



Health and Wellbeing


Public Health and Restoration vs. Incarceration

Presented by

The Women's Justice Institute (WJI)

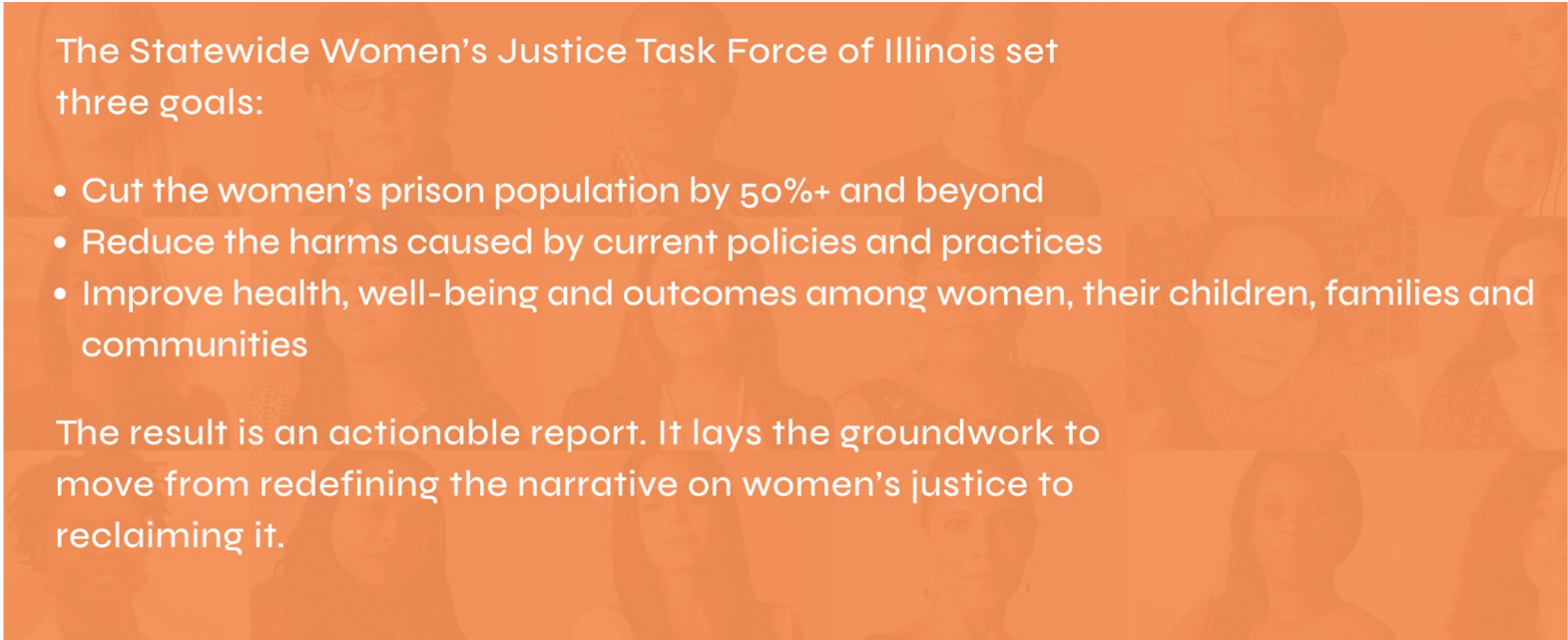
Elizabeth "Liz" Cruz MA, CADC, CODP-I,
QMHP





In July 2018, the nation's first entirely women-led Task Force was launched to build a strategy to end mass incarceration of women and confront the false narratives that fuel it.

Elevated by the leadership of directly impacted women, the Task Force engaged over 500 women – family members, advocates, social service providers, judges, prosecutors, corrections officials, policymakers, academics, health professionals and more – on solutions.


The background of the slide is a collage of many women's faces, mostly of African descent, with a semi-transparent orange overlay. The women are shown from the chest up, looking directly at the camera with various expressions.

The Statewide Women's Justice Task Force of Illinois set three goals:

- Cut the women's prison population by 50%+ and beyond
- Reduce the harms caused by current policies and practices
- Improve health, well-being and outcomes among women, their children, families and communities

The result is an actionable report. It lays the groundwork to move from redefining the narrative on women's justice to reclaiming it.





Health & Well-Being

public health & restoration vs incarceration

What Do We Know?

Overview

REDEFINING THE NARRATIVE | HEALTH & WELL-BEING | 50.4

Research consistently reveals that women in the justice system have endured gender-based and interpersonal violence, often alongside significant environmental stressors such as poverty, racism, and other forms of marginalization, often from a very young age – all of which adversely impact their health and well-being. When they attempt to survive these structural conditions, they are arrested, surveilled and incarcerated. Once in the criminal justice system, they experience the same deprivations they were forced to endure in their communities and forced to navigate a system that doesn't understand them, neglects their needs and deepens their disadvantage.

Lack of Access to Resources and Supports

An examination of gender inequities across the spectrum of social determinants of health reveals a lack of public investment in, and therefore lack of access to, the resources and supports that are necessary for women to protect their physical health, mental health, and overall well-being before, during and after incarceration. They navigate multiple, overlapping stressors for themselves and their children and families, often with tremendous resilience. Yet structural barriers set them up to fail, and instigate their system entrenchment, which further compromises their well-being, exacerbates their struggles and can lead to lifelong health consequences and intergenerational harm.

Jails and Prisons as the Default Response

Harmful social conditions, chronic lack of gender responsive services and supports, and a lack of understanding about women's pathways into the criminal justice system have created a situation where jails and prisons have become the default response to women's unmet behavioral health needs. This is not just a justice system problem. The health and well-being of women starts in their communities, and is ensured by self-determination and access to a robust array of services from an early age. Investment of resources in criminal justice responses and punitive measures is inefficient and expensive. Women need quality services in their communities, and finite resources are better invested in addressing women's social determinants of health in their communities.

Failing to Prioritize Health & Well-being

Also missing is a mechanism for actually measuring women's well-being. The justice system commonly employs variables such as re-arrest, recidivism rates and disciplinary infractions as success metrics, yet fails to employ performance metrics related to women's health and well-being. This prevents the system from prioritizing and holding itself accountable to delivering gender and culturally appropriate interventions that drive lasting solutions to women's incarceration and ensure the most effective investment of taxpayer dollars. Unless the underlying influencers and promoters of women's health and well-being are acknowledged and addressed, the pernicious cycle of women's incarceration is likely to continue.

A Call to Action

Gender responsive services and supports that promote women's health and well-being must be invoked early in order to bring justice for women into the community where it belongs. Taking action to improve gender equity in health and to address women's rights to health are essential steps in reducing their criminal justice system contact and incarceration and ensuring their deflection and diversion into community services and supports.

This chapter calls for the investment of resources into community-based, gender responsive health and support services for women, particularly those women who have suffered from trauma, violence, poverty, racism, and other forms of marginalization. It also calls for resolving public health issues among women with public health resources and systems, rather than continuing to address them in a criminal justice system that was not designed to support their health and well-being. At the same time it acknowledges that many women are already entrenched in the criminal justice system and incarcerated in jails and prisons today and deserve attention and support. Thus, it is imperative to implement policies and practices that reduce harm and improve outcomes while simultaneously taking critical steps to divert women into community care.

REDEFINING THE NARRATIVE | HEALTH & WELL-BEING | 50.5

False Narrative Fuel Mass Incarceration of Women

False Narratives That Fuel Women's Incarceration

False narratives about justice-involved women have enabled and perpetuated criminal justice and human service system policies and practices that are harmful to women, children, families and entire communities. These false narratives were identified and explored through a variety of Statewide Women's Justice Task Force convenings wherein women with lived experiences came together with a diverse array of stakeholders and public systems to name them and to redefine them.

"The drug offender"

The use of the word "offender" to describe a woman who is struggling with addiction, criminalizes a health condition and legitimizes the use of incarceration as an appropriate response. Treating personal drug use as a crime contributes to public health problems and compromises safety, security, and human rights.⁵⁹

"The new opioid epidemic"

The opioid epidemic is not "new". There has been an opioid epidemic in this country since the 1980s. Historically, the use of opioids predominantly impacted African Americans; now, the epidemic is hitting the white community. Systems should acknowledge the profound and unaddressed harm caused to African American women and men, who still remain disproportionately impacted, invisible, and underserved.

"She deserves to be in prison because she used drugs."

Substance use is a public health issue that requires a public health response, not punishment. It should never be treated as a crime. Being in jail or prison, even if the woman is abstinent in prison, does not provide her with the support needed to address her substance use issues.⁶⁰ Further, research indicates that suffering from drug addiction alters brain chemistry and relapse should be viewed as a symptom not a crime.⁶¹

"Putting women in segregation improves the overall safety of prisons."

There is no data that shows segregation improves outcomes among incarcerated women or creates safer facilities. In fact, the opposite is true. Solitary confinement is psychologically damaging; women subjected to it exhibit increased psychiatric symptoms as well as higher rates of suicide, suicide attempts, and self-harm.⁶² Access to programming is often denied to women in solitary confinement and visitation with loved ones, including children, is greatly restricted or denied altogether.⁶³

"We can't afford to invest in gender responsive treatment programs because there is such a small number of women in the justice system."

Systems cannot afford to not invest in gender responsive programs and services. A recent meta-analysis showed that gender-informed interventions were significantly more likely to be associated with reductions in recidivism.⁶⁶ Women who complete gender responsive treatment programs have a significant reduction in overall arrests.⁶⁶ This and other data show that investments in women not only lead to better outcomes, but reduce costs related to their unnecessary and cyclical incarceration.

"Drying out in jail or prison will teach her not to use drugs anymore - it will teach her a lesson."

Incarceration as treatment is inappropriate and harmful. There is no evidence that having a rough time in jail or prison reduces the likelihood of using drugs again. In fact, overdose risk increases by 40 times after detention or incarceration.⁶⁴ And withdrawal in jail or prison has led to carceral deaths when the withdrawal is not managed with medical support.

"All social services are safe and effective for women."

The social stigma, lack of confidentiality and anonymity, and exposure to possible exploitation and victimization by staff and peers deters women from seeking available prevention, support and treatment services. Task Force data showed that impacted women are often afraid to access help for fear of having their children taken away. Many also report feeling stigmatized by those delivering these services due to their substance use, mental health issues, and/or criminal involvement.

I am not a prison
success story. I am
a prison survivor.

LIZ CRUZ
MA, CADA, CDDP I



In 2002, I became "Offender" #R38587. Let that sink in: My life and my identity were defined by a number. That is who I used to be, but please allow me to acquaint you with who I am today:

I am a formerly incarcerated, Hispanic woman who beat the odds. I am resilient, not broken, and found the strength within myself to prevail despite a lifetime of sexual, physical, emotional abuse, trauma and addiction – things I endured before, during and after prison. Despite being told by police and prison officers that I would "never be more than an addict," I now have a Master's Degree in Forensic Psychology, and I have dedicated my career to empowering other people to transform their lives outside of the same systems that harmed me – failed me – for so very long.

I am not an "offender." I am a "survivor" of a public safety system that punished – instead of protected the safety – of an 8-year-old girl, one who would regularly sleep on a freezing cold balcony with her feet dangling over the edge just to avoid sexual abuse and her next beating... A young girl that did whatever she could to numb that pain through drug addiction, seeking validation through sex and stealing to survive for 14 years – until the day she went to prison at the age of 22.

They kept saying "your incarceration is to make you accountable." As a clinician today, I wonder... Who was accountable to the little girl that was enduring abuse, and who used drugs to numb the pain?

As a healthy adult, a clinician, and the mother of two beautiful children today, it is still hard to believe that no one sought a solution other than a cage for a deeply harmed young woman? I spent my young life repeatedly being told by the system that I needed to be held "accountable" for my crimes (of addiction), yet now I perceive things differently: That same system was never held accountable for failing to keep me safe before, during or even after prison.

I have heard some folks refer to me as a prison "success story" or suggest that a prison somehow "saved my life." I would disagree. I am a prison "survivor," and it is my own story to tell." As far as #R38587... she has still been denied jobs and housing due to her criminal history, and lives under the boot of crushing restitution fees for a theft committed 18 years ago as a result of her addiction... Is that a success story? Sometimes, I wonder if she will ever be free.

LIZ CRUZ
MA, CADA, CDDP I
Senior Advisor, Clinical Services
Women's Justice Institute



WOMEN'S JUSTICE PATHWAYS

The Women's Justice Pathways (WJP) Model[®]

The Women's Justice Pathways (WJP) Model identifies **5 Fundamental Rights & Needs for Women** in an integrated circle to convey how they are interrelated and are best addressed in a holistic manner. Research consistently shows that justice-involved women are managing the impacts of having multiple unmet needs and few, if any, opportunities to meet them. Additionally, one unmet need frequently impacts women's opportunities to address other needs, and increases their risk of incarceration. For example, mothers from economically and socially marginalized communities, particularly communities of color and rural communities with historically high unemployment rates, may struggle to find a livable wage and remain in a housing situation with an abusive partner in order to keep a roof over their children's heads. Consequently, they can develop trauma-related substance use issues and/or experience economic or sexual coercion that eventually results in their incarceration.





Women's Justice Pathways: Pathways to Justice vs Pathways to Prison

	PATHWAYS TO JUSTICE	PATHWAYS TO PRISON
 RELATIONSHIP SAFETY	<p>Safe, empowering relationships at home, in the community, and when accessing education, community-based services and justice system services and interventions; opportunities to exercise voice, agency and leadership in personal and community spaces</p>	<p>Childhood abuse and victimization; school-to-prison pipeline; gender-based violence (GBV), including interpersonal violence and sexual assault; social, institutional, and State violence; criminalization of survival; norms and policies that restrict voice, promote rape culture and restrict access to justice when relationship violations occur</p>
 HEALTH & WELL-BEING	<p>Community-based and justice system supports and services that cultivate mental, physical and spiritual health and well-being, effectively address physical and reproductive health needs, and attend to trauma and related mental health and substance use issues holistically</p>	<p>Under-resourced and unsafe communities; unaddressed trauma, including that which is linked to poverty, race, gender, and identity; lack of gender responsive and accessible mental and behavioral health services; lack of access to physical and reproductive health supports; policies that pathologize survival</p>
 SAFE & STABLE HOUSING	<p>Community-based and justice system supports that enhance family well-being, reduce parental stress, avoid the foster care-to-prison pipeline, and address the negative impacts of family separation and intergenerational incarceration</p>	<p>Parenting stress; family separation; foster care-to-prison pipeline; punitive child welfare policies; intergenerational incarceration, including that which is enabled by chronic lack of resources and systemic barriers to family healing and resilience</p>
 ECONOMIC SECURITY & EMPOWERMENT	<p>Safe, stable, affordable, and non-coercive living environments within the community and when involved in the justice system; policies and services that support women's dignity and agency; comprehensive and inclusive family-centered housing options</p>	<p>Lack of safe, affordable, non-coercive, culturally responsive, dignified and family-centered housing; punitive housing that functions as an extension of prison; limited transitional and residential treatment options; discriminatory and burdensome restrictions, including electronic monitoring; policies that criminalize homelessness</p>
 SUPPORTED FAMILIES	<p>Access to high-quality education, employment, and employment support that allows women to meet basic personal and family needs, live a safe and dignified life, access to social capital; equitable opportunities to build household wealth and assets</p>	<p>Lack of employment opportunities that provide livable wages sufficient to defray childcare and healthcare costs; wage inequity; education injustice; economic abuse and coercion; chronic underemployment and poverty; employment barriers resulting from criminal history; lack of social capital; economic marginalization; policies that criminalize poverty</p>


THE WAY FORWARD

From Redefine to Reclaim

Invest in a failing system

VS

Invest in women's 5 rights & needs




RELATIONSHIP SAFETY

Criminalize women for their survival or invest in communities where they can safely thrive.

Over 90% of women in prison are survivors of gender-based violence and other forms of abuse. We can invest in interventions that prevent violence against women and ensure women's safety, or continue to punish women for surviving the conditions of their lives.

Incarcerate women suffering from addiction and trauma or invest in treatment and healing.

75% of women in prison are dealing with post-traumatic stress and trauma, and struggling with related substance use and mental health issues. We can invest in cost-effective, non-carceral community-based supports or pour our resources into a system that is compromising women's health, eroding well-being and causing additional trauma.



HEALTH & WELL-BEING



SAFE & STABLE HOUSING

Fund deteriorating prisons or invest in dignified housing for women.


Almost 40% of justice-involved women reported being unable to pay rent and were forced to move in with family or friends in the year before prison. We can continue paying another \$48,000 per year to "house" them in prisons that cause them further harm, or we can invest in safe, stable and affordable housing options.

Punish and perpetuate economic insecurity among women or invest in equitable economic opportunity.

In the last decade of women's incarceration, we lost over \$700 million in economic opportunity. We can continue to criminalize women's poverty and force them through systems that create barriers to their education and economic advancement, or invest in their communities and economic opportunities.



ECONOMIC SECURITY AND EMPOWERMENT



SUPPORTED FAMILIES

Separate families or invest in supporting them through well-resourced communities.

80% of women in prison are mothers, and the majority of them are the custodial parent of young children. We can invest in alternatives that keep families together or create intergenerational family trauma by separating children from their mothers and creating barriers to family healing and reunification.

“

When I hear women suffering from addiction and trauma say “prison saved my life,” it makes me deeply sad. As someone who spent many years cycling in-and-out of jail, and who was repeatedly failed by harmful carceral drug treatment programs... I can tell you firsthand that prisons and jails are horrible places – especially for women.

One of the worst things that ever happened to me was when my addiction and trauma were pathologized by so-called treatment providers. I had been in a program that was not gender responsive, not working for me and that reinforced negative messages. When I questioned their practices, they threw me into a co-ed psych ward to “teach me a lesson”. I was so scared. By the time they released me back to the treatment unit, I had already lost trust in the program and secretly left to live in abandoned building – anything seemed better than what I experienced...

In reality, it is the system that is “bad,” not the women strong enough survive it. We are survivors, and deserve support – not a prison cell.

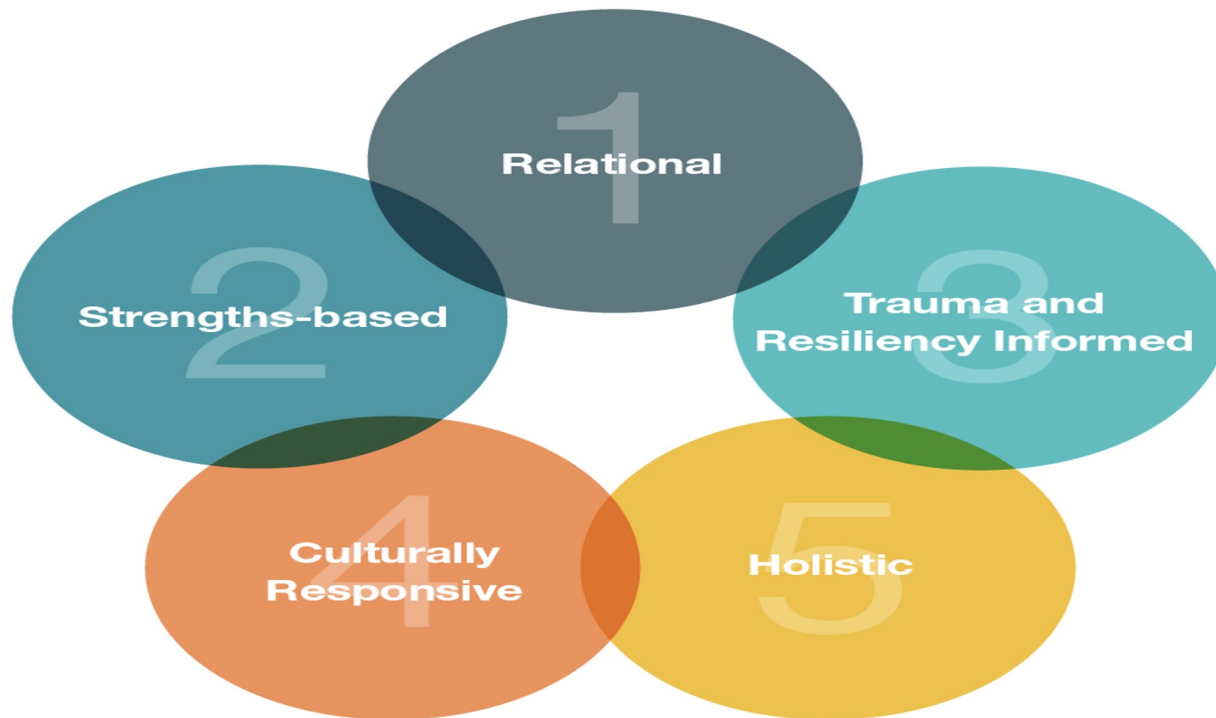
For those of us who have experienced trauma our entire lives, it may start to feel normal to be in constant trauma, to even accept being punished for it – and that is so very wrong. So, when I hear a woman say that prison saved her life, it tells me that she believes she is unworthy of real support... the kind that comes from a safe, healing place – not from behind bars or a punitive program that tells you that you are “bad”. In reality, it is the system that is “bad,” not the women strong enough survive it. We are survivors, and deserve support – not a prison cell in order to heal.

KATHIE KANE-WILLIS
Chicago Urban League

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Gender Responsiveness as the Key to System Transformation



Benedict, A. (2005). The Five CORE Practice Areas of Gender Responsiveness.

The 5 CORE Practice Areas of Gender Responsiveness

The Five CORE Practice Areas of Gender Responsiveness directly correspond to the defining developmental and ecological realities of women's lives. They are part of a human dignity framework and can and should be applied at every level of engagement and intervention with justice-involved women.³⁵

Salient Findings from Women-centered Research

The growing body of research on justice-involved women that clearly substantiates the need for gender responsive interventions.^{20,21,22} Compared to their male counterparts in the justice system, a larger proportion of justice-involved women nationally and in Illinois:

- **Have experienced gender-based violence**, including sexual abuse and/or other forms of victimization;
- **Develop substance use issues** as a way to cope with past and current trauma;
- **Engage in “criminal behavior”** while under the influence of and/or to support their drug use;
- **Are more likely to report mental health challenges**, which are also frequently tied to their experiences of abuse and trauma, and be diagnosed with co-occurring mental health and substance use issues;
- **Come from neighborhoods that are entrenched in poverty** and lacking in viable systems of social support, and are more likely to have experienced poverty, underemployment, and employment instability;
- **Are more likely to be the sole support and caregivers** for their children, who may also face a greater risk of justice involvement as a result of having an incarcerated parent; and
- **Are more likely to experience homelessness** and are vulnerable to various forms of sexual or economic coercion in order to maintain housing.

Program Metrics: Fidelity Tracker

Tracks our strengths, challenges, and opportunities in *each phase and component* of our model

1 Identify Eligible Women

IDOC Facilities
Cook County Jail
IDOC/Parole
Pre- and post-engagement

2 Educate, Invite, and Engage

Step 1: Initial Engagement
Step 2: Program Orientation
Step 3: Assessment

3 Begin Care Planning

Meeting 1: Initial Care Plan Meeting
Meeting 2: Reentry Planning
Meeting 3: Pre-release meeting

4 Facilitate Supported Release & Admission to Program

Transportation
Initial Post-release check-in within 24 hours
Preparation for Admission to Haymarket
Support with Prescription Drug Management
Circle of Support
Responses to Women who Miss Appointments
Addressing Parole Requirements & Engagement

5 Provide Care Coordination, Services & Supports

Care Plan Meetings
Coordination of Gender Responsive
Services and Supports & System Navigation
Measuring Progress Through Ongoing
Assessment

6 Facilitate Transition & Continued Care

Program Duration
Program Completion Milestones &
Defining Success
Transition Planning
Post Transition Follow-up & Support
Evaluation

Program Overview: Care Coordination Components



Program Overview: Initial Care Plan Components

Each woman's individual needs are at the forefront of her care coordination plan at all times -- as a woman's needs change, so does the plan.

Initial Care Plan Components

<i>Identifying a Personal Vision and Priority Targets</i>	Care Coordinator works with woman to identify a personal vision and motivation, strengths, challenges, and opportunities, and parole requirements and conditions.
<i>Identifying Immediate Needs</i>	Care Coordinator works with woman to identify immediate needs and transform less immediate needs into goals.
<i>Health Plan Enrollment</i>	Care Coordinator provides information on health care enrollment, discusses her automatic enrollment in County Care, and informs her that she can change her enrollment if she chooses
<i>Next Steps</i>	Care Coordinator reviews the care coordination process and the types of meetings and supports that each woman can access.

Pre-Release Engagement

Care Coordinators are involved in pre-release and post-release engagement for up to 12 months + re-engage women in crisis



GROUP INFORMATION SESSIONS

WJI Care Coordinator facilitates group information sessions where women receive basic information about the program



ONE-ON-ONE INFORMATION SESSIONS

WJI Care Coordinator facilitates one-on-one information sessions (in person, by phone, or virtually)



EMAIL

IDOC provides the WJI Care Coordinator with the names and ID numbers of women inside who have signed up/requested to receive more information about the program

Cook County Health Women's Reentry Initiative

- SAMHSA grant 2020-2025 to serve up to 500 women
- Partnership with CCH, IDOC, Haymarket and WJI (recent additions include Cook County Sheriff, Cook County Courts and Probation)
- Implementation Phases & Goals:
 - Triage
 - Stabilize and operationalize GR
 - Coaching, sustainability and growing systems capacity
 - Identify & Remove Barriers to Accelerated Release, Credits
 - Create Parole Diversion Opportunities & Reduce violations
- WJI comprehensive training and coaching (GR, CR/2, SPiN-W Assessment, GR Web-based Case Management Tool (CCW-W), Moving On)
- WJI GR Model Design & Peer-Led Care Coordination Model Development





You deserve support, not another "to do list".

Cook County Health (CCH), Haymarket Center and the Women's Justice Institute (WJI) have joined together to provide women who need support addressing substance use issues and are returning to Cook County with individualized, comprehensive reentry services.

Each woman works with a care coordinator to co-design a reentry plan that builds on her strengths and addresses her unique needs. Every woman in this program not only receives substance use treatment, but also legal services (for survivors of GBV and family law), mental health services, support with health care, housing, employment service referrals, family reunification and other basic needs.



You create your plan. Tell us what you need.

- Substance Use Treatment
- Telehealth and virtual services from your home
- Recovery Home
- Mental Health Support
- Intimate partner violence, sex trafficking survivor services and Safety Planning
- Support with basic needs and transportation
- Legal Services (DV, Family Law)
- Housing Support
- Medicaid/Insurance Enrollment
- Connection to Healthcare Services
- Family Support
- Employment Services
- Support navigating Parole, DCFS and other systems
- MAT (Medication Assisted Treatment)

What is a Care Coordinator?



The Care Coordinator is someone who:

- Takes the time to listen and understand your strengths and what you actually need
- Will walk with you on your reentry journey
- Works with you to create a comprehensive plan for reentry that is based on your goals, your needs and your dreams for the future

Your individual needs will be at the forefront of your plan at all times – as your needs change, so does the plan.

Let's focus on you. Connect with us in the following ways:



- ✓ Contact one of our Care Coordinators:
Elizabeth@womensjustice.net or 779-513-0422
Mpuente@cookcountyhhs.org or 312-835-7234
- ✓ Currently incarcerated? Ask your counselor for a referral or sign up for an Information Circle
- ✓ Already home and need support? Contact a Care Coordinator directly or ask your Parole Officer or service provider for a referral.

Reclaim Justice for Women



Reclaim justice for women

The WJI Reclamation Project is a sisterhood of women leaders whose lives have been impacted by the criminal legal system. We come together to reclaim justice for women, their children and families through mutual support and transformative advocacy.

Connect with us virtually or at our Reclamation Center in Chicago, a safe and creative space where we collaborate in powerful ways to end women's mass incarceration. No matter where you are on your journey, the center offers a variety of peer-led programs and events that facilitate support, connection, healing, growth and "real justice" for our sisters on both sides of the wall.

Mutual Support &
Service Connections

Monthly Reentry
Circles & Events

Advocacy & Arts

Networking &
Professional
Development

Safe Meeting Space

Basic Needs
(toiletries + supplies)

Sign up for more information: <https://bit.ly/thereclamationproject>

We are the change we have been waiting for.

The Reclamation Project is a program of the Women's Justice Institute (WJI).
2150 South Canalport Avenue, Suite 4A-1, Chicago, Illinois 60608 www.womensjusticeinstitute.org



Top 10 Health & Well-Being Recommendations

REDEFINING THE NARRATIVE | HEALTH & WELL-BEING

5B.3

- 1** Create a historic Illinois Gender Index to monitor key metrics and conditions that contribute to women's health and well-being
- 2** Launch a statewide plan to ensure women's access to gender responsive health & behavioral health services
- 3** Expand police deflection opportunities and peer-led co-responder models that are accompanied by access to gender responsive resources
- 4** Pass sentencing reforms that promote decarceration among women who are struggling with health and behavioral health issues
- 5** Launch gender responsive training for court personnel statewide & expand court diversion opportunities that shift responses to women's needs into the public health system and community safety nets and supports
- 6** Establish a comprehensive system of coordinated health and behavioral health care for women throughout jails and prisons statewide
- 7** Overhaul crisis response & disciplinary policies for women in jails and prisons
- 8** Create a robust pre-release process that ensures all women are linked to a medical home, health insurance and other benefits
- 9** Launch a comprehensive public health strategy that centers on reducing women's length of stay in prison
- 10** Launch a gender responsive coordinated care model that leverages a network of resources to support women on probation and parole statewide



Partnering with the Reclamation Center



COMPLETE OUR PARTNERSHIP
REQUEST FORM HERE

The WJI has launched the Reclamation Center, a creative, restorative space in Chicago where we collaborate in powerful ways to end women's mass incarceration. This space is dedicated to building community, mutual support, arts and advocacy, training, leadership development and networking.

Through the Reclamation Center, we partner to offer events, programs and services that are specifically designed to benefit system-impacted women and gender expansive individuals in multiple ways. Please complete this form to share how you would like to use the center and partner with our team.

Partner with Us:


<https://www.womensjusticeinstitute.org/reclamation-project>

Read Our Report:

<https://redefine.womensjusticeinstitute.org/>

Contact Us:

Elizabeth Cruz : elizabeth@womensjusticeinstitute.org



Learn More

womensjusticeinstitute.org

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