Women Prisoners and Recidivism
Factors Associated with Re-Arrest One Year Post-Release

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Tough sentencing guidelines enacted during the 1980s and early 1990s resulted in record numbers of men and women imprisoned in the United States over the last two decades. As a result, more offenders are now being released from prisons than ever before. At the same time, rates of recidivism exceeding 50% within three years of release indicate that a significant number of prison returnees are ill-prepared to successfully re-establish their lives after prison. Many have difficulties finding jobs and stable housing, and a substantial number have chronic substance abuse and health problems. Although far fewer women than men are imprisoned, their rates of incarceration are increasing faster than those of men and they are reentering society with unique needs and challenges. The majority of women involved in the criminal justice system are nonviolent, poor, and disproportionately African American or Latina. Nearly half did not graduate from high school, and most have little or no employment history or job skills. Seventy to eighty-five percent have substance use problems, as well as multiple contextual issues such as histories and experiences of abuse, disengagement from children and family members, and loss of identity or place within their communities.

It is critical that communities find ways to successfully reintegrate returning prisoners back into the social fabric—not only for the sake of the individual, but also for the safety and social and economic well being of families and communities. The current study was designed to investigate factors associated with recidivism of women prisoners to provide an empirically based foundation for the development or enhancement of policies and programs that promote successful community reintegration. Using a cross-sectional survey of 166 female prisoners and arrest records one year post-release, bivariate and logistic regression analyses were performed to examine the extent to which demographics, family experiences and relationships, institutional experiences, offense history, and physical and emotional needs were associated with recidivism.
The Sample

The “typical” respondent was African American, 35 years old, never married, and from a large urban center.

- 75% did not graduate from high school
- 49% were unemployed in the year prior to incarceration
- 55% made less than $10,000 in the year prior to incarceration
- 25% spent at least part of their childhood in foster care
- 75% of the women used drugs or alcohol on a daily basis prior to incarceration
- 31% had been hospitalized for mental health problems
- 48% had juvenile records
- 42% were in prison for the first time

In terms of age, race, marital and education status, and type of offense, the sample is fairly representative of state and national populations of imprisoned women.

Associations with Re-Arrest

In the year following release, 48% of the sample was re-arrested or re-violated on charges ranging from aggravated battery to driving without a valid license. Most arrests were for drug possession or retail theft (35% and 34%, respectively), followed by prostitution (19%), and battery (13%). Of those arrested, 52% were arrested on new charges, 19% were picked up for parole violations, and 29% were arrested on new charges but cited for violating conditions of parole. Half of all arrestees were sent back to prison, including most of those who violated conditions of parole.

The three strongest predictors of re-arrest were:

- Being unemployed in the year prior to arrest
- History of psychiatric hospitalization
- Prior arrest history

In addition to these factors, participation in a prison industry program while in prison, and to a lesser extent participation in substance abuse and educational programs, mitigated against arrest within one year of release.

Employment

Women who were unemployed in the year prior to arrest were three times more likely to be re-arrested than were women who were employed. Given the significance of pre-prison employment for predicting recidivism, the results of this study support the many initiatives across the United States aimed at employment of ex-offenders as a means of re-integrating them back into society and reducing crime. However, while employment may be an important component in successful reintegration, our data indicates that employment alone is not sufficient to ensure success. Women who had not held a job in the year prior to imprisonment were not only marginalized from the larger community through lack of employment, but they had more substance abuse problems than
employed women (especially with alcohol and crack/cocaine) tended to be younger and single, had more extensive criminal records, and reported more emotional problems, such as depression, anxiety, and stress. Substance abuse, criminal habituation, and mental health issues are problems that may preclude steady employment and must be addressed before, or at least concurrent with job training and placement.

In-prison vocational training, and education programs are a potential means of mitigating problems associated with lack of job skills and work experience. The current research, in fact, suggests that participation in prison industries—a program that mirrors actual work experience in the free world—is a strong predictor of successful community integration. At the same time, only 16% of the sample participated in such programs, suggesting either a lack of availability of these programs or a lack of interest in participating in them. Most research suggests the former is the real cause of non-participation: quality programs are not only often unavailable in women's correctional institutions, but those that do exist typically accommodate few inmates.

**Mental Health**

Women who had a history of psychiatric hospitalization were twice as likely to recidivate than women without such a history. Studies of mentally ill or impaired offenders consistently note the importance of attending to the unique needs of this population if they are to successfully transition from prison to the community. Like other women leaving prison, they must find a place to stay and employment or other financial support, and they must negotiate the adjustment from prison to the community. Persons with significant psychiatric impairment, however, must also access treatment and manage medications if they are to successfully sustain community tenure. Unfortunately, their illness often leaves them with impaired capacities to devise effective strategies to obtain needed resources or to cope with setbacks, leaving them more vulnerable to re-arrest or re-institutionalization in a correctional or mental health facility. Attending to mental health issues of women prisoners includes not only a comprehensive assessment upon entry, but also development and/or referral to specialized in-prison programs to help impaired women develop strategies to cope with the symptoms of their illness and with life contingencies within and outside of prison. In addition, women with mental health problems need to be linked to post-release community mental health services, preferably before they are released, to better ensure continuity of treatment.

**In-Prison Programming**

In-prison programs can make a difference in enabling female prisoners to successfully transition to the community. Participation in prison industries and substance abuse programs, in particular, and to a lesser extent education and mental health programs, were associated with successful community reintegration. To help women to succeed on the outside, quality programs targeting specific sub-groups of women prisoners (e.g., those with dual diagnoses of substance abuse and mental illness; women with learning disabilities; women with histories of abuse) must be expanded.
Policy and Program Implications

To promote a reduction in women’s recidivism:

• Implement or expand programs that concurrently address problems that hinder community integration, such as substance abuse, poor mental health, lack of employment skills, and criminal thinking.
• Expand prison programs that reflect “real world” job skills and free market needs.
• Conduct comprehensive mental health assessments upon prison entry in order to plan for in-prison programming that addresses mental health issues.
• Expand transitional and community programs, especially for women with substance abuse and mental health problems, with linkages to these programs implemented before a woman is released from prison.

Resources


This brief is one of a series developed to facilitate understanding and to inform public discourse about children, families, and the criminal justice system. The series is based on empirical research conducted by the Justice Group, a research consortium of faculty and staff of the Jane Addams Center for Social Policy Research.