



Trauma and Victimization of Incarcerated Women

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The number of women incarcerated has **skyrocketed** since the 1980s—there are over 200,000 women incarcerated now compared to approximately 26,000 in 1980. **Factors** that have contributed to the growth of incarcerated women include marginalization and poverty, gender discrimination, and prior trauma and abuse. Although a smaller percentage of all women incarcerated, transgender women face higher risks of contact with the criminal justice system and victimization while incarcerated. These women can be **incarcerated** based on their existence and visibility. Jails and prisons further traumatize and re-traumatize women through their policies and practices, lack of programming offered to women, and cross-gender supervision.

Carceral settings often lack awareness and understanding of women’s experiences of being victimized prior to custody. These settings can **re-victimize** women due to the inherent power imbalances, limited movement, and freedom. Both men and women report the **fears of being victimized** while incarcerated; however, women are overwhelmingly more likely to report being victimized. It often looks like sexual assaults (inmate-on-inmate and staff-on-inmate), power and control of items and privileges, and correctional procedures.

Experiences of Incarcerated Women

Stories of **sexual misconduct** behind bars seem to make headlines yearly. Despite only accounting for **13 percent** of the jail population, 27 percent of women reported inmate-on-inmate sexual victimization, and 67 percent reported staff-on-inmate victimization between 2009 and 2011. Women are **four times** more likely to self-report sexual victimization than men in prison and twice as likely in jails. Although the passing of the **Prison Rape Elimination Act of 2003** provided staff and incarcerated persons access to report misconduct through hotlines and reporting, there remain ongoing challenges to making these reports.

In addition, women often experience **disciplinary actions** at higher rates than men for small infractions. There is a troubling trend of facilities denying access to menstrual products, which can lead to humiliation and being forced to live in unsanitary conditions. Women and other menstruating persons can be penalized for breaking facility rules related to **menstruation**. These rules include damaging property via bleeding on facility-issued property, contraband if makeshift products are used, and “feigning” period-related symptoms. These disciplinary actions for menstruating persons can lead to a loss of work assignments, financial hardship if facilities require people to pay for these hygiene items, loss of privileges such as visitations, programming, and even segregation.

For the **transgender community**, carceral settings further marginalize them by continuing to house these women in men’s facilities, lack basic gender-affirming care, and expose transwomen to higher rates of violence and victimization. Housing transwomen in men’s facilities continue to exacerbate the number of

assaults. Due to the higher risk of violence and assaults on transgender women, these individuals are **disproportionately** placed in segregation or separation for their own protection. States like **Tennessee** have specifically implemented policies that restrict access to gender-affirming care. Restricting access to gender-affirming care or disregard for a person's identity can lead to higher risks of suicide.

Incarcerated women experience **higher rates of trauma** and abuse than men both in and out of custody through interpersonal trauma, exposure, Post-Traumatic Stress Disorder, and general victimization. Correctional procedures do not account for women's trauma histories and can, in turn, reactivate and further traumatize women. Survivors of trauma can perceive basic procedures such as strip searches and restraint practices as threats and respond by fighting, fleeing, or freezing that can result in further punishments. To support the unique needs and challenges of women, facilities should promote more gender-specific programming and evaluate policies and procedures related to cross-gender supervision.

Structural Impacts of Gendered Programming

Despite these pervasive challenges, women are often **overlooked** in facilities and become the "forgotten inmates" and are without equal access to treatment, programs, or services. Programming that is focused on addressing violence and trauma is oftentimes available to men, even though women are overwhelmingly survivors of violence prior to incarceration. The terms "gender-responsive" and "trauma-informed" are becoming the necessary standard for jails and prisons, and although facilities have shown familiarity with these terms, it is unknown if programming aligned with these practices are being **implemented**. Gender-responsive and trauma-informed **programs** recognize the multi-faceted aspects of women's lives that led them to incarceration, which can include trauma, caregiving responsibilities, economic dependence, coercive relationships, and chronic instability. Several **evidence-based programs** address trauma while incarcerated, such as **Seeking Safety, Moving On, Beyond Trauma, Roadway to Freedom**; however, these programs are not typically available due to operational and budgetary, strict eligibility requirements, and **shorter sentences**. **Statistically**, gender-responsive and trauma-informed programs significantly decrease mental health symptoms and behavioral issues while incarcerated.

Further, most facilities across the United States allow **cross-gender supervision**—meaning men are able to supervise or work in women's units. Though working with incarcerated women can be a unique challenge, as the field of corrections is primarily male-dominated. There are mixed feelings from women about being supervised by men, with some **reports** noting that women tend to feel more comfortable interacting or raising concerns with other women. Additionally, regarding inappropriate relationships, the **integrity** of the staff outweighs the gender supervising them. Women working in corrections can impact incarcerated women at both a **policy** and an individual level. When women are involved at all levels of facility management, there is a greater likelihood that policies will be more suitable and adapted to meet women's needs rather than minor "fixes" to match a male-oriented model.

Avenues to Reduce Victimization

Although the victimization of women while incarcerated may not be completely eliminated, more robust policies and procedures can be implemented to protect women.

- **Adapt custodial practices to be more trauma-informed.** Practices such as strip searches, restraints, and disciplinary actions can re-traumatize women with a trauma history. Modifying invasive processes

and procedures, such as the use of a body scanner, only allowing same-gendered searching, or implementing de-escalation techniques instead of restraints, can work to reduce the risk of re-traumatization. At [Coffee Creek Correctional Facility](#) in Oregon, medical and mental health staff are called before a cell extraction to evaluate the person prior to use of force. When cross-gendered supervision is necessary in facilities, [structural modifications](#), such as installing obscure glass for showers, also needs to be considered to ensure privacy without impeding safety and security measures.

- **Create gender-specific policy and practices for women’s housing units and/or facilities.** [Women-only facilities](#) typically have different rules and policies than co-ed facilities. These women-only facilities are designed differently to create more therapeutic atmospheres, modify practices at every point of contact, including increasing privacy while in intake, and increasing the number of programs targeted at women’s needs, such as parenting and vocational training. There are only 26 states that require free feminine hygiene products, [Ohio](#) being the most recent. Providing access to free sanitary products will help protect women from creating dangerous health situations for themselves and would eliminate disciplinary actions for makeshift “contraband.”
- **Annual gender-responsive training for staff.** Increased training for staff around gender-responsive and trauma-informed practices creates a culture shift and a greater awareness of the specific needs of working with people with trauma histories. Washington State Department of Corrections [Policy 590.370](#) specifically mandates training for employees, staff, and volunteers in the foundations of gender-responsive care, practices, and communication skills.
- **Increase the number of gender-responsive programs offered.** Increasing the number of [programs](#) that target women’s specific needs can help reduce behavioral concerns while incarcerated and assist in helping women once released to their communities. Although there needs to be more longitudinal research studies to evaluate program effectiveness, adding programs that address gender-specific concerns like parenting, life skills, mental health, and substance use can be a first step to healing for women.
- **Promote healthy relationships to build support networks.** Creating a support network is both necessary and difficult in corrections settings. [Social support](#) is a protective factor against stress while incarcerated and can help emotional well-being. However, it can be challenging for those incarcerated to find that support network due to gossip, petty disputes, and verbal abuse from others. Implementing peer support programs or peer mentors in facilities that allow women to help other women through their time can be greatly beneficial. The [Dobson-Davis Women’s Facility](#) in California recently expanded their peer mentor program that encourages women to understand pathways to trauma.
- **Implement specific policies for transgender women.** Specify facility [policies](#) that address the needs of transgender women that include gender-affirming health care, housing practices for transgender individuals in both women-only and co-ed facilities, and increase training for staff around best practices when working with transgender individuals. A few states have begun allowing individuals to be housed in accordance with their identified gender. [Minnesota](#) is one of those states that has transferred transgender women to a women-only facility.