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# The Impact of Positionalities and Roles in the Lives of Incarcerated Women: Interviews with Women in a Gender-Responsive Program (GRP) in a Jail Setting

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The incarceration of women, particularly poor women of color has risen dramatically in the past 35 years (Belknap, 2007; Sentencing Project, 2016). Mandatory sentencing for low-level offenses, as well as systemic discrimination due to racism, sexism, and classism, mean that women's pathways to incarceration often begin in adolescence with lowlevel offenses such as truancy and running away from home (Chesney-Lind & Pasko, 2013). Often, these behaviors are a response to abuse from family members (Fuentes, 2014).

Women's pathways to incarceration often involve histories of victimization, including incest, rape, intimate partner abuse, and drug abuse and/or addiction (Chesney-Lind & Pasko, 2004). Gender Responsive Programming (GRP) addresses these unique needs (Van Voorhis, Braswell, & Lester, 2009). Research shows that participants in GRPs reduce their drug use over time (Messina, Grella, Carter, & Torres, 2010) and have lower rates of recidivism. Missing from this research is an analysis of the impact of positionalities such as race, class, gender, age, and roles (e.g., being a mother) on their experiences with GRP. Given the lack of attention to women's specific needs with consideration for the complexities of intersecting positionalities, the purpose of this study is to analyze the life histories of incarcerated and formerly incarcerated women and their experiences with a GRP while in jail. Specifically, we want to know: 1) How do women narrate their life histories related to various positionalities/roles? 2) How do various positionalities/roles? 3) How do various positionalities/roles impact how they experience a gender-responsive program in a county jail? 3) How do various positionalities/roles impact how they experience the criminal justice system?

# Literature review

n this section, we will review literature concerning gender responsive programming and individual and systemic factors that pave women's pathways to prison, how positionalities affect women's experiences, and how present roles (e.g. being a mother) can affect women's experiences (Markus & Nurius, 1986).

#### Gender responsive programming

Gender responsive programming (GRP) focuses on addressing issues that contribute to women's and girl's incarceration. The origins of GRP stem from a request from the California Office of Criminal Justice Planning to perform a needs assessment for "at-risk girls and young women" in the juvenile justice system (Bloom, Owen, Deschenes, & Rosenbaum, 2002, p. 527). Bloom et al. (2002) investigated literature concerning female delinquency trends in California, "reviewed federal and state policy initiatives," and examined "risk and resiliency factors" (p. 527). They surveyed state officials from agencies and interviewed those who worked with young women in detention, as well as the women themselves (Bloom et al., 2002). From this, they developed "recommendations for gender-specific programs" (p. 527). GRP is informed by factors affecting women's pathways to prison (e.g. life events, positionalities including race, class, and gender, marginalization in the family and school, and a life history of trauma), as well as relational theories, theories of women's development, and trauma theory (Bloom, Owen & Covington, 2003). Gender-responsive programming focuses on physical and emotional safety, building healthy relationships with family and friends, and increasing self-esteem (Day, Zahn, & Tichavesky, 2015).

Gender responsive programming that includes both trauma-informed treatment and drug/alcohol abuse treatment was found to be particularly effective, not only because most women who are incarcerated have experienced trauma, but also because alcohol and drugs are often used to cope with previous trauma (McCampbell, 2005). Researchers found that women who received trauma-informed treatment as part of a GRP that treated drug/alcohol abuse for women offenders were less likely to be diagnosed with Post Traumatic Stress Disorder (PTSD), and were less likely to re-experience the PTSD symptoms than women treated in a non-GRP group (Messina, Calhoun, & Braithwaite, 2014). The authors speculated that "understanding one's trauma and the impact on behavior and emotion regulation skills, may have been most beneficial for these specific symptoms" (p. 18). Another study showed that girls in juvenile detention who had histories of gender-sensitive risk factors such as trauma, depression/anxiety, alcohol and drug use, and anger benefited more from GRP than girls without these risk factors (Day et. al., 2015).

#### Women's pathways to incarceration: The role of trauma

As previously mentioned, histories of trauma pave women's pathways to incarceration. Women commonly report interpersonal violence in childhood, including abuse from "family members, mother's intimate partner(s) and legal guardians such as foster parents and godparents" (Fuentes, 2014, p. 92). They also experience childhood neglect in the form of inadequate health care, older children caring for younger siblings without supervision, and children receiving inadequate emotional support (Fuentes, 2014).

These traumatic events engender hopelessness and rejection in girls and women, and they seek to fill the void left by a lack of love and acceptance (Fuentes, 2014). In the absence of more

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positive ways to cope with trauma, such as talking with family and friends or seeking counseling, many women turn to drugs and alcohol to numb the pain, stay in abusive relationships, and commit crimes for their partners (Fuentes, 2014). Additionally, childhood trauma contributes to poorer mental and physical health for women in their adult lives as they cope with diseases such as Hepatitis C, depression, post-traumatic stress disorder, and bipolar disorder (Fuentes, 2014).

# The role of race, class and gender on women's pathways to incarceration

Not only do individual experiences of trauma impact women's pathways to prison but societal double standards for girls' and boys' behavior mean that girls enter the prison pipelines for less serious offenses (Chesney-Lind & Pasko, 2013). Girls are remanded to juvenile detention centers for violating the "good girl" image as they are more likely than boys to be charged with curfew violations, being truant, or having alcohol (Sherman, 2012). Girls are also more likely to be incarcerated for running away from home even though this may be an attempt to avoid sexual exploitation (Chesney-Lind & Pasko, 2013).

Poor girls and women of color are more likely to enter the pathway to prison than wealthier individuals and Whites. Black and Latina girls who run away from home are more likely to be charged with delinquency than White girls (Lipsitz, 2012). This theme of being "over policed and under protected" (Crenshaw, 2012, p. 1442) continues into adulthood. For example, the Violence Against Women Act (VAWA) specifies that mandatory arrests must be made in cases of domestic violence which means that women who are victims of domestic violence are now arrested and women's acts of self-defense are now seen as "overly aggressive" (Crenshaw, 2012, p. 1455). Women of color have been most affected by these mandatory arrest policies due to racist stereotypes (Crenshaw, 2012). Black women are almost seven times more likely than Whites to be incarcerated and "Latinas are 2.5 times more likely than white women" to be incarcerated (Crenshaw, 2012, p. 1437). In sum, poor women of color face "discriminatory policing, prosecuting, and sentencing practices" (Lipsitz, 2012, p. 1748).

Instead of addressing systemic discrimination, the predominant White narrative blames Black mothers and absent fathers, rather than "economic inequality, housing segregation, and crumbling urban infrastructures" (Crenshaw, 2012, p. 1469). The focus is on individuals and communities rather than the larger societal structures that affect them (Crenshaw, 2012).

## Individual identities/roles and their place in those who are incarcerated

In addition to their positionalities, women may narrate their life histories by mentioning roles or identities (e.g. mother) that they consider important. Identity theorists posit that our self is composed of various roles whose importance depends on how often individuals enact that role (Stryker & Burke, 2000; Stryker & Serpe, 1994). For example, if a woman's mother identity is highly salient, she will enact that identity not only with their children but perhaps with others' children and outside the home. This woman may also possess a drummer identity, which may only be enacted when she plays the drums in the basement.

In addition to current roles, individuals may discuss and plan for future roles or possible selves. These are identities that individuals hope or expect to become or want to avoid (Markus & Nurius, 1986). Possible selves are constructed within a person's socio-historical context and are influenced by many factors including the media, peers, friends, and family, school and church (Clinkinbeard & Murray, 2012; Markus & Nurius, 1986). Possible selves exist as a connection between the present and future self and they are a way of focusing on a goal (Cross & Markus, 1994). For example, women who are incarcerated may hope or expect to become business owners or fear returning to the identity of homeless person. Expected selves are more realistic and are selves that individuals could become while hoped for selves are somewhat more aspirational and include what individuals "would like to become" but may not become (Oyserman, & Markus, 1990, p. 112).

Meek used the possible selves framework when they interviewed 34 young fathers (age 18-21) in the United Kingdom who were incarcerated at a Young Offender Institute in southern England to discern "if a parenting role was a central component of [their] identity" and if it was then "would they generate goals for the self relating explicitly to parenting rather than to, for instance, offending" (Meek, 2011, p. 943). Participants completed the Possible Selves Survey. Hoped for selves were employment and parenting related, feared selves included re-offending and expected selves related primarily to achievement (e.g. finding a job), relationships, and parenting (Meek, 2011). Hence, fatherhood was a main theme of possible future selves and potentially a replacement for the offender self (Meek, 2011).

#### Methodology

This study was part of a larger study on the life histories of women housed in a county jail that holds approximately 2300 inmates who participated in a gender responsive program named Resolana. The jail is located in the southwestern United States and Resolana served approximately 60 women who were jailed in a dedicated medium security "pod," which is one section of the jail. With a goal of understanding the women's lives within the context of their cultural and historical positions, a feminist qualitative methodology was chosen. Qualitative research focuses on how individuals understand their lives (Merriam, 2009) and life history research has the potential to shed light on individual and collective experiences within social contexts (Cole & Knowles, 2001). Additionally, life history interviews combined well with a feminist methodology in the data collection in that it created space for untold stories (Romero & Stewart, 1999).

#### Data gathering and analysis

At the time of data collection, the research participants were involved in or had been involved in Resolana, a non-profit community based program. With five part-time staff and approximately 120 volunteers (30 who contributed on a regular basis), the program offered women holistic programming that integrated cognitive, creative, therapeutic, somatic, and practical learning opportunities. For example, a drama class helped women tell their stories and hear others' stories. A dance class led to self-discovery and connected women with their bodies. Courses in

writing, art, and music helped women access and express emotions, and the cognitive and behavioral courses promoted wellness, helped women heal from trauma and develop skills to handle anger, parent, and build good relationships with others. Women applied to participate in the program and once admitted, attended one to three class per day during the week. The reason for the difference in the number of attended classes is that the women had a choice whether or not to attend certain classes that were not relevant to their needs, such as incest recovery or Alcoholics Anonymous.

The second author and a co-investigator conducted semi-structured life history interviews with each participant. The interviews lasted between 45 minutes and a little over three hours, with the average interview lasting an hour and a half. Interviews were audiotaped and transcribed. "Qualitative researchers study things in their natural settings, attempting to make sense of, or interpret phenomena in terms of the meanings people bring to them" (Denzin & Lincoln, 2005, p. 3). To understand the "natural" setting of the jail and women's experiences while incarcerated, the second author also conducted field observations as a volunteer for Resolana for one week. The women ranged in age from 19-40 and represented a cross section of race and ethnicity. They self-identified as Black and Cherokee Indian (1), African American (1) Hispanic (2), Mexican (2), White (2), and Caucasian (2). The level of education ranged from 9<sup>th</sup> grade to some college. Two individuals were divorced, one was separated, two were in a relationship, and five were single.

The Institutional Review Boards at our institution and Hope House, (pseudonym), a residential drug rehabilitation center, approved the study. The director of educational programs at the jail and the director of Resolana granted permission to interview participants and observe Resolana classes. Current and past participants in Resolana were asked to participate in this study because an aspect of this research focused on examining transformative learning in a jail context. Resolana participants who were currently incarcerated completed a form indicating they were interested in being interviewed and were interviewed in the jail's education classroom. Hope House residents who were former Resolana participants indicated an interest with Resolana staff members and interviews were arranged at a private room in Hope House. Prior to the interview, informed consent was obtained. Participants were free to withdraw from the study at any time. Pseudonyms were assigned to participants and to Hope House to ensure anonymity. Resolana personnel encouraged the use of the real name of the program so others could benefit from their experiences.

To analyze the ten interviews, which were selected to obtain a cross-section of demographics as well as being representative of the larger group regarding histories of abuse and addiction, we used a constant comparative method of data analysis (Glaser & Strauss, 1967). We looked within and between interviews first completing open coding then common themes were grouped during the axial coding process (Glaser & Strauss, 1967). The themes were collapsed until clear categories emerged.

#### **Findings**

The findings were based on individual life history interviews. Issues of race, class, gender, age, and other positionalities were not explicitly named as being salient to the women's experiences. However, participants' life histories were threaded together with examples of the impact their social positions had on their lives and experiences with the criminal "justice" system. In the following section, each research question is followed by the themes that we uncovered.

#### Life histories and positionalities/roles

The first research question this study explored was how the women narrate their life histories related to various positionalities/roles. In the telling of their life histories, three major themes emerged: 1) Abuse and Trauma 2) Addiction, and 3) Mothering.

Abuse and trauma. As children, all but one of the women experienced abuse and trauma in the home. With the exception of Sydney who describes her childhood as "normal," all the women either began their life history with a story of being sexually abused as a child, or with a story of trauma. Six (Alma, Gabrielle, Karen, Mari, Danisha, and Shannon) of the 10 women were abused for the first time as children as young as four years old (Alma), and as old as 12 years old (Shannon). They were each abused by someone they knew—a cousin, a stepdad, a mother's boyfriend, and a brother. With the exception of Shannon who was almost a teenager at the time of the abuse, when the women told a family member of the abuse, they were initially either not believed, in denial, or were encouraged to keep it a secret. Mari commented specifically on the importance in her family of putting on a positive public appearance. She explained,

I was molested by my stepdad. Me and my older sister were. And I guess my mom kinda' turned a blind eye to it, you know. I don't know if she wasn't just sure of it, or I don't know, couldn't figure it out. But she just didn't want to pry into it. I guess she just didn't want to face what was going on. And um, it was kinda like in our culture, or at least in my family, you don't make escándalo (a scandal). You just keep everything hush-hush and make everything look perfect.

Other than the age of the women when they were first abused, there was nothing remarkably different about the women's backgrounds that could account for the reaction of family members when initially learning of the abuse. In Shannon's case, when she told her mom of the abuse, the police were called and the cousin who abused her went to jail.

Alexis' and Christy's early stories of trauma involved witnessing the physical and verbal abuse of a loved one. Alexis saw her father who was a functioning alcoholic choke her sister until she started convulsing. Christy began her life story by saying that she had a good mother, but her father had brain cancer. She said the cancer caused damage to his brain which negatively impacted his ability to control his anger. She believed this is what caused him to be physically abusive with her mother. As a child, Christy, her younger sister, and her mom would intermittently leave and return to her dad because of the physical abuse. In the same sentence that she said she had a good mother, Christy said, "My mother and father were into drugs my whole entire life. Methamphetamines. They made them, sold them, everything you can think of." Her parents were arrested when she was 14. She went to live with an aunt and her younger sister was put into the foster care system. At the end of the telling of her life history, Christy expressed disappointment in herself at not being able to save her mother and her sister from their own addictions and trauma.

Paula shared an early story of her mother's suicide. When Paula was eight years old, her mother shot herself in the head. This experience haunted her throughout her life. Paula said of mother:

She was the bravest woman yet the cowardest woman I knew. Know what I mean? The reason why she was brave is because who can put a gun to their head and pull the trigger? Takes a lot of heart. In order for her to do that, hey, I can say that's a courageous act. But yet she was a coward because she left eleven children in the world and, copped out.

Paula dated only women throughout her life and believes that she was always in search of a mother figure.

Addiction. Six of the women grew up in homes where drug and/or alcohol abuse was the norm. This abuse cut across positionalities of race and class. Despite being surrounded by drug and/or alcohol abuse, the women who were sexually abused directly connected their abuse to their initial entry into drug use and addiction. Alma who was sexually abused by her cousin between the ages of four and 10 years old, began using and dealing drugs at the age of 10 "to find a way out." She also began cutting herself at that age. Gabrielle drank alcohol for the first time after her father died when she was 15. Shortly thereafter, she was raped while on a date. She said her life changed after that and she began drinking, smoking weed, and popping pills. She was also introduced to heroin. While she initially did not like heroin, she kept doing it "to take my mind off of things." Karen who was abused by her brother from the ages of seven to 10 started running away from home, drinking, cutting herself, and doing anything she could to get her parents attention. While her parents kicked her brother out of the house, he was never charged with a crime, and Karen was sent to live with her grandmother. She attempted suicide for the first time by the age of 14. When her grandmother died, Karen's parents made her a ward of the state and she was in and out of mental institutions. By the age of 17, she was addicted to drugs and living on the streets. By the age of 11, Mari was in a gang, doing drugs, and was "out of control" by the age of 13. She was in and out of group homes and mental hospitals and her mom made her a ward of the state when she was 13. At the end her life history, Mari expressed little confidence in being able to be completely drug free. She admitted to using drugs to kill the pain of all that she had been through in her life. She said that for women who have "been scarred beyond repair, we're talking about brothers, fathers, molesting, just abuse. All kinds of ugly stuff. The closest thing that heals and brings comfort, like instantly, is a drug."

Sydney and Alexis were the only two whose initial entry into drug use was not triggered by a traumatizing event. Sydney began using drugs out boredom from being a mother and a wife. She married and had children at a young age expecting that to bring her happiness. She was introduced to heroin by a neighbor and quickly became addicted. Alexis began drinking and

using drugs in high school for fun. By the time she was in college, she was addicted. In her story, she associates drug use and dealing with living a fun, glamorous, and adventurous life. She was able to buy nice clothes, eat good food, and hang out with "cute men and just going to dance halls and just living the kind of stuff you see on TV and type of stuff." Sydney and Alexis both identified as middle class growing up and both had a difficult time accepting that they were like other women who were incarcerated for the same offences.

None of the women were able to afford private drug rehabilitation programs, and they all had participated in multiple programs. While some of the women were able to stay clean for a period of time, they all ultimately relapsed. Karen who said she has no support from anyone outside of jail talked about the challenge of making it in the "free world." She shared that she recently found out she is HIV positive and is having a really difficult time coping with that reality. She commented:

My coping skills with that is really, really low. And I don't have a problem with getting clean. I have a problem with staying clean. And, so you can send me to 20 treatment centers, and I can do really good. I have an NA [Narcotics Anonymous] logo. I know what you expect in lockup. Just like in jail, I can do really good in jail. It's once I get out in the free world, what do I do?

**Mothering.** A third common theme that emerged is the role of mothering. All the women in the study talked about their role as mothers or told stories of being mothers to other women's children, with the exception of the two youngest participants. Their stories were characterized with pain, regret, loss, and attempts to defend their actions that endangered or caused emotional harm to their children. When Karen left her husband, who was a heroin addict and an abuser, she took their two children with her. She found herself unable to provide for them and ended up on the streets in a large city. She described her life then as a "living hell."

I couldn't take care of them kids. I had them kids out here on these streets hustling with me and I thought I was doing the right thing. I thought I was a mom, ya know, I sold my ass, to get them kids...for 2 reasons, 'cause I had a hardcore habit and I couldn't...you couldn't convince me I wasn't a mom, cause I had them kids in a hotel room every night. But I had a habit, and I took care of them kids, but I was sellin' my ass every night for my habit, you know. But I was taking care of them kids too, ya know. And, at the time I was mad as hell that my kids got taken away. I'm grateful now. I'm a grateful mom now, but at the time, I was mad as hell that my kids got taken away, and I'm more okay with it now, because they are in a stable place.

Mari's life history is threaded together with stories of being a mother. She admitted to bringing her daughter up in a "drug environment" but said she kept her safe, and she had what she needed. When Child Protective Services (CPS) showed up to check on her daughter, she said she had nothing to hide. She explained:

I'm not like those persons using crack without changing their baby's Pampers, just leaving them crying. My refrigerator and her pantry was full of food. I had boxes of Pampers for her. She had clean clothes. If I'm not washing them I pay someone to wash for her, you

what I'm saying? I always maintain her basic needs and stuff. If I didn't give her too much attention the way I should've been, I maintained her basic needs. I did play with her at times in the mornings when everybody was gone before it would start getting busy in my apartment. We had those times. That time together to bond. But other than that I mean, I would always not bother her because- I would look into her and I would see her playing in her room and I was like, okay. I had the monitor, everything that money could buy to just keep an eye on her but I just wasn't interacting with her so I guess to some point I did neglect her in that, you know what I mean? 'Cause I was so- but it's just like any mother that works- a mother that works isn't gonna' be constantly with her daughter because she has to be working, that was my job too. Though I was using drugs, I did have that job to do anyways to maintain my bills. Maintain stuff for her. So I didn't have nothing to hide.

When her daughter was taken away from her, Mari got lost in the streets and coped by dealing and using drugs. Toward the end of telling her life history, she admitted for the first time that she was "not a mom" and that she carries a lot of guilt around that. Most of the women's children were taken away by CPS. Those who were not taken away were living with relatives or boyfriend's families. In all the cases, at the time of the interviews, the women no longer had relationships with their children.

## Positionalities/ Roles and GRP Programming

The second question this study explored is how various positionalities/roles impact how the participants experience a gender-responsive program in a county jail. Across positionalities, most women expressed deep appreciation for Resolana. They experienced a genuine sense of care and concern from the staff and volunteers who were mostly White, upper middle class, and formally educated women. They learned strategies such as anger management, communication skills necessary for building healthy relationships, and how to set personal boundaries to keep themselves safe. Finally, they noticed positive change within themselves and felt encouraged and hopeful for a different future. While all the women experienced the program as beneficial in several ways, the age of the women differently impacted their experience with 1) Building healthy relationships, and 2) Self-understanding.

**Building healthy relationships.** Building healthy relationships and offering support to one another is an important feature of Resolana. All the women in the study were negatively influenced and harmed by someone close to them. Thus, they learned that trusting others could lead to dangerous consequences. Building healthy relationships with others was not something they experienced in their lives and remaining guarded became a self-protection strategy. This was especially true for Alexis and Karen who were two of the oldest participants. Alexis said she shut down when she got in jail because she did not want the other women taking her kindness for weakness. She believed that others would take advantage of her and "stab me in the back" if she gave them anything. She continued:

So, my point is to just sit there, be to myself. I could care less if you think I'm stuck up or whatever, and just don't talk to me. And that's how I've become because that's the way

my life experience has taught me to become.

Despite this, she developed a few friendships with the women in the program and talked of plans to get together outside of jail.

When talking about her experiences with Resolana, Karen gave surface answers to any positive things she said about the program. The most genuine answer she gave related to how she felt about building relationships with the other women in the program. She shared,

It's not about Resolana, it's the people. It's the people in Resolana in the Pod because I don't feel comfortable opening up a lot of times, and the setting is not comfortable to me. There's some people I don't feel I can trust, and that's unfortunate. Like I'm opening up to you guys. I don't open up like that with people in the pod. There's a lot of people that don't know what you guys know about me, and that's unfortunate. I think that my story can help a lot of people, and they don't know about it and that's unfortunate.

The older women had longer histories of abuse and perhaps were more cautious about opening up because of their past experiences.

In contrast, the younger women talked about the communication skills they learned in Resolana and the benefits of opening up to others. Mari talked specifically about wanting to share the insights and skills she gained with others. She commented:

And I'm still losing friends to heroin. I had a friend that, her dad died on the day of her graduation, and she didn't make her graduation. And I'm like 'Man, that's hard.' And they really don't want their mom to be crying because they made that bad choice, and decided to use heroin instead of opening up and saying, 'Hey look this is what happened to me. I think I need to go to therapy, or I need to talk to you about something.' Just open up, it's not hard. Even if you think it's weak it's not weak. Because some of them are like, 'No, I don't want to seem weak' or 'I don't want to feel like a punk,' but it's not. I'd rather get some help. I'd rather look like a punk than do drugs and be dead.

Shannon also shared that she learned how to open up to others. She said, "I can speak how I feel now, you know, explain to somebody what I'm feeling, what I like, and what I don't like. Resolana really taught me that." She also commented that she can now have conversations with others "without being paranoid."

**Self-understanding.** All the women shared examples of gains in self-understanding through their participation in Resolana. The older women's responses, however, revealed greater depth of self-understanding, as well as recognition of the opportunities for and limitations of choices given their life circumstances. Paula, explained the connection she made to how her actions in jail would likely connect to her actions when she got out of jail:

Like in here, the closest thing to drugs is the medical cart. If you're gonna do drugs in here, you're gonna do drugs out there. That's just the way I believe. Everything that you do in here, is exactly how you're gonna perform out there, period. If you don't start to

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change your life in here, where you gonna' start to change your life? You're not going to.

Sydney recognized how her lack of emotional maturity and misperceptions impacted her choices throughout her life and sees herself moving in a positive direction. She explained: "I really don't understand why I was so—I keep saying this but—emotionally immature for so long. And probably still am, you know? But at least I've started moving up." When discussing the "tools" she gained from Resolana, Alexis shared that one was the knowledge of being an addict. She said, "Knowing for real that I'm a real addict without a shadow of a doubt. No, I can't experiment. No, I can't do that." Despite feeling supported and encouraged through participation in Resolana, both Karen and Mari, who have been in and out of jail and prison multiple times, expressed little hope for real change. Mari identifies as a "career criminal," and with no support outside of jail; Karen cannot imagine a better future. Both expressed a depth of understanding about the impact of their histories and their limited opportunities outside of jail and prison on their ability to make lasting changes in their lives.

The younger participants also shared examples of what they learned about themselves in Resolana. For example, Alma learned that she had a problem with managing her anger. Christy learned that she was likely suffering from Post-Traumatic Stress Disorder. Gabrielle realized that when she was in throes of her addiction, she pushed her family away. By learning more about themselves, the younger women expressed greater optimism, hope for the future, she articulated the wish for a hoped for self (Marcus & Nurius, 1986). Alma envisioned going back to school and becoming a licensed psychologist. She said,

Because I'm going to get my GED while I'm there [in the state penitentiary] So, I'll go to Remington College for cosmetology. Because my mom said she's going to open up a how, so I'm going to go work there for her. I'm going to move out of this city and go home with Gabrielle [another Resolana participant], because me and Gabrielle want to get out of this city.

Recognizing that she was a nicer and more compassionate person as a result of Resolana, Shannon wanted to reassert her role as a mother.

I can feel the actual change in me. I can feel me being more motivated more concerned about others and the way they are like. I didn't, I wouldn't care if somebody ran their hand into that wall and they're bleeding you know I'd probably laugh at them and now I'm like, oh my god you know, like I'm more sensitive to people you know... I have to get a job. Um, I'm going to be a great mother. . . um going to get my house back in order [and] keep all them dope heads away.

Given the older women's experiences with recidivism and continued experiences of abuse, trauma, and addiction, this finding is not surprising.

#### Positionalities/Identities and the Justice System

The final question this study explored is how various positionalities/roles impact how the women

experience the criminal justice system. Gender and age had the biggest impact on the women's experiences with the criminal justice system. Two major themes emerged: 1) Seeking Support, and 2) MisTreated.

**Seeking Support.** Despite experiencing a revolving door in and out of jails, prisons, and/or court-ordered rehabilitation programs, many of the women looked to the criminal justice system for support and sometimes safety. They had no other recourse or resources. Age played a role in the kind of support the women received. It appeared that older women were not helped as much as younger women. At the age of 40, Alexis was tired of the life she was living and longed to see her children who were living with their fathers. She was on probation and was lying to her probation officer. She knew she needed more than a 30-day drug treatment facility and worked to get arrested. After receiving mixed messages from her probation officer, her attorney, and the judge, she signed papers agreeing to the penalties of her arrest, thinking she was going to be immediately released to an extended rehabilitation program. Instead, she was required to spend four months in jail, or more, until an opening became available at a treatment center. Alexis stated, "I didn't know there was going to be any tricks going on, and I just started crying. I was like, 'I'm not here to go to jail. I'm here for treatment!'"

To escape the continued sexual abuse by her cousin, Alma, age 19 at the time of the interview, purposely got in trouble so that she would be sent to a juvenile detention center. She explained, "Because it was like the only way I could get away from him was being locked up. It was like the only safe place." When Alma and Mari talk about their early experiences with the criminal justice system, they mention case workers who had compassion for them. Mari told a story of a group rehabilitation home she lived at where she said she made great progress in working through her addiction and trauma. The program provided post-release support, including job training and placement support, continued education opportunities, and housing support until she turned 21. As adults, none of the women spoke of post-release support that was available to them.

Finally, Alma and Gabrielle, the two youngest participants were the only ones to identify their incarceration as "a blessing." When telling the story of her recent arrest, Alma describes the relief she felt after reflecting on the timing of the arrest:

But in a way, it is such a relief because me, going down the road I was going. And it is a dark, heavy road, the devil was really working on having his way with me, and he almost got it. . . And, when I was using heroin and I was snorting it and shooting it. . . And while I was shooting up I was crying to God 'Help me help me please help me.' And I just pulled it out of my arm and just broke down crying. And I kind of did that for like 2 weeks, and then a couple days later I was walking back to the house to go report to probation. And that's when I got stopped by the cops.

Her jail sentence led her to Resolana, which has helped her in ways other programs have not. When Gabrielle was arrested, she was snorting large amounts of heroin. Her boyfriend was also addicted to heroin and was abusing her. She admitted,

In my heart I really felt blessed when I got arrested. When I got in the cop car I even was

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talking to the cop because I was doing really bad. He [her boyfriend] was abusing me. I felt like I was gonna' die soon. ...I was doing really bad. ...I started losing everything. I never thought I would be addicted to a drug like that. That's not me.

Her arrest provided her with an opportunity to get help.

MisTreated. Except for Sydney, all the participants' problems with criminal activity and addiction began when they were children and were triggered by traumatic experiences. Their "treatment" from the criminal justice system ranged from being placed in foster care, juvenile detention centers, mental institutions, and in one rare case, an extended-stay, drug-treatment facility for adolescents and young adults. Mari and Karen were in and out of mental institutions before they were teenagers. Mari said she had "anger issues" when she was younger and when her mother was unable to control her, she would call the police. The police would say that they were unable to arrest her and would tell Mari's mom to send her to a psychiatric center. Rather than helping her, she saw the psychiatric centers as a no-consequence response to her behavior. She noted, "Then that started too with the psychiatric places, the institutions. Like I was very young and started being institutionalized. So, I would get out and do the same thing. I'd just do whatever the hell I wanted." Because Karen's parents gave her away, Karen felt unlovable. She said, "In my own mind my parents couldn't love me so no one else could either." Along with the lasting impact of the sexual abuse she suffered from at the hands of her brother, this caused her to act out. She was addicted to drugs and developed an eating disorder. She went from one mental institution and foster home to another-treatment that caused more damage.

Karen and Mari were diagnosed as bipolar, yet never mentioned getting proper treatment for it. Karen was also diagnosed as manic depressive with psychotic features and with personality disorder, a label she hates. Given that Karen has no support outside of jail, no money, no housing, no opportunities for living-wage employment, and no health insurance, once released from jail, she will likely go back to a life of living on the streets, prostitution, and addiction. Growing up, Alexis never considered she might have a mental disorder. She explained, "They always called me high strung. I don't even think they [her family] knew, you know what I mean? But no one else acted like this in my family but me. 'Oh Alexis, you're so high strung,' or 'you're a hotheaded,' or 'stop, settle down. You're so hyper.'" She was recently given a dual diagnosis of bipolar disorder and post-traumatic stress disorder. She is grateful for the diagnosis and hopeful that she will get the treatment she needs.

Both Mari and Shannon gave birth while in prison. Even though Shannon was incarcerated for a non-violent offense, she was shackled to the bed while giving birth and was not allowed to have any family members with her. She was given a C-section because she was not dilating. She said, "It sucked! ... Yeah, and you're shackled to the bed. I mean you can't get up to shower or anything. ...I mean, oh, the pain is excruciating! It is horrible!" While Shannon's case worker allowed Shannon to keep her baby with her until she was released from the jail hospital, Mari's baby was taken from her immediately after birth. The treatment of women who give birth in jail exacerbates an already painful experience.

#### **Discussion and implications**

ur findings show that trauma is a significant part of incarcerated women's histories. Until significant changes are made to our current criminal "justice" system as well as the interlocking forces of racism, classism, and sexism that contribute to the injustice of this system, social reform is needed in jails and prisons so that all women receive proper treatment. In particular, women with a history of trauma should receive therapy and not further punishment that results in further trauma. Women in prison not only have a history of trauma but many enter with issues of mental illness and addictions as evidenced by our participants' experiences and which are supported in the literature (Chesney-Lind & Pasko, 2004). In the past, women were admitted to psychiatric hospitals for issues that are now addressed through the corrections system. The corrections system is not designed to concurrently treat the mental health, trauma, and addiction issues with which women often enter jails and prisons. To heal from these issues, women need access to counseling from qualified professionals and adequate access to medications. In addition, personnel working with women who are incarcerated need special training on how to interact with women offenders who have experienced trauma. Programs such as Resolana and other GRPs provide this kind of training and offer opportunities for incarcerated women to heal from their traumatic pasts and recover from addiction in an atmosphere of care and hope.

Particular care should be taken with older women who may have a longer history of trauma and may lack trust due to their previous experiences as evidenced by our findings. Generally, the physical and mental health needs of older women in correctional institutions is largely ignored and services are lacking (Leigey & Hodge, 2012). In one survey of older men and women in prison (age 50 or above), women reported more current physical and mental health conditions than men, (Leigey & Hodge, 2012). GRP's should develop programming that specifically addresses the needs of older female inmates.

A lack of post-incarceration support contributes to recidivism while family support can lower an individual's chance of returning to the corrections system (Friedmann, 2014). At the time of data collection for this study, most participants in Resolana lived below the poverty line prior to incarceration. Many reported lifelong traumatic and abusive events and self-medicating behaviors used as coping mechanisms. The majority of the women were single mothers who were the sole support and caretakers of their minor children. With limited access to familial or social support, many had difficulty providing for their children. More than 30% of Resolana's clients reported no permanent address, and a majority reported being unemployed at the time of their arrest. Most participants were untreated or relapsed substance abusers and 54% had an existing drug felony on record. In Texas, this drug felony handicaps them with a lifelong ban from receiving food stamps, welfare benefits, federally assisted housing and most educational assistance. Without financial, housing, child care, and job training and placement assistance, successful reentry seems nearly impossible. Eradicating these kinds of laws could have significant impact on recidivism. Additionally, revising legislation that has the potential to revictimize women who experience domestic violence is also needed. For example, women who experience domestic violence should not suffer from the mandatory arrest laws that are included in the Violence Against Women's Act (VAWA). In addition, mandatory arrest laws do not address the root causes of domestic abuse which include "unemployment and economic distress"

(Pickert, 2013, paragraph 5). Laws that on the surface appear to protect girls, but ultimately disproportionately target them for status crimes such truancy and running away from home also need to be challenged (Chesney-Lind, 2004). Advocacy and policy change is needed to eradicate over policing in communities of color, and implicit bias and racism that seeps into arrests, detention, and sentencing practices (Crenshaw, 2012; Sherman, 2012).

The field of adult education is rooted in social justice and advocacy for marginalized populations including Freire's (2000) literacy work with the working class and poor in Brazil, Myles Horton, Septima Clark and Esau Jenkins' Citizenship School efforts that became part of the Civil Rights Movement of the 1960s (Clark & Blythe, 1962), and the United Farm Workers movement of the 1960s and 1970s headed by César Chávez along with Gilbert Padilla and Dolores Huerta (Garcia, 2012). Gender responsive programs at their core reflect the same type of social justice and advocacy evidenced by Freire, Horton, Clark, Jenkins, Chávez, Padilla and Huerta. Given our current system of mass incarceration and the warehousing of women who need help rather than confinement, there is great opportunity for social justice advocacy from adult educators who understand the profound impact of positionality in working with incarcerated and formerly incarcerated women in various capacities. Adult educators can become involved with and advocate for GRPs as a form of restorative justice at the local, state, or national level. Given the various injustices that contribute to the incarceration of women—and particularly women of color, the time for action is now.

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