

ABSTRACT

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EDET, ESTHER B.

B.S. ST. JOSEPH'S COLLEGE, NEW YORK, 1986

M.S.W. ATLANTA UNIVERSITY, 1989

A STUDY OF THE RELATIONSHIP OF UNEMPLOYMENT,
FAMILY SUPPORT, AND MENTAL DISORDER TO THE RECIDIVISM OF
THE INCARCERATED FEMALES IN A GEORGIA STATE PRISON

Advisor: Robert W. Waymer, Ph.D.

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This study investigated the relationship of unemployment, family support, and mental disorder to the recidivism of incarcerated females in a Georgia State Prison. The research hypothesis of the study was: unemployment, family support and mental disorder are significantly related to the recidivism of incarcerated females in a Georgia State prison. Two hundred and seventy-two female prisoners, consisting of randomly selected first-time and repeat offenders, participated in the study. The questionnaire used in the survey had three sections with a total of forty-six questions. Professional counselors, under the supervision of the researcher, administered the questionnaire to the participants. The statistical procedures used to describe and analyze the data included descriptive measures, correlation analysis and the chi-squared distribution.

The findings of the study indicated that the three variables: unemployment, family support and mental disorder are significantly and highly correlated with recidivism.

A STUDY OF THE RELATIONSHIP OF
UNEMPLOYMENT, FAMILY SUPPORT, AND MENTAL DISORDER
TO THE RECIDIVISM OF THE INCARCERATED FEMALES
IN A GEORGIA STATE PRISON

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BY
ESTHER B. EDET

WHITNEY M. YOUNG, JR., SCHOOL OF SOCIAL WORK

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CHAPTER I

INTRODUCTION

Many females in Georgia's prisons are repeat offenders. Available statistics (Georgia Department of Corrections Report, 2002) show that many of them have been incarcerated either in county jails or other state facilities at least three times before the age of thirty. The rate at which these offenders return to prison suggests that the state or the county did not do much to rehabilitate these prisoners while in their custody. For example, an inmate, charged with Violation of Georgia Control Substance Act (VGCSA), who completed her five-year sentence, is most likely to return to prison for the same crime within a year or two. A correction facility with a 50% annual recidivism rate would see half of its discharged inmates return within a year. In practice, figures like these suggest that Georgia has led the nation building and filling up prisons.

What is Recidivism?

What is recidivism? Recidivism is the repetition of criminal behavior variously defined in terms of a re-arrest, a reconviction, or a reincarceration (Silverman & Vega, 1996). Recidivism is multi-faceted. It is very expensive and increasingly so in terms of finance, human resources, and the well-being of the inmates, their families and communities. For example, in 1999 - 2001, the State of Georgia led the nation by reporting an increase of prisoners. Each year, it added 14,000 drug offenders, about 30%

of the felony convictions. In addition, there were about 2,600 offenders serving time for cocaine use.

High Cost of Recidivism

In 1990, The Department of Corrections' budget was \$738 million. By the 2003 fiscal year, the budget was \$903 million, an increase of \$165 million within a thirteen year period. Moreover, in the fiscal year of 1999, state government spent about \$30,093.00 to house an inmate in Georgia prison.

What is more shocking is that these figures do not include capital expenditures, new prison construction, or the cost for county and federal offender confinement (Georgia Department of Corrections Annual Report, 2000). In the United States, the national annual average recidivism rate for inmates was 62% (Lustiny, 1993). This statistic means that for Georgia, if the recidivism rate declines, the prison population would shrink, and more space would be freed up and the expenditures on the prison sector would come down. However, as it is, the State of Georgia is spending a vast amount of money on prisoners who are going to return to prison sooner or later. A substantial amount of the money being spent could serve a better purpose in rehabilitating these recidivists (Matthews & Francis, 1996; Beyers & Snacken, 1996). It is not economically savvy to spend so much money to create and maintain a revolving door for recidivists. Recidivism and its high cost are huge problems for some states. The Bureau of Justice Statistics Special Report, NCJ202949, released in June 2004, reports the following:

Prison operations consumed about 77% of state correctional costs in FY2001.

The remaining 23% was spent on juvenile justice, probation and parole, community-based corrections, and control office administration. State correctional expenditures increased 145% in 2001 from \$15.6 billion in FY196 to \$32.2 billion in FY2001; prison expenditures increased 150% from \$11.7 billion to \$29.5 billion.

Recidivism: An Intractable Problem

The cost of recidivism is high and prohibitive but it seems the more money that is spent, the worse the problem becomes. This high rate of recidivism has prompted psychiatrists, social workers, counselors, psychologists, nurses and judges to seek different but appropriate solutions to the problem (Hatcher, 1978). Hatcher has listed the following treatment models as the most common approaches:

1. Work release programs
2. Vocational educational programs
3. Cooperative and dependence program participation
4. Narcotic anonymous programs
5. Group therapies

However, there is no conclusive evidence or data showing uniform effectiveness across the spectrum of addressing recidivism. Some approaches are effective with some targeted groups but not for other groups. Some interventions provide various beneficial effects. As some authors note, "Although many questions could still be asked as to what works best and under what circumstances, the one conclusion that is 'not permissible' is

that ‘nothing works’” (McQuire & Priestley, 2001). One conclusion seems obvious none of these approaches is a panacea.

This situation is not peculiar to Georgia. Most states report the same facts. This circumstance is known as the “recidivist phenomenon among prisoners.” Baker (1987) has defined the *recidivist* as an individual who relapses or returns to a former condition or institution because of a recurrence of the behaviors or conditions that led to the original placement. For example, a person mentioned earlier who has served her time of five years in prison, she is then released, but returns back to prison for the same crime within two or three years. This person is a recidivist, a repeat offender. Baker (1987) has also described the *recidivism* rate as the number of people who return to an institution relative to the population of that institution. Thus, a correctional facility with a 25% annual recidivism rate would observe one-fourth of its discharged inmates return within a year.

There must be a number of conditions, circumstances and factors that are associated with this phenomenon. Why do these ex-convicts repeat offenses and return to prison? Are there things that can be done, short of the death penalty, that can prevent recidivism or at least reduce the rate? Are there any programs, private or public that have addressed the issues adequately? And if not, why not?

Attempts to respond to these questions and address the issues the questions raise lead directly to the investigation of the correlates of and circumstances that influence recidivism and its rate among inmates. What is a *correlate*? According to Baker (1991), a correlate is the result of a mutual relation, or a pattern of variation between two phenomena. Several examples can be cited. Gender, family support, mental health,

genetics, employment status, type of crime, length of incarceration, prison conditions, and marital status, are all possible correlates for recidivism. How are such correlates associated with the rates of recidivism among the inmate in Georgia?

To create a more effective study, the investigation will be limited to only a few of these possible correlates: lack of family support, unemployment and mental disorder. In this way, it will be more efficient in carrying the investigation beyond the correlates and inquiring into factors. While correlates deal mainly with associations, factors will examine the pertinent data to see if some of the correlates might well be factors that influence, for better or for worse, the recidivism rate.

Statement of the Problem

In Georgia, the state prisons and county jails have become revolving doors for many female offenders. At least fifty percent of the present offenders have been incarcerated in county jails and state prisons four times or more (GA Department of Corrections Report, 2002). It is common knowledge that a few of these repeat offenders view prison as a safe haven where they want to spend most of their lives. A 32-year old female inmate who has been incarcerated four times summed up this belief in a few words, "Whenever I am in prison, I feel safe. If they will let me have my two boys with me in prison, I will be fine." Also, there are some female inmates who are very anxious to be released into society. However, when they are released, even when they have served out their time, sooner or later, they are back in jail or prison, most likely for the same offense. This is the problem of recidivism (<http://www.criminaljusticepaper.com/categories/sentencing-guidelines.html>).

The associated high cost for communities, states and the nation are also the problem with recidivism. Recidivism creates and is related to many problems: unemployment, destruction of family life and support, and makes the treatment of mental illness more difficult. Recidivism devastates individual lives, communities, and states. These factors on the other hand increase the likelihood that ex-convicts will return to prison, thus becoming recidivists.

Purpose of the Study

The purpose of the study is to examine the relationship between unemployment, family support, mental disorder on the recidivism of female inmates in a Georgia prison. These inmates generally complete their sentences but they return to prison within three years. Why do they return to prisons? There must be a number of conditions and circumstances associated with the phenomenon. To answer these questions, we need to understand roles and the influence, if any, on the possible correlates. In particular, how do unemployment, family support and mental illness in these inmates impact recidivism?

The main focus of the study is to investigate and attempt to answer these questions. The goal, in light of the high financial and human costs, and the intractable nature of the problems associated with recidivism, is predicated on two major premises. First, urgent and concerted effort must be exerted to eliminate or at least reduce the recidivism rate. Second, such actions will be useful and effective, to the extent that the factors, correlates, and circumstances surrounding recidivism are understood.

Therefore, the main objectives will be the improvement of basic understanding of recidivism. In particular, the study will investigate three areas and their relationship to

recidivism. The research will attempt to answer questions such as: What is the relationship between recidivism and employment? Does family support or lack of it have any positive or negative influence on recidivism? To what extent, if any, is mental illness a factor or influence on recidivism?

In particular, the investigator will study the following research questions:

Research Questions

1. What type of relationship, if any, exists between unemployment and recidivism of female inmates in a Georgia prison?
2. What is the relationship between family support and recidivism of female inmates in a Georgia prison?
3. What is the relationship between mental disorder and recidivism of female inmates in a Georgia prison?

Hypotheses

The null hypotheses of this study are:

1. There is no significant relationship between unemployment and recidivism of female inmates in a Georgia prison.
2. There is no significant relationship between family support and recidivism of female inmates in a Georgia prison.
3. There is no significant relationship between mental disorders and recidivism of female inmates in a Georgia prison.

The following dependent and independent variables were utilized to assess the incidence of recidivism among female inmates in a Georgia prison. The independent variables were unemployment, family support and mental disorder. In all cases, recidivism is the dependent variable.

Significance of the Study

Recidivism among female inmates is increasing. This is important and significant for a number of reasons. First, recidivism is increasing and so are the problems it creates. Statistics from different sources seem to recidivism is a runaway problem. Women are entering the criminal justice system at a higher rate and younger age than ever before (Beck, et al., 2003; Greenfield & Snell, 1999). The rate of incarceration of women has exceeded that of men every year since 1980 (Crawford, 2003; Kruttschnitt & Cartner, 2003). The female prison population has more than doubled since 1990 (Beck, et al., 2002) and continues to grow faster, more than male prisons' population (Harrison & Karberg, 2004). In 2005, the New York-based Women's Prison Association released a report that shows the huge increase in incarceration of women over the past 30 years (Crary, 2005). The report indicated that, the number of female state inmates serving sentences of more than a year grew by 75% between 1977 and 2004, nearly twice the 38.8% increase for men (Crary, 2005). According to the Women's Prison Association publication, the female prison population in Georgia grew 596% from 1977 to 2004. In addition, Georgia's rate of 18 female prisoners per 100,000 female residents was the third highest in the country. However by 2004, Georgia had dropped to 11th highest (Crary, 2006). The number of female inmates in Georgia prisons at the end of 2004 was 3,433.

The number of female inmates nationwide in state and federal prisons in 1977 was 11,212. The number of inmates nationwide in state and federal prisons at the end of 2004 was 1.42 million. The number of female inmates nationwide in state and federal prisons in 2004 was 96,125.

Recidivism is expensive. Every year millions of dollars are spent to expand the existing women prisons in Georgia. Also, thousands of dollars are spent on their medical care. Some female inmates had serious health problems prior to their conviction and the State prisons cannot ignore their medical needs once they become state property. What about the expectant mothers in prison, their prenatal care plus labor and delivery? All care is provided to the inmates free of charge at the expense of the state government and local taxpayers and federal government.

The financial costs of crimes and the containment of criminals are enormous, especially when one considers the mentally ill, as Jeager and Boyce pointed out in the Atlanta Journal Constitution (December 12, 2005). "This revolving door in Georgia prison must be stopped. It hurts public safety. It wastes taxpayers' dollars and it devastates our communities" (Jeager & Boyce, 2005).

Most state and private agencies that work to reduce the rate of recidivism seem to rely on varying combinations. This is especially true for sex offenders (Angus, 1991). For example, the state of Washington provides treatment within the correctional facilities and has enacted a law, which demands that violent sexual predators indefinitely be confined for treatment if warranted. The policies, which encouraged the closing of psychiatric hospitals, have actually turned prisons into mental health hospitals for as many as 40% of the mentally ill in the nation. This has a tremendous effect in increasing

the number of recidivists. Prison has become the new home for the mentally ill. Ironically, the state is spending more to keep these mentally ill convicts in prison (Platek, 1978).

This study is significant because recidivism is a societal problem that could be handled with careful planning. The goal of this study is to sharpen the social work professional and other human services providers' tools in addressing the recidivism rate in a timely fashion. There is evidence that the rate of recidivism is high when the problem of the incarcerated individual is not addressed properly. This study is expected to inspire social workers to do a better job of addressing these problems. If they understand the correlates and factors that affect recidivism, the study is expected to inspire human service providers who work with released inmates to provide holistic treatment rather than partial treatment.

In summary, this dissertation is divided into five chapters. Chapter I consists of the introduction of the research. Chapter II includes a review of the literature related to the history of women's prisons in the United States, as well as the relationship between unemployment, family support and mental disorders on recidivism. Chapter III deals with the planning and administration of the instrument, the examination of an applicable framework and the methodology of the study. Chapter IV addresses the presentation of findings. Chapter V presents the conclusions, implications, and recommendations of the study.

Definition of Terms

Recidivism – The repetition of criminal behavior variously defined in terms of a re-arrest, a reconviction, or re-incarceration.

Recidivist – A person convicted of one or more crimes, and who is alleged to have subsequently committed another crime.

Rehabilitation –The process of providing inmates with a variety of services and programs (e.g., education, job training, and psychological counseling) while under the supervision of the corrections system, designed to reduce the probability of future criminality and make productive members of the society.

Jail – Placement for those waiting adjudication; or who are sentenced to less than one year.

Prison – Institution for the custody of those adjudicated of a crime, and who are given a sentence of one year or more.

Incarceration – Placement in a jail or prison as a sanction. It is usually imposed when it is felt the community must be protected from further victimization by the offender.

Criminal Activity – An act committed or omitted in violation of law, with penalties, forbidding or commanding it.

Mental Disorder - Impaired psychological or cognitive functioning due to disturbance in genetic, psychological or social factors.

Inmate – One who is confined in a prison or jail.

Controlled Substance – Drugs that, because of their potential for abuse or addiction, have limited availability and are strictly regulated.

Family Support – Assistance either emotional, informational material, financial or affectionate sustenance one receives from family member or members.

Parole – The conditional release, by an agency that has statutory authority to grant such release, of inmates from prison to serve the remainder of their sentences under community correctional supervision.

Probation – A sentence that keeps the convicted offender in the community under supervision by a probation agency and usually requires compliance with legally imposed restrictions and conditions.

CHAPTER II

REVIEW OF LITERATURE

The chapter provides a review of select literature regarding the history of women's prisons in the United States and their relationships with recidivism. In particular, focus will be on current published literature on the relationship between unemployment, family support and mental disorder as correlates of recidivism, a growing and complex problem that has ethical, social, political, economical, and legal as well international and local aspects. In this study, the Family System Theory was utilized as a theoretical framework. This review will try to establish how viewing recidivism from this perspective has thrown some light, if any, on the proposed and attempted solutions to the problem in the past.

To place the problem of the recidivism of female offenders and the literature on it in context, table 1 lists a summary of the stages of development of prisons in the United States in the last three hundred years is given below. As Schmalleger pointed out, the history of that troubled institution, its problems, goals and focus, as well as its characteristics, explain to some extent, the almost intractable character of female recidivism today (Schmalleger, 1995).

Table 1

Stages of Prison Development in the United States (Schmallegger, 1995)

ERA	DATES	GOAL AND FOCUS	CHARACTERISTICS
Penitentiary	1790-1825	introduction of religious humane principles; prison is a penitentiary; punishment abandoned.	Pennsylvania style; confinement rehabilitation achieved through solitude, prayer and meditation.
Mass Prison Stage	1825-1876	Introduction of mass (congregate) prisons. Previous style too expensive to maintain	Auburn style; Inmates and worked together in enforced silence. Punishment re-introduced
Reformatory	1876-1890	The criminal, especially the young, can be rehabilitated; given a second chance.	Elmira style; indeterminate sentencing; concept of earned early release. Mandatory schooling. Failed because of recidivism.
Industrial	1890-1935	Concerns over security, discipline and rising costs; attractions of profitability of inmate labor.	Large industrial prisons with contract system, piece-price system, lease system, public account system, state-use system and public works. Failed because of complaint from outside industry, the prisoners and recidivism.

Table 1 (continued)

ERA	DATES	GOAL AND FOCUS	CHARACTERISTICS
Punitive	1935-1945	Emphasis on custodial purpose of correction, security and punitive custody.	Alcatraz style. Lock psychosis; lack of programs; daily routine of monotony and frustration.
Treatment	1945-1967	Re-structuring the Nations prisons. offenders are sick and could be cured through application of behavioral and other appropriate forms of therapy.	Medical model. If the right combination of treatment is found, the inmate, now called client, will be re-habilitated. Different therapies used. Failed because of recidivism.
Community-based decarceration	1967-1980	Rehabilitation cannot occur in isolation from the free world. Creation of opportunities for reformation within local communities.	Diversion: with work-release programs, halfway houses; use of volunteers; residential treatment program; co-educational prisons failed because of public disappointment with high recidivism rates.
Warehousing	1980-1990	Strategy based on desire to contain high crime rate, recidivism and no hope of successful rehabilitation.	'Nothing-works' models; use if incapacitation; the alternative is more expensive because of recidivism.

Table 1 (continued)

ERA	DATES	GOAL AND FOCUS	CHARACTERISTICS
Overcrowding /Early Release	1990 - Present	The most serious problem: crowding in prisons and jails; expense of building new ones and maintaining old ones.	Overcrowding has put stress on prison's meeting of basic human needs, adequacy of staffing, the number of programs and the quality and strength of prison management.

Historical Overview of Women Prisons

The high rate of female incarcerations prompted the federal and state governments to pay attention to female prisons. In spite of the most recent attention given to women prisons, they have historically been a neglected area of corrections. Often they suffer from a lack of funding and small budgets.

In the early 1800s, Elizabeth Fry, a Quaker reformer started the fight for better conditions for incarcerated women and the abolishment of the death penalty for women. In spite of her fight, records show that convicted female offenders were initially housed in the same institution as male violators. Later, women were moved into separate wings, and later, separate buildings at the same institution. Until recently, it is only in recent years have women been housed in totally separated institutions (Young & Revere, 2006).

In 1869, the United States created the first completely separate female prisons in Indiana. Having separate prisons for women continued from 1968 to 1975; then the United States government began housing both female and male prisons together. The

co-ed prisons did not last long because the inmates used that opportunity to intermingle intimately with another. However, in some places, it survived for a while. In the United States today, women offenders are housed in female-only facilities.

In the early 20th century circa, 1910-1930, the phrase “social hygiene” was coined. This originated from an experiment that was conducted in female prisons. Although not much is known about social hygiene, it deals with psychological treatment that attempted to make women more socially acceptable like good, moral women in their communities. Nevertheless, history shows this was the first research conducted on incarcerated females. Presently, there are increasing amounts of research concerning women prisons.

Recidivism and Mental Disorder

After the closure of the Georgia Mental Health Institute (GMHI) in 1998 and other state mental health institutions due to the de-institutionalization of the mentally ill, large numbers of the hospitalized mentally ill returned to their community. The intention was to improve quality of life of the mentally ill in the community. Policy makers assumed that the availability of community mental health centers and improved psychotropic medications would assist patients in independent living in the community. However, with cuts in health care and other community-based services, more people with mental illness have been housed in correctional facilities (Jeager & Boyce, 2005). Eventually, prisons and jails become mental health institutions (Jeager & Boyce, 2005).

Recent publications of Women’s Prison Association have shown that female imprisonment leaped in the state prisons (Crary, 2006). According to Crary, the number

of inmates nationwide in state and federal prisons at the end of 2004 was 1.42 million.

The number of female inmates nationwide in state and federal prisons in 2004 was

96,125. Additionally, literature has shown the following:

1. The number of females in Georgia prisons at the end of 2004 was 3,433.
2. The prison population has a higher rate of mental illness than the community.
3. The National Alliance for the Mentally Ill (NAMI) reported that 2.6% to 5.4% of the adult population may have a serious mental illness and a significantly higher percentage (24%) of women in state prisons suffer from mental illness.
4. The National Institute of Corrections reported that the most common diagnoses among female offenders are depression, post traumatic stress disorders, and substance abuse (Bloom, et al., 2003). Studies conducted by (Byrne & Harwells, 2002) reported that personality disorders and other disorders are also common in women offenders (Ballargeon, et al., 2000; Harwell, 2001).

Mental illness is a lifetime disease and without a seamless link to sustained care in the community after release, many people with mental illnesses return to prison (Jeager & Boyce, 2006).

In the year 2004, nearly 19,000 people were released from Georgia's prisons; about 45 percent of them are expected to return within five years. Among those who had mental illness the return rate jumped to over 60 percent (Jeager & Boyce, 2006).

A recent publication through the American Public Health Association National Health pointed out that serious mental health problems are prevalent among U.S. inmates. The new federal report finds the majority of U.S. prison and jail inmates suffer from mental health problems.

It is obvious that prisons have become a psychiatric hospital for the severely mentally ill inmate. Stuart Grassian, an Harvard Medical witness said “I have seen people who are horribly ill, eating their own feces, eating parts of their body, howling day and night and it’s ignored, like who cares? The prison has become this place that is *hidden and secret* and it is really awful” (Center for Public Representation, 1999).

It is estimated that prisoners who have mental health problems are growing at five times the rate of the general population (Young & Revere, 2006) and that female inmates have more symptoms than males (National Commission on Correctional Health Care, 2002). According to Young and Revere, women in prison have much higher rates of certain mental health problems and more co-occurring disorders. For example, 24 percent of female state prison and local jail inmates were identified as mentally ill, compared to 16 percent of a comparable male population (Young & Revere, 2006).

Cost of Mental Health in Prison

Mental health services in prison are free for the inmates but very expensive for taxpayers, state and federal government. For example, a recent study in the Pennsylvania Department of Corrections estimated that a person with serious mental illness costs \$140 per day to incarcerate as opposed to \$80 per day for an average inmate (www.consensusproject.org). The Miami Dade Department of Corrections spends almost \$4

million annually on overtime to manage inmates with mental illness (www.consensusproject.org). In addition, officials in King County, Washington identified 20 people who had been repeatedly hospitalized, jailed or admitted to detoxification centers, in the course of one year. Providing emergency services to these 20 individuals cost the county at least \$1.1 million (www.consensusproject.org).

Unemployment and Recidivism

Lack of employment can create a number of survival issues that prevent a smooth transition into the society (Young & Revere, 2006). Without basic needs such as employment and housing, female ex-offenders with children cannot reunite adequately with their families. Many of these ex-offenders have no education, no employment skills, which makes it extremely difficult to be employed (Young & Revere, 2006). According to Berk (1980), several programs were developed in the 1970s during the period of high unemployment to offer both income support and job placement assistance to ex-offenders in an effort to reduce crime. An example of this was the Transitional Aid Research Project (TARP) which offered ex-offenders varying degrees of unemployment compensation and job placement. But evaluation studies of TARP activities in Texas and Georgia found that job placement and income assistance did not reduce the recidivism rate of the ex-offenders.

In Baltimore, Living Insurance For Ex-offenders (LIFE) project combined job training and income support as the strategy to reduce recidivism. Evaluation of LIFE found that ex-offenders who received financial aid in the group had 8.6% fewer re-arrests for property crimes than did those who job assistance only. The research also found that

financial incentives actually turned out to be a dis-incentive for the ex-offenders to seek and keep jobs, and tended on the whole to want to decrease the hours they worked (Berk, et al., 1980).

In the early 1970s, the Vera Institute of Justice developed several ex-offender programs, beginning with pretrial interventions. In the program, nonserious offenders could participate in a 90-day job training and placement program. If they were successful, the charges against them were dismissed.

In the first study of the Program, only about 16% of the participants recidivated after one year, compared to 31% of the comparison group and those who never completed the program successfully (Vera Institute of Justice Report, 1970). A second study conducted eight 8 years later found no significant difference in recidivism rate between the two groups (Baker & Sadd, 1981). They also reported that New York City Department of Corrections had incorporated an expanded program of that type into its system.

In the late 1970s, a series of studies were carried out to see how well traditional training programs and employment were meeting the needs of the ex-offenders. In one such program, participants worked in unsubsidized, closely supervised employment but within a supportive environment for 12-18 months. Four distinct populations were targeted: long term female welfare recipients, former substance abusers, female ex-offenders and young high school dropouts. It was found that at the end of the first year, the outcomes for the ex-offenders, both for the subjects and the control groups, were identical. There was no beneficial impact on the arrest rate (Piliavin & Gartner, 1981).

In the late 1980s and early 1990s, researchers tended to focus more on the link between employment and recidivism. For example, researchers studied the characteristics instead of the work programs of 1,205 Federal prisoners, released during the first six months of 1987. They found that recidivism rate was higher among blacks (58.8%) and Hispanics (45.2%) than among whites (33.5%). They also found that people who had had full employment or had a higher level of education before incarceration, had a lower level of recidivism (25.6%) than those who either had no full time job or were less educated (Harer, 1994).

Another study by Finn and Willoughby (1996) evaluated a project carried out under the Job Training Partnership Act (JTPA) Program in Georgia. The study was an attempt to answer the question: to what extent, if any, is status as an ex-offender a disadvantage in seeking employment. Five hundred and twenty-one ex-offenders were matched with 734 other disadvantaged job seekers. The study found that skill level and work experience, and not status as an ex-offender had strong effect on employment.

But Saylor and Gaes (1996) arrived at the opposite conclusion in their study of 7,000 inmates in Federal prisons who participated in the Post Release Employment Program (PREP). The study found that after 12 months, only 6% had returned to prison, compared to 10% of the control group. Seventy-two of the participants and maintained employment found and maintained employment, compared with 60% of the control.

The Bureau of Justice Statistics in 1999 reported that half of all incarcerated mothers were unemployed at the time of their arrest, therefore these women will also be ineligible to apply for employment benefits when they are released from prison

(Petersilia, 2000). The limited legitimate work histories and few marketable job skills place them in a lower bracket to provide living wages (Lynch & Sabol, 2001).

The employment sector is not the only restriction faced by the ex-offenders, the congressional changes to the Higher Education Act in 1988 affected eligibility for federal financial aid programs, such as Perkins Loan, Pell grants, Supplemental Education Opportunity grants, Plus Loans and Work Study programs. This Act disqualifies those who have been convicted of any offense under any Federal or State law involving the possession or sale of a controlled substance from receiving any grant, loan or work assistance (Allaid, 2002).

This restriction applies even if the person was not receiving assistance at the time of conviction (Samuels & Mukamal, 2004). According to Samuels and Mukamal (2004), this legislation closes another door to many women who leave prison without marketable job skills since many women are likely to be convicted on a drug offense.

Female ex-offenders experience various obstacles that prevent employment, even for those with good skills and good work histories, it is still a struggle because job searching requires money for mobile access to a car or public transportation, telephone, newspaper, appropriate clothing for the interview and for the job if an interview is successful. Those with children must have child care. All these necessities require money that the individual just released from prison may not have. This makes it impossible for them to satisfy the conditions of release and reintegrating into family and the community (Young & Revere, 2006).

When individuals are banned from Temporary Assistance for Needy Family (TANF) because of criminal conviction they also lose access to a wide range of

employment – related services provided by the states through TANF programs (Hirsch, 2002). According to Hirsch, when ex-offenders are banned from TANF assistance they also lose access to those services which could help them to improve their education and employment skills. One example, stated by Hirsch, is the Job Training partnership program and employment services that provide information from a number of state agencies about job openings and adult education programs. In some States, female ex-offenders are barred from employment in nursing homes, in health care and in-home child care facilities. Those traditional female occupations that they would qualify for without a criminal record (Dietrich, 2002).

Also, the awareness of the employment at-will laws common in the United States gives employers a choice not to hire persons with criminal records even though they are not prohibited from hiring (Dietrich, 2002).

The earlier survey conducted by Holzer and reviewed by Travis, Solomon and Waul (2001) found that two thirds of all employers in the five major cities indicated they will not knowingly hire an ex-prisoner and that about one third of the employers checked criminal histories of their new employees. A research report by Hirsch (2002) indicates that over 60 percent of employers probably would not hire an ex-offender.

Dina Ross and Todd Clear (2002) had interviews with ex-offenders employed in Florida and discovered another barrier faced by ex-offenders. Ex-offenders reported being offered too few hours, which did not qualify them for benefits such as health care. Some jobs were not sufficient to provide living wages and many had to look for additional employment. Lack of accommodations can limit ex-offenders' opportunities and incentives for both obtaining and maintaining employment (Rowe, 2002).

According to Hirsch (2002), job hunting has been a major challenge for ex-offenders returning to the community because of their personal deficiencies to employment settings, including poor job history, lack of a high school diploma and few marketable skills. Additionally, deficits to the employment setting include poor or a lack of provisions for childcare and inadequate access to transportation. These obstacles make it difficult for ex-offenders to smoothly re-enter the community.

The publication of Dania Palanker or Kennedy School Review pointed out the negative impact of incarceration on ex-offenders. The publication addressed potential barriers to employment and income of ex-offenders such as prejudices, and denial of access to career jobs. These barriers work together to prevent the ex-offenders from participating in the labor force.

In addition to the state law that would band employees with criminal records, personal condition has been identified as “imported” barriers to employment. For example, ex-offenders sometimes display different psychological conditions such as depression, low self-esteem and low motivation.

Some ex-offenders may have behavioral problems that prevent employers from hiring, such as problems with anger management (Heinrich, 2000). Mental health problems can be another barrier, ex-offenders may lack skills including basic life skills and key employment skills together with limited education, a low level of numeracy and literacy, and poor social competencies. These conditions can prevent ex-offenders from obtaining employment. Most ex-offenders returning to the community have no money. Lack of finances hinders an individual’s ability to find and maintain employment as well as getting suitable housing (Morga, 1996; Fletcher, 2001). Mukamal (2001) discussed

numerous legal barriers such as job restrictions and court-ordered requirements for release, for example daily reporting or paying restitution may impact significantly on both obtaining and maintaining employment for ex-prisoners. Laws that prohibit entry into particular job positions and the employer's right to access a prisoner's criminal records in some cases have negatively impacted their employment (Mukamal, 2001; Raeo, 2002).

According to Bowker (1994), in the United States, prisoners were restricted by the state and federal Statutes from 350 occupations that employ almost 10 million people, significantly reducing employment options.

Taxman, Young, Byrne, Holsinger and Anspach (2002), in their study, observed that low skilled jobs with no provision for benefit packages are typically restricted from ex-prisoners. Webster, et al. (2002), in his review of the literature and interviews with 15 prisoners and ex-prisoners, reported barriers including attitudes of employers to ex-prisoners and crime, lack of job contract due to segregated social networks, financial difficulties impacting interview attendance, and problems making the transitions from benefits to employment. Difficulty adjusting to the routine of work has also been reported as a potential barrier to employment (Visher & Trauers, 2003).

In spite of employment barriers for people who have been incarcerated, studies have found that offenders who participate in prison industries, work release programs, or education programs have lower unemployment rate than their incarcerated counterparts who do not participate in those programs (Wilson, et al., 2000; Saylor & Gaes, 1996). Saylor and Gaes (1996) conducted a study of the impact of correctional employment and vocational training's impact on post-release behavior. They found out that 71 percent of

program participants were able to establish and maintain employment as opposed to 63 percent of the comparison group. Studies indicated that stable prison work detail is one of the best predictors of post-release success; policymakers who are concerned about high recidivism rates face an obvious need to improve employment prospects of ex-offenders (Visher, Winterfield, & Conggeshall, 2005). The goal of the policymaker is the improvement of substantial barriers to many types of legal employment faced by the ex-offender (Visher, 2005).

According to Uggen (2000), providing employment education and skills training for offenders make it possible for ex-offenders to be employed. Also employment and education enable the ex-offender to develop a sense of responsibility and self discipline, which provide the offender with proper skills to refrain from crime. Another rationale for employment and education programs is the presumption that work and education programs might decrease the number of infractions offenders receive by curtailing idleness. The study also presumes that employment and education programs are cost savings to the state when ex-offenders earn wages which pay for the cost of incarceration, restitution, legal debts and taxes. A cost savings is also assumed to result from instilling a work ethic in ex-offenders who will presumably be better able to provide for their selves after incarceration.

A study conducted by Martinez and Eisenberg (2000), for the Texas Department of Corrections, showed that the unemployment rate for the people who have been incarcerated was 30 percent compared to only 4.8 percent of the population of Texas. Low levels of educational attainment will affect the employment opportunities of women, requiring greater emphasis on education opportunities as they re-enter their

communities. Many serious problems facing women in finding employment are the reality of the stigma and the bias that women who have criminal records face. Many employers are hesitant to hire applicants with conviction histories. When a woman's criminal history is coupled with previous substance abuse or dependence, the perceived liability increases. Also racism and sexism increase the difficulties and frustrations of women who want to become self-sufficient and contributing members of their communities (O'Brien, 2002).

The following recommendations will assist female ex-offenders to secure employment:

1. Women released from prison should have proper documentation so they can apply for transitional benefits and unsubsidized employment.
2. They should be aware of vocational training tied to viable labor *a-market opportunities*.
3. Sources of traditional income to assist women to participate in secondary and post-secondary educational programs to enhance their competitiveness in the job market should be identified.
4. It is also very essential to link women during their incarceration with employment training centers in the communities to which they will be returning.

To improve re-entry prospects of women in transition from prison to home and to ensure greater public safety and reduced costs associated with crime, changes are needed in policies that serve to delay or deny women who are ex-offenders access to vital social benefits including grants or loans for education, transitional financial assistance,

subsidized housing and viable employment. Female ex-offenders' inability to access various social entitlements critical to successful re-entry undermines their commitment and efforts to turn their lives around and to provide for their families and become more effective, contributing members of their communities (O'Brien, 2002).

Over the years, many studies have shown the development of several programs to reduce the continuation of high level of ex-offender unemployment. Policies were developed by the federal government to improve the labor market position of ex-offenders. Attention was paid to Targeted Jobs Tax Credit (TJTC), a program providing employers with tax reductions for hiring ex-offenders. The study indicates that Targeted Jobs Tax Credit had marginal impact at best. The authors believed so because attention is focusing on specific problems of employing ex-offenders, and the general weaknesses of the targeted employment strategies that rely on tax incentives (Jacob, McGahey, & Minion, 1984).

A study conducted in Britain to increase women employability upon release from prison focused on 567 inmates work experience and training before and during incarceration, as well as their expectations for life after prison. About 33% of the women worked immediately before imprisonment. Those women with criminal records, child care problems and no education or qualification had problems in securing employment. On a post prison survey of 178 women, about 37% found work after their release. Ninety percent of the women reported personal problem, half of the women said they received inadequate support from the prison upon release. The authors believe there should be adequate planning for release, including, re-integration, social skills, housing, finding

work, arranging benefits and re-establishing family bonds (Hamlyn, Becky, Lewis, & Darren, 2000).

Family Support of the Incarcerated Female

Many studies indicate that good family ties provide inmates with a support system, motivation to change after release, and can also reduce antisocial behavior. Studies also note that the social networks that families provide protect a person from several stressful situations, such as the trauma of alienation. Family rejection or abandonment can make prison experience unbearable (Hairston, 1988). Hairston (1988) notes that outside social networks can provide inmates with good resources, e.g., money. Families can motivate inmates to take advantage of prison programs and services that can lead to better jobs on release and improvement in interpersonal relations with family members. Absence of family support can lead to the feeling of rejection, forsaken, and abandonment.

According to Melt and Miller (1972), several studies have found positive relationships between the maintenance of strong family ties during imprisonment and post-release. In extensive studies on California parolees carried out by Holt and Miller (1977), they found out that those who received visits while in prison experienced significantly fewer and less serious difficulties on release. Also for parolees with two or more visits, the amount of money they received on release and their place of residence were also predictors of parole success.

If inmates retain family ties, they can retain socially acceptable roles as relatives. This can reinforce their sense of individual worth and can remove the stigma and

eliminate the negative evaluation inmates normally receive from prison staff. If family ties are broken, most likely the inmates will return to prison within a year or two after being released for various reasons, such as lack of housing, lack of financial support, and emotional instability.

Flavin (2004) emphasized the importance of families and communities connections to the offenders. The study indicates that by drawing on family members, mutual loyalties, inherent strength, desire to help, availability and other resources. Probations and parole agencies can improve public safety and supervision of outcomes as well as the family well-being.

The study encourages creative thinking about how society might better respond to dialed, lived realities of poor women and men, including that of justice supervision. The goal is not just to develop a better tool for predicting recidivism, but to prevent recidivism by supporting individual efforts to value members of their families and other networks of support, and by extension, the communities in which they reside (Flavin, 2004). The result of assessment tools such as the Level of Supervision Inventory Revised (LSI-R) is the exaggeration of women's risk.

McBride, Visher, and Lavigne (2000) conducted a research on prisoner reentry. The goal of the research was to establish a standard coordinated release program based on known risk factors and needs, to promote effective community linkages, to enhance employability and to promote healthy family and interpersonal relationships. The importance of family support for the offenders has been emphasized for years but very little attention has been paid to it. Ohinis (1954) made an effort to develop a parole success prediction for the state of Illinois in the 1950s. He constructed an "index of

family interested and compared the number of visits and number of visitors for a sample of releases from Illinois state prison locations from 1925-1935. The study indicated that inmates who were classified as maintaining active family interest were successful on parole; whereas those who were classified as loners experienced lower rate of parole success.

Two follow-up investigations were compared to similar populations of releases. The results were similar (Ohlin, 1954; Homer, 1979). Howser, et al., (1983) compared recidivism rates for releases who participated in a program designed to strengthen family ties and prepare prisoners for returning to their families with the expected recidivism rate. Each study found that stronger ties between inmates and families and close friends during incarceration led to better post-release outcomes. Offenders who experienced more family contact either through visits or mail or participation in programs intended to facilitate family contact experienced lower recidivism rates and greater post-release success.

Programs development for the family members of prisoner while the offender remains incarcerated. Programs such as marital workshops, family education and parenting skills showed provincial improvement in family relationships and ties as means of preparing the prisoner for release and reintegration in both the family and the community (Adalist-Estrin, 1994; Jorgensen, et al., 1956; Marsh, 1983). Researchers at the Vera Institute of Justice tracked and interviewed 49 people who were released from New York City state prison or New York City jails during the initial 30 days immediately following release. The researchers found that for these former prisoners, family support played a critical role during the first 30 days. The interviews revealed two important

areas of family support; emotional support and housing assistance. Researchers also found family acceptance and encouragement as well as perceived emotional support from families were both related postrelated to post release success (Holt& Miller, 1972; Nelson, et al., 1999).

In the report from the criminology Research Council Grant of 02/26/03, there is some evidence that ex-prisoners who have greater family support do better in terms of both obtaining employment and having greater stability in employment than those with less support.

Nelson, et al., (1949) also found that among 33 male and 16 female ex-prisoners interviewed over a six week post release period, those who indicated that their family and/or friends were supportive of them were more likely to gain employment and had a lower level of continued criminal activity than those with less perceived family support. They obtained employment through old contacts with eight out of twelve returning to old employment they held in the past, and some utilized contacts from family and friends to find employment.

O'Brien (2002), in her study with female ex-offenders, examined the barriers that have an indirect and direct impact on women's employability after release from prison. O'Brien found that, for some offenders, the process of reintegration follows a growth path with the help of families that accept them back, employment availability, and available support networks to encourage restoration of their status as residents in their communities. But, for most female ex-offenders transition from prison to community seems to be hard and rough and eventually return them to prison. A National Study of all

released individuals in 15 states in 1994 found that within three years, 58% of women were rearrested, 40% reconvicted, and 39% returned to prison.

In 1998 family and connections network recommendations were to strengthen the family ties of adult offenders because stronger family ties for ex-offenders means safer communities. The policy also stated that families of offenders are in crisis and deserves support. Studies have consistently shown that prisoners who maintain family ties do significantly better on release than those who do not (<http://www.fcnetwork.org/reading/policy.html>).

The policy recommendation on families of adult offenders stated that research has shown that strong prisoner-family supports reduce recidivism. Therefore, the criminal justice system should maintain and strengthen family support through the adoption of system-wide policies and family support service programs, such as marriage counseling and relationship building programs, parenting skills programs for prisoners and family members, family crisis intervention services, pre-release programs for prisoners, and family reunification, as well as employment and community re-entry and family services inside jails and prison, provided by liaison personnel from public and private organizations who can assist with family problems and facilitate prisoner-family support.

Another policy recommendation on families of adult offenders is information access. The information access include family orientation to each stage of the criminal justice process the offender may expect to encounter from arrest to return to the community. Family access to correctional counselors, probation, and parole officers and other casework personnel, criminal justice should encourage communication between prisoners and their families (<http://www.fcnetwork.org/reading/policy.html>). It is also a

policy recommendation on *families of adult offenders* for the criminal justice system to: provide community support from the religious community for families facing the spiritual crisis of the incarceration of a family member; advocate for the families faced with discrimination; and provide counseling, support groups, family networking and recreation services, information, referral and advocacy.

The policy recommendations on families of adult offenders emphasized the role of research as an important element of program development. Knowledge and understanding of the role of the personal support system of the offender is of great importance, particularly important in the family, in the reduction of repeat adult crime, and in the problems families experience in maintaining and strengthening family ties and in carrying out family roles and commitments. Also important is the evaluation of the effectiveness of programs and services for families of offenders (<http://www.fcnetwork.org/reading/policy.html>).

Recidivism of Female Inmates

Research suggests that men were more likely to be rearrested, 68.4%, than women, 57.6% (Langan & Levin, 2002). Although the number of women in United States prisons is small compared to that of incarcerated men, the female inmate population has grown more rapidly. According to the U.S. Department of Justice Bureau of Justice Statistics, the Georgia female prisoners' population grew by more than 28 percent in the past year from 2,763 to 3,553 and the demographics of the female population is changing as it grows.

A recent study indicates that women are the fastest growing population in the criminal justice system, more than any other component of corrections. About 1 million women pass through United States correctional facilities, each year (Riche & Freudenberg, 2001).

Recidivism of Prisoners released in 1994 (Washington, D.C.: Bureau of Justice Statistics, 2000) shows the study of the rearrest, reconviction and reincarceration of prisoners. Two hundred seventy two thousand, one hundred and eleven (272,111) former inmates were tracked for 3 years after release, and the results indicated a rapid increase of recidivism of those prisoners within 3 years. The study indicated that 67.5% of the same prisoners were rearrested for a new offense. Forty-seven percent were reconvicted for a new crime, 25.4% were re-sentenced to prison for a new crime, and 51.8% were back in prison serving time or for a technical violation of their release, like failing a drug test, missing an appointment with their parole officer, or being arrested for a new crime.

Prison data from July 1995 to June 2001 (Tallahassee, Florida; Florida, Florida Department of Corrections, Bureau of Research and Data Analysis, 2003) provide more recent statistics on prisoners released in that state. The report shows that recidivism rates rise with the length of time a prisoner has been released. In the first six months following release, only 12.5% of male prisoners and 8.4% of female prisoners had committed a new offense by sixty months (five years) following release, those who had committed a new offense had risen to 48.7% for males and 42.8% for females. The Bureau of Justice statistics, in November 2003, analyzed the recidivism rate specifically

for sex offenders released since 1994. As the study indicated, the first three years following their release from prison, 5.3% of the released sex offenders were rearrested for a sex crime.

Why are so many women behind bars in Georgia prisons? A straight forward answer to this question is drug offenses is the leading cause of female arrests (Covington & Bloom, 2003; Greenfield & Snell, 1999; Kruttschnitt & Cartner, 2003). Women incarcerated in the state prison have more substance abuse problems than their male counterparts (Hartwell, 2001). Half of the women offenders used illegal substances within the month prior to their offense (Greenfield & Snell, 1999). As Jacobs, executive director of the Women's Prison Association stated, "With high rates of women behind bars, one should look closely at alternative sentencing, particularly mandatory treatment as an option for drug offenders." This current study will look beyond substance abuse problems and investigate the circumstances that led to drug use among the incarcerated women.

McQuire and Priestly (1995) have pointed out that the "punishment experiment" is the culmination of Martinson's famous proclamation of "nothing works" in the mid 1970s. An international conference, held in Lancaster, England in 1994 and presented by Roger Mathew and Peter Frances asked the question, why prison? Drawing on their experiences from Canada, Europe and the United States, the four hundred delegates discussed changing roles of prisons, the increased use of punishment as a deterrent for crime and premature abandonment of rehabilitation. The Conference reaffirmed the key role of rehabilitation as Elliot Curie pointed out, "The point is obvious. If we can predict criminality through characteristics that are amenable to change, there is no logical crisis

of the incarceration of a family member, advocates for the families faced with reasons why we should lock up certain individuals on the basis of the characteristics rather than trying to change them.”

Along the same lines, Croggin, after reviewing 111 studies, involving 442,000 offenders of the association between various criminal justice systems and punishment noted, “The overall finding showed that harsher criminal justice sanctions had no deterrent effect on recidivism.” On the contrary, punishment produced a slight 3% increase. These findings were consistent across sub-groups of offenders including adult/youth, male/female, and white/majority (Croggin, 2002).

Those who reject the punishment paradigm have also pointed out that prisons themselves are not rehabilitating, but debilitating experiences with dangerous and alienating effects, costing an increasingly prohibitive amount of money to maintain (Palmer, 1992; Sampson, 1994). Many of these authors note that, overall, the recidivist follows the imprisonment rate; the more prisoners in a penal system, the more recidivism one can expect.

As previously mentioned, there is a correlation between the lack of family support and the incidence of recidivism. With the prison population at a high of 77,599 and the prisons reaching their capacity, the problem is increasingly problematic. Government reports and academic research have shown that with family support, the process of reintegration and finding employment is easier for the ex-convict. The strongest evidence for this link was concluded from a U.S. study conducted in 1972. The study illustrated that the lack of family support correlated with a six-fold increase in reoffending. Similar studies have demonstrated the same results. All in all, these studies

have shown that the presence of family support has correlated with the decline of recidivism up to 50%. While it is true that prisoners with family support are less likely to reoffend, there is significant importance placed on familial bonds. In addition, the loss of family contact and re-offending is more common than the raw data suggests.

Where the government has failed to take adequate action, visitors' centers and charities have stepped in. A major role played by these organizations is in the facilitation of family visits and the continued contact with family members. Visitor centers are facilities located outside of prison, which provide an entry point for all visitors and includes basic services of bookkeeping prison visits. Visitor centers have a great impact on ensuring family support of the incarcerated. In addition, the average cost of maintaining a visitor center is \$40,000. Even an increase of \$20 of the budget would not amount to the high cost of recidivism spent annually, however reaping much more benefits.

Theoretical Framework

The theoretical framework selected for the study is the family systems theory. Family systems theory is an approach that views individual behaviors and problems as emanations and symptoms of interactive sequences in the family. The family is a system. Family members are interactive and relational. Therefore, restorative treatment for individuals should be centered on the family as a whole, altering the sequences of interactions and examining the functions that the symptoms serve for the system. The theory explains that a child's innermost emotional development is derived in large measure from experiences in the home. When the family has been weakened or

fractured, it may be unable to fulfill its ideal functions. It also emphasizes that deviant and self-destructive behavior in today's society are characterized by a breakdown in family values, teenage suicide, spouse and child abuse, homicide, substance abuse, single-parent households and chronic dependency on welfare assistance.

Family systems theory was chosen for this study because the family has been central to molding personalities and to defining values and worldviews. The state of a family has profound consequences, for better or for worse, for its members. The family is the cell to which people revert to in times of social disorganization. Family relationships cannot be compared to any other social connections in depth and intensity of their effect upon individual members. Some incarcerated females have no cell to revert to during troubling times. Therefore, they continue with what they know best which is to repeatedly commit crimes and return to prison. They create family-type relationships in prison.

Woods and Hollis (1990), Siegel (1998), and Short (1972) have argued that crime and recidivism are simply a normal outcome from normal individuals responding to an abnormal environment. Alice Miller (1990), the Swiss psychiatrist, in her book, *Hidden Cruelties in Child Rearing and the Roots of Violence*, coined the phrase, "poisonous pedagogy is a form of parenting that violates the rights of children. Such a violation is often re-enacted when these children become parents. The manifestation of "poisonous pedagogy" is very common among the incarcerated female. For example, some incarcerated women were sexually, emotionally and physically abused during their childhood. Then they turn around to abuse their children and are charged with child molestation or child cruelty.

From the family theory, there are three important family assessment tools available to evaluate the family:

1. The first tool looks at the relationship of the family with the outside environment.
2. The second tool is the genogram that examines the intergenerational relationships within the family.
3. The third tool is the culturagram that looks at the specific cultural aspects within diverse families.

The family system theory was developed by Minuchin, Bowen, Acherman, Whitaker and others who together produced a paradigmatic shift in viewing the family. Instead of conceptualizing symptomatic behavior as residing within the individual, these therapists increasingly saw problems within the context of family relationships. They referred to themselves as family therapists (Brown & Christensen, 1986). Salvador Minuchin, in the *Practice of Structured Family Therapy* (1974), emphasized five basic concepts that are relevant to incarcerated women. The important concepts are:

1. The family is a basic human system;
2. There are subsystems that function within the family system;
3. There are boundaries and characteristics of the family system and subsystem boundaries;
4. The enmeshed behavior between individual family members can have long lasting effects; and
5. Transaction patterns evolve within the family.

The five important concepts will be explained in detail. To begin, Minuchin refers to the family as a basic human system or multibodied organism (Minuchin, 1983). He views the family not as a collection of individuals or a sum total of individual personalities but as an entity. His theory describes the family as an organism and that a symptom is being created or maintained by interactions and structural problems within the system as a whole. Because human beings are made up of organs, the family organism consists of individual family members, which represent different organs. The lives of incarcerated women are different from the concept stated above. Some of them no longer have families. For those women that may have families, there is likely to be no consistent structure that defines how the family is organized, what rules and boundaries should guide it, and what might be the hierarchies and membership rules. Incarcerated inmates with no family or defective family structure are most likely to become recidivist. They have no respect for authority, have very poor boundaries and have problems following the chain-of-command. These women generally return to prison within two years after being released because of parole or probation violations.

The family system contains three key systems (Minuchi, et al., 1967). The first one is the marital subsystem. The marital subsystem is that part of the marital unit that includes all the behavioral sequences that evolve out of the partner commitment to love and cherish each other. It does not include the roles each partner plays with other family members, either as a nuclear or an extended family.

The function of the parental subsystem includes those behavioral transactional patterns that have evolved in relation to raising children. The parental subsystem may consist of a father-mother team or may consist of one parent together with significant

others who assist to varying degrees in raising the children. On one hand, the parental subsystem does not always consist of a father and mother as in the traditional family model. The parental subsystem may develop as a result of birth out of wedlock, adoption by a single parent, divorce or death of parent(s). Because parenting is a difficult task, even for two people, the single parent often requires additional support systems to carry out this function. The parental support system may include members of the family (i.e., sister, brother, grandparents) or members of the community (i.e., church or social service agency, a separated or divorced spouse). The assistance from these persons supplements the single parent's subsystem. A number of variables affect the type of combinations for assisting the parental subsystem – the need for help, how others are able to help, and the stresses of sharing parental functions with the inconsistent members of the parental subsystem. Subsystems are often a source of difficulty in such families.

The children are members of the sibling subsystem. The primary function of this system is to learn how to relate to peers, sharing resources with others, defending each other, building coalitions, and learning to negotiate with others to meet their desires and needs. In addition, children must learn to relate to and work under persons in authority. Adequate functioning of the sibling subsystem requires the family to allow the child to develop relationships outside the Family System (Brown & Christensen, 1986). For the well-being of a family, the family system theory focuses on the social organization of family organisms. This organization of components to fulfill a specific and necessary function within a larger system, is a subsystem. The incarcerated women lack these components to fulfill the necessary function in either a large or a small system. Most incarcerated women are single parents with five to seven children with inadequate

subsystem support. As stated earlier, the single parent's need for help in raising children challenges their decision-making choices regarding choices. When they have to deal with limited financial resources and unemployment stressors, the urge to consider criminal activities increases, such as shoplifting, selling of illegal substances, robbery, financial transaction fraud, prostitution or putting themselves or their family in risky situations. If these women are unable to care for their children or the children experience physical, sexual or emotional harm, then the social service agencies get involved in taking over supervisory care. When children are taken away from their mothers, that becomes a crisis that mothers often cannot bear or do not know how to handle, and then, the mother may end up committing a crime or violating to their probation or parole resulting in a return back to prison.

These women who were once children themselves most likely had difficulty mastering basic interpersonal skills in their sibling subsystem, i.e., learning how to do constructive problem solving, or relate to peers and/or people in authority. In addition, they have problems adapting within the structured prison environment. The next concept is that of the characteristic of systems and subsystem boundaries. According to Roberts and Green (2003), boundaries within families define who is in or out of family relationships – vis-à-vis the focal issue as well as their roles are defined within this interaction. Boundaries do not exist just around the family system. There are interactional paths among individuals and subsystems.

The boundaries relate to incarcerated women in that an incarcerated female who distorted subsystem boundaries during her childhood will turn out to have poor boundaries. There is a high correlation between poor boundaries and criminal activities

such as child molestation, aggravated assault, terrorist threats, substance abuse or dependence, and murder (Hogan, 1989). It can be difficult to train incarcerated women to recognize and even understand healthy boundaries.

The concept of enmeshment is also connected to boundaries in relationships. Family systems presuppose that the lack of differentiation among family members increases the dynamics of enmeshment within the relationships of incarcerated women. Moreover, these women with relationships exhibiting enmeshed characteristics are constantly in trouble with the law. They lack the ability to display mature and responsible thinking, and to demonstrate healthy choices and behavior in society. In summary, boundaries are interpersonal rules that tell each family member how to operate in various circumstances.

As a system, the family has evolved rules and boundaries that regulate its functioning, which is termed transactional patterns. At any given point of the developmental process of a family cycle, each family member has specific survival and growth needs (Terkelsen, year). Each person has survival needs for such things as food, shelter, and safety (survival) as well as growth needs such as emotional caring, support and developmental nurturance. The family must evolve to adapt methods of functioning appropriately that allow each person to meet these needs appropriately.

Social learning theory is a theory that views a person's behavior as being a result of the social conditions under which the behavior was learned (Robert & Greene, 2003). Bandura's social learning theory emphasized how children and adults operate mentally on their social experiences and how these mental operations in turn influence their behavior. The family has a stronger role or impact in modeling one's behavior. It is not

possible to accurately assess an individual's concerns without observing the interaction and mutual influence between fellow family members as well as the broader contexts in which the person and family live.

The goals of family system theory are to change what is in the system and produce change in the individual members. Family therapy's aim is to help family members change dysfunctional patterns of relating and to create functional ways of relating to each other and people outside of the family. These facts support that family system theory is the primary foundation for this study more so than social learning theory. The role of the therapist in changing family problems is more effective for recidivism and easier than fostering change for societal problems.

CHAPTER III

METHODOLOGY

Chapter III presents the methods and procedures that were used in conducting the study, presenting and analyzing the data. The following are described: research design; description of the site; sample and population; instrumentation; treatment of data; and limitations of the study.

Research Design

The research design was a non-experimental descriptive explanatory, which allowed the investigator to accomplish two goals. The first goal was to allow the investigation of the correlation between unemployment, family support, mental disorder and recidivism. The second goal was to have the investigation of recidivism as a dependent variable of unemployment, family support and mental illness. Therefore, the method of analysis included co-relational analysis and multiple regressions. In some cases where the assumptions of multiple regressions have not been met, logistic regression analysis was used.

Description of the Site

The research study was conducted in one of the female facilities in Georgia. This site was chosen for three reasons, because it is a diagnostic center, every female offender

serving at least one year in state custody, in the state of Georgia is processed there first and must remain there between six to eight weeks to complete the diagnostic requirement before being transferred to any other female prisons in the state.

Because of its large population, the selected prison provided a greater representation and comprehensive mental health services provided to the offenders. Also workers were cooperative, accessible and demonstrated a genuine interest in the purpose and outcome of the proposed research.

Sample and Population

The sample population consisted of 272 female inmates in a Georgia prison who were either first time or repeat offenders. Non-probability availability sampling was utilized in this research design.

Instrumentation

The research study employed a questionnaire entitled, "A Study of the Relationship between Unemployment, Family Support and Mental Disorders on Recidivism of female inmates in a Georgia Prison." The survey questionnaire consisted of three sections with a total of forty-six (46) questions.

Section I demographic information was requested of the survey participants, which included gender, age, marital status, race, profession, income, and spiritual belief. The purpose of this section was to gather demographic information vital to the integrity of the study.

Section II had questions and was designed to measure one dependent variable (recidivism of female inmates in a Georgia prison). The responses for these variables

had four categorical options, which are coded for measurement purposes in the following manner: (1) strongly disagree; (2) disagree; (3) agree; and (4) strongly agree.

Section III consisted of questions on criminal history. It was designed to get the opinion of criminal history.

Treatment of Data

The statistical treatment of the data employed included descriptive statistics, correlations analysis, and the Chi-square test. Descriptive statistics was utilized to organize and analyze data collected from the survey questionnaire. The chi-square was utilized as the test of significance of the relationship between the dependent and independent variables. The study was also classified as a correlation study. The correlates were recidivism, unemployment, family support and mental disorder. It selected independent variable, one at a time, accounting for the most variance in the dependent variable. Thus, the test was utilized to test the hypotheses. Data was analyzed utilizing the Statistical Package for the Social Sciences (SPSS).

Limitations of the Study

The study was limited to only one female prison in the state of Georgia. Therefore the conclusions will have to be interpreted, with caution, and may not be generalized to the national situation as a whole. Also the conclusions may not apply to juvenile and male prisoners.

Secondly, the study investigated three relationships; namely, the relationship between unemployment on recidivism, the relationship between family support recidivism and, lastly, the relationship between mental illness on recidivism. It is not a

study of cause and effect. Additionally, there are other relationships and factors that were not studied; for example, religiosity and ethnicity on the recidivist rate.

CHAPTER IV

PRESENTATION OF FINDINGS

The purpose of this chapter was to present the findings of the study in order to describe and highlight the relationship between unemployment, family support, mental disorder and the recidivism of female inmates in a Georgia state prison. These findings are organized into two sections. Section one reports on the demographic data. The second section discusses additional data relating to the research questions and the hypotheses of the investigation.

Section I: Demographic Data

The first section provides the profiles of the participants and respondents. Descriptive statistics were used to summarize and describe the following variables: gender, age, ethnicity, marital status, educational level criminality, religion and frequency of previous imprisonment.

The target population for the study was female prisoners in a Georgia state prison. The average annual population of the prison was 900 inmates. The investigator used simple random sampling to select about 280 subjects. In administering the questionnaire, the investigator sought and obtained the assistance of four prison staff.

During the initial tabulation of the returns, it was found that eight of the respondents had failed to complete the questionnaire properly and therefore did not meet the criteria for inclusion. The study had 272 valid cases.

Table 2

Demographic Profile of Female Inmates in a Georgia Prison (N = 272)

Variable	Frequency	Percent
Gender		
Male	1	.4
Female	271	99.6
Age Group		
Under 30	58	7.8
30-39	112	21.3
40-49	64	29.8
50-59	31	11.4
60 & Up	7	2.6
Ethnicity		
African American	110	40.6
Caucasian	146	53.9
Hispanic	5	1.8
Asian	1	.4
Native American	5	1.8
Other	4	1.5
Highest Education		
Under 9 Years	45	16.6
1-3 Years High School	77	28.4
High School Graduate	74	27.3
Technical School	28	10.3
Some College	36	13.3
College Graduate	11	4.1

Table 2 (continued)

Variable	Frequency	Percent
Annual Income		
Under \$20,000	139	55.4
\$20,000-24,999	34	13.5
\$25,000-29,999	23	9.2
\$30,000-34,999	19	7.6
\$35,000-49,999	25	10.0
\$50,000 & Up	11	4.4
Marital Status		
Never Married	100	37.6
Married	59	22.2
Divorced	62	23.3
Widowed	12	4.5
Separated	33	12.4
Religious Preference		
Judaism	8	3.1
Christian	194	74.3
Islam	3	1.1
Hinduism	2	.8
Atheism	3	1.1
Other	51	19.5
Religious Practice		
None of the Time	28	10.4
Some of the Time	118	44.0
Most of the Time	73	27.2
All of the Time	49	18.3
Longest Employment Period		
0-6 Months	49	18.0
7-12 Months	26	9.6
1-2 Years	64	23.5
3-5 Years	58	21.3
More than 5 Years	65	23.9
Never Been Employed	10	3.7

Table 2 (continued)

Variable	Frequency	Percent
Occupational Skills		
Writing	33	12.4
Technical	20	7.5
Clerical	45	16.9
Cosmetology	13	4.9
Cashier	53	19.9
Other	103	38.6

Summary and Highlights of Data

1. Age:

Sixty-three percent of the respondents were younger than 40 years. Only three percent were sixty years or older.

2. Ethnicity:

Fifty-four percent were Caucasian, forty percent were African American. Hispanics and Native Americans made up about two percent each.

3. Education:

Respondents with less than nine years of schooling, one to three years of high school and high school graduates made up 72%. That is, 18 of 25 inmates had completed high school or less. In contrast, college graduates formed only 4%, that is, 1 in 25.

4. **Income:**

The annual income of 78% of the inmates was \$30,000.00. Only four percent had an average salary of \$50,000.00 or more. However, further breakdown of the figures shows that, in fact, more than a half (51.1%) of the inmates earned on the average, under \$20,000.00 annually. State statistics show that it spends about \$30,000.00 on each inmate annually, an amount that is higher than the salary of about a third of the prison staff.

5. **Membership in Organized Religion:**

About 80% of the respondents claimed that they belong to some form of organized religion, with the majority (71.3%) being Christians. But only about 45% indicated that they participated in religious activities with any degree of seriousness. Ten percent never participated in any religious activities at all.

6. **Recidivist Profile (Frequency of Incarceration):**

One in ten have been to prison or jail at least six times. About 40% were first timers. That means that 60% had been to prison at least once before. Forty-two percent had been incarcerated two to five times.

7. **Length of Employment:**

More than fifty percent (51.1%) had never held a job for more than 2 years. One in five held a job for a period of six months or less. Less than fifty percent (45.2%) reported holding down a job for more than 3 years or more. One in three (31.1%) reported that they were unable to hold down a job for more than one year. Four percent never worked. Prior to incarceration, 45% did not have a steady job and about 30% could not find a job.

8. **Occupational Skills:**

Only 12% had occupational writing skills, and about 8% had technical skills.

Most of the occupations they worked in [clerical (16.5%), cosmetology (4.8%) and cashier (19.5%)] were low paying jobs requiring minimal education, training and experience. Nearly 30% indicated that their inability to find a job resulted from lack of suitable skills, and 16% blamed it on lack of experience, while 25% indicated that lack of work contributed to their return to prison.

9. Before incarceration, more than a half of the inmates (51.3%) were treated for a mental disorder. While in prison, almost one in two inmates were also treated for mental disorder. Also before incarceration, 25%, that is 1 in 4, received full professional attention and treatment in a hospital setting. Thirty-one percent got help occasionally from a Mental Health Center.

10. **Marital Status:**

More than one in three (37%) of the inmates had never married. About 80% of the respondents, that is 4 in 5, did not report having a traditional nuclear family: husband, wife and children, living together as a family. Twenty-two percent were divorced, and twenty-two percent were married, and about 11% were separated. The data strongly suggests that more of the families were dysfunctional.

11. **Family Support during incarceration – Visits and Gifts:**

Thirty percent asserted that they had family visits all the time; thirty percent also had frequent visits from families, and forty-one percent had occasional visits. On the other hand, 62% did not have family visits all the time, 65% did not have frequent visits and 56% did not have occasional visits. Thirty percent said they

never had a visit from the family. About 70% agreed, “in prison my family sends me money and packages.” Twenty-eight percent disagreed with that statement. But twenty-one percent agreed with the statement, “in prison my family members never send me money-packages.”

Additional Findings from the Data

As shown in Table 3, 168 or 64.9% of the inmates indicated that they disagreed that their family members visited them in prison. A number of the inmates, 91 or 35.1%, agreed that their family members visited them all the time. A number of the inmates, 90.02 or 34.9%, agreed that their family members frequently visited them.

Table 3 also indicated that a large number, 144 or 56.5%, of the inmates disagreed that their family members visited them occasionally in prison. While 111 or 43.5% agreed that their family members visited them occasionally. One hundred and seventy-seven (177) or 68.9% of the inmates indicated that their family members never visited them in prison. A number of the inmates, 80 or 31.1%, agreed that their family members visited them in prison.

A number of the inmates 74 or 28.2% disagreed that their family members send them money and packages. One hundred and eighty-eight (188) or 71.8% agreed that their family members send them money and packages. A number of the inmates, 199 or 78.3%, indicated they disagreed that family members never send money or packages in prison. A number of the inmates, 55 or 21.7%, agreed that their family members never send them money or packages in prison.

Table 3

Family Support (N = 272)

While in prison my family members	Disagree		Agree	
	#	%	#	%
Visited me all the time	168	64.9	91	35.1
Visited me frequently	168	65.1	90	34.9
Visited me occasionally	144	56.5	111	43.5
Never visited me	177	68.9	80	31.1
Sent money and packages	74	28.2	188	71.8
Never sent money and packages	199	78.3	55	21.7

As shown in Table 4, 127 or 48.7% indicated they disagreed that they were treated for a mental disorder before coming to prison, and 134 or 51.3% agreed that they were treated for mental disorder before coming to prison. A number of the inmates 120 or 46.2% disagreed that they were treated for mental disorder while in prison, while 140 or 53.8% agreed that they were treated for mental disorder while in prison.

A number of the inmates, 183 or 73.2%, indicated they disagreed that their mental disorder was treated in the psychiatric hospital, while 67 or 26.8% agreed that their mental disorder was treated in the psychiatric hospital. A number of the inmates, 148 or 58.3%, indicated they disagreed they were treated in mental health center, and 106 or 41.7% agreed they were treated in mental health center. A number of the inmates, 186 or 73.2%, indicated they disagreed that their mental disorder did not require psychotropic

medication, and 68 or 26.8% agreed that their mental disorder did not require psychotropic medication. A large number of inmates, 177 or 69.4%, indicated they disagreed that their mental disorder was induced by their use of illegal drugs. While a smaller number of the inmates, 78 or 30.6%, agreed that their mental disorder was induced by their use of illegal drugs.

Table 4

Mental Disorder (N = 272)

Treatment for mental disorder	Disagree		Agree	
	#	%	#	%
Before I came to prison	127	48.7	134	51.3
While in prison	120	46.2	140	53.8
In a hospital	183	73.2	67	26.8
In a mental health center	148	58.3	106	41.7
Did not require psychotropic medication	186	73.2	68	26.8
Induced by my use of illegal drugs	177	69.4	78	30.6

As shown in Table 5, 123 or 47.5% disagreed that they were employed in a steady job before their incarceration. But, many of the inmates, 136 or 52.0%, agreed that they have been employed in a steady job before their incarceration. However, 193 or 77.5% of the inmates indicated they disagreed that prior to their incarceration, they spent about six months trying to find a job. A large number, 200 or 80.6%, of the inmates who

indicated they disagreed that they quit their job because it was stressful. Only 48 or 19.4% agreed they quit their job because they were too stressful. There were 198 or 80.2% of the inmates that indicated they disagreed they quit their job because the pay was too low, and 49 or 19.4% agreed they quit their job because the pay was too low.

Many of the inmates, 168 or 67.7%, indicated they disagreed they had job skills but could not find a job, and 211 or 85.1% of the inmates indicated they disagreed that they could not find a job because they did not have work experience. However, only 37 or 14.9% agreed they could not find a job because they did not have work experience.

Table 5

Unemployment (N = 272)

My employment situation before prison	Disagree		Agree	
	#	%	#	%
I had a steady job	123	47.5	136	52.5
I spent six months trying to find a job	193	77.5	56	22.5
I quit my job because of stress	200	80.6	48	19.4
I quit because the pay was too low	198	80.2	49	19.8
I could not find a job	168	67.7	80	32.3
I could not find a job - no work experience	211	85.1	37	14.9

As shown in Table 6, 111 or 41.0% of the inmates said they have been incarcerated only once, while 56 or 20.7% of the inmates said they have been incarcerated 1 – 2 times. Fifty-nine (59) or 21.8% of the inmates said they have been convicted 3 – 4 times; 16 or 5.9% inmates said they have been incarcerated 5 – 6 times; and 29 or 10.7% of the inmates said they have been convicted more than 6 times.

Table 6

Number of Incarcerations

Variable	Frequency	Percent
Only once	111	41.0
1 - 2 times	56	20.7
3 - 4 times	59	21.8
5 - 6 times	16	5.9
More than 6 times	29	10.7
Total	271	100.0

As shown in Table 7, 203 or 77.5 % of the inmates said they have been incarcerated 2 – 3 times, and 59 or 22.5% of the inmates said they have been incarcerated 4 – 5 times.

Table 7

I have been incarcerated

Variable	Frequency	Percent
2 - 3 times	203	77.5
4 - 5 times	59	22.5
Total	262	100.0

As shown in Table 8, a small number of the inmates, 22 or 8.1%, said their parole condition did not include monthly drug screening. The majority of the inmates, 250 or 91.9%, said “yes,” their parole condition included monthly drug screening.

A small number of the inmates, 25 or 9.2%, said “no,” their parole condition did not include confinement to a judicial district. However, the majority of the inmates, 247 or 90.8%, said “yes,” their parole condition included confinement to a judicial district. A smaller number of the inmates, 21 or 7.7%, said “no,” their parole condition did not include monthly reporting to probation officer. The majority of the inmates, 251 or 92.3%, said “yes,” their parole condition included electronic monitoring. A smaller number of the inmates, 22 or 8.1%, said “no,” and 250 or 91.9% of the inmates said “yes,” their parole condition included monthly reporting to probation officer.

A small number of the inmates, 23 or 8.5%, said “no,” their parole condition did not include community services, and the majority of the inmates, 249 or 91.5%, said “yes,” their parole condition included community services. A small number of the

inmates, 23 or 8.5%, said “no,” their parole condition did not include attendance to Narcotic Anonymous. Moreover, 249 or 91.5% said “yes,” their parole condition included attendance to Narcotic Anonymous. Additionally, a small number of the inmates, 22 or 8.1%, said “no,” the parole condition did not include attendance to Alcohol Anonymous, but the majority, 250 or 91.9%, said “yes,” their parole condition included attendance to Alcohol Anonymous.

Table 8

Parole Conditions of Criminal History (N = 272)

My parole included	No		Yes	
	#	%	#	%
Monthly drug screening	22	8.1	250	91.9
Confinement to a judicial district	25	9.2	247	90.8
Electronic monitor	21	7.7	251	92.3
Monthly reporting to probation officer	22	8.1	250	91.9
Community service	23	8.5	249	91.5
Attendance to Narcotics Anonymous	23	8.5	249	91.5
Attendance to Alcohol Anonymous	22	8.1	250	91.9

As shown in Table 9, a small number of the inmates, 17 or 6.3%, said “no,” they did not develop a bond with other inmates in prison. A small number of inmates, 24 or 8.8%, said “no,” they did not lack employment prior to their incarceration, but the

majority of the inmates, 248 or 91.2%, said “yes,” they were unemployed prior to their incarceration.

Twenty-four (24) or 8.8%, said “no,” they did not lack housing before coming to prison, while 248 or 91.2% of the inmates said “yes,” they lacked housing before coming to prison. Only 25 or 9.2% said “no,” they did not violate parole, but the majority of the inmates, 247 or 90.8%, said “yes,” they violated parole. A small number of the inmates, 26 or 9.6%, said “no,” they did not violate probation, while 246 or 90.4% of the inmates said “yes,” they violated probation.

A small number of the inmates, 28 or 10.3%, said “no,” they were not convicted of committing a crime, and the majority of the inmates, 244 or 89%, said “yes,” they were convicted of committing a crime. Few inmates, 27 or 9.9%, said “no,” they had no pending charges, however, 245 or 90.1% of the inmates said “yes,” they had pending charges. Finally, a small number of the inmates, 25 or 9.2%, said “no,” prison is not a safe place for them, but the majority, 247 or 90.8%, said “yes,” prison is a safe place for them.

Table 9

Returning to Prison Criminal History (N = 272)

Contributing factors	No		Yes	
	#	%	#	%
Developed bond with other inmates	17	6.3	255	93.8
Lack of employment	24	8.8	248	91.2
Lack of housing	24	8.8	248	91.2
Violation of parole	25	9.2	247	90.8
Violation of probation	26	9.6	246	90.4
Convicted of committing a crime	28	10.3	244	89.7
Pending charge	27	9.9	245	90.1
Safe place for me	25	9.2	247	90.8

Table 10 is a cross-tabulation of the recidivism of female inmates by the unemployment experience of 241 incarcerated female inmates in a Georgia prison. It shows the relationship between recidivism and the unemployment experience of the female inmates and indicates whether there was a statistically significant relationship between the two variables.

Table 10

Crosstabulation of Recidivism by Unemployment of Incarcerated Females (N=241)

		Disagree		Unemployment Could not find a job Agree		Total	
		#	%	#	%	#	%
<u>Recidivism</u>							
Incarcerated	2-3 times	160	66.4	26	10.8	186	77.2
Incarcerated	4-5 times	44	18.3	11	4.6	55	22.8
Total		204	84.6	37	15.4	241	100.0

Chi square = .276 df 1

Table 10 indicates that of the 241 females, 204 or 84.6 percent disagreed that there was a relationship between recidivism and unemployment. When the chi square test was applied, the null hypothesis was accepted indicating that there was no statistically significant relationship (.276) between recidivism and unemployment at the .05 level of probability.

Table 11 is a cross-tabulation of the recidivism of female inmates by the mental disorders of 252 incarcerated female inmates in a Georgia prison. It shows the relationship between recidivism and the mental disorder of the female inmates and indicates whether there was a statistically significant relationship between the two variables.

Table 11

Crosstabulation of Recidivism by Mental Disorder of Incarcerated Females (N=252)

		Mental Disorder Before coming to prison					
		Disagree		Agree		Total	
		#	%	#	%	#	%
<u>Recidivism</u>							
Incarcerated	2-3 times	103	40.9	90	35.7	193	76.6
Incarcerated	4-5 times	22	8.7	37	14.7	59	23.4
	Total	125	49.6	127	50.4	252	100.0
Chi square = .031		df 1					

Table 11 indicates that of the 252 females, 127 or 50.4 percent agreed that there was a relationship between recidivism and mental disorder. When the chi square test was applied, the null hypothesis was rejected indicating that there was a statistically significant relationship (.031) between recidivism and mental disorder at the .05 level of probability.

Table 12 is a cross-tabulation of the recidivism of female inmates by family support of 248 incarcerated female inmates in a Georgia prison. It shows the relationship between recidivism and the family support of the female inmates and indicates whether there was a statistically significant relationship between the two variables.

Table 12

Crosstabulation of Recidivism by Family Support of Incarcerated Females (N=248)

		Family Support <u>Family visits me in prison</u>					
		Disagree		Agree		Total	
		#	%	#	%	#	%
<u>Recidivism</u>							
Incarcerated	2-3 times	104	41.9	87	35.1	191	77.0
Incarcerated	4-5 times	36	14.5	21	8.5	57	23.0
Total		140	56.5	108	43.5	248	100.0

Chi square = .245 df 1

Table 12 indicates that of the 248 females, 140 or 56.5 percent disagreed that there was a relationship between recidivism and family support. When the chi square test was applied, the null hypothesis was accepted indicating that there was no statistically significant relationship (.245) between recidivism and family support at the .05 level of probability.

Section II: Research Questions and Hypotheses

Section II provides an analysis of the findings in Section I relating to these research questions and hypotheses. The study focused especially on three research questions and related hypotheses.

Research Question I: Recidivism and Unemployment

Question 1: What type of relationship, if any, exists between unemployment and recidivism of female inmates in a Georgia Prison?

Null Hypothesis 1: There is not a significant relationship between unemployment and the recidivism of female prisoners.

Description of Test Results: The results in the three correlation tables answer Question 1.

Table 13

Recidivism and Occupational Skills

Correlations

		Q30 I have been incarcerated	Q11 My occupational skills
Q30 I have been incarcerated	Pearson Correlation	1.000	-.024
	Sig. (2-tailed)	.	.705
	N	272	257
Q11 My occupational skills	Pearson Correlation	-.024	1.000
	Sig. (2-tailed)	.705	.
	N	257	267

Table 13 indicates the correlation between recidivism and occupational skills. For a 2-tailed Pearson correlation coefficient, the relationship between recidivism and occupational skills was not significant.

Table 14

Recidivism and Steady Jobs

Correlations

		Q30 I have been incarcerated	Q24 Before my incarceration, I had been employed in a steady job
Q30 I have been incarcerated	Pearson Correlation	1.000	-.141*
	Sig. (2-tailed)	.	.026
	N	262	257
Q24 Before my incarceration, I had been employed in a steady job	Pearson Correlation	-.141*	1.000
	Sig. (2-tailed)	.026	.
	N	252	259

*. Correlation is significant at the 0.05 level (2-tailed).

Table 14 indicates the correlation between recidivism and steady jobs. For a 2-tailed Pearson correlation coefficient, the relationship between recidivism and steady jobs was significant at the 0.05 level.

Table 15

Recidivism and Lack of Work

		Q30 I have been incarcerated	Q40 Lack of work contributed to my return to prison
Q30 I have been incarcerated	Pearson Correlation	1.000	.208**
	Sig. (2-tailed)	.	.001
	N	262	244
Q24 Before my incarceration, I had been employed in a steady job	Pearson Correlation	-.208**	1.000
	Sig. (2-tailed)	.001	.
	N	244	248

*. Correlation is significant at the 0.05 level (2-tailed).

Table 15 indicates the correlation between recidivism and lack of work. For a 2-tailed Pearson correlation coefficient, the relationship between recidivism and lack of work was significant at the 0.05 level.

Research Question 2: Recidivism and Family Support

Question 2: What is the relationship between family support and the recidivism of female inmates in a Georgia prison?

Null Hypothesis 2: There is no significant relationship between family support and the recidivism of female inmates in a Georgia prison.

Description of Test Results: The results in the next three correlation tables attempt to answer Question 2.

Table 16

Recidivism and Marital Status

Correlations

			Q9 I have been incarcerated	Q6 Marital Status
Spearman's mo	Q9 I	Correlation Coefficient	1.000	-.054
	have been	Sig. (2-tailed)	.	.377
	incarcerated	N	271	265
	Q6 Marital	Correlation Coefficient	-.054	1.000
	Status	Sig. (2-tailed)	.377	.
		N	265	266

Table 16 indicates the relationship between recidivism and marital status. For a 2-tailed Pearson correlation coefficient, the relationship between recidivism and marital status was not significant.

Table 17

Recidivism and Family Visits

Correlations

		Q30 I have been incarcerated	Q15 In prison, my family members never visited me
Q30 I have been incarcerated	Pearson Correlation	1.000	.156**
	Sig. (2-tailed)	.	.014
	N	262	249
Q15 In prison, my family members never visited me	Pearson Correlation	.156**	1.000
	Sig. (2-tailed)	.014	.
	N	249	257

*. Correlation is significant at the 0.05 level (2-tailed).

Table 17 indicates the relationship between recidivism and family visits. For a 2-tailed Pearson correlation coefficient, the relationship between recidivism and family visits was significant at the 0.05 level.

Table 18

Recidivism and Prison as a Safe Place

Correlations

		Q30 I have been incarcerated	Q46 I returned to prison because it is a safe place for me
Q30 I have been incarcerated	Pearson Correlation	1.000	.141*
	Sig. (2-tailed)	.	.028
	N	262	243
Q46 I returned to prison because it is a safe place for me	Pearson Correlation	.141*	1.000
	Sig. (2-tailed)	.028	.
	N	243	247

*. Correlation is significant at the 0.05 level (2-tailed).

Table 18 indicates the relationship between recidivism and prisons as a safe place. For a 2-tailed Pearson correlation coefficient, the relationship between recidivism and the perception of prison as a safe place was significant at the 0.05 level.

Research Question 3: Recidivism and Mental Disorder

Question 3: What is the relationship between mental disorder and the recidivism of female inmates in a Georgia prison?

Null Hypothesis 3: There is no significant relationship between mental disorder and the recidivism of female inmates in a Georgia prison.

Description of Test Results: The following four tables describe the relationship between recidivism and mental disorder and answer Question 3.

Table 19

Recidivism and Psychotropic Drugs

Correlations

		Q30 I have been incarcerated	Q22 My mental disorder did not require psychotropic medications
Q30 I have been incarcerated	Pearson Correlation	1.000	.025*
	Sig. (2-tailed)	.	.701
	N	262	247
Q22 My mental disorder did not require psychotropic medications	Pearson Correlation	.025*	1.000
	Sig. (2-tailed)	.701	.
	N	247	254

Table 19 indicates the relationship between recidivism and psychotropic drugs. For a 2-tailed Pearson correlation coefficient, the relationship between recidivism and psychotropic drugs was not significant.

Table 20

Recidivism and Pre-Incarceration Mental Disorder Treatment in Hospital

Correlations

		Q9 I have been incarcerated	Q20 My mental disorder was treated in the hospital
Q9 I have been incarcerated	Pearson Correlation	1.000	.128*
	Sig. (2-tailed)	.	.044
	N	271	249
Q22 My mental disorder was treated in the hospital	Pearson Correlation	.128*	1.000
	Sig. (2-tailed)	.044	.
	N	249	250

*. Correlation is significant at the 0.05 level (2-tailed).

Table 20 indicates the relationship between recidivism and pre-incarceration mental disorder treatment in psychiatric hospital (inpatient). For a 2-tailed Pearson correlation coefficient, the relationship between recidivism and pre-incarceration mental disorder treatment in psychiatric hospital was significant at the 0.05 level.

Table 21

Recidivism and Mental Disorder

Correlations

		Q30 I have been incarcerated	Q18 I was treated for mental disorder before I came to prison
Q30 I have been incarcerated	Pearson Correlation	1.000	.175*
	Sig. (2-tailed)	.	.005
	N	262	252
Q18 I was treated mental disorder before I came to prison	Pearson Correlation	.175**	1.000
	Sig. (2-tailed)	.005	.
	N	252	261

*. Correlation is significant at the 0.01 level (2-tailed).

Table 21 indicates the relationships between recidivism and mental disorder. For a 2-tailed Pearson correlation coefficient, the relationship between recidivism and mental disorder was significant at the 0.01 level.

Table 22

Recidivism and Treatment in a Mental Health Center

Correlations

		Q9 I have been incarcerated	Q21 My mental disorder was treated in a mental health center
Q9 I have been incarcerated	Pearson Correlation	1.000	.148*
	Sig. (2-tailed)	.	.019
	N	271	253
Q22 My mental disorder was treated in a mental health center	Pearson Correlation	.148*	1.000
	Sig. (2-tailed)	.019	.
	N	253	254

*. Correlation is significant at the 0.05 level (2-tailed).

Table 22 indicates the relationship between recidivism and treatment of mental health disorder in a Mental Health Center (Outpatient Therapy). For a 2-tailed Pearson correlation coefficient, the relationship between the recidivism and treatment of mental disorder in a mental health center was significant at the 0.05 level.

Table 23

Recidivism and Use of Illegal Drugs

Correlations

		Q30 I have been incarcerated	Q23 My mental disorder was induced by my use of illegal drugs
Q30 I have been incarcerated	Pearson Correlation	1.000	.172**
	Sig. (2-tailed)	.	.007
	N	262	248
Q23 My mental disorder was induced by my use of illegal drugs	Pearson Correlation	.172**	1.000
	Sig. (2-tailed)	.005	.
	N	248	255

*. Correlation is significant at the 0.01 level (2-tailed).

Table 23 indicates the relationship and the use of illegal drugs. For a 2-tailed Pearson correlation coefficient, the relationship between recidivism and the use of illegal drugs was significant at the 0.01 level.

CHAPTER V

CONCLUSIONS AND RECOMMENDATIONS

The study was designed to answer the question: what is the relationship between unemployment, family support, mental disorder and the recidivism of female prisoners in a Georgia State Prison? In particular, is there a significant relationship between recidivism of these prisoners and the three variables?

In Chapter IV, the results of the survey conducted to collect data that would help the researcher to answer the question, were presented, analyzed and summarized. The presentation included demographic data and other information, pertinent to the research questions and the relevant hypotheses, based on a simple random sample of 272 cases.

In Chapter V, the conclusions and recommendations are discussed. Recommendations are proposed for further research and future discussions for policy makers, researchers, social workers, practitioners and administrators.

To place the findings, discussions, conclusions and recommendations in context, the researcher presents a few facts in the history of the 220-year-old institution which today we call "prison." Table 1 in Chapter II on the stages of prison development presents the visions, goals and characteristics for each of the nine commonly recognized eras in the evolution of prisons in the criminal justice system of the nation. The information is based on Schmallegger (1995).

From the table, we see that like the proverbial cat, prisons have had nine lives. The key lesson here is that for better or for worse, goals, visions and characteristics of the previous eras continue to influence the issues, problems and proposed solutions of today. Next follows the discussion of the findings on the three research questions.

Research Question 1: Is there a significant relationship between recidivism and unemployment?

Three key issues of unemployment were examined: Occupational skills (with educational level and income as their cause and effect), the length of employment and lack of work. The relationship between recidivism and occupational skills was not significant. The conclusion seems reasonable. After all, just because a person has few or no occupational skills does not necessarily make the person a recidivist or even a convict.

However, occupational skills and unemployment are intrinsically related. The latter is significantly related to recidivism as the discussion below will indicate. Low educational levels and little or no occupational skills are generally associated as cause and effect. In the study, 72% of the prisoners had completed high school. On the other hand, college graduates formed only 4% of the group. Again, occupational skills and income can be treated as strong positive correlates. Generally, the stronger and better the occupational skills, the higher the income level. More than 50% of the prisoners earned less than \$20,000.00 annually.

Recidivism and length of employment were significantly related. This is an important finding. Sixty percent were recidivists and more than fifty percent never held a job for more than two years. Prior to incarceration, 45% did not have a steady job, and

30% could not find a job for six months. In the light of these facts, it seems that recidivism and unemployment were mutually enforcing each other.

The third aspect of unemployment that was examined was lack of work, the experience of unemployment itself. How do the experience and reality of unemployment relate to recidivism? Lack of work can easily translate into some or all of the following situations: frustration and depression in various degrees, inability to provide basic needs for self and the family, abandonment of basic responsibilities and more.

The next step from these is not necessarily a life of crime. But it is reasonable to conclude that in some circumstances, out of desperation, lack of work does make the temptation to commit crime stronger and indeed facilitate their commission. In the study, recidivism and lack of work were significantly related and very strong correlates.

Overall then, the relationship between recidivism and unemployment was statistically significant. It is a relationship that needs to be further explored if the problem of recidivism is to be understood and contained.

Research Question 2: Is there a significant relationship between family support and the recidivism of female prisoners in a Georgia Prison?

The research focused on four aspects of family support: marital status, family visitations, gifts of money-packages by family members and the family as a place of safety and security. Family support assumes that there is a family, sufficiently healthy, generous and strong enough to support an inmate. That is, the family is the foundation of that support.

In the study, marital status was not significantly related to recidivism (Table 16). That was not surprising since marital status has not necessarily been connected with recidivism. But that does not imply that marital status cannot play a crucial role in recidivism. The data revealed facts which can be detrimental to the ideal family support. For example, 37% of the prisoners in the study had never married and about 80%, that is 4 in 5, reported they did not have a traditional nuclear family: husband, wife and children living together as a family. Only about 20% were married and about the same proportion were divorced. The data strongly suggests that, based on the marital status of the participants in the study, the families were dysfunctional and hardly in a position to support the prisoners.

A second aspect of family support was visitation from the family members. It has a crucial role in establishing and maintaining the bond between the prisoner and his/her roots. Already imprisonment means the person is an outcast from society. The lack of visits from family will only worsen the situation and encourage the prisoner to want to return to prison since no one wants them. In the study, 30% reported that they never had a visit from the family. Sixty-five percent did not have frequent visits. Table 3 shows that there is a strong significant relationship between recidivism and family visits.

The third aspect of family support was gifts of money and packages from family. The so-called in prison, "poverty," the deprivation of basic needs and wants, can lead to a harrowing experience and may hold the key to survival. The constant flow of gifts of money and packages from family members guarantees that inmates do not fall into "the poor class." More importantly, these gifts establish and maintain the often fragile link between prisoners and their social roots. In the study, 21% reported that "in prison, my

family never sends me money-packages.” The relationship between recidivism and gifts of money and packages from family was significant.

The last aspect to be considered was what the prisoners believed to be the “place of safety and security.” This indirectly refers to the family. Prisons are often portrayed as places of incessant violence, and families as the bastion of safety and security. But to the question: Compared to the outside world in general and to the family in particular, how do you rate the prison as a safe and secure place? The results from the study seems to contradict the general perception. The study found the relationship between prison as a safe and secure place and recidivism to be significant. This seems to suggest that the prison is safer than the family. It is reasonable to conclude that released prisoners who feel unwelcome, for whatever reason, may want to return to prison. Unfortunately, they know how to facilitate their return.

Research Question 3: Is there a significant relationship between mental disorder and the recidivism of female prisoners in a Georgia Prison?

The research examined six issues about mental disorder: psychotropic drugs, pre-incarceration mental disorder, treatment for mental disorder at hospitals, treatment of mental disorder at mental health center clinics, the use of illegal drugs and the experience of mental disorder. Of those six, only one, the use of psychotropic drugs, was found to be not significantly related to recidivism. The other five were strong correlates of recidivism. The study also found that over half (51.3%) of the prisoners were diagnosed with some form of mental disorder before incarceration. About the same proportion

received treatment while they were in prison. Obviously, mental disorder is not an isolated condition among the inmates.

What is mental disorder? Mental disorder is the general term used for various psychological conditions. The most common of these are clinical depression, mood disorder, mental retardation, dissociative disorder, substance related disorders, post-traumatic stress syndrome, manic depressive disorder and schizophrenia. A person may have one or a combination of some of these. Generally, the determination of a person's level of psychological functioning is based on the score on the Global Assessment of Functioning Scale (GAF), which is administered during intake.

To address the conditions determined by GAF, the institution has initiated a number of individual and group programs. These include counseling services, individual and group therapies, administration of psychotropic medications and specialized services by licensed psychologists and psychiatrists.

Each inmate diagnosed with any of these conditions has a treatment plan which is a written statement of the client's symptoms, problems, goals and projected outcomes, used to guide intervention and to provide accountability for clinical activity. A treatment plan addresses specifically the "presenting problems," the symptoms, treatment goals and the objectives of intervention. The ultimate goal is the future rehabilitation of inmates. This approach would go a long way to address the problem of recidivism, unless, as often happens, the institution may have concerns and priorities other than rehabilitation. However, to be an effective tool in eliminating or reducing recidivism, a treatment plan should be comprehensive, and its implementation thorough.

Table 24 summarizes the axes in comprehensive mental health care, as described in DSM IV.

Table 24

Axes in Comprehensive Mental Care

<i>AXES</i>	<i>CONTENTS</i>
AXIS I	CLINICAL DISORDER - all the various disorders or conditions in the classification except what is reported on Axis II.
AXIS II	PERSONALITY DISORDER/MENTAL RETARDATION - prominent maladaptive personality features and defense mechanisms.
AXIS III	GENERAL MEDICAL CONDITION - general medical conditions that are potentially relevant to the understanding or management of the individual's mental disorder.
AXIS IV	PSYCHOSOCIAL/ENVIRONMENTAL PROBLEMS - psychosocial and environmental problems that may affect the diagnosis, treatment, and prognosis of mental disorders.
AXIS V	REPORT OF OVERALL LEVEL OF FUNCTIONING (GAF Score) - clinician's judgment of the individual's overall level of functioning.

Current counseling practice at some institutions concentrates on Axis I and II and to some extent Axis III. The issues related to Axis IV and V are completely left out. And yet, 95% of the prisoners have Axis IV diagnosis. Axis IV issues, when left untreated, lead to serious mental health issues, among other things. In a situation like that, the counseling can hardly be described as comprehensive and effective. It could create thriving conditions for recidivism.

The study found that recidivism and mental disorder were significantly and highly correlated. A deeper analysis and applications of Axis V factors should reveal that some

prisoners do not belong in prison but in a mental treatment facility. The removal of seriously mentally ill prisoners should have an important beneficial impact on recidivism.

Conclusions

The brief history of the development of prisons has shown that recidivism has been a problem from the beginning of prison as an institution. This study has confirmed that it is still a problem, indeed a growing problem. The study has also identified three strong correlates of recidivism, namely unemployment, family support and mental disorder.

As a result of the findings of this study, the researcher is recommending the following:

1. Research, especially by social workers, should seek to identify other correlates;
2. Prison administrators should add social workers as a team to the relevant departments to develop and implement comprehensive treatment plans;
3. Effective programs should be developed to re-establish or strengthen the relationship between prisoners and their families;
4. Increase the opportunity for education and job training for all prisoners, and mandate that all capable prisoners obtain a high school diploma/GED before release;
5. All ex-offender recipients of SSI should have payees for at least one year;
6. Re-entry programs, now based in prisons, should be extended to the community;

7. Severely mentally ill offenders belong in psychiatric hospitals, not prisons;
8. Offenders with serious substance abuse problems belong, at least in part, in effective drug treatment programs, and not in prisons; and
9. Prospective employers of ex-offenders should not focus exclusively on the criminal background of the applicants.

APPENDICES

APPENDIX A

Memorandum to Dr. DeGroot

MEMORANDUM

DATE: August 26, 2005
TO: Dr. James DeGroot, MH/MR
FROM: Esther Edet, Senior MH/MR Counselor
THRU: Johannes Causey, MH/MR Unit Manager
RE: Permission to Distribute Questionnaires to Inmates

I am a doctoral candidate at Clark Atlanta University. For my thesis, I have chosen to study factors that contribute to the high recidivism rate of inmates in Georgia. As part of this research, I need to distribute questionnaires to inmates who have previous incarcerations. The questionnaire is designed to facilitate the study of the correlates of the recidivism rate.

Recidivism exacts a high economic and human cost from the prison system, the state, and society in general. The study will investigate how to eliminate or reduce this high cost and how the factors that contributes to recidivism must be understood. To this end, the study will explore the correlates of recidivism among prisoners in Georgia.

The questionnaire will include information from the following areas of the inmates' lives:

- Quality of their family relationships
- Involvement in religious activities before incarceration
- Physical, mental, and emotional abuse from spouses and other family members
- Employment history
- Educational level
- Types of crimes for which they were convicted

Identifying information will not be collected, to ensure the privacy of each inmate who agrees to participate in this survey.

This research will be used for academic purposes. A larger purpose is to improve and enlighten social workers and other human services providers on how the inmates can be helped when they are released from prison. The findings should assist the providers with the knowledge base to improve the quality of services in the community. The ultimate goal is the reduction of the recidivism rate of released inmates in Georgia.

I am requesting permission to distribute this questionnaire to the inmates.

APPENDIX B

Memo to Warden Williams

Date: October 26, 2005

To: Warden Williams

From: E. Edet, Sr. MH Counselor
J. Jackson, Psy.D., Clinical Disorder

RE: Research Data

Ms. Edet is currently working on a doctoral degree in Social Work. She is in the final stages of her education and is preparing to write her dissertation. Her topic is related to factors that lead to recidivism. She has received approval from Dr. DeGroot to conduct the research. However, Dr. DeGroot stated that the officials he spoke to would only approve the research if the data collection did not interfere with the daily operations at Metro.

We are writing to request your approval and permission to conduct the data collection. We can assure you that collecting the data will not interfere with the daily operations. Ms. Edet is willing to be responsible for distributing questionnaires to inmates after her normal work hours, and during the evening when most inmates are off their details and are engaging in personal time on the range. This is voluntary on the inmates' part, and they will be told that they do not have to complete the surveys if they do not want to complete them. The questionnaires will not ask for any identifying information.

Ms. Edet is available to talk to you if you have any questions or would like additional information.

cc: H. Brooks, Deputy Warden, Security
V. Malone, Deputy Warden, Care & Treatment
J. Causey, MH/MR Unit Manager

APPENDIX C

Informed Consent

The Relationship of Unemployment, Family Support, and Mental Disorder on Recidivism of the Incarcerated Female in a Georgia State Prison.

PRINCIPAL INVESTIGATOR: Esther Edet

INTRODUCTION: You are invited to participate in a research study on the causes of recidivism by female inmates. Your participation is voluntary. In this study, you will be asked to complete a 15-20 minute questionnaire about female offenders. To participate, you must be 18 years of age or older. A total of 250 questionnaires will be completed and reviewed.

PROCEDURES: You will fill out a brief questionnaire that consists of 46 items. The questionnaire is straightforward and very easy to complete. It should take no longer than 20 minutes to complete. You can choose to complete the questionnaire by yourself, or a member of the research team may read the questions to you and record your responses. This research is being conducted only at Metro State Prison.

RISK: There is no risk in participating. However, if any of the questions bring back bad memories and you need to talk to a Mental Health professional, please contact your building officer for a mental health referral or speak with your counselor. Mental Health services are free.

BENEFITS: Your participation in this survey will help identify those factors that cause recidivism among women. It will also help society to find solutions in reducing the number of females who re-offend.

VOLUNTARY PARTICIPATION AND WITHDRAWAL: Participation in this research study is strictly voluntary. You can refuse to participate without penalty. You may choose to answer all the questions or stop at any time without penalty.

CONFIDENTIALITY: All information you provide will be kept confidential to the extent permitted by law. All information will be destroyed at the end of this research project. Please do not give your name and state identification numbers on the questionnaire answer sheet. Information obtained from you will not be shared with anyone outside this research project in any manner that identifies you.

CONTACT PERSON: If you have any further questions about your rights as a participant in this research study, you may contact Counselor Edet through your counselor or by writing to Counselor Edet.

APPENDIX D

Informed Consent to Participate in Research Study

The Relationship of Unemployment, Family Support, and Mental Disorder on
Recidivism of the Incarcerated Female in a Georgia State Prison

I understand that this survey is to help identify factors that affect recidivism among female offenders. Information gained from it will be kept confidential and used for the development of resources in reducing the reoccurrence of female offenses against the law.

This is to certify that I, _____ GDC # _____,
freely agree to participate in this study.

Signed by: _____ Dated: _____

APPENDIX E (continued)

7. I belong to one of the following organized religions: 1) _____ Judaism
2) _____ Christianity 3) _____ Islam 4) _____ Hinduism
5) _____ Atheism 6) _____ Other (specify) _____
8. I am an active, practicing member of my religious group: 1) _____ None of the time
2) _____ Some of the time 3) _____ Most of the time
4) _____ All of the time
9. I have been incarcerated: 1) _____ Only Once 2) _____ 1 – 2 times
3) _____ 3 – 4 times 4) _____ 5 – 6 times 5) _____ More than 6 times
10. The longest period I ever held a job: 1) _____ 0-6 months 2) _____ 7-12 Months
3) _____ 1-2 Years 4) _____ 3-5 Years 5) _____ More than 5 Years
6) _____ Never employed
11. My occupational skills: 1) _____ Writing 2) _____ Technical
3) _____ Clerical 4) _____ Cosmetology
5) _____ Cashier 6) _____ Other (please specify) _____

Section II: How much do you agree or disagree with the following statements

Write the appropriate number (1 thru 4) in the blank space beside each statement on the questionnaire

1 = Strongly Disagree 2 = Disagree 3 = Agree 4 = Strongly Agree

Family Support

-
- _____ 12. In prison, my family member(s) visit me all the time
- _____ 13. In prison, my family member(s) visit me frequently
- _____ 14. In prison, my family member(s) visit me occasionally
- _____ 15. In prison, my family member(s) never visit me.
- _____ 16. In prison, my family member(s) send me money/packages.
- _____ 17. In prison, my family member(s) never send me money/packages

APPENDIX E (continued)

Mental Health

-
- _____ 18. I was treated for a mental disorder before I came to prison.
- _____ 19. I was treated for a mental disorder while in prison
- _____ 20. My mental disorder was treated in the hospital
- _____ 21. My mental disorder was treated in a mental health center
- _____ 22. My mental disorder did not require psychotropic medications
- _____ 23. My mental disorder was induced by my use of illegal drugs

Unemployment

-
- _____ 24. Before my incarceration, I had been employed in a study job.
- _____ 25. Prior to this incarceration, I spent at least six months trying to find a job.
- _____ 26. I quit my job because it was too stressful.
- _____ 27. I quit my job because the pay was too low.
- _____ 28. I have job skills, however I could not find a job.
- _____ 29. I could not find a job because I did not have work experience.

Section III: Criminal History

This set of questions deals with your criminal history.

Place a mark (x) next to the appropriate item. Choose only one answer for each question.

30. I have been incarcerated: 1) _____ Once (1) 2) _____ 2-3 times
3) _____ 4-5 times 4) _____ More than 5 times
31. My parole condition included monthly drug screening 1) _____ No 2) _____ Yes
32. My parole condition included confinement to a judicial district:
1) _____ No 2) _____ Yes

APPENDIX E (continued)

33. My parole condition included electronic monitor: 1) _____ No 2) _____ Yes
34. My parole condition included reporting monthly to a probation officer:
1) _____ No 2) _____ Yes
35. My parole condition included reporting monthly to a parole officer:
1) _____ No 2) _____ Yes
36. My parole condition required community service: 1) _____ No 2) _____ Yes
37. My parole condition required attendance to Narcotic Anonymous:
1) _____ No 2) _____ Yes
38. My parole condition required attendance to Alcohol Anonymous:
1) _____ No 2) _____ Yes
39. While in prison I developed a special bond with other inmates:
1) _____ No 2) _____ Yes
40. Lack of work contributed to my return to prison: 1) _____ No 2) _____ Yes
41. Lack of housing contributed to my return to prison: 1) _____ No 2) _____ Yes
42. I returned to prison because of a violation of my parole:
1) _____ No 2) _____ Yes
43. I returned to prison because of a violation of my probation:
1) _____ No 2) _____ Yes
44. I returned to prison because I was convicted of committing a crime:
1) _____ No 2) _____ Yes
45. I was returned to prison because of a pending charge: 1) _____ No 2) _____ Yes
46. I returned to prison because it is a safe place for me: 1) _____ No 2) _____ Yes

*Thank you very much for your cooperation
Esther Edet, 2006*

APPENDIX F

SPSS Program Analysis

TITLE 'STUDY OF RECIDIVISM OF FEMALE INMATES IN A GEORGIA PRISON'.
SUBTITLE' ESTHER EDET - PhD PROGRAM CAU SCHOOL OF SOCIAL WORK'.

DATA LIST FIXED/

ID	1-3
GENDER	4
AGEGRP	5
ETHNIC	6
EDUC	7
INCOME	8
MARITAL	9
RELIGON	10
MEMBER	11
INCARC	12
PERIOD	13
SKILLS	14
FAM12	15
FAM13	16
FAM14	17
FAM15	18
FAM16	19
FAM17	20
MENT18	21
MENT19	22
MENT20	23
MENT21	24
MENT22	25
MENT23	26
EMPL24	27
EMPL25	28
EMPL26	29
EMPL27	30
EMPL28	31
EMPL29	32
CRIM30	33
CRIM31	34
CRIM32	35
CRIM33	36
CRIM34	37
CRIM35	38
CRIM36	39
CRIM37	40
CRIM38	41

APPENDIX F (continued)

CRIM39	42
CRIM40	43
CRIM41	44
CRIM42	45
CRIM43	46
CRIM44	47
CRIM45	48
CRIM46	49.

VARIABLE LABELS

ID	'Case Number'
GENDER	'Q1 Gender'
AGEGRP	'Q2 Age Group'
ETHNIC	'Q3 Ethnicity'
EDUC	'Q4 Highest Education'
INCOME	'Q5 Annual Income'
MARITAL	'Q6 Marital Status'
RELIGON	'Q7 I belong to one of the following organized religions'
MEMBER	'Q8 I am a practicing member of my religious group'
INCARC	'Q9 I have been incarcerated'
PERIOD	'Q10 The longest period I ever held a job'
SKILLS	'Q11 My occupational skills'
FAM12	'Q12 In prison my family members visit me all the time'
FAM13	'Q13 In prison my family members visit me frequently'
FAM14	'Q14 In prison my family members visit me occasionally'
FAM15	'Q15 In prison my family members never visit me'
FAM16	'Q16 In prison my family members send me money-packages'
FAM17	'Q17 In prison my family members never send me money-packages'
MENT18	'Q18 I was treated for a mental disorder before I came to prison'
MENT19	'Q19 I was treated for a mental disorder while in prison'
MENT20	'Q20 My mental disorder was treated in the hospital'
MENT21	'Q21 My mental disorder was treated in a mental health center'
MENT22	'Q22 My mental disorder did not require psychotropic medications'
MENT23	'Q23 My mental disorder was induced by my use of illegal drugs'
EMPL24	'Q24 Before my incarceration I had been employed in a steady job'
EMPL25	'Q25 Prior to this incarceration I spent about six months trying to find a job'
EMPL26	'Q26 I quit my job because it was too stressful'
EMPL27	'Q27 I quit my job because the pay was too low'
EMPL28	'Q28 I have job skills however I could not find a job'
EMPL29	'Q29 I could not find a job because I did not have work experience'
CRIM30	'Q30 I have been incarcerated'
CRIM31	'Q31 My parole condition included monthly drug screening'
CRIM32	'Q32 My parole condition included confinement to a judicial district'

APPENDIX F (continued)

CRIM33 'Q33 My parole condition included electronic monitor'
 CRIM34 'Q34 My parole condition included reporting monthly to a
 probation officer'
 CRIM35 'Q35 My parole condition included reporting monthly to a
 parole officer'
 CRIM36 'Q36 My parole condition required community service'
 CRIM37 'Q37 My parole condition required attendance to Narcotic
 Anonymous'
 CRIM38 'Q38 My parole condition required attendance to Alcohol
 Anonymous'
 CRIM39 'Q39 While in prison I developed a special bond with other
 inmates'
 CRIM40 'Q40 Lack of work contributed to my return to prison'
 CRIM41 'Q41 Lack of housing contributed to my return to prison'
 CRIM42 'Q42 I returned to prison because of a violation of my
 parole'
 CRIM43 'Q43 I returned to prison because of a violation of my
 probation'
 CRIM44 'Q44 I returned to prison because I was convicted of
 committing a crime'
 CRIM45 'Q45 I was returned to prison because of a pending charge'
 CRIM46 'Q46 I returned to prison because it is a safe place for
 me'.

VALUE LABELS

GENDER

- 1 'Male'
- 2 'Female'/'

AGEGRP

- 1 'Under 30'
- 2 '30-39'
- 3 '40-49'
- 4 '50-59'
- 5 '60 up'/'

ETHNIC

- 1 'AfricanAmer'
- 2 'Caucasian'
- 3 'Hispanic'
- 4 'Asian'
- 5 'NativeAmer'
- 6 'Other'/'

EDUC

- 1 'Under 9yrs'
- 2 '1-3yr HiSchool'
- 3 'HiSchool Grad'
- 4 'Tech School'
- 5 'Some College'
- 6 'College Grad'/'

APPENDIX F (continued)

INCOME

- 1 'Under \$20,000'
- 2 '\$20,000-24,999'
- 3 '\$25,000-29,999'
- 4 '\$30,000-34,999'
- 5 '\$35,000-49,999'
- 6 '\$50,000 up'/'

MARITAL

- 1 'Never married'
- 2 'Married'
- 3 'Divorced'
- 4 'Widow'
- 5 'Separated'/'

RELIGION

- 1 'Judaism'
- 2 'Christian'
- 3 'Islam'
- 4 'Hinduism'
- 5 'Atheism'
- 6 'Other'/'

MEMBER

- 1 'None of the time'
- 2 'Some of the time'
- 3 'Most of the time'
- 4 'All of the time'/'

INCARC

- 1 'Only once'
- 2 '1-2 times'
- 3 '3-4 times'
- 4 '5-6 times'
- 5 'More than 6 times'/'

PERIOD

- 1 '0-6 months'
- 2 '7-12 months'
- 3 '1-2 years'
- 4 '3-5 years'
- 5 'More than 5yrs'
- 6 'Never employed'/'

SKILLS

- 1 'Writing'
- 2 'Technical'
- 3 'Clerical'
- 4 'Cosmetology'
- 5 'Cashier'
- 6 'Other'/'

FAM12

- 1 'Strongly Disagree'
- 2 'Disagree'
- 3 'Agree'
- 4 'Strongly Agree'/'

APPENDIX F (continued)

FAM13
1 'Strongly Disagree'
2 'Disagree'
3 'Agree'
4 'Strongly Agree'/'

FAM14
1 'Strongly Disagree'
2 'Disagree'
3 'Agree'
4 'Strongly Agree'/'

FAM15
1 'Strongly Disagree'
2 'Disagree'
3 'Agree'
4 'Strongly Agree'/'

FAM16
1 'Strongly Disagree'
2 'Disagree'
3 'Agree'
4 'Strongly Agree'/'

FAM17
1 'Strongly Disagree'
2 'Disagree'
3 'Agree'
4 'Strongly Agree'/'

MENT18
1 'Strongly Disagree'
2 'Disagree'
3 'Agree'
4 'Strongly Agree'/'

MENT19
1 'Strongly Disagree'
2 'Disagree'
3 'Agree'
4 'Strongly Agree'/'

MENT20
1 'Strongly Disagree'
2 'Disagree'
3 'Agree'
4 'Strongly Agree'/'

MENT21
1 'Strongly Disagree'
2 'Disagree'
3 'Agree'
4 'Strongly Agree'/'

MENT22
1 'Strongly Disagree'
2 'Disagree'
3 'Agree'
4 'Strongly Agree'/'

APPENDIX F (continued)

MENT23
1 'Strongly Disagree'
2 'Disagree'
3 'Agree'
4 'Strongly Agree'/'

EMPL24
1 'Strongly Disagree'
2 'Disagree'
3 'Agree'
4 'Strongly Agree'/'

EMPL25
1 'Strongly Disagree'
2 'Disagree'
3 'Agree'
4 'Strongly Agree'/'

EMPL26
1 'Strongly Disagree'
2 'Disagree'
3 'Agree'
4 'Strongly Agree'/'

EMPL27
1 'Strongly Disagree'
2 'Disagree'
3 'Agree'
4 'Strongly Agree'/'

EMPL28
1 'Strongly Disagree'
2 'Disagree'
3 'Agree'
4 'Strongly Agree'/'

EMPL29
1 'Strongly Disagree'
2 'Disagree'
3 'Agree'
4 'Strongly Agree'/'

CRIM30
1 'Once'
2 '2-3 times'
3 '4-5 times'
4 'More than 5 times'/'

CRIM31
1 'No'
2 'Yes'/'

CRIM32
1 'No'
2 'Yes'/'

CRIM33
1 'No'
2 'Yes'/'

CRIM34
1 'No'
2 'Yes'/'

APPENDIX F (continued)

CRIM35
 1 'No'
 2 'Yes' /

CRIM36
 1 'No'
 2 'Yes' /

CRIM37
 1 'No'
 2 'Yes' /

CRIM38
 1 'No'
 2 'Yes' /

CRIM39
 1 'No'
 2 'Yes' /

CRIM40
 1 'No'
 2 'Yes' /

CRIM41
 1 'No'
 2 'Yes' /

CRIM42
 1 'No'
 2 'Yes' /

CRIM43
 1 'No'
 2 'Yes' /

CRIM44
 1 'No'
 2 'Yes' /

CRIM45
 1 'No'
 2 'Yes' /

CRIM46
 1 'No'
 2 'Yes' /.

MISSING VALUES

GENDER AGEGRP ETHNIC EDUC INCOME MARITAL RELIGION MEMBER INCARC
 PERIOD SKILLS FAM12 FAM13 FAM14 FAM15 FAM16 FAM17 MENT18 MENT19
 MENT20 MENT21 MENT22 MENT23 EMPL24 EMPL25 EMPL26 EMPL27 EMPL28
 EMPL29 CRIM30 CRIM31 CRIM32 CRIM33 CRIM34 CRIM35 CRIM36 CRIM37
 CRIM38 CRIM39 CRIM40 CRIM41 CRIM42 CRIM43 CRIM44 CRIM45 CRIM46 (0).

BEGIN DATA

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APPENDIX F (continued)

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APPENDIX F (continued)

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APPENDIX F (continued)

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APPENDIX F (continued)

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APPENDIX F (continued)

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 RECODE MENT20 MENT21 MENT22 MENT23 EMPL24 EMPL25 EMPL26 EMPL27 EMPL28 (1
 THRU 2.99=2) (3 THRU 4.99=3).
 RECODE EMPL29 CRIM30 CRIM31 CRIM32 CRIM33 CRIM34 CRIM35 CRIM36 CRIM37 (1
 THRU 2.99=2) (3 THRU 4.99=3).
 RECODE CRIM38 CRIM39 CRIM40 CRIM41 CRIM42 CRIM43 CRIM44 CRIM45 CRIM46 (1
 THRU 2.99=2) (3 THRU 4.99=3).

FREQUENCIES

/VARIABLES GENDER AGEGRP ETHNIC EDUC INCOME MARITAL RELIGON MEMBER
 INCARC PERIOD SKILLS FAM12 FAM13 FAM14 FAM15 FAM16 FAM17 MENT18 MENT19
 MENT20 MENT21 MENT22 MENT23 EMPL24 EMPL25 EMPL26 EMPL27 EMPL28
 EMPL29 CRIM30 CRIM31 CRIM32 CRIM33 CRIM34 CRIM35 CRIM36 CRIM37
 CRIM38 CRIM39 CRIM40 CRIM41 CRIM42 CRIM43 CRIM44 CRIM45 CRIM46
 /STATISTICS =.

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