

# **Arrowhead Regional Corrections**

## **Female Offender Program at the Duluth Bethel Society:**

### **Recidivism Report on Residents Discharged in 2012**

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## **DEFINITIONS/ACRONYMS:**

- ARC: Arrowhead Regional Corrections
- BCA: Bureau of Criminal Apprehension (Statewide system that collects felony-level data on criminal offenses committed in Minnesota)
- CD: Chemical Dependency
- CSC: Cognitive Self-Change Groups
- CSTS: Court Services Tracking System (data collection system used by ARC Court and Field Services – Probation and Parole – to track offenders)
- DWI: Driving while Intoxicated (also includes “Failure to Submit to Test for Intoxication” offenses)
- Evidence-Based Practices: Application of empirical research to professional corrections practice. “Core EBP Findings” throughout the report highlight correctional practices that have been shown to reduce recidivism.
- F: Felony offense (most serious type of crime; sentence could include more than one year of imprisonment)
- GM: Gross Misdemeanor offense (neither felony nor misdemeanor crime; maximum fine which may be imposed is \$3,000)
- LSI-R or LS/CMI: Level of Service Inventory (risk/needs assessment tool that helps establish the level of supervision by classifying an offender by their risk to re-offend and identifying their risk and strength areas)
- M: Misdemeanor offense (less serious type of crime; sentence could include not more than 90 days incarceration or a fine of not more than \$1,000 or both)
- MN DOC: Minnesota Department of Corrections
- VOP: Violation of Probation (offender violates the conditions of her probation)

# **DATA COLLECTION PROCEDURES & DEFINITIONS OF**

## **RECIDIVISM:**

The sample for this report is the forty (40) residents discharged from the Female Offender Program (FOP) in 2012. This compares to an average of 52 clients/year discharged in 2005-2008 and 62 clients/year discharged in 2003-2004. (Female Offender programming was offered in Duluth and Virginia until 2005.)

Female Offender Program Reports from 2010 (women discharged 2005-2008) and 2007 (women discharged in 2003 and 2004) are referenced throughout the report as a way of comparing resident demographics and recidivism rates.

Information was collected from the FOP intake questionnaires, pre-and post-tests and general program information. Re-offense and Violation of Probation information was collected in January 2015 from both CSTS and BCA offense databases; all convictions and violations that occurred within two years of the residents' discharge were collected. First, felony recidivism data was collected from the BCA database. The BCA does not consistently receive information on gross misdemeanor and misdemeanor convictions, so the CSTS database was then used to collect additional felony, gross misdemeanor and misdemeanor conviction data. Violation of probation data was then collected from CSTS on those residents who were not convicted of a new offense during the two-year window. Note: the report only includes *convictions*, not arrests, because a person could be arrested, but not convicted of an offense.

Recidivism, for the purpose of this report, is calculated by two methods:

1. Conviction for a new felony offense within two years of discharge from the Female Offender Program (FOP). Most state and federal recidivism studies consider new felony convictions within three years of discharge.
2. Conviction for a new felony, gross misdemeanor or misdemeanor offense within two years of discharge from the FOP. Arrowhead Regional Corrections also uses this standard of recidivism because it allows us to track trends and design strategies to reduce recidivism.

In addition to recidivism, ARC also calculates Violation of Probation (VOP) rates. Starting with this report, Violations of Probation will no longer be considered a measure of FOP resident recidivism because: (1) it creates an unreasonable standard, not comparable to other recidivism studies and (2) the decision to issue a violation of probation is too subjective and variable. It often depends upon the probation officer, and his or her level of experience and tolerance for offender misconduct.

Cautionary note: the small number of residents (i.e. small sample size) makes percentages appear larger and could be misleading.

## RESIDENT DEMOGRAPHICS:

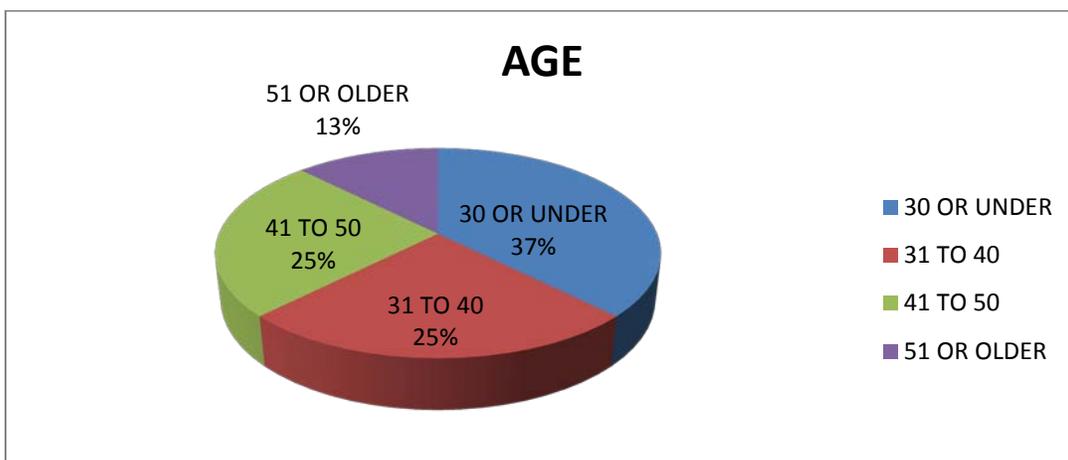
Forty (40) women were discharged from the Female Offender Program in 2012. One woman was admitted and discharged from the program a total of three times in 2012. She completed the residential program twice. After the second residential stay, she was discharged to a Board and Lodging facility, where she planned to continue FOP programming in the non-residential program. She relapsed within a day of discharge and never attended the non-residential program. [Note: she is only counted once in the demographic data.]

Thirty (75%) of the forty residents completed the program. Ten of the women were terminated from the program before completing it. One absconded from the program the first evening she was in the program. One was terminated for bullying behavior (after failing a "Last Chance Contract"). One did not attend the non-residential program (see above). The remaining seven women were terminated for using alcohol and/or drugs while in the program.

The average resident was a 36 year old white woman sentenced to the FOP by a St. Louis County-Duluth Court for a felony drug or gross misdemeanor DWI offense.

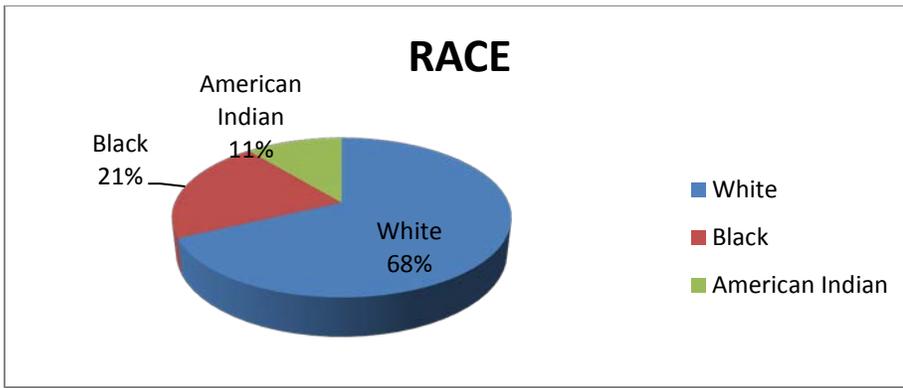
### AGE:

The average FOP resident was 35.7 years old, slightly older than the average age of 33 in the last two FOP reports. The female residents ranged in age from 19 to 59.

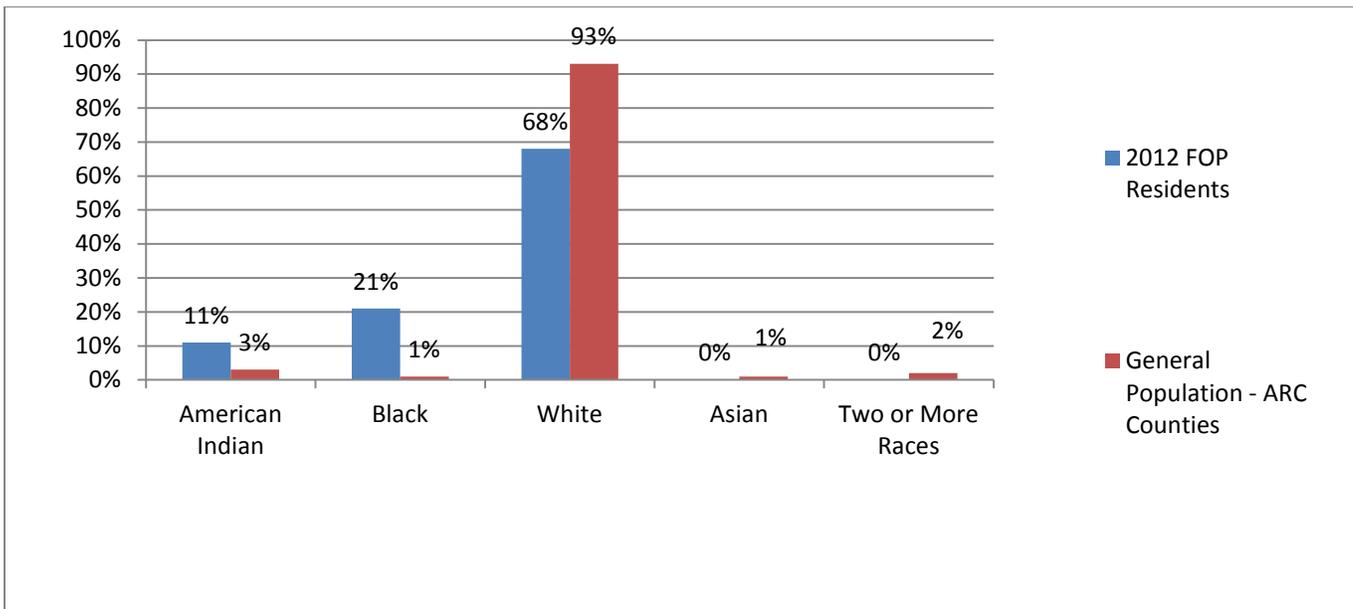


### RACE:

Two-thirds (68%) of the residents were white, 21% were Black and 11% were American Indian. The percentage of white women declined slightly (68% compared to 72% and 79% in the last two reports). The percentage of Black women continued to rise (21% compared to 10% and 5% in the last two reports). The percentage of American Indian women continued to decline (11% compared to 18% and 12% in the last two reports).



Disproportionate Minority Confinement (DMC) continues; the percentage of minority residents in the program is disproportionate to the general population of the five ARC counties.



### SENTENCING COURT:

Seven out of ten women (71%) were sentenced to the FOP through a St. Louis County Court (45% in Duluth and 26% on the Range). Slightly over a quarter (26%) were sentenced through the Carlton County Courts. One woman (3%) was sentenced in Cook County.

### NEW OFFENSES VS. VIOLATIONS OF PROBATION:

83% of the women were sentenced to the Female Offender Program for a new offense. The remaining women were admitted to the program for a “Violation of Probation” (3%) or a combination of new offense(s) and “Violation(s) of Probation” (15%).

## OFFENSE LEVEL:

29 (76%) of the women were sentenced to the FOP for felony level offenses and nine (24%) for gross misdemeanor level offenses. (Seven of the nine gross misdemeanor offenses were DWI offenses.) None of the women were sentenced to the program for a misdemeanor offense.

## OFFENSE TYPE:

The most common offenses were:

- Drug-related (52.5%)
- DWI (20%)

Since 1999, the most common offenses for women admitted to the FOP have been DWI and drug offenses.

OFFENSES	TOTAL NUMBER	TOTAL PERCENTAGE
Drug-related	21	52.5%
DWI/Test Refusal	8	20.0%
Burglary	5	12.5%
Assault	3	7.5%
Criminal Damage to Property	1	2.5%
Robbery	1	2.5%
Theft by Swindle	1	2.5%
	40	100.0%

## OFFENSE HISTORY:

Seven (17.5%) of the women had no prior offenses. The remaining 33 women had a total of 94 offenses, an average of 2.8 prior offenses per offender. The most common past offenses were drug offenses, DWI, fraud/forgery and theft.

In addition, 40% had a juvenile adjudication/conviction, compared to only 24% in the last report.

## RISK ASSESSMENT SCORES:

CORE EBP FINDING: ASSESS THE RISK LEVEL OF OFFENDERS AND TARGET SERVICES TOWARD THOSE ASSESSED AT MEDIUM OR HIGH RISK OF RE-OFFENDING. 91% OF THOSE WITH A SCORE WERE ASSESSED AT A MEDIUM TO HIGH RISK OF RE-OFFENDING.

More than eight out of ten FOP residents had a LSI-R or LS/CMI risk assessment. According to ARC Court & Field policy, *all* of the residents should have had an LSI-R or LS/CMI, regardless of their offense. The Level of Service risk assessment tool classifies the offender by their risk to re-offend and identifies the needs/risks/strengths they present. Probation Officers use the risk level to establish the level of supervision.

RISK LEVEL	NUMBER OF RESIDENTS	PERCENTAGE OF RESIDENTS
Low	3	9%
Medium	22	69%
High	7	22%
Total	32	100%

## **RESIDENTS’ FAMILY AND SOCIAL ISSUES:**

At intake, each resident completed a survey on personal and family issues. The results help guide programming by identifying patterns among FOP residents.

### **EMPLOYMENT STATUS:**

At the time of admission, half of the women were unemployed; one-third for at least a year. Almost one-third were homemakers, all but one with children at home. Only one in five residents (20%) were employed, slightly more full-time than part-time. Fewer women were employed in 2012 compared to the last report where 45% were employed.

Prior to admission, the women earned an average of \$732 per month. One-third of the women listed no income during the month prior to being admitted to the program.

### **EDUCATIONAL STATUS:**

Half of the women had at least some college or technical training. Six percent had at least a two-year college degree. 37% had a high school diploma or GED. Less than one in ten (7%) did not have their high school diploma or GED. (This is different from past reports, when more than 20% of the women did not have their high school diploma or GED.)

### **MARITAL/RELATIONSHIP STATUS**

Nearly half (45%) of the women identified themselves as single, but with a partner. 28% were single. The rest were evenly divided between married, separated, divorced and widowed.

### **DEPENDENTS:**

Just over three-quarters (77%) of FOP residents had children. Half of them had minor children and half had adult children. They had an average of 2.4 children each.

One-third of the women had minor children living with them right before they were admitted to the FOP; mostly pre-schoolers or elementary school age children. While the mother was in the Female Offender

Program, half of the children were cared for by their father and the other half by the women's parents or other family members.

Over half of the FOP participants reported their children have been diagnosed with mental health issues, drug and/or alcohol problems, learning disabilities, and/or physical disabilities. They also reported their children have had problems at school and/or involvement in delinquency court.

## HOUSING

Before admission to the FOP, 41% of the women were living in rental housing, 17% in their own home, and 28% with family members. One was homeless and three lived in residential treatment facilities or jail. Two-thirds were not concerned about where they were going to live after completing the Program.

## HEALTH:

60% of the women rated their health over the last year as good or excellent. The most common health complaints were asthma, dental problems, and arthritis/chronic pain.

## MENTAL HEALTH:

Almost four in ten women (39%) had a mental health diagnosis and were taking psychiatric medications. Their mental health diagnoses included: depression, anxiety, panic disorder, PTSD, ADD, schizoaffective disorder, antisocial personality disorder, schizophrenia, and borderline personality. Nearly all of these women *also* had a substance abuse problem (i.e. co-occurring disorder), which is difficult to address in either chemical dependency treatment or psychological counseling.

## HISTORY OF ABUSE/TRAUMA:

The FOP residents had a history of being physically and sexually abused. Nearly half were physically abused, both as children and adults. Nearly half were sexually abused as children and two-thirds were sexually abused as adults. Half were pregnant before they were 18 years old, 10% were pregnant before they were fifteen.

## HISTORY OF ALCOHOL AND DRUG USE:

More residents reported using drugs rather than alcohol before entering the Female Offender Program. One-third of the women reported that they drank alcohol and over 40% reported they used drugs a few times a week before entering the program. The drugs they used most often (in order of use) were methamphetamines, marijuana, cocaine, heroin, opiates, and methadone. 86% of the women had been in chemical dependency treatment before, an average of five times. Eighty percent reported they thought they had a problem with drugs or alcohol. 86% were using drugs or alcohol when they committed their crime.

# **FEMALE OFFENDER PROGRAMMING:**

CORE EBP FINDING: THE MOST EFFECTIVE PROGRAMS FOR CHANGING CRIMINAL BEHAVIOR AND REDUCING RECIDIVISM ARE COGNITIVE-BEHAVIORAL AND BEHAVIORAL INTERVENTIONS.

## **PROGRAM SERVICES**

The Bethel Female Offender Program provides both residential and non-residential programming. In 2012, only one woman was scheduled to start the non-residential program and she relapsed, never attending the non-residential program. In the last report, 10% of the residents continued in the non-residential/day program.

Female Offender Program residents participated in both in-house and community programming. Bethel FOP staff facilitated a cognitive self-change group, using the “Moving On” gender-specific curriculum. The women participated in chemical dependency education/aftercare groups, whether or not they were enrolled in chemical dependency treatment. The women also participated in anger management and family/parenting groups. A consultant provided an in-house health and well-being group. The NERCC Guidance Counselor provided vocational services to residents. The American Indian JDAI Community Coach offered cultural services for FOP residents.

Outside organizations presented educational programs at the FOP, including St. Louis County Extension (*Good Eating* nutrition program), Workforce Center (*New Leaf* job seeking workshops for former offenders), Community Action Program (*Common Cents* money management program), Program to Aid Victims of Sexual Assault (sexual abuse education and advocacy), Safe Haven (domestic violence education and advocacy), and St. Louis County Health Department (*Hepatitis C* awareness course).

The women were referred to many community resources, such as the American Indian Community Housing Organization (AICHO), Churches United in Ministry (CHUM), Damiano Center, Duluth Public Library, Salvation Army, Union Gospel Mission, Work Force Center, Area Learning Center, Program to Aid Victims of Sexual Assault (PAVSA), Center for American Indian Resources (CAIR), YMCA, Lake Superior Community Health Center and local mental health centers.

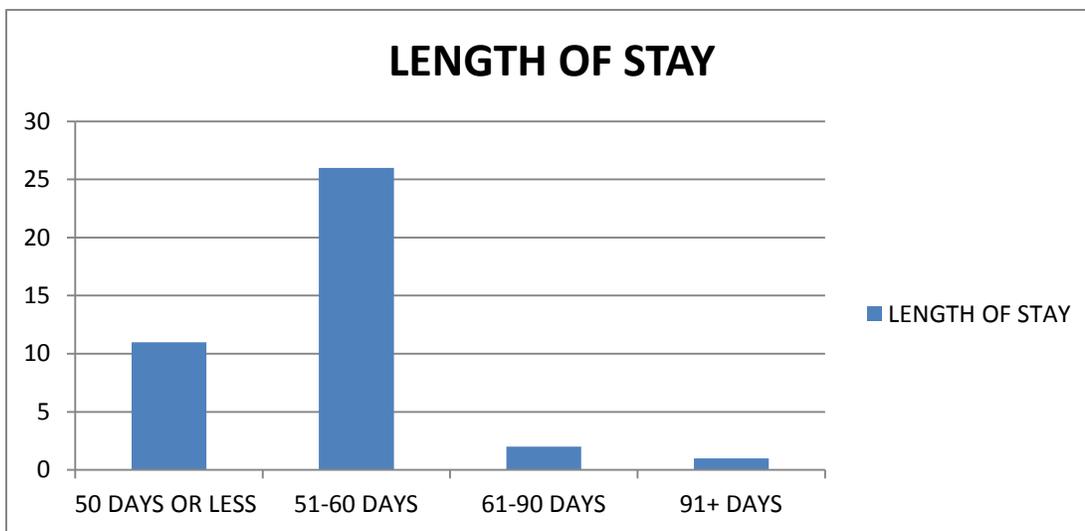
All of the residents had a Rule 25 Chemical Use Assessment before or during their stay in the Female Offender Program. The Rule 25 Assessment determines the appropriate level of chemical dependency treatment care. While in the Female Offender Program, 47% of the women participated in an outpatient chemical dependency treatment program, either at the Bethel or the Center for Alcohol and Drug Treatment. The Bethel outpatient treatment program was gender-specific (i.e. all women). Outpatient treatment groups at the Center for Alcohol and Drug Treatment combined male and female clients. (Seven of the ten women who did not complete the program were attending or scheduled to begin C.D. Treatment at the time they were terminated from the program.) All residents regularly attended 12 Step recovery meetings, and provided verification of their attendance.

In 2011 and 2012, the Female Offender Program received a grant from the St. Mary's Hospital Foundation to provide on-site health care services one evening per week. A registered nurse provided physical examinations, health education and medication management/counseling. She provided acute care, chronic illness management and health promotion education. The grant also provided psychological evaluations for residents who were exhibiting symptoms of mental illness, but were not yet diagnosed with a mental health disorder.

Three-quarters of the women had individual therapy sessions with a licensed psychologist from the Arrowhead Psychological Clinic. One woman attended therapy sessions at the Center for American Indian Resources (CAIR). All of these women were encouraged to continue therapy after discharge from the FOP.

## LENGTH OF STAY

All of the women were sentenced to 90 days in the Female Offender Program. They served an average of 52 days each. Length of stay varied from 1 day (woman who absconded) to 112 days. The 30 women who completed the program served an average of 60.6 days. This is consistent with a sentence of 90 days minus 30 (1/3) "good time" days. All but one of the women who stayed less than 50 days was terminated from the program.



## SATISFACTION SURVEYS:

All thirty of the women who completed the program completed both pre- and post-tests. This is similar to completion rates in previous reports.

Nearly all the residents who completed the questionnaire reported the program was very helpful (75%) or somewhat helpful (17%). The others (8%) had no opinion. None of the residents reported the program was unhelpful.

The women reported the program helped them the most in the following areas (in order): "coping with changes in my life", "anger management", "drug or alcohol issues" and "relationships with others". The

women reported the program helped them the least (i.e. rated “somewhat unhelpful”) with “childhood sexual abuse”, “adult sexual abuse” and “parenting skills”.

Suggestions for improving the program included: more recreation/social time and/or group outings; transportation to meetings or a longer time frame to get to/from appointments; more weekend programming; allowing nicotine products or more cigarette breaks; more programming on coping skills, addictive behavior and cognitive skills practice; more help preparing for education or employment; an opportunity to work during the program.

In particular, they requested more help with aftercare planning to overcome hurdles, including up-to-date community resource information and housing options for offenders convicted of felony offenses.

## PRE- AND POST-TESTS:

In addition to client satisfaction surveys, women rated different areas of functioning before and after completing the program. The areas of largest improvement included (in order of largest changes): “I find it easy to make decisions”, “I am hopeful about the future”, “I am less restless”, “I feel useful and needed” and “My life is pretty full”. There were no areas where the women did not improve.

## DISCHARGE ARRANGEMENTS:

Two-thirds of the women returned to similar independent living situations -- either alone, with their husband/boyfriend/fiancé or their parents. Just over one-quarter were discharged to supportive living or transitional facilities, including housing services for people with co-occurring (mental health and substance abuse) and chemical dependency disorders. One woman was discharged to an emergency shelter and one was discharged to a downtown Duluth board and lodging facility.

At least a quarter of the residents were scheduled to complete chemical dependency treatment or aftercare services and/or mental health services after discharge.

## RECIDIVISM:

Note: the small population and small number of residents who were convicted of a new offense make it important to view the data cautiously. The frequency figures are low, distorting percentages.

## RECIDIVISM - FELONY OFFENSES ONLY:

Of the 30 women who completed the Female Offender Program in 2012, 25 or **83% were not convicted of a new felony offense within two years of discharge from the program.** (Five, or 17%, were convicted of a new felony offense within two years of discharge.)

By comparison, the 2014 Minnesota Department of Corrections Performance Report stated that 25% of the female offenders released from Shakopee Prison in 2009 and 2010 were convicted of a new offense within three years of discharge. A 2014 U.S. Department of Justice, Bureau of Justice Statistics, report estimated over half (58%) of female prisoners released in 30 states in 2005 were arrested for a new crime within three years of release from prison. The 17% two-year FOP recidivism rate is lower than the 19% two-year felony recidivism rate at NERCC.

<b>Comparison of NERCC Recidivism to State and National Rates</b>	
FOP Felony Recidivism Rate	17%
State Felony Recidivism Rate	25%
National Felony Recidivism Rate	58%
NERCC Felony Recidivism Rate (two years)	19%

## RECIDIVISM - FELONY, GROSS MISDEMEANOR AND MISDEMEANOR OFFENSES:

Of the 30 women who completed the Female Offender Program in 2012, twenty-two or **73% were *not* convicted of a new felony, gross misdemeanor or misdemeanor offense within two years of discharge from the FOP.** (Eight, or 27%, were convicted of a new felony, gross misdemeanor or misdemeanor level offense within two years of discharge.)

The 27% two-year recidivism rate is higher than in the past. The two-year recidivism rate in the 2005-2008 report was 17% and the two-year recidivism rate in 2003-2004 was 23%. The three-year recidivism rate in the past reports was 28%.

TWO YEAR RECIDIVISM RATE FOR 2012 FOP DISCHARGES (n=30)	TWO YEAR RECIDIVISM RATE FOR 2005-2008 FOP DISCHARGES (n=157)	TWO YEAR RECIDIVISM RATE FOR 2003-2004 FOP DISCHARGES (n=125)	TWO YEAR RECIDIVISM RATE FOR NERCC (N=1075)
27%	17%	23%	39%

No comparable statewide or federal data is available for female offenders convicted of misdemeanor or gross misdemeanor level offenses. The 27% two-year FOP recidivism rate is lower than the 39% two-year overall recidivism rate at NERCC.

## RECIDIVISM OFFENSE LEVEL:

Of the eight residents who were convicted of a new offense, five were convicted of a new felony offense. Two were convicted of gross misdemeanor offenses and one was convicted of a new misdemeanor offense.

## TYPE OF RECIDIVISM OFFENSE:

Six of the eight recidivism offenses were the same as the residents' original offense. The offenses were:

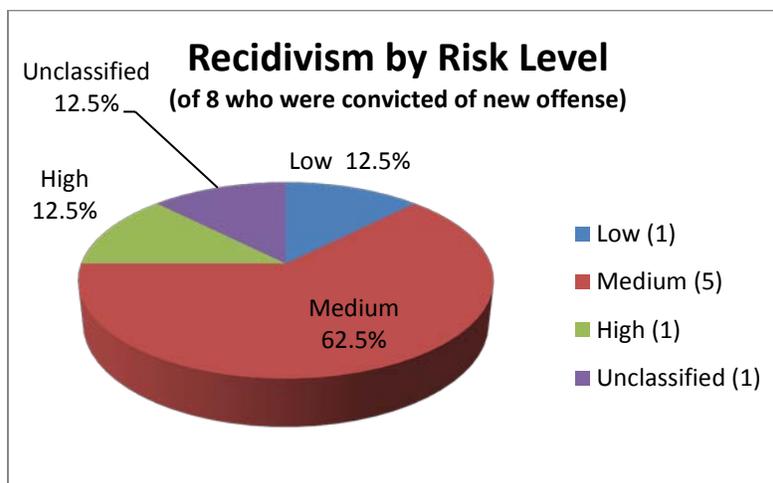
- Drug offenses (3 or 37.5%)
- DWI (2 or 25%)
- Burglary (2 or 25%)
- Theft (1 or 12.5%)

## RECIDIVISM BY TIME UNTIL CONVICTION

The average time to be convicted of a new offense was 415 days, or 1.1 years. Of the eight residents who were convicted of a new offense, just over a third (3) were convicted of a new offense within a year of discharge. Half (4) were convicted 12 to 18 months after discharge and one woman was convicted between 18 and 24 months of discharge.

## RECIDIVISM BY RISK LEVEL:

Women with a medium risk of re-offending were more likely to be convicted of a new offense within two years of discharge.



However, overall, those with low to medium risk of re-offending were more likely to be convicted of a new offense within two years of discharge.

CONVICTED OF A NEW OFFENSE WITHIN TWO YEARS		
RISK LEVEL	NUMBER	PERCENTAGE
LOW RISK (n=3)	1	33%
MEDIUM RISK (N=15)	5	33%
HIGH RISK (n=6)	1	17%
UNCLASSIFIED (n=6)	1	17%
TOTAL (n=30)	8	27%

## RECIDIVISM BY LENGTH OF STAY

Most of the Female Offender Program residents had length of stay between 52 to 60 days. None of the three women with longer stays were convicted of a new offense within two years.

## RECIDIVISM BY RACE

American Indian residents who completed the Female Offender Program had a higher than average rate of recidivism (40%), compared to Black (20%) and White (25%) residents.

## RECIDIVISM BY CHEMICAL DEPENDENCY TREATMENT PROGRAMMING

Residents who were not enrolled in chemical dependency treatment were more likely to be convicted of a new offense. Six out of the eight (75%) women who re-offended were NOT enrolled in a chemical dependency treatment program while they were in the Female Offender Program.

## RECIDIVISM BY DISCHARGE ARRANGEMENT

Of the eight women who re-offended, six returned to similar independent living situations after the FOP, only two (25%) transitioned to a supportive living arrangement.

## VIOLATION OF PROBATION CONDITIONS:

In addition to the eight residents who were convicted of a new offense, **six (20%) of the women who completed the program violated the conditions of their probation within two years of discharge.** All of the violations were alcohol and/or drug-related. Five of the six violations were for using alcohol and/or drugs; one was for failing to complete chemical dependency treatment. Five of the six had violations of probation within the first six months of completing the program, one was nine months after discharge.

## **RECIDIVISM BY ARC COUNTY:**

### **CARLTON COUNTY:**

Ten of the forty women discharged from the program in 2012 were from Carlton County. Three of the ten women (30%) did not complete the Program; they were expelled for using alcohol and/or drugs.

**Of the seven Carlton County women who completed the program, four (57%) were not convicted of a new offense within two years of discharge.** (Three, or 43%, were convicted of a new offense, including a felony theft charge, gross misdemeanor DWI and a misdemeanor drug charge.)

In addition to the four residents who had a new conviction, **2 had Violations of Probation**, both for using alcohol and/or drugs and failing to complete chemical dependency treatment.

### **COOK COUNTY:**

Only one of the forty women discharged from the Female Offender Program in 2012 was from Cook County.

**She completed the program and was not convicted of a new offense within two years of discharge.** She did, however, violate the conditions of her probation by using drugs that were not prescribed to her.

### **ST. LOUIS COUNTY - NORTH:**

Ten of the 40 women discharged from the Female Offender Program in 2012 were from Northern St. Louis County.

One of the ten women (10%) did not complete the program; she absconded from the program within hours of admission.

**Of the nine women who completed the program, seven (78%) were not convicted of a new offense within two years of discharge.** (Two, or 22%, were convicted of a new offense, including a felony burglary and a felony drug offense.) None of the women violated the conditions of their probation.

### **ST. LOUIS COUNTY - SOUTH:**

Nineteen of the forty women discharged from the Female Offender Program in 2012 were from Southern St. Louis County. One woman was admitted and discharged from the program a total of three times in 2012. She completed the residential program twice. She was discharged to a Board and Lodging facility; she planned to transfer to the non-residential program and continue FOP programming. She relapsed within a day of discharge and never attended the non-residential program.

In total, six of the nineteen women (32%) did not complete the FOP. One never reported to the non-residential program (see above). One was terminated for bullying behavior (after failing a “Last Chance Contract”). The remaining four were terminated due to alcohol and/or drug use while in the program.

**Of the thirteen women who completed the program, ten (77%) were not convicted of a new offense within two years of discharge.** (Three, or 23%, were convicted of a new offense, including a felony drug offense, a felony burglary offense and a gross misdemeanor DWI.)

In addition to the three residents with a new conviction, **three had Violations of Probation.** They violated the conditions of their probation by using alcohol and/or drugs, failing to complete chemical dependency treatment and failing to keep in contact with their probation officer.

## **REPORT SUMMARY:**

### **1. Female Offender Program Residents:**

- Forty (40) women were discharged from the Female Offender Program in 2012. One woman was admitted and discharged from the program a total of three times in 2012. She completed the residential program twice.
- Thirty (75%) of the forty residents completed the program. Ten of the women were terminated from the program before completing it, most for alcohol or drug use while in the program.
- The average resident was a 36 year old white woman sentenced to the program by a St. Louis County-Duluth Court for a felony drug or gross misdemeanor DWI offense.
- 91% of the residents with a risk assessment score were assessed at medium to high risk of re-offending.
- More than 80% of the women had previous criminal convictions; 40% starting as juvenile offenders.
- The residents also reported a history of unemployment, poverty, mental health issues, co-occurring disorders, alcohol and drug use, numerous chemical dependency treatments, and physical and sexual abuse. Three-quarters of the residents had children; more than half of the children have disabilities and/or other difficulties.

### **2. Female Offender Programming:**

- The Female Offender Program staff facilitated gender-specific cognitive skill programming, as well as anger management, parenting groups and chemical dependency aftercare groups. Community organizations provided a number of educational programs at the FOP. Residents were referred out to a variety of community organizations.
- The average length of stay was 61 days for women who completed the program.
- While in the FOP, 47% of the residents also attended outpatient chemical dependency treatment at the Bethel or the Center for Alcohol and Drug Treatment.
- 92% of the residents who completed the program reported it was very or somewhat helpful. The women reported the program helped them the most in “coping with changes in my life”, “anger management”, and “drug or alcohol issues”.

- In pre- and post-tests, women reported the largest improvements in “I find it easy to make decisions” and “I am hopeful about the future”. There were no areas where the women did not improve.

### **3. Female Offender Program Recidivism:**

- Overall, 25 (83%) of the 30 women who completed the FOP were *not* convicted of a new felony offense within two years of discharge. (Five, or 17%, were convicted of a new felony offense within two years of discharge.) This compares to a statewide female felony recidivism rate of 25% and a national rate of 58%. It is lower than the two-year 19% felony recidivism rate at NERCC.
- Twenty-two, or 73%, of the 30 women who completed the FOP were *not* convicted of a new felony, gross misdemeanor or misdemeanor offense within two years of discharge. (Eight, or 27%, were convicted of any offense within two years of discharge.) This is higher than the two year recidivism rates reported in previous FOP Reports (17% in 2005-2008 and 23% in 2003-2004). It is lower, however, than the overall two-year 39% recidivism rate at NERCC.
- Of the residents convicted of a new offense, the average time to be convicted was 1.1 years; 38% were convicted within a year of discharge.
- The most common new convictions were for Drugs, DWI, Burglary and Theft. Six of the eight recidivism offenses were the same as the residents’ original offense.
- Those most likely to be convicted of a new offense were:
  - I. Residents assessed at medium risk of re-offending
  - II. Residents who were American Indian, compared to Black and White residents
  - III. Residents who were not enrolled in chemical dependency treatment
  - IV. Residents who returned to their previous living arrangement after discharge

In addition to the eight residents who were convicted of a new offense, six (20%) of the women who completed the program violated the conditions of their probation within two years of discharge. All of the violations were alcohol and/or drug-related.

## **IMPLICATIONS AND RECOMMENDATIONS:**

**1. The Female Offender Program is serving the population it was designed to serve. The FOP is serving adult female offenders with a medium or high risk of re-offending who have committed a gross misdemeanor or felony level offense and/or violated the conditions of their probation. Residents have changed over the past decade: they are now more likely to be women of color, women with co-occurring mental health and substance abuse disorders, women who use drugs rather than alcohol, and women with long histories of social dysfunction.**

Recommendation: Update the Female Offender Program intake, pre- and post-test and satisfaction survey forms to reflect the changes in program clientele.

Recommendation: Enhance culturally specific programming to decrease DMC (“Disproportionate Minority Confinement”) and recidivism among American Indian and Black residents. The percentage of Black residents continues to rise. Proportionately, American Indian residents had a higher recidivism rate than Black and White residents. The program provides American Indian cultural services for FOP residents; cultural support services for African American women should be added.

Recommendation: Enroll eligible residents in chemical dependency outpatient treatment, whenever possible. Participation in outpatient chemical dependency treatment influenced recidivism. Residents who participated in outpatient chemical dependency treatment during their FOP stay had a lower recidivism rate.

Recommendation: Provide co-occurring treatment for women with mental health and substance abuse disorders. Almost four in ten FOP residents (39%) had a current mental health diagnosis and were taking psychiatric medications; almost all of them were also chemically dependent. Co-occurring disorders are difficult to address in either chemical dependency treatment or psychological counseling. Review the NERCC program for residents with co-occurring disorders to determine if it could be modified for female offenders. Staff training in co-occurring disorders may be helpful.

Recommendation: Provide staff training on trauma-based treatment. More than half of the FOP residents had a history of being physically and/or sexually abused.

## **2. Review the Female Offender Program curriculum to ensure it complies with evidence-based practices.**

Recommendation: Review the sixty-day FOP curriculum to ensure residents have an adequate “dosage” or duration of intervention, especially cognitive programming. (As a general rule, medium risk offenders should receive a total of 100 hours of intervention over 3 to 9 months, while high risk offenders need 200 to 300 hours over 6 to 12 months.)

If the current program does not provide a sufficient amount of programming, consider other options, such as:

- A. Extended residential stays for women who are assessed at a high risk of reoffending who may need a higher dosage and duration of services to make permanent changes in their lives. Extended residential stays will have to be weighed against the availability of bed space (one bed occupied by a woman with a six month sentence may prevent three women with 60 day stays from being admitted to the program). Currently, the only alternatives for women with longer sentences are Shakopee prison or lengthy jail stays with the final two months spent in the FOP. [The 2014 and 2015 St. Louis County grants are allowing Bethel to consider providing extended treatment – up to 90 or 120 days or longer – for women who need extended stays.]
- B. Expanded weekend programming.
- C. Completion of the residential program followed by transfer to extended non-residential/day programming where women live independently or in supportive housing. Electronic monitoring (or

Secure Continuous Remote Alcohol Monitor) and/or supervision by a Community Sanctions Program probation officer could help ensure accountability.

- D. Gender-specific cognitive programming in the community. ARC staff could be trained in the “Moving On” or another gender-specific curriculum. (Probation Officers in several other Minnesota counties facilitate “Moving On” groups.) The women-specific community cognitive group could be offered to women discharged from the FOP, women in the Community Sanctions Program and other medium to high risk women on probation and supervised release.

Recommendation: Provide annual “Moving On” refresher training for all FOP staff to ensure program fidelity.

Recommendation: Review the content of outside presentations to ensure they are relevant to residents’ experiences. In particular, three presentations were rated “less helpful” by the residents: dealing with sexual abuse, “Common Cents” money management and parenting skills programs. The parenting skills program is particularly important, as it may help interrupt the intergenerational cycle of family dysfunction.

### **3. Enhance aftercare services by assessing resident needs at intake in order to connect them with community resources and ease their transition back into their home community. Work closely with probation staff to ensure a smooth transition.**

Recommendation: Work closely with probation staff to identify clients’ needs using the LS/CMI. Research the need for a LS/CMI gender-specific addendum. Complete the Rule 25 Chemical Use Assessment before the client is admitted to the Female Offender Program. Together, FOP and probation staff and the resident develop a case plan that will address these needs and the residents’ transition back into the community.

Recommendation: Provide residents’ with up-to-date information on community resources. United Way’s 411 community resource booklet is updated each year and has an excellent listing of community resources.

Recommendation: Provide more referrals to supportive housing to help women transition back into the community. Provide residents with information on housing options for women convicted of felony offenses. Two-thirds of the residents returned to their original or a similar living situation, a situation not necessarily supportive of their new sobriety and ways of thinking. It is difficult to make permanent changes in only two months -- six of the eight residents who re-offended had returned to their original or a similar living situation.

Recommendation: Probation staff help ease the transition back into the residents’ home community. Probation staff should provide re-entry, supervision and support services for residents beyond their first months of discharge. The average time to reoffend was 1.1 years. (Whenever possible, recommend female offenders not “execute” their sentence to the program. Probation supervision after program discharge can be helpful in monitoring and easing the critical transition back into the community.)

Recommendation: When appropriate, work with probation officers to transfer high need clients to specialty probation caseloads (e.g. Community Alternative Program, Mental Health Court, Drug Court and DWI Court). These programs have more resources to closely monitor and intervene when necessary.

#### **4. Other issues:**

A. ARC Court & Field policies state that “*regardless of offense, an LS/CMI is required on all commitments to the Commissioner of Corrections and on all clients sentenced to the Bethel Female Offender Program.*” In 2012, only 80% of the FOP residents had a current Level of Service assessment. The LS/CMI will be especially helpful in identifying areas to address on the Female Offender Program/probation case plan.

B. In future reports, the need for current data should be weighed against the need for a larger database of residents discharged from the FOP. In 2012, only 30 women completed the FOP. A larger data base could result in more meaningful percentages and clearer patterns of recidivism.

C. The Female Offender Committee should review the “ARC Female Offender Services: Ideal Continuum of Care” chart to determine if other gender-specific options should be developed or strengthened to reduce reliance on the Female Offender Program. The Female Offender Program has a limited capacity and should be utilized when community alternatives are not available or not appropriate.