at the top. Bright light streams through the window, creating a strong beam of light that illuminates the floor and walls. The shadows of the bars are cast onto the floor in the foreground.

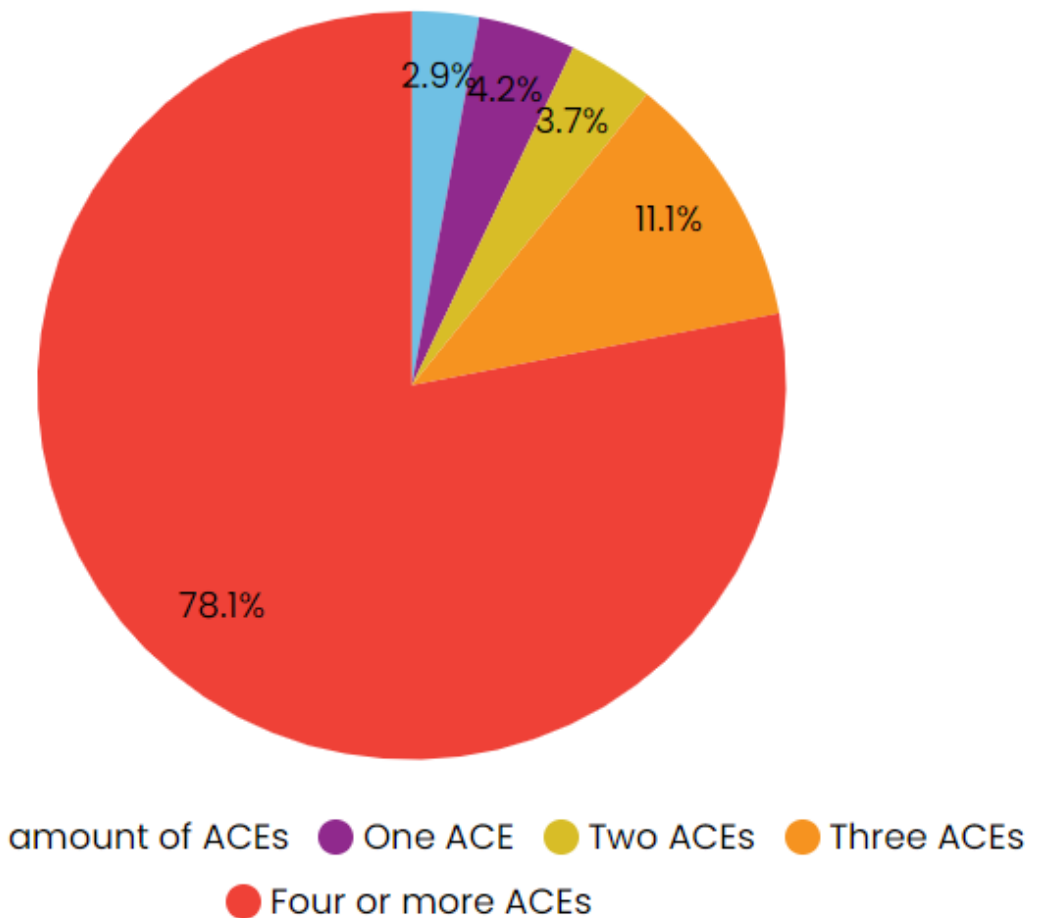
Intersection of Women's unique needs &
the justice system

ADVERSE CHILDHOOD EXPERIENCES AND INCARCERATION

64% of the U.S. population has at least one ACE.



98% of the prison population has at least one ACE.

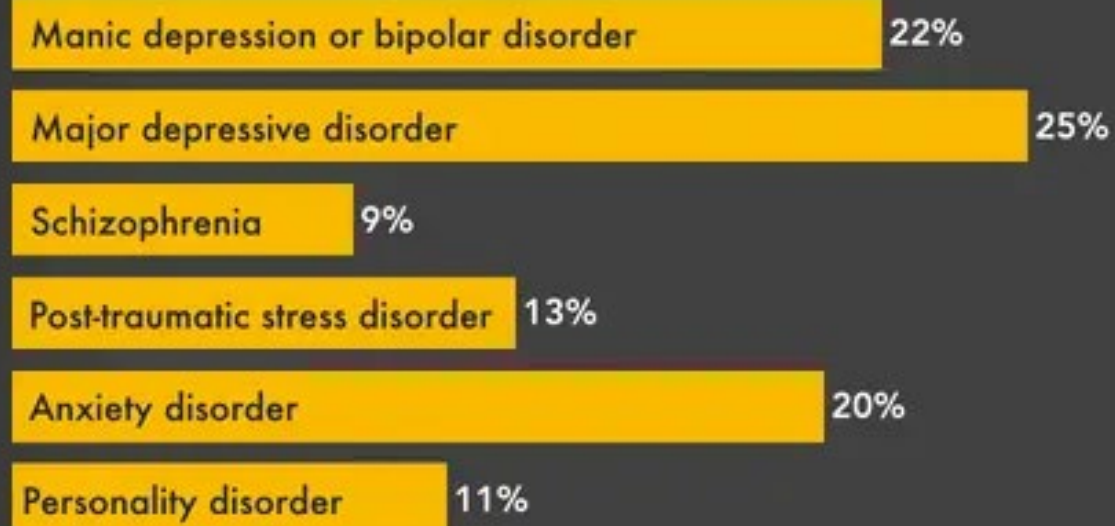


Mental Health of women in prison

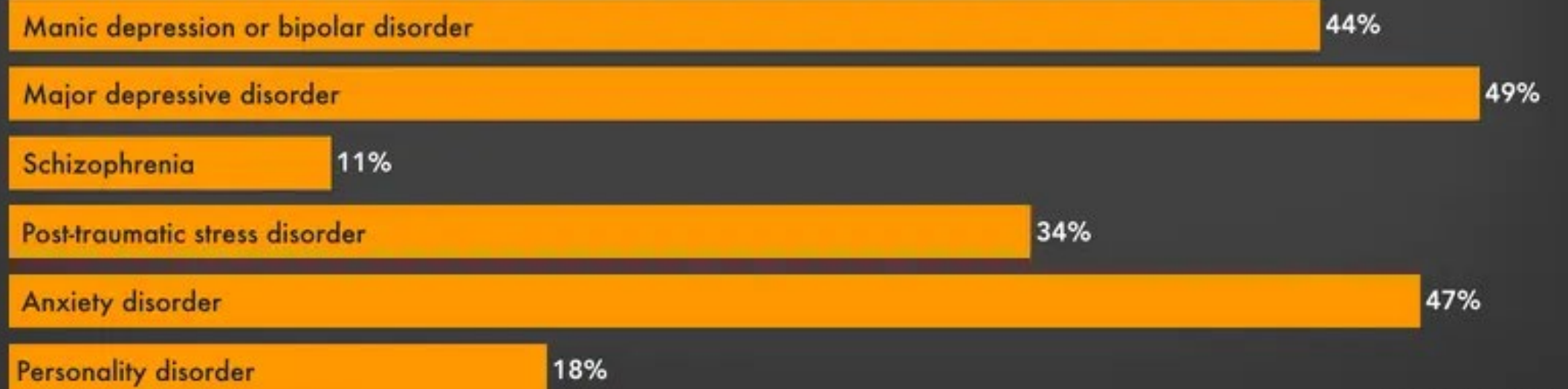
Women in state prisons report being diagnosed with mental health problems at much higher rates than men

Percentage of people in state prisons with a history of mental health problems, by self-reported gender and specific diagnoses

MEN IN STATE PRISONS WHO WERE EVER DIAGNOSED WITH...



WOMEN IN STATE PRISONS WHO WERE EVER DIAGNOSED WITH...



Source: Bureau of Justice Statistics' *Survey of Prison Inmates 2016* data analyzed by the Prison Policy Initiative

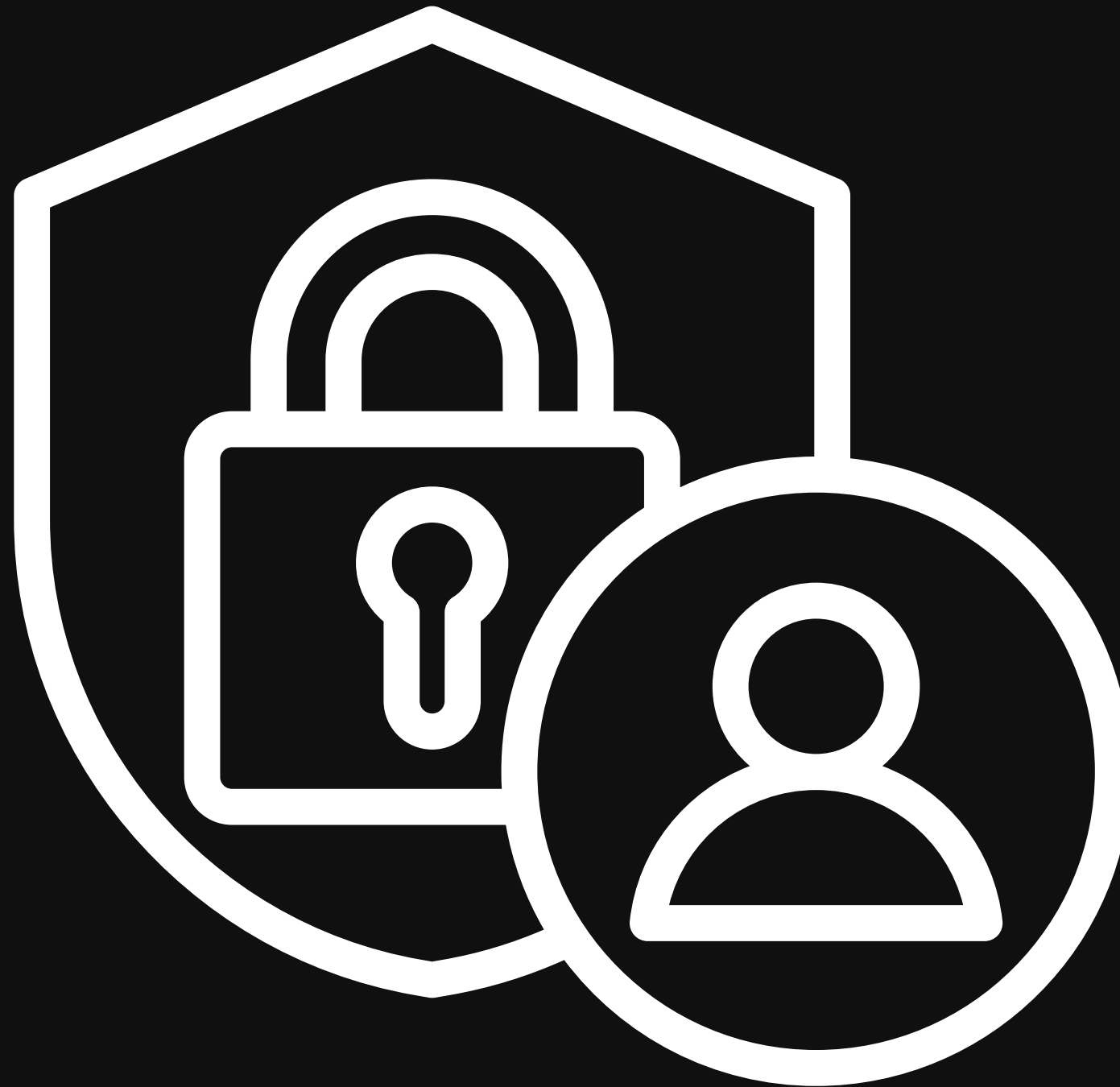
Access to Care

People who are incarcerated with history of mental illness who do not receive mental health treatment



63%

State/ Federal Prisons



45%

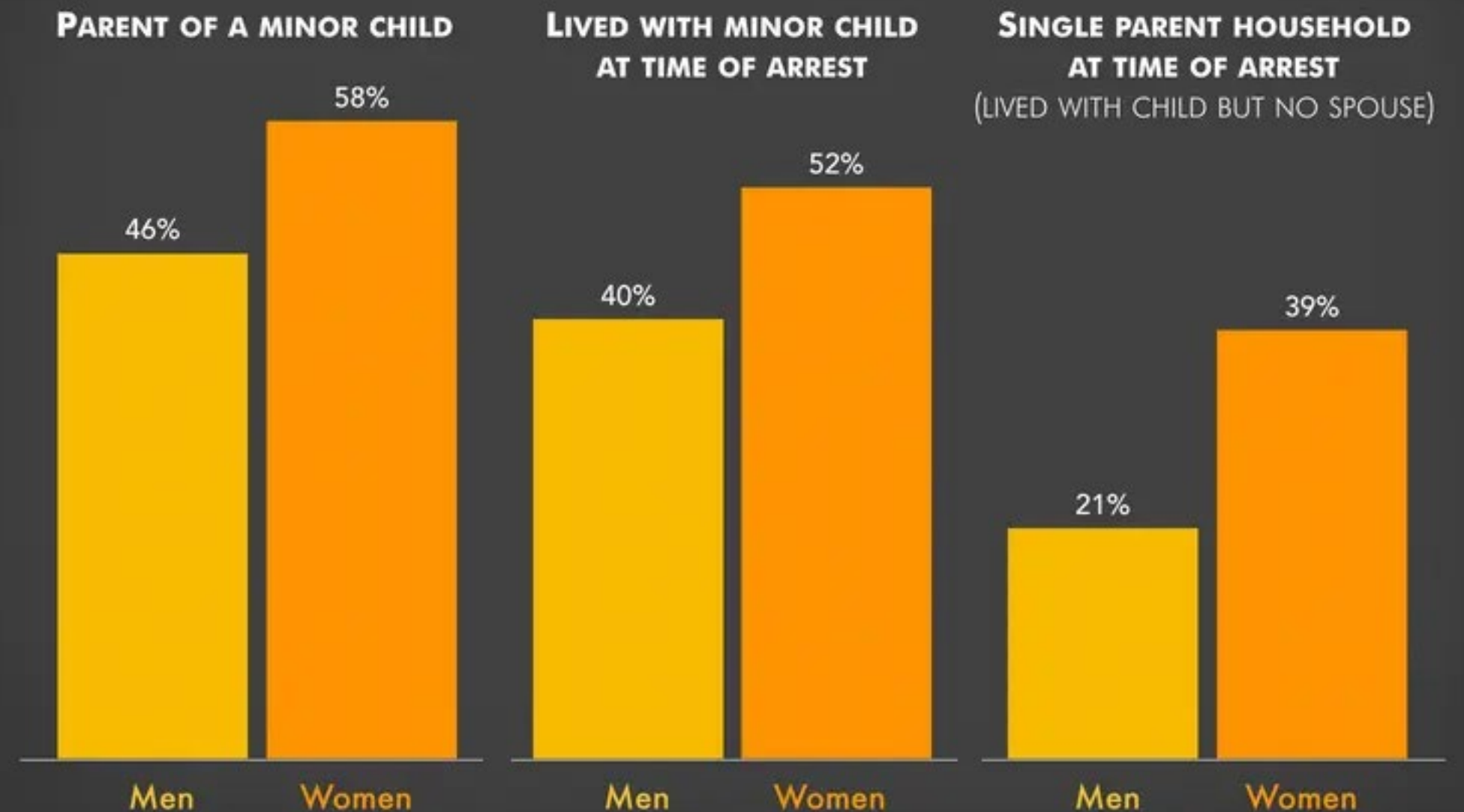
Local Jails

carceral facilities & Motherhood

- ~58% of all women in U.S. Prisons are mothers
- ~80% of all women in JAILS are Mothers
- Of these women, Most are the primary caretakers of their children
- ~58,000 people are pregnant when they enter local jails or prisons

Women in state prisons are more likely to be separated from their children upon incarceration

Self-reported current parental status and living arrangements at the time of the arrest that led to incarceration, among people in state prisons in 2016 who have children



Source: Bureau of Justice Statistics' *Survey of Prison Inmates 2016* data analyzed by the Prison Policy Initiative

A photograph of a woman with curly hair, wearing a white sweater, holding a baby. The image is dimly lit and serves as a background for the text on the left side of the slide.

carceral facilities & Motherhood

- Many lack the basic standards of care for expectant mothers
- ~1/3 have written policies about breastfeeding & lactation
 - yet even in these prisons few women actually engaged in these activities
- ~8,000 women who are pregnant and admitted have opioid use disorder (oud)
 - yet long term treatment is rare
- More prone to being “high risk” pregnancy due to complications with substance use, poor nutrition, and STI’s
- Several states still do not have any policies limiting restraints on women during pregnancy (despite prohibited practice)

carceral facilities & Motherhood

US PRISONS



1396

Admissions of pregnant people

4%

of females entering state prison were pregnant

-3,000 admissions of pregnant people to U.S. prisons each year

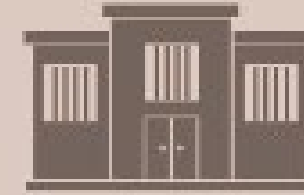
Pregnancy Outcomes in US Prisons¹



Live Births	753
Miscarriage	46
Abortion	11
Stillbirth	4
Ectopic Pregnancy	2

2 newborn deaths; 0 maternal deaths

US JAILS



1622

Admissions of pregnant people

3%

of females entering jail were pregnant

-55,000 Admissions of pregnant people to U.S. jails each year

Pregnancy Outcomes in US Jails¹



Live Births	144
Miscarriage	41
Abortion	33
Stillbirth	2
Ectopic Pregnancy	4

2 newborn deaths; 0 maternal deaths



117 Pregnant people

WERE ADMITTED TO STATE PRISONS WITH AN OPIOID USE DISORDER¹



81 RECEIVED MOUD 36 DETOXED

MOUD - medications for the treatment of OUD (methadone or buprenorphine)
18 prisons continued MOUD but only 4 of them initiated; 11 prisons discontinued MOUD postpartum



50 Pregnant people

WERE ADMITTED TO JAILS WITH AN OPIOID USE DISORDER¹¹

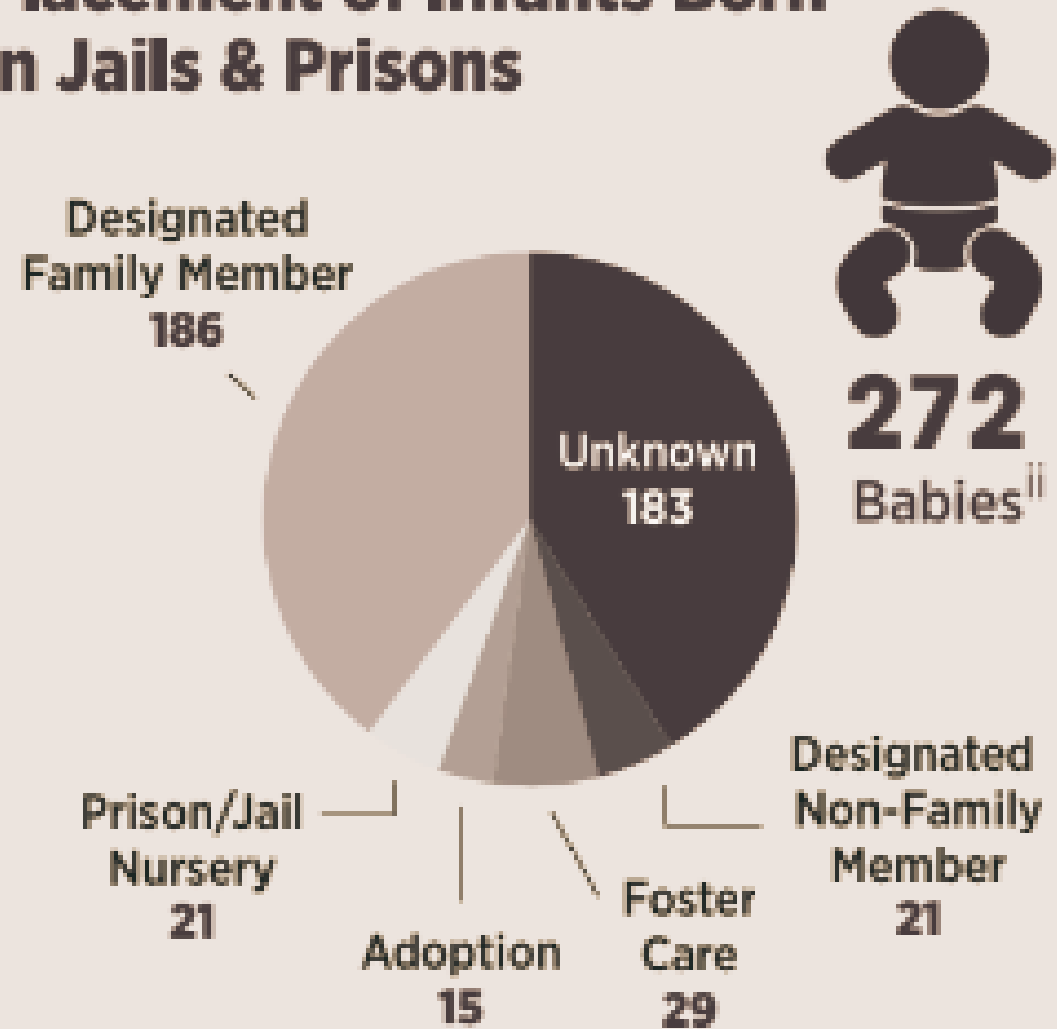


37 RECEIVED MOUD 16 DETOXED

MOUD - medications for the treatment of OUD (methadone or buprenorphine)
4 jails continued MOUD but only 2 of them initiated; 3 jails discontinued MOUD postpartum

Downstream effects

Placement of Infants Born in Jails & Prisons



Postpartum Tubal Sterilization

11 Prisons and 5 Jails allowed access to tubal sterilization



PRISONS

3
STERILIZATIONS
AMONG 101 PEOPLE

JAILS

4
STERILIZATIONS
AMONG 53 PEOPLE

carceral facilities & healthcare access

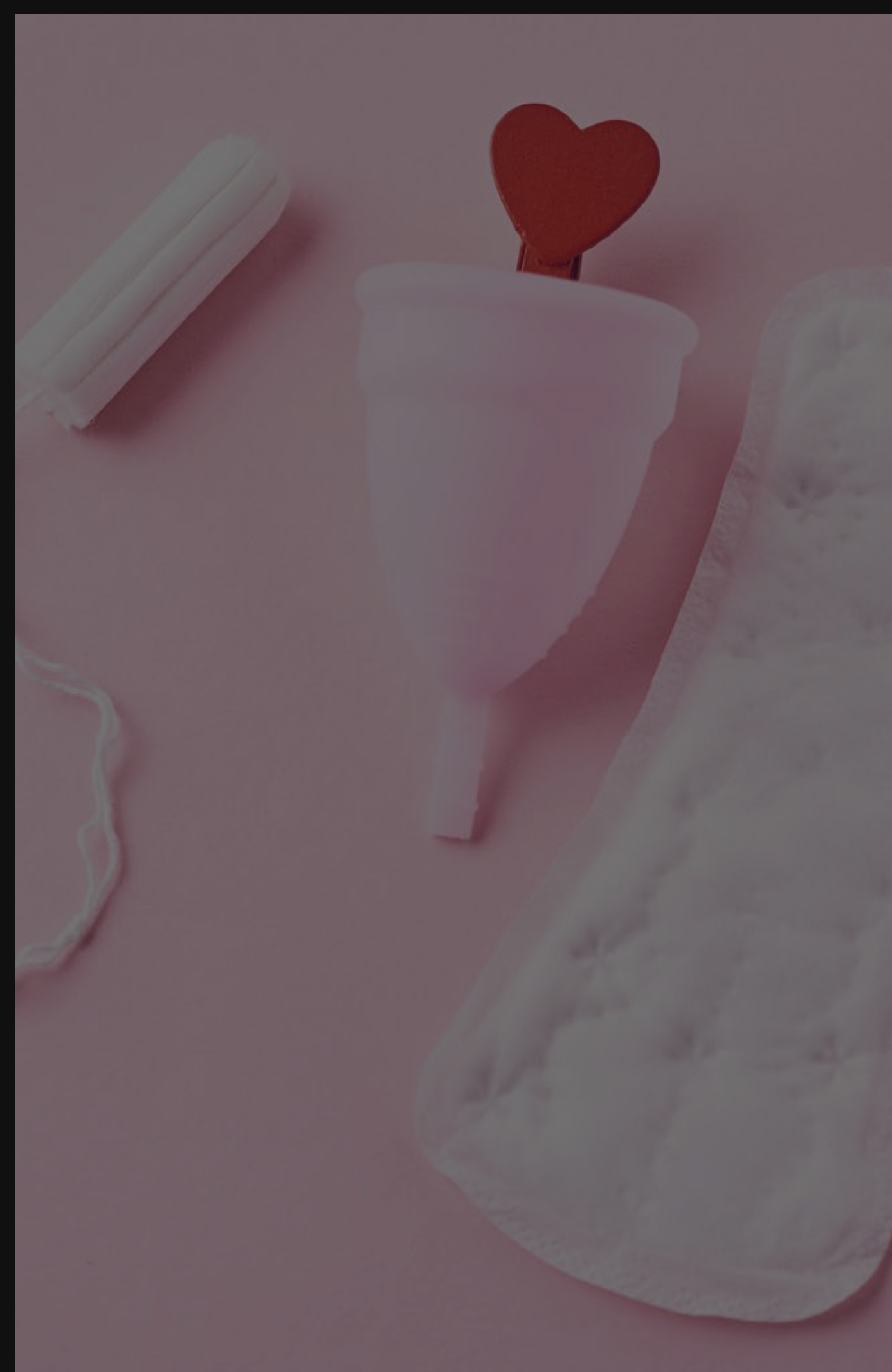
Women who are incarcerated likely experience some of the greatest barriers to receiving life saving healthcare services such as abortion.

- **Pre-Dobbs:** Under Roe, the constitutional right to abortion while incarcerated was retained, though policies made it difficult to exercise.
- **Post-Dobbs: States with bans or restrictions on** abortion create barriers that may be insurmountable for incarcerated people (e.g., traveling out of state).
- Other barriers include:
 - Cost & Loss of Medicaid program coverage
 - Mandated waiting periods, multi-day appointments, scripted phone calls, and traveling long distances

carceral facilities & Period Poverty

In Tapp & Henson's 2024 examination of 99 articles, "For men, by men": Menstrual victimization and the weaponization of period products in carceral settings"

- Articles within the sample included facilities that...
 - Did not provide any period products
 - Did not provide enough quality products for varying body/ menstruation flow types
 - Engaged in humiliating strip search practices during menstruation
 - Refused medical care for menses
 - Weaponized access to products based on women's behavior
 - Limited access resulted in need to trade/ barter with other's who were incarcerated
 - Women created makeshift products to account for lack of access leading to Menstrual Toxic Shock Syndrome



THE HIDDEN COSTS OF INCARCERATION

Example: Arkansas

- Jails in Arkansas charge up to \$5.25 for a 15-minute phone call, reaping profits for companies, while prisons charge \$2.10 for a 15-minute call.
- Arkansas prisons charge people a \$5 medical copay to see a health care provider.
- Arkansas prisons charge families up to a 10% fee to transfer money to an incarcerated loved one.
- If a person in Arkansas prisons has more than \$10 in their commissary account, they may not qualify for assistance to purchase essentials like hygiene items and postage.
- People in Arkansas prisons may not be paid for their work or will be compensated for just pennies an hour.
- Arkansas charges up to 50¢ for an e-message to or from prison, among the highest rates in the nation.



The image features a torn piece of paper on the left side, revealing a background of a prison wall topped with multiple layers of barbed wire. The paper is torn along its right edge, and the background is a dark, high-contrast photograph of the prison wall and sky. The title 'Building competence' is written in a white, serif font on the dark background.

Building competence

- Prisons= single largest institution for individuals with mental illness
 - However, mental health treatment is absent at worst and limited at best within prisons.
- Carceral facilities were created with the aim to incarcerate men.
 - However, the incarceration of women has increased at an alarming rate in the past several years.
- They are believed to serve as a rehabilitative institution for those who have committed crimes.
 - However, it is rarely rehabilitative and always punitive- not only to the individual incarcerated, but also to their families, friends, and communities.

Social Justice: Creating alternatives to incarceration

- Opportunities for diversion from the justice system:
 - Crisis response resources:
 - mobile crisis teams
 - crisis lines
 - crisis stabilization unit
- Community resources
 - Case management
 - Outpatient services
 - Peer support

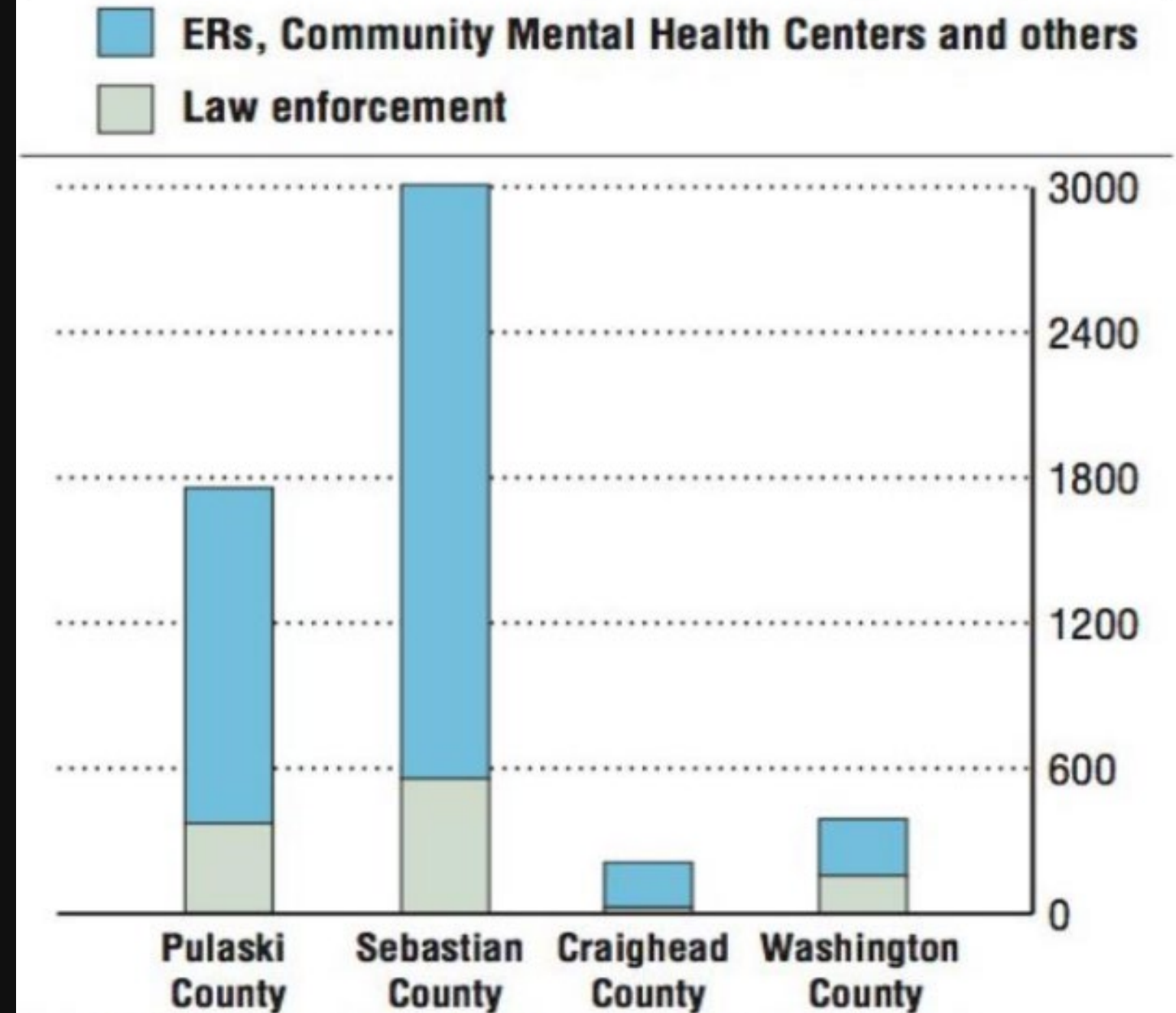


Social Justice: Creating alternatives to incarceration Example: Arkansas

- In 2017, the Arkansas Legislature passed Act 423 requiring Crisis Intervention Training for law enforcement officers and created a pilot program consisting of four Crisis Stabilization Units throughout the state.
- To provide alternatives to inpatient psychiatric hospitalization and incarceration for persons in a mental health crisis.

Paltry police use

Over time, emergency departments, community mental health centers and other sources are sending far more people to crisis stabilization units than law enforcement officers, according to Department of Human Services data from the four sites.



SOURCE: DHS records (data sets cover different periods for different sites)

Arkansas Democrat-Gazette

service: feasible, accessible, & effective treatments

- Group therapy
- Partnerships with academic institutions
 - Practicum sites
 - Internships
- Evidence Based Treatments
 - Trauma, Depression, Anxiety, Personality Disorders, etc.
- Re-entry services
 - Coordination at parole
 - Connections to insurance coverage, license restoration, housing, mental health treatment, family services.



dignity & worth of the person + integrity

- Training social workers & other disciplines in Trauma Informed Care
- Providing Trauma Informed Care when interacting with individuals who are justice-involved with the consideration that loss of rights, constant surveillance, and dehumanizing practices within carceral settings can themselves be traumatizing
- Calling out inhumane practices & policies



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importance of human relationships

“Recovery cannot occur in isolation. It can take place only within the context of relationships characterized by the belief in persuasion rather than coercion, ideas rather than force, and mutuality rather than authoritarian control—precisely the beliefs that were shattered by the original traumatic experiences.”

(Herman, 1992, p. 136)



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