

WORKING WITH INCARCERATED AND REENTERING WOMEN: CURRICULA AND RESOURCES FOR INDIVIDUAL AND GROUP WORK

Internet Resources

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

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Introduction

Many researchers and practitioners working with justice-involved women understand the gendered nature of how women end up incarcerated. They also recognize that many (if not most) of the women in these institutions have experienced trauma – either as a child and/or as an adult. Practitioners working with women in jails and prisons also understand that all imprisoned women experience the trauma of incarceration. As a result, advocates, service providers, and others, have created programming for women that is both gender-responsive and trauma-informed.

This listing includes resources that give some examples of gender-responsive and trauma-informed programs and curricula for practitioners working with justice-involved women. We include articles that highlight and compare features of some of the emerging models and curricula for groups for women in jails and prisons. Though many of these programs require purchase for licensing, where we could find the curricula or a preview of the curricula online, we included them. Also included are other trauma-related curricula that have been implemented in women’s prisons and/or jails that are not necessarily specifically gender-responsive or trauma-informed, but which we thought could be relevant and helpful to someone interested in starting a group in jail or prison.

AUDIENCE

Practitioners, advocates, educators, and other agencies working with incarcerated and/or reentering people.

A NOTE ON LANGUAGE

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

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

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

Not all of the articles included in this document are available for free online. Some require a subscription or fee to access.

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

Resources for Anti-Domestic Violence Advocates Starting Groups in Prison or Jail

The resources below are for advocates working with battered women in jail or prison and for advocates who facilitate groups for women, or want to start one, inside correctional facilities.

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



Gender-Responsive and/or Trauma-Informed Healing Practices with Survivors: Background Resources

HOLISTIC HEALING SERVICES FOR SURVIVORS: SASP WHITE PAPER

by Terri Poore, Toby Shulruff, and Kris Bein (2013)

Excerpt: “Emotion and memory live in the body as well as the brain, and holistic healing approaches help to heal and empower the whole person. They move beyond cognitively processing the trauma and into building skills for self-regulation, reconnecting with the body, connecting with others, and learning basic techniques for relaxation. Meditation, yoga, and art and music therapies can help the brain to process traumatic information, including intrusive memories. Moreover, many of these techniques teach us – survivors and advocates alike – to connect with ourselves in positive, nourishing ways. Movement, energy work, and connection with plants and animals help to bring survivors back into their bodies, to interact with the world around them, to tell their stories in a language other than spoken words, and to begin to trust others again. Local programs who are interested in beginning or expanding services based on holistic healing approaches for survivors will find support for their efforts in the ‘Why Holistic Healing’ section, draw inspiration from the work highlighted in the ‘Voices from the Field’ section, and, more concretely, find some crucial steps to incorporate various healing approaches in the ‘Working Together’ section.”

<http://resourcesharingproject.org/sites/resourcesharingproject.org/files/Holistic%2BHealing%2BSASP%2BPaper%2BFINAL.pdf>

Research Addendum:

<http://resourcesharingproject.org/sites/resourcesharingproject.org/files/Holistic%2BHealing%2BSASP%2BResearch%2BAddendum%2BFINAL.pdf>

TRAUMA-INFORMED CARE: BEST PRACTICES AND PROTOCOLS FOR OHIO’S DOMESTIC VIOLENCE PROGRAMS

by Sonia D. Ferencik and Rachel Ramirez-Hammond (2011)

Excerpt: “Victims of domestic violence, both adults and children, are survivors of traumatic experiences. Being hurt by someone you love and is a part of your family can have serious consequences on how survivors of domestic violence think, act and feel. In a 2010 survey of Ohio’s domestic violence programs, over 90% of respondents responded that most or all adults and children who experience domestic violence have a traumatic experience that impacts their thoughts, feelings or behaviors. Therefore, helping professionals working in domestic violence services and programs need a basic understanding of how traumatic experiences impacts individuals. Understanding trauma and trauma reactions will inform and guide domestic violence staff in their interactions and decision-making process with adults and children who seek services. . . . *Trauma-Informed Care Protocols and Best Practices* has been developed to assist

domestic violence programs become more trauma-informed when providing services to survivors of domestic violence.”

http://stoprelationshipabuse.org/wp-content/uploads/2013/06/ODVN_Trauma-InformedCareBestPracticesAndProtocols.pdf

Guides for Anti-Domestic Violence Advocates Starting a Group in Jail or Prison for Survivors

CIRCLE OF HOPE: A GUIDE FOR CONDUCTING PSYCHOEDUCATIONAL SUPPORT GROUPS

by the Washington Coalition of Sexual Assault Programs, Second Edition (2014)

Excerpt: “This manual is considered a basic guide, written with beginner facilitators in mind. It offers practical guidance and recommendations for facilitation and design of psychoeducational support groups. The sources include existing research and literature about groups, the Office of Crime Victims Advocacy (OCVA) support group standards, and the experiences of those who participated in writing this manual. We encourage experienced group facilitators to add their own wisdom and experience to the information presented here as they conduct support groups.”

http://www.wcsap.org/sites/default/files/uploads/working_with_survivors/support_groups/Circle_of_Hope_2014.pdf

GUIDELINES FOR PROGRAMS WORKING WITH WOMEN WHO USE FORCE

by the Women Who Use Force Ad Hoc Committee of Ohio Domestic Violence Network (2011)

Excerpt: “The main purpose of this document is to inform providers of some of the issues related to providing services to women who use force and to establish standards to increase the likelihood of providing appropriate and successful services to Women Who Use Force in Ohio. The standards can be used specifically to help develop new services or evaluate existing services for women who use force. . . .Due to the changes in law enforcement policies encouraging or mandating arrests of the predominant aggressor when responding to domestic violence calls, an increasing number of women have been arrested and referred to traditional batter intervention programs. In looking at the literature regarding woman who use force, it is apparent that the dynamics which guide women’s use of force and men’s use of force are different and therefore would imply that traditional treatment programs would not be appropriate for both populations.”

http://www.ncdsv.org/images/odvn_guidelinesforprgrmswkgwomenwhouseforce_7-2011.pdf

ISSUES TO CONSIDER WHEN FACILITATING GROUPS WITH BATTERED WOMEN IN JAIL OR PRISON

by Andrea Bible for the National Clearinghouse for the Defense of Battered Women (2011)

Author’s Description: “This 59-page resource explores issues advocates should consider when facilitating (or thinking of facilitating) a group with battered women in jail or prison. In particular, it addresses the realities of working inside of correctional facilities and with incarcerated women, and the importance of understanding and considering these challenges when developing and/or running groups within prisons or jails. While it is not a curriculum, it does explore potential topics to address in groups (particularly groups meeting in prison), such as healing tools and strategies, grief and guilt, domestic violence that is happening within the prison, and preparing and supporting survivors who are about to be released.”

<http://www.ncdbw.org/NCDBW-groups-prisons-jails-March-2011.pdf>

WORKING WITH BATTERED WOMEN IN JAIL: A MANUAL FOR COMMUNITY-BASED BATTERED WOMEN'S ADVOCATES

by the National Clearinghouse for the Defense of Battered Women (2009)

Author's Description: "Women who are battered by their partners are everywhere – and that includes in your local jail. Unfortunately, in many communities, jailed women are quite invisible, even to battered women's organizations. If you are not already doing so, we want you (and other community-based advocates) to work with jailed women. Since you are reading this manual, we assume you are interested in doing work with jailed battered women, or are already doing so. Battered women in jail need help to heal from the experience of battering and from the pain and trauma of incarceration. They deserve justice and they need safety. We believe community-based advocates can be an important part of their journey to find justice and safety. . . .The language and strategies described in this manual are for advocates working in community-based, non-profit organizations. This manual is not designed for systems-based or law enforcement victims' advocates (such as those employed by a prosecutor's office or police department), since they have a conflict of interest that generally prevents them from advocating with defendants in criminal cases. <http://www.ncdbw.org/NCDBW-jail-manual.pdf>

Curriculum Models: Summaries and Comparisons

The resources in this section include summaries and comparisons between various curricula models related to trauma, gender and co-occurring issues.

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



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

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

Author's Abstract: "Recent guidelines for incarcerated women's programming have called for interventions that address [justice-involved peoples'] traumatic experiences, posttraumatic stress disorder (PTSD), and substance use in an integrated manner. Seeking Safety (SS) is an empirically supported cognitive behavioral manualized treatment for individuals with PTSD and substance use disorders. This study examined the effectiveness of SS with 59 incarcerated women who completed the intervention and 55 who were waitlisted. Participants in SS demonstrated greater symptom improvement in PTSD and depression as well as improved interpersonal functioning and coping as compared to [those] waitlisted. These findings provide preliminary support for the use of this intervention with incarcerated women."

For purchase:

<http://www.tandfonline.com/doi/pdf/10.1080/15299732.2011.608780>

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

by Nena Messina, Christine E. Grella, Jerry Cartier, and Stephanie Torres (2010)

Author's abstract: "This experimental pilot study compared post-release outcomes for 115 women who participated in prison-based substance abuse treatment. Women were randomized to a gender-responsive treatment (GRT) program using manualized curricula (Helping Women Recover and Beyond Trauma) or a standard prison-based therapeutic community (TC). Data were collected from the participants at prison program entry and 6 and 12 months after release. Bivariate and multivariate analyses were conducted. Results indicate that both groups improved in psychological well-being; however, GRT participants had greater reductions in drug use, were more likely to remain in residential aftercare longer (2.6 months vs. 1.8 months, $p < .05$), and were less likely to have been re-incarcerated within 12 months after parole (31% vs. 45%, respectively; a 67% reduction in odds for the experimental group, $p < .05$). Findings show the beneficial effects of treatment components oriented toward women's needs and support the integration of GRT in prison programs for women."

For purchase:

<http://www.journalofsubstanceabusetreatment.com/article/S0740-5472%2809%2900150-0/pdf>

MODELS FOR DEVELOPING TRAUMA-INFORMED BEHAVIORAL HEALTH SYSTEMS AND TRAUMA-SPECIFIC SERVICES: AN UPDATE OF THE 2004 REPORT

by Ann Jennings for the National Center for Trauma-Informed Care Center for Mental Health Services (2008)

Excerpt: “This 2007 technical report identifies revised criteria for building a trauma-informed mental health service system, summarizes the evolution of trauma-informed and trauma-specific services in state mental health systems, and describes the increasing numbers and range of trauma-based service models and approaches available for implementation by state service systems, provider agencies and communities across the country. This report includes updated author descriptions of trauma service models identified by states and organizations for the 2004 technical report; author descriptions of evidence-based and promising practice models identified in SAMHSA’s *Model Programs and National Registry of Evidence-Based Programs and Practices*; author descriptions of empirically supported treatments and promising practices identified by the National Child Traumatic Stress Network, and empirically supported treatment approaches and promising practices reported by state trauma-informed contacts. All models were designed explicitly to address trauma in the lives of children, their parents or caregivers, and adults.”

<http://www.ct.gov/dmhas/lib/dmhas/trauma/TraumaModels.pdf>

2004 Report:

<http://www.theannainstitute.org/MDT.pdf>

WOMEN AND ADDICTION: A TRAUMA-INFORMED APPROACH

by Stephanie S. Covington (2008)

Author’s Abstract: “Historically, substance abuse treatment has developed as a single-focused intervention based on the needs of addicted men. Counselors focused only on the addiction and assumed that other issues would either resolve themselves through recovery or would be dealt with by another helping professional at a later time. However, treatment for women’s addictions is apt to be ineffective unless it acknowledges the realities of women’s lives, which include the high prevalence of violence and other types of abuse. A history of being abused increases the likelihood that a woman will abuse alcohol and other drugs. This article presents the definition of and principles for gender-responsive services and the Women’s Integrated Treatment (WIT) model. This model is based on three foundational theories: relational-cultural theory, addiction theory, and trauma theory. It also recommends gender-responsive, trauma-informed curricula to use for women’s and girls’ treatment services.”

<http://www.centerforgenderandjustice.org/assets/files/CovingtonSARC5.pdf>

ENHANCING SUBSTANCE ABUSE RECOVERY THROUGH INTEGRATED TRAUMA TREATMENT

by Norma Finkelstein, et al., for the National Trauma Consortium (2004)

This piece is written for practitioners interested in implementing a trauma-informed substance about curricula for women. Excerpt: “This paper describes the four models developed and tested in the Women with Co-Occurring Disorders and Violence Study (WCDVS) as well as another frequently used model that can be integrated within substance abuse treatment and provides guidance for providers in choosing a model for their agency. The nine sites participating in the (WCDVS) also adapted their models and group curricula for specific local circumstances, including cultural and linguistic adaptations. These adaptations will be discussed in a future monograph.”

www.thegreenbook.info/summit/documents/exploreroles4.pdf

HELPING WOMEN RECOVER: CREATING GENDER-RESPONSIVE TREATMENT

by Stephanie S. Covington (2002)

Excerpt: “This chapter presents a new, integrated approach to women's treatment, based on theory, research, and clinical experience. The treatment philosophy and guiding principles discussed are designed to create a foundation for clinical thought and practice. These principles can be applied in any setting (inpatient, outpatient, private practice, therapeutic community, criminal justice, and so on) and to any modality (individual, group, or family therapy). A key concept is that

if we are to develop effective treatment for women, we must include the experience and impact of living as a woman in a male-based society – in other words, gender – as a part of the clinical perspective.”

<http://www.stephaniecovington.com/assets/files/5.pdf>

HELPING WOMEN RECOVER: A PROGRAM FOR TREATING SUBSTANCE ABUSE (HWR)

by Stephanie S. Covington (1999)

Author’s Description: “In this revised version of *Helping Women Recover*, Dr. Covington addresses the special concerns and issues of women with substance use disorders who are in correctional settings. The facilitator’s guide has specific information on women in the criminal justice system, as well as special tips on program facilitation in this venue. These evidence-based materials are widely used in jails, prisons, drug courts, and community correctional settings.”

For purchase:

<http://www.stephaniecovington.com/helping-women-recover-a-program-for-treating-substance-abuse.php>

Curricula for Practitioners Working With Justice-Involved Women

The selected curricula in this section are for practitioners to use when leading trauma-informed groups for women, and are either specifically created for women in prison or jail, or can be applied within those settings. Additionally included are curricula created specifically geared towards women who have experienced domestic violence, as well as for women who have used force, and curricula that address co-occurring issues such as substance abuse. We also included other non-gender specific curricula that are used with both men and women in custody including cognitive behavior groups and yoga groups, as in recent years, yoga and meditation groups have grown exponentially in popularity and use within correctional facilities.

When available, we included the curricula or excerpts of the curricula, though many are only available with purchase.

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Selected Evaluated Curricula for Practitioners Working With Justice-Involved Women

EXAMINATION OF A VIOLENCE PREVENTION PROGRAM FOR FEMALE OFFENDERS

by Nena P. Messina, Jeremy Braithwaite, Stacy Calhoun and Sheryl Kubiak (2016)

Author's Abstract: "Only a few interventions have been designed to address violence in women's lives, both as victims or as perpetrators. Moreover, women in prison are consistently reported to have more complex histories of exposure to violence, trauma, and abuse than their male counterparts. More than 6500 women currently reside in California's state prisons, with two-thirds serving lengthy sentences for violent crimes. Recent policy changes regarding violent crimes require changes in the type of programming and services offered to these incarcerated women. This study examines results from the intervention, *Beyond Violence*, a trauma-informed and gender-responsive approach to violence prevention that was provided to women serving sentences for violent crimes (n = 91) in two California prisons... The intervention showed significantly positive outcomes, with moderate to high effect sizes for women incarcerated for long terms or life on reductions in posttraumatic stress disorder, anxiety, anger and aggression, and symptoms of serious mental illness. Implementing *Beyond Violence* may result in reductions in violent behavior among longer term female inmates. Also, findings indicate that the curricula can be effectively facilitated by incarcerated peer educators. Further investigation regarding the potential cost-effectiveness of peer educators versus trained clinical staff is needed."

<http://online.liebertpub.com/doi/pdfplus/10.1089/vio.2015.0048>

TESTING A VIOLENCE-PREVENTION INTERVENTION FOR INCARCERATED WOMEN USING A RANDOMIZED CONTROL TRIAL

by Sheryl P. Kubiak, Woo Jong Kim, Gina Fedock, and Deborah Bybee (2014)

Author's Abstract: "Objective: Beyond Violence (BV), a new prevention program for women with assaultive offenses, demonstrated feasibility in previous studies. This study's purpose is to assess the efficacy of BV using a randomized control trial. Method: Eligible women were randomly

assigned to treatment as usual (TAU) and the experimental condition (BV). Measures of mental health and anger were administered to women at pre- and post-intervention. Results: Outcomes reveal positive changes for both groups. Significant between-group differences favor BV on measures of anxiety and anger. Moreover, BV is cost-effective with only 20 sessions compared to 44 sessions for TAU. Conclusion: The demonstrated effectiveness of BV is promising for this underserved population of women. Next steps: Replication and assessing long-term outcomes.”
<http://rsw.sagepub.com/content/early/2014/05/22/1049731514534300.abstract>

ASSESSING THE FEASIBILITY AND FIDELITY OF AN INTERVENTION FOR WOMEN WITH VIOLENT OFFENSES

by Sheryl P. Kubiak, Gina Fedock, Elizabeth Tillander, Woo Jong Kim and Deborah Bybee (2013)

Author’s Abstract: “Women convicted of assaultive or violent offenses represent a small but important subpopulation of adults involved in the criminal justice system. The limited treatment and rehabilitation programs that are available for these women are usually developed for [justice-involved males]and do not consider factors that are especially relevant to women, such as higher rates of mental health and substance use disorders as well as their likely histories of interpersonal violence. Moreover, women’s trajectories into violent behavior – as well as their trajectories out – may differ from their male counterparts. Due to the absence of programs available for this unique population, a new gender-specific and trauma informed intervention, Beyond Violence, was developed. This paper describes a pilot study with a mixed-methods approach that assesses the feasibility and fidelity of the intervention within a state prison for women. Overall, various components of feasibility (i.e., engaging the target population, gaining institutional support, and finding skilled treatment staff), were realized, as were fidelity elements such as adherence to the intervention material, and high attendance and satisfaction by participants. The positive results of this pilot study increase the likelihood of dissemination of the intervention and a randomized control trial is currently underway.”

<http://www.ncbi.nlm.nih.gov/pubmed/24055731>

ASSESSING SHORT-TERM OUTCOMES OF AN INTERVENTION FOR WOMEN CONVICTED OF VIOLENT CRIMES

by Sheryl Kubiak, Woo Jong Kim, Gina Fedock (2012)

Author’s Abstract: “Women convicted of violent offenses represent a small but important subpopulation of women involved in the criminal justice system. Correctional administrators working with these women often rely on treatment and rehabilitation programs developed for violent [justice-involved males]. Although women’s trajectories into violent behavior – as well as their trajectory out – differ from their male counterparts, the field is marked by the absence of interventions designed specifically for women with violent offenses. As attention grows in the research literature and in community settings about “women who use force” it is important to develop interventions that effectively modify aggressive behavior as well as the underlying precursors of such aggression. This paper describes a pilot study as one step in a developmental approach to intervention research. Beyond Violence, a gender specific and trauma-informed intervention, was piloted with 35 women incarcerated in a state prison with a conviction for a felony-level assault. Short-term outcomes assessed through changes in pre- and posttest measures show reductions in mental health symptoms associated with depression, anxiety, posttraumatic stress disorder, and serious mental illness. The encouraging results of this pilot study have led to the next step in the intervention research process of testing the program in a randomized controlled trial that is currently underway.”

http://www.stephaniecovington.com/assets/files/2013/assessingshort-termoutcomesofaninterventionwomenconvictedofviolentcrimes_kubiakoctober2012.pdf

General Gender-Responsive, Trauma-Informed Curricula

MOVING ON

by Orbis Partners (2010)

Author's Description: "Moving On™ is an evidence-based program developed exclusively for women at risk for criminal justice involvement. The primary goal of this program is to provide women with alternatives free from criminal activity by assisting them to mobilize and build personal strategies, natural supports and community resources. Moving On™ has an educational and cognitive skills building approach. It can be delivered by trained staff in small groups or on an individual basis."

Access requires login and password:

<https://orbispartners.com/interventions/for-females/moving-on/>

- **Excerpt from MOVING ON: A Program for At-Risk Women (Module 5 – Making Connections and Staying Healthy – Facilitator's Guide)**

by Marilyn Van Dieten (2010)

Excerpt: "Module 5 explores the woman and her relationship with herself and her connections with others. It also focuses on making healthy choices. As the women progress through this module, they will face difficult personal challenges. They will be asked to explore their own communities in order to establish a sense of what, where, and how they can begin to connect. Family is explored as well. Participants are encouraged to identify and then build supports that will assist with an array of family needs. Facilitators should acknowledge the challenges undertaken by the women in this program and work intentionally to build optimism and hope. Whenever possible, validate strengths and reinforce successes."

Automatic download:

http://www.hazelden.org/web/public/document/7553_movingonmodule5.pdf

BEYOND TRAUMA: A HEALING JOURNEY FOR WOMEN

by Stephanie S. Covington (2003)

Author's Description: "*Beyond Trauma: A Healing Journey for Women* is an 11 session manualized curriculum for women's services based on theory, research, and clinical experience. The evidence-based materials are designed for trauma treatment, although the connection between trauma and addiction in women's lives is a primary theme throughout. The *Beyond Trauma* program materials include a facilitator's guide, a participant's workbook entitled *A Healing Journey*, and three DVDs (2 for facilitator training and 1 for clients). The program is based on the principles of relational therapy; it uses cognitive-behavioral techniques (CBT), mindfulness, and expressive arts."

For purchase:

<https://www.hazelden.org/store/item/436137>

TRAUMA RECOVERY AND EMPOWERMENT MODEL (TREM)

by Maxine Harris (1998)

SAMSHA's Description: "The Trauma Recovery and Empowerment Model (TREM) is a fully manualized group-based intervention designed to facilitate trauma recovery among women with histories of exposure to sexual and physical abuse. Drawing on cognitive restructuring, psychoeducational, and skills-training techniques, the gender-specific 24-to-29-session group emphasizes the development of coping skills and social support. It addresses both short-term and long-term consequences of violent victimization, including mental health symptoms, especially posttraumatic stress disorder (PTSD) and depression, and substance abuse. TREM has been

successfully implemented in a wide range of service settings (mental health, substance abuse, criminal justice) and among diverse racial and ethnic populations.”

<http://www.communityconnectionsdc.org/web/page/657/interior.html>

For purchase:

<http://www.communityconnectionsdc.org/training-and-store/store#!/Trauma-Recovery-&-Empowerment-A-Clinicians-Guide-to-Working-with-Women-in-Groups/p/80215599/category=22725096>

Groups for Women Who Have Experienced Domestic Violence

MERIDIANS FOR INCARCERATED WOMEN

by Lisa Young Larance, Jeffrie K. Cape, and David J.H. Garvin developed for the Michigan Department of Corrections (2012)

Author’s description: “Meridians for Incarcerated Women is a 20-session gender-informed, evidenced based support and intervention program for women who have experienced, perpetrated, survived, and/or witnessed domestic violence. The skills-based program provides women the unique opportunity to reflect upon their pasts as they make choices for violence-free futures.”

<http://csswashtenaw.org/renew/meridians/>

- ***The Meridians for Incarcerated Women: Facilitator Manual***

Author’s description: “[This manual] guides group facilitators through each assignment and presentation’s purpose, implementation, and key points. In addition, the Facilitator Manual is rich with supplemental statistics, group facilitation exercises, and more!”

<http://csswashtenaw.org/wp-content/uploads/2013/07/MeridiansIWFacilitatorManual09152012.pdf>

- ***The Meridians for Incarcerated Women: Participant Workbook***

Author’s description: “Participant Workbook assignments and presentations facilitate group participant healing and introspection. The Participant Workbook begins with an emphasis on deconstructing power and control dynamics and concludes with women identifying previously unrecognized resources, skills, and social supports.”

<http://csswashtenaw.org/wp-content/uploads/2013/07/MeridiansIWPParticipantWorkbook09152012.pdf>

Groups for Women Who Use Force

BEYOND ANGER AND VIOLENCE: A PROGRAM FOR WOMEN

by Stephanie S. Covington (2014)

Author’s Description: “*Beyond Anger & Violence* is a manualized curriculum for women who are struggling with the issue of anger and who are in community settings (outpatient and residential substance abuse treatment programs, domestic violence shelters, mental health clinics, etc.).

Beyond Anger & Violence is the first manualized intervention for women that focuses on anger, as well as the trauma they may have experienced. It utilizes a variety of evidence-based therapeutic strategies (i.e., psycho-education, role playing, mindfulness activities, cognitive behavioral restructuring and grounding skills for trauma triggers). This 42 hour intervention consists of a facilitator guide, participant workbook and DVD. The facilitator’s manual for the 21-session program is a step-by-step guide containing the theory, structure, and content needed for running groups.”

For purchase:

<http://www.stephaniecovington.com/beyond-anger-and-violence-a-program-for-women1.php>

BEYOND VIOLENCE: A PREVENTION PROGRAM AND CRIMINAL JUSTICE-INVOLVED WOMEN

by Stephanie S. Covington (2013)

Author's Description: "*Beyond Violence* is an evidence-based manualized curriculum for women in criminal justice settings (jails, prisons, and community corrections) with histories of aggression and/or violence. It deals with the violence and trauma they have experienced, as well as the violence they may have perpetrated. This four-level model of violence prevention considers the complex interplay between individual, relationship, community, and societal factors. It addresses the factors that put people at risk for experiencing and/or perpetrating violence. This model is used by the Centers for Disease Control and Prevention (CDC), World Health Organization (WHO), and was used in the Prison Rape Elimination Act (PREA) research on women in prison. This is a 20 session (40 hour) intervention that consists of a facilitator guide, participant workbook and DVD."

For purchase:

<http://www.stephaniecovington.com/beyond-violence-a-prevention-program-for-criminal-justice-involved-women1.php>

TURNING POINTS: A NON-VIOLENCE CURRICULUM FOR WOMEN

by Ellen Pence, Laura Connelly and Melissa Scaia (2010)

Author's Description: "Turning Points: A Nonviolence Curriculum for Women is an educational program for women who use both legal and illegal violence against their partners. Its focus is on helping women understand the connections between the violence they experience and the violence they use. Its overall goal is to help them end both."

For purchase:

<http://dvtturningpoints.com/products>

VISTA CURRICULUM

by Lisa Larance(2006)

Author's Description: "The Vista Curriculum is a 20-week curriculum used by the Jersey Battered Women Services (JBWS) Vista Program. The program provides services to women who use any combination of control, force, or violence in their intimate relationships. Vista's creation, implementation, and services are grounded in the belief that women who use non-self-defensive physical force against their intimate partners – be they domestic violence survivors or not – are putting themselves and others at greater risk of harm and, therefore need contextualized advocacy, support, and intervention."

Register to download:

<http://jbws.org/publications.html>

Trauma-Informed Women's Groups with a Focus on Substance Abuse

SEEKING SAFETY: A TREATMENT MANUAL FOR PTSD AND SUBSTANCE ABUSE

by Lisa M. Najavits (2002)

Author's Description: "Seeking Safety is a present-focused therapy to help people attain safety from trauma/PTSD and substance abuse. The treatment is available as a book, providing both client handouts and guidance for clinicians. The treatment was designed for flexible use. It has been conducted in group and individual format; for women, men, and mixed-gender; using all topics or fewer topics; in a variety of settings (outpatient, inpatient, residential); and for both substance abuse and dependence. It has also been used with people who have a trauma history, but do not meet criteria for PTSD."

For purchase:

<http://www.amazon.com/Seeking-Safety-Treatment-Substance-Guilford/dp/1572306394>

TRAUMA, ADDICTIONS, MENTAL HEALTH AND RECOVERY (TAMAR)

by Alisha F. Saulsbury (1999)

Developed as part of the first phase of the SAMHSA Women, Co-Occurring Disorders and Violence Study, TAMAR Trauma Treatment Group Model is a structured, manualized 15-week, 15-module trauma-specific group intervention combining psycho-educational approaches with expressive therapies. It is designed for women and men with histories of trauma. Groups are run inside detention centers, in state psychiatric hospitals, and in the community. Group sessions meet twice weekly for 90 minutes, an interval that fits smoothly into the daily schedules of county detention centers. Men and women taking part in groups while detained in the detention center complete it on-site or continue in a community group if released before completion.

PowerPoint overview of the program:

http://www.cffutures.org/files/A5_TAMARTraining.pdf

Curricula posted on the National Association of State Mental Health Program Directors website

<http://www.nasmhpd.org/content/trauma-addictions-mental-health-and-recovery-tamar-treatment-manual-and-modules>

Cognitive Behavior Modification Groups

THINKING FOR A CHANGE 4.0

by Jack Bush, Barry Glick and Juliana Taymans (2016)

Author's Description: "Thinking for a Change 4.0 (T4C) is an integrated cognitive behavioral change program [that] incorporates research from cognitive restructuring theory, social skills development, and the learning and use of problem solving skills. T4C is comprised of 25 lessons that build upon each other, and contains appendices that can be used to craft an aftercare program to meet ongoing cognitive behavioral needs of your group. Not all lessons can be completed in one session, so a typical delivery cycle may take 30 sessions. Sessions should last between one and two hours. Ideally, the curriculum is delivered two times per week, with a minimum recommended dosage of once per week and a maximum of three times per week. Participants must be granted time to complete mandatory homework between each lesson. The program is designed to be provided to justice-involved adults and youth, males and females. It is intended for groups of eight to twelve and should be delivered only by trained facilitators."

Log-in required for access:

<http://info.nicic.gov/t4c40/>

THINK: COGNITIVE INTERVENTIONS PROGRAM

by the Wisconsin Department of Corrections (1994)

Author's Description: "A cognitive-behavioral based program provided to [justice-involved individuals] that have multiple incarcerations, as well as assaultive behaviors. The program teaches violent [individuals] specific skills that assist them in identifying, controlling, and changing the personal thinking patterns and underlying beliefs that support their criminal behaviors. Lessons are presented by Social Services staff and DOC contracted providers to groups of eight to 16 [justice-involved individuals]. . . .During participation in the Cognitive Interventions Program (CGIP), offenders meet approximately two to three times per week for 16 weeks per phase with two total phases for program completion. Upon successful completion of the program, a description of

the offender's progress is placed in their file and completion is noted for future case planning and classification."

<https://s3.amazonaws.com/static.nicic.gov/Library/012782.pdf>

Meditation and Yoga Groups

MINDFULNESS MEDITATION IN AMERICAN CORRECTIONAL FACILITIES: A "WHAT WORKS" APPROACH TO REDUCING REOFFENDING

by Edo Shonin, William Van Gordon, Mark D. Griffiths (2014)

Author's Abstract: "Mindfulness has been practiced in the Eastern world for over twenty-five centuries but has only recently become popular in the West. Today, interventions such as 'Mindfulness-Based Cognitive Therapy' are used within the Western health setting and have proven to be successful techniques for reducing psychological distress. However, a limitation of such interventions is that they tend to apply the practices of mindfulness in an 'out of context' manner. To overcome this, a newly formed Meditation Awareness Training (MAT) program focuses on the establishment of solid meditative foundations and integrates various support practices that are traditionally assumed to effectuate a more sustainable quality of well-being. The aim of this pilot study was to assess the feasibility and effectiveness of MAT for improving psychological well-being in a sub-clinical sample of higher education students with issues of stress, anxiety, and low mood. Utilizing a controlled design, participants of the study (n=14) undertook an 8-week MAT program and comparisons were made with a control group (n=11) on measures of self-assessed psychological well-being (emotional distress, positive affect, and negative affect) and dispositional mindfulness. Participants who received MAT showed significant improvements in psychological well-being and dispositional mindfulness over controls. MAT may increase emotion regulation ability in higher education students with issues of stress, anxiety, and low mood. Individuals receiving training in mindfulness meditation may benefit by engendering a broader, more ethically informed, and compassionate intention for their mindfulness practice."

[https://www.academia.edu/4601965/Shonin E. Van Gordon W. and Griffiths M.D. 2014 . Mindfulness meditation in American correctional facilities A what-works approach to reducing reoffending. Corrections Today Journal of the American Correctional Association March April 48-51](https://www.academia.edu/4601965/Shonin_E._Van_Gordon_W._and_Griffiths_M.D._2014_.Mindfulness_meditation_in_American_correctional_facilities_A_what-works_approach_to_reducing_reoffending._Corrections_Today_Journal_of_the_American_Correctional_Association_March_April_48-51)

MIND BODY AND STRESS REDUCTION

by Amber Kelly and Kinloch C. Walpole (2011)

Excerpt: "Mindfulness-Based Stress Reduction (MBSR) is a well-defined and systematic patient-centered educational approach which uses relatively intensive training in mindfulness meditation as the core of a program to teach people how to take better care of themselves and live healthier and more adaptive lives. The prototype program was developed at the Stress Reduction Clinic at the University of Massachusetts Medical Center. This model has been successfully utilized with appropriate modifications in a number of other medical centers, as well as in non-medical settings such as schools, prisons, athletic training programs, professional programs, and the workplace."

http://gatelessgate.org/files/2_MBSR_curriculum_for_prison.pdf

YOGAHOPE

by Sue Jones (2011)

From the website: "yogaHOPE's focus is on the implementation of a Trauma Informed Mind Body (TIMBo) program. TIMBo offers a deliverable, research-based curriculum addressing the ways in which mind-body practices allow for long-term traumatic stress recovery. TIMBo was developed

specifically for women suffering from chronic trauma, addiction and/or abuse and offers women the tools needed to address the psycho-social, emotional, and physiological root causes, and enabling them to heal from trauma and to improve emotional regulation. The program is evidence-based, trauma-informed, and gender-responsive, utilizing the strengths that already are present in female survivors of trauma.”

<http://yogahope.org/timbo-program>

Gender-Responsive and/or Trauma-Informed Approaches with Reentering Women

This section includes general background information about gender-responsive and/or trauma-informed approaches. We included general resources about gender-responsive and trauma-informed responses and how they can be more effective for women returning to their communities after incarceration.

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



TRAUMA-INFORMED CARE IN MENTAL HEALTH COURTS [POWERPOINT]

Presenters Alyssa Benedict and Marcia Hirsch (2016)

Host Description: “This webinar for mental health court curriculum state trainers discusses strategies to utilize trauma-informed court approaches in mental health courts. Alyssa Benedict, a trainer for the NRCJIW, discusses the essential role of trauma-informed care within a mental health court, and Judge Marcia Hirsch from the Queens County Supreme Court Criminal Term in the 11th Judicial District of New York talks about managing a trauma-informed court room.”

<https://csgjusticecenter.org/wp-content/uploads/2016/05/Trauma-Webinr.pdf>

INTEGRATED TRAUMA TREATMENT IN CORRECTIONAL HEALTH CARE AND COMMUNITY-BASED TREATMENT UPON REENTRY

by Barbara C. Wallace, Latoya C. Conner, and Priscilla Dass-Brailsford (2011)

Authors’ Abstract: “Given the crisis of mass incarceration in the United States and the high prevalence of trauma histories among those incarcerated, it is imperative to improve service delivery to incarcerated individuals in correctional facilities and to those undergoing reentry in community-based treatment settings. This article provides trauma definitions and categories, describes the sequelae of trauma, reviews research on the high prevalence of incarceration in this nation, and reviews research on the high prevalence of trauma among the incarcerated. This article also provides a menu of evidence-based and promising treatment approaches to address the overlap among trauma, mental illness, substance abuse, and behavioral problems. A synthesis of research via seven points is meant to guide practitioner and policy responses to the national challenge of meeting the needs of those undergoing reentry.

Abstract only:

<http://jcx.sagepub.com/content/17/4/329.abstract>

A WOMAN’S JOURNEY HOME: CHALLENGES FOR FEMALE OFFENDERS

by Stephanie S. Covington (2003)

This piece is written for practitioners who are developing policy and practices for women in correctional settings, explaining why trauma-informed approaches are best practice for working with justice-involved women. Excerpt: “All [justice-involved people] have similar categories of needs. Both women and men transitioning from prison back to the community typically require substance abuse treatment and vocational and educational training. Family and community reintegration issues are also shared, as are physical and mental health care concerns. However, the research on differences between women and men suggests that the degree or intensity of these needs and the ways in which they should be addressed by the criminal justice system are quite

different. In planning for gender-responsive policies and practice, it is necessary to consider gender differences in terms of both behavior under correctional supervision and responses to programs and treatment. We must also understand the current social climate, which is reflected in policies and legislation, and the differential impact of that climate on women and men.”

<http://www.stephaniecovington.com/assets/files/3.pdf>

A WOMAN’S JOURNEY HOME: CHALLENGES FOR FEMALE OFFENDERS AND THEIR CHILDREN

by Stephanie S. Covington (2002)

This piece is written for practitioners who are developing policy and practices for those working with women in correctional settings. Excerpt: “Over the past 25 years our knowledge and understanding of women’s lives have increased dramatically. The new information has impacted and improved services for women in the fields of health, education, employment, mental health, substance abuse, and trauma treatment. At present, both a need and an opportunity exist to bring knowledge from other fields into the criminal justice system in order to develop effective programs for women. Until recently, theory and research on criminality focused on crimes perpetrated by males, with [justice-involved men] viewed as the norm. Historically, correctional programming for women has thus been based on profiles of male criminality or paths to crime. However, the programs, policies, and services that focus on the overwhelming number of men in the corrections system often fail to identify options that would be gender-responsive and culturally responsive to the specific needs of women.”

<http://aspe.hhs.gov/hsp/prison2home02/covington.htm>