AN ASSESSMENT OF THE POTENTIAL EFFECTIVENESS OF AN EDUCATIONAL PROGRAM FOR INCARCERATED FEMALES MAXIMUM SECURITY PRISONS WHO HAVE LOW ADAPTABILITY LEVELS AND WHO ARE INTELLECTUALLY CHALLENGED

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CHAPTER I

INTRODUCTION

Background of the Study

Because criminal behavior is associated predominantly with men, we are unaccustomed to viewing women as criminals or as inmates. Some women do in fact commit crimes, some are arrested, some are convicted, and some are sent to prison. Current trends indicated that female arrest rates, gravity of offense, and convictions and incarcerations have exhibited greater percentage increases than have those associated with male offenders. In spite of increases, the female prison inmate has continued to maintain a low profile in the criminal justice field and has been referred to as the "forgotten offender" by those who wish to call attention to her plight and to bring about change in her situation (Goetting & Howser, 1983).

In 1870, the National Conference on Penitentiary and Reformatory Discipline (Hudley, 1990) met and resolved that the goal at prison should be rehabilitation. The ambition was to educate prisoners and use work as therapy so they could go back into society with altered values and

attitudes, and women were the vanguard of putting this resolution into practice.

Vocational training in the reformatories consisted mostly in cooking, cleaning, and sewing. The Massachusetts reformatory established an extensive farm program. While Albion in New York ran the most ambitious educational program, schooling the women through the sixth grade level (Miller, 1990). However, as institutions housing female inmates report a rise in general population, they also report problems arising in the areas of over crowding, disruptive behavior, and mental health issues. One of the most common statements noted in the Planning and Research Survey (Menifee & Minietta, 1990) was that females were put on administrative segregation due to assaultive behavior, escape risk, mental health, excessive misconduct, and security threat.

The incarceration of people who are developmentally disabled raises troubling public policy questions with respect to the fair administration of justice to the individual, the protection of public safety, and the protection of inmates who are developmentally disabled while they are in the custody of the state. While virtually all experts have abandoned the dated theories that mental disability predisposes an individual to criminal behavior, there remains much debate over the appropriate services and programs to meet the needs of offenders with developmental disabilities.

Most states have no special rehabilitation programs for this population in their correctional facilities (New York State Correctional Facilities, 1991).

In the "A Best Practice Approach to Correctional Special Education," Townley and Grier (1991) assert that through work adjustment curriculum inmates learn job seeking and maintenance behaviors in a classroom setting as they perform their daily assigned job duties. They further state that classroom activities help the inmates become familiar with services in the community that may assist them in obtaining and maintaining employment. An emphasis is placed on interviewing, application, and job retention methodology.

The goal of training programs within the correction facility is clear: it is to provide the individual with skills that will allow her/him to assume a contributory role in society. How to provide this training is not as clear.

The magnitude of the problem is amplified when the intellectually disabled inmate is considered. The lower level of specific abilities which the intellectually disabled possess makes it essential that programming to meet their specific needs be devised within the prison setting to enable them to acquire specific marketable skills.

Correctional inmates are faced with the stark reality that they have failed in the eyes of society. If they have the capacity of evaluate their personal situations they realize that in order to avoid prison after their release they must either learn to become more proficient criminals

or acquire vocational skills that will enable them to be both marketable and competitive (Platt, Tunick & Wienke, 1982). Vocational educational or occupational training appears to be the best means of helping these women adapt to the process of getting along in the community (Rafter, 1983b).

Statement of the Problem and Purpose of the Study

The major treatment goal of correctional educational programs serving retarded offenders is to develop and implement a system of services specifically designed to meet the needs of such offenders.

The problem to be investigated was, the potential effectiveness of an educationally based habilitation plan for the dually diagnosed in a southwestern maximum security prison for females. Therefore, the purpose of this study was to describe an assessment of the potential effectiveness of an educational program of habilitation for incarcerated females in maximum security prisons who have low adaptability levels and who are intellectually challenged.

Research Questions

Qualitative researchers bring general questions to a study. Such questions give focus to data collection and help organize it (Bogdan & Biklen, 1992). The following

questions relating to the educational habilitation plan provided direction for this study:

1. What is the educational plan for the population under study?
2. What is the habilitation plan for the population under study?
3. What are the prospects of developing an educational habilitation plan for the population under study?

Definition of Terms

Functional Assessments: The use of curriculum based measures and a criterion referenced test to assess the inmate's skill deficits. The emphasis is placed on continuous and systematic collection of data through direct observation and evaluation of the inmate in naturalistic settings.

Functional Curriculum: Classes and programs that meet the inmates's needs on her present levels of performance in the areas of social, vocational and adult independent living skills. An emphasis is placed on the acquisition and retention of usable skills and not on advancement of grade or achievement levels.

Vocational Special Education : Accessibility to vocational and technical programs which are designed to teach marketable skills. Such program may require curricular adaptations to allow for maximal learning and participation by the handicapped offender. An emphasis is placed on activities and tasks which meet the needs for community employment.

Correctional Special Education Training - Special Education Training: For correctional educators and others involved in the direct of indirect provision of educational services for handicapped offenders (Townley & Grier, 1991; Rutherford, Nelson & Wolford, 1985).

Participants: The inmates are those females incarcerated in a maximum security facility who have been segregated from the general population due to low adaptability levels and low intelligence scores.

Low Adaptability: This refers to the inmate having a impaired level of adaptive behavior (social, communication, and/or daily living skills).

Transitional Programs: Facilitation of communication and information sharing between community and correctional agencies. A three phase process of referral, program placement, and follow up is stressed. Interagency cooperation and collaboration is a key to the success of this component.

Maximum Security: The state of being held within the confines of an armed perimeter, under staff supervision, 24 hours per day, seven days per week. Movement of maximum security inmates within the institution is limited, controlled, and supervised by institutional staff.

Correctional Case Manager: One who performs routine social casework in the classification and assignment of offenders committed to a correctional institution.

Recidivism: A tendency to repeat criminal or antisocial behavior.

Mental Retardation (MR): Refers to individuals who have significantly subaverage general intellectual functioning existing concurrently with a deficit in adaptive behavior and manifested during the developmental period.

Significant Subaverage Performance: In this study was defined as a deficit which places the individual two standard deviations below the mean of average score on a standardized test, such as the Standard Binet or Wechsler Intelligence tests. Two standard deviations ranges from 50 to 70 $\pm$ 5.

Intellectually Challenged (IC): This term will be used to identify these inmates demonstrating the following problems:

1. Low level of mental ability generally defined as a measured level of intellectual functioning at or below 75,
2. Impaired level of adaptive behavior (social, communication and daily living skills), and
3. academic skills which fall below the sixth grade level. (See Appendix A)

Developmental Disability (DD): Is defined as a severe and chronic disorder involving mental and/or physical impairment that originates before age 22. Such a disorder is likely to persist indefinitely, substantial functional limitations in at least three of seven areas of major life activity. These are self-care, receptive and expressive language, learning, mobility, self-

direction, capacity for independent living, and economic self-sufficiency.

For the purpose of this study the population of Intellectually Challenged (IC) will be synonymous with the subjects described as Mentally Retarded (MR) and Developmentally Delayed (DD).

Adaptive Behavior: The effectiveness of degree with which the individual meets the standards of personal independence and social responsibility expected of his age and cultural group.

Mental Illness: Relates directly to a defendant's ability to understand and comprehend the nature of the criminal proceedings against him/her (Rideau & Sinclair, 1983).

Transitional Living Unit (TLU): Provides placement, assessment, treatment for inmates experiencing serious social deficiencies or dysfunction which precludes the inmates ability to acceptably adapt to the general population setting.

This security prison is the only maximum security penal institution for females in this southwestern state. It is unique in that it has a Transitional Living Unit (TLU) for females.

Significance of the Study

In an article in the Corrections Magazine, DeSilva (August, 1980a) is quoted as saying "experts on retardation are convinced that many retarded offenders could be prevented from committing crimes or rehabilitated once they do if the courts and corrections agencies would only make the effort" (p. 25). Santamour whose is quoted, in the same article, says even if the retarded are identified it usually doesn't do much good. Diversion programs tailored to

retarded offenders are rare. In most prison systems, retarded offenders are dumped into half-assed special education programs that are designed to teach people to read, but that do not deal with the special needs of the retarded. Travisono (1989), executive director of the American Correctional Association, claims that the retarded in prison are a problem without a program. Prisons, he goes on to say, do not have the expertise or the resources to deal with their special needs. They should be somebody else's responsibility, but if we are going to have them, we should have programs.

Inmates who are retarded have been viewed by advocacy groups as not belonging in prison or requiring special housing for protection (Irion, 1988). The number of retarded people in this county is between 5-6 million. However, studies vary as to how many of these people end up in jails and prisons. Brown and Courtless (1971) found that nearly 10 percent of all incarcerated inmates are retarded with an IQ below 70.

While there have been few definitive studies made of the retarded offender, some facts have surfaced from scattered studies. For example, retarded offenders represent a disproportioned percentage of the convicted felons in prison. Retarded offenders are also not good prospects for probation in that probation is usually granted to individuals with higher intelligence, greater educational achievement, and stronger work histories. In

contrast, the retarded offender is generally undereducated, unskilled, and has a poor work history. Probation is therefore denied (Rideau & Sinclair, 1983).

Although mentally retarded inmates do not presently have a constitutional right to treatment as do mentally ill offenders, they are entitled to personal safety and freedom from undue restraint. This is the basis for providing special housing, if needed, and specialized programs to help them cope with their correctional environment. In addition, inmates under the age of 22 are eligible for special education and related services under Public Law 94-142. Such related services include diagnosis and evaluation, pre-vocational and vocational training, counseling, and other services that would improve the functioning of the developmentally disabled offender.

Many mentally retarded inmates also have associated personality disorders or suffer mental illnesses. Such inmates usually require interventions from mental health professionals and special management before habilitation services can be initiated (Austin & Duncan, 1988).

The thousands of former mental patients entering America's prisons in the 1980's have brought significant changes in corrections in this country. These mentally ill offenders have special needs for classification, security, treatment, housing, and handling that place unique demands on correctional institutions (Austin & Duncan, 1988).

This study seeks to lay the ground work to develop and implement a system of services specifically designed to meet the needs of the dually diagnosed. This study informs the research community by utilizing grounded theory (Bogdan & Biklen, 1992). The grounded theory emerges from the bottom up, rather than from the top down, from many desperate pieces of collected evidence in the inmates life that are interconnected. The grounded theory hypothesis comes from the data and is worked out systematically in relation to the data. In this study, the background of the participants were identified to help lay the ground work for the development of a habilitation plan.

Limitations of the Study

Data are the raw materials used to construct meaning in research. In qualitative research, the data may be observations, descriptions, impressions, recordings, or photographs of what is going on in the setting under study. In collecting qualitative data, the researcher is trying to record everything of importance, which means decisions are being made about what is important without being overly selective (Slavin, 1992). Data for this study here was collected primarily through official documents, such as, offender reception sheet, misconduct form, offender violation sheet, judgment, and sentence.

The number of participants in the study was greatly reduced due to the right of refusal, entrance criteria, and

the early release penal program. The penal institution requested a maximum of three months intrusion for data collection. A one month extension was granted to determine if other participants would be admitted to the program. To be included in the data participants had to meet the following criteria:

1. female,
2. incarcerated in the southwestern maximum security penal institution,
3. low level of mental ability (at or below 75),
4. impaired level of adaptive behavior, and
5. academic skills which fall below the sixth grade level.

A total of four women were included in this qualitative study.

Participant Digest

Prior to beginning the study permission was obtained from many sources. The number of participants was ten with a projection of growth. Once permission was obtained and the study initiated, the population changed and diminished. However, growth was expected. The researcher was encouraged to continue the study with the expectation of having a minimum of ten subjects.

Of the original ten subjects, three gave permission, one was released into society early, and six were released to the probation system. Once again the procedure to obtain

permission for the subject via the Department of Corrections Probation and Parole division was undertaken. The subject was asked by the probation officer for permission to allow the researcher to interview her. Permission was requested three times, allowing intervals of approximately one week between each request. Permission was denied.

All new inmates meeting the entrance requirements into the transitional living unit were queried for permission. Of these, one gave permission. Thus the study contains only four participants.

What follows is a brief summary of these participants. The names have been changed to protect the confidentially of the subjects.

Cynthia

Cynthia is a tall, slender build, three-fourth white, one-fourth Cherokee, olive complected female with light eyes. She is a high school drop-out from a low socio-economic area. Cynthia has a history of offenses and emotional instability. She has a common law husband who is also incarcerated at this writing. Her children live with her parents and do not visit her in prison.

Cynthia has not adapted well to prison life, is not involved with any programming, and has difficulty with reality, and personal grooming. She was employed as an unskilled laborer prior to incarceration with a fairly stable work history.

Cynthia is friendly and extremely verbal, often relaying stories, however, the details undergo rapid and multiple changes.

Lorraine

Lorraine is a short, slender built, black female with a quiet, meek manner. She was the oldest subject. She is a high school graduate from a low to middle socio-economic level. She did not have a history of offenses or employment. She was listed as emotional unstable prior to 1985.

Her common law husband is deceased and her children are with her grandmother.

Lorraine's adaptability level has improved, she gets along well and takes care of herself. She is involved in self-improvement programming. She has limited employment within the institution.

LaDonna

LaDonna is a slim, medium height, black female with several nervous mannerisms. She dropped out of high school in the ninth grade when she was blessed with her first child. However, she did go on to complete a nurses training course. She is from a low socio-economic area and had a history of minor offenses.

LaDonna had very definite rules on what was personal and would not answer some questions, such as history of

emotional stability, location of husband, children, and any self-reportings. With the exception of areas that were off limits, LaDonna displayed a passive, subservient posture. Her adaptability levels was not good and she would only participate in the drug recovery program and the adult basic education program.

Diane

Diane was the youngest of the participants. She is a tall, athletically built, black female. She is a high school graduate from a middle to low socio-economic area. Diane is a single mother with a history of offenses and whose children have been placed in the custody of the Department of Human Services. She did not have a history of emotional instability. She was the only person of the group who committed the offense to receive any prison time, the others were released.

Diane has not adapted well to incarceration and is often on lock down or restricted movement. Prior to incarceration her work history was characterized as stable.

Summary

Cynthia and Diane have not attempted any training during their incarceration. Cynthia and Lorraine did not receive any vocational high school training or post high school training prior to incarceration. LaDonna refused to

answer this question. Diane received high school training in horticulture and typing.

None of the subjects had official habilitation plans on file or received schedule academic instruction. All daily living skills activities were handled by recreation, arts and crafts as well as limited time slotted for one on one with the case manager. Only one of the participants has employment in the prison.

Assumptions of the Study

It is the belief of the researcher that no unusual external conditions exist which adversely affect the study. This study is being conducted primarily to benefit programming at this institution and is based upon a unique population. It is understood that the results of this study are not generalized necessarily to other maximum security prisons for females without further replication.

CHAPTER II

REVIEW OF THE LITERATURE

Introduction

The literature review presents an exploration of research which focuses upon the rehabilitation of dually diagnosed incarcerated females in maximum security. Relevant components include: the history of female incarcerations; the mentally disabled offender; dually diagnosed; the rehabilitation/training; programming for the offender; and vocational rehabilitation.

The History of Female Incarcerations

By far the literature on the adult female offender is primarily descriptive in nature. Much of the descriptive literature reinforces the stereotype of female offenders being fallen women, the weaker sex, or deviant. Lombroso and Ferrero (1895) described female criminals as atavistic throwbacks to the primitive level of mankind. As such they were seen as being intellectually and morally inferior to noncriminals of both sexes. The conclusion was that female crime is the result of an inherited proclivity to sin.

The Female Offender concluded, "It is of course, the relative physical weakness of women which precludes their extensive participation in the more violent predatory crimes to which male offenders are addicted" (Lombroso & Ferrero, 1895, p. 3).

Ginsburg (1980) called attention to the stereotype of female offenders as being the forgotten women, "rarely forgiven, because nice girls don't commit crimes" (p. 3). Ryan (1984) called attention to the once widely held belief that female crime began in the Garden of Eden, where Eve, the first fallen woman, was the first female offender. Before the turn of the century female offenders were frequently cast in the role of witches (Giallombardo, 1966). Female offenders were called erring and misguided creatures, by Thomas (1923) in his description of the criminal female, noting that she was not immoral, but an amoral individual objectively driven to crime.

A major portion of the descriptive literature has focused on the conditions of incarceration and history of imprisonment for female offenders. It has generally been pointed out that female offenders were the forgotten offenders for nearly 200 years (Ryan, 1982). The control and custody of female offenders before the early 19th century were at best shameful. In tracing the history of correctional institutions for females, the literature generally points out that, around the 1800's, society began

to recognize that some of the females were not obeying the law (Ryan, 1984).

In the eighteenth and nineteenth centuries, women were more commonly convicted of crimes than they are today. Their crimes appear to have been determined more by their socioeconomic situations than by an innate sex differences (Zedner, 1991).

Up to the mid-nineteenth century the predominant approach to female criminality was moralistic. Women criminals were judged against a highly artificial notion of the ideal woman: an exemplary moral being. Women's crimes not only broke the criminal law but were viewed as acts of deviance from the norm of femininity. Prison regimes focused on individual women's failings of character and sought through external management, education provisions, or self discipline to restore inmates to the ideal of femininity. Toward the end of the nineteenth century attention focused increasingly on the constitution of the offender and particularly on the internal attributes that, it was believed, made people criminal. Criminality in women became the focus of considerable concern not the least because in their role as mothers, they were identified as the biological source of crime and degeneracy. Victorian notions of women as the weaker sex made them particularly susceptible to a process of medicalization that has endured into the twentieth century (Zedner, 1991).

Women were incarcerated in prisons for men, often in attics, basements, or separate old buildings within the grounds of the prisons for men. It was here that the women were given a place for silent contemplation, self-examination, and removal from the corrupting influence on the outside (Ryan, 1984). By the late nineteenth century, nearly every state operated a custodial unit for women or a separate women's ward (Rafter, 1985).

The history of female offenders incarcerated in the United States has been broken into three time periods. The first of those periods is referred to as the Custodial Model which spanned from 1790 to 1870. The second is known as the Reformatory Model and lasted from 1870 to 1935. The third period is still evolving and has not to date been characterized by any theories or models (Rafter, 1985).

The custodial model was primarily characterized by the gradual establishment of female quarters within male prisons. This was due primarily to their growing numbers. Up to that point incarcerated females made up such a small part of the offender population, they were housed somewhere within the prison. Prison officials did not want to hire matrons to oversee offenders, nor did they want to devote entire wings to female prisoners.

Rafter (1985) went on to state that the women's prison system evolved at a different pace than males, and it contained two distinct types of state prisons: custodial institutions that repeated the penitentiary plan, and

unwalled reformatories comprising a number of small residential buildings scattered over large tracts of rural acreage. For many years after states began constructing prisons, females convicted of serious crimes served their sentences beside men at the central prisons.

As the number of female offenders grew, state officials realized a need for wards devoted solely to women. Although little data were collected on these offenders during this time period, what is known is that the majority of these women were between the ages of 20 and 30, most primarily in their 30's (Rafter, 1985).

In Britain, Smart (1976) was regarded as setting the starting point of feminist criminological studies, setting an agenda that has been explored and expanded by subsequent writers. Moreover, Smart (1976) set the birth of the criminology of women in 1895 with the publication in Italy of Lombroso and Ferrero's La Donna Delinquenta - a massive study of the biological characteristics of criminal women. It quickly appeared in one English version in 1890 as The Female Offender, and had an influence on explanation of female crime that endured long after Lombrosian positivism theory had been discredited in mainstream criminology.

The idea of imprisonment as punishment for crime is itself a product of reform. Instead of being thrown to the lions in the arena to provide a public spectacle, offenders were sometimes allowed to compensate the victim through his family. But for poor people, who could not pay, for slaves,

and for women, the cruel punishments were reserved. Men were stoned to death and women were drowned or burned at the stake.

In American colonies, improvement of jail conditions were advocated by the Society of Friends, aided by Benjamim Franklin. While permitting prisoners to do productive work was a step forward, this reform, once it became widespread, led to an over emphasis on prison labor as a profit making enterprise for the state. However, women prisoners, being few in number could not pay their way (Crites, 1974).

The first separate institution for women in the United States, the Indiana Women's Prison, was opened in 1873. During the next forty years only four more were opened: the Massachusetts Prison (Massachusetts Correctional Institution for Women at Framingham) in 1877, the New York Reformatory for Women (Westfield Farm) in 1901, the District of Columbia Women's Reformatory in 1910, and the New Jersey Reformatory for Women in 1973. Fifty-one years later, however, there are only twenty-nine separate institutions for women, including one in Puerto Rico, the District of Columbia Reformatory for women and one Federal Institution (Eyman, 1971). Institutions for women present some differing characteristics which should be recognized. Even more than male populations, the inmates of women's institutions reflect variations relative to geographical location. Moreover, in some states, many misdemeanors carry sentences

to women's reformatory, while in others, the inmates are mostly felons (Eyman, 1971).

Zedner (1991) suggested that female offenders were perceived and treated very differently from men. For example, in Britain, the lack of interest in the history of female criminality is doubly surprising given that women made up a far larger proportion of those coming before the courts and going into prison than they do today. While women comprise only 3 percent of the daily average prison population in England and Wales today, a hundred years ago they made up over 17 percent.

Unfortunately, the scientific description and analysis of the female prison and female prisoner have been overloaded (Giallombardo, 1966). Until recently, the incarcerated female offender was all but ignored by criminal justice researchers and commentations - historical penologist, researchers of contemporary penal problems, and legal theorist alike (Inciard & Faupel, 1980).

The literature on women's prisons and the female prisoner is long on impressions and short on empirical data. A sizable portion may be subsumed under these general headings: first, articles which are programmatic in nature; second, autobiographical accounts of released inmates; third, historical accounts; and, fourth, sensational exposes; and finally, attempts to establish the extent of the criminality of women. In view of the paucity of

historical studies of women's imprisonment, a list of major findings are in order.

1. Although the reformatories established between 1870 and 1930 played a crucial role in the development of the American women's prison system, this was only a partial picture.
2. The custodial model (which was more masculine because it resembled maximum security prisons for men) was the first of the two styles of women's prisons to develop and was more widely adopted than the reformatory across the 19th century America.
3. The almost exclusive focus on reformatories has therefore produced a picture of the women's prison system that is distorted and has obscured our understanding of the origins of the problems faced by that system today. (Howe, 1987, p.25)

Rafter (1982) states that the establishment of the women's reformatory after 1870 was a major development in prison history because the new model "broke radically with male- oriented prison tradition, creating a set of feminized penal practices and extending state control over a population of young, working class women convicted of minor sex related offenses" (p. 263).

Across the nation the number of women in prison has grown at a faster rate than that of men. In a year-to-year comparison, the percentage of women is now the highest it has ever been, beginning with the first annual collection of prison statistics in 1928 (Rafter, 1982). The number of women under the jurisdiction of state and federal prison authorities at year end, 1989 reached a record 40,556. Although the female inmate population had grown by more than 27,000 since 1980 (an increase of over 200%), females still comprised a relatively small segment of the prison

population - 5.7% at year end 1989. Specific findings of Nelson (1987) include the following: The rate of growth for female inmates exceeded that for males in each year since 1981. From 1980 to 1989, the male population increased by 112% and the female population by 202%. At year end of 1989, 549 men per 100,000 men in the resident population and 31 women per 100,000 women were serving a prison sentence of more than a year. More than two-thirds of the women in prison were recidivists, having previously been sentenced to probation or incarceration as either a juvenile or an adult. Nearly half the women in prison (46%) had been previously sentenced to incarceration or probation at least twice; 31%, three or more time; and 13%, six or more times.

The problem of the prison culture needs examination. Much of the sociological literature deals with the question of subcultures, in which it is assumed that a distinct set of values and patterns of behavior exists, different from the dominant culture. In attempting to understand the meaning of imprisonment, prison life must be seen as something more than an arrangement of walls and bars, cells, and keys. A prison is a society within a society (Nelson, Rutherford & Wolford, 1987).

The crimes of women have not varied greatly over the centuries. Although women now take part in all aspects of business life, and many enter professions which formerly were reserved exclusively for men, criminal statistics show few changes due to this movement towards equality. Today,

as in the past, women face the same family situations and undergo the same physical and social stresses. "The greatest number of work-family problems revolve around shared family responsibilities, spousal support and affordable and dependable child care" (Herr & Kramer, 1992, p. 559).

Since the pattern of women's criminality remains reasonably constant, criminal courts of the future are likely to deal with very much the same types of women offenders as they have in the past (Smith, 1962). Giallombardo (1966b) asserted clipped heads as a form of female degradation dating back to medieval inquisition were no longer part of the repertoire of punishments which prison officials are prepared to inflict upon their female prisoners. Other forms of punishment such as restricted diets and solitary confinement are now rare in the modern prisons. In general, society has made the lot of the female prisoners less harsh than that of the male prisoners. Most female prisons provide their inmates with many of the so-called positive things. Not withstanding these positive influences, it would be a mistaken assumption that society does intend the female prison to be a place of punishment.

When in the 1840's, Dorothea Dix surveyed prisons from Maine to Virginia, she counted a total of 167 female prisoners. Had she repeated her inspection in 1981, Dix would have found more than 14,000 women in state and federal prisons. But she also would have discovered that, in a

number of significant respects, incarcerated women of the present resemble those of the past. Like their predecessors, the majority of current female inmates entered prison in their twenties, they are less likely to be married than free women; and they worked for wages before imprisonment mainly at service and other poorly paid jobs. The profile of incarcerated female felons, then, has remained quite stable over time (Miller, 1990).

For years, the rank of convicted criminals have been swelling steadily, bringing the nations's prison system perilously closer to an overload. The vast majority (94.4%) of those inmates are men. But even in jail, women are bringing down the barriers to equal achievement. The Bureau of Justice statistics reported that the female prison population jumped 21.8 percent from 1988 to 1989 - the ninth consecutive year that the rate of increase at women's institutions far outstripped the men's. The number of women doing time has doubled to 40,000 in the last five years. The main reason is drugs. Stiffer penalties are on the books throughout the country and women, who have turned to in a way they never embraced other narcotics, have been caught in the sweep. Prisons have been largely unprepared to handle the unique problems of their growing female populations. "We assumed that they could benefit from the same programs as men," said Dane Russell, (Salholz, Wright, Bingham, Clifton, Carroll, Reiss, Spencer, Chideya & Farai, 1990, p. 37) administrator of Montana's division of

corrections. Women have as many unique psychological and medical needs as men do.

Public officials have begun to acknowledge, sometimes nudged along by lawsuits, that prisons do not provide women with the same rehabilitation or educational programs as men. Inequities in the correctional system, said Washington D.C. Superior Court Associate Judge Gladys Kessler "are a mirror of the sex discrimination that occurs in the non prison population" (Salholz et. al, 1990, p. 37).

The United States Department of Justice (1992b) concurs stating that the female arrest rate has been steadily increasing since the 1960's. Between 1971 and 1985, according to the Federal Bureau of Investigations (FBI's) Uniform Crime Report (UCR), the women's arrest rate for index crimes increased six times more than the male arrest rate, which showed only a 6 percent increase. The women's arrest rate for FBI index crimes increased by 37 percent, and arrest for violent crime increased by 38 percent during those years. The number of female offenders committed to prison also increased at a rapid pace. At the end of 1989, a record 40,556 women were under the jurisdiction of State and Federal prison officials. From 1980 to 1989, the male inmate population, increased 202 percent. In every year since 1980, except 1990, the rate of growth for female inmates has exceeded that for males.

In Corrections Magazine (1980a) DeSilva said

> It is estimated that three percent of the American population, 6.5 million people, are retarded. Scattered studies indicate that at least five percent of the inmates in jails and prisons (about 25,000) people are retarded. Some studies suggest the figure is far higher. Few jail or prison administrators even try to identify retarded inmates, much less provide them with any special programming. The same is true of police, courts, probation and parole agencies. (p. 26)

The Mentally Disabled Offender

Recent studies have shown that a disporportionately high percentage of prison inmates are retarded. A comprehensive effort to identify the number of incarcerated offenders with retardation was conducted in 1982 by Brown and Courtless (1982).

The entire range of handicapping conditions is not found in correctional programs. Persons with severe and profound developmental disabilities, for example, are not likely to have the opportunity or ability to commit criminal offenses, nor are they likely to be incarcerated. For the most part they require life long supervision in sheltered living and working environment. Furthermore, their handicaps are so apparent that if they ever broke the law, law enforcement or court officers would refer them to state or community programs for treatment. This is not to suggest that all severely handicapped persons are excluded from correctional programs. Many states provide segregated correctional programs for seriously disturbed offenders. However, in the criminal justice system persons with special education needs are predominantly those with mild to

moderate handicaps: the mentally retarded, the learning disabled, and the behaviorally disordered. Most retarded persons in correctional programs function in the educable mentally retarded range (Morgan, 1979).

Dealing with the mentally disabled offender is a chronic problem for law enforcement and corrections. It is widely accepted among professionals that the number of mentally disabled persons entering the criminal justice system has increased during the past two decades, following statutory changes that restricted new commitments to mental facilities while releasing large numbers of patients to fend for themselves in the community. Inevitably, many mentally disabled persons commit offenses resulting in arrest and, because alternatives are not available, they are detained in facilities ill equipped to deal with their special needs. For this solicitation, the term mentally disabled includes two categories of disability: 1) offenders who are mentally ill; and 2) offenders who are mentally deficient (intellectually challenged) (U.S. Department of Justice, 1992b).

Even though the federal mandate to provide a fair and appropriate education to all handicapped persons under the age of 22 specifically extends to correctional education programs, incarcerated individuals have been neglected at all levels of the criminal justice system. It has been observed that incarcerated handicapped offenders are more frequent targets of physical, sexual, and economic abuse by

other inmates with regard to mentally retarded offenders. Santamour and West (1977) explain that because these persons more often fail to understand prison rules or to advocate for their rights in prison, they tend to serve out their entire sentences; therefore, their periods of incarceration average 2 to 3 years longer than those of nonretarded inmates. Nelson goes on to say special education programs generally are not readily available in correctional institutions as they are in public schools. Nor are many correctional education programs able to offer the same quality of services to handicapped students as that available in the public schools. The reasons are numerous. There is an attitude among some criminal justice professionals and the public that criminals do not deserve the same educational and other benefits that law abiding citizens merit. However, the demographics regarding incarcerated offenders strongly suggest a relationship between crime and educational deficiencies. Another reason for the unavailability of good special educational programs in corrections is the shortage of qualified personnel. A third reason for the unavailability of special education services in correctional programs is the difficulty of implementing PL 94-142 in correctional settings. Other factors that interfere with the provision of appropriate special education services in corrections include inadequate funding, the lack of interagency agreements and cooperation, rapid population turn over, failure to obtain previous

school records, inadequate screening and assessment procedures, and administered policies that place institutional security above education. The larger number of handicapped offenders and the lack of appropriate special education programs in the criminal justice system provide dramatic evidences of the need for special education services (Nelson, Rutherford, Wolford, 1987).

Interest in possible relationships between mental retardation and criminal behavior, especially as a sign of emotional disturbance, has outstripped factual information. Since Goddard's investigation in 1914, over 450 studies of the retarded offender intellectual dimensions have been published, but none have offered conclusive evidence that mental retardation plays a role in criminal behavior (Menolascino, 1975).

The Mendelian concept (Menolascino, 1975) of the mental retardate as a moral idiot historically preceded the biosocial view of the mentally retarded offender as a product of social interaction. During the early decades of this century there was still a predisposition to think fatalistically of mental retardation, delinquency, and societal dependency as inevitably associated biosocial phenomena. Sexual studies have found that the types of crimes most often committed by the retarded are qualitatively different from those more frequently committed by nonretarded offender, with the retarded showing a

significantly higher incidence of crimes against the person (Menolascino, 1975).

The relationship between mental retardation and criminal behavior has been a subject of great debate, beginning with efforts by early researchers to demonstrate that retardation predisposes a person to commit criminal acts. Much that is presently known about the incarcerated mentally retarded (MR offender) derives from a monumental survey conducted by Brown and Courtless (1971) between 1963 and 1966. The purpose of the study was to determine the current generalizability of the conclusions regarding the average national prevalence of mental retardation within the prison population, how adequately MR inmates adjust to imprisonment and what type of rehabilitation services they receive.

Brown and Courtless (1971) found that prevalence rates across states ranged from 2.6% to 24.3% with a national mean of 9.5%. Respondents reported that MR inmates required inordinate staff attention, and were prone to exploitation and more disciplinary action. Further, more than 25% acknowledged that their institutions provided additional or special services for the mentally retarded.

Santamour (1986) list reasons for the disproportionate numbers of offenders with retardation:

1. If retardation and criminality are not synonymous and if there is no clear cause-and-effect relationship between the two, then why is there a disproportionate number of offenders with retardation in prison today? An explanation begins

with an examination of the disadvantages experienced by the person with mental retardation within society in general and within criminal justice system in particular.

2. Theorists today acknowledge that social deviance is far more complex than individual pathology. Social deviance, such as retardation and delinquency, is a phenomenon that takes shape within and is in separable from the wider social context in which it occurs. (Santamour, 1986)

Among socially disadvantaged people in the United States, studies show a disproportionate number or persons with mental retardation. In addition, the relationship of social class variables to mental retardation appears to be more direct for persons with mild to moderate retardation than for persons with severe retardation. This situation implies that factors responsible for severe retardation are less influenced by social class than are those responsible for mild retardation.

3. Research on the population of offenders with mental retardation has demonstrated that the vast majority of these offenders have obtained only a limited amount of education. They are likely to have completed the sixth to the eighth grade with academic achievement equivalent only to that of the second or third grade. More often than not, offenders with retardation are either unemployed or underemployed in low skilled jobs prior to their arrest. (Santamour, 1986, p. 17)

People with retardation cannot be assumed to have learned socially acceptable behavior and values. For these persons the lag in their developmental processes often results in the absence of certain basic social and cognitive skills. Their need is not so much to relearn acceptable behaviors and values but to become acquainted with them.

The term habilitation, therefore, is more appropriate than rehabilitation (Nelson, Rutherford, & Nelson, 1987).

Research indicates problems within correctional facilities in meeting the needs of offenders with retardation. Here they are also out of step with the dominant characteristics of the inmate population. Their training needs are more habilitative than rehabilitative. They are victimized by more sophisticated inmates, and because of their desire to be accepted, the consequences of their maladaptive behavior become intensified as they assume the values of the prison culture (Santamour, 1986).

Although mentally retarded inmates do not presently have a constitutional right to treatment as do mentally ill offenders, they are entitled to personal safety and freedom from undue restraint (Cohen, 1985). This is the basis for providing special housing, if needed, and specialized programs to help them cope with their correctional environment. In addition, inmates under the age of 22 are eligible for special education and related services under Public Law 94-142. Such related services include diagnosis and evaluation, pre-vocational and vocational training, counseling, and other services that would improve the functioning of the developmentally disabled offender. Many mentally retarded inmates also have associated personality disorders or suffer mental illnesses. Such inmates usually require interventions from mental health

professionals and special management before habilitation services are initiated (Austin & Duncan, 1988).

The social profile of retarded offenders suggests that social characteristics and crime are closely associated. Moreover, the empirical associations in the general population are between mental retardation and age, ethnicity, and poverty.

Oddly enough little research effort has been directed toward the description and analysis of retarded offender's criminal or legal characteristics in terms and type of severity of offense, sentence length, recidivism, and participation in prison rehabilitation programs. This paucity of research continues to exist in spite of strong suspicions that retarded offenders are discriminated against in the criminal justice system (Eachron, 1979). If current concern over the plight of incarcerated mentally retarded offenders is maintained, it should be expected that the number of retarded inmates will decrease even further in the future.

There are several possible definitions of what constitutes a difficult or a dangerous prisoner, dependent on the definition which is used, the relative numbers involved can say between 0.2% and 5% of the prison population. What is important is that this small group not only demands a disproportionate level of management input, but also is likely to have a significant effect on the rules and regulations which are applied to the remainder of the

prison population. The vast majority of prisoners are content to serve their sentences quietly, do not actively seek the means to escape, and will not continually battle against authority. This fact has been recognized in recent years and, as a result of internal management decisions and external pressures, an increasing number of what may loosely be described as rights and liberties have been ceded to prisoners (Coyle, 1987).

The thousands of former mental patients entering America's prisons in the 1980's have brought significant changes in corrections in this country. These mentally ill offenders have special needs for classification, security, treatment, housing and handling that place unique demands on correctional institutions (Austin & Duncan, 1988).

Mentally ill offenders affect the management and fiscal resources of correctional systems. Inmates with serious mental illness must receive adequate treatment. The right of treatment was clearly established by the U.S. Supreme Court in Ruiz v. Estelle (1977) and in Gamble and Bowring v. Godwin (1977). These cases mandated basic correctional mental health services that should include:

1. Identification of offenders with mental disorders; crisis intervention, especially for self-mutilating and suicidal inmates;
2. An array of treatment modalities such as medication management, counseling, activity therapists, education, and meaningful work assignments for those who are capable of work;
3. Special housing assignments for those who are unable to function in the general prison population, availability of hospital care, referral

to public mental health services upon discharge or parole;
4. An adequate record system including a written treatment plan;
5. Policies that include due process procedures to contest involuntary treatment, medication, or hospitalization. (p. 70)

The delivery of mental health services demands professional staff and the training of other correctional staff to treat and manage mentally ill inmates. The fiscal impact of recruiting psychiatrists, psychologist, counselors, and other ancillary staff is considerable. Training dollars must be allocated to provide specialized training to existing and new staff. In many cases correctional officers who manage specialized psychiatric unit must be trained to function as psychiatric aids in addition to performing their security roles (Kaufman, 1972).

Mentally ill inmates also make correctional management much more difficult. The mental illness of an inmate must be considered in classification and disciplinary decisions, close coordination, and cooperation must exist between mental and physical care health staff (Austin & Duncan, 1988).

Although biological causes of mental retardation and emotional or behavioral disorders were recognized during the first half of the nineteenth century the emphasis was on environmental factors, especially early discipline and training. It is not surprising, then, that interventions in that period center on environmental control - providing the

proper sensory stimulation, discipline, and instruction (Kaufman, 1972).

Psychiatric disturbances in our nation's prisons and jails are becoming one of the major health concerns of our time. It is likely that legislation designed to restrict use of civil commitment procedures, while seeking a narrowing of the insanity defense, has brought about an increase in the number of emotionally disturbed individuals currently being processed through the criminal justice system (Walter, Mann, Miller, Hemphill, & Chlumsky, 1988).

As institutions housing female inmates report a rise in general population, they also report problems arising in the areas of overcrowding, disruptive behavior, and mental health issues. Recently, institutions nationwide responded to a survey designed to identify problems managing female offenders and to gain information regarding the use of administrative segregation. This survey was mailed out by the Oklahoma Department of Corrections (ODOC) (Menifee, 1989) in an effort to identify trends and issues surrounding disruptive female offenders.

The focus of the survey was the use of administrative segregation cells. Administrative segregation was generally defined to respondents as, a classification decision for placement of offenders in special cells to isolate them from the general population for management purposes. It was further qualified that the use of administrative segregation is generally due to the disruptive behavior of the offender.

Respondents stated that most common reasons females were put on administrative segregation were, assaultive behavior, escape risk, mental health, excessive misconduct, and security threat (Menifee & Minietta, 1990). The disruptive female population appears to be growing rapidly. With the increase in population, issues concerning female offenders are being addressed, some for the first time (Menifee & Minetta, 1989).

The Vantour Report (Coyle, 1987) concluded its examination of the special handling unit. Listed below are a few of the recommendations:

1. There is a need for Special Handling Unit so that particularly dangerous offender can be removed from normal maximum security prisons for the protection of staff and other inmates.
2. Inmates in special handling units should not be left to their own devices and preparation must be made for their eventual release. The concept of a human warehouse is not acceptable. However difficult, a concerted effort must be made to provide opportunities, meaningful activities, and therapies.
3. Inmates should have the opportunity and incentive to progress through clearly distinct phases towards their eventual release to a regular population.
4. Communication between staff and inmates is critical and must be an integral part of the special handling unit program and phases.
5. The special handling unit must have an identifiable head and separate staff.
6. Staff training and selection is of paramount importance. A separate training program for special handling unit and staff should be developed and interpersonal relations must be an integral part of this training.
7. Staff members should be assigned to a small group of inmates in order to improve communications, to ensure consistency in application of the rules and for assessment.
8. In a high security setting minor events such as late delivery of canteen items can be blown out of all proportions and lead to serious confrontation.

> A non-security member of staff should be designated inmate liaison officer with responsibility for frequent communications with inmate range representatives. (Coyle, 1987, p. 145)

The Dually Diagnosed

Historically, the relationship between the concepts of mental illness and mental retardation has undergone dramatic changes. Early thinkers tended to view both forms of abnormality as similar. For example ancient Greeks and Romans treated mentally dual and mentally ill persons alike - unfortunately in a persecutory manner. Because any form of mental deviance was often attributed to possession by evil spirits or demons, treatment often included flogging, starvation, and even death.

A more scientific conceptualization of mental pathology was that of Hippocrates, who offered a somatogenic, rather than religious, hypothesis to explain mental disorders. Mental illness and dullness were attributed in natural causes, namely, to a disruptive of the delicate balance of the four basic bodily humors or fluids (blood, black bile, yellow bile, and phlegm). Melancholia of depression, for example, was caused by a preponderance of black bile; mentally dull or sluggish individuals came to be that way through an excess of phlegm. Unfortunately, the distinction between mental illness and mental retardation led to the belief commonly held among professionals that mentally retarded persons somehow enjoyed immunity to mental illness

as a specific function of the retardation (Nezu, Nezu & Gill-Weiss, 1992).

A second factor perpetuating the gap is the perception that any emotional problem observed in a mentally retarded person is actually a feature of the retardation itself. Moreover, the existence of intellectual deficits takes precedence over the presence of any psychiatric symptoms. In other words, mental retardation diagnostically over shadows any accompanying emotional disturbance.

When the uncertainty of primary causes in mental retardation is combined with the problems of clinical description in mental illness, an area of possible clinical confusion arises: symptomatic behaviors that, although produced by different causes, can have the same final symptom path way - abnormal behavior (Menolascino & McCann, 1983). People with mental retardation constitute a population that is most in need, but least in receipt, of quality mental health services. People with dual diagnosis of mental retardation and coexisting psychiatric or behavioral disorders have historically experienced particular difficulty in receiving mental health services. Several authors have described dually diagnosed individuals as falling between the circles in mental health and mental retardation service delivery systems.

Despite the weak interest displayed until recently by the professional community regarding mental illness in persons with mental retardation, the association between

maladaptive behavior and mental retardation has been noted in the literature for several decades.

Programs that serve clients with both mental retardation and mental illness contain different variables than programs addressing either mental retardation or mental illness alone. If a dually diagnosed client is in a program for mentally retarded individuals, there often is no means to address symptoms or behaviors stemming from psychiatric problems.

Programs designed to treat mental illness can be inappropriate, as they often fail to take into account the cognitive functioning level of the dually diagnosed individual. In assessing an environment for the dually diagnosed client, it is important to address some unique factors. A program for such a client must be designed to take into account the individuals cognitive deficits, repertoire of adaptive behaviors, and psychiatric symptomatology (Nezu et al., Gill-Weiss, 1992).

It has been reported that the mentally retarded (approximately 3% of our population) fall prey to essentially the same types of emotional illness that occur in people of normal intelligence. Some of the professional literature repeats the theme that the retarded may suffer the full range of psychoses, neuroses, personality disorders, behavior disorders, and adjustment reactions that befall the general population. Other workers have reported a higher incidence and a different spectrum of psychiatric

disorders among the retarded than in the general population. Some have suggested that there are qualitative differences as well, and that some psychiatric conditions seen in the retarded may represent unique syndromes. However, few studies have specifically examined psychiatric problems in this population (Eaton & Menolascino, 1982).

TABLE I

SIMILARITIES AND DIFFERENCES BETWEEN MENTAL RETARDATION AND MENTAL ILLNESS

Mental Retardation	Mental Illness
1. Retardation refers to subaverage intellectual.	1. Mental illness has nothing to do with IQ functioning. A person who is mentally ill may be a genius or may be subaverage.
2. Retardation refers to impairment in social adaption.	2. A mentally ill person may be very competent socially but may have a character disorder or other aberration.
3. Incidence: 3% of general population.	3. Incidence: 16-20% of general population.
4. Retardation is present at birth or usually occurs during the period of development.	4. Mental illness may have its onset at any age.
5. In mental retardation, the intellectual impairment is permanent but can be aided through full development of the person's potential.	5. Mental illness is often temporary and in may instances is reversible. It is not a developmental disability.

TABLE I (Continued)

6. A retarded person can usually be expected to behave rationally his or her operational level.	6. A mentally ill person may vacillate between normal and irrational behavior.
7. Erratic and/or violent behavior are rarely noted in retarded person secondary the cause of their retardation.	7. In some types of mental illness the presence of erratic to or even violent behavior is a hallmark (e.g., paranoid schizophrenia).
8. Symptoms of failure to adjust to societal demands are secondary to limited intelligence and social-adaptive responses.	8. Symptoms are secondary to a break with reality and/or emotional interference with responses.

Diagnostic clarifications were made of the wide variety of causative agents that can produce the symptoms of mental retardation. This work led to a sharpened focus on the similarities and differences between mental retardation and mental illness.

Increasing consensus was reached on an operational definition of mental illness; e.g., "An abnormality of behavior, emotions, or relationships which abnormalities are sufficiently marked and/or prolonged as to handicap the individual himself and/or distress his family or the community and which continue up to the time of assessment" (Menolascino & McCann, 1983, p. 13-14).

Research studies of the biomedical, educational, and psychosocial determinants of mental retardation attracted

ever increasing numbers of investigators to the scientific study of the personality characteristics in the retarded.

Because of the confusion as to what is meant by retardation and criminal behavior, the following legal and clinical behavior, are presented.

The American Association on Mental Deficiency (AAMD) defines retardation as the condition which exist when there is "significantly subaverage general intellectual functioning concurrent with deficits in adaptive behavior which is manifested during the developmental periods". In clarifying this definition, the AAMD defines "significant subaverage performance" as existing when an individual scores two standard deviations below the mean or average test. The AAMD defines adaptive behavior as "the effectiveness or degree with which the individual meets the standards of personal independence and social responsibility expected of his age and cultural group". Criminality refers to behavior considered under procedures of due process, and labeled in opposition to the established legal codes (Santamour & West, 1977, p. 2).

Most mental health and correctional professionals reject responsibility for the retarded offender, for a variety of reasons, they tend to view them as unsuitable for their programs and facilities.

> Mental hospitals claim such an offender is not mentally ill; the traditional institutions for the retarded complain that they do not have appropriate facilities for the offender. Correctional institutions would like to remove such persons from their population on the

> grounds that programs available in the correctional setting are totally inadequate and in many cases inappropriate for applications to retarded persons. (Menolascino, 1975, p. 59)

Borthwick, Duff, and Eyman (1990) states with regard to the accuracy of diagnosis, the first criterion is that the label of mental retardation is always accurate. Historically, this has been a difficult process, particularly among the mild and borderline cases of mental retardation. Second, clients must be accurately diagnosed as having a psychiatric disorder that can be isolated from the effects of low IQ and all clients who are psychiatrically disordered must be referred for and receive an accurate psychiatric evaluation.

There are clearly some strong associations between mental health diagnosis, behavior problems, and cognitive ability not related to social skill. Investigations should extend the research by examining specific psychiatric diagnosis and making comparisons with epidemiological data from non related population.

> Retarded citizens with mental illness have tended to fall into the gap which has increasingly separated mental retardation from mental health services. Those who have been closely identified with the fields of mental retardation and mental health have striven for years to clarify the distinction between mental retardation and mental illness. Although it is now clearly recognized that mental retardation is not a form of mental illness, this awareness is obviously not a guarantee against mental illness actually occurring in mentally retarded citizens. Thus, retarded citizens may develop emotional problems and/or mental illness just as can non retarded individuals. (Menolascino & McCann, 1983, p. 259)

The relationships between intelligence and criminal behavior are still unresolved, but the issues under controversy differ from those prevailing before and shortly after the first scientific investigations into the subject (Menolascino, 1975).

Rehabilitation/Training

The clipped head, as form of female degradation dating back to medieval inquisition, is no longer part of the repertoire of punishment which prison officials are prepared to inflict upon their female prisoners. Other former punishments such as restricted diet and solitary confinement are now rare in the modern prison. In general, society has made the lot of the female prisoners less harsh than that of the male prisoner. Most female prisons provide their inmates with many of the so-called good things. Not withstanding the good influences, however, it would be a mistake to assume that society does not intend the female prison to be a place of punishment (Giallombardo, 1966).

For whatever reasons, socioeconomic, judicial, or cultural, today's female offender differs from her predecessors of the first third of the century not only in attitude and aspirations, but in basic intelligence. Whereas, earlier investigations in the thirties found that females in the prison population exhibited inferior intelligence. Recent Labor Department figures indicate that approximately two-thirds of the women incarcerated in

federal institutions score above average on IQ test. Whether this brighter than average group will be returned to society as better citizens or better criminals will be largely determined by their experience in the correctional system. Vocational training becomes a particularly important factor in the progress for rehabilitation when it is recalled that the sharpest increase in female offenses has resulted from antisocial efforts to improve their economic position (Adler, 1975).

Enlightened programs are striving to equip women for finding legitimate routes to the financial and emotional success they are now demanding. Unless this occurs, we shall have to continue living with the alternative - a chronic recidivism which each year returns almost as many people as it discharges to prisons that daily grows bigger, more crowded, and less able to benefit their inmates. This chronic recidivism, which is as much a part of our current prison system as barbed wires and bars, is the result of and approach oriented toward locking people away and offering them little or no meaningful training, education, or counseling, aside from any moral consideration, this approach is important purely on financial grounds. If offenders who were imprisoned never returned to society again, there might be some economic (although not humane) justification for withholding help. But, in fact, most of them do return and, if their conditions on re-entry are no

better and perhaps even worse, the costs to society increase with each excursion (Adler, 1975).

The treatment of female prisoners reflects society's concept of women in general and of delinquent women in particular. Since the definition of women's proper role of inherently defines improper behavior, society's attitude toward female offender reflects its image of the role of women at any given time. During the colonial era, women's estate resulted from the circumstances and values inherent in that period. In a basically agrarian society with strong religious convictions, the women achieved a resemblance of egalitarianism. They achieved their status through vital contributions to the successful colonization of America. Their participation in various religious, economic, and political activities was natural in a frontier society where the roles of men and women were not sharply defined and where religious philosophy and organization accepted them as a valued member of the church and community. Because the prevailing attitudes toward women were shaped by the economic, social, and religious circumstances inherent in that simplistic environment, colonial women were not relegated solely to the role of wife and mother, nor were they considered to be dependent and inferior. In fact, according to the historian Page Smith,

> In the period of Colonial American history, from 1620 to the 1750's or 1760's, puritan women were figures of unquestioned worth and importance, partners with their husband in the economy of the farm and in the redemption of Christian doom even in the very different

> slave holder society of the south, women enjoyed unusual prestige. (Feinman, 1983, p. 13)

Society's view of women in general influenced the way in which female offenders were treated. In the colonial era when there was no sharp differentiation between the sex roles, male and female offenders were dealt with similarly in the courts and in the prisons.

The treatment of incarcerated women prior to 1873, when the first all women's penal institution opened, reflected society's unforgiving attitude towards nonconforming women. Female offenders were not deemed worthy of any attempt of reform even with the penitentiary system. The penitentiary system began at the end of the eighteenth century based on the concept of reform instead of punishment. The system rested on the belief that with religious instruction, persistence, and hard work, criminals would repent their sinful behavior and return to society reformed people. Convicted women were not considered capable of reform (Feinman, 1976).

The female offender, particularly the sexual deviant, was seen as a direct threat to social order and national stability. Many Americans believed that women offenders were born pure but had fallen, and thus were more depraved than male offenders. Because they deemed fallen women, unlike men, to be totally vile, lost and socially unredeemable, Americans treated female offenders more harshly than men. Moreover, women carried with them the

social stigma imposed upon them by an unforgiving society. The popular belief that delinquent women were more evil than men also stemmed from the conviction that men were created by God to be aggressive and women were created by God to be passive and domestic. Thus, it was believed that the female offender had gone against her natural tendencies. As such, women in prison were not deemed capable of reform and redemption. The Reverend James B. Finley, a prison Chaplain in Ohio, expressed the prevailing attitude when he wrote in 1846,

> But no one, without experience, can tell the obduracy of the female heart when hardened and lost in sin. A woman falls from a higher point of perfection so she sinks to a profound depth of misery than man. (Feinman, 1976, p. 43)

Due to these attitudes, women were incarcerated under deplorable and unsanitary conditions. Since classification of prisoners did not exist at that time, women of all ages, races, and charges were housed together. Their neglect was due to prevailing hostile attitudes and the wish to literally keep them out of sight. Congestion increased and conditions grew worse, causing B. C. Smith's Chaplain of Auburn Penitentiary in the 1830's to proclaim that to be a woman prisoner was worse than death. The policy of neglect concerning incarcerated women meant that women received no instruction, exercise, or recreation (Feinman, 1976).

While most people did not believe that female offenders could be redeemed, many women reformers throughout the nineteenth century attempted to improve the conditions of

incarcerated women. The movement for separate women's correction began before the civil war in response to scandals involving women imprisoned in male facilities and guarded by men. Because the reformer believed that men had abused and corrupted women, they also believed that only women could help and redeem their fallen sisters (Feinman, 1976).

Many of these American reformers who attempted to improve the lot of women prisoners were influenced by Mrs. Elizabeth Gumey Fry, a Quaker who lived in London in the early nineteenth century. From their experience with the women in Newgate Prison, Fry and others who worked with her changed their minds about the salvation of female offenders. The results of their efforts proved to them that women even the most degraded, were redeemable. Fry's work foreshadowed the House of Refuge movement. An American reformer, John Griscom, visited Fry at Newgate Prison and was impressed with her program. Upon his return to New York City, he and some friends organized the Society for the Reformation and, in 1825, established the House of Refuge (Feinman, 1976).

There after, many private and religious institutions developed to help reform the wayward female. Included among these were the Magdalen Society and the Women's Prison Association. The Magdalen Home was established to provide an alternative to prison for women deemed capable of redemption. It's purpose was to inculcate morality and purity in the wayward woman. The women were expected to

reform through religious instruction, education, and work (Feinman, 1976).

The Women's Prison Association (WPA) and the Isaac T. Hopper Home were founded in the belief that female offenders could only be redeemed if they were both separated from men and supervised by virtuous women. The WPA and Hopper Home also armed to reform offenders, to improve conditions of women in prisons, and to find employment for those who were discharged. WPA and Hopper Home provided the female ex-offender with food, clothing, shelter, education, and religious services and attempted to find them jobs (Feinman, 1976).

Until 1873, except for the private and religious institutions that housed wayward females, women were incarcerated under the supervision of men. Some short-lived experiments took place by those who believed women could only be rehabilitated if supervised by women.

In 1822, Maryland implemented an innovation in a prison that incarcerated women. Utilizing the ideas of Fry, Maryland appointed a matron, Mrs. Rachel Derijos to run the women's department at the Baltimore Penitentiary where she introduced a program of industry, education, and religious instruction. A reduction in the number of these who reported sick in the institutions and the number of recommitments indicated that the system of cleanliness, order, and programming had a positive effect. However, the

appointment of Derijo did not represent a definitive national or local trend.

It was not until 1922, years later, that New York State appointed it's second prison matron, the first in 1837. In 1844 Mrs. Elizabeth Farnhan was appointed matron at Sing Sing. Influenced by Fry, Farnhan believed that environmental conditions, not inheritance caused criminal behavior. Thus she believed that a new environment, especially one that provided education, was needed to rehabilitate women prisoners, instead of harsh treatment and punishment.

To change the environment, Farnhan (Lawrence, 1975) broke tradition and grouped women in the chapel every morning where she gave them instructions in American history, physiology, and personal hygiene. She organized a library which provided well behaved literate women with books to read and picture books for the illiterates. Those who could read were instructed to read aloud to working women. Farnhan also encouraged the women to become involved in handcrafts. And finally, she hung pictures and maps, added flowers pots and lamps, observed holidays, and introduced a piano.

Although Farnhan ended the silence system because she preferred the incentive system, she recognized the need for discipline. Therefore, she retained corporal punishment, strait jackets, and solitary confinement for those who did not respond to the incentive system.

The treatment of women in prison in the nineteenth century was generally primitive and punitive; they lived in overcrowded conditions, with poor food and medical care, little or no educational or vocational training, and small hope for employment upon discharge.

Treatment in the correctional system has not been as effective as intended. The modern philosophy is that the criminal is sick and can be cured by certain treatment procedures and turned back into the society. But nobody has control over another person's attitudes. Treatment programs are wonderful, but they have not really produced the desired effects.

What is needed is a preparation for these people to be sent back into society so that they were entitled to their own life style, and so that they are prepared to deal with life as it is. They must know how to do something that they can be paid for doing, because it has come up time and again that we need money to do anything. We cannot operate without money no matter what the programs. Unless these women have the money to live a normal life style, going to work like everybody else, they are going to do something to get money. This vicious cycle goes on and on, out and back in again, with no basic changes in ability to survive any other way.

Most women are employable. Most women want a job. They would rather go back into society and work at some job that would pay them a weekly salary. But there are many

women who do not know how to do anything that can earn money. That is what we are lacking in correctional systems - steady vocational programs that will teach women something that they can do and be paid a decent salary for doing (Lawrence, 1975).

Women in the reform movements of that era advocated separate female penal institutions where good women would teach the delinquents to be proper women through love, religion, education and work.

The first reformatory for women opened in Indiana in 1873, followed by one in Massachusetts in 1877. New York in 1901, New Jersey in 1913, and the federal reformatory in Alderson, West Virginia, in 1927. They were built in a campus layout with cottages. The cottage plan was designed to create a home like environment under the supervision of matrons, also made classification easier and training for domestic work more effective. Rehabilitation programs focused on traditional skills associated with women; homemaking skills such as cooking, laundry, sewing, cleaning, and practical nursing (Feinman, 1980).

Rehabilitation programs for incarcerated women continue to be designed to dovetail with the dominant social values of the dominant white middle/upper class, Protestant American core culture, not with the socioeconomic realities of either the background of the woman in prison or the neighborhoods to which they return.

Presently, programs to rehabilitate incarcerated women adhere as in the past, to traditional roles for women, training in cooking, sewing, waitressing, homemaking, and a new one, typing. These programs with the exception of typing, represent the continuance of a value system that expects women to be domestic and homemakers; the value that continues to ignore the fact that imprisoned women do not fit into the myth of the true womanhood.

One sees that throughout the history of the treatment of women in prison, programs to rehabilitate them have been linked to the desired role for women; wife/mother/homemaker. Women have been expected to marry, have children, and stay at home while their husbands supported them and the children. However, imprisoned women have rarely met the ideal of true womanhood. Married or not, mothers or childless, they have been poor and forced to earn a living with whatever resources they have had (Feinman, 1983).

The term prison reform has come to refer to efforts to improve conditions, but it has a more basic meaning as well; the use of prisons to reform, rather than merely to detain criminals. Advocates of prison reform in the early nineteenth century favored the establishment of prisons which, through their influence on prisoner's behavior, would encourage repentance. The penitentiary, they believe, best combined the goals of punishing criminals and re-forming their characters so that they would not break the law again. The penitentiary ideal consisted of extreme isolation of

criminals from society, extensive supervision over their daily lives, and compulsory productive labor (Freedman, 1981).

Women prison reformers insisted on the importance of teaching inmates some remunerative skills so that they would not be tempted to commit crimes after their release (Freedman, 1981).

Women's prison reform has lagged far behind efforts for males. During the middle years of the nineteenth century, reform schools for both boys and girls became popular. The United States adult reformatory movement, starting with Elmira Reformatory and being so well known and replicated, was actually patterned in part after a reformatory for women.

Zebulon Brockway (Freedman, 1981), who later opened Elmira Reformatory, was superintendent of the Detroit House of Correction in the 1860's. In 1869, he separated inmates by gender when he opened the Detroit House of Shelter for Women. This is generally credited as the first reformatory for women in the United States. The women were housed in a detached building in a family like atmosphere and were provided education and training. This was a significant departure from earlier attitudes that women offenders were fallen women incapable of improvement (Freedman, 1981).

Indiana Women's Prison opened in 1873 and embraced the revolutionary notion that women criminals should be rehabilitated rather than punished. Four more institutions

for women were opened over the next forty years and all were founded on the notion that the essential ingredient was to bring discipline and regularity into their lives (Oklahoma Department of Corrections Policy Handbook, 1988).

The progressive movement began developing in the early 1900's. It incorporated scientific and medical knowledge, as well as psychiatrists and social workers, in an attempt to evaluate female inmates. The Northern states were the greatest proponents at this method and because of industrialism, could afford to adhere more closely to the ideal than the rural Southern states. The progressive period saw the advent of the first generation of female administrations who were specifically interested in a career in corrections.

The dearth of information about incarcerated females during this century makes an informative section difficult. Many nineteenth century prisons published bulky annual reports brimming with detail, unfortunately, early twentieth century reports were not as complete (Hudley, 1988).

The literature on women's prisons and the female prisoners is long on impressions and short on empirical data. A sizable portion may be subsumed under these general headings: first, articles which are programmatic in nature; second, autobiographical accounts of released inmates; third, historical accounts; fourth, sensational exposes' and, finally, attempts to establish the extent of the criminality of women.

The demands for reform have come primarily from groups outside the criminal justice system, often from groups with widely divergent interests and concerns.

Programming that should help reintegrate the female as a functioning member of society usually does not consider her special needs but rather imposes white, middle-class, sexist values upon her, whether they fit her needs or not. They rarely take into account her diverse problems. Traditionally, programming has been limited to basic education plus taken sex-stereotyped vocational programs such as beauty culture, secretarial or office training and domestic pursuits. The female role of dependency is the only acceptable behavior.

The history of women's programs shows an early shift from punishment to treatment. In the late 19th century social reformers urged the establishment of separate institutions for women.

From recent studies, we know that the incarcerated women is often the sole support of herself and her family. During incarceration she is alienated from her family and friends by walls and/or miles, which tend to destroy mother-child relationships. Yet, she is expected upon release to step right back into these roles as if she had not been away, and so are her children. She is given little or no constructive help in altering her preincarceration problems such as understanding herself physically and psychologically, remedying her lack of education, or

attaining marketable skills. Nevertheless, she is expected to be a stable, self-supporting contributing member of society. In addition, she faces the role of confusion stimulated by the focus on women as a whole.

The taxpayer finds it difficult to understand why her hard earned money should be used to establish educational and vocational programming for individuals convicted by the courts of perpetrating criminal acts against society. They fail to realize that 97 percent of all prisoners are eventually released back into society, where 40 to 70 percent of them commit new crimes.

If we are to break the cyclical nature of crime, prisons, crime, we must look at the costs, not as a monetary personal deprivation, but rather as an investment in the future (Sorensen, 1981).

Because women criminals are viewed differently by our society, prison reform for women has had a different emphasis. Whereas male criminals are usually feared as dangerous men in the eyes of society, the disgraced and dishonored woman has more often been considered pathetic. This view has its roots in the fact that women's most frequent offenders were violations of the normative code with respect to sex and drunkenness. Thus, reformation meant something quite different for women than for men. Treatment for women meant instilling in them certain standards at sexual morality and sobriety and preparing them for their duties as mothers and homemakers.

This attitude was basis to the reformatory movement which supported new institutions for delinquent women and children late in the 19th century. Thus, the first reformatory for men, opened at Elmira, New York, in 1876, was intended for felons who were still young enough to offer hope of their being reclaimed. The first reformatories for women, opened at about the same time, were established from very different motives. It was young women who were "sex delinquents" and "inebriates," not felons - for whom prison reform was considered to be most needed (Crites, 1974, p. 94).

At the turn of the century, education in prisons was practically unknown. Wardens, in self-righteous agreement with the more or less law-abiding majority, frowned on coddling their charges.

Prison education had its beginnings when chaplains found that between a third and half of the prisoners to whom they gave Bibles could not read. Some of the Chaplains began teaching reading and writing for purely religious reasons.

Many prison school pupils came from a school background of social promotions. They are not retarded in grade completed but are revealed by test to have an educational achievement grossly below that for the grade in which they were last registered. Vocational training opportunities in correctional facilities range from formal education, as in a vocational-technical curriculum to on-the-job training and

participation in a penal industry (Rutherford, Howell, Fredericks, & Evans, 1985). Special Education in the Most Restrictive Environment designated six components that were felt to be critical to the implementation of meaningful correctional special education program. These were:

1. procedures for conducting functional assessments of the skills and learning needs of handicapped offenders;
2. the existence of a curriculum that teaches functional academic and daily living skills;
3. the inclusion of vocational special education in the curriculum;
4. the existence of transitional programs and procedures between correctional programs and the community;
5. the presence of a comprehensive system for providing institutional and community services to handicapped offenders; and
6. the provision of inservice and preservice training for correctional educators in special education. (p. 59)

Platt et al. (1982) advocated a holistic approach to correctional vocational special education, in which students' academic, vocational, and social skills training is unified by a focus on functional vocational programming. They also emphasized the importance of ensuring that handicapped offenders acquire marketable skills, and that vocational training includes assistance in making vocational choices. Such a focus would not only integrate the total curriculum, it also could encourage the development of functional assessment procedures and a functional curriculum based on the learning and like needed of handicapped offenders. Perhaps the acquisition of truly functional vocational and daily living skills would lower the

recidivism rate, which currently is about 64% for adult inmates and appears to be no lower for handicapped offenders.

An effective service program to be correct and rehabilitate the retarded offender must include the elements of prevention, advocacy, and treatment. The last offers the most measurable and recognizable result. A treatment program that interrelates these elements is to be preferred because it recognized that the treatment must be flexible in order to permit highly individualized preventative - treatment challenges (Menolascino, 1975).

Menninger (1989) stated: Research conducted either by phone interview or site visit, has revealed that upon further investigation many of the programs are little more than remedial education and/or vocational training for individuals with delayed or borderline levels of intelligence. Seldom are these programs for the truly retarded offender. No prison in America, at the time of this writing is using a developmental approach to the understanding of and programming for the retarded inmates. Such an approach would be the most logical in that it is oriented toward the identification and development of like skills.

Records offered for the lack of programming for retarded offenders in the correctional setting are numerous and include lack of sufficient funding, the ease with which retarded inmates may be swept under the carpet and the ill

founded belief that rehabilitation with this group is not possible. Indeed the test is not of rehabilitation but rather habilitation. Very often the assumption is made that it is not possible to habilitate this group because levels of competency cannot be changed. This assumption is the underlying reason for the lack of housing of inmates with little opportunity for training and the assignment of retarded offenders to menial institutional maintenance chores. There is little action taken in teaching retarded inmates new skills (Santamour & West, 1977).

Programming for the Offender

There is little disagreement among professionals as to what the treatment process for offenders should include and which goals it should set. However, there is disagreement with the term rehabilitation as it is used in corrections. In the criminal justice system today rehabilitation refers to the process of restoring the individual to behaviors and values that are socially acceptable. Such behaviors and values are, by definition, not illegal. It is assumed in the rehabilitative process that the individual formerly displayed appropriate behavior and held socially acceptable values and temporarily laid them aside.

The problem is very different for the child or adult with retardation caught up in the justice system. People with retardation cannot be assumed to have learned socially acceptable behaviors and values. For these persons the lag

in their developmental processes often results in the absence and certain basic social and cognitive skills. Their learning process has often been hit or miss. Therefore, their need is not so much to relearn acceptable behaviors and values but to become acquainted with them. The term habilitation, therefore, is more appropriate than rehabilitation (Santamour, 1986).

A Best Practices Approach for an Effective Correctional Special Education Program (Rutherford et al., 1985) outlines as having the following components:

1. Functional Assessments - The use of curriculum based measures and criterion referenced test to assess the inmate's skill deficit. The emphasis is placed on continuous and systematic collection of data through direct observation and evaluation of the inmate in naturalistic settings.
2. Functional Curriculum - Classes and programs that meet the inmate's needs based on his present levels of performance in the areas of social, vocational and adult independent living skills. An emphasis is placed on the acquisition and retention of useable skills and not on advancement of grade or achievement levels.
3. Vocational Special Education - Accessibility to vocational and technical programs which are designed to teach marketable skills. Such programs may require curricular adaptation to allow for maximal learning and participation by the handicapped offender. An emphasis is placed on activities and tasks which meet the needs for community employment.
4. Transitional Programs - Facilitation of communication and information sharing between community and correctional agencies. A three phase process of referral, program placement and follow up is stressed. Interagency cooperation and collaboration is a key to the success of this component.
5. Comprehensive Systems - Inclusion and consideration of a wide range of information pertinent to the handicapped offender in the decision making processes of sentencing, institutional placement and release. A

coordinated effort in the program planning and provision of education services, from entry to release, within the criminal justice system is stressed.

6. Correctional Special Education Training - Special educations training for correctional education and others involved in the direct or indirect provision of educational services for handicapped offenders. (p. 70)

Instruction and training is structured into four curricular components: work adjustment, on-the-job training, contract services, and extension programs. Involvement by the inmates in these components provides a setting to teach and observe good work behaviors. Inmates are expected to use a time clock, come to work on time, work at a maximal level of effort and quality, follow the supervisor's instructions, work cooperatively with co-workers, take breaks as directed, leave work at the designated time, and dress appropriately.

Through the work adjustment curriculum, inmates learn job seeking and maintenance behavior in a classroom setting and as they perform their daily assigned job duties. Classroom activities help the inmates become familiar with services in the community that may assist them in obtaining and maintaining employment. An emphasis is placed on interviewing, applications and job retention methods. On-the-job training is provided in the areas of horticulture and vehicle cleaning.

Fulfillment of contracted services, solicited from vendors in the community, is accomplished in the work activity center. Inmates are given the opportunity to

experience working in a more structures work setting. They work on tasks involving assembly work, sorting, disassembling, and packaging.

Extension programs are available to inmates who have demonstrated a successful and positive work record for programs offered within the Habilitation Unit. Such inmates must be capable of receiving training under the supervision of staff not assigned to the unit. Extension programs are provided in food services, laundry, and small engine repair (Townley & Grier, 1991).

Vocational Rehabilitation

Since the majority of female ex-offenders must support themselves and often others as well, vocational training is also a matter of great concern to prison officials. Vocational rehabilitation programs for women share all the problems of those for men: training oriented toward institutional maintenance, lack of up-to-date equipment, lack of incentive pay, and lack of placement services. However, there are peculiar problems which vocational programs for women must confront, and they are not being confronted by women's institutions today.

The first problem is that most women do not really view themselves as wage earners. Men are expected to prepare for an occupational role, society conditions a woman's role as wage earner to be secondary to her traditional role of mother and homemaker. As a result, legislators and

correction officials tend to provide men's institutions with the best vocational facilities their budgets will allow, while teaching women merely to cook, sew, and clean.

The second problem, is that, even when efforts are made to provide reasonably up-to-date vocational skills, the available training is oriented toward women's work. Post-prison job placement assistance is practically non existent for women. The parolee with limited skills, a prison record, and a condition of parole stipulating that she must be employed is in no position to choose among employers, and she is offered little guidance in finding the kinds of job situations which offer stability and security (Crites, 1974).

The importance of a training program can potentially be profound from both a social and an economic standpoint. One hypothesis is that recidivists commit additional offenses after leaving the correction facility because they are not adequately trained to earn more that a subsistence living, thus leading to crimes causing varying degrees of misery, ranging from financial loss to loss of life. The economic loss is also significant. Not only is the individual recidivist failing to make an economic contribution, but she is costing society an average of $13,000 (General Accounting Office Report, 1979) per year to be maintained in a correctional facility (Platt et al., 1982).

The philosophy of the U.S. Office of Education's Office of Special Education and Rehabilitation Services (OSERS)

sponsored project, Educational and Vocational Intervention with Incarcerated Handicapped, is to assist educationally handicapped inmates in the acquisition of both vocational and survival skills.

Toward this goal individualization programs are developed based upon both educational and vocational evaluation. Academic tasks essential to the vocational area that the inmate is to be trained in are identified, so that these skills may be taught in the academic setting. Vocational training site instruction is modified to accommodate the strengths and weaknesses of the inmate. Essential life function, or survival skills, are taught in the academic area and in a work adjustment group emphasizing interpersonal skills, career awareness skills, job seeking and job keeping skills. In both cases the individuals strengths are emphasized.

Although vocational skills are emphasized, academic skills are viewed as essential. It is the goal of the academic curriculum implementation to teach specific academic skills to enhance the vocational training areas we well as develop necessary life function skills. Thus vocational education and special education are utilized to complement one another with the goals of developing functional skills in the inmate. It seems fruitless to continue to emphasize academic skills to individuals who have a prolonged history of failure in academics, rather, academics are secondary to the development of vocational

skills. This strategy has the effect of increasing motivation, as the relevance of the curriculum is evident to the inmate. To the corrections education professional such an emphasis should also provide motivation as the relevance of the curriculum becomes apparent.

The major treatment goal of correctional education programs serving retarded offenders is to develop and implement a system of services specifically designed to meet the needs of those offenders. The ultimate goal is the reentry of offenders with retardation into the community as independent, law-abiding and better adjusted individuals (Nelson et al., 1987).

Prison programs are in recession these days. To make matters worse existing programs are at limited availability to inmates. Most of them focus on an inmate's past life and future prospects, they seek to rectify yesterday's problems in order to build a better tomorrow. Too often, however, the struggle for personal survival today, in the here-and-now world of the prison, distracts the prisoners from the few rehabilitation program that do exist and might be of benefit to her. To make prison programs more relevant and useful, corrections must 1) operate prisons which stress remains within manageable limits and is handled maturely, and 2) offer an adequate number of programs that enhance the prisoner's capacity to cope maturely with life stresses both now in prison and later in the free world (Sechrest, White, & Brown, 1979).

Reforming criminals is a formidable job. Persistent felons, who are the majority in any maximum security prison population, are especially hard to reach. Yet they are desperately in need of help if they are to maintain hope for a constructive future.

Hope is an especially rare commodity in today's prisons. The view that nothing works in corrections - a view now held by a sizeable contingent of prison practitioners as well as by prison critics - permits us to warehouse without pretense and to call it justice.

A view was reached by the Panel on Research on Rehabilitative Techniques (Sechrest, White, & Brown, 1979) convened by the National Academy of Sciences. Why do most programs fail? Many fail because they offer too little too late to attract a prisoner's attention and motivate her to change her style of life. These programs often seen irrelevant in the prison context, where the quality at one's life normally is unaltered by performance in school or work. Rehabilitative goals are defined in utopian terms, with inmates forced to endure programs that do not address their real concerns.

Some rehabilitation programs do indeed work for some offenders under some conditions. The problem is that differential effects are often masked by classification and assignment practices that mix amenable and non amenable inmates in the same program (Johnson, 1987).

Specialist in rehabilitation work have long known that

the critical factor in their relative success or failure is the mental attitude of the client.

Why do some ex-inmates fail and others succeed when they are released from prison? There are many different reasons, for inmates are by no means one class of people, and they don't fall into distinct groups (Chivers & Woodward, 1976).

The key to success after prison, then obviously is finding a legal way to make a living. Vocational training has been a part of all federal and most state educational and rehabilitation programs for many years. However, many prisons have trained their inmates primarily for two purposes: to provide for the needs of the institution itself (providing food services, maintaining grounds and buildings, for example) and to provide for certain specialized needs of the state (making cotton mattresses, for example). It's fair to say, however, that a woman faces heavy odds when she leaves prison and starts looking for a job making cotton mattresses. Vocational education courses should be set up to train women in occupations for which there is known to be a demand. The object is simply to increase the odds that a woman who is released will be employed and not just be out on the street looking for work or looking for trouble in other words, to give her something approaching an even break, which is all most of these women want anyway.

Vocational education or occupational training is the

best means of helping these women adapt to the process of getting along in the community.

The purpose of vocational training is to provide a special program for selected inmates whose inability to profit from routine training would find them entering the current labor market with severe handicaps. It should be designed to provide those selected with the proper social attitudes, motivation, and skills necessary for gainful employment in occupations in the area to which they are returning.

Before enrollment in certain programs, a committee of prison officials should carefully screen all application, taking into consideration each woman's tested ability, work experience, education, and attitude.

Because certain vocational program graduates must be licensed by the state before they can practice (cosmetology for instance), arrangements for accreditation of all schools should be insured before the instigation of such programs. It is sometimes possible to become affiliated with a accredited school in the community. Other cases may require legislative acts.

Although vocational training is geared to the employment needs of the community and state to which the inmate will return. There are certain vocations that are needed throughout the country and are especially suited to women. Two of these are cosmetology and the paramedical field.

Occupational training is one of the major rehabilitative roles of the correctional institution. Many offenders see it as the only rehabilitative or constructive activity the institution has to offer. Inmates will ask for trade training when they will ask for nothing else. It is therefore an entering wedge to other phases of the program. Many inmates find work in which they are interested, rapidly develop skills, gain self respect, and gradually begin to think more of a future at that occupation than at criminal activities. In many instances, it is a skill acquired in prison which is responsible for changed attitudes and outlooks.

A functional curriculum is a curriculum that prepares a student for adult living. It encompasses three major domains; independent living skills,social skills, and vocational skills. A functional curriculum is one alternative to the traditional high school curriculum that focuses more on abstraction and includes subject matter that a special education student may find irrelevant.

Those females who are incarcerated, both handicapped and non handicapped, often require instruction in a functional statistics reported demographic data that indicate considerable deficits in daily living skills among inmates.

A functional curriculum need not replace all traditional academic coursework. The decision as to which subject it replaces depends on the functional abilities and

needs of the individual student (Rutherford et al., 1985).

History of Rehabilitation

Nobody knows conclusively and precisely the effectiveness of correctional education. Statistics vary from one study to the next. When one defines success for research purposes as the absence of past-release felony convictions of parole violations, some studies indicate that inmates who were in prison school succeed more than those who were not, while other studies have the opposite finding. Analysis usually indicates that these results are due largely to the selection of inmates for prison school, rather than due just to the effects of the school.

Despite these sources of contradictory findings in gross comparisons of releases, there is some evidence of a favorable impact from correctional education (Glaser, 1966).

Federal Definition of Developmental Disabilities

The Seven Major Life Activities

Self Care: A person who has a long term condition which requires that person to need significant assistance to look after personal needs such as food, hygiene, and appearance.

Receptive and Expressive Language: A person who has a long term condition which prevents that person from

effectively communicating with another person, a person with special skill or with a mechanical device, or a long term condition which prevents him/her from articulating his/her thoughts. "Language" encompasses reading, writing, listening, and speaking as well as cognitive skills necessary for receptive language.

Learning: A person who has a long term condition which seriously interferes with cognition, visual, or oral communication, or use of hands to the extent that special intervention or special programs are required to aide that person in learning.

Mobility: A person who has a long term condition which impairs the ability to use fine and/or gross motor skills to the extent that assistance of another person and/or mechanical device is needed in order for the individual to move from place to place.

Self-Direction: A person who has a long term condition which requires that person to need assistance in being able to make independent decisions concerning social and individual activities and/or handling personal finances and/or protecting his/her own self-interest.

Capacity for Independent Living: A person who has a long term condition that limits the person from performing normal societal roles of which makes it unsafe for that person to live alone to such an extent that assistance, supervision or presence of a second person is required more than half the time.

Economic Self-Sufficiency: A person who has a long term condition which prevents that person from working in a regular employment or which limits his or her productive capacity to such an extent that it is insufficient for self support.

TABLE II

CHARACTERISTICS OF A MENTALLY RETARDED OFFENDER

May not communicate at age level.
- Limited vocabulary; may have speech defect.
- Difficulty understanding or answering questions.

Inability to read or write.
- Mimics responses or answers.

May Not Behave at Age Level.
- Prefers younger persons (children) for friends.
- Inappropriate interactions with peers or opposite sex.
- Easily influenced by and anxious to please others.
- Difficulty making change, using telephone, telling time, etc.
- Low frustration tolerance.

May Not Understand consequences of Situations
- Doesn't appreciate seriousness of situations.
- May not reflect on actions: acts impulsively.
- May try to please others and disregard legality of actions.
- A follower, not initiator of criminal activity.

TABLE II (Continued)

May Not Behave Appropriately in Criminal Justice Situations
May not understand rights.
May be overly willing to confess.
Difficulty recalling facts or details of offense.
Tendency to be overwhelmed by police authority.
May not want disability to be noticed.
Says what he thinks others want to hear. (New York Department of Corrections [DOC], 1991)

The ensuing characteristics of a mentally retarded offender information pertains to states who have developed and published materials applicable to the population under study.

Texas

The most significant case involving offenders with mental retardation was the Texas case (Ruiz v. Estelle, 1977), in which for the first time in history a state department of correction developed a screening process to identify inmates with mental retardation and a program to provide individual treatment. The process separates the offender with mental retardation from the regular prison population, thereby safeguarding the retarded offender's vulnerability.

In addition, it provides developmental programming based on the individual's adaptive abilities and emotional stability. Each inmate, regardless of age, receives vocational and educational programming based on an individual vocational and/or educational plan.

Over the last decade, attention has been focused

increasingly upon the plight of mentally retarded (MR) offenders. These are individuals with the judicial, probation/parole, or corrections systems who have been diagnosed as mentally retarded. Legal standards for mental retardation fluctuate between states. However, they pivot on a psychometric demonstration of significant intellectual deficiency in tandem with a clinical determination of impaired adaptive behavior. MR offenders therefore compose a rather heterogeneous group, both in terms of degree of developmental delay and criminal history.

Increasingly, many have come to question the traditional commitment of mentally retarded offenders to state mental retardation facilities, and have likewise protested their incarceration with the regular prison population.

The survey pool of 100 consisted of administrators who head each state's mental retardation and adult corrections services. Forty-nine states (98%) were represented: only in Wyoming did neither administrator choose to participate.

The survey inquired whether residential programs existed in the state for MR offenders, and posed 16 questions about these services. It addressed only residential programs designed specifically for this population. Four basic categories of information were solicited:

Program identification

Program characteristics

Treatment features

Future trends

Programs specifically for M.R. offenders now exist in 14 states. In the 12 states that have established their programs within the confines of corrections or mental retardation institutions, these tend to be located at 1-3 sites within the states. Typically, the total statewide institutional capacity is less than 50. Oregon and Washington accommodate between 75 and 100 M.R. offenders in such special programs, while California's capacity is 120-150. The total nationwide capacity of institutional sites is about 737. Currently only Wisconsin's institutional program is being expanded. In that state, a former correction facility has been converted into the Wisconsin Resource Center. In New York, a network of Regional Behavioral Treatment Units have been planned, and one was opened last year. Florida has asked it's legislature to fund one intensive treatment center for violent M.R. offenders. The Texas Department of Corrections plans to develop an intensive treatment program over the next two years (Denkowski et al., 1983).

Minnesota

The Minnesota Correctional Institutional for Women at Shakopee has developed a unique off-grounds training program to assist women residents in making a successful transition back into the community. For the qualified residents, the

program provides an individually planned vocational program and an opportunity for work adjustment counseling. During its three years of operation, 51 women and 50 community, schools, and businesses have participated in the training. Forty-five women have successfully completed the program (Burseth, 1976).

Currently, program residents are trained in occupations that include: computer programmer at Brown Institute, typist at Webb Publishing, machine operator at Dakota County Area Technical Vocational School, nurse's aid at the Occupational Training Center, Keypunch operator, and animal keeper at Como Park Zoo.

The program Director, Ms. Littlefield, begins to define the candidates long range goal and develop a plan to achieve this goal. A plan may include a chemical dependency program, vocational evaluation, formal vocational training, on-the-job training or any combination of the above. All programs are adjusted to a resident's time in the institution.

According to the Director, most women have low self-esteem and tend to under estimate their capabilities. Therefore she tries to find their wildest dream and see if it's within the realm of possibly (Burseth, 1976).

If uncertain of her interest and capabilities, the resident is usually referred to a counselor at the Division of Vocational Rehabilitation (DVR) where she is tested in vocational and academic skills.

Next, a proposal is written for presentation to the institution Classification Committee composed of a number of institution staff. The proposal must include a recommendation from the Program Director, the resident's team and other women participating in the program.

Following a proposal's review and approval, the Director and staff begin an extensive effort to find local businesses and schools willing to assist in achieving the participant's goals.

The off-ground training program was originally initiated through the Shakoppee School District utilizing special needs funds of the Vocational Education Act.

The Director states the "community has been very cooperative about the program. After they have met the residents and heard the support they are comfortable about signing the (Agency Custody) Agreement" (Burseth, 1976, p. 5). The Custody Agreement requires a training agency to take responsibility for the whereabouts of the resident participant and to provide a productively structured program. The participant's progress is monthly.

Opened in 1986, this women's prison creates opportunities for inmates to increase work and living skills. The institution states its desired results: to release women with sufficient skills to lead useful, crime free lives and cope with society, never to return.

Shakoppee (Burseth, 1976) encourages behavior change through voluntary participation in programs designed to meet

the unique needs of women offenders, the relevant programs are listed:

Industry - relevant work experience in data entry, word processing, keypunch, horticulture, light assembly, garment manufacturing, as well as institutional maintenance, gardening and food service;

Education - variety of academic, art and vocational/educational opportunities, including Adult Basic Education and General Educational Development. The classes are offered by local vocational, community college and creative arts schools, as well as by correspondence course.

Independent Living Center - housing area consisting of six 2 bedroom units each with kitchenette, living area and bathroom. Program includes off grounds vocational and academic opportunities, volunteer community projects, money management training, and other activities to ease the transition back to the community.

South Carolina

The Habilitation Unit for Developmentally Disabled offenders is both a centralized department program of the South Carolina Department of Corrections (SCDC) and a functional unit of Stevenson Correctional Institution (SCI). Initiated in 1975 as the Special Learning Unit, it is the oldest program of its type within the United States and has been recognized as a "Model Program" by the National Institute of Corrections (U.S. Dept. of Justice, 1989).

The purpose of the unit is to provide comprehensive diagnostic and evaluation services for inmates suspected of being developmentally disabled. Long term treatment services are then provided for those inmates who have been identified as meeting the criteria for such a disability.

The target population for Habilitation Unit Services is any inmate of the SCDC who has either single or multiple intellectual or physical impairments that substantially limit his ability to adjust or function independently in a correctional environment. The inmate must have demonstrated an inability to benefit from institutionally based program services designed to facilitate adjustment to incarceration and enhance self improvement (United States [U.S.] Department of Justice, 1992).

Florida

The following feedback was provided by Dr. Roderick Hall, Director, Mental Health Services, and Jim Knepton, Research Planning Administrator for the Correctional Education School Authority (Florida Department of Corrections [DOC], 1992).

Low level of mental ability generally defined as a measured level of intellectual functioning at or below 75.

Response: The Florida Department of Corrections does not use this kind of measurement because it is inappropriate professional practice which does not eliminate cultural bias.

Impaired level of adaptive behavior (social, communication and daily living skills).

Response: Assessment data on the impaired level of adaptive behavior has been collected since last June 1992, but not yet stored on the computer system of the Department of Corrections.

Academic skills which fall below the sixth grade level.

Response: In Florida's correctional system, there is one facility which houses maximum security female inmates, Browad Correctional Institutional (BCI). BCI is located in South Florida, and currently has approximately 600 inmates. Forty-three percent (43%) of inmates there has an academic skills level below 6th grade (Florida DOC, 1992).

Georgia

The population of inmates with 70 or lower IQ is disproportionately non-white and older than the general population. Academic standards in Georgia for minority students who now would be in the 36 year old age group have been poor and are currently being addressed with the literacy Action Task Force. Also of interest is the fact that many of the inmates come from rural areas of the state where education systems have traditionally been lagging behind in grade achievement.

The inmates identified in the report were assigned throughout the Georgia prison system. There did not appear to be any specialized assignments for these inmates, and

while some collected large numbers of disciplinary reports, the overall group actually received fewer than the general population.

If one were the only Disciplinary Reports as an indication of an inmate's adjustment to prison conditions, inmates who are intellectually impaired would not be distinguished from the ordinary general population (Kissell, 1988).

Oklahoma

State Overview: In the late nineteenth century, prison services were contracted out to Kansas by the territory of Oklahoma. This was the practice until the first governor of Oklahoma, Charles N. Haskell, was able to convince the legislature to appropriate money to purchase land and build a prison. At that time 13 female offenders from Oklahoma were being maintained in the Lansing, Kansas Prison at a cost of 48 cents per day. In 1909 McAlester became the site of the first prison. The total female population, according to the annual report of the Board of Charities and Corrections, was 17. Of these offenders, eight were white and nine were black (Oklahoma Department of Corrections [ODOC], 1990).

In 1910-1911 the total population of female offenders was reported to be 29 (10 white and 19 black).

William D. Mathews became the second commissioner of Charities and Corrections in 1914, following Kate Barnard.

There were 32 females incarcerated at this time. Counts for female offenders were not available for the period of 1917 to 1918. During 1919-1920, there were 51 females (30 white, 21 black) offenders reported.

In 1923 a recommendation was made that a reformatory for women be built. The Charities and Corrections Annual Report noted that the women's building located just outside the wall and to the east, was poorly built and scantily equipped. It was reported that the location was bad "because the male inmates passed the women's building on their way to work." Additionally, "the recreation grounds for women were constantly under the scrutiny of men guards and male prisoners" (ODOC, 1990, p. 3). This arrangement was not considered conducive to the best behavior of the female inmates. There were a total of 51 women at this time.

On June 18, 1926 the new women's prison was completed. It was considered one of the most modern prisons in the nation. It was a two-story building and had a recreation room, laundry room, and work room. The individual rooms for the inmates measured 7'x 10'. Blacks and whites were segregated.

In 1927 the female population was 61 which included 32 whites, 27 blacks and two Indians. Unfortunately, beginning in 1928, there is no information available for several years. The available statistics resume in 1947.

In 1949, Buck Cook became the Commissioner of Charities

and Corrections. At that time there were 23 white and 15 black women in prison for a total of 38 females incarcerated. As reported in the Annual Report, new floor coverings and some new furniture were provided during that year. Tennis, croquet, softball, and baseball were available for recreation. Church services were held Sunday mornings and Wednesday nights.

In 1950, a total of 39 female offenders (20 black, 18 white and one Indian) were reported in the Charities and Corrections Annual Report. At that time the cost per inmate was $76.82 per month. In 1952, the total number of female offenders went up to 45 (27 white, 18 black) and the cost per inmate decreased to $61.20).

The 1950's maintained a steady number in the female inmate population. The average number of female offenders for 1950 through 1959 was 54. The average monthly cost per inmate was $66.70 during the 1950's. Today the average monthly cost per inmate is $1,085.16!

In 1954 the women's ward reported its first matron, Nell Whitaker. Miss Whitaker apparently was the matron until 1959, when Mrs. Quay Blackbird became the matron. These women were the only matrons mentioned in the reports. It is unknown if there were others.

The primary occupation of the incarcerated females during this period was sewing. They made their own uniforms, towels, aprons, sheets, and pillow cases. In 1959, the women made bermuda shorts and woolen coats for

outside sales. Outside of sewing, the only other form of industry for the women was cleaning and mending school books from the 77 counties before they were sent to Oklahoma State Penitentiary for rebinding. In addition to sewing and book cleaning, the inmates also did the laundry for their ward.

For recreation, they played softball or croquet. There was a picture show available in the chapel weekly, and there was also a piano available. Reading materials were available from the main library at Oklahoma State Penitentiary.

From 1960 to 1963 the average number of female offenders went up to 68. Unfortunately, there are not any other available information for the remainder of the 1960's. In may of 1971, the structure previously used as the pre-release center located on the grounds of Oklahoma State Penitentiary was converted into a second Women's Ward to alleviate a serious overcrowding problem. Prior to this opening, approximately 15 women were housed in the one Woman's Ward. The new ward accommodated 50 inmates; it was single celled and operated independently of the first Women's Ward.

The female inmate population grew during the 1970's. In 1973 the average daily population for females was 132. In order to accommodate this growth, the Women's Treatment Facility was opened in 1973 and had an average population of 50. By the end of fiscal year 1978, there were 210 women incarcerated in the DOC system. In 1978, the Horace Mann

Community Treatment Center began to house female offenders.

As the population continued to increase during the 1980's, the capacity also increased. In 1982, the Women's Ward at Oklahoma State Penitentiary was closed and the southwestern maximum security prison expanded its capacity. At that time 311 women were incarcerated throughout the system and the capacity was 396. In 1988, the Eddie Warrior Correctional Center opened to accommodate minimum security female offenders. By the end of 1989 the capacity was 651 and the count was 788 (ODOC, 1990).

New York

The incarceration of people who are developmentally disabled raises troubling public policy questions with respect to the fair administration of justice to the individual, the protection of public safety and the protection of inmates who are developmentally disabled while they are in the custody of the state.

Contrary to many estimates, the study found that a relatively small proportion of prison inmates are developmentally disabled. Our study indicates that only approximately one to three percent of the state prison population meets the federal statutory definition of developmental disabilities. Although these inmates had significant limitations in basic life skills required to meet this definition, they were unlikely to suffer such severe developmental disabilities as to cause substantial

limitations in expressive or receptive language. According to the federal statutory definition, persons with developmental disabilities must have a significant limitation in at least three of the following seven life skills areas: self-care, deceptive and expressive language, learning, mobility, self- direction, independent living, and economic self-sufficiency.

The vast majority of the inmates with developmental disabilities are "mainstreamed" into the general population of state prisons. Consistent with reports in the literature, our study found that inmates with developmental disabilities have more difficulties adjusting to prison rules and are thus more likely to have prison rule infractions on their records and to serve more time in "keeplock" due to inappropriate behavior. However, despite the absence of special protection for them in the general prison population, our study found that they did not differ significantly from other inmates in terms of their likelihood to suffer a serious injury in prison or to lose good time against their parole dates.

Approximately 10 percent of the inmates with developmental disabilities are housed in two special units reserved for inmates who are determined, based on their disabilities and behaviors, to be at high risk of harm if placed in the general population. While these specialized units offer a measure of additional protection for inmates who would be vulnerable in the general population and some

basic programs geared to their developmental level, the paucity of professional staff limit their habilitative and rehabilitative programs and, thus do little to prepare inmates for eventual release from prison population. Finally, according to reports from correctional officers and parole officials, identification of inmates as developmentally disabled usually made parole arrangements for these inmates more difficult, and placement in a special unit was viewed by inmates as stigmatizing.

These factors lead the commission to be wary of recommending more aggressive efforts to identify inmates who may be developmentally disabled and to develop larger programs for separate treatment of these inmates. We believe that the professional staffing and resources of the existing special units need to be augmented to enable them to provide adequate habilitative and rehabilitative programs to meet the needs of developmentally disabled inmates who may be particularly vulnerable in the general prison population. In that connection, we support the plan of the Department of Correctional Services to open a new special unit to prepare inmates with special needs for parole. Thus, for the majority of inmates with developmental disabilities we see no advantage to abandoning the existing practice of mainstreaming them into the general prison population. Instead of devoting resources toward much more extensive testing, and assessment practices to identify inmates who may be developmentally disabled and much more

expansive separate and possibly stigmatizing prison programs dedicated to serving these inmates, the commission believes that their needs will be better met if available limited resources are devoted to integrated programs addressing the functional daily living skill training needs of these inmates and the many others who are developmentally disabled. The study findings suggest that approximately 6500 inmates in the state prisons have such needs, yet existing academic and vocational programming in state correctional facilities do not address these fundamental needs, so essential to an inmate's successful transition into the community.

TABLE III

NEW YORK STATE AND FEDERAL STATUTORY DEFINITIONS OF PERSONS WITH DEVELOPMENTAL DISABILITIES

New York State (Mental Hygiene Law 1.03(22))	Federal (Public Law 98-527)
Mental Hygiene Law Section 1.03(22) specifies a developmental disability mean a disability of a person which:	Public Law 98-527 defines a developmental disability as a severe, chronic disability of a person which:
1. is attributable to mental retardation, cerebral palsy, epilepsy, neurological impairment, or autism; or	a) is attributable to a mental or physical impairment or combination of mental and physical impairments;
2. is attributable to any other condition of a person found to be closely related to mental retardation because such condition results in similar impairment of general functioning or adaptive behavior to that of mental retarded person or requires treatment and services similar to those required for such persons; or	b) is manifested before the person attains age 22;
3. is attributable to dyslexia resulting from a disability described in subparagraph (1) or (2) of this paragraph; and	c) is likely to continue person indefinitely;
4. originates before the person attains age 22;	d) results in substantial mental functional limitations in three or more of the results following areas of major life activity: intellectual - self-care - receptive and expressive language - learning - mobility - self-direction - capacity for independent living, and - economic self-sufficiency; and
5. has continued or can be expected to continue indefinitely; and	e) reflects the person's need for a combination and sequence of special interdisciplinary, or

TABLE III (Continued)

6.	constitutes a substantial handicap to such person's ability to function normally in society.	generic care, treatment, or other services which are of lifelong or extended duration and are individually planned and coordinated. (Section 102)

(New York DOC, 1991)

The Special Needs Unit at Wende Prison, with 52 beds, opened in 1987, and it is designed to exclusively serve inmates with poor intellectual or life skill functioning. Although conceived to provide specialized and intensive short-term programming, constraints in staffing, and space have limited the type of programs that are offered to the inmates. The inmates in this unit are separated from the rest of the prison population in virtually all aspects of daily life.

Programming primarily consists of basic educational classes offered in the mornings, Monday through Friday. Although one or two inmates on the unit are released to participate in vocational programs in the main prison, and a small number volunteer to perform custodial tasks, like mopping floors on the unit, vocational training for other inmates is not offered. Inmates also have the opportunity to participate in daily recreation in the yard. Occasionally, inmates may also participate in special clinical groups, which discuss and address inmates' alcohol abuse and inappropriate sexual behavior. Additionally, whereas the goal of the unit was to prepare inmates for

re-integrating into the general prison population after a short three-month stay, in practice, most inmates remain on the unit for the duration of their sentence.

Staff on the unit include both program staff and correctional officers. Correctional officers who work primarily on the Special Needs Unit receive a 40 hour training program in serving inmates with developmental disabilities. Other correctional officers who float from the general prison to work on the unit, however, do not receive this training.

Assessment and Program Preparation Unit (APPU)

Opened in 1981, APPU has 254 beds and is actually a prison within a prison, with inmates having no contact with the other inmates in the Clinton Prison. Only approximately 60 of the inmates in the unit are developmentally disabled. The remainder have been referred to the unit or have requested placement in the unit for a variety of other reasons. Some have committed bizarre or infamous crimes; some have enemies within the prison; some are informants; and some are criminal justice system employees (e.g., police officers). Inmates in this unit may also be mentally ill; they may be homosexuals or transsexuals; or they may be sexual offenders. Notably, placement in the unit is based primarily on the inmate's judged need for special protection, and all inmates in the prison system sharing the

above characteristics are not necessarily remanded to APPU.

Designed to stimulate a general prison environment, program offerings in APPU include education (adult basic education through college), vocational training (e.g., shop, building, masonry, drafting, architecture), handicrafts (e.g., drawing, painting, woodworking, fine arts), physical education, and clinical mental health services. APPU staff report that in each of these offerings they made an effort to integrate basic life skills and socialization issues for inmates. Inmates are assigned to a program unit by a program committee with input from the inmate. Assignments in specific units are usually for 60 days, with the exception of inmates pursuing their Graduate Equivalency Diplomas who will usually stay in this program until they pass the exam.

The average length of stay in APPU is from 8 to 12 months, and all inmates must stay at least four months (the assessment period). Some inmates, however, serve their entire sentence in APPU.

Developmental disabilities services, and the Wende Special Needs Unit, in particular, offers very limited vocational services for inmates.

In addition to these existing special units, the New York State Department of Correctional Services has recently announced plans to develop two additional special units for inmates with special needs, many of whom may be developmentally disabled. One of these units, to be developed at the Sullivan Correctional Facility, a maximum

security prison, located 88 miles from New York City, will have space for 64 inmates and will be similar to the Wende Special Needs Unit, except that inmates will have more opportunities to participate in special programs, as well as integrated vocational programs with the general prison population (New York DOC, 1991).

Summary

In conclusion, this literature review provided a synthesis of research focusing on the history of Female Incarceration: the mentally disabled; rehabilitation and training programs; the dually diagnosed. Additionally, the chapter included a review of programs for the dually diagnosed in other states or under court order.

CHAPTER III

PROCEDURES

The focus of this study is the determination of information needed for an assessment of the potential effectiveness of an educational program for incarcerated females in Maximum Security Prisons who have low adaptability levels and who are intellectually challenged. The following sections of this chapter provide descriptions of the research approach chosen for the study, the setting, and participants.

Research Approach

A Qualitative Observational case study approach was employed for this research project. Bogdan and Biklen (1982) define such an approach as one in which a major data-gathering technique is participant observation. The focus of the study is one particular organization (prison) or some aspect of the organization (Transitional Living Unit). According to Bogdan and Biklen (1982), qualitative research emphasizes the following characteristics.

1. Qualitative research has the natural setting as the direct source of data and the researcher is the key instrument. The data are collected on the premises

and supplemented by the understanding that is gained by being on location.

Qualitative researchers go to the particular setting under study because they are concerned with context. They feel that action can best be understood when it is observed in the setting in which it occurs. The setting has to be understood in the context of the history of the institutions of which they are a part. Qualitative researchers assume that human behavior is significantly influenced by the setting in which it occurs, and whenever possible, they go to that location.

2. Qualitative research is descriptive. The data collected are in the form of words or pictures rather than numbers. The written results of the research continue quotations from the data to illustrate and substantiate the presentation. The data include interview transcripts, field notes, photographs, video tapes, personal documents, memos, and other official records. In their search for understanding, qualitative researchers do not reduce the pages upon pages of narration and other data to numerical symbols. They try to analyze the data with all of their richness as closely as possible to the form in which they were recorded or transcribed. Qualitative articles and reports have been described by some as anecdotal. This is because they often contain quotations and try to describe what a particular situation or view of the world is like in narrative form. The written word is very important in the qualitative approach, both in recording data and in disseminating the findings.

   The qualitative research approach demands that the world be approached with the assumption that nothing is trivial, that everything has the potential of being a clue that might unlock a more comprehensive understanding of what is being studied. Nothing is taken as a given, and no statement escapes scrutiny. Description succeeds as a method of data gathering when details face accounting.

3. Qualitative researchers are concerned with process rather than simply with outcomes or products. Quantitative techniques have been able to show by means of pre and post testing that changes occur. Qualitative strategies have suggested just how the expectations are translated into daily activities, procedures, and interactions.

4. Qualitative researchers tend to analyze their data inductively. They do not search out data or evidence to prove or disprove hypotheses they hold before entering the study; rather, the abstractions

are built as the particulars that have been gathered are grouped together. The process of data analysis is like a funnel: things are open at the beginning (or top) and more directed and specific at the bottom. The qualitative researcher plans to use part of the study to learn what the important questions are. He or she does not assume that enough is known to recognize important concerns before undertaking the research.

5. "Meaning" is of essential concern to the qualitative approach. Researchers who use this approach are interested in the ways different people make sense out of their lives. (Bogdan & Biklen, 1982, pp. 29-31)

Qualitative researchers are concerned with making sure they capture perspectives accurately. They reflect a concern with capturing the people's own way of interpreting significance as accurately as possible.

Qualitative researchers set up strategies and procedures to enable them to consider experiences from the informant's perspectives. According to Slavin (1992) qualitative research seeks primarily to describe a situation as it is. Most qualitative research in education involves extended observation of some form.

Slavin (1992) defines a participant observer as one who interacts with the people being observed. A participant observer is more likely to build rapport with the observation's subject.

In qualitative research, interviews maybe used in two ways. They may be the dominant strategy for data collection, or they maybe employed in conjunction with participant observation, document analysis, or other techniques.

In studies that rely predominantly on interviewing, the subject is usually a stranger (Bogdan & Biklen, 1982). Slavin (1992) grants that the qualitative interviewer usually has some questions prepared and knows what information is wanted by the end of the session.

The research approach, employed herein utilized the qualitative research characteristics of participant observation, collection of descriptive data, summary of findings by the participant observer researcher.

Preliminary Planning: Criteria for Selecting a Site

The availability of a prison setting which met the needs of the researcher was limited to one southwestern maximum security prison. This facility met the following criteria:

1. A female correctional setting
2. A maximum security facility
3. The dually diagnosed are housed in a separate living unit, the Transitional Living Unit (TLU)
4. The direct responsibility of the TLU rest with the psychiatrist.

The initial visit to S.W. Penal Institution was in April, 1992 during which the researcher visit the unit was observed and discussion were had towards the end of gaining permission to use the facility for the project. During this visit, consultations were had with the Superintendent of

Schools for Prisons, the Principal and the Special Education teacher. Within this discussion it was determined by the researcher that the topic was in fact timely and needed. In ensuing visits, the researcher met with the Warden and Psychiatrist of southwestern female penal institution, as well as with the case manager assigned to the unit. All the above personnel clearly articulated the philosophy of the unit, its organization and management. In seceding conversations the needs for a planned rehabilitation format were stated.

The success of a qualitative study depends in large measure upon on the development of rapport between the investigator and the participants. Therefore, it was deemed necessary to visit the unit and become acquainted with the surroundings. Permission to observe the TL unit during the 1992-93 fiscal year was subsequently secured from the case manager, the psychiatrist, the warden, the Director of Department of Correction and Oklahoma State University.

Time Frame for Data Collection

Collection of data lasted for a total of 120 days. This time frame was approximately one third of the year. For the first cycle of scheduled time, the researcher was in attendance where every Monday between 10:00 a.m. and 12:00 p.m. This was to locate and record data and to become comfortable in the setting. This time also allowed the inmates to become accustomed and indifferent to the

researcher's presence. An approximate total of 34 clock hours of observation and interviews were completed.

It is important to define a finishing point in qualitative research. Bogdan and Biklen (1992) explain how this is determined:

> Qualitative researchers gauge when they are finished by what they term data saturation, the point of data collection where by information you get becomes redundant. It is a period where you learn a decreasing amount for the time you spend. (p. 68)

The administrators involved in this study also helped to determine the length of time the researcher would be allowed to remain. An estimated time of three months of actual interviews was suggested.

Participants and Setting of the Study

The study took place in the transitional living unit (TLU) located on the grounds of the prison. This is the only maximum security facility for females in the state. The participants to be observed are housed in a separate housing unit. The inmates are from all racial categories, educational backgrounds and other penal institutions.

The transitional living unit (TLU) provides placement, assessment and treatment for inmates experiencing serious social deficiencies or serious mental illness or dysfunction which precludes the inmate's ability to adapt to the general population.

These inmates make up category two of the prison classification system: The Intellectually Challenged. Category two inmates possess the following problems:

1. low levels of mental ability generally defined as a measured level of intellectual functioning at or below an IQ of 75;
2. impaired level of adaptive behavior (social, communication and daily living skills); and
3. academic skills which fall below the sixth grade level.

The correctional case manager under immediate supervision performs routine social casework in the classification and assignment of offenders committed to a correctional institution. Using offender history and background information, the case manager makes recommendations as to individual offender program assignments; interviews incoming offenders to obtain personal history, educational, and social economic background; prepares reports on individual case histories; reviews work and conduct records of all assigned offenders to determine progress or necessity of changing assignments or security classification; advises offenders on personal problems, employment resources, vocational skills, educational and training needs, family problems, and institutional adjustment. Additionally, the case manager may implement prepared chemical abuse programs to offenders to educate them in social skills which will help in adjusting to society after their release; assists in writing

parole summaries monthly for offenders scheduled for parole; maintains detailed records; receives and takes necessary action on incoming and outgoing mail to or from assigned offenders; serves as a member of the unit classification committee for assigned caseload; performs related work as required and assigned.

The correctional case manager requires little knowledge of vocational guidance and social adjustment of criminal offenders, available industrial operations and current employment opportunities, the social and psychological problems of persons incarcerated and of report writing and record keeping. The said manager should be skilled in establishing and maintaining effective working relationships with offenders and their relatives department employees, law enforcement officers, and various government and business officials and in communicating effectively.

A bachelor's degree including at least twenty-four (24) hours in any combination of psychology, sociology, social work, criminology, education, criminal justice administration, penology, or police science is required. A bachelor's degree and one year of experience in a correctional facility in a position which requires direct and routine contact with inmates will suffice. An equivalent combination of education and experience, substituting one year of experience in a correctional facility in a position which requires direct and routine

contact with inmates for each thirty semester hours of the required education is acceptable.

The staff psychiatrist under general direction performs administrative and professional work in planning, directing, and coordinating a large comprehensive psychology program at the prison; supervises all staff members of a facility and/or the activities of psychologists in a designated region or area of the state; directs the selection and administration of a variety of psychological tests, including intelligence, personality, aptitude, and related tests; interprets test findings to physicians, parents, teachers, nurses, social workers, and other professional workers; provides counseling and psychotherapy to individuals, families, and groups. Further, the psychiatrist plans and coordinates psychological services with other psychiatrists, pediatric, and audiological consultants, and consults with the clinical director. The psychiatrist conducts in-service training programs for staff members and other professionals in the community in the prevention, recognition, and management of psychological problems in mental, emotional, and social development and adjustment. Additionally, s/he develops and initiates research projects concerning objectives, methods, and results of guidance and related psychological activities; prepares special funding grants and projects concerned with guidance and mental health programs; and writes contracts with community agencies such as public schools for provision

of psychological services. Moreover, s/he participates in special consultation and education activities promoting community programs in mental, emotional, and social development and adjustment; provides administrative liaison with other state agencies in the delivery of drug and alcohol treatment services; assists in the recruitment of psychologists; conducts training for new professional staff members; prepares necessary budgets and program reports; participates as a representative of the department in both lay and professional conferences and meetings; and performs related work as required.

The staff psychiatrist must have knowledge of psychological theory, methods of psychological counseling, psychotherapeutic methods, case assessment methods, individual and group testing, projective techniques, statistical methods, and research design, community problems; special education of individuals with mental, emotional, and social problems, and mental retardation and of administrative and supervisory techniques. S/he must be skilled in establishing and maintaining work relationships with others, in directing the work of others, in serving as a consultant and/or functioning in an administrative capacity, in working with community groups and agencies in developing guidance programs and services, in exercising good judgement in analyzing situations and making decisions and in preparing special funding grants.

Prerequisites of the position are the completion of the curriculum requirements for a doctorate in psychology from an accredited college or university with a specialty in clinical, counseling, educational developmental or school psychology including one academic year in a full-time post-masters or pre-doctoral internship. One additional year of experience under the direct supervision of a psychologist licensed in the major program of doctoral study may be substituted for the internship. However, one may qualify for the four years of full time experience as a professional psychologist, including one year in an administrative capacity may be substituted. Some agencies may require the doctor's degree and experience be in one of the specialized areas listed above.

Physical Setting: The Prison

As one enters the prison grounds, the phone access is on the chain link fence. Upon voice identification to the armed guard, a 15 foot chain linked fence topped by 2 foot of razor wire and 1 foot of barbed wire is then electronically moved to allow entrance to a zone known as the deadzone. Upon the closure of the first gate a second gate is then opened to allow access to the main door of the prison administrative complex. Beyond a glass wall under which you must submit identification, the administrative door is then opened. After entering the building and signing in, a guard is then called to frisk and pat you down

checking the bottoms of your feet and between your toes. After clearance you are given an identification tag to be worn while you are within the compound walls.

The researcher was then met by the psychiatrist and led through another set of 15 foot gates topped with 2 feet of razor wire and 1 foot of barbed wire to the transitional living unit. Upon entering the TL Unit, the identification was then reviewed by an armed guard. The case manager was summoned and the interviews for the day began. This process was completed at each session until data saturation was met.

Physical Setting: The Transitional Living Unit

The Transitional Living Unit (TL Unit) is not physically distinguished from any other unit in the prison. In correctional vernacular the units are referred to as "quads".

The TL Unit inmates are housed on A quad at South housing unit (ShU). There are 11 rooms on the quad, with an inmate housing capacity of 22. The average number of inmates on A quad is 10.

Physical Setting: The School

The entry to the school section faces east toward the TL Unit in South housing. The walls between rooms are 1/2 glass to allow for visibility from room to room. The school's equipment includes a talkback television classroom

as well as other basic school materials and equipment. There is one Special Education teacher employed with an average class ratio of 10 to 1. Students may or may not be members of the TL Unit.

The teacher stated that unless the inmate was very young, confidential school file information was rarely obtainable. The plans for each inmate were developed based on scores from the reception center and the psychiatrist.

School for some, was a regularly scheduled portion of the day, however not all TL Unit inmates participated in school. All new inmates are given the Test of Adult Basic Education (TABE) to assess the education level of each. They are recommended for school when the scores indicate an educational level of below ninth (9th) grade regardless of whether they have a GED or a high school diploma. If an inmate scores below a sixth (6th) grade level in reading then literacy tutoring is recommended.

The primary focus with TLU inmates is daily living skills. As stated previously, not all TLU inmates attend school. Some have received certificates of completion. These certificates are issued to the inmate to be placed in their files to avoid any penalties for not attending school. In the future the school personnel would like to provide the TLU inmates with a daily living skills program as an alternative to traditional school offerings. It is believed the inmates would fair better with this type of program upon release.

The Daily Schedule

The regular day is from 0700 to 2200. The participants have scheduled activities except for 1600-1700 and 1800-2200 which is time allowed for personal things such as ironing, grooming and reading. The participants are also programmed into individual activities.

The academic time is from 1315 to 1530 p.m. On the daily schedule, it is labeled education.

TABLE IV

TLU INDIVIDUAL DAILY PROGRAM PLAN

	M	T	W	T	F
Breakfast: 0700-0730					
Room Maint.: 0730-0800	10	10	10	10	10
Personal Hygiene: 0730-0800					
Pill Line: 0800-0830					
Arts/Crafts: 0900-1100	10				10
Recreation/Gym: 0900-1000		10	10	10	
Program Time: 1000-1100					
Lunch: 1100-1130					
Personal Hygiene: 1130-1315	10	10	10	10	10
Work/Education Time: 1315-1530	20	20	20	20	20
Pill Line: 1530-1600					
Personal Time: 1600-1720					
Dinner: 1720-1800					
Activities/Personal time: 1800-2200					
Group Therapy (100)					

Other Individual Activity Assignments:

1. Medication Compliance (10 points)
2. Individual Counseling (20 points weekly)
3. Social/Daily Living Skills Training (20 points weekly)
4. Diet Maintenance (10 points)
5. Special Individual Assignments (10 points)

Point values shown are the maximum possible for the activity.

Rehabilitative Environment

The Vocational Program consist of Data Entry, Horticulture, Business and Office.

Vocational Program Eligibility: Anyone seeking to enroll in a vocational program at the prison must meet minimum eligibility criteria.

The criteria listed below will ensure the student has the time, ability, and desire to successfully complete the vocational class and become employable on the job.

Criteria for Data Entry:

1) Recommended minimum of a 5.1 grade reading level.

2) Satisfactory progress toward completion of the program.

3) One-half day student-minimum of six months' time dedicated to class.

4) Longer-term students should have employment at the prison's manufacturing unit as an employment objective.

Criteria for Business and Office:

1) Recommended minimum of a 5.1 grade reading level.

2) Satisfactory progress toward completion of the program.

3) Typing skills of 30 wpm with 3 or fewer errors. If typing is the only criterion lacking, a student may enroll in Data Entry until minimum typing speed is reached, thereafter the inmate may transfer to Business and Office.

4) One-half day student-minimum of twelve months.

5) An inmate could also be placed in a training related position within the correctional system.

6) A Business and Office student could upon a down grade of her security level be transferred to another prison where upon the Business and Office Class could be completed. These two programs have coordinated curriculum to avoid duplication and ensure continuity of training objectives.

Criteria for Horticulture:

1) Recommended minimum 5.1 grade reading level.

2) One half day student - minimum of 12 months.

3) Longer term students should have employment within the corrections facility as a training objective.

4) Satisfactory progress toward completion of the program.

Other Eligibility Criteria: Each inmate's eligibility to enroll in a vocational program will also include a personal behavioral record at the institution. The individual student record will be reviewed by the staff at the prison, and enrollment eligibility will depend upon staff recommendation.

Hierarchy of Life on the Inside

In an interview with an inmate serving life with no parole, the subject of the prison pecking order arose. What follows is the order of respect from her view point.

Q. What is important within the confines of the prison, what is power?

A. Money, money rules, not drugs, not physical power but money.

Q. How do you determine who has money, isn't it all kept on paper, no actual money?
A. Right, the money is kept on the books no one has actual money but you can tell by how that person is dressed, the amount they can buy at the canteen, the number of sacks, you know, material things.

Q. What else shows power or demands respect?
A. The amount and the way you do your time.

Q. What do you mean the way you do your time?
A. The top people are those who do a lot o time (long timers) the right way which means they don't snitch or play mind games. You just do your time, quietly without moaning about it.

Q. So personality gets respect, doing your time quietly, minding your own business, and the length of time is good.
A. Right and being loud, or stealing is very bad. We live in a small area stealing is bad, everybody will know and stay away from you.

Q. Who seems to have the most problems upon entry, the special populations?
A. Actually no, people make fun of them and treat them bad, but the short timers, people with a little time, are worried when they first come.

Q. What seems to be their problem?
A. Attitude, man, their attitude stinks they act like they have something to prove, they're loud and stupid. Like this one girl was moaning about having to do five years, she was all upset and being loud and stupid. I thought I would love to only have to do five years. I'll be here forever.

Q. How about age, how is that dealt with?
A. People really respect this one woman, she is in general population, she doesn't have to work, she minds her own business, doesn't talk much but when she does everybody knows what she said. The other day I was in line to eat, she came in and everybody moved so she could go in, it's really neat the way they treat her. It's her age, the way she does her time, and just her.

Q. How old is she?
A. 60

Q. So age gets respect?

A. Yeah, but you have to be the other stuff too.

Q. How do the members at south housing, A quad fair (TLU) as far as respect goes.
A. They are way down there, they don't act right, they say the wrong things to the wrong people, some of them are on drugs and can't help they way they act or it's a sickness, they should be some place else, not here.

Q. So let me get the pecking order right.
Long termers with the right time and personality.

A. The type of crime they did goes next.

Q. Crime related people with the right kind of time and personality goes next.

A. Right.

Q. Personality and the right kind of time people are next.

A. Right.

Q. What's at the bottom?
A. Child offenses
Pornography
People who like to do it with animals.
People who do cruel and heinous crimes are next to the bottom depending on their personality.

Q. The TLU people are above the group you just listed.
A. Right.

Q. Does their offense factor in to give them any more respect?
A. Sure, but not much, it really depends on what they did and how they act now, but they won't go up to much.

Q. Thanks for taking time to talk with me and for being so candid.
A. Sure, no problem, I got the time.

Data Collection Procedures

The basic plan for research was to enter the facility in which the documented data is housed and to complete the variables list on each participant. For the study, the qualitative data-gathering techniques were: collecting data

through observation/documents, field notes of the participant observer; audio taping of the sessions, transcriptions of individual interviews, teacher interviews, case manager interviews, psychiatrist interview, and collections of documented information.

Field Notes

The written account of what the researcher hears, sees, experiences, and thinks in the course of collecting and reflecting on the data in a qualitative study are the field notes. There are two types of material--descriptive and reflective.

The descriptive type entails the concern to capture a word-picture of the setting, persons, actions, and conversation as observed. Bogdan and Biklen (1992) list six aspects of descriptive field notes, which encompass the following areas:

1. Portrait of the subject (physical appearance, dress, mannerisms, and style of talking and acting).
2. Reconstruction of dialogue (an approximation of what was said).
3. Description of physical setting, of the space and furniture arrangements.
4. Accounts of particular events (listing who was involved, the manner and the nature of the action).
5. Depiction of activities (detailed descriptions of behavior).
6. The observer's behavior (dress, actions, and conversation with subjects). (pp. 120-121)

The reflective part of field notes contained sentences and paragraphs that reflect a more personal account of the course of the inquiry. Here the more subjective side of

your journey is recorded. The emphasis is on speculation, feelings, problems, ideas, hunches, impressions, and prejudices (Bogdan & Biklen, 1992). The notational convention "O.C.", meaning "observer's comment", was used to identify these reflections. Bogdan and Biklen (1992) provide a categorization of the observer's memos and other materials:

1. Reflections on analysis (speculations on what themes or patterns are emerging, what you are learning, connections between pieces of data, adding ideas, and thoughts that pop up).

2. Reflections on method (comment on rapport with subjects, problems encountered, your ideas on how to deal with the problem, assessments on what has been accomplished and what is yet to be done).

3. Reflections on ethical dilemmas and conflicts (comments and memos that help keep a record of rational concerns between participant and researcher values and responsibilities).

4. Reflections on the observers frame of mind (depiction of what is out there and expectation revealing beliefs, opinions, attitudes, prejudices acknowledging the researcher's own way of thinking).

5. Point of clarification (sentences added in the notes clear up things that have been confusing).

Official Documents

Official documents include such things as memoranda, minutes from meetings, newsletters, policy documents, proposals, codes of ethics, dossiers, records, statements of philosophy, news releases etc. The materials have been viewed as subjective representing the basis of the researcher.

Internal Documents

Bogdan and Biklen (1992, p. 137) define these as memosand other communications that are circulated. These documents can reveal information about the chain of command, internal rules and regulations.

External Communication

This refers to materials produced by the Department of Correction for public consumption.

Interviews

Interviews were conducted informally, similar to conversations rather than question and answer sessions. A guide of general questions regarding educational levels, family and was prepared in advance and used as a guide in the interviews (see Appendix B, "Informal Interview Guide"). The researcher attempted to listen carefully, suppress reacting and refrain from being judgmental.

Responses were tape recorded to be summarized later. This was done to minimize the extent to which the notes, recording of the interview, reflected the interviewers bias.

Data Analysis Procedures

Bogdan and Biklen (1992) recount the steps in constant comparative method of developing theory:

1. Begin collecting data;
2. Look for key issues, recurrent events, or activities in the data that become categories of focus;
3. Collect data that provide many incidents of the categories of focus with an eye to seeing the diversity of the dimensions under the categories;
4. Write about the categories you are exploring, attempting to describe and account for all the incidents you have in your data while continually searching for new incidents;
5. Work with the data and emerging model to discover basic social processes and relationships; and
6. Engage in sampling, coding, and writing as the analysis focuses on the core categories. (p. 74)

Data analysis is the process of systematically searching and arranging the interview transcript, field notes, and other materials that you accumulate to increase your own understanding of them and to enable you to present what you have discovered to others. Analysis involves working with data, organizing them, breaking them into manageable units, synthesizing them, searching for patterns, discovering what is important and what is to be learned, and deciding what you will tell others (Bogdan & Biklen, 1992).

Coding categories is the sorting of descriptive data collected so that the material bearing on a given topic can be physically separated from the data. Developing a coding

system involves several steps: A search through the data for regular patterns, then writing down words and phrases to represent topics and patterns (p. 166).

Field Notes

In most kinds of participant or non participant observational studies, field notes are the most important data that are collected. Field notes usually contain descriptions of the key individuals being observed and of the physical setting and other contextual features. The notes typically contain a running record of what happened during the observation period with the observer's comments on the meaning of particular events.

In addition to recording what happened, the observer, usually writes reflections on the day's observations, including tentative hypothesis about why certain things happened, notes on issues worth developing in future observations, connections to previous events, and points of clarification about the observations as well as what was observed (Slavin, 1992). All information was recorded and stored in a labeled/coded folder for each participant.

Following each session the observer reflected on information obtained, and added points of clarification.

Analysis After Collection

Bogdan and Biklen (1992) describe data analysis as the process of systematically searching and arranging the

interview transcripts, field notes, and other materials that you accumulate to increase your own understanding of them and to enable you to present what you have discovered to others.

The researcher began by going through all the pages of information and numbering them sequentially, keeping similar kinds of material together. Paying particular interest to comments and memos while developing a preliminary list of coding categories.

After developing the coding categories, assigning numbers, the information was reviewed employing the codes. The result was a complication of information that served as the rough draft.

The presentation style was described by Bogdan and Biklen (p. 194) as macroethnography. In a macroethnography, you lay out the whole realm of a complex situation, making sure to cover all aspects that have relevance to the theme.

A more traditional form of presentation was also considered in which the author announces near the beginning what the paper, chapter, book, or dissertation will argue and then proceeds to show the readers by presenting key aspects of the perspective, documenting it with examples from the data.

The researcher decided the presentation of the information should be a mix of macroethnography and traditional.

Summary

In summary, a qualitative, observational case -study approach was chosen to unravel the question of whether an appropriate assessment of the potential effectiveness of an educational program for incarcerated females in maximum security prisons who have low adaptability levels and who are intellectually challenged can be developed. The researcher became a participant observer at a Correctional Center for four months, taking field notes and conducting interviews. After leaving the research site, the researcher reviewed and sorted all data obtained.

CHAPTER IV

RESULTS

In order to answer the question: "What is the potential effectiveness of an educational based habilitation plan for the dually diagnosed in a southwestern correctional security prison for women?" the researcher became a participant observer during the scheduled time period, from the first day of January through the last day of April. Grounded theory was developed as facts were gathered and grouped from coded field notes, interviews, contact summaries, memos, audio taping, official documents and contact summaries. By collecting and analyzing the data, the potential effectiveness of an educational habilitation plan was determined to have three major divisions: preincarceration employability, present habilitation plan and postincarceration. In this chapter the researcher will present data to support conclusions regarding each major dimension of the potential effectiveness of a habilitation plan.

This chapter is organized into three major sections. First, as an overview to familiarize the reader with the present habilitation plan for this population, an explanation of the overall organization of the program will

be presented, including information of the success of the present program. Next, a detailed description and hour by hour or day by day chronicle of the present plan for habilitation for this population. Finally, the results of data analysis organized into three major divisions.

Preincarceration Employability

In the interviews the participants discussed employment prior to incarceration. Most participants commented they would have participated in work training programs had they known about them and how to find them. Most expressed a desire to learn how to make and keep their money indicating they were unable to regulate these items prior to incarceration. Ninety-eight percent were motel and/or hotel maids, one percent nurse and one percent maintenance related employment. The nurse believed questions regarding money matters were too personal and therefore would not answer (O.C.). All except the nurse remarked the jobs held were all they new about, and a friend helped them to obtain employment.

The Present Rehabilitation Plan for the Dually Diagnosed Population

The programs goal as gleaned from this staff, is to provide placement, assessment and treatment for the inmates. More specifically the plan intends to provides services and programmatic activities, based on an individualized

treatment. The treatment will provide inmates with mental health care and a chance to learn academic, vocational and social skills enabling them to function independently in the general population, and ultimately in the free community upon release from the prison setting.

Present Habilitation Plan

The school setting has limitations in it's attempt to address the needs of this population, therefore other areas are utilized to assist in a habitation plan. All TL Unit members are grouped scheduled for recreation as well as arts and crafts. More time and structure are planned to teach, reinforce and maintain daily living, social and recreational skills.

Each member also has a scheduled one to one time with the case manager during which the inmate is taught and/or reinforced for daily living skills activities. Daily, 1 hour 45 minutes are spent on actual habilitation concerns. Traditionally TL Unit inmates do not qualify for the established methods of rehabilitation. Only twenty percent will seek employment upon release, the other eighty percent will accept public assistance. Of these twenty percent, ninety percent will return to the same type of unskilled labor performed prior to incarceration. The other five percent will recidivists.

The cycle starts again.

Present Educational Plan

The educational plan for each inmate is developed based on the scores obtained at the reception center as well as the retesting completed by the staff psychologist.

School is not a standard schedule activity for all members of the TL Unit. After completion of the Test of Adult Basic Education (TABE) inmates are referred to the school for assistance when a level below ninth (9th) grade is obtained. A score below sixth (6th) grade reading level indicates a need for literacy tutoring. Members of the incarcerated population have received certificates of completion for their files when school success is unattainable. These certificates of completion are also available for members of the TL Unit.

Post Incarceration Employability

As discussed in conversations with the warden, the psychologist, and the school personnel the inmates in the Transitional Living Unit will be limited in their marketable skills. Many of the inmates will return to their preincarceration life style, possibly returning to a penal institution at a later date.

Some retarded offenders, if they work at all after release, will have to work in sheltered workshops because they cannot compete for regular jobs. Many of the mildly retarded are capable of learning to do any kind of labor

that require limited intellectual skills. They can be carpenters, plumbers, factory workers, even auto mechanics. The only difference is that they may take much longer than the person of normal intelligence to learn such skills (Katz, 1980).

TABLE V

PARTICIPANT ANALYSIS

1.	Age	24 to 39
2.	Race	3 - Black, 1 - Native American (1/4)
3.	Offense Classification	B, D B indicates - a serious crime, where there was harm to others. D indicates - a less serious crime where there wasn't any harm to others.
4.	Educational Level	1/2 (2) high school dropouts, 1/2 (2) high school graduates.
5.	Social economics status prior to incarceration	1/2 (2) Low, 1/2 (2) low to middle
6.	Marital Status (current)	All (4) single
7.	Place of Birth	All native to the southwestern state where the prison is located
8.	All used a Public Defender	
9.	No private attorneys were retained.	
10.	Classification level	1 - 4 1 indicates - the person serves the actual length of sentence imposed by the court i.e. 365 = 365 days. 2 indicates - nonviolent crime, not a first offense, to be incarcerated less than 20 years. 3 indicates - nonviolent, not a first offense, to be incarcerated greater than 25 years. 4 indicates - violent, not a first offense, to be incarcerated greater than 25 years.

TABLE V (Continued)

11. New or Repeat Incarceration
    1 - repeat incarceration
    3 - new incarceration

12. History of offenses
    3 had a history of offenses of some type
    1 did not

13. History of Emotional Stability
    Unstable - 2
    One was disconnected to an extreme from reality sometimes referencing imagined events (O.C.)
    Stable - 1
    Refuse to give information - 1

14. Location of husband
    no husband noted - 2
    incarcerated - 1
    deceased - 1

15. Visitors 3 - family, 1 - friends
    All reside within the state.

15a Frequency of visitors
    2 - often
    1 - a lot
    1 - some

15b Any behavior changes noted afterwards
    3 - no
    1 - yes, disruptive, visitations were terminated. One inmate displayed no understanding as to her inability to leave with visitors (O.C.)

16. Location of Crime
    4 within the southwestern state

16a Location of others involved in the crime (current) ranges was incarcerated to probation
    2 - no one else involved
    1 - probation
    1 - incarcerated

16b Sentence of other unknown

16c Attorney of others unknown

17. Offense committed alone - 2

17a Offense committed with others - 2

TABLE V (Continued)

18. Adaptability level (culture) self report
    3 - not good
    1 - gets along well

18a Adaptability level (incarceration) (unit manager)
    3 - not good
    1 - good (one inmate displayed an extremely violent nature which resulted in a sustained period of isolation (O.C.).

19. Program Involvement
    Caring for Ourselves
    Addictive Relationships
    Drug Recovery
    Adult Basic Education
    None

19a Vocational
    None

19b School
    3 - none
    1 - yes on limited basis at one time

19c Job while incarcerated
    3 - none
    1 - yes

20. Assessment Information (Weschlers Adult Intelligence Scale, WAIS)
    70-75 full scale intelligence

20a Psychological Information (culture fair)
    below 57
which indicates this person has some problems with adaptability, reasoning and rational behavior.

20b Adaptability (observations, reports)
    3 - do not adopt well
    1 - adapt well

* * * * *

1 Employment at time of incarceration
    3 - unskilled - minimum wage/below
    1 - skilled

2 Sources of income prior to incarceration
    3 - wages from employment
    1 - public assistance

TABLE V (Continued)

3 Work history

Fairly stable: usually held a job for at least a year with no major gaps in employment.

Unstable: multiple job changes, held jobs usually for less that a year, with major or multiple gaps in employment.

Negligible: major period of unemployment, reliance on public assistance or unknown source of income with only occasional or brief periods of employment.

Fairly stable to unstable: once fairly stable in past, but within a year prior to incarceration had an unstable or negligible work history.

4 Training accomplished prior to incarceration

2 - none
1 - limited to high school
1 - past high school

5 Training attempted during incarceration

none

6 Official Habilitation Plan on file

none

Summary

In this chapter, The researcher presented the results of data analysis to answer the question; What is the potential effectiveness of an educational based habilitation plan for the dually diagnosed in a Maximum Security Prison for Women? The major divisions were listed, and discussed.

In addition to presenting data to support the conclusions regarding the potential effectiveness of an educational based habilitation program for the dually diagnosed, the researcher provided an explanation of the overall organization of the present program as well as descriptions and an hour by hour chronicles of the present habilitation plan.

The present habilitation plan consist of Arts/Crafts 0900-1100 hours, Recreation/Gym 0900-1000 hours, as well as 1800-2200 hours individual activities with the case manager (see Table IV, p. 112). As it stands now this present plan of habilitation will be limited in its ability to address the needs of the TL Unit population.

The traditional rehabilitation programs at this midwestern maximum security prison have criteria beyond the academic scope of the TL Unit participants. Thus diminishing a successful reentry into society.

The inmates may be excused from regularly scheduled academics if it is perceived by both the inmate and the school administration that the continued academic endeavor will not concluded successfully.

The school setting is not equipped to teach functional daily living skills, thus further limiting the TL Unit members opportunity to learn while incarcerated.

Incarceration will not enhance the TL Unit populations ability to obtain employment upon release. If the inmates enter as unskilled labor they will exit as unskilled laborers.

To answer the question, what is the potential effectiveness of an educationally based habilitation plan for the dually diagnosed? The researcher analyzed the data and concluded functional educationally based plan of habilitation is needed and would ensure the participants a better reentry into society after incarceration.

CHAPTER V

SUMMARY, IMPLICATIONS, AND RECOMMENDATIONS

Summary of the Investigation

The present study examined the major treatment of correctional rehabilitation programs serving retarded/mentally ill offenders within the field of correctional rehabilitation (Brown & Courtless, 1971; Cohen, 1985; Giallombardo, 1966b; Lombroso & Ferrero, 1895; Menolascino & McCann, 1983; Morgan, 1979; Rafter, 1985; Smart, 1976; Thomas, 1923; Zedner, 1991). A current trend is a movement away from warehousing this population to habilitation concerns for post incarceration life (Austin & Duncan, 1988; Coyle, 1987; Crites, 1974; Eyman, 1971; Feinman, 1976, 1980; Inciard & Faupel, 1980; Menolascino, 1975; Platt et al., 1982; Rafter, 1982; Rutherford et al., 1985; Santamour, 1986; Smith, 1962). The plan for habilitation consisted of four parts pre-incarcerated employability, plans for habilitation (Briody, 1991; DeSilva, 1980a), plans for educational needs and post incarceration employability (Katz, 1980).

Given the shift in correctional programming of the dually diagnosed, society and researchers alike have

questioned the lack of rehabilitation plans (Brown & Courtless, 1982; Nelson, 1987; Salholz et al., 1990) and have called for more research (Adler, 1975; Menolascino, 1975; Santamour & West 1977; Sechrest et al., 1979).

Conclusions

The focusing question of this study was the information needed for an assessment of the potential effectiveness of an educational program for incarcerated females in maximum security prisons who have low adaptability levels and who are intellectually challenged. To explore the correctional habilitation plan, the researcher became a participant observer in a southwestern maximum security prison for female inmates for four months. During this period field notes were taken and coded, formal and informal interviews of the inmates were conducted, and the same were audiotaped and transcribed. Additionally, documents were collected which reflected and analyzed incoming data in the form of memos and contact summaries. After leaving further review an analysis of the data was carried out to develop grounded theory concerning the habilitation plan in the correctional setting.

Analysis of the data revealed that in planning for the habilitation of the dually diagnosed incarcerated population three major areas of concern surfaced: pre-incarceration employability, plans for habilitation, and post-incarceration employability.

The pre-incarceration employability section revealed the existence of a recurring pattern of underemployment, unemployment, and employment as unskilled labor working at or below minimum wage. Work history of the relevant population ranged from unstable to stable.

The targeted institution's plan for rehabilitation educational and habilitation programming was discussed. School was not a standard scheduled activity due to the institutions limitations and the perceived needs of the population understudy. Members of the TL Unit were not regularly admitted to the established vocational programs due to the inmates' failure to meet criteria for inclusion into the program.

Post-incarceration employability will be limited for this population due to the lack of vocational training while incarcerated. Sadly the inmates entered with low skills and received the benefit of no enhancement to facilitate their reentry into society.

Discussion

A qualitative, observational case study research approach was used to generate hypotheses concerning assessment of the potential effectiveness of an educationally based habilitation plan for dually diagnosed females in a maximum security prison who are low in adaptability levels. Collection of data began on the first Monday in January, 1993, and lasted through the last day of

April, 1993, for a total of 34 clock hours spent in the setting. The time frame was approximately one-third of the calendar year. Key qualitative data gathering techniques, were used which entailed collecting data through observation, field notes, audiotaping, formal and informal interviews, and official and unofficial documents. Using steps in the method of building grounded theory, as outlined in Bogdan and Biklen (1982), the researcher began collecting field notes, summaries and memos, and file information to explore, describe, and categorize data. The researcher physically sorted data to expose any emerging patterns and determined three divisions were needed to plan an habilitation plan for this population: pre-incarceration employability, habilitation planning, and post-incarceration employability.

It should be noted that dually diagnosed caucasian females may commit crimes, however, they are not represented in this study. The researcher can only speculate as to this phenomena.

1. Caucasian TL members may have been among those refusing to participate.
2. Caucasian dually diagnosed females may have hired private attorneys who negotiated for alternative sentencing rather than incarceration.
3. Caucasian dually diagnosed females may not be viewed by the administration as meeting the criteria for the TL Unit individual.
4. Caucasian dually diagnosed females may obtain supported employment, thus limiting their access to criminal activity.
5. Caucasian offenders may be encouraged to take full advantage of public school vocational programs.

In summary, the research approach employed qualitative research properties of participant observation, collection of descriptive data, and the building of grounded theory by the participant observer researcher. This led to the generation of theory concerning the potential effectiveness of an educationally based habilitation plan for the dually diagnosed incarcerated female population.

Implications

For the last decade, this category of inmate has been the subject of considerable attention and has absorbed substantial resources. There is every indication that it will continue to be the case (Coyle, 1987).

Nobody knows conclusively and precisely the effectiveness of correctional education. Statistics vary from one study to the next. When one defines success for research purposes as the absence of post-release felony convictions or parole violations, some studies indicate that inmates who were in prison school succeed more than those who were not, while other studies have the opposite finding. Analysis usually indicates that these results are due largely to the selection of inmates for prison school, rather than due to the effects of the school.

Despite these sources of contradictory findings in gross comparison of releases, there is some evidence of a favorable impact from correctional education. Programmed instruction is a major resource for increasing the challenge

in the prison schools, yet it will not solve all of the problems. Some academic and vocational subjects are not so readily taught by programmed methods or at least have not been subjected to good programming (Glaser, 1966).

This research can facilitate the development of a common ground for shared understanding through its descriptions of programs for the dually diagnosed inmate. Findings of the present study indicate that (a) pre-incarceration employability was limited due to lack of formalized training attempts. The inmate was not aware of work training programs and/or lacked the knowledge to obtain such information from community resources. (b) Present rehabilitation plans do not include this sub-population due to the entrance requirements. Educational habilitation did not always apply to this population and were limited in their ability to affect a change with this population as it is structured. (c) Post incarceration employability also will be limited with many of the inmates exiting the penal system without having any attempts at habilitation.

The present study informs practitioners through the description of actual settings, schedules, programs, and plans of females dually diagnosed in maximum security prisons. Secondly, through the descriptions of the present habilitation plan, the study can help bridge the gap between the theoretical and the actual plans for habilitation of this population. Thirdly, the study informs the research community by developing grounded theory concerning the

correctional habilitative programs for the dually diagnosed. Fourthly, the study provides an outlook of the future for this sub-population with its present plans of habilitation. Finally, the study documents the importance of a well developed plan of habilitation for the dually diagnosed.

Recommendations for Future Research

There is little disagreement among professionals as to what the treatment process for offenders should include and which goals it should set. However, there is disagreement with the term rehabilitation as it is used in corrections. In the criminal justice system today rehabilitation refers to the process of restoring the individual to behaviors and values that are socially acceptable. Such behaviors and values are, by definition, not illegal. It is assumed in the rehabilitative process that the individual formerly displayed appropriate behavior and held socially acceptable values and temporarily laid them aside.

The problem is very different for the child or adult with retardation caught up in the justice system. People with retardation cannot be assumed to have learned socially acceptable behaviors and values. For these persons the lag in their developmental processes often results in the absence of certain basic social and cognitive skills. Their learning process has often been hit or miss. Therefore, their need is not so much to relearn acceptable behaviors and values but to become acquainted with them. The term

habilitation, therefore, is more appropriate than rehabilitation.

Habilitation is defined as the process of locating the individual's levels of knowledge and skill and developing a plan that proceeds from those levels toward higher levels of independence. The process involves the pooling of resources and personnel in an effort to enhance the individual's physical, mental, social, vocational, and economic condition to the fullest and most useful extent (Santamour, 1986). In designing and implementing habilitative programs for this group of individuals, the programmer must be aware of both problems: retardation and criminal behavior. There is little benefit to the individual or society to attempt to handle one problem or the other without addressing both. Furthermore, to expect the retarded person to learn from his mistakes, as a normal person would, is to show little understanding of the problem of retardation. In recognizing dependency as a problem in retardation and attributing appropriate significance to it in the formulation of programs, the individual's present level of development can be established by diagnostic procedures and programs can be designed to help her. It follows that there would be no point to develop an individual's vocational or independent residential skills without understanding the factors relating to her criminal behavior.

To develop a program for the retarded individual only to modify criminal behavior is to do very little for her or,

in the long run, for society. In working up habilitative programs for this group of individuals, criminal justice personnel must be aware of meeting two problems - retardation and criminal behavior. There is little benefit to the individual or society to attempt to handle one problem or the other without addressing both. It is necessary to develop programs for the retarded offender which evolve out of an understanding of the problem of retardation, i.e., dependency. Likewise, programmers must take into account the sources/factors of criminal behavior for the retarded offender. It is important therefore to attribute appropriate significance to both retardation and behavior and provide for individual evaluation and programming within a setting geared to the security needs of the individual (Santamour & West, 1977).

The goal of academic and vocational programs in correctional institutions is to develop skills that will enable the inmate to function competitively in the job market and appropriately in life function skill areas.

The essentials of the program are:

1. Screening to determine if individual testing is needed.
2. Individual evaluation and vocational placement counseling.
3. Vocational training site placement.
4. Vocational training intervention.
5. Academic intervention.
6. Work adjustment skill development.
7. Follow-up procedures.

The program is designed to incorporate an individualized plan to meet the specific needs of the inmate

in the acquisition of skills, thus increasing his chances of success in the free world (Platt et al., 1982).

Pearce and Anderson (1991) speak of Oregon's approach using the following terms:

Holistic approach: Typically, women under corrections supervision have deficits in a variety of life skill areas such as education, employment, and parenting. They also typically have multiple problems including substance abuse, and mental or emotional difficulties. Addressing only one or two of these issues is not usually effective. Individual needs must be assessed and the whole person must be considered in developing the individual intervention plan.

Duration and continuity: The histories of these women suggest that a quick fix will not work. Problems that have existed for several years require a significant duration of intervention. If the corrections period of intervention is brief, then continuity with community-based aftercare services is essential to success.

Women - specific services: Services to women are most effective when focused on the special needs of women and put in a context that is specifically geared to experiences of women. Life skill training is presented in the context of understanding cultural trends and pressures on the individual. For women, this includes a variety of issues from understanding their perspective of the cycle of abuse to general issues of dependency and empowerment.

Education: While most women offenders have an 11th grade or higher education, they don't have scholastic or job skill levels that promote successful transition to community life. Agencies may also offer group and individual counseling to enhance survival skills, self-esteem, self-confidence, and problem-solving ability.

Employment: To be effective, employment programs for female offenders must develop marketable skills and real work history. It is not sufficient to rely on traditional female job categories, such as food service, basic office skills, or cosmetology. Women offenders must be able to support themselves and their children in the community when they leave supervision. Therefore, training, including actual work experience, in nontraditional vocations and industries should be available to both imprisoned and community-supervised women offenders (Pearce & Anderson, 1991).

Goals of Treatment

The major treatment goal of correctional education programs serving retarded offenders is to develop and implement a system of services specifically designed to meet the needs of these offenders. The system should include diagnosis; evaluation and classification; development of personal, physical, educational, and vocational skills; courses in human sexuality; and development of social values and independent life skills. The ultimate goal is the re-

entry of offenders with retardation into the community as independent, law-abiding, and better-adjusted individuals. In setting objectives for offenders with retardation, it is important to keep in mind their right to equal opportunities to develop their full potential (Santamour, 1977).

In addition to learning how to do the actual physical labor, the retarded offender may need to learn about the etiquette of the work place: how to look for and apply for a job, how to use public transportation to and from work, how to use the telephone, and the importance of getting to work on time. They also need to learn about time clocks, lunch hours, restrooms and coffee breaks.

Since the retarded offenders tend to have few friends or family members they can rely on, they should be taught that there are community services they can turn to. These include medical and dental clinics, hospital emergency rooms, food stamps, the social security supplemental security income program, and retardation agencies (DeSilva, 1980a).

Although the present study indicated that an educationally based habilitation plan is needed, the small population under study may inhibit an extensively funded plan at the state level.

A pilot program that is federally funded may better serve this population and provide benefits nation wide. Due to the limitations and findings of this study, the following recommendations are made:

1. Future research should investigate the dually diagnosed incarcerated who attend vocational training programs prior to incarceration compared to the productivity of those who do not. The findings of the present study imply that one percent of the population received vocational training prior to incarceration. This one percent were able to maintain better self-help skills while incarcerated.

2. Future research should investigate the recidivism rate of high school dropouts compared to high school graduates. This study's findings were 50 percent high school drop outs and 50 percent high school graduates. However, the recidivism data for this key population was not tracked.

3. Future research should include the writing of a habilitation plan for this dually diagnosed incarcerated population.

4. Future research should encompass implementing a habilitation plan for the dually diagnosed. This study provides a documented need for such an intervention plan.

5. Future research should include conducting follow-up data collection of the population used in the present study to form a basis of comparison with the population after intervention has been implemented.

6. Future research should conduct follow-up data collection of this population, after the implementation of the habilitation plan.

7. The present study attempted to gauge the need for an intervention plan in a maximum security prison. Other security levels of the penal system should be addressed in future research.

Summary

In order to answer the question, regarding the potential need for an educationally based habilitation plan for females incarcerated in a maximum security prison who are intellectually challenged and have low adaptability skills, the researcher became a participant observer during the scheduled time period. Grounded theory was developed as items of evidence were assessed from coded field notes, interviews, summaries, memos, and a physical sorting of data. The results of the data analysis indicate that an educationally based plan for habilitation of the dually diagnosed incarcerated population is needed. The data also indicated the divisional needs of the habilitation plan: pre-incarceration employability, characterized by the recurring patterns of employment at or blow minimum wage in unskilled labor, with all subjects specifying a desire to participate in work training programs; the habilitation plan, characterized by the lack of regularly scheduled functional academics, lack of a formal plan of habilitation, and lack of a work plan for this population; and post-incarceration employability, characterized by the high rate of recidivism, limited marketable skills and a return to the

lifestyle held before incarceration. In this study, the primary focus was the need for a plan of habilitation for the dually diagnosed female in a maximum security prison.

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APPENDICES

APPENDIX A

MEMO TO THE HEALTH SERVICES ADMINISTRATOR

November 12, 1991

To: Health Services Administrator

FR: Staff Psychologist

Re: Transitional Living Unit

I am responding to our recent discussion about special needs inmates that are housed on A quad at SHU, what we are calling the Transitional Living Unit (TLU). To properly represent the situation, I will briefly mention how this population and unit was functioning prior to August 1, 1990, as well a how things are doing at this time, and what can be done to enhance the quality of programs and services with existing MBCC resources.

As you are aware, TLU is a multipurpose residential quad. There are 11 rooms on the quad, with an inmate housing capacity of 22. The types of inmates assigned there typically includes:

1. Decompensated mentally ill
2. Mentally retarded
3. Socially vulnerable
4. Medical convalescent
5. Short term incarcerates (120 day people)
6. General population

The first three of the above mentioned will be the focus of this memo, as the latter are there only due to the need for bed space.

I. August 1, 1989 to August 1. 1990

Typically 14-17 mentally ill and mentally retarded inmates resided on the unit. During this time, at least eight inmates (by your account) had to be admitted to Eastern State Hospital. Medical Observation (MO) at EHU was frequently required for certain inmates, including one stay in MO that I am told exceeded a month. Suicidal gestures/attempts were more frequently occurring, and non-compliance with taking psychotropic medication was a chronic problem. Clinical services were limited to occasional consultations with a psychologist for crisis counseling or a brief assessment, and consultations with a psychiatrist which was sometimes regular, and sometimes infrequent. Psychological testing was never performed. Work assignments were usually that of unit orderly, and recreation and arts/crafts activities were irregular and sometime rare.

Educational programming, when offered, consisted of an inmate tutor, and classes for daily living skills was not generally available.

II. August 3, 1990 to present

The number of mentally ill, mentally retarded and socially vulnerable inmates requiring housing on A quad has been reduced to an average of 10. There have been no ESH commitments and MO is rarely used, and then only for several days at a time. Suicidal gestures/attempts occur less often and compliance with taking medication is mush less of a problem. Psychological consultations for supportive counseling, clinical assessment and psychotherapy occur on a variable basis from as may be needed to daily. Psychological testing (despite our modest test inventory) is administered, scored and interpreted as is needed to improve program and service delivery. Psychiatric appointments occur more regularly and more frequently. Work assignments, education, daily living skills classes, arts and crafts, and recreation activities take place (or fail to take place) as before.

III. Proposed Changes

In order to transform a housing unit into a therapeutic milieu and program, a philosophical statement appears needed. The following is recommended:
"The transitional Living Unit at the southwestern maximum security prison shall provide placement, assessment and treatment for inmates experiencing serious social deficiencies or serious mental illness or dysfunction which precludes the inmate's ability to acceptably adapt to the general population setting. Treatment will include services and programmatic activities, based on an individualized treatment plan, that will provide inmates with mental health care and a chance to learn academic, vocational and social skills which will enable them to function independently in the general population, and ultimately in the free community upon release from the prison setting."

Given that the TLU will accommodate and serve three types of special inmates, it follows that each type needs to be properly identified, and that a corollary objective is required to articulate treatment and program purposes. Therefore, the following is recommended:

A. Category one. "Thought or Emotional Disturbance" be identify those inmates referred to TLU for problems of mental illness. These inmates will include those who are experiencing symptoms of a psychotic nature or severe mood disturbance that precludes their ability to acceptably function in the general population.

B. Category two. "Intellectually challenged" be used to identify those inmates referred to TLU for all of the following problems associated with having: 1. low level of mental ability generally defined as a measured level of intellectual functioning at or below 75, 2. impaired level of adaptive behavior (social, communication and daily living skills), and 3. academic skill which fall below the sixth grade level.

C. Category three. "Socially pliable" to be used to identify those inmates referred to TLU for problems associated with immaturity, naivete or impoverished social skills which unreasonably impede the inmate's ability to function in the general population.

APPENDIX B

INFORMAL INTERVIEW GUIDE

Informal Interview Guide

Goal: To investigate the Psychiatrist reflection on the potential effectiveness of an educational program: rationale potential program goals, amount of time needed, type of materials and man power, management and organization.

To explore the above area with the building principal, teacher and case manager.

To gather descriptive data from the above personnel.

To get the participation perspective on the potential effectiveness of such a program.

Procedure: The following questions will be used as a guide only. Interviews will be conducted throughout the three month study and will be conversational in format.

List of People To Be Interviewed

The Warden

The Superintendent Psychologist

Principal

Special Education Teacher

Unit Manager

Inmates in the TC Unit

The Warden Interview

The interview questions were discussed in terms of the future of mentally ill, mentally challenged inmates in the maximum security prison. The warden was very politically conscious in her answers.

Q. How do you see the population's potential growth?
A. I don't believe the number is growing at this time, we aren't anticipating a major growth in the population as a whole and this subsection is only a minor number.

Q. What do you see as the vocational needs?
A. The goal of vocational educational in this facility is for each of the ladies (TLU) to reach their highest level of functioning. Educationally the staff is trying to meet the needs of everyone if this becomes a struggle then due to a major influx then we will have to make adjustments. More staff and programming would be wonderful to assist in planning for this population. As we indicate areas of need when planning for this population, creativity is important.

Recreation, arts and cards as well as the educational setting are utilized to help in rehabilitation. This population receives a special time slot, in arts and crafts and recreation, more structure, and time for one on one conversations with the case managers on a daily basis.

Q. The vocational needs of this population are different, realistically what can be done?
A. The vocational technical (Vo-Tech) needs of everyone here are different. The vo-tech criteria often screens out many who need the services. The problem is how to balance between the resources and the needs. There are over three hundred (300) people with number of needs, education services, one third (1/3) of the population. Often times the rehabilitation areas are competing for the same small population of women while excluding those who don't meet entrance requirements. We are always looking for other resources and using our creativity to accomplish rehabilitation for the others.

The counselor, the superintendent and the psychologist deferred answering the questions on the interview format to the Unit Manager. Her answers are as follows:

Interview With Unit Manager

Q. What are the titles of the people who work here?
A. Unit manager, case manager, counselor, guard.

Q. What are the job descriptions?
A. You will need to see the assistant warden for the legal descriptions of everyone's job.

Q. What are the qualifications for the staff positions?
A. The job is based on the amount of time served with the corrections system. You must have 8 years without a degree or time served with the corrections department, four years with a degree in sociology criminal justice or psychology.

Q. What training do staff members give for working in this unit?
A. You receive 6 weeks of case manager training, ongoing case manager training such as training in Substance Abuse Education (SAE), Rational Training and Stress Management (RTSM).

Q. What reasons do staff members give for working in this unit?
A. They quote it is a new area of work. When you work with mental health inmates it's a great challenge and rewarding.

Q. What do staff members think of their jobs?
A. They believe their job were rewarding, productive and filled with self-gratification.

Q. How are the various personnel thought of by the inmates?
A. I believe they are well liked.

Q. What do staff members consider the most important aspect of their jobs?
A. The most important aspect they felt was trying to keep the nonrational inmates rational, keeping their thought patterns directed in a positive direction while teaching everyday living skills.

Q. What rules and regulations do staff ignore in regards to the TL Unit an the general population?
A. They must follow all the rules and regulations written for all other inmates, they are held accountable just as everyone else is, however, some rules are modified not ignored, these modified rules are used to diffuse potentially volatile situations.

Q. What is the nature of the relationship between you and the inmate?
A. The unit manager reports the relationship as good with good rapport.

Q. Is the tone of the Unit different on different days?
A. The entire institution is different from day to day, this change is reflected in this population. The changes in this population are ongoing, mood changes are a concern of the staff.

Q. How is the end of the sentence thought of?
A. Each inmate talks about the end of her sentence in relations to who or what will be waiting for her upon release. If the outside is or will be good she is not apprehensive about the life change. If what or who is not good then she is apprehensive about her release.

Q. How do you measure success?
A. Success is sometimes difficult to measure due to mood swings of the inmates but basically it is measured according to long term stability and performance of the inmate.

Q. How does the inmate measure success?
A. The inmates measure success by the amount of praise they get.

Q. What are the goals staff members and inmates are working toward?
A. All of the members of the TL Unit have different levels of performance. All of their goals include a performance goals either directly or indirectly.

Q. How do the individual activities relate to the goals?
A. Their daily schedule uses a point system for correct performance of many activities (See TLU Individual Daily Program Plan, Table IV).

Q. How do you feel about modifying the program?
A. (a) Unit Manager - no thoughts.
(b) Staff - would like more one to one relationship with the TL Unit members.

Q. What is the daily, weekly, and monthly schedule? (See Table IV for schedules).

Q. How much actual time is spent on habilitation concerns, daily, weekly, and monthly?
A. Daily - 1:15 - 3:30, Daily 1 hour 45 minutes, Weekly 9 hours 45 minutes. Monthly - more of the program is concerned with everyday life factors, little of their schedule pertains to habilitation concerns.

Q. What form does habilitation take?
A. These inmates do not qualify for the Rehabilitation programs offered by the corrections department.

Q. How are the goals for each inmate habilitation plan decided?
A. This was not applicable because the inmates do not qualify for the established programs.

Q. How many of the inmates feel prepared for employment

upon leaving?
A. Most of the inmates will receive social security, only 20 % will attempt to locate employment. Of those 20%, 95% will return to the same types of unskilled labor they performed before incarceration.

Q. How many inmates in the TL Unit return?
A. You would have to see the school superintendent for that data.

Q. What methods of control are used?
A. Time out, is the principle method of control. The inmates attend group therapy and weekly counseling.

Q. What rewards are used?
A. A point system has been developed which uses a token economy.

Q. What type of program do you feel would work best for this population?
A. Anger therapy, stress management, and a detailed self-help program.

Q. What type of program do you feel would work best for this population?
A. To implement a place of habilitation for this population more staff would need to be employed so each member would receive more one to one assistance, example: one counselor, one psychologist assistant and more direct care personnel.

Q. How would you measure success of your habilitation plan?
A. How well the inmate would interact with people.

Q. What commonalities do you see among the TL Unit inmates beside adaptability an IQ?
A. They all are in need of marketable skills and social skills.

Q. What assessment tools would you like to see administered to measure the success of a habilitation plan?
A. A more complete psychological exam at the intake center to eliminate those who do not quality for the general population or those who should be placed in the TL Unit. They now administer the culture fair IQ test.

Interview With the Psychiatrist

Q. What assessments are given to each inmate for placement into the specialized unit?
A. All inmates are given a quick screening at the reception

center. Once the inmates is admitted here she may be recommended for further testing depending on her behavior. Usually this takes place 2 weeks after admission. The list of assessment instruments may include but are not limited to: The WISC-R, Stanford Binet, The Bender, and the Rorschach.

Q. What is the procedure after assessment?
A. The inmates are then programmed into activities planned by the psychiatrist and the case manager. Goals are than developed.

Q. Is there a minimum amount of time for placement into this unit.
A. No, when the inmate has consistently met their goals the levels may change.

Q. What is the recidivism rate for this unit?
A. Due to the newness of this unit, that information is not available.

Q. What Evaluation procedures are used?
A. The (TABE) test of Adult Basic Education is used unless the inmates expected limitations are below 6th grade level, observation is the primary evaluation tool.

Q. What is being done to reduce the appearance of discrimination based on mental ability?
A. The unit is protected a little bit better other than that you can not tell this unit from any other.

Q. What factors limit the success of the program?
A. Scheduling is a problem and the lack of staff.

Q. What is the basic policy of this unit concerning discipline: (case manager)
A. There are very few modifications made for these inmates.
Education: (Special Education teacher)
Treatment of these inmates is the same as any other inmate. The attempt is made to group all of these inmates together for school.
Training: (Vocational Education)
These inmates do not always meet the qualification for a space in the vocational programs.

Q. What methods or techniques are used educationally with this group?
A. Basic materials are used to teach Daily living skills. The Laubauch method of reading, and Steck-Vaugh materials.

Q. What is the cost of this unit as compared to a none specialized unit?

A. The cost is not in dollars and cents directly but more in a time factor. 40% more time is needed to work adequately with this unit and it is not always there to give.

Q. What are the qualifications of the personnel?
A. See the Job Descriptions sheets for the details but there are no special specific qualifications to work on that unit. In theory it would be advantageous if the staff possessed skills in counseling, interpersonal communication skills, and emotional stability.

Q. How is the overlap at Mental Retardation and Mentally Ill persons housed?
A. These people all live together in one unit.

Q. What are the future plans of this unit?
A. The goal is increase life skills training and add more vocational education areas.

Q. What policy recommendations would you make in regard to the reoccurring persons into this unit?
A. The employment of persons with specialized training in the field of Mental Retardation and Mental Illness would be beneficial as well as developing a Job Training program, this incorporates social skills.

Q. How do you perceive the unit as having changed since its inception?
A. It has become more specific and structured.

Inmate Interview

1. Employment at time of incarceration

2. Sources of income prior to incarceration.
   A. Wages from a job
   B. Support from relatives/friends
   C. Unknown
   D. Public assistance
   E. Illicit activities
   F. Other _____

3. Work history
   Fairly stable: usually held a job for at least a year with no major gaps in employment.
   Unstable: multiple job changes, held jobs usually for less than a year, with major or multiple gaps in employment.
   Negligible: major period of unemployment, reliance on public assistance or unknown source of income with only

occasional or brief periods of employment.
Fairly stable to unstable: once fairly stable in the past, but within a year prior to incarceration had an unstable or negligible work history.
No work history: presentence report and reception package provided, no information on work history.

4. Training accomplished prior to incarceration.

5. Training attempts during incarceration number types.

6. Official Habilitation Plan.

APPENDIX C

VARIABLES LIST

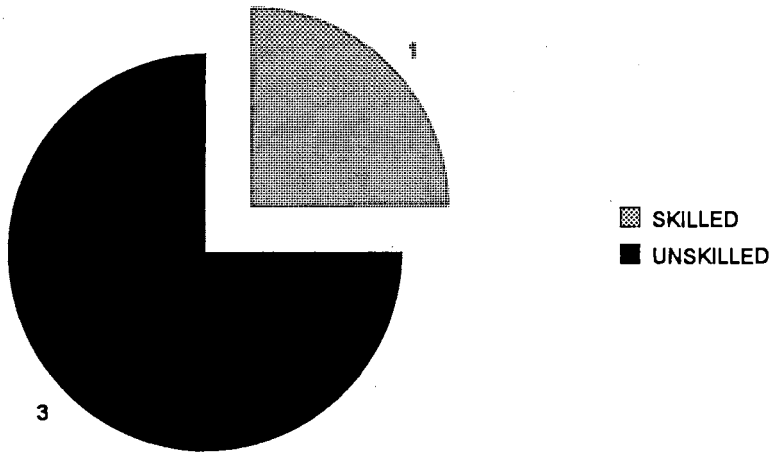
Variables to Obtain from the Files:

Age
Race
Offense Classification
Educational Level
Socio-economic Level
Marital Status
Place of Birth
Public Defender's Name
Private Attorney's Name
Classification Level
New or Repeat Incarceration
    If Repeat:
        A. Amount of time out
        B. Amount of time in
        C. Offense
History of Crimes
History of Emotional Stability
Location of
    A. Husband
    B. Children
    C. Other family members incarcerated, if any
Visitors
    A. Who
    B. How often
    C. Any behavior changes afterwards
Location of
    A. Crime
    B. Others (if any) involved
    C. Sentence of others (if any)
    D. Attorney of others (if any)
Offense Committed
    A. Alone
    B. Others
Adaptability Level
    A. Cultural
    B. Incarceration
Programs Involved
    A. Vocational Education
    B. School
    C. Job
    D. Etc.
Assessment Information
    A. Intelligence
    B. Psychological
    C. Adaptability
Recommendation from Assessment

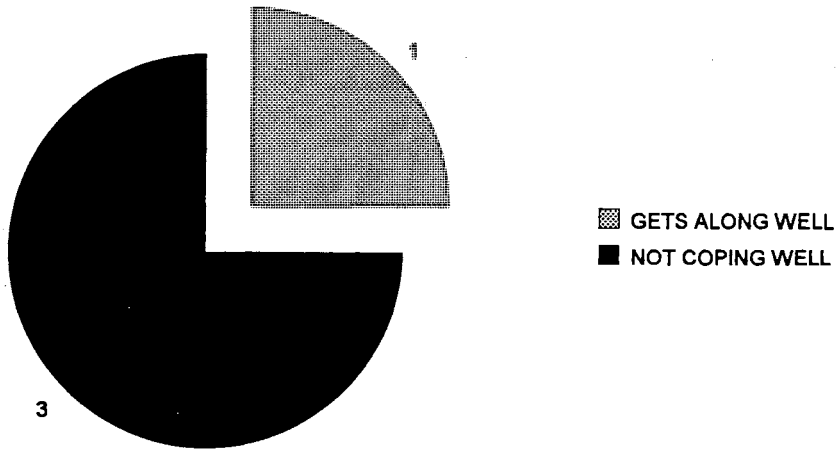
APPENDIX D

GRAPHIC REPRESENTATION OF DATA

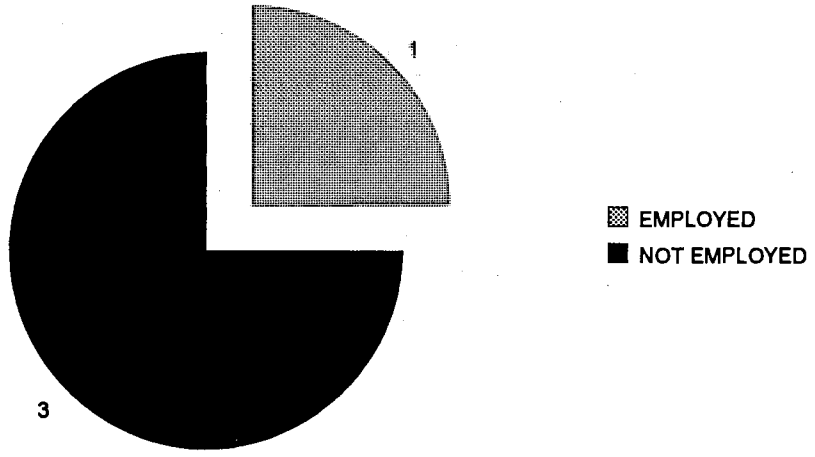
EMPLOYMENT AT TIME OF INCARCERATION



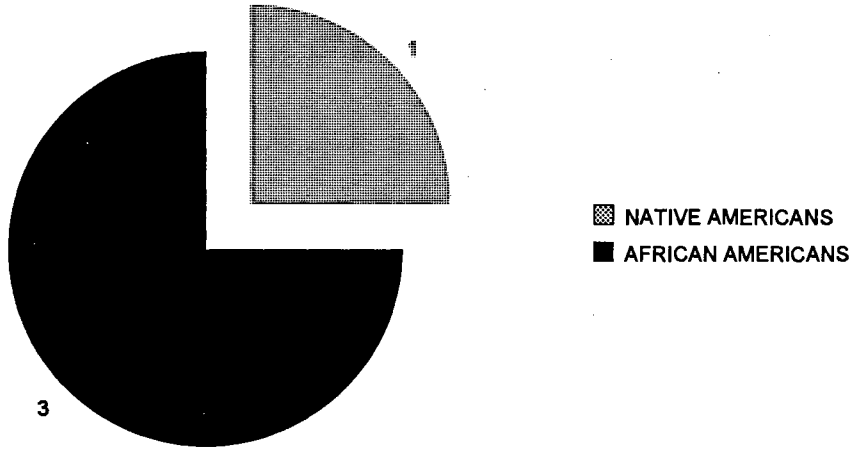
ADAPTABILITY TO INCARCERATION



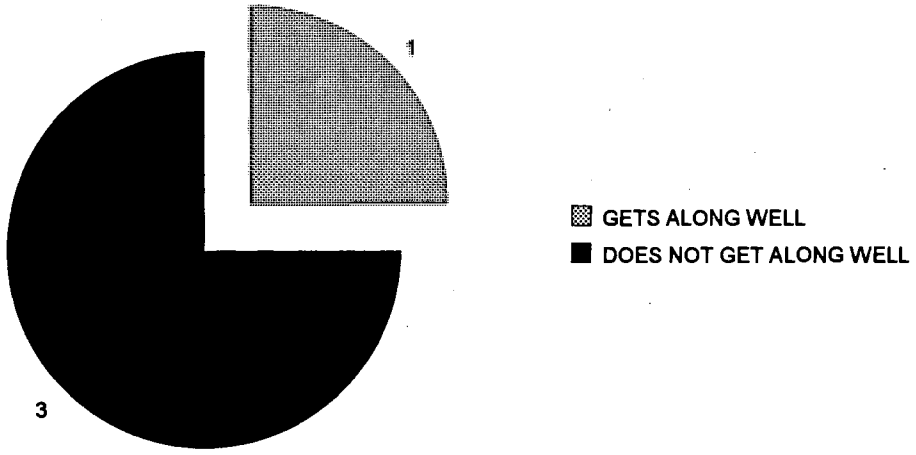
EMPLOYED WHILE INCARCERATED



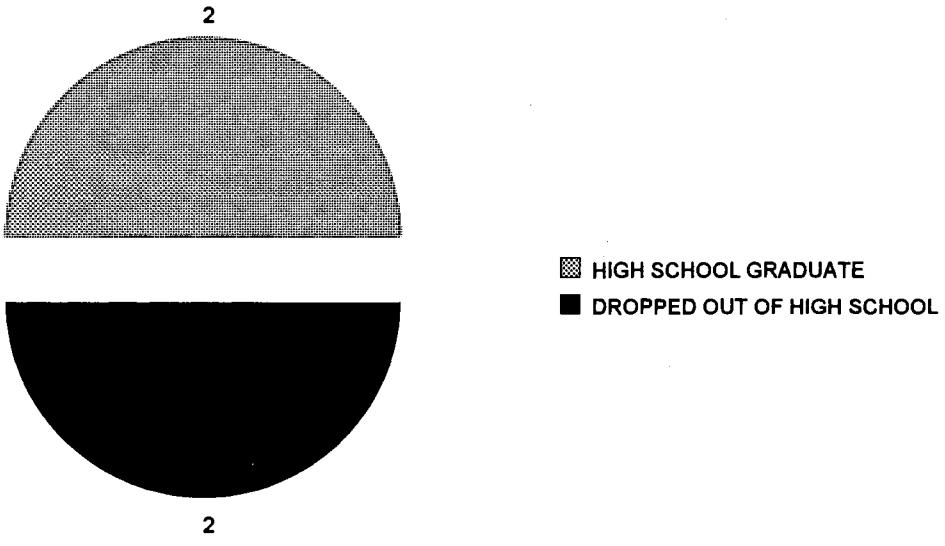
RACE



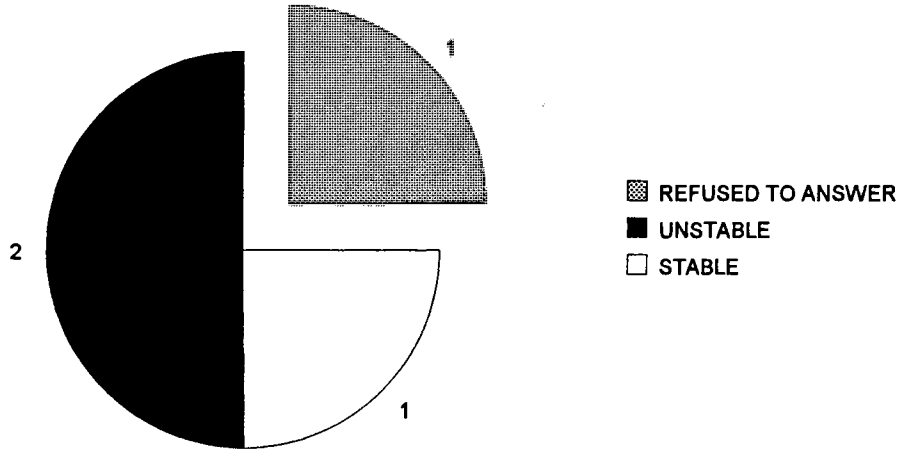
ADAPTABLITY TO NON-PRISON CULTURE



EDUCATION



HISTORY OF EMOTIONAL STABILITY



APPENDIX E

IRB CONSENT FORM

OKLAHOMA STATE UNIVERSITY
INSTITUTIONAL REVIEW BOARD
FOR HUMAN SUBJECTS RESEARCH

Proposal Title: AN ASSESSMENT OF THE POTENTIAL EFFECTIVENESS OF AN EDUCATIONAL PROGRAM FOR INCARCERATED FEMALES IN MAXIMUM PRISONS WHO HAVE LOW ADAPTABILITY LEVELS AND WHO ARE INTELLECTUALLY CHALLENGED

Principal Investigator: B. WILKINSON/ CHARLOTTE MYLES-NIXON

Date: 7-10-92 IRB # ED-93-003

This application has been reviewed by the IRB and

Processed as: Exempt [ ] Expedite [ ] Full Board Review [XX]

Renewal or Continuation [ ]

Approval Status Recommended by Reviewer(s):

Approved [XX] Deferred for Revision [ ]

Approved with Provision [ ] Disapproved [ ]

Approval status subject to review by full Institutional Review Board at next meeting, 2nd and 4th Thursday of each month.

Comments, Modifications/Conditions for Approval or Reason for Deferral or Disapproval:

PROVISIONS RECEIVED AND APPROVED

Signature: Marcia K. Tilley Date: 9-21-92

Chair of Institutional Review Board

VITA

Charolette Myles-Nixon

Candidate for the Degree of

Doctor of Philosophy

Thesis: AN ASSESSMENT OF THE POTENTIAL EFFECTIVENESS OF AN EDUCATIONAL PROGRAM FOR INCARCERATED FEMALES IN MAXIMUM SECURITY PRISON WHO HAVE LOW ADAPTABILITY LEVELS AND WHO ARE INTELLECTUALLY CHALLENGED.

Major Field: Applied Behavioral Studies

Biographical:

Personal Data: Born in Enid, Oklahoma, November 20, the daughter of Willie and Dorine Myles. Married to Alvin Nixon, one son Darrin Nixon.

Education: Graduated from Enid High School, Enid, Oklahoma in May 1972; received Bachelor of Science Degree in Speech and Hearing and Special Education from Central State University, Edmond, Oklahoma in May 1977; Master of Education Degree in Learning Disability and Emotional Disabilities from Central State University, Edmond, Oklahoma in July 1979; received certificate of Psychometry from the University of Oklahoma, Norman, Oklahoma in May 1984; completed requirements for the Doctor of Philosophy in Applied Behavioral Studies in July 1993 from Oklahoma State University.

Professional Experience: Instructor, Department of Curriculum and Instruction, University of Central Oklahoma, Edmond, Oklahoma, August 1989 to present. Speech Pathologist/Teacher, September 1980 to 1989. Special Education teacher to speech pathologist in nine-year career in the Mid-Del School System. During the first eight years taught mentally and physically handicapped students, including students with a wide range of mental and physical abilities and emotionally disturbed students. In the 1988-89 school year speech pathologist for grades kindergarten through high school senior. Taught speech and language

therapy at three schools for all students, including therapy for educable mentally handicapped and emotionally disturbed children. From 1984 to 1988 taught trainable mentally handicapped students with independent skills, ages 14 to 21, at Jarman Junior High in grades 7-9. The self-contained class was titled "How to Be a Functioning Individual in Society," and including teaching living skills such as cooking, cleaning, hygiene and social skills, and public and private behavior. In 1983 assisted in writing the guidelines for entrance and removal from the living skills program. Also served as girls' track coach for three seasons. September 1978 to May 1980; taught high school class for educable mentally handicapped students, including one trainable student, seventh grade; and one emotionally disturbed student, ninth grade. Also responsible for vocational rehabilitation and vocational-technical placement for students. December 1976 to December 1978; taught severe and profound mentally handicapped students from ages 6 and up within Enid State School. 1975 to 1976; taught play school and after school programs and Mother's Day Out while attending college.