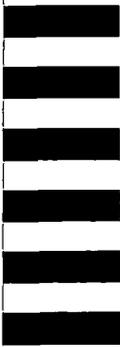


**Beyond Gender Barriers:  
Programming Specifically for Girls  
Training of Trainers**

**BACKGROUND READING FOR TRAINERS**

224933



**OJJDP**

The Office of Juvenile Justice  
and Delinquency Program

**JAIBG**

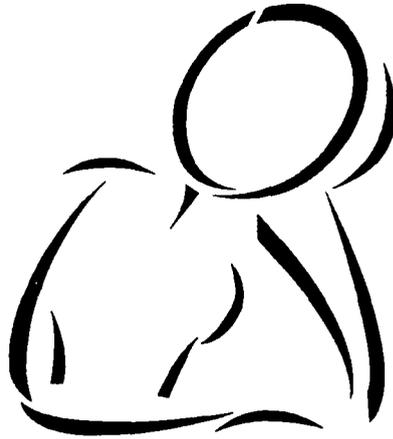
Juvenile Accountability Incentive  
Block Grants Program

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224933

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**Beyond Gender Barriers:  
Programming Specifically for Girls  
Training of Trainers**

**BACKGROUND READING FOR TRAINERS**



**The Office of Juvenile Justice and Delinquency Program**

Prepared by Northwest Regional Educational Laboratory under contract with  
Greene, Peters & Associates, 1018 16th Avenue, North, Nashville, Tennessee



## ***BACKGROUND READING FOR TRAINERS***

The following titles are provided as background reading for trainers conducting the *Beyond Gender Barriers* curricula. In some cases, we provide a summary of a lengthy publication and information on how to access the entire document. Some documents are also available on the Gender-specific Programming for Girls Web site at [www.girlspecificprogram.org](http://www.girlspecificprogram.org). These articles are indicated with “Web site” after their titles.

1. **Research Summary for Female Adolescent Aggression: A Review of the Literature and the Correlates of Aggression** (Web site)—The increase in female adolescent aggression is of growing concern for those working with girls in the juvenile justice system. This two-page overview provides highlights from a 60-page literature review of 46 international studies on the factors associated with female adolescent aggression.
2. **Relational Aggression, Gender, and Social-Psychological Adjustment**—Dr. Crick’s work on relational aggression has contributed to the understanding of development of aggression in girls. This 13-page study (including references) provides the reader with purpose, methodology, and results of an important research project on aggression in children conducted by Drs. Nicki R. Crick and Jennifer K. Grotperter at the University of Illinois at Urbana-Champaign. It may be of particular interest to psychologists and other mental health professionals working with girls.
3. **Adolescent Motherhood: Implications for the Juvenile Justice System** (Web site)—Two recent reports on a Robinhood Foundation research project suggest that reducing adolescent pregnancy can help reduce juvenile violence and victimization. This two-page fact sheet published by the OJJDP summarizes the key findings of *Kids Having Kids: A Robinhood Foundation Special Report on the Costs of Adolescent Childbearing* and *Abuse and Neglect: Effects of Early Childbearing on Abuse and Neglect of the Children*. It also provides information on where to obtain the reports.
4. **How to Work Effectively with Girls: Promising Practices in Gender-Specific Interventions** (Web site)—This five-page article by Charlotte Ryan and Sandra Lindgren outlines the essential components for gender-specific interventions for girls in the juvenile justice system and describes a successful girl-specific program in Minnesota.
5. **Doing Time in Timelessness: The Yoga of Prison**—This two-part, five-page details the experiences of Sarahjoy Marsh as a volunteer yoga instructor for incarcerated women at an Oregon state prison. Marsh voices awareness for the complexity of her students’ lives and a compassionate yet clear understanding for creating realistic expectations and healthy boundaries.

6. **Working with Girls: Exploring Practitioner Issues, Experiences, and Feelings**—This 30-page report of the Hawaii Girls Project (HGP) shares staff perspectives, experiences, and feelings about girls' issues and their own issues working with girls. Training participants may see their own perceptions validated and decisionmakers will have insight into the unique issues of gender-specific programming. Principal Investigator and co-author is Dr. Meda Chesney-Lind.
7. **Investing in Girls: A 21<sup>st</sup> Century Strategy** (Web site)—In this 11-page report Leslie Acoca, Director of the Women and Girls Institute, National Council on Crime and Delinquency, analyzes the importance of addressing the needs of girls in the criminal justice system or at risk of offending. In addition, she offers legislative and programming solutions.
8. **The Female Intervention Team (FIT)**—In this report, Marian D. Daniel, Baltimore City Area Director for Maryland's Department of Juvenile Justice, examines the development of a successful gender-specific community based supervision team. Daniel shares specific strategies on how to re-organize existing resources and collaborate with community agencies to create programs that address girls' needs. FIT is included as a "Best Practice" in *Guiding Principles for Promising Female Programming: An Inventory of Best Practices*.
9. **National Girls' Caucus**—LaWanda Ravoira, President and CEO for PACE Center for Girls and President of the National Girls Caucus, describes the Caucus' organized advocacy efforts for girls.
10. **Women, Girls & Criminal Justice, Vol. 1 No. 1, December/January 2000**—This 16-page journal includes current articles on the need for and components of gender specific programming; analysis of effective treatment programs for women; book reviews of current literature on issues that affect girls and women; policy analysis; and findings of research on women incarcerated for murdering abusive spouses. It is a compact resource for administrators and practitioners. To obtain additional copies, contact Civic Research, 609-683-4450.
11. **Physical Activity & Sport in the Lives of Girls: Physical & Mental Health Dimensions from an Interdisciplinary Approach** (Web site)—This is a 10-page summary and overview of a 126-page interdisciplinary report that examines the complex interplay of physical activity and sport with the development of the whole girl. Key research findings and suggestions for practical application are of particular use for program development and implementation.



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# Research Summary

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CORRECTIONS RESEARCH AND DEVELOPMENT

Vol. 5 No. 3

May 2000

## ADOLESCENT FEMALE AGGRESSION

**Question:** Is the aggression of adolescent girls different from the aggression of adolescent boys?

**Background:** Fear of crime has considerable influence on the behaviour of people and the actions of governments. Citizens may curtail walking at night, add security alarms to their homes and avoid driving in certain areas. Governments improve policing and introduce interventions to reduce criminal behaviour. Fear of crime committed by youthful offenders is particularly high.

Even though the fear of crime is high, officially reported crime has actually been decreasing in recent years. Violent crime among young offenders in Canada has also decreased during the last five years. However, since 1995 violent crime among *female* youths has risen whereas the rate for male youths has fallen. While adolescent males continue to commit more crimes than adolescent females, the accelerated rate among adolescent females raises questions as to the cause and nature of this aggression-gender gap. Improved understanding of adolescent aggression, especially the aggressive acts committed by young women, would lead to more effective policies and practices designed to reduce adolescent violence.

**Method:** A literature review on the prediction and assessment of aggression by girls between the ages of 12 to 17 was conducted. This age range defines the ages of young offenders in Canada. Forty-six studies published between 1991 and 1999 provided information on the factors associated with adolescent female aggression. This information was further grouped into eight categories (e.g., cognition, family, school, etc.). The studies were all published in English but reflected an international literature that included reports from diverse countries such as Finland and Australia.

**Answer:** From the literature review, it was apparent that the *form* of aggression can differ between boys and girls. Males are far more likely to engage in physical aggression than females. However, recent research has broadened the definition of aggression to include verbal threats and intimidation that is intended to disrupt social relationships. When threats and intimidation are considered, girls are found to be more aggressive than previously thought. Moreover, evidence suggests the possibility that as some girls age, the form of aggression shifts from verbal threats and gossip intended to harm

relationships to physical aggression.

Regardless of the form of aggression displayed, there is remarkable similarity in the factors associated with aggressive behaviour for males and females. For example, parental aggression, antisocial peers and behavioural and academic problems in school were all associated with aggressive behaviour among girls just as these variables are found related to violence among boys. There were also a few notable differences. Young, depressed women were nearly four times more likely to be aggressive and girls who were physically or sexually victimised were at a higher risk for violence.

### **Policy Implications:**

1. Crime prevention and treatment programs need to be attentive to the different ways that young women express aggressive behaviour. Targeting indirect, non-physical forms of aggressive behaviour may prevent direct, physical forms of violence.
2. Verbal aggression and intimidation among pre-adolescent girls may be helpful in identifying those who run the risk of developing into physically violent adolescents.
3. Interventions designed to prevent female adolescent violence should target not only factors associated with male adolescent violence but also depression and victimisation, factors specific to female aggression.

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**Source:** Leschied, A., Cummings, A., Van Brunschot, M., Cunningham, A., & Saunders, A. (2000). *Female Adolescent Aggression: A Review of the Literature and the Correlates of Aggression* (User Report No. 2000-04). Ottawa: Solicitor General Canada.

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# Relational Aggression, Gender, and Social-Psychological Adjustment

Reprinted, with permission, by Crick & Grotpeter in the *Child Development Journal*: "Relational Aggression, Gender, and Social-Psychological Adjustment," Nicki R. Crick and Jennifer K. Grotpeter, *Child Development*, June 1995, v. 66, no. 3, pp. 710-722.

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CRICK, NICKI R., and GROTPETER, JENNIFER K. *Relational Aggression, Gender, and Social-Psychological Adjustment*. *CHILD DEVELOPMENT*, 1995, 66, 710-722. Prior studies of childhood aggression have demonstrated that, as a group, boys are more aggressive than girls. We hypothesized that this finding reflects a lack of research on forms of aggression that are relevant to young females rather than an actual gender difference in levels of overall aggressiveness. In the present study, a form of aggression hypothesized to be typical of girls, relational aggression, was assessed with a peer nomination instrument for a sample of 491 third- through sixth-grade children. Overt aggression (i.e., physical and verbal aggression as assessed in past research) and social-psychological adjustment were also assessed. Results provide evidence for the validity and distinctiveness of relational aggression. Further, they indicated that, as predicted, girls were significantly more relationally aggressive than were boys. Results also indicated that relationally aggressive children may be at risk for serious adjustment difficulties (e.g., they were significantly more rejected and reported significantly higher levels of loneliness, depression, and isolation relative to their nonrelationally aggressive peers).

Because of the deleterious effects of conduct problems on children's development (see Parker & Asher, 1987, for a review), a great deal of research has been conducted on aggression in the past decade (e.g., see Dodge & Crick, 1990; Parke & Slaby, 1983, for reviews). Although significant advances have been made in our understanding of childhood aggression, one limitation of this research has been the lack of attention to gender differences in the expression of aggression (cf. Robins, 1986). Prior studies demonstrate that, as a group, boys exhibit significantly higher levels of aggression than do girls (see Block, 1983; Parke & Slaby, 1983, for reviews), a difference that persists throughout the life span (Eagly & Steffen, 1986; Hyde, 1986; Kenrick, 1987). Not surprisingly, these findings have been interpreted as an overall lack of aggressiveness in girls' peer interactions. However, an alternative explanation is that the forms of aggression assessed in past research are more salient for boys than for girls. If so, young females may exhibit unique forms of aggression, forms that have been overlooked in past research.

Although specific definitions have varied over the years, aggression has been generally defined by most authors as behaviors that are intended to hurt or harm others (e.g., Berkowitz, 1993; Brehm & Kassin, 1990; Gormly & Brodzinsky, 1993; Myers, 1990; Vander Zanden, 1993). We propose that, when attempting to inflict harm on peers (i.e., aggressing), children do so in ways that best thwart or damage the goals that are valued by their respective gender peer groups. As past research has consistently shown, boys tend to harm others through physical and verbal aggression (e.g., hitting or pushing others, threatening to beat up others). These behaviors are consistent with the types of goals that past research has shown to be important to boys within the peer-group context, specifically, themes of instrumentality and physical dominance (see Block, 1983, for a review). These types of concerns are not as salient for most girls, however. In contrast to boys, girls are more likely to focus on relational issues during social interaction (e.g., establishing close, intimate connections with others) (see Block, 1983, for a review). In the present study,

This research was funded by a grant from the University of Illinois Research Board to the first author. Portions of this study were presented at the meeting of the Society for Research in Child Development, March 1993, New Orleans. The authors would like to thank the principals, teachers, and students of Coppenbarger, Garfield, Harris, and Stevenson Elementary Schools for their assistance with the study. Special thanks also to Aaron Ebata for his invaluable comments on earlier drafts of this article. Please send correspondence regarding this manuscript to the first author at Human Development and Family Studies, 1105 West Nevada Street, University of Illinois, Urbana, IL 61801.

we hypothesized that aggressive behavior among girls would be consistent with their social concerns, similar to the pattern found for boys. Specifically, we hypothesized that girls' attempts to harm others would focus on relational issues and would include behaviors that are intended to significantly damage another child's friendships or feelings of inclusion by the peer group (e.g., angrily retaliating against a child by excluding her from one's play group; purposefully withdrawing friendship or acceptance in order to hurt or control the child; spreading rumors about the child so that peers will reject her). Thus, we expected that girls would be most likely to harm peers through relational aggression (i.e., harming others through purposeful manipulation and damage of their peer relationships) whereas boys would be most likely to harm peers through overt aggression (i.e., harming others through physical aggression, verbal threats, instrumental intimidation).

Although gender differences in the forms of aggression that children exhibit were postulated years ago (Feshbach, 1969), very little relevant research has yet been conducted. In one of the earliest studies on this topic, Feshbach (1969) observed first graders' responses to unfamiliar peers. She found that girls were significantly more likely than boys to respond to the unfamiliar peer with behaviors that, although referred to by the author as "indirect aggression," appear similar to those specifically defined here as relational aggression (e.g., rejection and social exclusion):

This pattern of results has also been documented for older children. In a more recent study, Cairns, Cairns, Neckerman, Ferguson, and Garipey (1989) asked fourth through ninth graders to describe recent conflicts with peers. Content analysis of children's responses revealed that same-gender conflicts among girls were significantly more likely than boys' conflicts to involve themes of social alienation and manipulation of peer acceptance (i.e., themes that are consistent with relational aggression). Using a Finnish sample of fifth graders, Lagerspetz, Bjorkqvist, and Peltonen (1988) used a peer-rating scale to assess gender differences in children's use of several types of behaviors, some of which were relationally aggressive. Although their instrument confounded relational aggression with nonverbal aggression, their results were similar to those of the previously described research (i.e., girls exhibited significantly higher levels of relational/nonverbal aggression than did boys).

These investigations provide initial support for the hypothesis that relationally aggressive behaviors are present in children's peer interactions and that girls are more likely than boys to exhibit them. However, despite the conduct of hundreds of studies on the general topic of childhood aggression in the past several decades (see Dodge & Crick, 1990; Parke & Slaby, 1983, for reviews), no systematic research has been conducted on relational aggression. Thus, no information has yet been generated on the correlates of relational aggression or the characteristics of the children who exhibit it (i.e., other than the previously described gender differences). Given the potentially serious consequences of aggression for children's adjustment (see Parker & Asher, 1987, for a review), it seems important to initiate research in this relevant, but unexplored domain. This is particularly true given that this form of aggression may be most characteristic of young females, a group whose behavioral difficulties have received scant attention in past research. The present research was designed as an initial attempt to address these issues.

We had four goals for the present study: (1) to develop a reliable measure of relational aggression, one that did not confound relational aggression with other forms of aggression; (2) to assess gender differences in relational aggression; (3) to assess the degree to which relational aggression is distinct from overt aggression (i.e., physical and verbal aggression as assessed in most of the past research in this area); and (4) to assess whether relational aggression is related to social-psychological maladjustment. We hypothesized that relational aggression would be related to, but also relatively distinct from, overt aggression. Further, we expected girls to be more relationally aggressive than boys. Also, similar to overtly aggressive children (Bukowski & Newcomb, 1984; Coie & Kupersmidt, 1983; Dodge, 1983; Parker & Asher, 1987), we expected relationally aggressive children to be more socially and psychologically maladjusted than their non-aggressive peers.

To address our goals, a peer nomination scale was constructed and used to assess relational aggression and overt aggression. Peers were selected as informants for two reasons. First, peer nominations have been used extensively in past research to identify aggressive children (e.g., Coie & Dodge, 1983; Dodge, 1980; Dodge & Frame, 1982; Perry, Perry, & Rasmussen, 1986). Second, it was thought that relationally aggressive

behaviors, because of their relatively indirect nature and focus on peer relationships, might be difficult for those outside the peer group (e.g., teachers, researchers) to reliably observe and evaluate in naturalistic settings (cf. Lagerspetz et al., 1988). Thus, it was judged that peers would be the best informants, a method that has the additional advantage of providing multiple assessments of behavior (i.e., because each child is evaluated by all of his or her classmates as opposed to only one teacher, for example). In addition to the peer nomination instrument, subjects also completed several instruments designed to assess social-psychological adjustment (i.e., peer status, depression, loneliness, social anxiety, social avoidance, and perceptions of peer relations). These aspects of adjustment were chosen because past research has shown them to be predictive of concurrent and/or future socio-emotional difficulties (e.g., Asher & Wheeler, 1985; Crick & Ladd, 1993; Franke & Hymel, 1984; Kovacs, 1985; Parker & Asher, 1987). Thus, they would allow for an assessment of the adjustment risk status of relationally aggressive children.

## Method

### Subjects

A total of 491 third- through sixth-grade children from four public schools in a moderately sized midwestern town participated as subjects.<sup>1</sup> The sample included 128 third (65 girls and 63 boys), 126 fourth (56 girls and 70 boys), 126 fifth (57 girls and 69 boys), and 111 sixth graders (57 girls and 54 boys). Approximately 37% of the sample was African-American, 60% was European-American, and 3% represented other ethnic groups. Each subject had parental consent to participate in the study (consent rate was above 82%).

### *Peer Assessment of Relational Aggression and Other Aspects of Social Adjustment*

A peer nomination instrument was used to assess social adjustment. This instrument, which consisted of 19 items, included a peer sociometric and four subscales designed to assess social behavior: relational aggression,

overt aggression, prosocial behavior, and isolation. These particular indices were selected because they represent the constructs that have been used most extensively in past research to evaluate children's social adjustment (i.e., peer status, aggression, withdrawal, prosocial behavior) (Crick & Dodge, 1994).

Overt aggression was assessed with a three-item peer nomination scale. The items included in this scale assessed physical and verbal aggression and were drawn from those used in prior research (e.g., Asher & Williams, 1987; Coie & Dodge, 1983; Dodge, 1980; refer to Table 1 for a description of the items). Relational aggression was assessed with a five-item nomination scale that was developed for use in the present project (refer to Table 1 for item descriptions). Items included in this scale describe behaviors that represent purposeful attempts to harm, or threats to harm, another's peer relationships (e.g., telling a friend that you will not like her anymore unless she does what you tell her to do). A pool of relational aggression items, designed to fit the proposed definition, was initially generated by the authors. Selection of the subsequently chosen items and specific wording of each was based on pilot testing with grade-school-age children.

The prosocial behavior scale consisted of five items (e.g., peers who help others), and the isolation scale consisted of four items (e.g., peers who play alone at school, peers who seem lonely at school). The items included in these scales were based on those used in past research (e.g., Asher & Williams, 1987; Crick & Dodge, 1989). The peer sociometric consisted of two items, nominations of liked and disliked peers (positive and negative nominations). These items have been used extensively in past research to assess peer acceptance and rejection (see Crick & Dodge, 1994, for a review).

During the administration of the peer nomination instrument, children were provided with a class roster and were asked to nominate up to three classmates for each of

<sup>1</sup> Due to practical constraints at the participating schools, we were not able to collect complete information for the self-report measures for some of the children who were absent during the class sessions or who skipped a question during testing (i.e., we were able to do make-up sessions with some, but not all, of these subjects). Because we had no reason to suspect bias in the part of the sample with incomplete information, we used all of the available subjects with complete information for a particular analysis. The total number of children who completed each instrument varied from 462 to 491 (refer to the residual degrees of freedom for each analysis to determine the number of subjects for each analysis).

TABLE 1  
FACTOR LOADINGS FOR THE PEER NOMINATION INSTRUMENTS

| ITEM                                                                                      | FACTOR              |                     |                          |                       |
|-------------------------------------------------------------------------------------------|---------------------|---------------------|--------------------------|-----------------------|
|                                                                                           | Prosocial/<br>Happy | Overt<br>Aggression | Relational<br>Aggression | Isolation/<br>Unhappy |
| Good leader .....                                                                         | .789                | ...                 | ...                      | ...                   |
| Does nice things for others .....                                                         | .884                | ...                 | ...                      | ...                   |
| Helps others .....                                                                        | .899                | ...                 | ...                      | ...                   |
| Cheers up others .....                                                                    | .855                | ...                 | ...                      | ...                   |
| Seems happy at school .....                                                               | .832                | ...                 | ...                      | ...                   |
| Hits, pushes others .....                                                                 | ...                 | .906                | ...                      | ...                   |
| Yells, calls others mean names .....                                                      | ...                 | .823                | ...                      | ...                   |
| Starts fights .....                                                                       | ...                 | .884                | ...                      | ...                   |
| When mad, gets even by keeping the person from being in their group of friends .....      | ...                 | ...                 | .763                     | ...                   |
| Tells friends they will stop liking them unless friends do what they say .....            | ...                 | ...                 | .772                     | ...                   |
| When mad at a person, ignores them or stops talking to them .....                         | ...                 | ...                 | .837                     | ...                   |
| Tries to keep certain people from being in their group during activity or play time ..... | ...                 | ...                 | .727                     | ...                   |
| Plays alone a lot .....                                                                   | ...                 | ...                 | ...                      | .911                  |
| Seems sad at school .....                                                                 | ...                 | ...                 | ...                      | .916                  |
| Seems lonely at school .....                                                              | ...                 | ...                 | ...                      | .916                  |

NOTE.—All other factor loadings were less than .300 except for two items with loadings of .380 and .376. These were considered insubstantial given the relatively high loadings presented above.

the items. The number of nominations children received from peers for each of the items (for each child, these scores could range from 0 to the total number of children in his or her class minus 1) was summed and then standardized within each classroom. The standardized scores for the overt aggression, relational aggression, prosocial behavior, and isolation scales were summed to yield four total scores (e.g., children's standardized scores for each of the three items on the overt aggression scale were summed to create a total score).

*Classification of aggressive groups.*—Children's relational (RAGG) and overt (OAGG) aggression scores were used as continuous variables in subsequent analyses and also to identify groups of aggressive versus nonaggressive children. Children with scores one standard deviation above the sample means for RAGG, OAGG, or both (RAGG and OAGG) were considered aggressive, and the remaining children were considered nonaggressive. This procedure allowed for the identification of children high and low in relational aggression and children high and low in overt aggression, resulting in four distinct groups: (1) nonaggressive (RAGG and OAGG both low);

(2) overtly aggressive (RAGG low, OAGG high); (3) relationally aggressive (RAGG high, OAGG low); and (4) combined overtly and relationally aggressive (RAGG and OAGG both high). This procedure resulted in the identification of 371 nonaggressive children, 41 overtly aggressive children, 46 relationally aggressive children, and 33 overtly plus relationally aggressive children.

*Classification of sociometric status groups.*—The positive and negative sociometric nominations children received from their classmates were used to identify five sociometric status groups, popular, average, neglected, rejected, and controversial children, using the procedure described by Coie and Dodge (1983) (except for those in the average group who were identified using the criteria described by Coie, Dodge, & Coppotelli, 1982). This procedure resulted in the identification of 63 popular, 153 average, 69 neglected, 56 rejected, and 26 controversial status children.

#### *Self-Report Social-Psychological Adjustment Indices*

*Loneliness.*—The Asher and Wheeler (1985) loneliness scale was used to assess children's feelings of loneliness and social

dissatisfaction. This scale, an instrument with demonstrated reliability and validity (e.g., Asher & Wheeler, 1985; Asher & Williams, 1987; Crick & Ladd, 1993), consists of 16 items that assess loneliness at school (e.g., I feel alone at school) and eight filler items (e.g., I like music). Possible responses to each item range from 1 (Not at all true about me) to 5 (Always true about me). Children's responses to the loneliness items were summed yielding total scores that could range from 16 (low loneliness) to 80 (high loneliness). Cronbach's alpha for children's responses to the loneliness scale was .91.

*Social anxiety and avoidance.*—The Franke and Hymel (1984) social anxiety scale, an instrument with demonstrated reliability and validity (e.g., Crick & Ladd, 1993; Franke & Hymel, 1984), was used to assess social anxiety and social avoidance. This instrument consists of two subscales, social anxiety (e.g., I usually feel nervous when I meet someone for the first time) and social avoidance (e.g., I often try to get away from all the other kids), each of which include six items. Possible responses to each item range from 1 (Not at all true about me) to 5 (Always true about me). Children's responses to the items were summed for each subscale yielding total scores that could range from 6 (low anxiety/avoidance) to 30 (high anxiety/avoidance). Cronbach's alpha for children's responses to the social anxiety and social avoidance scales was .69 and .74, respectively.

*Depression.*—The Children's Depression Inventory (CDI) was used to assess children's feelings and symptoms of depression (Kovacs, 1985). This measure consists of 27 items, all of which assess depression. Each item consists of three related statements, and children respond by selecting the one statement that best fits how they feel (e.g., I am sad once in a while vs. I am sad many times vs. I am sad all the time). Items are scored from 0 to 2, with higher scores indicating more evidence of depression. Two modifications were made to this instrument prior to its use in the present study, both of which were motivated by ethical concerns. First, two items were dropped from the measure due to content that was considered too sensitive for use in the participating schools (i.e., an item that focused on suicidal ideation and an item concerned with self-hate). Second, five positively toned filler items that were neutral in content were added to the instrument (e.g., I like swimming a lot vs. I like swimming a little vs. I

do not like swimming) in an attempt to balance the negative tone of the CDI items. Cronbach's alpha for children's responses to the 25 depression items was .85.

*Perceptions of peer relations.*—An adaptation of the Children's Peer Relations Scale (Crick, 1991) was used to assess children's perceptions of their peer interactions. This instrument is designed to assess six aspects of children's perceptions of their interactions with peers at school: perceived peer acceptance, isolation from peers, negative affect, engagement in caring acts, engagement in overt aggression, and engagement in relational aggression. Specifically, the perceived peer acceptance subscale (three items) assesses the degree to which children feel liked by peers at school (e.g., Some kids have a lot of classmates who like to play with them. How often do the kids in your class like to play with you?). The isolation from peers subscale (two items) assesses the degree to which children perceive themselves as loners at school (e.g., Some kids play by themselves a lot at school. How often do you do this?). The negative affect subscale (three items) assesses the degree to which children feel lonely, sad, or upset at school (e.g., Some kids feel upset at school. How often do you feel this way?). The engagement in caring acts subscale (four items) assesses children's perceptions of the degree to which they direct prosocial behaviors toward their peers (e.g., Some kids try to cheer up other kids who feel upset or sad. How often do you do this?). The engagement in overt aggression subscale (three items) assesses children's perceptions of the degree to which they direct overtly aggressive acts toward their peers (e.g., Some kids hit other kids at school. How often do you do this?). The engagement in relational aggression subscale (five items) assesses children's perceptions of the degree to which they direct relationally aggressive behaviors toward their peers (e.g., Some kids tell their friends that they will stop liking them unless the friends do what they say. How often do you tell friends this?). The last two subscales, engagement in overt and relational aggression, were designed to parallel those included in the peer-nomination measure of aggression.

Possible responses to the items on the Children's Peer Relations Scale range from 1 (Never) to 5 (All the time). Responses to the items in each subscale were summed to yield total scores. Due to substantial item content overlap with other measures used in this study (e.g., CDI), children's negative affect scores were not analyzed. An analysis of

internal consistency showed that children's responses to the items were reliable with Cronbach's alpha = .74, .76, .66, .82, and .73 for the perceived acceptance, caring acts, peer isolation, overt aggression, and relational aggression subscales, respectively for the present sample. Support for the construct validity of the Children's Peer Relations Scale (CPRS) has also been demonstrated in past research (e.g., rejected, overtly aggressive children report significantly higher levels of overt aggression on the CPRS relative to peers; rejected, withdrawn children report significantly higher levels of isolation and lower levels of peer acceptance relative to peers) (Crick, 1991).

#### *Administration Procedures*

The previously described instruments were completed by subjects during two 60-min group assessment sessions (session A and session B) conducted within children's classrooms. These sessions were conducted by the authors, who employed standardized procedures. During each session, children were trained in the use of the response scales prior to administration of the instruments. Each item of every instrument was read aloud by the administrator, and assistants were available to answer children's questions. Sessions A and B were administered to classrooms in a random order, and the two sessions occurred approximately 1 week apart.

During session A, children completed the peer sociometric and behavior nomination measure, the Asher and Wheeler (1985) loneliness scale, the Franke and Hymel (1984) social anxiety scale, and one additional instrument that was not part of the present study. The peer nomination instrument was always administered first (to help insure that children would not be focused on the nominations they gave to others at the end of the session), however, the order of the loneliness and social anxiety scales was determined randomly. During session B, children completed the Children's Peer Relations Scale (Crick, 1991), the Children's Depression Inventory (Kovacs, 1985), and two additional instruments that were not part of the present study. The four instruments included in session B were presented in a random order.

## **Results**

### *Assessment of Relational Aggression*

A principal components factor analysis with VARIMAX rotation of the factors was

first conducted on the scores children received from the peer nomination instrument to assess whether relational aggression would emerge as a separate factor, independent of overt aggression. This analysis yielded the four predicted factors (prosocial behavior, overt aggression, relational aggression, and isolation), and these factors accounted for 79.1% of the variation in the scores. Specifically, the prosocial factor accounted for 34.0% of the variation (eigenvalue = 5.10), the overt aggression factor accounted for 23.9% (eigenvalue = 3.59), the relational aggression factor accounted for 13.5% (eigenvalue = 2.02), and the isolation factor accounted for 7.6% (eigenvalue = 1.14). Based on the results of the factor analysis, two items were dropped from the scales. Specifically, one isolation item (i.e., gives in easily to others) was dropped because it had a much lower factor loading than did the other items on this scale (.54 relative to the other items which loaded above .90). Further, one relational aggression item (i.e., tells mean lies or rumors about a person to make other kids not like the person) was dropped because, although it loaded on relational aggression (.64), it also cross-loaded with overt aggression (.49). Factor loadings for the items of the resulting four subscales were relatively high, ranging from .73 to .92 (refer to Table 1). Computation of Cronbach's alpha showed all scales to be highly reliable (alpha = .94, .83, .91, .92 for overt aggression, relational aggression, prosocial behavior, and isolation, respectively).

The relation between relational and overt aggression was further assessed with a correlation coefficient,  $r = .54$ ,  $p < .01$ . The moderate magnitude of this correlation is what one would expect for two constructs that are hypothesized to be *different* forms of the *same* general behavior (i.e., there should be a moderate association rather than a low or high association). Overall, these analyses provide initial evidence that relational aggression is a distinct construct, and that, although related, it is relatively independent of overt aggression.

### *Gender*

It was next of interest to assess gender differences in relational aggression. First, a descriptive analysis was conducted of the percentage of boys versus girls who could be classified as either nonaggressive, overtly aggressive, relationally aggressive, or both overtly and relationally aggressive. Results showed that approximately equal numbers of each gender were classified as nonaggres-

sive (73.0% of the boys and 78.3% of the girls). However, boys and girls were not evenly distributed among the remaining three aggressive groups. Rather, the overtly aggressive group consisted primarily of boys (15.6% of the boys vs. 0.4% of the girls); the relationally aggressive group consisted primarily of girls (17.4% of the girls vs. 2.0% of the boys); and the combined group consisted of both boys and girls (9.4% of the boys and 3.8% of the girls). One implication of these findings is that, contrary to prior research, aggressive boys and girls may be identified with almost equal frequency (27% of the boys vs. 21.7% of the girls in this study) when relational as well as overt forms of aggression are assessed.

To assess further the relation between gender and aggression, two analyses of variance were conducted in which gender and grade served as the independent variables and children's scores for the relational aggression and overt aggression scales served as the dependent variables. Both analyses yielded a significant main effect of gender,  $F(1, 483) = 7.8, p < .01$ , for relational aggression and  $F(1, 483) = 68.1, p < .001$ , for overt aggression. Specifically, girls ( $M = .42, SD = 3.4$ ) were significantly more relationally aggressive than boys ( $M = -.40, SD = 2.9$ ) whereas boys ( $M = .77, SD = 3.1$ ) were significantly more overtly aggressive than girls ( $M = -1.09, SD = 1.6$ ). These findings are consistent with the results of the descriptive analyses previously described.

#### *Relational Aggression and Social-Psychological Adjustment*

In order to assess the relation between relational aggression and social-psychological adjustment, two sets of analyses were performed. First, analyses of covariance were conducted in which relational aggression group (two levels: relationally aggressive vs. nonrelationally aggressive) and sex served as the independent variables, overt aggression served as the covariate, and the social-psychological adjustment indices served as the dependent variables (i.e., peer nominations of acceptance, rejection, prosocial behavior, and isolation/unhappiness; self-reports of depression, loneliness, social anxiety, social avoidance, and perceptions of peer relations).<sup>2</sup> Due to the moderate correlation between overt and relational forms of aggression, children's overt aggression scores were employed as a covariate to insure that any significant effects obtained were relatively independent of this form of aggression.<sup>3</sup> Student-Newman-Keuls post hoc tests ( $p < .05$ ) were conducted as appropriate to investigate further significant effects (refer to Table 2 for adjusted cell means and standard deviations by relational aggression group).

*Peer nominations of status, prosocial behavior, and isolation.*—Analyses of children's peer acceptance and rejection scores yielded a significant main effect of relational aggression group,  $F(1, 486) = 12.3, p < .01$ , for peer rejection. Specifically, relationally

<sup>2</sup> Grade was initially included as an independent variable in these analyses (in order to avoid small cell sizes, the third and fourth graders were combined into one level of grade and the fifth and sixth graders were combined into a second level of grade). However, with two minor exceptions, none of the interactions involving grade were significant, and thus grade was excluded from the presented analyses (i.e., grade main effects for the dependent variables studied here have been assessed in prior research and were not of interest here). Both significant interactions involving grade were from analyses of the Children's Peer Relations Scale. The first was the grade  $\times$  relational aggression group  $\times$  sex interaction for the caring subscale. Inspection of cell means showed that the youngest (i.e., third and fourth grade), relationally aggressive males reported less engagement in caring acts than did all other groups. The second interaction was the grade  $\times$  sex interaction for the peer isolation subscale. Inspection of cell means showed that the youngest girls reported more isolation from peers than did the oldest girls and the boys.

<sup>3</sup> A set of 2 (relational aggression group)  $\times$  2 (overt aggression group) ANOVAs were also conducted (sex could not be included as a factor because resulting cell sizes were too small in some cases). Results for the relational aggression group were comparable to those reported in the text. Significant effects of overt aggression were also obtained in some cases. Specifically, overtly aggressive children were significantly more rejected than other children. Further, analyses of the self-report instruments showed that, in sharp contrast to relationally aggressive children, whenever overtly aggressive children differed significantly from nonaggressive peers, they reported higher levels of social-psychological adjustment (e.g., significantly less social anxiety; higher levels of perceived peer acceptance; lower levels of social isolation) than other children. In addition, overtly aggressive children reported significantly more frequent use of overt aggression than did their peers. These findings provide further support for the distinctiveness of overt and relational aggression.

TABLE 2

CELL MEANS AND STANDARD DEVIATIONS FOR SOCIAL-PSYCHOLOGICAL ADJUSTMENT INDICES BY RELATIONAL AGGRESSION GROUP ADJUSTED FOR OVERT AGGRESSION

| MEASURE                         | RELATIONAL AGGRESSION GROUP |               |
|---------------------------------|-----------------------------|---------------|
|                                 | Nonaggressive               | Aggressive    |
| Peer nominations:               |                             |               |
| Peer acceptance .....           | .0 (1.0)                    | .2 (.9)       |
| Peer rejection .....            | .0 (.8)                     | .4 (1.2)**    |
| Prosocial behavior .....        | .0 (4.5)                    | -.2 (3.3)     |
| Isolation .....                 | -.4 (2.8)                   | -.1 (2.1)     |
| Self-reports:                   |                             |               |
| Depression .....                | 8.6 (7.4)                   | 10.4 (6.1)*   |
| Loneliness .....                | 29.9 (12.1)                 | 34.6 (14.1)** |
| Social anxiety .....            | 18.4 (5.3)                  | 19.5 (4.7)    |
| Social avoidance .....          | 12.2 (4.7)                  | 12.5 (4.8)    |
| Perceived peer acceptance ..... | 11.8 (3.0)                  | 11.2 (3.2)*   |
| Peer isolation .....            | 4.0 (1.9)                   | 4.4 (2.1)*    |
| Caring acts .....               | 14.0 (3.3)                  | 13.2 (3.4)    |
| Overt aggression .....          | 7.2 (2.9)                   | 7.3 (3.3)     |
| Relational aggression .....     | 9.1 (3.4)                   | 9.6 (4.3)     |

NOTE.—Standard deviations are in parentheses.

\*  $p < .05$ .\*\*  $p < .01$ .

aggressive children were significantly more disliked by peers than were their nonrelationally aggressive peers.

Analyses of children's peer-assessed prosocial behavior and isolation yielded a significant main effect of sex,  $F(1, 486) = 45.6, p < .001$ , and a significant interaction of sex and relational aggression group,  $F(1, 486) = 8.8, p < .01$ , for prosocial behavior. Specifically, girls ( $M = .62, SD = 4.8$ ) were viewed by peers as significantly more prosocial than were boys ( $M = -.84, SD = 3.2$ ). However, follow-up tests on the significant interaction indicated that this effect varied as a function of relational aggression group. Specifically, nonaggressive girls ( $M = 1.47, SD = 5.1$ ) were viewed as significantly more prosocial than children in the other three groups, nonaggressive boys ( $M = -1.53, SD = 3.2$ ), aggressive girls ( $M = -.22, SD = 3.3$ ), and aggressive boys ( $M = -.15, SD = 2.9$ ). In contrast, nonaggressive boys were viewed as significantly less prosocial than children in the other three groups. The prosocial scores of relationally aggressive boys and girls were in between these two extremes and did not differ from each other.

*Self-reports of social-psychological adjustment.*—The ANOVA conducted on children's loneliness scores yielded a significant main effect of relational aggression group,  $F(1, 457) = 10.6, p < .01$ , and a significant

interaction effect,  $F(1, 457) = 4.3, p < .05$ . Specifically, relationally aggressive children were significantly more lonely than were their nonrelationally aggressive peers. However, follow-up analyses of the interaction effect showed that the main effect was apparent for girls only. That is, relationally aggressive girls ( $M = 37.0, SD = 14.5$ ) reported significantly higher levels of loneliness than did nonrelationally aggressive boys ( $M = 31.0, SD = 12.7$ ) and girls ( $M = 28.8, SD = 11.4$ ). In contrast, the loneliness scores of relationally aggressive boys ( $M = 32.2, SD = 12.5$ ) did not differ from those of their nonaggressive peers. The analysis of children's social anxiety scores and social avoidance scores did not yield significant effects. The analysis of children's responses to the Children's Depression Inventory yielded a significant main effect of relational aggression group,  $F(1, 458) = 4.8, p < .05$ , and a significant main effect of sex,  $F(1, 458) = 4.2, p < .05$ . Specifically, relationally aggressive children reported significantly higher levels of depression than did nonrelationally aggressive children. Also, boys ( $M = 9.7, SD = 7.8$ ) reported significantly higher levels of depression than did girls ( $M = 9.3, SD = 6.5$ ).

Analyses of the subscales of the Children's Peer Relations Scale also yielded significant findings. Specifically, the analysis of

children's perceived peer acceptance scores yielded a significant main effect of relational aggression group,  $F(1, 464) = 5.7, p < .05$ , and a significant interaction effect,  $F(1, 464) = 4.3, p < .05$ . Specifically, relationally aggressive children perceived themselves to be more poorly accepted by peers than did their nonaggressive counterparts. However, this effect was qualified by the interaction effect. Specifically, post hoc analyses indicated that relationally aggressive girls ( $M = 10.6, SD = 3.0$ ) reported poorer acceptance by peers than did nonaggressive girls ( $M = 12.0, SD = 3.0$ ), nonaggressive boys ( $M = 11.7, SD = 3.0$ ), and relationally aggressive boys ( $M = 11.7, SD = 2.6$ ). In contrast, the perceived acceptance reported by relationally aggressive boys did not differ from that reported by nonaggressive children.

Analysis of the peer isolation subscale yielded a significant main effect of relational aggression group,  $F(1, 464) = 4.9, p < .05$ , and a significant relational aggression group by sex interaction,  $F(1, 464) = 5.4, p < .05$ . That is, relationally aggressive children reported significantly greater isolation from other children than did their peers. However, this effect was qualified by the interaction effect. Specifically, follow-up tests showed that relationally aggressive girls ( $M = 5.0, SD = 2.0$ ) reported significantly more isolation from peers than did nonaggressive girls ( $M = 4.0, SD = 2.0$ ) and boys ( $M = 4.0, SD = 1.8$ , for nonaggressive and  $M = 3.8, SD = 1.8$  for aggressive boys). Analysis of the caring acts subscale produced a significant main effect of sex,  $F(1, 464) = 24.0, p < .001$ , with girls ( $M = 14.6, SD = 2.9$ ) reporting significantly more engagement in prosocial acts than boys ( $M = 12.6, SD = 3.5$ ).

The ANOVA conducted on children's self-reports of overt aggression and relational aggression yielded a significant main effect of sex for each variable,  $F(1, 464) = 13.2, p < .001$ , and  $F(1, 464) = 5.7, p < .05$ , respectively. Boys reported significantly higher use of overt aggression ( $M = 7.6, SD = 3.1$ ) and of relational aggression ( $M = 9.6, SD = 4.0$ ) than did girls ( $M = 7.0, SD = 2.6$  and  $M = 9.1, SD = 2.9$  for overt aggression and relational aggression, respectively).

*Sociometric status classifications.*—Because sociometric status group has been considered an important social adjustment indicator in numerous prior studies (see Coie, Dodge, & Kupersmidt, 1990; Parker & Asher, 1987), the second set of analyses was

designed to assess the relation between relational aggression and status group membership. Toward this end, an analysis of variance was conducted in which status group (popular, average, neglected, rejected, controversial) served as the independent variable and children's relational aggression scores (i.e., from the peer nomination instrument) served as the dependent variable (note that a covariate was not used for these analyses). This analysis yielded a significant effect for sociometric status,  $F(4, 362) = 11.6, p < .001$ . A Student-Newman-Keuls post hoc test ( $p < .05$ ) indicated that controversial status children were significantly more relationally aggressive than all other status groups, including rejected children (refer to Table 3 for cell means and standard deviations). However, rejected children were significantly more relationally aggressive than popular and neglected children. Also, neglected children were significantly less relationally aggressive than were average status children. A comparable ANOVA was conducted of children's overt aggression scores for comparison purposes. This analysis also yielded a significant effect of status group,  $F(4, 362) = 8.3, p < .001$ . A Student-Newman-Keuls post hoc test ( $p < .05$ ) indicated that controversial and rejected children were significantly more overtly aggressive than popular, average, and neglected children, a finding that is consistent with past research (see Coie et al., 1990, for a review).

## Discussion

Results of the present study provide evidence for the validity of a relational form of aggression. As hypothesized, relational aggression appears to be relatively distinct from overt aggression, and it is significantly related to gender and to social-psychological adjustment in meaningful ways. These findings contribute uniquely to our understanding of children with adjustment difficulties, particularly young females.

As predicted, relational aggression appears to be more characteristic of girls than of boys. Results indicated that (1) as a group, girls were significantly more relationally aggressive than boys and (2) when relatively extreme groups of aggressive and nonaggressive children were identified, girls were more likely than boys to be represented in the relationally aggressive group. Interestingly, a parallel set of findings was obtained for boys and overt aggression. That is, on average, boys were significantly more

TABLE 3

CELL MEANS AND STANDARD DEVIATIONS FOR RELATIONAL AGGRESSION AND OVERT AGGRESSION BY SOCIOMETRIC STATUS GROUP

| Status Group        | Relational Aggression Score | Overt Aggression Score |
|---------------------|-----------------------------|------------------------|
| Popular .....       | -.66 (2.9)                  | -.95 (1.8)             |
| Average .....       | -.11 (2.9)                  | -.34 (2.4)             |
| Neglected .....     | -1.36 (1.8)                 | -.75 (1.9)             |
| Rejected .....      | .76 (3.8)                   | 1.11 (3.5)             |
| Controversial ..... | 2.82 (3.0)                  | 1.19 (3.2)             |

NOTE.—Standard deviations are in parentheses.

overtly aggressive than girls and were more likely to be represented in the extreme group of overtly aggressive children, findings that are consistent with prior research on gender differences in aggression (see Block, 1983; Parke & Slaby, 1983, for reviews). The present study provides evidence that the degree of aggressiveness exhibited by girls has been underestimated in these prior studies, largely because forms of aggression relevant to girls' peer groups have not been assessed.

The paucity of research on girls' aggression may exist partly because of the complexity and subtleness of the behaviors involved, characteristics that make them more difficult to study than overt aggression. For example, reliably assessing overt aggression in an interaction where one child hits another is significantly less complex than assessing relational aggression in an interaction where one child seems to exclude a peer from an activity. To competently judge the latter interaction, knowledge is needed that goes beyond the immediate situation (e.g., information about the relationship history of the aggressive child involved so that one can distinguish an excluded friend from a peer who simply never plays with the target child). Thus, when assessing relational aggression, the relevant behaviors may be overlooked unless informants are employed who can access information about friendships and other relationships within the relevant peer group. This issue was addressed in the present study through the use of children's peers as informants, an approach that, based on the current findings, appears promising.

Support for the distinctiveness of relational versus overt aggression was obtained in a number of ways. First, the factor analysis of the peer nomination instrument yielded separate factors for overt and rela-

tional aggression, with items that loaded highly on each factor and cross-loaded insubstantially. Second, the classification of children into extreme groups of aggressive children showed that, although some of the children identified as high in aggression exhibited both forms (i.e., the combined group), the majority of aggressive children exhibited solely overt or relational forms of aggression. Specifically, of the 121 children identified as high in aggression, only 27.3% ( $n = 33$ ) exhibited both relational and overt forms of aggression. The majority of aggressive children (72.7%) exhibited either relational or overt aggression, but not both. In addition, as will be discussed in more detail below, relational aggression was significantly related to social-psychological maladjustment, independent of overt aggression. These findings provide evidence that, although overt and relational aggression are likely related constructs (i.e., because both constitute harmful, aggressive acts), they each provide unique information about children's social behavior.

Findings from the peer-assessments as well as from the self-report instruments indicate that, as has been found in past research for overtly aggressive children (Parker & Asher, 1987) relationally aggressive children also experience significant social problems. Specifically, relationally aggressive children were significantly more disliked than other children. In addition, the peer status groups who exhibited the highest levels of relational aggression were the rejected and controversial groups (i.e., classifications that indicate impaired peer relationships; Coie et al., 1990). Moreover, relational aggression was significantly related to social maladjustment (i.e., peer nominations of rejection and self-reports of poor peer acceptance), independent of overt aggression (i.e., the relations were significant even though overt

aggression, the best known behavioral predictor of peer rejection, was employed as a covariate). These findings indicate that relational aggression provides unique and important information about children's social difficulties that cannot be accounted for by overt aggression alone.

It is possible that engaging in relationally aggressive behaviors, because of their aversive nature, leads to being disliked by peers. Support for this particular temporal relation between rejection and aggression has been established in past research for overt aggression (Coie & Kupersmidt, 1983; Dodge, 1983). However, it is also conceivable that rejection by one's peers may precede relational aggression. For example, a rejected child may attempt to harm peers' relationships with others in an effort to compensate (or retaliate) for her own lack of success in those relationships. In either case, the association found between relational aggression and rejection significantly enhances our knowledge of the social adjustment difficulties of girls. To date, relatively few studies have focused on the correlates of rejection for girls (cf. Coie & Whidby, 1986), and these studies have not established a relation between aggression and rejection for young females (Coie & Whidby, 1986; French, 1990). The present study provides initial evidence for such a relation.

The significant relation obtained between relational aggression and controversial status group membership is particularly interesting. Controversial children, by definition, are highly disliked by some peers and highly liked by other peers. It is possible that aggressive, controversial status children direct their relationally aggressive behaviors disproportionately among their peers (i.e., so that some peers are frequently victims of these behaviors whereas other peers are never victims of these acts). If so, it seems likely that controversial children may receive disliked nominations from peers who have been the targets of their relationally aggressive acts (e.g., children that they exclude from peer interactions) whereas they may receive liked nominations from peers who have escaped this maltreatment. Relative to other sociometric status groups, much less is known about the peer relationships of controversial children, except that they tend to be more overtly aggressive than their better accepted peers (present study; see Coie et al., 1990, for a review of past studies with similar findings). However, the present pattern of findings for

relational aggression suggests that this group of children may play a critical role in controlling the structure and nature of peer group interactions (e.g., controlling who is included in peer activities; deciding who receives social approval). Their popularity with some peers may give these children the "social authority" and control necessary to successfully manipulate peer group relationships. Investigation of these hypotheses in future research seems warranted, particularly since research on controversial children is lacking. One direction for future study would be an assessment of specific perpetrator-victim relationships within the peer group (e.g., to determine whether the disliked nominations received by controversial children are provided by the peers that they victimize).

Findings from the self-report social-psychological adjustment instruments provide further evidence that relational aggression is significantly related to maladjustment (e.g., depression, loneliness, social isolation). These findings indicate that relationally aggressive children feel unhappy and distressed about their peer relationships. These significant relations between psychological maladjustment and relational aggression were apparent even after level of overt aggression was taken into account. It may be that frequent engagement in relationally aggressive behaviors exacerbates, if not generates, feelings of social-psychological distress because these acts potentially limit children's access to peer relationships (e.g., excluding peers results in fewer peers with which to play or interact). However, it may also be that feelings of psychological distress lead to engagement in relational aggression. For example, children who feel lonely or poorly accepted by peers may use relational aggression as a way to retaliate against peers (e.g., "You rejected me, now I'll get even by rejecting you") or to make themselves feel better (e.g., they may feel more competent or in control if they exclude or put down others).

Results also demonstrate that the nature of the relation between social-psychological adjustment and relational aggression varies as a function of sex. That is, the present results indicate that it is stronger or more pervasive for girls than for boys (i.e., for some of the adjustment indices, only the scores of relationally aggressive girls differed from those of their nonaggressive peers). One goal for future research will be to employ longitudinal designs that assess whether re-

lational aggression is predictive of future, as well as concurrent, social-psychological problems.

In sum, results of the present study provide support for the hypothesis that, on average, both girls and boys are aggressive but tend to exhibit distinct forms of the behavior (relational aggression for girls and overt aggression for boys). They also indicate that further study of relational aggression is warranted, particularly given that this form of aggression is significantly associated with social-psychological adjustment problems. It will be important in future research to develop further our understanding of the correlates, antecedents, and consequences of relational aggression as well as knowledge of the function it serves in children's peer groups.

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# OJJDP Office of Juvenile Justice and Delinquency Prevention

Shay Bilchik, Administrator

Fact Sheet #50 January 1997

## Adolescent Motherhood: Implications for the Juvenile Justice System

by Rebecca A. Maynard, Ph.D., and Eileen M. Garry

A recently released report on a major research project provides a wealth of information about the consequences of adolescent childbearing, including implications for the field of juvenile justice. *Kids Having Kids: A Robin Hood Foundation Special Report on the Costs of Adolescent Childbearing* synthesizes the findings from eight separate studies on the consequences and costs of adolescent motherhood.

Adolescent childbearing has both contributed to and been affected by three alarming social trends. First, child poverty rates are high and rising. Second, the number of welfare recipients and the concomitant costs of public assistance have risen dramatically. Third, among those on welfare, there is a much higher proportion of never-married women, younger recipients, and recipients who have long average durations of dependency. To better understand the full costs and consequences of adolescent (age 17 or younger) childbearing, the Robin Hood Foundation commissioned seven research studies by teams of scholars. The eighth study, a background review of previously researched trends in teenage and adolescent childbearing, informed and helped round out this set of reports.

Nearly 1 million American teenagers (about 10 percent of all 15- to 19-year-old females) become pregnant each year. About a third abort their pregnancies, 14 percent miscarry, and 52 percent bear children, 72 percent of them out of wedlock. Of the half million teens who give birth, approximately 75 percent are first-time mothers. More than 175,000 are 17 years old or younger, and this age group is the focus of the studies. These young mothers and their offspring are especially vulnerable to severe adverse social and economic consequences. More than 80 percent of these young mothers end up in poverty and on welfare, many for the majority of their children's critically important developmental years.

The Office of Juvenile Justice and Delinquency Prevention (OJJDP) is responsible for leading the national fight against juvenile violence and victimization. Among other activities, OJJDP supports research on the causes and correlates of delinquency and disseminates information on a variety of juvenile

justice issues. Two of the studies in the *Kids Having Kids* project have a direct bearing on the juvenile justice field. Findings from these studies are summarized below.

"Crime: The Influence of Early Childbearing on the Cost of Incarceration" (Grogger, forthcoming, in *Kids Having Kids: Economic Costs and Social Consequences of Teen Pregnancy*, ed. R. Maynard, Washington, DC: Urban Institute Press) looks at the higher engagement in crime by male children of adolescent mothers. The sons of adolescent mothers are 2.7 times more likely to be incarcerated than the sons of mothers who delay childbearing until their early 20's. Nationally, about 5 percent of all young men were found behind bars over a 13-year period. This is well below the 10.3 percent rate of observed incarceration for young men born to adolescent mothers and slightly above the 3.8 percent rate for young men born to mothers who began their families at age 20 or 21.

Roughly half of the observed difference for young men born to adolescent versus older childbearers is accounted for by observable differences in the demographic and background characteristics of offspring of both groups of mothers. Still, if these adolescents postponed childbearing until age 20 or 21, it would, by itself, reduce the incarceration rate for the affected children by 13 percent (from 10.3 percent to 9.1 percent).

Even the relatively small fraction of the higher incarceration rate that is directly attributable to adolescent childbearing costs society dearly. A delay in childbearing until the age of 20.5 would reduce the national average incarceration rate by 3.5 percent, for an annual savings of about \$1 billion in correctional costs and a potential savings of nearly \$3 billion in total law enforcement costs. These results are, of course, long range. Even if all prospective adolescent mothers were to delay their childbearing as of tomorrow, the incarceration rates would not fall as predicted for about 20 years—the earliest age at which young offenders start going to jail in any substantial numbers.

Notably, the research indicates that delays in childbearing beyond age 21 would lead to even larger reductions in the incarceration

rates of young men born to would-be adolescent childbearers. This analysis also makes clear, however, that a substantial portion of the high incarceration rates and related prison costs associated with adolescent childbearing results from other factors that are strongly related to or that compound the effects of adolescent childbearing. Thus, policies that successfully address adolescent childbearing and these other factors could lead to additional cost savings for the Nation. Furthermore, if these young men spent less time in jail, they could contribute more to the support of their own children.

“Abuse and Neglect: Effects of Early Childbearing on Abuse and Neglect of the Children” (Goerge and Lee, forthcoming, in *Kids Having Kids: Economic Costs and Social Consequences of Teen Pregnancy*) addresses the association between adolescent childbearing and the incidence of child abuse and neglect. In this study of children in Illinois, children born to adolescent mothers were found to be twice as likely to be victims of abuse and neglect than children born to 20- or 21-year-old mothers. These differences are not narrowed by statistical controls for the background factors such as region of the State or birth cohort that could be controlled for in the analysis.

The ratio of foster-care placements to reported abuse and neglect is roughly one in four among children born to adolescent mothers and one in five among children born to the later childbearers. Abuse and neglect rates and foster-care rates continue to decline with longer delays until women give birth. For example, delaying childbearing from under age 16 until age 20 or later leads to a 30 to 40 percent greater impact on the incidence of reported abuse and neglect than does a delay from age 17 to age 20 or later. If generalized to the Nation, the results of this study would imply that as many as 5 percent of foster-care placements could be averted if adolescent childbearing were eliminated. Besides the obvious benefit to the children, this would also produce savings for Federal and State budgets.

In addition to the research findings summarized above, some of the other studies in the *Kids Having Kids* project include information about risk factors for health and behavior problems in the lives of children of adolescent mothers. Taken together, these findings would seem to indicate that programs designed to reduce teen pregnancies are relevant to the field of juvenile justice. Such programs would fit well within the prevention component of OJJDP’s *Comprehensive Strategy for Serious, Violent, and Chronic Juvenile Offenders*. The *Strategy* calls for a continuum of activities—from the earliest of preventive activities to strengthen families and key community institutions and provide opportunities for the healthy development of young people to the deepest of interventions for repeat juvenile offenders. Prevention of adolescent pregnancy is clearly a valuable first step in helping to reduce juvenile violence and victimization.

## For Further Information

To obtain a free copy of *Kids Having Kids: A Robin Hood Foundation Special Report on the Costs of Adolescent Childbearing*, call the Foundation at 212-227-6601. For a copy of OJJDP’s *Guide for Implementing the Comprehensive Strategy for Serious, Violent, and Chronic Juvenile Offenders* or a list of other OJJDP publications, call OJJDP’s Juvenile Justice Clearinghouse at 800-638-8736.

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*Established in 1988, the Robin Hood Foundation is a public charity to find, fund, and provide management help to the best and most innovative programs serving the poor of New York City. Its primary aim is to develop the best programs and schools for young children and teenagers living in poverty. The Kids Having Kids project was carried out by the Catalyst Institution under a grant from the Robin Hood Foundation.*

FS-9750

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## How to Work Effectively with Girls: Promising Practices in Gender-Specific Interventions

Charlotte A. Ryan and Sandra J. Lindgren

This article presents the necessary foundations of gender-specific interventions for adolescent girls within the juvenile justice and special education systems. It describes one "all-girls" program in Minnesota that has been built upon these foundations. Although this article focuses exclusively on girls, many of the interventions described may have value for boys as well.

Concern for girls and how to develop appropriate services for them is growing in juvenile justice and special education programs. Because girls are outnumbered by boys in both systems at a ratio of 1:4, the majority of programs have been geared to meet boys' needs. Consequently, girls have often not been successful in them. Fortunately, those working and living with girls have begun to recognize the inadequacy of these current service models and to advocate for better approaches that take into account the unique, gender-based aspects of girls' psychosocial development and their particular characteristics and needs.

### Characteristics of Girls in Juvenile Justice and Special Education

The girls found in special education programs for students with emotional or behavioral disorders are similar in many ways to girls in juvenile justice programs. According to the Office of Juvenile Justice and Delinquency Prevention (1998), the typical girl in the juvenile justice system between the mid-1960s and the 1980s was "16 years old, living in an urban area in a single-parent home, a high school dropout who lacked adequate work and social skills. . . and had been the victim of sexual or physical abuse" (p. 73). Profiles of offending girls in the 1990s indicate that much of the demographic profile has remained consistent, such as sexual and physical abuse, single-parent households, and lack of social and work-related skills. However, these girls are also younger (under age 15) and more likely of minority status (Bergsmann, 1994).

In a recent Minnesota study that examined adolescents aged 13 to 18 with emotional and behavioral disorders (ED), girls were found to have lower ability, achievement, and self concept; a greater number of depressive symptoms; greater anxiety; and more externalizing and internalizing behaviors than their male peers. On each measure, adolescent girls had more severe problems and more severe needs than boys did. Of particular importance were the girls' high rates of depressive symptoms and suicidal ideation. The girls' average score was in the clinical range of depressive severity, while the boys' average score was in the normal range. Nearly 50% of the girls, compared to 16% of the boys, indicated recent thoughts of killing themselves. In addition to these assessed needs, the girls' teachers identified other risk factors and areas of need for girls, such as sexual abuse, exploitation and violence, negative body image and eating disorders, self-esteem issues, sexuality, teen pregnancy and health issues, relationship concerns, issues related to risk of self-harm and suicide, and mental health needs (Ryan, 1997).

This profile suggests that girls with EBD in special education and in the juvenile justice system require different programs that address their unique learning and achievement problems and respond to their unique needs. In fact, a lack of such programs may perpetuate girls' failure to successfully move into adult roles and may increase their dependence on various public systems. For example, Chesney-Lind (1998) reports significant educational neglect among many adult women in correctional facilities, citing the American Correctional Association study (1990) that found that "78% of female juvenile offenders had neither completed high school nor obtained a GED.... 12% had not gone past elementary school" (p. 1). The special education and juvenile justice systems are in unique positions to intervene early and divert girls from this tragic path.

### Programs for Girls: Minnesota Leading the Way

Juvenile justice professionals in Minnesota have led the way in developing and promoting gender-specific services. Minnesota corrections law (Minnesota Statute on Juvenile Female Of

fenders, 1994) requires the Department of Corrections to work together with professionals from various public and private agencies to create and maintain a continuum of comprehensive care for the girls whom they serve (MN Laws, 1994, §§636-15-7). It is crucial that the professionals affected by this law understand female adolescent development in order to make accurate assessments, provide appropriate treatment plans, conduct evaluations, and make recommendations (Knight, 1991).

The phrase "gender specific" is becoming commonplace, although the meaning of this term has not always been clear or consistent. Through literature reviews and research, Lindgren (1996) developed the following definition of gender-specific programming:

*Comprehensive programming which addresses and supports the psychosocial developmental process of female adolescents, while fostering connection within relationships in the context of a safe and nurturing environment. (p. 95)*

The three components of this definition are discussed below.

### **Comprehensive Programming**

Whether an adolescent girl is in an actual program or working individually with a practitioner, it is important to consider the many factors affecting her life. These factors can include the various forms of discrimination she may experience, and they require a program that helps her learn how to advocate for herself and for others as a way to "fight back." This comprehensive approach relates to the whole girl and the root causes of her behaviors, rather than focusing only on the behaviors themselves.

For example, girls who are placed out of their homes for running away and for truancy must often deal with even more serious issues such as physical and sexual abuse (Chesney-Lind, 1988; Mayer, 1993; Valentine Foundation, 1990). In addition to reasons for skipping school that may affect both boys and girls—like undiagnosed learning disabilities and the desire to avoid fights—female truants are more likely to avoid school because they are being teased or sexually harassed there, or are being kept home to care for younger siblings. Simply placing runaways in detention or a foster home and truants in a truancy program will usually not deter such behavior unless those programs also deal with the problem's specific underlying causes.

### **Safe and Nurturing Environment**

Girls need to be emotionally and physically safe from themselves, other clients, and adults. Some research even recommends that girls should be treated in the safety of an all-girls environment, away from boys (Maccoby, 1990; Minnesota Women's Fund, 1995; Tovey, 1995). Physical safety also includes getting to and from the places of contact with the practitioner. Emotional safety includes an environment that enhances self-esteem, encourages a sense of connectedness within a relationship, and promotes cultural awareness and acceptance of diversity. Girls (as well as boys) need to feel that they belong and are safe in order to remain in one place long enough to heal from within.

### **Relationships and Connections**

Forging a strong, positive relationship with any child is a prerequisite for facilitating progress in his or her learning, growth, or healing. But because girls often develop their sense of identity more strongly in relation to others, forging such relationships with girls can carry an even greater significance. As with young people of both genders, letting girls know that you are interested in them as people, being playful, showing your human side, telling stories, and especially listening, are all ways to start building a relationship. Respect, above all, is critical. If the practitioner is unable or unwilling to be in a respectful relationship that is emotionally supportive to an adolescent female client, then it is the practitioner's duty to advocate for and help her find an adult from whom she can receive this type of support.

Many structured consequence-type programs are not successful with girls because they are modeled after research on boys' development. Often, boys are more likely to follow rules

because they respect rules or want to avoid consequences, while girls are more likely follow rules if they have established a relationship with the authority figure and feel this person respects them and has their best interests in mind. If girls have to choose between a relationship and a rule or consequence, they will often choose the relationship. It is also critical to reassure girls who receive punishment or consequences that it is their behavior, not them, that is unacceptable. Assuring girls that they are likable and that you believe in them—even though you apply the consequences for their behavior—will often alleviate much stress and other negative reactions. Adolescent girls must believe that their honest opinions, thoughts, and feelings will be heard and validated without having to worry that sharing will somehow damage or end the relationship.

### **UNITE: Gender-Specific Interventions in a Special Education Setting**

In September, Laurie walked through the doors of UNITE, the first “all-girls” program in Minnesota for students with emotional or behavioral disorders. On the threshold of some dramatic efforts to change the way schools serve these girls, Laurie is an unknowing pioneer of this innovative approach. She knows little of her role in helping to answer the question, “What about girls?”

Laurie is typical of girls in EBD programs. In the past, she was often the only girl in a class with eight to ten boys. While her particular needs regarding physical and sexual abuse may have been noted, they were probably addressed outside of school, if at all. The all-girls UNITE program for students with EBD that opened its doors in September 1998 strives to change these trends. It represents a voluntary alternative for girls who are in special education for more than 60% of their day. In addition to typical special education requirements, this program incorporates the following gender-specific practices:

**An educational setting that supports the developmental needs of girls in a safe and nurturing environment.** Using group process and mentoring, the staff creates a positive environment that supports growth, development, open and appropriate communication, and social skills development related specifically to girls. In addition, the staff focuses on building these skills among girls each time opportunities arise in natural ways, thus offering ongoing reinforcement of learning and relationship building. Within this all-girls environment, girls feel safer about risking disclosure and trying new behaviors, while not being distracted or intimidated by boys.

**A relationship-based approach versus a highly structured token economy.** The school day begins and ends with a group process. In this manner, girls are encouraged to maintain relationships with one another as well as with the staff. Girls also have opportunities to discuss issues that arise within the school environment at various times during the school day.

**Program planning that uses a strength-based model for developing personal goals and objectives.** A strength-based approach is used in order to empower girls and increase their self-esteem and self-advocacy skills. Girls participate in developing and achieving personal goals as well as in class room and group activities. A strength-based, cooperative approach also emphasizes family strengths and capacity building.

**Resolving problems and conflicts with “restorative measures” that re-establish connections versus traditional punitive measures.** UNITE uses behavior management strategies that emphasize positive reinforcement, focus on girls’ strengths, and recognize the importance of relationships. In addition, program personnel employ a philosophy and practice of “restorative measures” that empower girls to resolve problems, repair harm and restore relationships, promote growth and resiliency in both parties, and teach reconciliation and relationship skills.

**Comprehensive planning based on home, school, and community collaboration.** During intake and on a regular basis, parents, caregivers, community members, and other providers are involved with girls and staff to assist in meeting their needs across several domains. UNITE attempts to address girls’ needs comprehensively, rather than approaching them as single

issues.

**Transition program planning.** Girls' needs for meaningful work and employment activities are addressed early in the program. Transition planning focuses on helping girls set their own goals for jobs and job training, postsecondary education, community living and participation, recreation and leisure, and daily living skills.

### **The Future for Girls**

The Minnesota Women's Fund (1990) identifies the risk factors most specific to girls as emotional distress, physical and sexual abuse, negative body image, eating disorders, suicide, and pregnancy. The protective factors for girls are high family connectedness, good school performance, low family stress, high levels of religiousness, and younger age. These risk and protective factors are consistent with those identified in other studies on girls as well (Bergsmann, 1994; Ryan, 1997; OJJDP, 1998). It seems obvious that interventions and programs for girls should be designed to address these specific risk factors and capitalize on the protective factors.

But in order to design such effective interventions, the current research on girls' needs, such as that cited above, must be utilized. Furthermore, future research needs to examine the effects of race and culture as well as gender. Unfortunately, many agencies conducting research on adolescents continue to generalize their findings to all young people without separating their findings by gender and race. This practice only reinforces the historical approach of dealing with girls' needs as an afterthought. Until policies and funding mechanisms change to support research and program development for girls in the context of race and gender factors, we will not achieve an effective continuum of care.

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# DOING TIME IN TIMELESSNESS

## THE YOGA OF PRISON

BY SARAHJOY MARSH

The first principle of yoga is Opening to Grace, opening to the mystery that is living itself through our lives. Saying yes to this mystery, we say yes to the full participation with life: each inhale, opening to the winds of Grace; each exhale, bowing to the ocean of this mystery. From this viewpoint, all I see around me becomes the divine mystery, manifesting itself in these many, many forms. Seeing the world this way gives a poignant and sweet sense of intimacy with everything, a boundlessness of heart.

Rilke once said,

*"...The infinite—what is it?  
If not intensified sky...  
you are hurled through with birds  
and deep with the winds of  
homecoming..."*

When we know that we are the boundlessness, the sky through which birds roam, and the great, deep doorway for homecoming, every action becomes a gesture of this intimacy, a gesture of homecoming. This is why I teach in the prison, and it is what I hope to offer there.

I've been teaching a weekly, sometimes biweekly, yoga class at a local correctional institution for the past year. The classes began in the TV room of Unit 2.

On the first night, I walk onto the unit in my new sweat pants, assuming, rightly so, that tights would not be in order. I am immediately sized up, though I only stand an inch over five feet tall. I tell the officer why I am here. He announces the class to the bustling unit of card-playing, walkman-listening, hair-styling women. No one changes stride. I ask the Officer to turn off the TV for yoga class; we are going to have yoga in

the TV room. I go in, by myself, as women walk out past me. I put down my yoga mat. And then with nothing more to do, I do what I often do when I am nervous. I do yoga. I stretch into *Prasarita Padottanasana*. As I stand with my feet three feet wide, bent over at the hips, my head on the floor, breathing deeply, a couple women ease into the room. Impressed, they're checking me out. Finally six women come to stay for class.

We say hello, introducing ourselves by first name. No other biographical information is expected or given. I have no idea what their lives are like. In fact, the only construct I might use to imagine what their lives are like is based on TV,

**THERE IS A TV HANGING FROM THE CORNER WALL; THE ROOM HAS NO OTHER FURNITURE. NO DECOR AT ALL. BLANK. FOR ME. IT'S A NOISY PLACE; A TOO-SHINY, BRIGHT-LIGHTS PLACE; A COLD, STILL, BLANK-ROOM PLACE. NO SOFT MUSIC, NO BLANKETS, NO YOGA MATS, STRAPS, OR EYE PILLOWS. NO INCENSE, NONE OF THE USUAL YOGA TRIMMINGS. WE HAVE ONLY THE ESSENCE OF YOGA HERE—AN INVITATION TO HOMECOMING.**

media, movies, etc., from my childhood. Somehow my conscious mind knows this won't be helpful—and I manage to meet them with an empty mind. I feel neither sorry for, nor afraid of them. Because I haven't generated ideas about their



situation at all, I am able to meet them in a freshness that allows me to speak as I always do, from my heart. I tell them that when we are in class, we will be in class together, meaning *together*. We are here to support each other. The only requirement for them is that they respect themselves. They can like or dislike yoga, or me, or each other, or the food in the cafeteria—but in yoga class they will come with respect for themselves and their bodies. Everyone nods. And so we begin.

The unit holds 70 women. 64 of them are just outside the TV room talking, laughing, doing laundry, shouting across the unit to the officer. The lights in the institution are incredibly bright. The TV room has windows on all sides, with a view of the unit, the hallway, and the institution. There is a TV hanging from the corner wall; the room has no other furniture, no decor at all. Blank. For me, it's a noisy place; a too-shiny, bright-lights place; a cold, still, blank-room place. No soft music, no blankets, no

yoga mats, straps, or eye pillows. No incense, none of the usual yoga trimmings. We have only the essence of yoga here—an invitation to homecoming.

The first class goes really well, all in all. The women walk out looking tranced and relaxed. Literally, though they wouldn't tell me for some time, they became entranced with yoga in our very first meeting. Despite all of the possible distractions of unit life, or perhaps because of them, the women who came to yoga class were able to focus remarkably well. They asked me incredible questions for people who had never heard of or done yoga before: questions on the anatomy of breathing, and how it helps you relax; questions on strength and relaxation, and how you can develop both at the same time.

At the end of the first yoga class, while they are relaxing on the floor, I guide them to experience each breath as a gift. The breath offers itself to life, to each of us, unconditionally, be we rich or poor, young or old, within the walls of prison, or on the outside. The breath is a

reflection of our innate vastness and freedom, like the sky "hurled through with birds." And it is our doorway home. As unconditional as the breath is, we come to realize, so too is our innate freedom. It is this freedom, I tell them, that can never be taken away. It is this freedom that is so overlooked and forgotten. Here I invite them to let each simple breath remind them of the freedom and homecoming that lies within.

I tell them I will see them next week.

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**AS UNCONDITIONAL AS THE  
BREATH IS, WE COME TO REALIZE,  
SO TOO IS OUR INNATE FREEDOM.  
IT IS THIS FREEDOM THAT CAN  
NEVER BE TAKEN AWAY.**

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And indeed I do. The same core of women come to yoga class two times a week. They are always ready when I arrive, sitting on their mats in the TV room. The TV is usually turned off before I get there, since yoga is a regular event now. They are eager and

inquisitive, soaking up everything I can share about yoga, the language of yoga, stories about yoga, and so on. As we progress through yoga poses, they watch themselves getting stronger, feeling more balanced, breathing more deeply. Reports are even given about how so and so used the breathing practice to help out in a heated situation with the woman in the bunk next to hers. And how breathing before bed is helping them to sleep better at night—as they focus inside, the noise of the unit fades, and they can hear the still, quiet place in their own hearts.

The joy they have for yoga becomes contagious, as they often bring a friend, and regularly recruit the newest unit resident to come along too. A natural mentoring begins to happen as the 'regulars' teach the new women about the structure of class... where the mats go, how they should lie down to begin, that it all gets easier with practice, and what the word *Namasté* means.

The truth is we are not just having a yoga class when we do yoga together. The women are finding a circle of support.

We are a community while we are together. We laugh hilariously, moan about hamstrings and bedsprings, sit quietly in gratitude and cheer each other on.

People often ask me if how I teach in the prison is different than how I teach outside of the prison. Granted, the location is very different, the level of education is also generally different, the level of exposure to yoga and meditation is definitely different. But the longing for freedom, the deep calling to connect with the mystery, to feel at home in our own hearts, the longing to understand the deepest, most illusive aspects of ourselves—these longings are the same. The way I teach in prison is exactly the same way that I teach outside of prison. Except that I don't wear unitards or give out my phone number. I do not take lightly any references to the anger, confusion, rage and frustration that the women in prison often report about their weeks, their day, the interaction they just had. I am sensitive to everything they share. And I respond to their concerns from the same yogic heart that I respond to my own. I don't censor myself in my teaching, nor in my life. I flow between being candid, being a sister, being a guide to the timeless wisdom of yoga, and being a friend whose life is unfolding with grace.

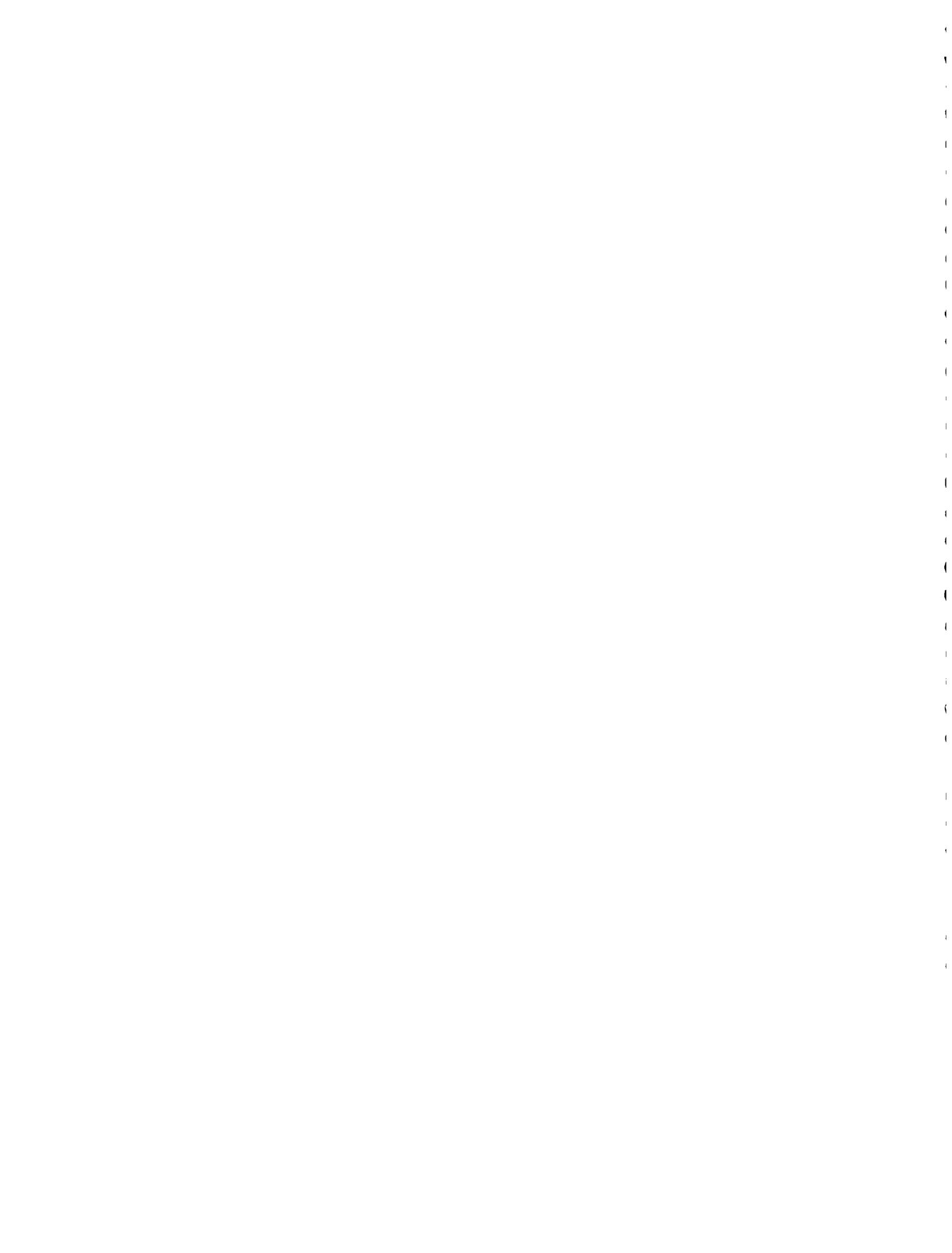
People ask me what I hope to teach these women. Sometimes people who hear about these yoga classes get riled up

and supportive of the differences I must be making in these inmates. Sometimes the talk turns to recidivism, crime rates, education, prison crowding, the misnomer of the word 'correctional.' At the moment, I have almost no comment on these social, political, and cultural ailments. The truth is, I don't hope to teach these women anything. I don't profess to know how the world needs to change, I only want to be in service to its highest dharma. In these prison classes, I only hope to come together as sisters on the path of life. And if the practice of yoga touches their hearts and bodies as it has mine, each woman's inner transformation will naturally guide them to their highest dharma. Each time I walk into the prison, I enter their community. And for the short period of a yoga class we step into a circle together that reminds us of our innate worthiness, our innate freedom and our inter-connection with all life.

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Living Yoga is a non-profit yoga outreach program sponsoring weekly yoga classes in the jail and prison systems. For information, call 503-552-YOGA. To make a tax deductible donation, make checks payable to Acts of Compassion, PO Box 19472, Portland, OR, 97219.

This article is the first part of a two part series, to be continues in the next issue of Alternatives Magazine.



# DOING TIME IN TIMELESSNESS

## THE YOGA OF PRISON

(SECOND IN A TWO PART SERIES)

BY SARAHJOY MARSH

### Runnin' and Bein' Still

The first night Sherisa came to yoga class, she was wired and nervous. She told me she'd been bouncin' off the walls, and was hopin' yoga could help. "What's got ya' bouncin'?" I asked. She just found out she's leaving in 30 days to go home, she's graduating from her Women In Community Service program, and gonna be livin' with her sister and brother-in-law. As class gets going, it's clear that Sherisa has a hard time focusing. We spend the first 5 minutes just centering, breathing, relaxing, getting in touch with ourselves. As the more active yoga poses begin, I get to hear about Sherisa's past experiences with drugs and her current experience with liver pain and other drug-related health problems. Her talk gets Tracy going on about her drug highs. I let them speak freely for now. As we ease into a difficult standing pose the room gets quiet. Out of the silence, a sincerity arises, from which Tracy says "I'm sure glad they got me on that last run." Sherisa adds, "I'm glad I ain't runnin' anymore." We come out of the pose and change sides. "This feels way better than runnin'," she says, "I gotta get grounded."

Class moves about like this tonight. I choose poses that ground their attention in their bodies. The conversation has never centered on drugs before, and I wouldn't want to censor it now. I simply let the yoga carry them. At the end of class, Sherisa is laying in *savasana* (relaxation pose), eyes wide open, looking around like a child at the amusement park. To herself she says "Whoa." To me she whispers, respectful

now of everyone else's quiet, "No drugs ever felt this good." And after a long pause, "I never felt this good!"

We sit quietly in meditation for a few minutes at the end of class. I tell them the greatest high they can ever have is from being grounded in the center of their own beings, connected to themselves. Coming in to their hearts and bodies this way, they will find the source of freedom and happiness. They fold their palms at their hearts; bowing to honor each other, we say "Namaste."

It's at this point in class that a new student, beaming with the trance of yoga, will ask "What? What did they say?" I always invite Rachel, the most consistent student, to answer them: "Namaste means I honor the wisdom and radiance within you which is also within me." (Our lay person's translation.) To which I add: "When you are in that place in you and I am in that place in me, then we are

**WHAT IS KNOWN IS THAT THE ONE WHO ACTS WITH KINDNESS AND WISDOM IS WINNING IN EVERY SITUATION. THE GREATEST LOSING YOU CAN EVER SUFFER, I TELL THEM, IS LOSING YOURSELF.**

One. Then we know our sisterhood. And we have respect and gratitude for each other."

As I walk out of the prison tonight, the sky is wide open, the air is quiet. I have a strong glimpse of what sisterhood means, of what it means to be a part of something larger than myself. I have the sense that the women in class touched in



to this as well. I drive home in quiet, feeling connected to the lives around me.

### Who's Winning Anyway?

When I get to class tonight, there is lots of upset. Rachel had a run-in with an Officer over when she can do her laundry. This is the second week in a row that the turmoil of prison life feels thick. Just last week, as a group, we got reprimanded because the women were wearing their shower shoes to class instead of their running shoes. They were upset because they felt like it was just one more power trip. That one, however, could have been enough to make us lose our yoga privileges. In that skirmish, I got to see just how important yoga class is to these women. It wasn't so much what they said, as in the passion with which they said it. Each agreed that, be there a war over which shoes to wear, or having yoga, they would raise their white flags and put on their running shoes for yoga.

So when I come in tonight, with tension in the air, we spend the first 15

minutes of class just talking and being heard. Rachel feels like the power struggles are all for the pleasure of the Officers to win. What really pisses her off is that these power plays come at times when she's doing really well. It surprises me to see her this upset, as she is generally a bright mark in the class. She consistently offers encouragement to others, asks really relevant questions, brings new inmates to the class and maintains a positive attitude more easily than most of the women. She even practices the yoga poses in her free time. Since I have known Rachel, I would say she is on a steady incline of 'doing well.' She's lost weight, grown stronger physically and mentally, and is managing a healthy level of self-discipline in many aspects of her life, though she is in prison. A year later, she is also the only woman who came to the first class who still lives in this institution, the others having been released. She's seen a lot here, and is a familiar face to the Officers. All of these things added together make her confusion and hurt run deeper. Tonight she expresses her feelings about the Officers and the power struggles she experiences in the every day, many times a day, life of prison. I can't help but hear how little support she feels she receives from these Officers, the people who see her everyday—the people who have the chance to notice, recognize and encourage her achievements. Simply put, she doesn't understand why they can't 'just leave me alone when I'm doing well? Why do they have to play these games with us?' "They're always winning," she tells us. "We're like pawns in the game just for their enjoyment."

I look right into her eyes, and the eyes of the other women: I tell them "Whatever the circumstances are within or around you, no matter if the officers are right or wrong here, I will never know. But what I do know is that when you stay firmly connected to your own center, your

center of wisdom and kindness, you will be winning in every situation you find yourself in." There is no longer a battle, I tell them. And we can never really know why one person acts cruelly, another with kindness, one with wisdom, one out of ignorance. But what is known is that the one who acts with kindness and wisdom is winning in every situation. The greatest losing you can ever suffer, I tell them, is losing yourself.

**I HAVE THE SENSE OF WALKING INTO A COMMUNITY EVERY WEEK. HAVING LIVED IN COMMUNITY FOR FOUR YEARS MYSELF, AT BREITENBUSH HOT SPRINGS, I HAVE A SENSE OF WHAT IT'S LIKE TO ROAM THE PATHS, IN THAT CASE, OR TO ROAM THE HALLS, IN THIS CASE. WITH EACH PERSON PLAYING THEIR ROLE IN THE COMMUNITY. INMATES, OFFICERS, SOCIAL WORKERS, VISITORS, COUNSELORS, MINISTERS, A YOGA INSTRUCTOR. THERE IS A WHOLE VILLAGE GOING ON IN THE PRISON.**

They lay down, and we exhale into the floor, beginning to unwind for tonight's yoga class. It's a strong class. Everyone brings focus to each pose, and they are taking their breath sincerely. We practice two of the warrior poses that they have learned. As we do these strong, steady standing poses to each side, I remind them that the greatest warrior is the one who stands in her own heart, the one who doesn't need to go into battle at all.

### **Dignity and Outrage**

This week when I arrive, there is a definite air of distress in the units. Our class has moved to a classroom downstairs to give the women more quiet, and to allow women to come from the other unit. My process now is to

come in, walk up to each unit, gather the women who want to come to yoga class, and escort them down to our classroom. It is tense on the units as I arrive. I let the officers know why I am there and then I am immediately greeted by Susan. She wants to know if she can come to yoga class, and asks if it's okay if she's overweight and out of shape, and what about this and that, and the other thing. . . . After I tell her, "of course, you can come!", she confesses that she's been checking me out for the last few months. She's more assured that I'm somewhat normal, and that I seem nice. Susan then tells me what a lousy day it's been on the units, what with the raid and all.

It was noisy enough on the unit that it's not until we get down to the classroom that I understand what Susan was referring to. Today they had a raid on Unit 2. What this amounts to is each woman, one by one, getting into a shower stall to be examined by an officer. The shower stalls aren't that big to begin with, as they're meant for one person. They don't offer that much privacy, the unit is designed with the bathrooms and showers just off the bunk area. The examination itself sounds humiliating, bending over to cough, strip searching body cavities. The officers doing the examining are very large, strong female officers, whom the women don't feel at ease with in the first place. And most of these women don't feel all that at ease with their own bodies anyway.

I can see in them, and hear in their voices and outrage, how naked and vulnerable they felt. Their outrage seems appropriate, (though I make no judgement on the institution's intention for doing this, as I'm only informed about the experience from an inmates' perspective). I don't know how many times in each woman's life she has been in a situation where her body was violated, I don't even know if they relate to it in these terms. But I can feel their

outrage, hurt and shame. I let them speak freely as women—they ask me for safety. I give it completely.

We begin with simply breathing and centering. I invite them into the sanctuary of their own hearts, into the place in them that can never be taken away, disrespected, or shamed. In this mysterious life, many difficult situations will come, sometimes without rhyme or reason. I invite them to live in the dignity of their heart's truth, to live in the freedom of self-respect, so that no matter what comes and goes, no matter what others think, or appear to think, there is a seat of dignity, kindness and wisdom that is theirs. It's not to stand above others, for that would be playing the other side of the coin. But simply to abide in love and dignity.

The yoga poses I choose tonight are carefully thought out. I don't want to choose poses that expose too much vulnerability. And I don't want to move so slowly that their minds wander into the events of the day, their minds have already been stewing all evening. I choose strong standing poses, shoulder openers, and sun salutations. Heather asks me about sun salutations. And when I tell them that the sun salutation is the body's way of praying, of giving thanks, the room grows quiet and more sincere. Through the sequence of the poses, the outrage dissipates. A brightness begins to surface in the room, as when the sun comes through the end of a storm.

I am impressed with their willingness to give in to the yoga. Just as the breath gives itself to us unconditionally, I tell them, so, too, the yoga poses give themselves to us unconditionally. The more we give ourselves to the practice of yoga, the more it gives itself to us. And when we open ourselves fully to this, or commit ourselves to taking refuge in this, in this celebration of yoga, we get in return the greatest and sweetest gift we can ever find ... the freedom and dignity and com-

passion of our own hearts. It is from this seat that all our actions become gestures of kindness for ourselves and others.

At the end of the class, we sit quietly. Susan, the newest student, says "This feels so normal." I respond that yoga should feel normal, like breathing, eating and sleeping. She changes the emphasis of her statement, "No, I mean, *this* (pointing to herself) feels normal. *I* feel normal. Not like prozac or group counseling or anything at all. I just feel like a normal person. It's amazing," she continues. "I mean really I could cry. To rejoice and to cry."

I walk them back to the unit, noticing that they stick a little closer together on the way back, bonded somehow by the day's events. A tender-heartedness is in the air. Susan asks me how she can hold on to this feeling, how she can keep this as she goes back to the unit. As I answer, I see understanding in her eyes. "Don't hold on to this feeling. Instead, let it hold you. In every breath, taste your innate freedom, your 'normalness.' It's in you always. We are just lucky tonight to share it together. Every time you find yourself forgetting, come back to your breath. Your breath is given to you completely, unconditionally. As fully and freely as you open yourself to it."

### Counting Mondays

Before we get into yoga class tonight, the women are sharing their strategies for keeping track of how much longer they'll be in prison. Liz will be leaving soon. It is actually her anxiety about leaving that sparks the conversation. She says she can't bear to think of what day it is, nor to torture herself with counting the days. Rachel strategically counts only every ten days, so that she crosses off a third of the month on her calendar at once. A gratifying swoosh through ten whole days! Melinda only counts Mondays. She has 17 Mondays left. Mary has been counting only retroactively by how much weight she has lost, totaling 44 pounds so

far. (Of all the counting schemes, I am least sure of how Mary's works, except that she is determined to lose 50 more pounds before she leaves. So her method is working for her as an inspiration\*not for counting lost time, but for counting each step to regaining her health.) Theresa counts only the days between visits with her husband, starting over at one after their weekly visit.

How many of us are counting out the unfolding of our lives? The number of children, houses, cars, numbers in the bank, job changes, days in the week, days before Christmas, numbers of calories, grams of protein and sugar, the number of pounds to go before we will like ourselves on our vacation, the number of days of vacation, the years before retirement, the years before we get our driver's license or graduate from college, and so on. There are innumerable ways in which we evaluate ourselves and measure our distance along some invisible path. The real freedom isn't in finally measuring up, but in letting go of measuring altogether. Sharing this vantage point with these incarcerated women sparks interesting conversation. In many ways, they understand the rawness of giving up all systems of measurement and cutting yourself free. In fact, that's how they describe the moment when they will leave the regulations of prison life. They equally seem to understand that to the extent they can stay comfortable in that unknown, they will stay free of prison. It's when they take on their old identities and habits that they will either be imprisoned by their lives again, or actually legally imprisoned again. They are all clear that they want to be free. They are not quite sure what that will mean. But is any of us?

From time to time, one of the women in class is released from the institution. I am always honored to hear that yoga, relaxation and breathing are part of their

self-care plan. At the end of class tonight, Theresa announces that she is confident that with yoga, she could stay off of drugs. In fact, yoga will be her new habit instead! Liz, who will be leaving in 40 days, has written yoga into her care plan, and has already researched yoga instruction in the town where she will live. I blush as they tell me that I am their "yoga hero." We joke about designing a cape with a big Y on it, and I am sure baseball caps are coming soon!

### **A Jailed Innocence**

I have mixed feelings in writing about these classes. On the one hand I want to share the joy I find in teaching classes to these women. It's not the joy of being of service, though that's part of it. It's more the joy of being with these women in their innocence and openness. It's as if they are mid-way in a stream, changing current, and we are each buoyed by the others' triumphs, be they stronger abdominal muscles, or greater self-kindness.

**I REMIND THEM THAT THE  
GREATEST WARRIOR IS THE ONE  
WHO STANDS IN HER OWN  
HEART, THE ONE WHO DOESN'T  
NEED TO GO INTO BATTLE AT ALL.**

On the other hand, I hesitate to write because somehow just writing about it can never describe the experience of how we are together. On paper, it is difficult to express the connectedness that transforms us all, and Classroom 4, while the women from Unit 1 and the women from Unit 2 and I come together for yoga. There is a sisterhood that is palpable.

When I walk through the halls at the prison, my eyes don't make distinctions between this one who is free and this one who is incarcerated. My eyes don't see this one who was wrong, or criminal, or evil, or angry, or lost, and this one who has it together. I have the sense of

walking into a community, of which I am a part for a short while every week. I have this sense of watching these lives unfolding in their individual streams, yet converging in the great ocean of life. Having lived in community for four years myself, at Breitenbush Hot Springs, I have a sense of what it's like to roam the paths, in my case, or to roam the halls, in the case of this prison, with each person playing their role in the community. Inmates, officers, social workers, visitors, counselors, ministers, a yoga instructor. There is a whole village going on in the prison. Which of us truly knows our freedom? Who of us is incarcerated by our own minds and hearts?

Rumi once said, "Fish don't hold the sacred liquid in cups, they swim the huge fluid freedom." When humanity learns this swimming, then ideas of self and other, of freedom and incarceration, begin to fall away. When humanity discovers this huge fluid freedom as its very nature, there will be no need for "corrections." Freedom is self-correcting. For now, may we simply open ourselves to the possibility of this fluid freedom, and follow the deep calling home.

*Out beyond ideas of rightdoing  
and wrongdoing,  
there is a field.  
I'll meet you there.*

*When the soul lies down in that grass,  
the world is too full to talk about.*

*Ideas, language,  
even the phrase 'each other'  
doesn't make any sense."*

—Rumi

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Living Yoga is a non-profit yoga outreach program sponsoring weekly yoga classes in the jail and prison systems. For information, call 503-552-YOGA. To make a tax deductible donation, make checks payable to Acts of Compassion, PO Box 19472, Portland, OR, 97219.

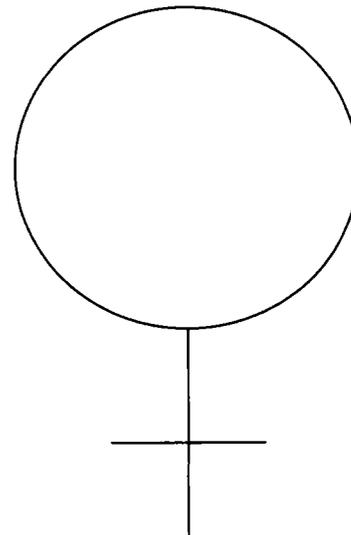
# **Working with Girls: Exploring Practitioner Issues, Experiences and Feelings**

A Report of the Hawai'i Girls Project  
Volume Four

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June, 1999  
Publication No. 403

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This project was supported by Award No. 95-JE-FX-0015 awarded under the Juvenile Justice and Delinquency Prevention Act of 1974, as amended, to the Office of Youth Services, State of Hawai'i. The opinions, findings, and conclusions or recommendations expressed in this publication are those of the authors and do not necessarily reflect the official position or policies of the U.S. Department of Justice or the Office of Youth Services.

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## ACKNOWLEDGMENTS

First and foremost, a sincere thanks is extended to the many individuals and organizations that have contributed visionary leadership and deep commitment to the Hawai'i Girls Project. This project would not exist without the funding support provided by the Juvenile Justice State Advisory Council (JJSAC).

The project is appreciative of the Edralyn McElroy, Girls Project Chair, and members of the steering committee: Sharon Agnew; Office of the Mayor, Kaua'i County; Barbara Blomgren and Pam Gilbert, Girl Scouts Council of Hawai'i; Judith Gregor and Mary Kenney, Family Support Services of West Hawai'i; Marcie Herring and Cheryl Karneoka, Coalition for a Drug-Free Hawai'i; Shalei Pascuala and Lori Sakaguchi, Lei 'Ilima Project; Tricia Lam, Boys and Girls Club; Wendi Lau, AAUW, Honolulu Branch; Sandy Percy, Hui Malama Learning Center; Lori Bennett, Spectrum/CORE; Susan Shirai and Maggie Costigan, Paia Youth Council, Inc.; Denise Pacheco, Salvation Army, Hilo Interim Home; Roger Watanabe, Department of Parks and Recreation, City and County of Honolulu; Lila Johnson and Eve Leon-Torres, Tobacco Prevention and Education, Department of Health.

We would also like to acknowledge the excellent support and assistance of the Office of Youth Services staff, in particular, Joyce Tanji, Suzanne Toguchi, Dixie Thompson, and Debra Shiraishi-Pratt. We would like to express our thanks to the SAC, and most particularly to its current chair, Jon Ono, for the on-going support for this research and for his support of the Hawai'i Girls Project. Lastly, we would like to thank Bert Matsuoka, Executive Director, Office of Youth Services, for his generous support of both this work and the Hawai'i Girls Project.

Our sincere appreciation is extended to Cheryl Kauhane, Director of Laniakea Center, YWCA of O'ahu, for the exceptional lunches that were donated for the O'ahu island focus groups.

Finally, we are deeply grateful to the youth workers who participated in the telephone interviews and the focus groups. Through their active and interested participation they have contributed further to our understanding of the issues. We hope that the information provided in this report will benefit them and the girls they work with.

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## 1. INTRODUCTION

Theorists have generally ignored girls or portrayed them in a shallow and stereotypical manner (Belknap, 1996; Chesney-Lind & Sheldon, 1992; Campbell, 1981). A review of the traditional literature on female delinquency will point to many specific social beliefs regarding girls and women: 1) the biological and psychological inferiority of women; 2) women's and girls' sexuality as the main motivating factor toward their delinquency and criminality; 3) the importance of females adopting culturally acceptable feminine roles (Holsinger, 1999).

The most profound implication of this cognitive void can be seen in the way that girls are processed in juvenile and criminal justice systems. "Research shows that many of the same themes advanced by traditional theories of delinquency to subordinate girls, discriminate against them via their processing in the system as well" (Holsinger, 1999, p. 4). For example, numerous scholars have documented that the higher prevalence of female status offenses and harsher treatment for girl status offenders in comparison to boys indicates the heightened focus on girls' sexuality. Likewise, the effect of violating gender-role stereotypes or acting out of the culturally acceptable feminine role has resulted in harsher punishments for females (Holsinger, 1999; Girls Incorporated, 1996).

Furthermore, once girls are processed out of the juvenile justice system they are placed into programs that are modeled for delinquent boys. A study of 443 delinquency program evaluations completed since 1950 shows that 34.8% of these programs only served males and 42.4% served primarily boys. Conversely, only a paltry 2.3% of delinquency programs served only girls, and 5.9% served primarily girls (Lipsey, 1990). Understanding the concerns girls have is a crucial step towards providing appropriate services. Given the void of research on girls issues and gender-specific programs, it comes as no surprise that virtually no research exists on the experiences of professionals who work with girls.

In an effort to fill this void, the Center for Youth Research (CYR) at the University of Hawai'i has been providing research assistance to the Hawai'i Girls Project (HGP). The HGP was formed in 1996 in response to a federal initiative sponsored by the Department of Justice's Office of Juvenile Justice and Delinquency Program. Three reports have been published providing overviews of girls' delinquency in Hawai'i, gender specific programming, and ethnicity and gender issues among Hawai'i's youth at-risk. The second phase of the HGP shifted the focus to the professionals who work closely with adolescent girls in order to understand the unique challenges they face thus bringing three years of research full circle. This report highlights the feelings, experiences and views of Hawai'i professionals who work with adolescent girls on a daily basis in either gender-specific or coed programs in the state of Hawai'i. This study is based on information gathered through a series of neighbor island interviews and O'ahu island focus groups conducted in March and April 1999.

## 2. BACKGROUND

### 2.1. Female Delinquency and Development

The number of youth arrested in Hawai'i over the past few years indicates a steady climb. The increase is most marked among girls (Chesney-Lind et al., September 1997). For example, the number of girls arrested in Hawai'i since 1985 increased by 78.1% compared to an 18.8% increase among boys (Chesney-Lind et al., September 1997). Examining the types of offenses for which youth are arrested, it is clear that most youth are taken into custody for less serious criminal acts and status offenses. The Federal Bureau of Investigation, for example, reported that of the 5 million youth arrested in 1995, only

5.6% were for such serious violent offenses such as murder, rape, robbery, or aggravated assault (Federal Bureau of Investigation, 1996, 213).

Status offenses' play a major role in girls' delinquency and explains the dramatic increase in girls' arrests in Hawai'i. Data indicates that in 1995, for example, of the 7,202 juvenile female arrests, 3,670 were for status offenses--a figure that represents 51% of the total arrests made. In contrast, national statistics indicate status offenses committed by girls accounted for over a quarter of all girls' arrests in 1995 (Chesney-Lind et al., September 1997). Runaway arrests represent the majority of all arrests, almost 50% of girls' total arrests, compared to 20% for boys. Nationally, female arrests for runaways constitute only 21% of their total arrests. Reasons for the dramatic difference may be explained by Hawai'i's inclination to arrest juveniles for this offense. It may also be that parents tend to report their children missing more than on the mainland. Equally compelling is the notion of society's differential treatment of young females and how this leads to less tolerance of any perceived deviance from what is deemed to be female.

## 2.2. Girls Developmental Issues

Female juvenile offenders share economic, familial and educational problems with their male counterparts. These problems are compounded further by abusive families, and membership in an ethnic minority group. For girls, there are additional problems that coincide more often with their gender - sexual abuse, sexual assaults, unplanned pregnancies, and adolescent motherhood. In an effort to understand what experiences shape the positive and negative behaviors of girls, a close look at female development becomes imperative (Greene, Peters and Associates, 1998). Youth workers are familiar with these development issues and the challenges that they pose in their respective work environments. For our purposes, a review of the key developmental issues not only provides the context to view the comments of youth workers with regard to the issues that girls face, but it also brings clarity to understanding the uniqueness of the female adolescent experience.

### Key Development Issues

1. Relationships: Girls place high value on relationships; relationship problems are often at the center of negative behavioral patterns.
2. Feelings: During adolescence girls struggle with balancing expressing themselves and sheltering or silencing their feelings and desires. Mixed messages that society sends confuse them about expectations and appropriate behavior.
3. Individuation/Intimacy/Togetherness: The ability of girls to set positive boundaries is impacted by individuation and intimacy. Blurred boundaries contribute to confused relationships with friends, family and authority: Young girls and women need support in identifying their involvement in dysfunctional, abusive relationships and valuing themselves by ending or redefining their roles in such relationships.
4. Self-Esteem: Positive self-esteem is critical and it is the most vulnerable aspect of adolescent development. Self-Esteem is closely tied to others' perceptions of these girls.

5. Puberty: Timing of puberty may influence a girl's adjustment to this critical developmental process. Early puberty may pose greater alienation from peers.
6. Identity Formation: This developmental stage is shaped not only by how a girl views herself, but also by her perception of how others view her. Female connectedness is interwoven with her ability to see herself as a distinct human being.
7. Ethnicity: For girls of color, identity formation represents not only seeking balance in gender but also ethnic identity formation.

### 2.3. Programming

Nationally and locally, girls' needs are woefully neglected in programs that are designed to help them. Many programs' approaches to dealing with youth neglect female needs since program models are largely based on the male adolescent (Chesney-Lind et al., April 1998). Limited placement options usually result with girls inappropriately placed in facilities and programs that were designed for boys or that emphasize security over intervention and treatment. Many facilities serve both sexes at the same time and the specific needs and strengths of girls are either ignored or shortchanged due to relatively few number of girls in the facility. Often, these facilities do not offer programs for pregnant and parenting teens, sexual abuse treatment, substance abuse treatment or education programs that regard the strengths and needs of girls. Vocational programs, if they exist at all, often use dated facilities and promote low-paying, dead end, stereotypically female occupations (Girls Incorporated, 1996).

### 2.4. Gender-Specific Programming

Most programs are modeled after delinquent boys. While these types of programs may work for some, victims of abuse and or dependency behaviors are better served by models that include comprehensive assessment, diagnosis and treatment (Greene, Peters and Associates, 1998). Gender specific programming refers to unique program models and services that comprehensively address the special needs of a targeted gender group. An essential ingredient is the fostering of positive gender identity development especially during the formative years of the gender group. Gender specific theories are those which base their assumptions of behavior on different underlying processes and motivations for males and females. These theories hold that there are factors that exert a gender-specific influence on behavior. Key principles of gender specific programs provide that:

- Girls are *unique*, meaning that adolescent females are different from adolescent males and should not merely be seen in comparison to them nor a mere extension of them.
- Programming *should be holistic*. Intervention in multiple domains is important considering girls' dependence on relationships to establish their identity. (Individual, family, school, community).
- *Developmental* concepts recognize that adolescence is a critical period full of physical changes, self-concept and identity development. Young females need a full range of services across a continuum of care that will provide a variety of options. This includes reaching girls at prepuberty stage and prior to contact with juvenile justice system.

## **2.5. Worker Views**

The unique experiences of female development coupled with the lack of gender-specific programming places a heavy burden on the shoulders, of the professionals who work with girls. Perhaps it is not surprising to note that there is virtually no research or studies that document the experiences of youth workers. Among the research that does exist, youth workers "commonly lament that girls are more difficult to work with" (Belknap et al., 1997; Baines & Adler, 1996; Kersten, 1990). Chief among their conclusions was that the confrontational and negative aspects of relationships between workers and young women combined with the lack of appropriate services and facilities may produce detrimental outcomes for young women.

Other studies conducted in 1996 found that professionals had clear ideas about the problems in the juvenile justice system and perceived differences in the nature of boys and girls. Further, they identified lower program availability, specific needs of girls, and parents as a significant part of the problem (Belknap et al., 1997). In addition, it was noted that workers had difficulty restricting their answers to discussing girls. Professionals varied a great deal in their attitudes and experiences with female delinquents. While some professionals demonstrated tremendous amounts of dedication to girls and significant insight into the special problems that girls faced, others appeared to stereotype girls and blame them and their parents for all their problems (396).

This introductory background to girls' issues and programming provides a context for worker experiences. What follows is a discussion of methodology followed by our findings. You will notice results which overlap with national findings and the ways in which Hawai'i youth workers deviate from current research.

## **3. METHODOLOGY**

The focus of this study was to elicit worker views, experiences, and feelings when working with adolescent girls. In order to obtain sample points of view, telephone interviews and focus groups were conducted. Persons who participated in this study were workers in private youth service organizations (either paid professionals or volunteers) who had direct interaction on a daily basis with female youth in either gender-specific or coed programs. None of the participants in this study represented practitioners who avoided working with girls. A preliminary database of 62 potential participants was compiled from four sources:

1. Referrals by persons who work in youth servicing programs
2. The HGP "Girl Power" conference attendee list
3. The Hawai'i Girls Project Steering Committee
4. The Hawai'i Connections Social Services Directory 1997-1998

### **3.1. Neighbor Island Telephone Interviews**

Of the 62 organizations in the database, fourteen organizations were from the neighbor islands. These organizations were mailed an 'invitation to participate' letter which explained the Hawai'i Girls Project, the purpose of the study, and extended an invitation to a staff member to participate in the study. The invitation also asked for other referrals of potential interview participants. Invitations were mailed to either executive directors of the organization or to program managers in charge of either gender-specific, coed, or teen oriented programs within an organization. Follow-up phone calls were made to all fourteen

contacts to determine if there was an interest to participate and if so, to obtain the name of the potential interviewee. Screening sheets were used to confirm the name and contact phone of the person to be interviewed and to verify the appropriateness of their participation. Confirmation letters with the date and time of the telephone interview were mailed with a list of topics and questions to be discussed during the interview.

Four telephone interviews were conducted in March 1999. The telephone interviews were conducted with professionals from the islands of Hawai'i, Maui and Kaua'i. Discussions lasted no longer than one hour and CYR staff initiated the phone call. The topics for the interviews covered adolescent development issues, and ethnicity and programmatic issues. Each topic specified no more than three open-ended questions (See Appendix 1). The interviews were informal and casual. The topics served to guide the discussion and review issues in a systematic fashion although it was not necessary to ask questions the same way each time. In this way, it was possible to discover what people thought and how one person's perceptions compared with another. An interview checklist was used to help keep the interviewer on track. Handwritten notes were taken during the interview. Notes were typed up immediately following the discussion.

### **3.2. O'ahu Island Focus Groups**

The use of focus groups served the purposes of this project well. It was possible to bring together persons with common experiences which provided a starting point for group interaction. The groups were supplied with a list of topics that helped frame the discussion. With many people talking to each other, there were opportunities for local points of view to be expressed which otherwise would not have been revealed in a one-on-one interview (Krueger, 1988; Morgan, 1988). Groups were recruited throughout O'ahu using the same sources previously mentioned. Bringing people together was no easy matter. Considerable effort was expended on telephoning and logistical matters. The people who participated, however, were active, interested and contributed to further understanding of the issues.

Prior to active participant recruitment, dates, times and the facility were secured. Focus groups were conducted at lunch time in order to not disrupt work time. A lunch donation was provided by a service organization as added incentive.

Recruitment of the participants began in February, 1999. A total of 48 organizations were faxed an 'invitation to participate' letter. The invitation explained the Hawai'i Girls Project, the purpose of the study, and extended an invitation to a staff member to participate in the study. The invitation asked for other referrals of potential focus group participants. Follow-up phone calls were made to each organization to determine first, if there was an interest to participate and if so, to obtain the name of the participant. Follow-ups also allowed for potential participants to ask questions regarding the research and the CYR and HGP. Screening sheets were used to confirm and verify the appropriateness of their participation. Confirmation letters with the date, time and location of the focus groups were mailed together with a list of topics and questions to be discussed during the focus groups.

Each session was facilitated by a CYR staff member and two note takers. At the beginning of each group, participants were asked for their permission to be tape recorded (all agreed) which would assist the CYR staff in the data analysis and write up of the report. The participants were assured that their comments would remain anonymous and signed a consent form regarding taping.

Two focus groups were conducted in April 1999. The two focus groups interviewed 12 participants representing 9 different agencies. Of the total number of participants there were 11 females, and 1 male. The program services represented by the participants fell into four broad categories: residential treatment, case management, prevention and intervention. These programs were located in high density urban environments, suburban or rural areas. The majority of participants had previous work experience with male and female adolescents either as teachers, counselors or therapists in Hawai'i or the mainland US. Between all the participants there was a range of 4 to 15 years of work experience with adolescent youth. The work activities and responsibilities of the participants in this study varied. There were at least three individuals who held more than one responsibility in their program that spanned managerial and case management duties. There was one exceptional case in which the individual performed managerial, case management and counseling duties. The job positions of participants included:

- Residential Intensive Program Therapist
- Residential Independent Living Program Counselor, Case Manager and Staff Coordinator
- Residential Coordinator for Male and Female Group Home
- Girls Residential Program Director
- Outreach With Homeless and Runaway Girls and Inmate Counseling
- High School Counselors
- Social Workers in Teen Centers, Youth Shelters, and Foster Homes

## **4. FINDINGS**

There are two parts to the findings section. Part I discusses girls' issues as identified by the youth workers. Part II discusses worker related issues in working with girls.

### **4.1. Issues Among Girls**

#### **4.1.1. Girls' Profile**

While there were few professionals who felt that "there's no typical profile," most professionals felt comfortable profiling a typical girl in their program. Regardless of the work setting of the participant, the girls they described shared common traits.

In general, a "typical girl" was between the ages of 12 to 18 years of age, although, most said 14 - 16 years was the common age. She has had a "tough home life and that's if she is still at home." She comes from large, local families - meaning Filipino, Hawai'ian, Caucasian, Puerto Rican, and some Japanese. There is one parent present in the home, or in other instances "they are raised by their grandparents." To a large extent, she is totally unsupervised. In other cases, her family is Polynesian, Pacific Islander or Asian and "the culture bridge comes from another part of the world to the US." The girl comes from localities that are diverse albeit in a historical sense, for example, there are girls whose families have been in a locality for generations, since the plantation era. In other cases, the areas where the girl lives now has military bases, and new families have moved in because of new housing developments.

The following health, school and social problems were revealed: "Most have been diagnosed with post traumatic stress disorder from some kind of abuse . . . a lot are ODD (oppositional defiant disorder). About 80% have been sexually abused in some form."

Domestic violence has become normalized into the girl's life. She has "either been a witness to, or the victim of, some sort of violence." To some degree, she has "probably experimented with drugs or alcohol..." The girl is sexually active either "willingly or unwillingly." She has poor to average academic performance and is struggling with "truancy, running away, and theft." Some have been in substance abuse treatment and mental homes in lieu of jail. Some have had gang exposure. Not too many are from the upper socioeconomic strata.

#### 4.1.2. Girls' Issues

##### 4.1.2.1. Low Self-Esteem

Low self-esteem among girls was cited as the most common issue that youth workers face. Most participants agreed that the girls in their programs possessed strengths and held a tremendous degree of resilience, however, the girls simply couldn't see this for themselves, nor could they identify these traits as assets. One worker explained that self-identity among the girls that she worked with came vis-a-vis the girl's boyfriend, who, in most cases was also incarcerated.

- *† Majority is low-esteem, trying to get them to see the future and build up that low self-esteem so they can get out of the rut. . . They have strengths, but they have difficulty just naming one strength that they possess. You can see it, but they don't see it themselves.*
- *Because my youth are homeless and runaway and sometimes incarcerated, I encounter low self worth. Most have boyfriends . . . I find often that their boyfriends are also incarcerated. You've got to have a boyfriend to have a sense of belonging. The ones who come to outreach also have boyfriends through whom they find their identity. Some of them have no sense of self except as identified as so-and-so's girlfriend.*
- *I ask them to identify themselves. They described themselves as 'mean, hard-core' and tough'. All bad, they couldn't think of one [good thing] and that's one of the reasons why I go in there, it is to show another way of tapping into their beauty within themselves. But, that seems to be the overall impression that the girls have of themselves.*

##### 4.1.2.2. Internalizing

Most workers agreed that with girls there is a lot of internalizing that occurs. Girls often times will feel responsible, guilty, or wrong for someone else's actions, especially their boyfriends'.

- *When something goes wrong it goes inward not outward.*
- *It's just different. We [females in general] are really much better at expressing ourselves, letting out their feelings and getting support but then again they do blame themselves and then take responsibility for what it is that their boyfriends are doing.*

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†Note: All exact quotes are italicized with bullet points; paraphrases are italicized with diamonds.

- *I can see differences in expression of feelings. They take a lot out on themselves . . . I think girls will take more responsibility, 'I 'm bad, I'm wrong,, it's my fault', way more than guys do and at the same time they'll get really depressed with it.*

#### 4.1.2.3. Female Expression

A majority of the participants agreed that girls express themselves differently than boys. Often, workers felt that girls needed to talk more or were more emotional (e.g. crying). One woman, while agreeing with her colleagues, was careful not to assume that girls will automatically express themselves. One participant noted, that for girls who are incarcerated, open sharing was not an option and in order to counter this she used journals as a way to foster 'an intimate conversation' with the girls.

- ◆ *With the girls I see a little more emotion, crying, they need to talk it all out then everything is OK. Girls need more affirmation. They express their vulnerability more than boys. With boys, they give you a few details or points and that's it. They need affection too, but it's a macho thing. They can't expose their vulnerability.*
- *I think the biggest thing is talking. Girls have a much easier time talking about their feelings. At the same time that's an assumption. There's girls who have a horrible time talking.*
- *The girls feel a sense of belonging and they look forward to that sense of sharing too. They don't worry about what they say and confidentiality, but the girls who are incarcerated, I don't get them to share because it's too scary, it's really survival in there. It's a very dangerous place so sharing is just not an option . . . One technique I find especially helpful, especially with the incarcerated girls is journaling because they can't share, so I give them journals and they just pour out the stuff and it becomes a very intimate conversation between them and me.*

Some youth workers found that this 'expressive nature' of girls assists them with their counseling or therapy because they could better understand what the girl was experiencing since she was talking.

- *It's easier to help someone who is talking; you 'know what's happening,' it's easier to help with what's going on.*
- *Girls strike up relationships more easily with each other, compared to boys, [and at a] quicker rate.*
- *The guys have a much more difficult time talking and they acknowledge that. . . it's just different and it's kind of nice to work with the girls when they're ready to deal with it.*
- *And so in group we hear one another, we validate one another, we hug each other. And the more that we do that, even my girls that are dual diagnosis, you start to touch them from a place of respect and honor they'll just really come around. It's just wonderful to see it.*
- *It really is amazing how they respond to opportunity even though they're under so much stress. It's like when it's time for group they really look forward to it and they don't want to do other stuff except have their sharing time. Even though they are so different, they do give each other, for the most part, a tremendous amount of support. They are able to see just common things that they are experiencing.*

#### 4.1.2.4. The Difficulty of Breaking Patterns and Addictions

Breaking patterns was a difficult issue to deal with according to some participants. Some participants noted that the girls in their programs are following the same type of abusive patterns as their mothers. In some instances, the girls themselves can identify the cycle that they are engaged in, yet breaking these patterns is very difficult.

- *Once women get addicted it's really hard to break the addiction, realistically. I've worked with women who are substance abusers, and battered women. When I look at my teenagers who are on the same path . . . when you start practicing something in your adolescence, and you start dealing with it in your adulthood, the likelihood of breaking that is so unreasonable to me because it feels so good when they get high.*
- *Battered women, we see a lot of that, and that is one frustration. [I've been] working a long time with girls who are beaten. It's a hard, hard, pattern to break, even [after] giving them information and [they're] understanding the dynamic, it's really frustrating to see that.*
- *It's making the choice boy after boy after boy. Losing their ability to have any sensing devices to say this is the same thing like before and I don't want to do it again. I need somebody to love me . . . it's an addiction, and it's hard for them to break.*

#### 4.1.2.5. Boundary Setting - Sexualized Behavior, Risk Taking and Victimization

Developing and setting appropriate boundaries was another issue discussed by the participants. Issues here centered around sexual harassment, assault, sexual conduct, risk taking and the consequences that girls face with pregnancy, or sexually transmitted diseases.

- *They're talking about stuff at school and with boys and major things happen. It's sexual assault, harassment, and they're afraid to do anything and afraid to express themselves. If they do, they come across as a bitch instead of just being firm and holding their boundaries. It's been a struggle for me and how to help the staff approach that.*
- *One additional challenge is having them develop appropriate boundaries and supporting that, and [to] recognize that boundaries aren't firm and what that means. This goes along with their expression as far as human sexuality goes. It seems to be a huge issue. A lot of the time they are really abusive to themselves about their sexuality. They don't set boundaries, and put themselves at risk; pregnancy, STD's, HIV. It's a huge concern. We've been trying to address that in group therapy.*

#### 4.1.2.6. Violence Among Girls

Participants offered mixed responses when talking about violence among girls. In most cases, youth workers made no distinctions between physical violence and verbal aggression. Violence either referred to verbal aggression or physical assault. In most cases however, workers described situations in which a girl's verbal aggression would lead to physical assault. Hearsay or 'talking stink' was cited as the most common form of 'verbal violence' that girls used on other girls.

- *If you want to hurt somebody you spread a rumor about them. Don't confront to the face, spread a rumor.*
- *They see themselves more involved in relationships. When you talk about violence ours [female] is a verbal abuse and when a gang of girls gets together to go after somebody with verbal abuse, it's almost as devastating as physical abuse. There's that need for relationships and it can be positive as well as negative.*
- *They're violent with their words . . . they're vicious the things that they can say.*
- *'So and so said that ' or 'so and so said something to you and I'll call you out' or 'she said she called you out.' It's usually a lot of hearsay and it ends up in an altercation.*
- *Girls polarize quickly, clique of the week. Guys just aren't in tune to that.*
- *It's a real undercurrent, 'don't hang out with her, she's a bitch' or 'ice her' or 'she's dead'. The kinds of ways that they get back at each other are really draining for me.*

Youth workers offered a variety of reasons for girls acting out. Culture and environment were cited as possible reasons for girls' acting out.

- *Violence is the economy, that's the currency. [Violence] creates opportunity. [It's] a warped sense of creating a connection. There's a new person and [they] may not have the skill to go up and introduce. A new girl is a prime target, 'she's from Palolo,' 'she said this,' or 'she said she can lick everybody in here.' Then the fights happen, it's not so much the fight that is of value, as the opportunities that are created afterwards. OK she might have a couple of black eyes but now we can go talk to her. She's not that bad, unfortunately, it took jumping her to find that out.*
- *The girls I work with tend to act more outward, as much as the boys. [I'm] not sure if it's cultural or if it's the environment. The girls feel free to express themselves violently as much as the males do, more verbal, but they get into physical altercations.*
- *I'm not sure [how much] to attribute [violence] to culture -- a lot of it may be environmental too. Lack of coping mechanisms or how to relate, and violence tends to be the economy that is a value in those types of environments so that's the way it gets played out. More and more girls are acting out both verbally and physically. Physical is often cliquish or gang related. This is fueled by alcohol. Combine this with internalizing and acting out comes to forefront.*
- *When asked do girls fight with other girls, they say 'yes' and [is it] often? [They say] 'yes and [it's] physical.' One day one girl was being admitted and everybody races to the window and the remarks were about her ethnic race, she's this and that, the body, the shoes, 'I've got my eyes on those shoes'. Every physical attribute was commented on, the dress, the shoes . . . it was vicious, cruel, horizontally hostile manner.*
- *Girls will fight with girls but I'm noticing increasing amounts of girls fighting with boys, not just girls.*

#### 4.1.2.7. Mediation and Positive Reinforcement

Most participants agreed that incidents that spur violent behavior could be attributed to hearsay that, if left unresolved, would end up in an altercation. A number of workers were quick to note that girls are often good mediators and their support network helps to bring girls together. So girls both break up and mend relationships. There was agreement among several participants that girls are more open to mediation as compared to boys.

- *When it's anger directed at each other too, though, what you find is that they respond to mediation. You know they get hurt, rumors, 'you were saying this and that's not true.' I thought that was good that they can be able to come up, and they know where they can reach out for help and we went through mediation, and it's girls helping girls. Where the mediators are girls and that is very empowering too.*
- *Girls are also very helpful in mediating, or after the fact trying to mend. If it lingers, a lot of the time the girls support network helps to bring the parties together. That's what I've seen in my experiences. While they are guilty of the violation of creating it, they are also guilty of bringing things together.*

#### 4.1.2.8. Ethnicity and Stereotyping

There was a mixed reaction about whether or not girls act out ethnic or racial stereotypes. Most seemed to feel that ethnicity and stereotypical behavior was not an issue among girls, but rather it was a big issue among boys. For girls, acting out was more related to girls taking each other's things, or girls talking about each other rather than ethnic stereotyping. One participant noted however, that gang activity was divided along ethnic lines. Another worker felt the lines for kids, both girls and boys, were drawn according to military vs. non-military or immigrant vs. non-immigrant.

- ◆ *The staff deals more in general in relation to adult projections of ethnic stereotypes upon the kid.*
- ◆ *Ethnicity doesn't play a large part in how they go through program, but it matters how they manage each other. Boys easy to fall into stereotypes, not notice so much with girls. Ethnicity-wise, the girls can take it or leave it, 'don't touch my stuff and you'll be OK.'*
- *It's hard to deal with because there are other things going on in their life; violence in the home, being abused, out all hours day or night. The ethnic stereotypes some times we close our ears and don't deal with it. But where I'm at . . . race doesn't matter, the fairer you are you're left alone, but the darker. . . you get the taunting and singling out, slurs. . it comes out in their speech; 'the black' or 'you're so black.' I think they are echoing what they hear at home, so this is not the kids' culture but the family culture as well. So all the work we've done about teaching ethnic diversity, is just, it's not reality where I come from.*
- *It seems sometimes that ethnic diversity stuff fits the mainland and not here.*
- *A lot of it I think is our expectation that we [referring to the program] set out from the very beginning, and plus the fact that our staff is very ethnically diverse to begin with. We have staff who's Japanese, Filipino and myself and [this] provides female role models for the girls to follow along.*

#### 4.1.2.9. Media Influences

The influence that the media has upon girls was an issue that came up often in these discussions. Most agreed that they felt the need to shield girls from this "sensory overload". If not, self-defeating messages get internalized quickly by girls. Workers also felt that the influence of the media upon boys and girls differed dramatically. For boys, the issue is not body image but rather image. For a lot of boys, they find security in size and the message is that 'it's OK to be big.' For girls however, the message is within the context of body image and what is an acceptable body size. This makes it difficult, if not impossible, for girls to accept themselves. Thus, bulimia and anorexia nervosa become common in work settings.

- *This is what we see -- 'I'm not skinny enough cause I don't look like Tyra Banks' or 'what's wrong with me, I'm so fat' or 'what's wrong with me my arm muscles are big.' Also pushing alcohol and tobacco on young women. Slim [brand] cigarettes and alcohol, you've got to have that to have a relationship pretty much is what they're saying,*
- *They have all these magazines and they say 'she look like this', 'this is the style now but I can't afford that but she can.' You almost have to shield them from that sensory overload that's out there. It's frustrating. You can get them in a support group and build up love and as they're leaving your program they can walk by and see a commercial on TV and everything vanishes just like that. So sensory overload has such an impact. They're not really equipped with the skills to talk and analyze it or to know it's not realistic, but rather it quickly gets internalized so they say 'why are my hips so fat'... so burn all the magazines, turn everything off, incubate them for six months and then expose them to the real world.*
- *The unhealthy look is in... if they're anything other than that they're fat. We have a couple girls that are bulimic, it's a real big issue. It's really unfortunate. [I'd] like to burn all the magazines.*

Lastly, one participant felt that girls seem to be 'swept up' in a romantic idea of love and termed this phenomenon the 'Cinderella Complex'. Some participants seemed to agree that girls truly believe that 'Prince Charming' will come and take them out of the projects and they will live happily ever after. This becomes problematic when girls no longer feel the need to develop a sense of independence or fail to consider the necessity of determining what their future goals will be.

- *Media influences the girls that I work with by instilling the 'Cinderella Complex' or this romantic notion of life. They think they are going to get out of the projects by meeting Prince Charming who is going to sweep them off their feet and take them out... They are still stuck in that romantic notion of what's going to happen. It's very hard to get them to focus on their own goals for the future. They are still waiting for Prince Charming.*
- *It has to do with movies and all the happy endings... it's hard to combat what is engrained in the girls' minds through movie themes and fairy tales... and for kids who grow up in public housing, families have lots of children, it's noisy, people are on welfare, there's trash all over the place, so the kid wants some kind of hope to cling on to.*

## 4.2. Issues Among Workers

### 4.2.1. Acknowledgment of Girls' Stress and Pressures

The youth workers generally acknowledged that girls today are under a tremendous amount of stress and pressure. Some workers stated that while everyone has experienced pressure during adolescence, the confusion that girls face today is different from what the workers recall having encountered during their youth. These youth workers felt that the pressure and stress are fueled by confusion about being female, about sex, stressful home life, boyfriends, work, and school.

- ◆ *It's the case that the girl, given her history [of sexual and physical abuse], can't figure out how to relax. She's always anxious, tense. Now we have an awake staff in the house, they will always be up and if the girl needs something they are there.*
- ◆ *Girls are good, they are good girls. Home situations are, well, they have more pressures today that they have to deal with. It's not like before.*
- *Generally the teenagers that I work with are under a tremendous amount of stress. Stress has a lot to do with confusion of our times. So they have a lot of confusion around sex, being female, their roles. They're struggling with parental disapproval around how they're being different girls from how their mothers were or that their fathers are used to. There's the struggle of not being dependent on a male where as a lot of us are trained to find the perfect man and he'd take care of us forever. So there's still that confusion around who am I and what am I, but it's a little different flavor from when I went through it.*

### 4.2.2. Are Girls More Difficult To Work With?

Most participants in this study did not explicitly state whether or not girls were easy or difficult to work with. Many stated that they liked working with girls and offered various reasons for this position. One female practitioner stated that she had an easier time identifying with girls by virtue of being of the same gender. As stated earlier, the fact that girls talked more made it easier to identify their issues or problems. One parson I interviewed said that having a small number of girls to handle functioned as an incentive for her staff to work with girls. In general the practitioners recognized that girls were indeed different to work with in comparison to their male counterparts and this distinction required different techniques and approaches.

- ◆ *[They are] more open minded, able to sit and listen and hear what you're proposing to them [they are] less accusational toward staff. Boys will say that it's her [staff] fault, they are doing this to hurt me, they don't like me.*
- ◆ *The girls are survivors, they are strong, I'm privileged to work with them. They are able to communicate appropriately. They are very capable of living, but need to channel energy to not endanger themselves.*
- *For me it was easier to work with girls. A lot easier. I think because I am female there's a different dynamic between myself and the client. They reach out to you more as a role model whereas the boys just look at you differently because I'm female. I think it's easier to connect with a female because I am. It was completely different for me.*

- ◆ *It is easier to work with girls. They are not as violent, there is less ego. Girls are manipulative, controlling e.g. 'don't worry I won't tell', those kinds of things, but sometimes these kinds of things that girls do is really the way that these girls have learned to survive.*
- ◆ *I love working with girls. Once when staff was on vacation, I had to handle the boys' group and I didn't enjoy it as much. Boys are much more hostile, more aggressive than girls. You know they have to keep up that macho image, they have to be tough. Girls are more sensible.*
- *I find that girls are easier to talk down, but I don't necessarily have a lot of people going nuts on me.*
- ◆ *Staff wants to work with the girls because there are less of them.*
- ◆ *It takes longer to get to the core of what's bothering them, there are signals to know though. Not with boys, they say something, I did this, then that happened and that's it . . . Not see something coming with boys, whereas with girls you get cues and they are consistent with all the staff. They will act the same way and give the same cues to everyone. To the girls the staff is all the same.*

Some youth workers stated that the value that girls place on relationships with peers served to help them in their programs. The emphasis that girls place on peer relationships and the role of peer networking means that youth workers are able to have girls promote good messages among other girls. However, the practitioners were quick to note that it was important to be aware of the 'ebb and flow' of the relationships among girls because they can polarize quickly and turn against staff.

- *We are in prevention. We use that constantly, bring in girls who are leaders, we recruit. If we can turn them to the positive, and get them excited to be drug free they can have a huge influence over a large amount of girls that we can't touch. We use that.*
- *When we feel the group is getting divided or when you notice that all of the sudden the girl who usually gives you a hug is staying away from you that's the second that you call a talk story session. It's immediate, you get on it you don't let it fester. You don't let them pull sides. They'll pull against you just like they pull against an outside girl. All of the sudden you're the monster and you're wondering 'what happened?'*
- *There's an ebb and flow to the relationships. Can't take it for granted that relationships are always going to be positive. You have to pay real close attention to them. In the same week you can pull a couple of girls together, mobilize them and use them to get out a good prevention message or engage other girls and in that same week you cross them the wrong way or something happens and that same group of 15 could create a ripple effect of people not coming up because then a rumor starts up about the staff .... It makes our job easier when we are in-tune to that 'ebb and flow'. When we exploit it to the advantage of our program and to the advantage of that group and we mend it as quickly as possible if we see it going in the other direction.*

At another level, however, workers indicated that the challenges they did face with girls centered around issues of trust and authority. Often times the girls that they work with come from abusive households so

they look at the world through distrustful eyes. This is the only view they have of adults.

- *Girls need patience, guidance, nurturing and it takes a lot to deal with this. These kids realize that once you start getting close they need to push you away because you can't be trusted, this is all they know, and this is what we have to deal with.*
- *Before I would be threatened and scared to work with these types of kids but not any more. I remember my first case... she sat in a circle with a pillow in front of her, and slightly above her mouth and she just stared at me, her eyes glaring, very stand offish type. This stuff does not phase me because I think wow, you must really be hurting.*
- *One common characteristic among these kids is that they have a hard exterior but eventually I get to see the soft part. When the kid finally admits that life is s---t and I hurt.*
- *If I say to them "what are you doing?" then I'm the mom, I'm the authority. So the authority issues sometimes get in the way because they see me as you're older, you're the enemy instead of [I'm here to help] and I can hear what you say because I trust, because I know that you care about me. And that's sometimes really frustrating for me.*

Another challenge occurs when the choices that girls make are personally challenging for workers. Issues evolved around pregnancy decisions and games that girls play around exploitation and horizontal victimization. There were two sides to victimization and exploitation. On the one hand, young girls were exploiting each other or boys, yet, they were being exploited by adults as the practitioners in one discussion cited the prevalence of girls working in strip bars. On the other hand, girls victimized other girls, but yet, one participant cited how some practitioners would blame the victim.

- *It's not every single girl, the games they play...here's some dumb guy we're going to go make 'A' out of.' I felt really bad, I want to warn them, but on the other side there are some guys who are like, 'hey are you going to score with this one' and you've got the innocent girl. The game play that's around exploitation feels ugly to me.*
- *I'm hearing more about high school age girls working in strip bars. Kids you wouldn't expect apparently they are being 'employed'. I'm hearing that more . . . I think they get paid cash and when the cops are going to come or when they [the owners] feel [that it's getting too risky] then they let them go... They don't hold it at all as prostitution, or as their job, it's total choice that they're doing it, it's the kind of work that they want to do. Before we knew it as a survival. . . It's really sad to me that they are being 'employed.'*
- *Sometimes it's painful to watch and I feel sad for the girls who are in a sense being victimized by their own sisters. I used to see it in programs I used to work in.*
- *What's more is that other counselors or teachers will blame the girl. They'll say, 'well you know she was sort of laughing so she brought it on herself,' or 'she's not serious', or 'oh forget it, she's going to go right back.' That for me it's really difficult, I try to explain to them. I can understand their position too, because I feel frustrated too.*
- *I've been involved with girls that choose not to have the baby and that's a real tough place for me to be.*

- *There have been other times where there was someone who wanted that choice [abortion] and asked that I go with them. My worry as a counselor is that I couldn't do that because then I'd have to call a parent . . . and so I felt really torn.*
- *I know that there are some girls who use abortion as a birth control method and that is really hard for me personally to look at.*

#### 4.2.3. Gender Socialization

Most if not all of the practitioners agreed that girls were not as physically aggressive or violent as boys, thus, being with girls created a much safer working environment. Furthermore, there are no sexual overtones for women working with girls in contrast to boys.

- *Sometimes dealing with boys is peculiar because of the anger issue and the violent way in which they express their anger and given their strength and their body mass it can be quite frightening sometimes. They'll break a door and pick up a weight or they'll throw something.*
- *Girls are not sexually explicit in talk. When we talk about their past week and I ask them did they get angry many will say 'yes'; and if things got physical it was because someone was 'talking s---t' about them. Boys just fight with anyone, girls don't fight as much, they are not proud or as boasting; they won't fight for anything. They are more communicative.*
- *When we are dealing with the boys' group, we usually have a male and female. There is a lot of posturing with the boys, a lot of sexual comments, the boys will give positive strokes to each other for displaying aggressive behavior. They are proud to be brutal.*
- *In a mixed group situation though, this is what I notice, boys are more talkative, so girls are either not as talkative or they become very aggressive. If a boy says something the girl will just say 'f--- you.'*

#### 4.2.4. Challenges of Cross-Gender Supervision

First, practitioners described the difficulty they have with determining the role of men in a predominately all female program or environment.

- *This is always an issue [we're]. . . looking at having male staff, and it's always such a hard thing to figure out what would be most appropriate for the girls. I do know that it would be extremely healthy for them to develop an appropriate relationship with a male . . . where they can count on a male and feel close to a male and that there isn't any sexuality involved. . . At the same time they, and what I feel from the girls, is that they don't feel as comfortable when males are there . . . and when the males work they come to me afterwards and they say the girls just cling to them and attack them or they are just constantly on them. So it's really hard to figure out what's appropriate for them.*
- *For the [male] staff it's really difficult. He said he felt very uncomfortable and he didn't want to be left alone. He was real concerned about being left alone and if they would say something or do something to get him into a precarious situation where he had to defend himself. So he felt so uncomfortable that he asked not to work there anymore.*

The female participants noted the difficulties that the male staff experience with female clients.

- *For male staff it is very hard, they have to watch what they do, what they say, everything. It is harder for them to make relationships with the girls. The girls will do male bashing, blame the male staff for everything, accuse them of things, make charges. It is very hard for male staff. He has to be aware of where he sits, what he says. For boys, it's a matter of 'who's in charge' vs. girls who are manipulative or controlling.*
- *It is easier for female staff. For the male staff it's harder, they must keep shifting and figure [the girl] out. The male staff will see a girl as being manipulative or trying to get around things, or being controlling. In staff meetings the female staff can note the cues more carefully versus male staff. Female staff will tell the male staff it may be that the girl is being manipulative or controlling but it could also be a reflection of a survival skill or coping strategy that the girl is using because this is all she has come to know about how to survive. We have to remind the male staff.*
- *Our male staff is really young, just recently out of college. The girls relate to him in a more sexual way. They slip a lot with him. Female staff notice that way of relating to him. So the relationship between girls and male and female staff is very different. Sometimes they might even see you as competitive, you know in that sense, and they relate to the male staff in a more sexual or flirtatious manner.*

The male participant tended to agree that boundary setting was indeed difficult but that the issue was complicated by gender role reversal. One practitioner noted that in order for a male to work successfully in this field he must have "a sense of himself and a sense of his own boundaries and be able to verbalize that with the girls."

- *A lot of people only get to the point of being uncomfortable and they don't know how to handle this. 'I've never been uncomfortable in my work, I'm uncomfortable, it's not me, it's my situation, and I'm going to remove myself from the situation.'*
- *Definitely there's a role reversal . . . Men may be more 'comfortable' for lack of a better word to be seen as a victim in a situation with other guys than to feel like a victim . . . because in the dynamic we are conditioned to think that we are in control of the situation and we set the rules and we can break them if we want and this is how we do it. If you turn it on us, what are we going to do? It's foreign territory right there.*
- *. . . it's a whole different process and for a whole lot of men they have to be sensitive to that and be willing to be more verbal, more articulate and more in-tune to secure boundaries and watching for transference issues.*

However, boundary setting was not an issue reserved solely for male youth workers. One female participant felt that it was difficult trying to negotiate how to deal with girls. Another female indicated that in order to deal with girls you must not take anything personally.

- *Walking into work at the boys' house it was second nature, but walking to the girls' house I'd be like 'I wonder what they're like' or 'I wonder if they're going to think I'm a bitch' or 'how am I going to approach her about it'. . . I guess hurting them is the thing, you don't want to say something and they internalize it.*

- *Anger directed at me. . . this sounds so elementary, but do not take it personally. If we get into our small ego self, 'do they like me, or not like me.' I just picture them laying stuff down on the table, and if I pick it up then I make it mine.*

#### 4.2.5. Family and Staff Relationships

Most of the practitioners acknowledged the importance that family has in a girl's life. Some practitioners were cognizant of the fact that they must be very careful to help the girl question why she is in a particular situation vis-a-vis the role of the parents. For staff negotiating familial loyalty and the individual was deemed difficult. There were also other confounding factors, such as culture, that made family roles and staff work more challenging.

- *. . . all the role modeling they ever had was those two things [screaming and punching] but you're teaching them another way, which they'll own..*
- ◆ *Parents should be mandated to learn skills that kids are being taught. Kids learn skills but can't use them with parents because parents feel belittled or think that kid is talking back to them . . . some kids will come back and tell me, you know,,, that skill just didn't work with the parent or the adult. [We] need to teach families communication skills all together, not just the kid.*
- ◆ *We're talking about alcohol, ice, crack cocaine. It's usually in that order. Some of my kids say before mom and dad just smoked pot. Before the ice they [mom and kids] used to do all kinds of things together, go out, shopping, go to the mall. Mom and dad used to be more mellow when they smoked pot, but pot is hard to find so now they use ice because there's plenty. All of the sudden mom would give them money to go out, or call someone to pick the kids up so mom can do drugs at home. She just gives them money to get them out of the house. She doesn't spend time with them anymore. So here are kids with lots of money and they are alone. And it sucks. Dad is already gone, he's out doing his 'trip' and now mom is trying to get rid of the kids. So these kids are alone. They have money, time and there's nothing to do.*

#### 4.2.6. Worker Relationships

Some participants have had formal training in social work, others had none. Most seemed to agree that theories or techniques are either confirmed or refuted on the job and on the job training is just as valuable if not more, than formal schooling or training. Some workers felt more training was necessary in their programs. Interestingly, many workers stated that they spent a lot of time "bouncing" ideas off of each other because feedback from co-workers helps the most. Outside training helps with categorizing, etc. but feedback from peers was the most helpful. In this sense the relationships that workers foster among themselves on the job mirrors the value that girls place on their own relationships with peers.

- *Often times it's [theory, methodology] either confirmed and supported on the job or totally ripped apart on the job. So the job is the validator of the things that you get [through formal education or training].*

- *The ongoing support of being able to bounce it off with staff, to say 'Hey I'm having a problem with Cindy, is anyone else having a problem with her, or am I just rubbing her the wrong way?' and it helps to hear 'No, last week she told me to f--- off too, so don't worry about it.'*
- *We spend a lot of time talking about our experiences.*
- *Training helps you to put names on things.*
- *You can talk to an expert 'this is something that I'm struggling with', but they don't have the privilege of the benefit of being there.'*

#### 4.2.7. Sustaining Yourself In This Type Of Work

The role that these practitioners play in young girls' lives is paramount to the future well being of these young people. There were a variety of reasons given as to how these practitioners sustain themselves in this type of 'front-line' work. All participants agreed that they were not in this line of work "for the money" (A comment that elicited a lot of laughter by the participants). Some cited philosophical reasons for being in this job because there is constant self-growth and learning. There is a sense of personal fulfillment. Others felt that it was a privilege to be someone in the lives of young people and be someone who could effect change. Others found young people to be dynamic and noted the small but positive outcomes and successes with youth that make the job worth while. Another person felt that she had to be faithful to kids and not 'bail out' because adults were so transitional in these young people's lives.

- ◆ *Of course people get burned out. People are getting paid \$7.00 an hour to be told that they are s--t and take all this stuff from the kids but when the kid runs away and they are tired and hungry they will call and ask if someone can come pick them up.*
- ◆ *We get paged and called, [we] deal with crisis.*
- *Dealing with the vast differences requires having a vast repertoire of techniques. You use whatever you got in your back pocket that will keep the moment because you can't just say the one thing. I do a tremendous amount of therapy for myself and retreats and counseling and workshops just to keep my tool chest full so that I can do things a bunch of different ways.*
- *You learn a lot of theory but until you practice it for a few years you don't get the hang of it and there will be those who just won't. It's almost I think intuitive working with kids. Some people get the connection and others won't make that bridge and move on to something else. I don't know, it takes a certain personality, certain belief system that enables you to do this work.*
- *It's not easy. [I do] not have the right answer. I tell kids I don't know, though sometimes this is more frustrating. I'm not here to be important. [I] maintain a distance; I still hug the kids, we are warm to each other, they don't expect me to fix things. I also have a life outside of work, that helps me too.*

#### 4.2.8. Program and System Issues and Challenges

When asked what resources are available for girls the most common response from practitioners was "none." Many voiced frustration at the lack of programs for girls. However, if a program existed, it was not holistic in their view. Those areas specifically mentioned for gaps in services were: post-incarcerations services, gay and lesbian counseling programs, and eating disorders.

- ◆ *Not having enough resources for them. I wish programs were more holistic.*
- *The gap I find is with post incarceration . . . They might do some time, but then they go right straight out. There's a huge gap. They're not interested in programs because they see that as being incarceration. For me personally that transitional window is a huge gap in services.*
- ◆ *Girls do get the short end of the stick. programs are designed for boys, but the girls do OK. There needs to be more specialized girl treatments but when work gets crazy, I back off on these kinds of ideas . . . Wish I could do more but then my family would suffer, and I'm working 60 hours a week already.*
- *Recognizing the lack of support by schools and parents to the emotional well being of an adolescent relative to academic well-being.*
- *The court systems are brutal.*
- *Part of my thing is what doors can I open . . . . I would have taken [the girl] out of a home in a second, but it takes CPS a week to get there. If I call my friend then it will be handled differently. That's a little bit of the plus of being around a while.*
- *Sometime it might be wise for us to look at alternatives to punishment. You don't put addicts in prison, people with communication problems or social skills or even knowing how to think in prison. You have to teach them and give them purpose.*
- *No, not enough [options for girls]. We tend to group them with the boys. Once I had a girl who needed help, gay and lesbian counseling, but there were none. Or I had a kid who needed to go to Alanon but the sessions were only offered in the day when the kid is in school.*

### 5. CONCLUSIONS AND RECOMMENDATIONS

#### 5.1. Conclusions

Every year, girls account for one out of four arrests of young people in America. In Hawai'i, they are one out of three of those arrested (FBI, 1996; Chesney-Lind et al., 1997). For years, programs have attempted to develop well founded preventive and intervention services for youth at risk. Unfortunately, many programs' approaches neglect female needs since programs are modeled largely on the male adolescent. Similarly, the practitioners who work with youth at risk, more over those who work with girls, have been largely ignored. The objective of this research was to explore practitioner views, issues and experiences about working with girls in Hawai'i. Our research suggests that these practitioners generally do not cast working with girls as either difficult or easy. Rather, they recognize the differences

between their male and female client population and try to deal with the respective issues. Chief among the differences that practitioners described were those involving female development and socialization.

There are profound gender differences in this country, and Hawai'i is no different. It has been found, for example, that boys benefit socially from aggressive behavior (Beal, 1994). Research has also found that, "in contrast to boys, who were more likely to use direct confrontation, girls were more likely to use rumor spreading, social ostracism, and group alienation". (Holsinger, 1999). This type of relational aggression is defined as "harming others through purposeful manipulation or damage to their peer relationships" (Crick, 1996, p. 2317 cited in Holsinger, 1999). Further, males and females differ in how they resolve conflict. One study, for example, found that adolescent males resolve disputes rapidly, whereas female friends were more likely to separate and later use formal strategies to restore relationships (Katz, Kramer, & Gottman, 1992). Incidents of relational aggression were well documented in this study. Practitioners' descriptions of male aggression and confrontation were not only well defined, but made working in an all female environment much more safe. Lastly, practitioners were well aware of the ability of girls to reconcile, mediate and mend relationships and utilized this conflict resolution nature of girls to their advantage.

Self-esteem and self-identity are the other key developmental issues that define the female adolescent experiences. Positive self-esteem is critical, but it is the most vulnerable aspect of adolescent development (Greene, Peters, & Associates, 1998). Research conducted in 1983 among incarcerated women, for example, found that while women exhibited many strong survival skills, such as assertiveness and independence, they never identified these as valuable skills (Chesney-Lind & Rodriguez cited in Holsinger, 1999). Likewise, our practitioners cited low self-esteem to be the most common issue that they had to deal with when working with girls. Moreover, the youth workers could identify the various strengths that the girls possess, but the girls could not identify these traits as assets. The practitioners in our study indicated that low self-esteem is influenced by media and that society sends confused messages to girls about expectations and appropriate behavior.

Based on this study, youth workers reported that girls are indeed influenced by media driven messages about female body image and the primacy of heterosexual relationships. There is ample evidence to show that teen-oriented media candidly supports mainstream ideologies of gender that emphasis the centrality of heterosexual relationships, and stereotypical norms of physical attractiveness through the consumption of products such as cosmetics, fashionable clothing, and diet aids (Durnham, 1998). For example, one study found that *Seventeen* magazine portrayed girls as "neurotic, helpless, and timid beings who must rely on external sources, usually men, to make sense of their lives" (Pierce 1990, 1993 cited in Durnham, 1998, p. 372). In another, it was concluded that *Sassy*, *Seventeen*, and *YM* magazines "reinforced an underlying value that the road to happiness is attracting males for a successful heterosexual life by way of physical beautification" (Evans et al. 1991, cited in Durnham, 1998, p. 372). In like fashion, Duffy and Gotcher (1996) concluded that *YM* magazine represented a "dangerous and impoverished script" for female teens to consult when attempting to find meaning to the world around them. The influence of the media on female body image reflects the salience of mainland youth culture which objectifies and sexualizes young girls. Girls can be encouraged to access alternative cultures, particularly their own cultural heritage, in order to counter these messages.

This research also indicated that peer relationships was a shared value among girls as well as the practitioners. Workers recognized the value that girls place on relationships and described situations in which negative behavior usually occurred as a result of a break down in relationships among girls. Some practitioners utilize girls' peer relationships to get positive messages out to the other girls in their programs. This strategy was not without its risks however. A break down of relationships between staff

and girls can quickly create a ripple effect in a program in which many girls will turn against the staff. Thus, staff members pay close attention to the 'ebb and flow' of the relations between girls and between the staff and girls. In like manner, the relationships that youth workers foster among themselves were reflective of the value that girls place on their own relationship with peers. Many workers stated that they spent a lot of time 'bouncing' ideas off of each other because feedback from co-workers seemed to help the most when working with youth. In addition, most practitioners found formal training and theory knowledge helped as one practitioner stated that she kept her 'tool chest' full of techniques in order to do things in a variety of different ways.

The inability of girls to set positive boundaries surfaced in practitioner discussions. In order to gain acceptance, girls put themselves in vulnerable positions to be manipulated by others, violated, and become associated with delinquent friends (Holsinger, 1999). Blurred boundaries contribute to confused relationships with friends, family and authority. Practitioners who worked with at-risk girls recognized that their inability to set positive boundaries could potentially result with life threatening consequences. Offering support in identifying their involvement in dysfunctional, abusive relationships and valuing themselves by ending or redefining their roles in those relationships posed difficulties for practitioners.

It was equally difficult for practitioners to establish professional boundaries in the work environment. Practitioner discussions in this area centered around the challenges of cross-gender supervision i.e. the role of male staff in girls programs, role reversal, and transference issues. There are specific challenges that come with being a male staff member in an all-female environment. Conversely, there are benefits to having girls engage in healthy and appropriate relationships with males. However, the challenges are two-fold; girls are not comfortable with male staff or girls behave so inappropriately that the male staff is uncomfortable. Furthermore, male staff must deal with the implications associated with role reversal. Men are conditioned to be in control of situations. In female environments these boundaries no longer hold or are reversed. Lastly, difficulties in the female work environment do not seem to be reserved solely to male staff. Female workers may be dealing with their own gender specific issues of boundary setting.

## **5.2. Recommendations**

These recommendations are aimed at supporting Hawai'i's youth workers with their daily interactions with girls so that the interests and concerns of girls are addressed effectively and efficiently.

### Staff Training and Other Issues

- **Gender Identity and female Development Training for Staff**

Opportunities for staff training is crucial for all staff (from management to direct service to clerical). A shift to gender-specific programming should be complemented with staff training aimed at issues of gender identity, development and socialization (Maniglia, R., 1998). This is especially true prior to the implementation of a gender-specific strategy. Preservice training areas for staff could include: female development, adolescent development, patterns of aggression in girls and female adolescents (in particular relational aggression), assisting female clients in developing and maintaining healthy relational boundaries, and victimization issues (Greene, Peters, & Associates, 1998).

- Gender Staff/Client Interactions Need To Be Addressed

There are specific challenges that come with being a male staff member in a mainly female environment. It is essential that staff be given clear behavioral expectations and focused time in which to discuss their concerns and fears (Greene, Peters, & Associates, 1998; Maniglia, 1998).

- Opportunities for Staff Reflection and Discussion

Programs should provide ongoing opportunities for staff reflection and discussion related to issues of gender identity and socialization. Staff will need ongoing opportunities to discuss how their own socialization is affecting program implementation and staff relationships. Encouraging self reflection assists staff with the evaluation of their own gender role stereotypes and how they apply these to one another and to the young women whom they serve (Maniglia, R., 1998).

- Re-examining Existing Services

As a sufficient knowledge base is developed, it may be necessary for staff to examine their service delivery techniques to determine if they are helping or hindering the young women they are designed to serve. It is best to restate the ultimate goals for each service delivered and identify what mechanisms are currently used for this delivery then allow staff to apply what they have learned in training and personal examination (Maniglia, R., 1998).

- Encouraging Agency Responsiveness to Gender

Oftentimes staff will realize through self examination that several of the ways they currently service young women are oppositional to what the female development literature says is important in the lives of young women. It is imperative that there be administrative support to make changes, however major, so that service delivery can be improved and staff change can be encouraged and more importantly supported (Maniglia, R., 1998).

- Technical Support and Networking

Re-examining services and making changes can sometimes be facilitated by asking for outside assistance. Asking for help can make all the difference especially in cases where staff are firmly rooted in a particular model of service or in situations where staff simply do not know where to begin. Changes to existing programs to better serve the needs of young women may require networking with other girl-servicing programs so that changes can be comprehensive in nature.

### Expand Research on Young Women

The scarcity of research on girls in and out of the juvenile justice system only maintains misguided stereotypes or inadequate programming. Research perspectives can bring to light many of the issues that need to be examined in order to develop theories around girls' experiences with delinquency and to modify the processing treatment of girl offenders (Girls Inc., 1996; Holsinger, 1999).

### Capacity Building Funding-for Youth Workers

Funding aimed at building the capacity of youth workers should be encouraged.

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## **7. APPENDIX 1**

### **Interview and Focus Group Questions**

#### **1. Exploring Development Issues**

- ◆ Nature of Young Girls Problems.
  - How is working with girls different from working with boys?
  - Who are the girls you deal with?
  - Is it often that girls fight with other girls?
  
- ◆ Forms of Female Expression.
  - Describe how girls express themselves?
  - How different is this from boys?
  
- ◆ Addressing Needs and Problems of Adolescent Girls
  - What health issues do girls face?
  - Do you deal often with female health issues in comparison to boys?

#### **2. Exploring Ethnicity Issues**

- Do you notice ethnic/racial stereotypes that affect girls behavior and self-esteem?
- Do you notice cultural practices that could influence programs for girls?

#### **3. Views on Programming**

- What programs do girls respond to?
- What kinds of programs or services are needed by girls that are currently not being offered?

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# JUVENILE JUSTICE

Volume VI • Number 1

October 1999

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Delinquency  
Prevention

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## From the Administrator

## FEATURES

### Investing in Girls: A 21st Century Strategy

*by Leslie Acoca*

Victimization is consistently identified as the first step along a girl's pathway into the juvenile justice system. Addressing the needs of adolescent girls, who now make up the fastest growing segment of the juvenile justice system, offers the Nation its best hope of halting the intergenerational cycle of family fragmentation and crime.

### The Female Intervention Team

*by Marian D. Daniel*

Following an assessment of girls in detention and secure commitment facilities, the Maryland Department of Juvenile Justice developed the Female Intervention Team. Its mission is to restore hope to young women who have lost their direction.

### National Girls' Caucus

*by LaWanda Ravoira*

Although the problems associated with adolescence are exacerbated for girls in crisis, at-risk girls continue to be misunderstood and underserved. In response to this lack of services, the National Girls' Caucus was formed to ensure equitable treatment for girls in the juvenile justice system.

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*Juvenile Justice* (ISSN 1524-6647) is published by the Office of Juvenile Justice and Delinquency Prevention (OJJDP) to advance its mandate to disseminate information regarding juvenile delinquency and prevention programs (42 U.S.C. 5652).

# Investing in Girls: A 21st Century Strategy

by Leslie Acoca

**A**s Americans look back over the 20th century, the increasing criminalization of girls and women and the realization that they now make up the fastest growing segments of the juvenile and criminal justice systems must spark a major public response. Further, as a comprehensive national strategy to promote public safety into the 21st century is developed, the youngest and least visible female offenders—adolescent girls—and their children must be a core focus. Given the developmental and childbearing potential of these young women and the generally low risk they pose to their communities, addressing their needs offers the Nation its best hope of halting the intergenerational cycle of family fragmentation and crime.

Any effort to understand and develop strategies to reverse the accelerating entry of girls into the juvenile justice system must begin with an examination of the current statistical picture. Between 1993 and 1997, increases in arrests were greater (or decreases smaller) for girls than for boys in almost every offense category (Snyder, in press). The 748,000 arrests of girls younger than 18 years old in 1997 represent 26 percent of all juvenile arrests made that year. This proportion has been climbing slowly since 1986 when girls constituted 22 percent of all juvenile arrests (Chesney-Lind and Sheldon, 1998).

Buttressing claims that girls are beginning to catch up with boys in terms of their involvement with more serious and violent crimes, the Violent Crime Index arrest rate for girls rose 103 percent between 1981 and 1997, compared with a

27 percent increase for boys during the same time period. In assessing this disproportionate rise, however, one should keep in mind that the arrest rate for juvenile males for these crimes remains five times that for females (Snyder, in press).

It should also be noted that the greatest increases in arrests of girls between 1993 and 1997 were for drug abuse and curfew violations (Snyder, in press). The escalating number of girls arrested for drug-related offenses should be of particular concern as should the results of a 1998 survey indicating that substance use and abuse among adolescent girls in the general population are rising (Drug Strategies, 1998). Other studies indicate that the unprecedented increase in the number of incarcerated adult women since the early 1980's has largely been due to drug-related offending (Mauer and Huling, 1995).

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There have also been greater increases in the number of delinquency cases involving young women handled by juvenile courts than in those pertaining to young men. Between 1986 and 1995, the number of delinquency cases involving girls increased 68 percent, compared with a 40-percent increase in those involving boys (Sickmund, 1997). Further, paralleling the changes evident in arrest statistics, "the relatively greater increase in cases involving females was due to changes in person offense cases (up 146% for females versus 87% for males) and property offense cases (up 50% among females compared with 17% among males)" (Sickmund, 1997:3).

prevention, intervention, and graduated sanctions services that can be tailored to meet the needs of diverse jurisdictions. Equally clear is the requirement that any such blueprint have as its foundation a research-based profile of the characteristics, needs, and life circumstances of girls at risk of entering the juvenile justice system and those already involved with the system. External barriers such as the paucity of programs specifically designed for girls and the anticipated impact of new Federal welfare and adoption legislation on adolescent mothers and their children should also be taken into account. Addressing these issues can no longer be an afterthought. Specific Federal, State, and local legislative and organizational remedies must be sought.

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### *Are girls traditionally drawn into the juvenile justice system for less serious crimes than their male counterparts?*

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On the surface, these broad national data seem to indicate dramatic increases in the proportion and seriousness of delinquent acts committed by girls. However, the reality underlying the statistics is hotly disputed by researchers and policymakers. Are girls becoming more violent, or are recent trends partially an artifact of girls' lower base rate of arrests and delinquency cases since the 1970's (Chesney-Lind and Sheldon, 1998)? What influences do changing and often less tolerant family and societal attitudes toward girls, shifts in law enforcement practices (particularly toward gangs), and the increasing availability of weaponry exert on girls' offending? And finally, are girls traditionally drawn into the juvenile justice system for less serious crimes than their male counterparts?

What is beyond dispute is the need to construct a blueprint for a comprehensive continuum of gender-responsive

### **Characteristics of Girls At Risk of Entering or Involved With the Juvenile Justice System**

To address many of the challenges noted above, in 1998, the National Council on Crime and Delinquency (NCCD) conducted a multidimensional study of girls in the California juvenile justice system (Acoca and Dedel, 1998). To obtain an official perspective on female offenders, NCCD accessed juvenile justice system databases and conducted an in-depth review of nearly 1,000 case files from multiple points within the probation systems of four California counties. In an effort to delve beneath the surface of statistical and official profiles and obtain the girls' description of their characteristics and needs, NCCD interviewed nearly 200 girls in county juvenile halls. The following study findings confirm the results from much of the research that has been conducted over the past 25 years by

pioneers such as professors Meda Chesney-Lind, Joanne Belknap, and others. The findings also offer additional information that supports the need to reach girls early with intensive intervention and services before they reach the breaking point—that point in early adolescence when so much can go wrong in the lives of girls.

### Victimization and Girls' Pathways to Offending

Leading academics who have examined the constellation of life circumstances typically shared by adult and juvenile female offenders have posited that they follow a unique route into the justice system. According to Belknap and Holsinger, "The most significantly and potentially useful criminological research in recent years has been the recognition of girls' and women's pathways to offending" (Belknap and Holsinger, 1998:1). These and other scholars have consistently identified victimization—physical, sexual, and emotional—as the first step along females' pathways into the juvenile and criminal justice systems and as a primary determinant of the types and patterns of offenses typically committed by girls and women.

Key findings of the 1998 NCCD study of girls in the California juvenile justice system confirm the pathways approach and closely parallel the findings of a 1995 survey of 151 adult female State prisoners; this survey revealed that one of the most universally shared attributes of adult female prisoners was a history of violent victimization (Acoca and Austin, 1996). Ninety-two percent of the juvenile female offenders interviewed in 1998 reported that they had been subjected to some form of emotional, physical, and/or sexual abuse (Acoca and Dedel, 1998). Despite their age, however, a higher

number of the younger women interviewed reported that they had been physically abused, including 25 percent who reported that they had been shot or stabbed one or more times (Acoca and Dedel, 1998). Of critical importance to understanding why many women and girls begin to commit offenses are the early age at which they suffer abuse and the negative repercussions of this abuse on their lives.

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*Victimization—physical, sexual, and emotional—is the first step along females' pathways into the juvenile justice system.*

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The ages at which adolescent girls interviewed were reportedly most likely to be beaten, stabbed, shot, or raped were 13 and 14 (Acoca and Dedel, 1998). Not surprisingly, a high proportion of girls first enter the juvenile justice system as runaways, who often were seeking to escape abuse at home (Chesney-Lind and Sheldon, 1998). In addition, 75 percent of young women interviewed reported regular use of drugs, including alcohol, which typically began at about age 14 (Acoca and Dedel, 1998:91).



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Many academics and practitioners agree (Covington, 1998) and NCCD data reveal that clear correlations exist between the victimization of women and girls and specific high-risk behaviors such as serious drug abuse (Acoca and Dedel, 1998). One reason for this close connection is the capacity of mood-altering chemicals to temporarily dull the psychological devastation wrought by experiences of physical and sexual violation. Tragically, statistical analysis of interview data revealed that both the experience of victimization and substance abuse correlated with multiple risky behaviors including truancy, unsafe sexual activity, and gang involvement (Acoca and Dedel, 1998).

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### *Certain abuses follow girls into the juvenile justice system.*

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Many girls report and, in some instances, NCCD field researchers have observed that certain abuses follow girls into the juvenile justice system. Specific forms of abuse reportedly experienced by girls from the point of arrest through detention include the consistent use by staff of foul and demeaning language, inappropriate touching, pushing and hitting, isolation, and deprivation of clean clothing. Some strip searches of girls were conducted in the presence of male officers, underscoring the inherent problem of adult male staff supervising adolescent female detainees. Of special concern were the routine nature of these acts and the pervasive atmosphere of disrespect toward the girls that they reported permeates not just juvenile justice settings, but also other community institutions.

#### **Family Fragmentation**

The data reveal that the families and caretakers of these girls were subject to

a wide range of stressors, including poverty, death, and an intergenerational pattern of arrest and incarceration.

According to their case files, more than 95 percent of the girls were assessed as lacking a stable home environment, and 11 percent had experienced or witnessed the death of one or both parents or a sibling. Many of the girls interviewed recalled moving back and forth between relatives while they were growing up or being placed in a foster or group home, typically between the ages of 12 and 14, through the child welfare or juvenile justice system.

More than one-half (54 percent) of the girls interviewed reported having mothers who had been arrested or incarcerated. By contrast, 46 percent of the girls' fathers had reportedly been locked up at some point, and 15 percent of the fathers were reportedly incarcerated at the time of the interview. Interviews with the girls indicated that some girls had little or no contact with their fathers, which could account for the lower reported percentage of incarcerated fathers.

Extending the theme of family fragmentation into the next generation, "an alarming 83 percent of the young women interviewed who were mothers reported that they had been separated from their infants within the first three months of their children's lives, a pivotal developmental stage" (Acoca and Dedel, 1998:11). Further, 54 percent of girls who were mothers had not had a single visit with their child or children while in detention or placement (Acoca and Dedel, 1998).

#### **Academic Failure and Schools as a Battleground**

Failing in school was almost as universal an experience as victimization in the lives of the girls interviewed. Ninety-one

percent of girls reported that they had experienced one or more of the following: being suspended or expelled, repeating one or more grades, and/or being placed in a special classroom. Eighty-five percent of girls had been expelled or suspended, and the median age for the first of these experiences was 13. Of girls placed in special classrooms, only 1 percent said that the placement helped them stay out of trouble. Finally, many girls described school as a battleground in which sexual harassment, racism, interpersonal rivalries with peers, and inattention from adult professionals made dropping out appear to be a necessary means of escape.

### Health and Mental Health Issues

Eighty-eight percent of the girls interviewed for this study reported that they had experienced one or more serious physical health problems and more than half (53 percent) stated that they needed psychological services. Twenty-four percent said that they had seriously considered suicide, and 21 percent had been hospitalized in a psychiatric facility on at least one occasion.

Twenty-nine percent of the girls interviewed had been pregnant one or more times and 16 percent had been pregnant while in custody. Of those girls who had been pregnant in custody, 23 percent had miscarried and 29 percent had been placed in physical restraints at some point, usually during transport.

### Nonserious, Nonviolent Offense Patterns

Consistent with studies of the offense patterns of girls conducted since the 1970's, the majority of girls surveyed were charged with less serious offenses (e.g., property, drug, and status offenses) than violent offenses (e.g., murder,

assault). The highest percentage (36 percent) of these girls were probation violators, many of whom reported that their first offense was running away, truancy, curfew violation, or some other status offense. Girls in Southern California reported that having a tattoo or wearing baggy clothes that could be perceived as markers of gang affiliation were sufficient to bring them into contact with law enforcement. Once they were placed on probation, any subsequent offense, even another status offense, became a violation of a valid court order and a vector for their greater involvement in the juvenile justice system.

### *Case files of girls revealed most assault charges to be the result of nonserious, mutual combat situations with parents.*

Qualitative analysis of the circumstances surrounding the offenses of the relatively high percentage (34 percent) of girls reporting person offenses (including assault, robbery, homicide, and weapons offenses) revealed a disturbing picture. A majority of the girls' more serious charges fell into the assault category. A close reading of the case files of girls charged with assault revealed that most of these charges were



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the result of nonserious, mutual combat situations with parents. In many cases, the aggression was initiated by the adults. The following descriptions excerpted from case files are typical and telling: "Father lunged at her while she was calling the police about a domestic dispute. She (girl) hit him." "She (girl) was trying to sneak out of the house at night, but mom caught her and pushed her against the wall." In some instances, the probation reports describing the assaults indicate the incongruous nature of many of these incidents. In one case, a girl was arrested for throwing cookies at her mother.

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### *The disparate treatment of minorities appears to be an important factor.*

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The small number of girls arrested for the most serious offenses—robbery, homicide, and weapons offenses—reportedly committed these crimes almost exclusively within the context of their relationships with codefendants. These relationships fell into two distinct categories: dependent or equal. The first group included girls who were following the lead of male offenders (often adults) who were typically the primary perpetrators of the crime. The second group included girls functioning in female-only groups or mixed-gender groups (including gangs) as equal partners in the commission of their offenses. Finally, the availability of weapons and an increased willingness to use them appeared to be factors in girls' involvement with serious and violent crime. Although the exact relationship between gang membership and more serious offenses committed by girls was not determined, nearly half of the girls interviewed (47 percent) reported gang affiliation, and 71 percent of these girls stated that they had been "very involved."

The disparate treatment of minorities appears to be an important factor in the processing of girls' cases. Nationally and in the NCCD sample, approximately two-thirds of the girls in the juvenile justice system are minorities, primarily African American and Hispanic. Statistical analysis of the NCCD interview data revealed a significant relationship between the girls' racial status and their drug use, history, and offense type. In summary, although whites reported the most drug use, compared with other racial groups, they were significantly more likely to also report that their most recent charge was a probation violation. By contrast, African Americans and Hispanics, despite significantly less drug involvement, were equally likely to report that their most recent charge was for a drug/property or person offense as they were to report a current probation violation.

### **The Breaking Point**

NCCD interviews with girls in the juvenile justice system revealed a remarkable convergence of traumatic experiences and risky behaviors between the ages of 12 and 14. To recapitulate a few of these, the median age at which girls reported first becoming victims of sexual assault was 13 and the median age at which they were first shot or stabbed was 14. Thirteen was the age at which girls were most likely to report becoming sexually active and 14 was the median age at which they delivered their first child. In terms of risky behaviors, girls were most likely to begin using alcohol and other drugs, experience their first suspension or expulsion from school, run away from home, and not surprisingly, experience their first arrest at ages 13 and 14. All these events generally occur in communities in which virtually all institutions—families, schools, and public agencies, including juvenile justice—are failing girls.

## The Paucity of Programs for Girls and the Impact of Recent Legislation

The paucity of services targeting female juvenile offenders is deepening the negative impact of the often traumatic life circumstances described above. Two 1998 national surveys of promising and effective gender-specific programs, one conducted by the Office of Juvenile Justice and Delinquency Prevention (OJJDP) and another as part of the 1998 NCCD study, indicate that there are only a relatively small number of such programs nationwide. Moreover, these programs (with a few notable exceptions such as PACE, Jacksonville, FL; the Female Intervention Team, Baltimore, MD; and Reaffirming Young Sister's Excellence (RYSE), Oakland, CA) are characteristically small and lack the organizational capacity and funding to collect, manage, and analyze client-related data. Particularly scarce are intensive family-based programs (residential, school, and in-home) that provide girl-specific health, psychiatric, substance abuse, and academic services tailored to girls' needs. Also lacking are programs that build and preserve the teen mother-child bond by providing specialized, developmentally sequenced interventions. Program elements that seldom appear are services that effectively address girls' diverse racial and cultural backgrounds and girls' innate strengths and resiliencies. Programs that specifically address at-risk girls in late childhood and preadolescence (8–11 years old) are also rare.

Further, recent Federal welfare legislation may reduce access to essential public benefits for low-income teen mothers and their children. Recent adoption legislation may simultaneously reduce the amount of time incarcerated teen mothers whose children are in foster care have

to demonstrate their stability to family court in order to reunite with their children. In 1996, the U.S. Congress enacted the Personal Responsibility and Work Reconciliation Act, known to the public as welfare reform. This Federal legislation effectively ends the entitlement of poor children to ongoing needs-based support by placing strict limits on the amount of time such children may receive benefits (Wald, 1998). In addition to requiring that parents (overwhelmingly single mothers) hold jobs, it also places special restrictions on teen parents. Parents under age 18 who do not live with an adult or stay in school are denied benefits (Quigley, 1998). Naturally, this places special burdens on abused teens who might feel compelled to leave home because of abuse and on those who have dropped out of school because of learning or emotional disabilities.

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### *Particularly scarce are intensive family-based programs tailored to girls' needs.*

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As female juvenile offenders are highly likely to have experienced both of these problems, they appear to be especially vulnerable. Although establishing paternity can benefit children, there is also concern among legal professionals that States that make receipt of benefits contingent on young women's cooperation in establishing their children's paternity may force pregnant and parenting teens into unwanted marriages (Hoke, 1998).

In addition, the 1997 Adoption and Safe Families Act could further compound the difficulties faced by young female offenders who wish to regain care and custody of their children. Although the Act has the positive goal of protecting the safety and health of the child, it

places tighter limits than those imposed by previous legislation on the time and services available to parents (including incarcerated mothers) attempting to demonstrate their stability to the family court (Larsen, in press). Within 1 year, parents, including adolescent mothers whose children are under the care of the State, must meet all court-imposed requirements or permanently lose custody of their children. When applied to incarcerated women and girls, this could mean that thousands more children will be permanently removed from their mothers and in need of adoptive homes in the 21st century. Unwittingly, this well-intentioned act could potentially lead to establishment of a new, highly vulnerable orphan class of children.

## 21st Century Solutions

Reversing the factors underlying girls' accelerated entry into the juvenile justice system will require a highly organized approach including international, national, State, and local accords, legislation, and initiatives. A key focus of these must be a renewed commitment to eliminating violence toward girls outside and inside the juvenile justice system.

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*Girls in and on the edge of the juvenile justice system represent one of the least-served juvenile justice populations.*

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To this end, the United States should consider its level of compliance with international conventions and standards for the protection of children and ensure that its own legislation and policies match these standards (Amnesty International, 1998). In addition, the development and enforcement of Federal standards pertaining to conditions of

confinement must specifically identify and respond to the needs of girls (Acoca and Dedel, 1998). To reduce violence toward women and girls in American society at large, Congress should continue to support the Violence Against Women Office and other Federal child-serving offices that provide programs and services to at-risk and delinquent girls.

## Federal and State Partnerships

Representing an important partnership between the Federal Government and several States and local jurisdictions, OJJDP's Comprehensive Strategy for Serious, Violent, and Chronic Juvenile Offenders (Wilson and Howell, 1993) helps communities develop a working blueprint for measurably reducing youthful offending (Howell, 1995). Several local pilot sites, including Jacksonville, FL, and San Diego, CA, have completed their strategic plans (a process that involves a communitywide needs assessment). These sites have identified girls in and on the edge of the juvenile justice system as representing one of the least-served juvenile justice populations. As a natural extension of the Comprehensive Strategy, Jacksonville, FL, the home of the PACE program (which by rigorous standards has been identified as a highly effective school-based program for girls), is moving to profile its juvenile female population with research support from NCCD. Further, PACE is working with State and local public and private agencies that serve youth and with NCCD to help design and develop a comprehensive continuum of services for girls and their families, including their children. San Diego County has also extended its Comprehensive Strategy plan to provide specialized programs and services for girls and will receive technical assistance from NCCD while it develops

its programs. Based on its research-based profile of at-risk girls, the county has designed an intensive in-home component for girl offenders, which was recently funded by the California State Board of Corrections. Other jurisdictions receiving Federal support to develop a Comprehensive Strategy can now use these regions as prototypes for the design and implementation of girls' services.

## Juvenile Justice Processing of Girls

At the State level, the California legislature passed SB 1657, the Juvenile Female Offender Intervention Program, in March 1998. This program would have allocated major funding to eligible counties to develop intervention programs designed to reduce juvenile crime committed by female offenders. Although the Governor of California failed to sign the bill, it may yet be resubmitted in California and used as a model for the development of similar legislation in other States. Other legislative strategies include key changes in the intake and processing of girls through the juvenile justice system (such as those mentioned below) and intensive development of gender-responsive services in every jurisdiction across the United States.<sup>1</sup>

The process of disproportionately detaining and sanctioning girls for status offenses and subsequent violations of valid court orders should be ended. OJJDP, the National Council of Juvenile and Family Court Judges, members of law enforcement, and others should be directly enlisted in this effort. Effective diversion and intervention options that specifically address girls' needs and engage their families and caretakers should be developed at the community level. Family-focused programs that intervene in cases of family violence, including domestic

combat between rebellious girls and their caretakers, should also be implemented at the community level.<sup>2</sup> Further, training that provides accurate information on the characteristics and needs of female juvenile offenders and their families and on dispositional alternatives for this population should be available to law enforcement, probation officers, juvenile and family court judges, and child welfare professionals. Such training should be required for all staff working directly with girls in youth correctional facilities.

## Early Intervention for Preadolescent Girls

As indicated earlier, the continuum of programs and services required to reduce girls' entry into the juvenile justice system must be responsive not only to gender and age but to developmental stage. Although the 1998 NCCD study describes a model continuum providing developmentally appropriate services for girls between the ages of 5 and 18, the focus here is on 8- to 11-year-old girls—those at that crucial developmental stage for which there are few existing services. An optimum environment for at-risk girls of this age would be a community-based all-girls school setting that would anchor other services,



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including family counseling, substance abuse prevention, specialized educational services (such as learning disabilities assessment), and mentoring services.

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## *Supporting the development of positive relationships between female offenders and their children is a critical strategy.*

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While the provision of an all-girls environment remains controversial, research conducted by Myrna and David Sadker (1994) of the American Association of University Women Educational Foundation (1997 and 1998) and the ongoing evaluation of the Florida PACE programs support this approach. The PACE program, which currently serves more than 2,500 12- to 18-year-old girls in 15 school-based centers statewide, recently committed to opening its first school-based program for 8- to 11-year-old girls. Once fully implemented and evaluated, this new program will yield invaluable information on the efficacy of educational and therapeutic services for preadolescent girls.

### **Preserving Family Ties**

If a primary goal of the juvenile justice system is to protect public safety now and into the 21st century, supporting the development of positive relationships between juvenile and adult female offenders and their children is a critical long-term strategy. This can be achieved in part by ongoing evaluation of the aforementioned Federal welfare and adoption legislation and by funding, at least in part, the Family Unity Demonstration Project (Amnesty International, 1999). In 1998, Congress enacted the Family Unity Act and by doing so recognized the essential need for family strengthening programs linking incarcerated parents and their

children. Although Congress has not appropriated the funds required for implementation, it could begin to address this need by funding one major demonstration program to preserve the bond between incarcerated mothers, their children, and families. On the threshold of the 21st century, it is imperative to recognize the close relationship between the needs of girls and women and public safety—a relationship based in part on the ability of future generations to remain crime free.

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### **Notes**

1. See *Juvenile Female Offenders: A Status of the States Report* (Community Research Associates, 1998) for descriptions of State efforts to address gender issues.

2. See *Guiding Principles for Promising Female Programming: An Inventory of Best Practices* (Greene, Peters, & Associates, 1998) for examples of these programs.

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# JUVENILE JUSTICE

Volume VI • Number 1

October 1999

## From the Administrator

## FEATURES

### Investing in Girls: A 21st Century Strategy

*by Leslie Acoca*

Victimization is consistently identified as the first step along a girl's pathway into the juvenile justice system. Addressing the needs of adolescent girls, who now make up the fastest growing segment of the juvenile justice system, offers the Nation its best hope of halting the intergenerational cycle of family fragmentation and crime.

### The Female Intervention Team

*by Marian D. Daniel*

Following an assessment of girls in detention and secure commitment facilities, the Maryland Department of Juvenile Justice developed the Female Intervention Team. Its mission is to restore hope to young women who have lost their direction.

### National Girls' Caucus

*by LaWanda Ravoira*

Although the problems associated with adolescence are exacerbated for girls in crisis, at-risk girls continue to be misunderstood and underserved. In response to this lack of services, the National Girls' Caucus was formed to ensure equitable treatment for girls in the juvenile justice system.

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## IN BRIEF

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### Justice Matters

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*Juvenile Justice* (ISSN 1524-6647) is published by the Office of Juvenile Justice and Delinquency Prevention (OJJDP) to advance its mandate to disseminate information regarding juvenile delinquency and prevention programs (42 U.S.C. 5652).

# The Female Intervention Team

by Marian D. Daniel

**I**n 1992, the Department of Juvenile Justice in Maryland developed a task force to assess the needs of female offenders in the juvenile justice system. The female population in Maryland at the time was growing, and State programming for females included little other than commitment to either short-term residential group homes or Maryland's one long-term secure residential program. The task force recommended that a gender-specific program be developed for girls in Baltimore City, which at the time was the largest jurisdiction in the State of Maryland. Thus, the Female Intervention Team (FIT) was born.

Baltimore started FIT in 1992, following an evaluation and assessment of girls in detention and secure commitment facilities by members of the task force. Because this community-based program for girls adjudicated delinquent by the court began without additional funding from Maryland's Department of Juvenile Justice, finding existing staff who were willing to be reassigned to supervise an all-female caseload was a considerable challenge.

Staff support was critical because the program required people committed to the idea of doing something different and unafraid of the unique challenges that supervising females presents.

Once staff willing to work with an all-female caseload were identified, the girls' cases were transferred into the unit and caseloads were reorganized. Because boys

represented most of the cases being handled by those who volunteered, their cases also needed to be transferred to other staff. To accomplish this task, the FIT program director offered staff not working in the FIT unit the opportunity to transfer 1 girl's case for every 10 boys' cases they accepted. Within 3 weeks, the staff had transferred more than 300 girls to the FIT unit. At the time, there was little understanding of why case managers were uncomfortable working with female offenders. Was the problem the lack of resources for girls or the lack of knowledge about what drives girls to commit delinquent acts? In an informal survey, many case managers suggested that both factors were involved. Regardless of the reasons for their discomfort, staff made clear their perceptions of working with girls, as they were willing to take 10 boys in exchange for 1 girl.

*Marian D. Daniel is the Baltimore City Area Director for the State of Maryland Department of Juvenile Justice. She is also the founder and Director of the Female Intervention Team (FIT), Chair of the Maryland Female Population Task Force, and Vice President of the National Girls' Caucus. In 1995, FIT placed in the first runner-up category for the Harvard School Award for Innovations in Government.*

## Team Makeup

The FIT team includes 13 juvenile counselors/case managers and 1 juvenile counselor supervisor. Ten of the case managers have an average caseload of 35 girls, which is low when compared with the average caseload of boys—approximately 50 or more. Two of the case managers provide investigations and reports on all new adjudicated cases, and one case manager is responsible for the organization and facilitation of FIT groups and programs, which provide the girls with specialized services and supportive atmospheres. In addition to the role of case manager and probation officer, each team member is responsible for managing a group or providing the backup for another case manager leading a group. As a team member, each case manager is also responsible for planning and organizing a monthly group activity that may be community or office based. The different ages of team members—and the combination of male and female case managers—contribute to a balanced team. Girls have an opportunity to see relationships between men and women that are neither sexual nor abusive.

Case managers need special traits to succeed in supervising an all-girl caseload. They must:

- ◆ Enjoy working with girls.
- ◆ Be willing to “go the extra mile.”
- ◆ Have an open mind.
- ◆ Be comfortable with their own sexuality.
- ◆ Be nurturers.
- ◆ Serve as role models.
- ◆ Be able to focus on the positive aspects of a girl's life.
- ◆ Provide a safe and supportive environment to assist in the healing process.

## Profile of a Baltimore City Female Offender

The task force's assessment of the information gathered on girls in detention and secure confinement was striking. A large percentage of the girls had been physically or sexually abused. Ninety-five percent came from single-family homes, 14 percent were pregnant at the time of detention, 32 percent had current or past sexually transmitted diseases, and 32 percent had (or previously had) chronic health problems. The girls' offenses, however, were not as surprising. The number one offense was simple assault (Department of Juvenile Services, 1992). The assessment revealed that the typical Baltimore City female offender was—and continues to be—a 16-year-old African American from a single-parent family. Although staff did not understand all the problems associated with this population, they were most concerned with and aware of health problems.

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*Girls have an opportunity to see relationships between men and women that are neither sexual nor abusive.*

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## The Female Offender's Needs

In early 1993, the unit began developing plans to meet these needs. The team of 10 case managers by then had supervised more than 400 girls from Baltimore. Staff had plenty of information and were beginning to understand and document the major issues facing the girls. Research suggested that effective programs for girls must meet several criteria in order to provide effective services. The Valentine Foundation, a charitable foundation that makes grants available to qualifying tax-exempt organizations, places emphasis on

several factors to be considered in developing programs and services for girls (Valentine Foundation and Women's Way, 1990), advising programs to do the following:

- ◆ Ask girls who they are, what their lives are like, and what they need.
- ◆ Allow girls to speak up and actively participate in the services they receive.
- ◆ Assist girls with their family relationships and help them deal with family issues.
- ◆ Assist girls in becoming grounded in some form of spirituality.
- ◆ Allow staff more time and opportunity for building trusting relationships with girls.
- ◆ Allow girls the safety and comfort of same-gender environments.
- ◆ Provide girls with mentors who reflect girls' lives and who model survival, growth, and change.
- ◆ Assist girls with childcare, transportation, and safe housing issues.

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### *Training became a first and essential step in developing and providing productive services.*

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- ◆ Maintain a diverse staff who reflect the girls served.
- ◆ Weave a multicultural perspective through programming.
- ◆ Teach girls coping strategies to overcome domestic violence, physical and sexual abuse, and substance abuse.
- ◆ Understand that relationships are central to girls' lives. Assist girls in maintaining important connections without sacrificing themselves to their relationships.
- ◆ Connect girls with at least one capable and nonexploitive adult for an ongoing supportive relationship.
- ◆ Promote academic achievement and economic self-sufficiency for girls.

### **FIT Training**

Focusing on the above criteria for gender-specific programming was helpful in the development of FIT. Training in how to meet the criteria became a first and essential step in developing and providing productive services. The second step was a request for additional staff to keep caseloads in the FIT unit at a manageable level. The unit also learned that any programs developed would have to provide services addressing the girls' immediate needs.

The first training for the case managers came from the Maryland Infant and Toddlers Program. The program designed a 1-day training seminar to help case managers recognize the developmental stages of infants and toddlers. The seminar also helped staff identify issues faced by pregnant and parenting teens. A 1992 Department of Juvenile Services (DJS) report stated: "A health record review of girls detained and committed to facilities

#### **Female Intervention Team's Mission**

The Female Intervention Team seeks to restore hope to young women who have lost their direction and focus and lack goals. It accomplishes this through a variety of programs and services designed specifically for the female offender.

showed a myriad of health problems and indicated that DJS must look at these girls not only as individual teenagers but also as mothers and potential mothers" (Department of Juvenile Services, 1992). Of the 313 girls in detention facilities and the secure committed unit between May 1991 and March 1992, 44 girls were pregnant and 43 were mothers. Additional training was made available to FIT case managers at no cost to the department.

## Search for Resources and Assistance

Once training took place, FIT staff began to look for programs and services in the community that demonstrated both knowledge and background in working with girls. Their first contact was with the Baltimore Urban League, which had established programs designed to focus on self-esteem. FIT and Urban League staff conducted a series of informational sessions for girls who came to the office for weekly group meetings. Staff showed movies with messages about making choices, resolving conflicts, and getting along in the home and community. The group provided an opportunity for the girls to speak openly about issues in their lives—an opportunity they welcomed. The girls began bringing friends with them and also requested additional sessions away from the office, which gave them more activities to attend after school. Seeing the success with this technique, FIT contacted another city program. This group's focus responded to the need for information on sexually transmitted diseases and the growing incidence of teen pregnancy among the adolescent population.

The Baltimore City Health Department, which already had adolescent groups, was also willing to help. FIT staff gained expertise in gender-specific services for fe-

males while the girls benefited from the information provided by the Health Department and the Urban League. Again, the training and the groups were provided at no cost to the State.

In 1993, FIT requested technical assistance from OJJDP to determine how best to achieve the unit's desire for comprehensive planning. FIT was anxious to learn how to plan more appropriately for the girls. In May 1993, Community Research Associates (CRA) developed a survey, with the help of FIT, to capture the needs of the population (Community Research Associates, 1994). CRA recommended that the unit:

- ◆ Provide special educational testing to ensure that no gap in information between the school system and the Department of Juvenile Justice existed.
- ◆ Make special efforts to strengthen the girls' academic skills.
- ◆ Provide basic health information and make appropriate health referrals.
- ◆ Identify intensive treatment opportunities for girls who had experienced abuse.

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*The group provided an opportunity for the girls to speak openly about issues in their lives.*

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With assistance from the Maryland Disabilities Law Clinic, FIT began to identify appropriate methods to help parents request Annual Review and Dismissals (ARD's) to obtain the necessary special education testing for their daughters. Based on CRA's recommendations, FIT developed an afterschool tutorial program. Several older youth were willing to tutor the youth in the lower grades. Both groups benefited from the program.

Almost immediately after informational sessions conducted for the health group ended, a local physician notified FIT that she had received a 1-year grant to provide family planning services for adolescent girls and needed girls to participate. Again, FIT did not have to seek funding to provide critical services.

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## *Parent orientation and support have become essential components of the FIT program.*

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FIT staff later contacted the Girl Scouts for assistance in delivering female-focused services. The Girl Scouts designed a group for FIT that became involved in arts and crafts, field trips to cultural and social events, and film reviews. FIT now has its own Girl Scout troop, which was started with help from Scout leaders. When it began in 1993, the troop had 20 girls participating in the group every week and now averages about 12 to 15 girls per group. The Girl Scout troop is among the most popular groups at FIT. In addition to the staff facilitator, the troop uses student interns from local colleges who provide new and creative ideas to keep the group fresh.



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Parent orientation and support have become essential components of the FIT program. Parents are invited to participate in a parent support group developed at the request of parents who did not know what to do when their daughters were having problems. Because most of the girls in the program are from single-parent homes, many parents want and need some assistance. Often, they were teen parents themselves and do not want their daughters to make the same mistakes they made. This is especially true for single-parent fathers, who are often not sure what to do to meet their daughters' needs and who feel they need a female perspective. Parents who participate often appreciate the opportunity to receive and share information about "what works." Because many girls reside with grandparents, they too are encouraged to participate in the parent groups.

## **FIT Groups and Programs**

The groups have continued to evolve. Staff have remained flexible and have developed groups to meet the ongoing needs of clients involved in the juvenile justice system. In addition to the groups described above, the following FIT programs are ongoing:

- ◆ **Academic Career Enrichment.** This career enrichment program, which was developed by a college intern who later became a staff member, teaches girls that there are a broad range of career options available to them. Women are invited to speak at the group's monthly sessions about both traditional and nontraditional careers. Girls are taught how to dress to be successful, how to complete job applications and write résumés, and how to prepare for employment interviews. They also learn the important difference between a job and a career.

◆ **Computer and Emerging Technology.** This group was originally established to prepare girls for their GED or the SAT. Like the other groups, it has evolved into something more. For example, participants are currently learning to repair and build computers.

◆ **Rites of Passage.** This program is designed to help girls make a positive transition to womanhood. The celebration of womanhood with symbols, rituals, and spiritual and cultural awareness provides the major focus. Rites also introduce the girls to their ancestors and other women who paved the way for them. Rites of Passage ends with a graduation celebration. For some girls, this is their first encounter with success.

◆ **Pregnancy Prevention.** This program is designed to help girls understand their sexuality and to provide them with information they can use to make choices. The program uses simulated babies donated by a local foundation that mimic an infant's actions to help girls decide if they are ready to be parents. Often, teen mothers talk to the group about their difficulty in trying to attend school and working with little or no assistance from the babies' fathers.

◆ **Teen Parenting Group.** This group was developed at the request of teen parents who need help in parenting their children. The girls wanted to know how to nurture and how to become better parents. The relationship that girls form with the facilitator is beneficial, especially if the girls do not have supportive parents.

◆ **Substance Abuse Group.** This group is designed to provide education and to identify the dangers of drugs. Girls are given the opportunity to talk about the effects of drugs on the mind and body. The group is not intended for girls addicted to substances.

◆ **Conflict Resolution.** Many girls come into the system because of assault offenses. Thus, it is important that they learn new methods to deal with anger and conflict. Participation in this group is mandatory.

During the 1992 holiday season, staff from the Governor's office donated gifts for infants and toddlers. Gifts included a children's table and chair set for the unit so that children of the girls who came to the office would have a place to play or sit and listen to stories. The Governor's staff also donated books and toys to be given to the girls who needed them. The atmosphere in the office has continued to make it a place to which girls can bring their children when they have appointments with their case managers. It is not unusual to see babies playing or being read to while their mothers participate in one of the groups.

## Conclusion

Remaining flexible is helpful in developing a gender-specific program. To create a program that meets the needs of an all-female population, it is necessary to:

◆ Select staff willing to work with females.



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- ◆ Select staff willing to develop a team.
- ◆ Develop a profile of the girls in the program.
- ◆ Understand the needs of the female population.
- ◆ Locate community resources that focus on female issues.
- ◆ Secure interns from local colleges and universities.
- ◆ Provide an office setting that the girls will feel comfortable visiting.

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***Two years after FIT began, 50 percent fewer females were committed to Maryland's secure commitment facility.***

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According to FIT records, 2 years after FIT began, 50 percent fewer females from Baltimore City were committed to Maryland's secure commitment facility. The next year, the decrease was 95 percent. Administrators for the department did not understand why there was such a dramatic change in the commitment rate after just 2 years of providing gender-specific services. The explanation, however, was easy: FIT was not recommending secure commitment because the girls were not committing offenses that warranted secure commit-

ment. Rather, they were running away from home or committing simple assaults and property offenses. In 1994 and 1995, no girls from Baltimore City were committed to the secure facility. In 1996, two girls were committed, each with very serious offenses. Case managers remain very involved with the girls' families.

The team concept has been the key ingredient that has made FIT successful. Staff work together, have lunch together, discuss difficult cases, and develop solutions as a team. Parents and girls know that if their case manager is out of the office, another case manager familiar with their case will see and talk to them. Each case manager is familiar with cases that require special attention. Working together is the key to developing the best programs and services and providing them to clients.

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# JUVENILE JUSTICE

Volume VI • Number 1  
October 1999

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Delinquency  
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## From the Administrator

## **F E A T U R E S**

### Investing in Girls: A 21st Century Strategy

*by Leslie Acoca*

Victimization is consistently identified as the first step along a girl's pathway into the juvenile justice system. Addressing the needs of adolescent girls, who now make up the fastest growing segment of the juvenile justice system, offers the Nation its best hope of halting the intergenerational cycle of family fragmentation and crime.

### The Female Intervention Team

*by Marian D. Daniel*

Following an assessment of girls in detention and secure commitment facilities, the Maryland Department of Juvenile Justice developed the Female Intervention Team. Its mission is to restore hope to young women who have lost their direction.

### National Girls' Caucus

*by LaWanda Ravoira*

Although the problems associated with adolescence are exacerbated for girls in crisis, at-risk girls continue to be misunderstood and underserved. In response to this lack of services, the National Girls' Caucus was formed to ensure equitable treatment for girls in the juvenile justice system.

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# National Girls' Caucus

by LaWanda Ravoira

**N**ever underestimate the power of a small group of individuals to create change, for indeed it is the only thing that ever has.

—Margaret Mead

The National Girls' Caucus, an advocacy group initiated by PACE (Practical, Academic, Cultural Education) Center for Girls, Inc., focuses national attention on the unique needs of girls involved with the juvenile justice system. Although discussion regarding juvenile justice reform continues to take place at national, State, and local levels, at-risk girls continue to be misunderstood and underserved. Advocates continue to fight to save our youth from the negative influences that reach far beyond the concerns of earlier generations of adolescents. The warning signs that should call adults to action on behalf of at-risk girls are clear and compelling, yet services for girls are severely lacking in most communities. Following are some sobering statistics that show what life is like for many teenage girls today:

- ◆ Homicide is the third leading cause of death for African American girls (ages 5 to 14), the leading cause of death for African American women (ages 15 to 24), the fourth leading cause of death for white girls, and the second leading cause of death for young white women. For all other races/ethnic groups, homicide is the fourth leading cause of death for girls and the second leading cause of

death for young women (Anderson, Kochanek, and Murphy, 1997).

- ◆ Girls are sexually abused almost three times more often than boys (Sedlak and Broadhurst, 1996).

- ◆ Victims of rape are disproportionately children and adolescent girls. In a report from the Center for Women Policy Studies, two-thirds of the convicted rapists surveyed stated that their victims were younger than 18, and the vast majority reported that they knew their victims (Tucker and Wolfe, 1997).

- ◆ Each year, nearly 1 million teenagers in the United States—approximately 10 percent of all 15- to 19-year-old females—become pregnant (Maynard, 1996).

- ◆ Eating disorders are more prevalent among girls. Eighty percent of high school girls report unsafe dieting practices in an attempt to reach an ideal body image portrayed by the media (Pipher, 1994).

## Gender-Specific Programming

Because of the many problems that impact the daily lives of at-risk girls,

*LaWanda Ravoira, D.P.A., is President and Chief Executive Officer, PACE Center for Girls, Inc. This private, nonprofit organization and nonresidential program was founded in 1985 as an alternative to incarceration and detention of adolescent females. Today, 17 PACE centers throughout Florida offer support services to girls ages 12 to 18 who are identified as at risk or are already involved in the juvenile justice system.*

national, State, and local policymakers should ensure that services are available to effectively address their changing needs. The problems normally associated with adolescence are exacerbated for girls in crisis. As the above data illustrate, girls present numerous issues including physical and sexual abuse by adults; conflicts at home and school; emotional problems; substance abuse; suicide attempts; problems associated with early sexual initiation, such as teen pregnancy, AIDS, and other sexually transmitted diseases; gang involvement; and low self-esteem. It is imperative that services be available to address these issues. The list below summarizes a sampling of societal problems confronting at-risk girls that warrant special attention by service providers:

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*Females are at least three times more likely than males to be victims of family violence.*

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- ◆ **Domestic violence.** Females are at least three times more likely than males to be victims of family violence (Bureau of Justice Statistics, 1993).
- ◆ **High-risk sexual behaviors.** Because at-risk girls have not had appropriate role models and the opportunity to learn the difference between love and sex, they often equate sexual relationships with love and caring. As a result, they make dangerous choices to engage in high-risk sexual behaviors that can lead to pregnancy, HIV, and sexually transmitted diseases.
- ◆ **Incarceration of close family members.** Girls in need are often the daughters of parents who are incarcerated. Separation from nurturing adults creates a long-term sense of isolation and fear.
- ◆ **Gang involvement.** A significant number of girls are becoming involved in gangs. Factors that motivate girls to join include abuse inflicted by parents
- ◆ **Violence.** The death of a parent, uncle, brother, grandparent, neighbor, or close friend is not uncommon among at-risk girls. Helping these girls cope with death and loss (especially loss due to violence) requires specialized skills in grief counseling.
- ◆ **Sexual and physical abuse.** Many at-risk girls have experienced abuse. In a Commonwealth Fund Survey, 21 percent of the high school girls surveyed reported past physical or sexual abuse. The majority of the abuse occurred at home (53 percent) and more than once (65 percent). Twenty-nine percent of those abused did not tell anyone and 46 percent had depressive symptoms, more than twice the rate of girls who reported no abuse (18 percent). Abused girls also are at double the risk for signs of eating disorders (The Commonwealth Fund, 1997).



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and other relatives, poverty, and the failure of schools and other institutions to recognize risk factors early (Molidor, 1996). Gang membership threatens the girls and the agency staff who are seeking to provide help. Working with young women who are torn between fear of and loyalty to gangs and a desire to leave presents special challenges to staff and the community.

◆ **Alcohol, tobacco, and other drugs.** Girls are closing the gender gap with their male counterparts in the use of substances. The motivation for using these substances is clearly linked to gender-specific issues (e.g., body image, desire to escape the emotional pain of abuse, and peer pressure).

◆ **Adolescent girls and health.** Girls have unique health issues that warrant special attention and access to services. Girls often do not report medical concerns because of fear, lack of trust, and embarrassment.

Despite these trends and the alarming patterns of self-destructive behaviors that girls are exhibiting, little attention has been focused on the unique needs of girls, the obstacles they face, or the services they require. Programs designed to benefit women and girls are significantly underfunded. Currently, less than 5 percent of the philanthropic dollars in the United States are specifically designated for helping women (Nokomis Foundation, 1998; Valentine Foundation and Women's Way, 1990). Experienced service providers report that girls wait longer for services than boys, and local communities often lack gender-specific programming for girls in need. Girls are more likely than boys to be held in detention for status offenses such as running away from home, truancy, or other noncriminal offenses (Chesney-Lind and Shelden, 1997).

## A Small Group Can Create Change

In response to the lack of services for girls in the justice system, the National Girls' Caucus convened its first meeting in March 1993, in Washington, DC, with funding provided by the Valentine Foundation. Gathered together for the first time were child advocates, policymakers, national authorities on gender issues, service providers, educators, legislators, judges, funders, religious leaders, parents, and girls. Participants came together for two common purposes: to address the lack of services for girls in the justice system and to unite forces to ensure gender equity for young women involved in the justice system. The participants soon learned the power of a small group united for a common purpose.

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*In response to the lack of services, the National Girls' Caucus was formed to ensure equitable treatment.*

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### Roundtables, Workshops, and Retreats

The first National Girls' Caucus Roundtable was held in Orlando, FL, in October 1994. At the roundtable, 100 concerned citizens learned about several nationally recognized residential and non-residential prevention, intervention, and treatment programs for girls. Experts led interactive workshops with adults and girls to address the pressing concerns of inadequate access to healthcare, the need for a continuum of services for girls and young women, and the impact of violence in the lives of girls. Interest in the caucus grew from 100 individuals to 1,000 individuals and agencies across the Nation.

Individuals who felt isolated in their communities experienced the positive impact of networking with other individuals from various States who were grappling to address the needs of girls. Resources were freely shared and the group united with a common mission. Examples of the types of diverse resources shared with individuals and agencies around the country include the following:

- ◆ SISTA'S Womanhood Training, Inc., a 12-week curriculum utilizing workshops and seminars, includes topics such as banking and finance, HIV/AIDS and STD's, substance abuse to include fetal alcohol syndrome, health, nutrition, violence, and conflict resolution. Other topics include dating, pre- and postnatal care, etiquette, personal hygiene, respect, and values.
- ◆ The Female Intervention Team provides a gender-specific approach to treating young women who are adjudicated delinquent or are committed to the Baltimore, MD, juvenile justice system. A user-friendly staff training manual has been developed and shared with individuals and agencies around the country.
- ◆ St. Croix Girls Camp seeks to intervene in the lives of girls whose behavior

and/or family situations necessitate temporary removal from the community. The camp assists girls in effectively communicating with adults and forming healthy interpersonal, peer, and family relationships.

- ◆ PACE Center for Girls, Inc., shares strategies for implementing gender-competent programming in any type of facility. The SMARTGIRLS! curriculum, which has been presented at and shared by the center, is one of the first curriculums to focus on the benefits of being young and female instead of focusing on the negative aspects. The goal is to help the girls gain a better understanding of the choices they can make to ensure a safe and successful future. PACE also provides fundraising and grant-writing resources and strategies.

In July 1995, a Strategic Planning Retreat was held in Orlando, FL, to determine the caucus' future direction. Participants adopted a mission statement to guide the caucus' work: focus national attention on the unique needs of girls and young women who are at risk or in the justice system in order to create change.

The caucus formed four working committees comprising members from around

### Caucus Goals

- ◆ To impact public policy, resource allocation, and research in order to improve the quality of care and services for girls.
- ◆ To ensure culturally sensitive, gender-specific programming for girls and young women so they have the opportunity to lead healthy, productive, and safe lives.
- ◆ To ensure fairness in the justice system by eliminating gender, ethnic, and racial biases.
- ◆ To raise public awareness regarding the need for gender-appropriate programming and services for girls.

the country. Committee structure and assignments include the following:

- ◆ **Public Education/Public Relations Committee.** To create a market position and establish alliances within the justice system and with external organizations to promote the mission of the caucus.
- ◆ **Professional Education and Training Committee.** To provide the opportunity for professional training and development of members and the general public; market the gender equity model workshop; develop minimum standards for gender-competent programming; and sponsor annual conferences that focus on girls and young women in the justice system.
- ◆ **Public Policy Committee.** To cultivate supportive political relations at the national, State, and local levels to advocate for legislation that supports gender equity in the justice system.

- ◆ **Program Committee.** To identify needs, solutions, innovative programs, and intervention strategies to address the needs of girls.

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## *Youth facilitators talked about spiritual awareness, gang violence, sexual harassment, and cultural diversity.*

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### **Visions, Values, and Voices**

The National Girls' Caucus has sponsored two major national conferences. The first, "Visions, Values, and Voices," was held in Fort Lauderdale, FL, in October 1996. More than 200 adults and students participated in this conference, which was sponsored by the Valentine Foundation. Shay Bilchik, Administrator, OJJDP, and former Secretary Calvin Ross, Florida Department of Juvenile Justice, were featured keynote speakers. Model programs such as the Female Intervention Team, Baltimore, MD; SISTA'S, Washington, DC; City Girls, Chicago, IL; St. Croix Girls Camp, Sandstone, MN; and PACE Center for Girls, Inc., Jacksonville, FL, were highlighted. The most energizing track was the youth track, in which youth facilitators talked about topics such as spiritual awareness, gang violence, sexual harassment, and cultural diversity.

In September 1998, the second conference, "Beyond Visions, Values, and Voices," was held in Baltimore, MD. Its major objective was to provide reliable information regarding policymaking and funding as they relate to gender-specific programming. In addition, caucus board members have provided technical assistance to agencies across the Nation and



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presented workshops on topics such as the core components of effective gender-specific programming, the realities of growing up female in today's culture, and personal and societal beliefs related to gender roles. Individuals who participate in caucus events have reported the implementation of local programs for girls such as the Reaffirming Young Sister's Excellence (RYSE) program in Alameda County, CA, which was created as a result of one woman's inspiration after attending a caucus roundtable. RYSE, staffed by specially trained probation officers, provides comprehensive services such as career readiness, anger management, pregnancy prevention, cultural activities, family preservation services, life skills, and transition programs to girls and young women served by the Alameda County Probation Department.

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*Through continued collaboration, the caucus will ensure that the voices of girls are heard.*

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Participants in caucus events also have reported the development of State coalitions, such as that found in the State of Michigan. After attending the 1996 caucus conference, representatives from Michigan spearheaded the State's first gender-specific seminar. They were awarded State funding to host a 1-day conference that raised awareness regarding the gender bias existing in the juvenile justice system. This conference drew more than 200 participants to include police officers, educators, juvenile court workers, judges, mental health workers, church representatives, and leaders of juvenile programs. As a result of this conference, Michigan has held two 1-day statewide training sessions and has iden-

tified community members who are committed to improving the quality of life for girls.

## Conclusion

Since its grassroots beginning in 1993, the National Girls' Caucus has continued to thrive. The caucus is currently made up of a broad coalition of individuals from across the Nation. Membership is open to all individuals who are concerned about the welfare of girls and young women. More than 450 individuals and agencies are actively involved representing States from Florida to California. The mailing list has expanded to nearly 2,000 individuals.

A solid foundation has been built to achieve the mission of focusing national attention on the unique needs of girls and young women who are at risk or in the justice system. Much remains to be done. The caucus is committed to expanding its efforts by:

- ◆ Developing a legislative agenda that specifically addresses policy and funding concerns for girls who are at risk or who are involved in the justice system.
- ◆ Increasing public awareness efforts on the national, State, and local levels.
- ◆ Providing technical assistance as it relates to gender-specific programming.
- ◆ Increasing membership and collaboration efforts.
- ◆ Sharing successful State and local program ideas and initiatives.
- ◆ Hosting the third national conference—"Girls: Priority 1"—in the fall of 2000.

The challenge is clear. Caucus members must continue to translate their experience and commitment into action. Creating change requires action at the

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national, State, local, and individual levels. Through continued collaboration, the caucus will ensure that the voices of girls in the justice system are heard. The cost of failure is enormous. The futures of girls are at stake.

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# Women, Girls & Criminal Justice™

ADJUDICATION • CORRECTIONS • SUPPORT SERVICES

Vol 1 No.1

Pages 1-16

December/January 2000

## Editors' Welcome

Welcome to the inaugural issue of **Women, Girls & Criminal Justice (WGC)**.

Last year, as during the previous 15 years, the level of female incarceration in the United States rose at a higher rate than the confinement of male offenders. More girls than ever reside in juvenile detention or under some other form of community supervision. Over 950,000 women are under correctional supervision, with approximately 150,000 in jails or prisons across the country and over 800,000 in community based programs. At the same time, educational and other programs and services within jails and prisons and community-based programming for women and girls can barely keep pace with the growing need.

It is acknowledged by professionals in all disciplines that working with women and girls in the criminal justice system is different than working with men and boys. Advocates, practitioners, scholars, and administrators conclude that many women and girls would be ideal candidates for community-based programs designed to address their specific needs. But there is often disagreement and uncertainty about how to implement alternatives. For those incarcerated, corrections professionals face many issues unique to women and girls that affect all aspects of institutional and program management. As mental health services for the poor have eroded, many jails and prisons are becoming repositories for women with serious mental health problems. Administrators and staff of women's correctional facilities are struggling to deal with a stark increase in mentally ill and substance abusing populations.

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## Successful Gender-Responsive Programming Must Reflect Women's Lives and Needs

by Barbara Bloom, MSW, Ph.D.

Women and girls increasingly are encountering the criminal justice system. The paucity of programs and services geared toward their needs has prompted criminal justice professionals to examine the gendered nature of sanctioning and supervision processes. Criminal and juvenile justice programs, policies, and services that focus on the overwhelming number of men in the corrections system often fail to develop a diversity of options for dealing with the gender—and culturally—responsive problems of women and girls enmeshed in the correctional system.

Little is known about the characteristics of programs, the women and girls they serve, or the elements that make for effective programs and promote successful client outcomes. Many criminal and juvenile justice professionals also lack familiarity with criteria for female-responsive interventions, and often find it difficult to understand how effective female-responsive services differ from effective services in general.

### Programs Must Reflect Women's Lives and Women's Needs

The design of programs that match needs and services must consider the demographic and social history of women

and girls, as well as how various life factors and events have affected their patterns of offending. In general, female offenders differ from their male counterparts in significant ways.

**Nonviolent Property Offenses.** Women are less likely than men to have committed violent offenses and more likely to have been convicted of crimes involving alcohol, other drugs, or property. Many property crimes are economically driven, often motivated by poverty or the abuse of alcohol and other drugs. In a study of California inmates, 71.9% of women (versus 49.7% of men) had been convicted on a drug or property charge. Men also commit nearly twice the violent crimes that women do. B. Bloom, M. Chesney-Lind, and B. Owen, *Women in California Prisons: Hidden Victims of the War on Drugs*, Center on Juvenile Justice and Criminal Justice (San Francisco, 1994).

**Substance Abuse Problems.** Substance abuse and the lack of treatment for such abuse pose major problems for this population. The National Center on Addiction and Substance Abuse found that 54% of the women in state prisons had used an illicit drug in the month prior to their crimes, and 48% were under the

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influence of either alcohol or another drug when they committed their crimes. Behind Bars: Substance America's Prison Population (Columbia University 1998). Among the women in federal prisons, 27% had used an illicit drug in the month prior to their crimes, and 20% were under the influence when they committed their crimes. Among jail inmates, 54% had used an illicit drug in the previous month, and 48% were under the influence when they committed their crimes. Only a fraction of female inmates receive treatment; in California, for example, only 3% of women inmates have access to any type of treatment. Bloom, Chesney-Lind, and Owen, supra.

**Psychiatric Disorders.** Substance abuse is the most common psychiatric disorder among females processed through the justice system. Over 80% of women pretrial jail detainees in one study met the DSM-III-R criteria for one or more lifetime psychiatric disorders, the most common being drug abuse or drug dependence (63.6%), alcohol abuse or alcohol dependence (32.3%), and post-traumatic stress disorder (33.5%). L. Teplin, K. Abram, and G. McClelland, "Prevalence of Psychiatric Disorders Among Incarcerated Women," 53 Archives of General Psychiatry 505 (1996).

**Unemployment.** A survey of female jail inmates found that "over 60% were unemployed when arrested and one-third were not looking for work. Less

than one-third of male inmates were similarly unemployed and less than 12% were not looking for work." W. Collins and A. Collins, Women in Jail: Legal Issues (National Institute of Corrections 1996). Another study of women prisoners found that of those women who had been employed before incarceration, many were on the lower rungs of the economic ladder, with only 37% working at a legitimate job. Twenty-two percent were on some kind of public support, 16% made money from drug dealing, and 15% were involved in prostitution, shoplifting, or other illegal activities. Bloom, Chesney-Lind, and Owen, supra.

**Single Motherhood.** Two-thirds of women incarcerated in the U.S. have children under the age of 18. Bureau of Justice Statistics, 1991. Many of these women feel enormous guilt about being absent from their children's lives and worry whether they will retain custody of their children when they are released; over half (54%) of the children of incarcerated mothers never visited their mothers during the period of incarceration. B. Bloom and D. Steinhart, Why Punish the Children? A Reappraisal of the Children of Incarcerated Mothers in America (National Council on Crime and Delinquency 1993).

**Physical and Sexual Abuse.** In one study, nearly 80% of female prisoners had experienced some form of abuse; 29% reported being physically abused as children and 60% as adults (usually by their partners); 31% experienced sex-

ual abuse as a child and 23% as adults; and 40% reported emotional abuse as a child and 48% as an adult. Bloom, Chesney-Lind, and Owen, supra. Another study found that 23% of female jail detainees had experienced incest or rape as juveniles; 22% had been sexually abused as adults; and 53% had been physically abused. T. Brennan and J. Austin, Women in Jail: Classification Issues (National Institute of Corrections 1997).

### Programs for Women and Girls Must Develop Sound Theoretical Foundations That Address Life Realities

Female offenders are socially and economically marginalized and often victimized by family members and intimates. Studies of female offenders highlight the importance of relationships and the fact that criminal involvement often comes through relationships with family members, significant others, or friends. Abusive families and battering relationships are often strong themes in their lives. This has significant implications for therapeutic interventions that deal with the impact that these relationships have on women's current and future behavior.

**Feminist theory offers new perspective.** Contemporary feminist research does not simply contrast women's lives with those of men. In general, it emphasizes the role of patriarchy and sexual exploitation of women and girls, or "women's place" in relation to offending. Feminist theories also examine

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Women Girls & Criminal Justice is published bimonthly by Civic Research Institute, Inc., 4490 U.S. Route 27, P.O. Box 585, Kingston, NJ 08528. Periodicals postage paid at Kingston, NJ and additional mailing office (USPS # 0015-087). Subscriptions: \$142 per year in the United States and Canada. \$30 additional per year elsewhere. Vol. 1, No. 1, December/January 2000. Copyright © 2000 by Civic Research Institute, Inc. All rights reserved.

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*Legal and Policy Analysis*

# Adoption and Safe Families Act of 1997 and Its Impact on Prisoner Mothers and their Children

by Gail T. Smith, Esq.\*

The dramatic growth in the women prisoner population has a critical impact on our collective future because of their role as mothers and the affect their incarceration has on the lives of their children. As more mothers are locked up, more children are joining the burgeoning population of foster children in a system widely recognized to be a disaster. The question whether these children will be reunited successfully with their mothers, adopted, or will grow up in the system, has always depended as a practical matter on a number of factors, including the length of the mother's sentence, the nature of her offense, her participation and progress in rehabilitative programming, the age of the child, the quality and strength of her relationship with the child, and the attitudes of the case worker and foster parent toward the mother. The hope of reuniting her family is acknowledged by addictions specialists, corrections officials and researchers as a primary motive for women to change their lives for the better. The fear—or reality—of permanent loss of her children can send a mother into a downward spiral of relapse and recidivism.

The dilemma for imprisoned women who have minor children recently got worse. The Adoption and Safe Families Act of 1997 (PL 105-89), known as ASFA, has made it far more likely that mothers of children in foster care will lose their children permanently. While ASFA is intended to provide permanency for children in foster care, its likely impact for many children, in particular older children who are less adoptable, will be to make them legal orphans who have neither ties to their birth parents nor permanent homes. As more children grow up in foster care with no relationship with their mothers, the conditions of their lives put them at risk of becoming part of the prison population. If the law

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provided resources and focused on assisting mothers with addictions instead of so quickly giving up on them, it could help families in a meaningful and lasting way. ASFA fails families on that score. This article explores ASFA and its implementation in the states, and suggests ways to preserve families in spite of it.

## ASFA Changes Foster Care Policy in Fundamental Ways

ASFA makes four important changes to foster care policy at the federal level. First, it removes the requirement for states to provide reasonable efforts to reunite foster children with their parents under specified circumstances, and it emphasizes that the child's health and safety shall be the paramount concern when providing reasonable efforts. Second, it hastens the process of permanency planning and court proceedings, and mandates reasonable efforts to find a permanent placement for the child in cases when reasonable efforts to reunite the family are not required. Third, it imposes a mandate for states to move to terminate parental rights in certain circumstances, with a shorter timeline for parents to complete services and regain custody or face termination. If a child is in foster care for 15 of the past 22 months, the state must move to terminate the parent's rights except under certain circumstances. Fourth, it provides financial incentives for states to increase the number of adoptions completed annually. ASFA also provides for criminal records checks for prospective foster and adoptive parents, calls for documentation of agency efforts to locate an adoptive or other permanent homes, and promotes resources for cross-jurisdictional adoptions and permanent placements of children across state and county lines.

The ideology of family reunification, which some commentators believe has been applied too broadly, never has been applied with enthusiasm to prisoner mothers. This is in part due to the distance foster care caseworkers must travel to provide visits for children with

mothers in prison, and caseworkers' unfamiliarity with prison regulations, resources, programming and staff. It is also due in large part to a widespread bias against reuniting children with a mother who has been to prison. The gap between the policy of family reunification and the practice in reality is stark. Despite the generous efforts of non-profit agencies and volunteers, the dearth of resources to preserve the families of imprisoned mothers is a national shame, particularly since most were convicted of petty offenses.

## The Push Toward Terminating Parental Rights

Under ASFA, reasonable efforts to preserve and reunify families are not required when a parent has

- Subjected the child to aggravated circumstances such as abandonment, torture, or abuse,
- Committed, or had any criminal accountability in, the murder or manslaughter of a child or the child's other parent, or
- Committed felony assault resulting in serious bodily injury to the child or the other parent.

While this would seem a reasonable provision to insure child safety, its application, for example, to battered mothers who have acted to protect themselves and their children against abuse by the other parent and who then are held criminally culpable will likely result in severe injustices against mothers and children in the aftermath of domestic violence since they could be separated under the Act.

Further, ASFA removes the requirement of reasonable efforts to reunify families if the parent's rights to a sibling have been terminated involuntarily. Mothers who have lost children permanently for reasons not related to any mistreatment of the children, including the mere length of time in foster care, face the risk of losing any children they ever have in the future. For any mother who has struggled with addiction and relapse

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for several years before she was able to turn her life around, this poses the ongoing risk of state intrusion and removal of her children even when she is stable in recovery. The perceived unreasonableness of this policy can lead mothers to desperate acts such as forgoing prenatal care or trying to give birth out-of-state.

Even more troubling, states are required by ASFA to file or join a petition to terminate the parent's rights not only in the above circumstances but whenever a child has been in foster care for 15 of the most recent 22 months. There are three exceptions to this termination requirement:

- The state has placed the child in the care of a relative;
- The state has documented a compelling reason why a termination petition would not be in the child's best interests; or
- The state has not provided the family with services necessary for the child's return, in cases when such services are required.

This push toward termination of parental rights based strictly on a 15-month timeline will likely have the worst impact on the largest number of families of imprisoned mothers. For a mother serving even a relatively short sentence, meeting the new time frame imposed by ASFA will present an extraordinary hurdle at best, and in many cases will be impossible. When one considers the number of months, or even years, spent in pre-trial detention in large metropolitan criminal court systems, it is quite possible that a mother found not guilty of a criminal charge could lose her children permanently while awaiting trial on a case. To avoid losing her child permanently, within 15 months of the child's placement in foster care or adjudication as a ward of the court, the mother must establish a household and a source of legal income to support the child, recover from any addiction she may have, and complete all other required services, which usually include parenting classes, counseling and a psychological evaluation. Put this scenario in context of the hardships faced by most women as they re-enter the community after prison, including the severe lack of services or resources to aid their transition from

prisoner to self-supporting community member, and it is clear that they face nearly insurmountable odds in their hope of reuniting with their children in foster care.

### **State Responses Mirror Federal Statute and in Some Cases add Stricter Provisions**

Forty-eight states have passed legislation in response to ASFA. Only Hawaii and Vermont have not amended their state laws. The mandate to file termination of parental rights petitions when children have been in placement for 15 of 22 months was added to 35 state statutes, and 5 other states added provisions that may make the time frame for termination even tighter than that. Illinois, for example, added provisions echoing ASFA and three additional grounds for termination of parental rights that specifically target imprisoned parents:

- There is a rebuttable presumption that a parent is depraved (and therefore unfit) if the parent has been convicted of at least 3 felonies under any state, federal or territorial law, and at least one conviction took place within 5 years of the filing of the termination petition;
- The child is in custody, the parent is incarcerated at the time of the filing of the petition, prior to incarceration the parent had little or no contact with the child or provided little or no support, and incarceration will prevent the parent from discharging parental responsibilities for more than 2 years after the petition is filed;
- The child is in custody, the parent is incarcerated at the time of filing, the parent has been repeatedly incarcerated as a result of criminal convictions, and the incarceration has prevented the parent from discharging parental responsibilities for the child.

These grounds look both at past conduct and prospective availability of the parent. A mother who is working hard in rehabilitative programs and turning her life around is out of luck if her past fits within this profile. So is a mother who is serving a first-time sentence of more than two years and who, in her addiction for example, was out of touch with her children before her arrest. Given the turnover not only of foster care workers but even foster care agencies overseeing services, it is not easy to keep in touch.

The state, however, puts the burden squarely on the mother to do so.

### **From Child Welfare to Criminal Justice System; AFSA Could Create More Offenders**

The recent growth in the foster care system, combined with the proliferation of foster care agencies, can be connected with the anticipated continued growth of the prison-industrial complex. The path from foster care to delinquency, the juvenile justice system, and prison is all too familiar to service providers and advocates working with prisoners. Children in foster care are subjected to multiple placements that forever affect their relationships, sense of self-worth and ability to function as adults. This author has noted a high proportion of clients who were foster children before they were prisoners, many of whom had their first experiences of alcohol, drugs, and sexual abuse in their foster homes. Approximately one in four foster children are abused in foster care. The loss of family connections also means loss of potential family resources for young adults when hard times hit, and thus foster care in childhood has been connected with homelessness in adulthood. The General Accounting Office in its 1995 Foster Care Overview noted a study finding that 2 to 4 years after leaving foster care, 40% of youths had been on public assistance, incarcerated or posed other costs to the community. This is no surprise, and it should make us question the motives of those policy-makers who favor severance of family ties over family preservation.

**Goal of increasing adoptions not met.** The stated goal of ASFA was to increase the annual number of adoptions of children in foster care to 27,000 by the year 2002. However, in 1996 there were over 30,000 more children whose parents' rights were terminated than there were children adopted. Neither ASFA nor the majority of state statutes requires adoptive parents to be identified before a child is permanently cut off from the parents. State foster care budgets depend on federal reimbursement for children in foster care, and since ASFA's financial incentives for increasing adoptions over the annual mean is small in relation to these payments, it is all the more likely that the expansion of termination of parental rights will result in an ever-larg-

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*New Research*

## Convicted Survivors: A California Study of Women Imprisoned for Killing Abusive Spouses

by Elizabeth Leonard \*

What is the trajectory of relationships that end in the death of abusive male partners? Are common patterns discernible in the narratives of battered women who use lethal force to survive and what might the patterns reveal? How does the California criminal justice system respond to women who kill their abusers? How many women are incarcerated for killing their violent husbands, boyfriends, and former intimates and what kinds of sentences do they serve? Who are these women? How do they compare with the general population of women prisoners? These and other questions ran through my mind several years ago while I sat transfixed in a prison classroom as three women lifers told about their experiences in severe abusive relationships.

Finding insufficient data with which to answer these and other questions, I began an ongoing research project in 1995 to establish the number of women serving prison time in California for the death of their male abusers. While other research has yielded valuable information on various aspects of women who kill to survive, we still know little of incarcerated battered women, their pre-abuse lives, the adjudication processes, and their perceptions from inside prison. Shelley A. Bannister, "Battered Women Who Kill: Status and Situational Determinants of Courtroom Outcomes" (Ph.D. dissertation, Department of Sociology, University of Illinois at Chicago 1996).

This study is the first of its kind to offer qualitative and quantitative data focusing on women serving prison sentences for the death of their male abusers.

### The Connection Between Domestic Violence and Spousal Homicide

American women experience remarkably high rates of violence and abuse across their lifetimes. In the vast majority of cases the assailant is the woman's

\*Elizabeth D. Leonard, Ph.D., teaches in the Department of Sociology, Vanguard University of Southern California.

current or former male partner. Over four million women are abused in their homes each year, nearly 2 million suffering severe abuse. Stacey B. Plichta, "Violence and Abuse: Implications for Women's Health," *The Health of American Women* (The Commonwealth Fund 1993). According to 1994 National Crime Victimization Survey data, women experience over 10 times as many episodes of partner violence as men. Eve S. Buzawa and Carl G. Buzawa, *Domestic Violence: The Criminal Justice Response* (Sage 1996). A woman assaulted by her intimate partner is more likely to need medical care than if her assailant is a stranger. Up to 45% of battered women are raped repeatedly by their current and former husbands and boyfriends. Jacquelyn C. Cambell, "Prediction of Homicide of and by Battered Women," *Assessing Dangerousness: Violence by Sexual Offenders, Batterers, and Child Abusers* (Sage 1995).

Violent relationships sometimes escalate into homicide. Battering is the most common precursor to the killing of an intimate partner. Between 1976 and 1996, intimates murdered six out of every 100 female victims and 30 out of every 100 male victims; intimates caused the deaths of 516 men and 1,326 women in 1996; at every age females are much more likely than males to be murdered by an intimate. Lawrence A. Greenfeld, Michael R. Rand, Diane Craven, Patsy A. Klaus, Craig A. Perkins, Cheryl Ringel, Greg Warchol, Cathy Maston, and James Alan Fox, *Violence by Intimates* (U.S. Department of Justice 1998). Further, between 1977 and 1992, the number of women who died at the hands of their current or former male partners increased from 1,396 to 1,510 while the number of males killed by their female partners dropped from 1,185 to 657. Marianne W. Zawitz, *Violence Between Intimates* (U.S. Department of Justice 1994). While men are about nine times more likely to commit murder than women, women represent about one-third of intimate homicide offenders. Greenfeld, et al, supra.

When a woman kills her partner, she uses lethal force to defend herself and/or her children. The majority of women who kill are charged with murder or manslaughter and plead self-defense. Most women are convicted or accept a plea and many receive long, harsh sentences, heavier than men convicted for the same offense. Ann Jones, *Women Who Kill* (Beacon 1996). In contrast to much of the literature, one study reports longer prison sentences for female spousal homicide offenders. Patrick A. Langan and John M. Dawson, *Spouse Murder Defendants in Large Urban Counties* (U.S. Department of Justice 1995).

This comparison excluded life or death sentences from the averages, yet researchers found that women were just as likely as men to receive life sentences. Since the context of conjugal homicides exhibits striking gender differences (four times more wife defendants than husband defendants had been assaulted at or around the time of the killing), such comparisons may contribute to the misconception that the acts are somehow equivalent.

No one knows how many women are in prison for killing her abusers. As a group, battered women homicide offenders border on invisibility. Criminal justice agencies do not collect systematic data on victim-offender relationships in all homicide cases. Thus, penal institutions do not record which women prisoners killed their abusive partners. Current estimates range from 800 to 2,000. However, these estimates may be conservative. Combining and extrapolating from official statistics and informed estimates of the current female prison population (nearly 80,000), the percentage of homicide offenders (about 12%), and the likelihood of abusive partners among the homicide victims (at least 40%), suggests a significantly higher number of convicted survivors—perhaps 3,800 women or more.

See *CONVICTED SURVIVORS*, next page

*CONVICTED SURVIVORS, from page 5*

### **Convicted Survivors in California State Prison Subject of Study**

In the fall of 1995, I began attending a bi-weekly inmate-led support group of formerly battered women at a California state prison. The six months I spent in the group helped prepare me for the upcoming in-depth interviews. While observing group discussions, I realized that, during relationships, during adjudication processes, and during much of their time in prison, many group members had been reluctant or unable to identify themselves as battered women.

Forty-five prisoners, group members and non-members, stepped forward to spend three hours responding to questions and relating their lifetime experiences. Of the women, 42 had been convicted for the murder of their male intimate partners. Most interviewees discussed their cases and experiences with candor even when it was clearly very painful. Surprisingly, most stated that this interview was their first opportunity to express freely their lives, the abuse, and their experiences with the criminal justice system.

The three-hour interview process began with a questionnaire, an abridged version of the survey instrument Barbara Bloom and others used to develop a representative profile of California's women inmates. *Triple Jeopardy: Race, Class, and Gender as Factors in Women's Imprisonment* (Unpublished doctoral dissertation. University of California, Riverside 1996). In-depth, open-ended questions followed the survey phase. Qualitative data yielded information on women's experiences in their family of origin, violent episodes and relationships, deceased batterers, strategies for ending, escaping, or surviving abuse, homicide events, responses of various criminal justice systems and agents, and self-perceptions of these occurrences.

### **Demographics Show Differences Between Convicted Survivors and General Offender Population**

Clear differences are evident between the general population of California female prisoners and women inmates who used lethal force to survive severe violence at the hands of male intimates. Women in the current study are older: 64.3% are 45 years of age and older, compared to only 12.7% of the general population. They have more years of edu-

cation: 76.2% report either technical school or some college or more, while 25.7% of other inmates report the same academic levels. Two-thirds of study participants are white; whites comprise one-third of the general inmate population. Over 50% the homicide group was married at the time of the offense compared to 16% of California women prisoners. Women in the present study were somewhat more likely than other prisoners to have been employed prior to the arrest: 52.4% versus 46.3%. Nearly all the battered women homicide offenders either had worked or had been supported by spouses or partners (88%) compared to less than half the broader population (46.3%). Thus, they are much less likely to rely on public assistance or illegal sources of income.

Compared to other women prisoners, convicted survivors of domestic violence experience dramatically higher rates of physical, emotional, and sexual abuse in childhood and their adult years. As children, formerly battered women were twice as likely to experience physical abuse, nearly twice as likely to endure emotional abuse, and more likely to have been victims of sexual abuse or assault. In adulthood, levels of physical, emotional and sexual abuse were considerably higher for women in the homicide group, often double the rate.

### **Convictions High and Sentences Harsh of Battered Defendants**

California currently leads the nation in its number of prisoners. Out of 160,000 inmates, 11,000 are women. According to conviction and sentencing patterns, prosecutors, judges, and juries show little lenience in the cases of battered women who kill. Trials and plea bargains netted a voluntary manslaughter conviction for only two women and second-degree murder for 18 women. More than half the interviewees (52.4%) received convictions for first-degree murder.

With terms of 10-to-14 and 15-to-19 years, only two women avoided the potential of life in prison. The vast majority of the sample received lengthy and indeterminate sentences. Eighteen women are serving between 7 and 20 years to life (of those given 7-to-life, each has served over 20 years in prison thus far, paroles have been close to nonexistent). Fifteen women are serving terms that exceed 20 years-to-life and six carry sentences of life without the possibility of parole.

The majority of homicide cases were intraracial. However, being white provided no advantage in adjudication and sentencing. Of the white interviewees, two-thirds received some form of life sentence and nearly all the life without parole sentences went to white women. Out of eight African Americans, four received 15-to-life and four carry 20 to 30-to-life terms. Hispanic sentencing ranges broadly from the shortest to the longest sentences. Two Native Americans serve over 15 to 20-years-to-life and the Asian American serves 7-to-life.

Despite histories clearly lacking in social pathology or violence, these women received long, harsh sentences and hold little hope for parole. With typically high levels of schooling, prison educational programming with its remedial emphasis has little to offer them. Women in this study lack criminal backgrounds, thus they have scant need for social rehabilitation. This demographic profile reveals significant childhood and adult maltreatment at the hands of family members and intimate partners. Unfortunately, there are few correctional programs in California to address these needs.

### **Narrative Themes and Patterns Reveal Psychology of Inmate who Suffered Severe Domestic Abuse**

The qualitative phase of the interview process was structured to move women's narratives from childhood, through abusive relationships, to the homicide event and the criminal justice response, and into prison. As interviewees responded to open-ended questions, recurring themes and patterns began to emerge in their narrative accounts.

**Participants consistently played down battering.** Despite a great deal of self-education, support group discussion, and reflection on the events that led to their incarceration, study participants repeatedly minimized the severity and significance of their maltreatment. When asked if the abuse continued during her pregnancies, a mother of two daughters answered in the negative. Later interview material reveals that her husband continued to hit her in the head throughout both pregnancies. How did she explain her earlier denial? "I didn't consider it hitting, because it was above the neck!" The interview process allowed women to examine in retrospect their experiences and consequently redefine events and situations as abusive.

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# Helping Women Recover From Substance Addiction Requires Treatment Programs Tailored to Their Specific Culture and Psycho-Emotional Needs

by Stephanie S. Covington, Ph.D., L.C.S.W.\*

*Editors' Note. This article was adapted from the chapter, "Introduction to Substance Abuse Treatment for Women," in Dr. Covington's book *Helping Women Recover: A Program for Treating Substance Abuse, Special Edition for Use in the Criminal Justice System* (Jossey-Bass 1999). Dr. Covington's book provides a treatment program based on theory and clinical practice, and consists of two components: a *Facilitator's Guide* and a *Women's Journal*. The introduction to this program, from which this article was adapted, provides the theoretical basis for the program. A step-by-step guide follows, explaining what the facilitator will say and do in each meeting of the women's group. Along with the step-by-step instructions are notes for the facilitator that explain the goal and the process of each exercise. The *Facilitator's Guide* is designed to be used along with the *Women's Journal*. Each woman in the group receives a journal, in which she completes exercises and draws or writes her reflections on what she is learning in the group. To order a copy of Dr. Covington's book, contact Jossey-Bass, Inc. at (866) 378-2537, or visit their website at [www.jossey-bass.com](http://www.jossey-bass.com).*

Historically, substance abuse treatment has not been emphasized in the criminal justice system. However, as greater proportions of female offenders are perceived to have substance abuse problems, and as substance abuse is recognized as a pathway to crime that can be treated, interest in such treatment is increasing.

## Placing Female Substance Abuse in Historical Context

In the United States, it was illegal to show a woman drinking in a movie or advertisement until the 1950's. Families have far more denial about their sisters' and mothers' and daughters' substance abuse than they have about the addictions of men in the family. Surveys in the 1960s and 1970s repeatedly found that women and men of all socioeconomic classes considered drunkenness "worse"

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for a woman than for a man. J. Lawrence and M. Maxwell, "Drinking and Socioeconomic Status," in D.J. Pittman and C.R. Snyder (eds.), *Society, Culture and Drinking Patterns* (John Wiley 1962); J. Rachal, "A National Study of Adolescent Drinking Behavior, Attitudes and Correlates," (Research Triangle Institute 1975); M. Sandmaier, *The Invisible Alcoholics: Women and Alcohol* (2nd ed.) (TAB Books 1992); M. Sterne and D. Pittman, *Drinking Patterns in the Ghetto* (Vol. 2) (Social Science Institute, Washington University 1972).

This double standard still continues to hinder women from receiving the help they need. Their own shame and their family's shame about admitting their addiction is often greater than it is for a man. The invisibility of women's substance abuse often blinds us to the distinctive patterns of women's abuse and their distinctive needs in recovery. Additionally, research into women's addictions has been slow in coming. V. Brown, "Interview with Maggie Wilmore, Chief of Women and Children's Branch, Center for Substance Abuse Treatment," 27(4) *Journal of Psychoactive Drugs* 321 (1995).

Consequently, treatment approaches intended for both sexes have been based on research into men's experiences.

**Alcoholics Anonymous and the Jellinek Curve.** In the 1930's two men developed, Alcoholics Anonymous (AA), a recovery program for alcoholism. AA's "Twelve Step" program proved successful for male alcoholics and has become the standard for many kinds of mutual-help recovery groups. Because many women also have recovered through AA, it has been difficult to question and discuss its contributions to and limitations for women's recovery. Just as women with addictions were invisible, so their experience of recovery or lack of it was invisible.

The practical experience of AA became one of two cornerstones on which treatment programs were based. The second cornerstone was the research

analysis of E.M. Jellinek, whose model of how people recover from addiction became known as the Jellinek Curve. Jellinek's research on the process of addiction and recovery was based on a small sample of AA survey respondents with 98 useable responses that were all men. While 15 women also responded to the survey, Jellinek determined that their sample was too small to be analyzed separately and, because their responses "differed so greatly" from that of the men, he threw out their responses and based his model on the men's data. E.M. Jellinek, "Phases in the drinking history of alcoholics: Analysis of a survey conducted by the official organ of Alcoholics Anonymous," *Quarterly Journal of Studies on Alcohol* 1 (1946).

**The Jellinek Curve has been a cornerstone of male and female treatment programs for fifty years.**

**Therapeutic communities influential in correctional settings.** Another strand of thinking about substance abuse emerged in 1958 when Chuck and Betty Dederich founded Synanon. Chuck Dederich, an alcoholic and former Gulf Oil executive, wanted a more challenging and interactive approach to sobriety than AA provided. He began hosting AA meetings with cross talk (responding to someone else's story with feedback), a process discouraged in AA. For economic reasons, recovering alcoholics began living together in what came to be called a "therapeutic community." In that community, the first heroin addicts entered recovery without medical intervention.

In 1963, Dr. Dan Casriel founded DAYTOP and began to spread therapeutic communities throughout New York and Europe. Dr. Mitch Rosenthal founded Phoenix House in 1967; it continues to have more than a thousand residents in long-term care. The therapeutic-community model has been especially influential in correctional settings. Many correctional programs use what they call "modified therapeutic communities." The confrontational approach

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traditionally used in therapeutic communities has not proven effective with women. Women require a different basis on which to build community: respect, mutuality, and compassion, as opposed to confrontation. An emphasis on assets and strengths, as opposed to tearing down the ego, has proven most effective with women.

**Changing views on how addiction works.** For generations, societies viewed the use of alcohol or other drugs and the things people did while using them as signs of something morally wrong with the user. Under this moral model, relapse is attributed to the lack of willpower or seen as a crime.

In the 1950's, mental health professionals used a psychological model: addiction was seen as a sign of an underlying psychological disorder. If one could somehow solve that disorder, the addiction would go away. Any loss of control while drinking or using other drugs was seen as temporary and secondary to the primary problem. Also in the 1950's, the chemical dependence treatment field was born. Drawing on the work of AA and the Jellinek Curve, practitioners outlined and advocated a disease model of addiction. They saw addiction not as a symptom of something else but as a primary condition with its own symptomatology. They compared addiction to diabetes, a physical disease that carries no moral stigma. Neither addiction nor diabetes can be managed through willpower; both require a person to maintain a lifestyle regimen for emotional and physical stability. They also understood that the disease of alcoholism included not just physical but emotional and spiritual dimensions.

In the 1990's, health professionals in many disciplines began to revise the concept of disease in general. Based on a holistic health model, we are now acknowledging that diseases include physical, psychological, emotional and spiritual dimensions. Beyond those dimensions, all of which are rooted in the individual, we are finding environmental and sociopolitical aspects of disease.

Although professionals continue to debate the merits of a disease model versus a disorder model, the holistic disease model has proven to be more helpful in treating substance-abusing females. It allows clinicians to treat the addiction as

- 54% of women in state prisons and jails and 27% of women in federal prisons had used an illicit drug in the month prior to their crimes.

- 48% of women in state prisons and jails and 20% of women in federal prisons were under the influence of either alcohol or another drug when they committed their crimes.

—National Center on Addiction and Substance Abuse (1998).

a primary problem (not just as the result of underlying psychological disorder or a sequence of learned behaviors) while, at the same time, addressing dimensions of the disease such as genetics, health consequences, depression, relationships and/or a history of abuse.

#### **Single-Gender Groups Work Best for Women**

Research suggests that, although men may benefit from mixed-gender groups, women benefit more from all-female groups. E. Aries, "Interaction Patterns and Themes of Males, Females, and Mixed Groups," 7(1) *Small Group Behavior* 7 (1976).

In all -male groups, men say little about themselves, their key relationships, or their feelings. In all-female groups, women share a great deal about themselves, their feelings, and their relationships with lovers, friends, and family. In mixed groups, men reveal much more about themselves and their feelings, while women reveal much less. S. Priyadarsini, "Gender Role Dynamics in an Alcohol Therapy Group," in D.L. Strug, S.P. Priyadarsini, and M.M. Hyman (eds.), *Alcohol interventions: Historical and Sociocultural Approaches* 179 (Haworth 1986).

The amount of sharing differs as much as the content. In all-female groups, women strive to equalize the amount of time each woman talks; they draw one another out, fall silent after long speeches, speak up more after an absence or long silence, and avoid dominating the conversation. However, in mixed groups women tend to yield the floor to men; women take up only one-third the time, even though they make up half the group. Men often punish women who fail to yield to them.

Women are much more supportive of one another in all-female groups than they are in mixed groups. Many women are socialized to compete with one another for male attention when men are present but will cooperate with one another when men are not present. Aries found that, over time, women who were placed in both mixed and single-gender groups expressed a preference for the single-gender groups. Men, over time, preferred the mixed groups.

#### **Addicted Women Have Hard Time Getting to Point of Admitting Their Addiction and Moving to Recovery Because of Social Stigmas Attached to Female Substance Abusers**

We can envision the process of addiction and recovery as a spiral. The downward spiral of addiction revolves around the drug of choice. Addiction pulls the addict into ever-tighter circles, constricting her life until she is completely focused on the drug that becomes the organizing principle of her life. Using the drug, protecting her supply, hiding her addiction from others, and cultivating a love-hate relationship with her drug begin to dominate her world.

When a woman is in this downward phase of constriction, the counselor's task is to break through her denial. She must come to a point of transition, in which she must shift her perceptions from believing she is in control to admitting she is not in control, and she must stop believing she is not an addict and admit that she is one. S. Brown, *Treating the Alcoholic: A Developmental Model* (John Wiley 1985).

Both shifts can feel humiliating. Our society's double standard inflicts far more shame on a woman who has an addiction than on a man who does. It labels her a "slut," "lush," "unfit mother," and so on. Although society may stigmatize a male addict as a bum, it rarely attacks his sexuality or his competence as a parent. A woman who enters treatment may come with a heavy burden of shame. She does not need to be shamed further; rather she needs to be offered the hope that she can recover.

The upward spiral of recovery revolves around the drug in ever-widening circles, as the addiction loses its grip and the woman's world expands away from the drug. Her world grows to include healthy relationships, an expanded self-concept, and a richer sexual and spiri-

See *HELPING WOMEN, page 12*

## From the Literature

by Russ Immarigeon\*

### *Women, Drug Abuse, and Jails*

#### **Women Inmates, Drug Abuse, and the Salt Lake County Jail**

by Allan F. Rice, Larry L. Smith, and Fred Janzen

13(3) *American Jails* 43  
(July/August 1999)

One hundred women incarcerated at the Salt Lake County Jail (Utah) were interviewed about previous arrests, family background, drug history, and other demographic factors by a team of jail-based mental health staff and university-based social work researchers. Most of the women were imprisoned for drug offenses or drug-related property crimes. On average, they spent 42 days in confinement. Most of the women were white, but black and Hispanic women were nevertheless over-represented in that these incarcerated ethnic populations were greater than their respective populations in the community. Of the nine women who had committed violent crimes, five had assaulted or killed a partner or spouse.

Sixty-two women were receiving mental health services in the jail. Thirty-eight women had been physically abused as a child, and 73 women reported physical abuse as an adult. Depression was present for 64 women, and 52 had attempted suicide at least twice. The authors conclude that short-term drug treatment is feasible for this population, and that without drug treatment, the trend toward increased drug arrests is likely to continue.

Although the jail is apparently starting an aftercare program, little information is given about the nature of either short-term or after-care treatment, and no discussion is provided about the inappropriateness or limitations of such treatment in a jail setting.

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### *Agency and Choice*

#### **Agency and Choice in Women's Prisons: Toward a Constitutive Penology in Constitutive Criminology at Work: Applications to Crime and Justice**

(eds. Stuart Henry and

Dragan Milovanic)

by Mary Bosworth

State University of New York Press  
(1999)

In 1995-96, Mary Bosworth, working for her doctorate at Cambridge University (she now teaches at Fordham University in New York City), conducted semi-structured, conversational interviews with 52 women between the ages of 18 and 56 who were serving sentences from six months to life at three British prisons (Drake Hall, Pucklechurch, and Winchester). In this brief chapter, she examines, from a constitutive perspective, "the ways in which incarcerated women perceive themselves to be 'agents' and the values which they attach to this self-image."

Women's self-identity, according to Bosworth, is inevitably eroded by the inherent constraints of confinement. However, she notes, women resist these constraints through spirituality, lesbianism, racial and ethnic identity, class, education, and even the ideation or valorization of motherhood. Women in prison, she observes, are not a unified group, and differences between them allow them to choose individual expressions of self and forms of resistance to control and stereotyping by prison culture, organization, and staff. Women prisoners were quick to reject choices given them in the institutions, particularly if they were directed by prison officials at the women's gender, ethnicity, or nationality. "The intersection of race, class, and nationality prevents any simple discussion of choice and oppression for minority women in prison, since they did not constitute a homogenous group."

Notably, women seized control of images, even if patriarchal or stereotypical, as a form of resistance. Bosworth concludes that "the women evaluate their choices through a framework which is embedded in their social relationships

and in their ethnic and cultural identities outside the prison. Consequently, the women's ability to resist the strains of imprisonment does not rest entirely upon the choices which prison makes available to them. Rather, women resist through enacting diverse images of femininity that, in their variety, subvert the dominant image of white heterosexuality advocated by the prison and idealized in the community." In short, the women in these prisons were tenacious. They often resisted the sorts of behavior prison officials would readily object to, while at the same time empowering themselves by staying away from manifestly rule-breaking behavior that could be penalized by the institution. In other words, the behavior of these women effectively challenged the boundaries of officially proscribed behavior. They did not simply "follow the rules." Yet, they kept themselves beyond the institutions' mechanisms of institutional control.

Copies: SUNY Press, State University Plaza, Albany, NY 12246, (518) 472-5000.

### *Female Gangs*

#### **Female Gangs in America: Essays on Girls, Gangs, and Gender**

edited by Meda Chesney-Lind and John M. Hagedorn  
Lake View Press (1999)

Female gangs are often given public notice in newspaper or television feature pieces. In many cases, a "girls-do-violence-like boys-do-violence" perspective is juxtaposed with colorful pictures of young women who seem more comforting than menacing. Yet, the theme of these features is that girls are gaining on the boys. Meda Chesney-Lind has done more than anyone to debunk media misrepresentations of gang girls (and girl delinquents in general), and she joins John Hagedorn, another astute ethnographer, to bring together, under one cover, "the existence of decades of rich, scattered, and sometimes fugitive research efforts on the subject of girls and gangs."

*Female Gangs in America* is divided into four parts: historical perspectives; emerging theory on gender and gang membership; economic and social change aspects of "doing gender"; and

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*GENDER-RESPONSIVE, from page 2*

female criminality as a reflection of women's and girls' lives and their attempts to survive.

Contemporary feminists assert that the differences between men and women should be viewed as sources of strength, not weakness. These strengths include women's capacity for relatedness and connection. According to Dr. Jean Baker Miller, "women build on and develop in a context of attachment and affiliation with others." J.B. Miller, *Toward a New Psychology of Women*, p. 83 (Beacon Press 1976). Miller calls for a new approach to psychology that acknowledges the different nature of women's development — an approach that affirms that connection, not separation, is the basis of growth for women.

Carol Gilligan explored relational issues in the context of development and moral reasoning. She explained differences in moral reasoning in a manner that did not devalue women's or girls'

behavior. According to Gilligan, boys develop their identity in relation to the world, while girls develop their identity in relation to others. In her studies of moral development, she discovered "a different voice" among women that emphasized relationship, commitment, and care. C. Gilligan, *In a Different Voice* (Harvard University Press 1982).

**Have to acknowledge differences among women and girls.** Theories that focus on female development, mutual caring, and empowering relationships can be useful tools for correctional programs for women and girls. However, while women's focus on relationships can be a self-empowering growth experience, differences still exist among women (e.g., race, class, culture, and sexual orientation) that must be acknowledged in any theoretical or programmatic framework. Methods of survival and resistance to race, class and gender oppression must also be articulated in evolving theoretical and programmatic models.

## Guiding Principles for Gender-Responsive Services

What exactly are gender-responsive services? Several clear statements of guiding principles and criteria are available.

**Acknowledging differences.** The Oregon Intermediate Sanctions for Female Offenders Policy Group defines gender-specific programs as those that "take into account real differences between men and women in their learning and relationship styles and life circumstances. They are not those that admit only women and use the same approaches as are applied to men offenders." Intermediate Sanctions for Women Offenders, Intermediate Sanctions for Female Offenders Policy Group (Or. Criminal Justice Council, Or. Dept of Corrections 1995).

Beth Glover Reed defines women-oriented chemical dependency treatment services as those that address women's specific treatment needs; reduce barriers to recovery from drug dependence that are more likely to occur for women; are delivered in a context that is compatible with women's styles and is safe from exploitation; and take into account women's roles, socialization and societal status. B. Glover Reed, "Developing Women-Sensitive Drug Dependence Treatment Services: Why so Difficult?," 19(2) *J. of Psychoactive Drugs* 151 (1987). Other definitions include statements about services for women and girls that should affect individual, relational, and community change. Greene, Peters and Associates, *Materials Presented at Annual Meeting of American Society of Criminology* (San Diego, 1997).

Key principles in developing gender-responsive correctional programming and service delivery to women and girls include:

- Equality does not mean sameness. Equality of service delivery is not simply about allowing women access to services traditionally reserved for men; equality must be defined in terms of providing opportunities which are relevant to each gender;
- Females' sense of self is manifested and develops differently in female-specific groups as opposed to mixed-gender groups;
- The needs of women and girls should be addressed in a safe, trusting, and supportive female-focused environment;

## Assessing Gender-Responsiveness in Programming, Are the Programs Working?

How is gender-responsiveness measured? An understanding of female development and the specific issues that women and girls bring into the treatment setting is important for assessing the gender-specific nature of corrections programs. General questions related to appropriate services for women and girls include:

- Does the program acknowledge and affirm commonalities and respect differences (e.g., race, class, and sexual orientation)?
- Does the program use gender-responsive assessment tools and treatment plans that match services with the identified needs of the women and girls?
- Do the program's mission, goals, and objectives focus on the specific needs of women?
- Does the program address chemical dependency within a context of trauma related to physical, sexual and emotional abuse?
- Does the program address pregnancy and parenting issues?
- Does the program provide for development of non-traditional as well as traditional employment skills?
- Does the program address transitional issues (e.g., safe and affordable housing, aftercare, job training and placement and childcare)?
- Does the program offer components such as: individual change (e.g., drug treatment); relational change (e.g., dealing with destructive relationships); and community change (e.g., altering the cultural and structural contexts surrounding women which may contribute to their problems or solutions)?
- Does the program emphasize the building of support systems (e.g., women's resource networks, childcare networks)?

*See GENDER-RESPONSIVE, next page*

*GENDER-RESPONSIVE, from page 10*

- Women and girls should be treated in the least restrictive programming environment available;
- Treatment and services should build on women's competencies and strengths to promote independence and self-reliance; and
- Cultural awareness and sensitivity should be promoted using the resources and strengths available in various communities.

### A Few Studies Identify Most Promising Programs and Practices for Women and Girl Offenders

Although few evaluations document the effectiveness of correctional programs for women and girls, several studies identify promising practices or strategies. Koons, Burrow, Morash, and Bynum identified 67 effective programs, but specific outcome measures were present for only 12 programs. B. Koons, J. Burrow, M. Morash and T. Bynum, "Expert and Offender Perceptions of Program Elements Linked to Successful Outcomes for Incarcerated Women," 43(4) *Crime and Delinquency* 512 (1997). Recidivism and/or drug use were outcome measures in six program studies, but no study identified the program components that were linked to success. Program administrators most often attributed positive outcomes to programs that targeted specific or multiple needs and provided continuums of care. Additionally, program participants cited program staffing characteristics, the acquisition of skills, involvement in program delivery, and the influence of a social network or peer group as important aspects to successfully addressing their treatment needs.

Austin, Bloom, and Donahue identified effective strategies for working with women offenders in community correctional settings. J. Austin, B. Bloom and T. Donahue, *Female Offenders in the Community: An Analysis of Innovative Strategies and Programs* (Nat'l Institute of Corrections 1992). The most promising community-based programs for women did not employ the medical or clinical model of correctional treatment, but instead worked with clients to broaden their range of responses to various types of behavior and needs, enhancing their coping and decision making

skills. These programs use an "empowerment" model of skill building to develop competencies in order to enable women to achieve independence. In addition, effective therapeutic approaches are multidimensional, and deal with specific women's issues, including chemical dependency, domestic violence, sexual abuse, pregnancy and parenting, relationships, and gender bias. Promising community programs consisted of highly structured, safe environments stressing accountability; a continuum of care design; clearly stated program expectations, rules and possible sanctions; consistent supervision; ethnically diverse staff including former offenders; coordination of community resources; and aftercare.

Wellisch, Prendergast, and Anglin, in a study of 165 community-based drug treatment programs for adult women, concluded that success appears positively related to the amount of time spent in treatment, with more lengthy programs having greater success rates. They also found that little is known about the specific needs of chemically dependent women offenders since very few drug abusing women offenders receive treatment in custody or in the community. Additionally, many drug treatment programs do not address the multiple problems of women drug offenders and few have family-focused services or provide accommodations for infants and children. The authors noted that services needed by women are more likely to be found in "women-only" programs than in coed programs. The improved assessment of client needs is necessary to deliver appropriate services, to develop individual treatment plans, to establish a baseline for monitoring treatment, and to generate data for program evaluation. J. Wellisch, M. Prendergast and D. Anglin, *Drug-Abusing Women Offenders: Results of a National Survey* (Government Printing Office 1994).

### Program Evaluation and Effectiveness

Research on effective correctional intervention with women and girls under correctional supervision is rare. Ross and Fabiano stated that "the vast majority of the information on the treatment of female offenders is hidden within reports of the treatment of male offenders." R. Ross and E. Fabiano, *Female Offenders: Correctional Afterthoughts* (McFarland

1986). The few existing evaluations of programs for women or girls are poorly designed and disregard diversity issues.

Ideally, outcome measures used in evaluations should be tied to program mission, goals, and objectives. Also, outcome measures should go beyond the "traditional" recidivism measures to assess the impact of specific program attributes.

The environments within which programs operate are important factors in evaluation research. Program evaluators must acknowledge the "culture" of individual programs (e.g., the relationships between staff and offenders, the relationships between offenders, and the rules and regulations) to determine how these factors may impact the program. Some corrections programs focus more on facility security and discipline than on treatment. What, if any effect, does this emphasis have on program efficacy? Also, factors such as mandatory versus voluntary participation in treatment programs may affect program effectiveness and therefore should be considered in evaluation design. Instead of using one approach or the other, both qualitative and quantitative research methods should be included in program evaluation. This approach provides information on a more comprehensive range of characteristics of programs and participants.

No single approach will work with all or even most women and girls in correctional settings. Programs should be multi-modal and sensitive to differences among these populations. Program developers should conduct needs assessments with current female offenders to determine their pathways to crime and the barriers to successful treatment. Additionally, interviews with formerly incarcerated women can help to identify the factors that have aided them to return successfully to their communities. Successful interventions must relate to the social realities, including economic, gender, and racial inequalities, from which women and girls come and to which they will return.

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*HELPING WOMEN, from page 8*

tual life. The process is not merely one of turning around and ascending the same spiral but one of transformation, so that one ascends a different spiral. When women speak of recovery, they speak of a fundamental transformation: "I'm not the same person. I'm different than I was."

### **Treatment Programs Should Derive From Premise That Women's Addiction Defined as Neglect of Self**

Treatment programs for women need to take into account the fact that women's development and growth—her path to maturity—are based on experiences different from that of men's experiences. Practitioners who have studied men often see addicts as self-focused and perceive their task as breaking that obsession with self. Men who are addicted typically build up grandiose false selves that must be challenged before they can discover and cultivate their true selves. Addicted women, however, generally have diminished concepts of themselves. They have learned to negate and neglect their true selves in favor of other people and their drug(s) of choice.

How does a woman shift from a chronic neglect of self to a healthy care of self? How does a woman shift from constriction to expansion and growth? How does a woman grow and recover? How can we facilitate and support this process?

Jean Baker Miller, a founder of the Stone Center at Wellesley College, suggested that women's primary motivation is to build a sense of connection with others. A woman develops a sense of self and self-worth when her actions arise out of, and lead back into, connections with others. According to the Stone Center's relational model, true connections are mutual, empathic, creative, energy releasing, and empowering for all participants. Such connections are so crucial for women that women's psychological problems can be traced to disconnections or violations within relationships—whether in families, with personal acquaintances, or in society at large. J.B. Miller, *What do we Mean by Relationships?* (Work in Progress Working Paper Series no. 22) (Stone Center, Wellesley College 1986); J.B. Miller, *Towards a New Psychology of Women* (Beacon 1976).

**Designers of treatment programs need to take into account past and current rela-**

**tionships of addicts.** From the perspective of the relational model, some women use alcohol and other drugs in order to make and keep connections. One researcher suggests that treatment planners who are designing programs for substance-abusing women need to take into account past family relationships; current relationships with family, friends and partners; and relationships developed within the treatment context. For example, researchers have identified five ways in which relationships with male partners can contribute to women's substance abuse and hinder their recovery. First, male friends and partners often introduce women to drugs. Many women start using substances in order to feel connected with addicted lovers, or they drink because their boyfriends urge them to. Then, whether or not a male partner first initiated a woman into drug use, he often is her supplier once she is addicted. Third, addicted women's lives are full of men who disappoint them; don't provide for children; and in some cases go to jail. These women long for the fathers of their children to provide emotional and financial support but such longings often lead to disappointment and solace in drug use. Worse, many women report violence from the men in their lives. Drugs help to numb the pain of non-mutual, non-empathic, and violent relationships. Fifth, studies suggest that women receive less support from their partners for entering treatment than men receive from theirs. H. Amaro and C. Hardy-Fanta, "Gender Relations in Addiction and Recovery," 27(4) *Journal of Psychoactive Drugs* 325 (Oct./Dec. 1995).

**Reparenting.** Substance-abusing women often show developmental lags. They often come from dysfunctional families that did not support their growth. Parents neglected them or their families may have abused them, leaving them traumatized. Addiction also affects a woman's emotional and sexual development. It is not unusual for a woman in her thirties to seem emotionally and sexually adolescent if she became addicted in her teens.

Women in recovery often need to be reparented in order to develop a cohesive sense of self and to heal. A counselor, a correctional officer, a Twelve Step group, and a sponsor all can participate in reparenting. A woman can also learn to reparent herself in important ways. Both the facilitator and other group

members in a treatment program can share in reparenting each member. For example, if the group members accept a woman's reality without challenging it, they are mirroring her experience back to her, an important validating function that is an element of positive parenting. Twelve Step groups forbid cross talk in order to safeguard the mirroring function. Twelve Step groups also encourage members to choose sponsors who have qualities they like and idealize, much as a child in a healthy family is able to idealize a parent.

Finally, Twelve Step groups acknowledge the "twinning" aspect of a good parent-child relationship when they encourage members to recognize traits they have in common with each other and are able to hear aspects of their own stories from the other women.

### **Strong Connection Between Interpersonal Violence and Trauma and Substance Abuse**

The connection between addiction and interpersonal violence is three-fold

1. Substance-abusing men are often violent toward women and children;
2. Substance-abusing women are particularly vulnerable targets for violence and
3. Childhood and current abuse increase a woman's risk of substance abuse.

Any program for treating substance abusing women must take into account that most will have suffered abuse. Moreover, trauma is not limited to suffering; violence; it includes witnessing violence as well as stigmatization because of gender, race, poverty, incarceration, or sexual orientation. Thus, in treating the substance abuse, counselors need to understand that they are also treating trauma survivors. Many women who used to be considered "treatment failures" because they relapsed may now be understood as trauma survivors who returned to alcohol and other drugs in order to medicate the pain of trauma. Our increased understanding of trauma offers new treatment possibilities for substance-abusing trauma survivors.

Trauma is a disease of disconnection and there are three stages of trauma recovery: safety, remembrance and mourning and reconnection. J. Herman, *Trauma and Recovery* (HarperCollins 1992). The typical woman entering

*See HELPING WOMEN, next page.*

*ADOPTION, from page 4*

er population of children who will grow up in foster care and never have an opportunity to live with their mothers again, nor to be adopted.

The media storm surrounding several horrifying cases of child abuse in recent years has led to increased removal of children whose parents were suspected to be caring for them inadequately, flooding the foster care system and therefore rendering it even less able to serve children and families. The number of children in foster care has almost doubled in the past ten years, and in many cases, their placement is not due to child abuse. Child welfare advocates widely recognize that the parent-child separation in itself is severely damaging to children's well-being, yet services to prevent the need for foster care or to help parents remedy problems early on have never been sufficiently available, of uniformly good quality, nor adequately funded. In fact, the availability of substance abuse treatment has actually declined, and other resources designed to keep children at home are almost non-existent. If preventive services were widely available, were provided in a manner that respected mothers and built on their family strengths, many women in prison today would have addressed their problems before they were ever arrested.

**Being separated from mother likely**

to have serious effect on children. For children who have lived with their mothers, know and remember them, and have bonded with them, the 15-of-22-month provision is likely to be devastating. Older children are far less likely than babies to be adopted, and even when they are adopted, the failure rate of adoptions of older children is disheartening. As mentioned above, most states do not require any showing that adoptive parents have been found prior to terminating a parent's rights. On the contrary, the rationale is that when a child is "freed" for adoption it will be easier to find an adoptive placement. For older children, this is simply not realistic. Thus state and federal law operate to create legal orphans. The legal and practical effect of terminating rights is to completely sever the mother-child relationship. After termination is ordered, the mother and child have no further visitation rights; indeed, the agency may decline even to tell the mother the child's whereabouts or news of the child's well being.

**Working to Preserve Bond Between Incarcerated Mothers and Children More Important After Passage of AFSA**

It is possible for incarcerated mothers to continue their relationship with their children in some cases. The best way for a family to avoid termination of the mother-child relationship is to avoid

having the children placed in foster care in the first place, if at all possible.

**Community-based programs provide good situation.** Community-based sentencing for mothers convicted of nonviolent offenses should be made widely available to prevent the separation of the family. Day programs for women to take part in rehabilitation while living with their children should be the preferred sentencing option whenever the woman poses no risk of flight or harm to her family or community. Residential mother-child programs in which mothers care for their babies and young children have been highly successful in reducing repeat offenses, and at the same time prevent the destruction of the family. Community-based sentencing alternatives to keep the family intact are most crucial for very young children and infants who are still in the process of bonding with their mothers, but increasingly should be explored as well to prevent older children from permanently losing the mothers with whom they are bonded. About 16 states already are operating such programs to keep families with very young children together and provide treatment, but only for a tiny fraction of eligible women. There is a provision in ASFA for demonstration projects to provide substance abuse treatment to mothers while they care for their infants, and such pro-

*See ADOPTION, next page*

*HELPING WOMEN, from page 12*

substance abuse treatment program is in stage one; that is, her primary need is safety. Judy Herman who has outlined these three basic stages of trauma recovery says, "Survivors feel unsafe in their bodies. Their emotions and their thinking feel out of control. They also feel unsafe in relation to other people." Herman, *supra*. Facilitators can help women in treatment feel safe by trying to keep the program free of physical and sexual harassment and by assessing the risk of domestic violence when the woman returns to her home. Facilitators can also help the women to feel safe internally by teaching them self-soothing techniques. Many substance-abusing trauma survivors use drugs to medicate their depression or anxiety because they know no better way to comfort themselves.

It is important that the group be composed solely of women and that the facilitator be female. Herman points out that it is inappropriate to work on memory retrieval while a woman is in stage one. A woman may need one to two years of stable recovery, a consistently safe external environment, a repertoire of self-soothing techniques, and a support system before she is ready to do memory work.

Abuse can occur inside prison as well as outside. Safety is not guaranteed in the criminal justice setting, just as it is not guaranteed in the outside world, although some women have stated that they feel safer in jail or prison than they felt in the streets or at home. A facilitator cannot insure a woman's safety outside the group, but she can maintain an atmosphere of safety within the group. Confidentiality is essential: what is said in

the group remains in the group unless it involves a threat to a woman's safety or that of someone else.

**Treatment Providers Need to Help Patients Integrate Recovery From All Issues**

Women have often been expected to seek help for addiction, psychological disorders, and trauma from separate sources and then put together for themselves what they have learned from a recovery group, a counselor, and a psychologist. The expectation that women to integrate these treatment sources for themselves places an unfair burden on recovering women. Programs need to be structured so that the therapist or leader of the course of treatment works with the women clients to absorb and process the various aspects of assistance they encounter. ■

*ADOPTION, from page 13*

grams have been highly successful in helping women to attain and maintain recovery.

**Providing for legal guardianship if mother has to serve a prison sentence.** For mothers who must serve their sentences in prison, private guardianship should be considered if the children are not already in the foster care system. The advantages of guardianship are that children stay with a familiar person who loves them, and usually benefit from regular contact with their mother. Many states provide for private guardianships through probate court or similar provisions. In Illinois, the mother can appoint a short-term guardian for up to 60 days, without any court involvement. Full legal guardianship can be established in Probate Court. With written parental consent, an appropriate caregiver—a relative or simply a trusted friend—can be appointed as the minor's guardian by the court in a fairly simple proceeding. Legal service practitioners can assist the family in establishing guardianship, and many caregivers represent themselves in court with assistance from the clerk of court or a volunteer lawyer project. Legal aid providers can help the family set up a smooth transition for the children, caregiver and mother by drafting a co-parenting agreement and by counsel-

ing the parties about the exact nature of guardianship, the mother's residual rights, and the process for resuming custody upon her release. Ethical considerations require that the written representation agreement include a provision stating the parties' understanding that if a conflict of interest were to arise between the guardian and the mother, the lawyer would withdraw and refer each to separate counsel. In many instances, the mother moves in with the guardian (often her own mother) and children after serving her sentence. This assists not only her process of reunification with children but also her re-entry into her community.

**Kinship care provides possibility of continued mother-child relationship without legal custody.** A somewhat similar provision is possible on a practical if not a legal basis under the foster care system: kinship care. A major difference is that while the mother may continue a relationship with her children, she is far less likely to regain legal custody of them. The provision of foster care by a relative has many of the advantages for children that private guardianship provides, except that the state intrudes into the family's decisions. As noted above, an exception to the mandate to terminate parental rights exists when children are in kinship care, and many states have enacted that exception in their state laws.

The practical workings of kinship care depend a great deal on the caseworkers' training and professionalism. There have been circumstances in which relatives have been bullied to adopt children or else lose them, when the relatives strongly believed the children needed ongoing relationships with the mothers. In other cases, relatives have been threatened that if they did not adopt, the children would be scattered to strangers' homes, although the relatives were firmly dedicated to providing a permanent home. Post-adoption services for children with special needs are commonly denied although mandated, making it more difficult for relative caregivers to adopt. It is hard to imagine how termination of parental rights in such cases is in children's best interests. Last of all, states that have statutes governing open adoption contracts may present one more option for mothers who face permanent loss of their children but hope to have some continued communication with them.

ASFA has exacerbated the plight of women prisoners and their children in foster care. It will take dedication, creativity, and determination to fight its destructive impact, and imprisoned mothers, their advocates, and service providers will need every bit of ingenuity, compassion, strength, and creativity they can tap to handle the crisis. ■

*LITERATURE, from page 9*

girls, violence, and victimization. Within these sections, 19 articles (seven of them being published for the first time) effectively make the case that "it is vital that we stop constructing images of girls' participation in gangs that endlessly compare them to boys and their gangs, or worse, get caught up in notions that girls and their groups are simply appendages or mirror images of boys."

The contributors to this volume are among the best known and most informed writers about girls and gangs: Frederic Thrasher, John Quicker, Laura Fishman, Ann Campbell, David Curry, Joan Moore, Carl Taylor, and Edwardo Luis Portillos, as well as the editors them-

selves. Collectively, they do not paint a uniform picture. As the editors note, "girls of different ethnicities experience gang life differently, and gangs vary by geography, age, and other variables." Also, they say, "girls in gangs must be understood on their own terms, and difference, as well as similarity, characterizes girls participation in gangs."

Many girl gang issues remain unresolved. The editors could find little research on female gangs in prisons or on programs for female gang members. Contemporary authors, the editors state, do not see female violence as just a matter of girls behaving like boys. Racism and patriarchy shape girls' lives and choices differently than for boys. Girls, for instance, come from more troubled

families. Chesney-Lind and Hagedorn conclude that female gangs act as a safe haven for many girls, whereas for most boys male gangs act as an extension of an aggressive, male posture.

Most of the articles in this timely and important volume are reports or reflections on descriptive, field ethnographic of girls in gangs. Two key lessons are first, we must speak with and listen to these girls, and second, "careful inquiry into the lives of these girls documents the ways in which the gang facilitates survival in this world."

Copies: Lake View Press, PO Box 578279, Chicago, IL 60657, (773) 93-2694 (phone); (773) 935-8710 (fax \$35.00; \$19.95; 353 pages; include \$3.50 for shipping and handling.

*CONVICTED SURVIVORS, from page 6*

**Violent episodes pushed out of memory.** Along with the defense mechanism of minimizing, a woman held hostage sometimes forgets violent events. One woman describes memory gaps filled in by her children: "My attorney talked mostly to my daughters. Most information he got, he got from them about the abuse, and incidents that had took place, because there were some that I didn't remember." Another woman tells of her daughter's recollection: "She said, 'Daddy was mad and threw the mirror and the mirror broke, and he had a knife at your throat.' I didn't even remember it...until she brought it up."

**Participants often did not consider themselves victims of battering.** Many respondents reported that, during their abusive relationships, regardless of severity, they did not consider themselves battered women. For many, the first awareness that they had been victims of domestic violence came as they attended support group meetings and heard others relate nearly identical events and reactions. "My idea of myself changed through a lot of different women. Betty Crocker still was told the same things I was—fat, ugly, stupid, a slut, a tramp, a whore. I came to the realization that mine wasn't unique. I could identify myself as a battered woman within about a year." In contrast, there were some who disavowed being a victim of domestic violence out of fear: "Because if someone asked me, even on the phone, [he] would find out. I don't know how he would find out, but I was scared."

**Law enforcement often unavailable and unhelpful.** In many cases, women sought help from law enforcement. Women, however, are too often left to fend for themselves. Police are often on the scene earlier on the day of the homicide. One woman called the police repeatedly: "He'd just tried to shoot me earlier...that afternoon. I called the police. 'What do you want us to do, lady? It's his house. We can't get him out.'" Not all victims call on law enforcement. "I never called the police. He told me if I ever told he'd hurt me worse than I had ever been hurt in my whole life." However, when law enforcement response appears continually ineffectual or women are too afraid to call 911, these victims of severe violence resign themselves to being killed or having to kill to survive. Convicted survivors say, in retrospect,

they would, or should, have welcomed any and all interventions in their abuse.

**Incarcerated battered women often receive unnecessary medication.** In jail, many battered women are over-prescribed psychotropic drugs—anti-depressants and mood-regulators, including such powerful chemicals as Lithium and Thorazine—in the absence of mental health history, testing, or diagnosis. While some women were successful in refusing medications, all too often drugs negatively affect the self-presentation of defendants during trial. Serving 17 years-to-life, an interviewee notes, "I fell asleep seven times during the trial." A woman with a graduate degree observes, "I was a zombie. They said I was cold and remorseless, not showing any emotion. The meds made me inarticulate." Psychotropic drugs hinder the ability of women to contribute to and participate in their own defense and perpetuate the muteness forced upon them by their batterers.

**Convicted women lacked females in authority to talk with and who could provide assistance.** Women who have been hurt and humiliated by male partners find it extremely difficult and, in some cases, impossible to disclose to male law enforcement, male investigators, male attorneys, and male psychologists the painful physical, emotional, and/or sexual abuse that ends in homicide. A woman serving 25 years-to-life states, "I couldn't talk to the lawyer or the police about the rapes and the sexual abuse because they were all males. Maybe if there had been a woman to talk to." The gendered nature of domestic violence necessitates the consistent use of female officers, female attorneys, and female psychologists in the investigation and adjudication of battered women who kill.

Mitigating and exculpatory information often does not surface during the homicide trials of abused women. The reputation of a violent man is protected at the expense of a just legal defense. Common observations include: "We couldn't say anything about the threats. Every time we tried to get anything in, it was dismissed because [he] was the victim. And he was dead." "He told me I could never bring up anything about the abuse in the trial because it would give them a motive." "During the penalty phase my attorney got a lot of people to testify on my behalf and afterwards, one of the jurors said that if she would have heard that during the trial she would have never found me guilty." "They over-

looked the abuse." "The medical records were there but the only medical records that were actually entered as evidence were the statements from the emergency room where I had signed that I didn't want to prosecute." Documenting abuse provides no guarantee that judges and juries will be made aware of the women's victimization. Women's trials often produce distorted and inaccurate pictures of homicide events and women's motives.

### Conclusions and Observations

Women are survivors when they kill partners to save their own lives and the lives of their children. They are not threats to society. Most importantly, criminal justice agents and agencies must take into account the full circumstances of battered women who kill rather than detach the homicide from its place in the trajectory of abuse. Prosecutors need to eliminate or reduce the charges they routinely file. Glaring inequities in the adjudication process suggest the need for appellate review. Parole boards must take into account the gendered dynamics of violent relationships and refrain from reenacting the flawed cases of battered women during parole hearings. Parole boards need to examine the cases of battered women who kill and prepare the women for early release. All officials who come into contact with battered women need to participate in programs that raise awareness and knowledge on all aspects of domestic violence.

This research brings into question the wisdom or value of incarcerating women lacking in criminal histories, women who fully accept the values of the broader society, women who exhaust all known alternatives for safety before using deadly force for self-protection, women who are one-time, situational offenders. If convicted, these women make fitting candidates for community corrections programs. Most of the women in this study had dependant children at the time of the homicide, a reminder that prison programs must aid in the maintenance of mother-child bonds as well as other family ties. The voices of battered women survivors in this study ask to be heard. A woman who is told, "If I can't have you, nobody can" and who manages to survive that final deadly assault by her male intimate is the closest voice we have to the many women who do not live through that last violent assault. The more we learn from their lives, the more lives can be saved. ■

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### EDITORS' WELCOME, from page 1

These issues and many others often receive only scant or sensationalized attention. Academic and other professional journals often fail to cross the divide between those studying the issues and those working directly with women and girls. While more has been done in recent years to address the concerns, needs, and challenges of women and girls in the criminal justice and corrections systems, much more is required, and what is done needs to be more widely disseminated and discussed.

As far as we know, no national forum exists for the regular exploration and reporting on subjects relating to women and girls in the criminal justice system. WGC hopes to become such a forum—where practitioners and other professionals working with these populations can go for the best thinking on administrative, programmatic, and policy concerns. WGC will look at issues and options for girls and women in juvenile and adult justice systems. WGC will cover institutional and community corrections and the collateral support services and systems that interact with women and girls after conviction.

We look forward to contributions from a variety of perspectives. We hope to bring creative, constructive ideas and action to the forefront. We want to serve as a vehicle where all pertinent issues and points of view can be discussed and debated. Our mission is to keep readers well-informed about the latest and best trends in a variety of fields that directly affect women and girls in contact with or the criminal justice system, from research findings to legislative activities to innovative programs to funding strategies. WGC will present articles and columns written by professionals working with women and girls in all aspects of the criminal justice system, and even occasionally by women and girls who have experienced the criminal justice system first hand.

We are pleased to offer you this inaugural issue and we hope that you will keep in touch with us as this newsletter gets off the ground and begins to soar. We have an excellent group of advisors on this project, but WGC is for readers, and we look forward to your comments and contributions.

— Tracy Huling  
Russ Immarigeon,  
Editors

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The President's Council on Physical Fitness and Sports Report

# Physical Activity & Sport in the Lives of Girls

## Physical & Mental Health Dimensions from an Interdisciplinary Approach

Under the Direction of

The Tucker Center for Research on Girls & Women in Sport  
University of Minnesota

Supported By

The Center for Mental Health Services/  
Substance Abuse and Mental Health Services Administration  
U.S. Department of Health and Human Services

Spring 1997

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### Summary

THE PRESIDENT'S COUNCIL ON PHYSICAL FITNESS AND SPORTS (PCPFS) serves as a catalyst to promote, encourage and motivate the development of physical activity, fitness and sport participation for all Americans. This report expresses the PCPFS's mission to inform the general public of the importance of developing and maintaining physical activity and fitness in our daily lives, and to heighten awareness of the links that exist between regular physical activity and good health. In the past, involvement in sport and physical activity has been primarily associated with males. Over the past two decades, however, girls' and women's involvement in such activity has increased dramatically. This is in large part due to the impact of Title IX, federal legislation passed in 1972 designed to prohibit sex discrimination in educational settings. For example, prior to Title IX, 300,000 young women participated in interscholastic athletics nationwide; today, that figure has leaped to approximately 2.25 million participants. In the wake of this participation explosion, scholars and educators have begun to explore its impact on girls and women.

*Physical Activity and Sport in the Lives of Girls: Physical and Mental Health Dimensions from an Interdisciplinary Approach* was created in order to highlight relevant research and draw on expert opinion regarding girls' involvement in physical activity and sport. This is the first report that brings together research findings--and practical suggestions for implementing these findings--from three interdisciplinary bodies of knowledge: physiological, psychological and sociological. An additional section explores the relationships among physical activity, sport and the mental health of girls. The primary goal was to identify and discuss the beneficial ways that physical

activity and sport influence girls' physical health, psychological well-being and overall social and educational development. An additional goal was to identify the problematic aspects of girls' involvement. These include, but are not limited to, eating disorders, gender stereotyping and institutional barriers such as lack of opportunity and access to various resources. Although this report examines some of the most current and cutting-edge issues, because of space limitations, the authors do not claim to include all relevant research and concerns surrounding girls' involvement with sport and physical activity.

The report focuses on girls and not boys (other than for comparison where appropriate) for several reasons. First, with respect to sport and physical activity, girls have been neglected by researchers in the biomedical sciences, education, physical education and the social sciences. Second, though girls and boys share common experiences, girls also exhibit unique physiological, emotional and social outcomes that merit special investigation. Next, scholars need to keep pace with the aforementioned explosion and diversification of girls' involvement with sport and physical activity in the wake of Title IX. And finally, researchers increasingly recognize that the social world of physical activity and sport is not a one-dimensional universe, but a highly complex set of institutions populated by two genders with diverse racial and ethnic backgrounds, cultural values, physical abilities and sexual orientations.

Public apathy about physical education, and the glitzy distractions of commercialized sports in mass media, sometimes hide the basic fact that physical activity is a public health resource for millions of American girls as well as their families and communities. In order to advance knowledge regarding the real and potential contributions of physical activity and sport in the lives of millions of girls, several areas for future research are highlighted by the authors at the end of each section. Finally, a set of policy recommendations is also included in order to encourage responsible action on the part of parents, coaches, educators, sport leaders and elected officials. With such a "teamwork" approach, we can make a difference in the lives of girls.

### **Key Research Findings**

Some of the most important research findings documented and highlighted in this report suggest that:

- More girls are participating in a wider array of physical activities and sports than ever before in American history. (Introduction)
- Regular physical activity in adolescence can reduce girls' risk for obesity and hyperlipidemia (i.e., high levels of fat in the blood) which, in turn, have been known to be associated with lower adult onset of coronary heart disease and certain cancers. Regular physical activity can also help girls build greater peak bone mass, thereby reducing adult risk for osteoporosis. (Research Report, Section I)
- Exercise and sport participation can be used as a therapeutic and preventative intervention for enhancing the physical and mental health of adolescent females. (Research Report, Section IV)
- Exercise and sport participation can enhance mental health by offering adolescent girls positive feelings about body image, improved self-esteem, tangible experiences of competency and success and increased self-confidence. (Research Report, Sections II and IV)
- Research suggests that physical activity is an effective tool for reducing the symptoms of stress and depression among girls. (Research Report, Sections II and IV)

- Sports are an educational asset in girls' lives. Research findings show that many high-school female athletes report higher grades and standardized test scores and lower dropout rates, and are more likely to go on to college than their nonathletic counterparts. (Research Report, Section III)
- Recognition of physical activity and sport as an effective and money-saving public health asset is growing among researchers and policy makers. (Introduction; Research Report, Sections I, II and IV)
- Poverty substantially limits many girls' access to physical activity and sport, especially girls of color who are overrepresented in lower socioeconomic groups. (Introduction; Research Report, Section III)
- Excessive exercise and certain forms of athletic participation have been found to be associated with a higher prevalence of eating disorders. (Research Report, Sections I, II, III and IV)
- The potential for some girls to derive positive experiences from physical activity and sport is marred by lack of opportunity, gender stereotypes and homophobia. (Research Report, Sections III and IV)

### **Conclusions and Recommendations**

A summary of some of the most important conclusions and practical recommendations discussed in this report suggest that:

- Girls should be encouraged to get involved in sport and physical activity at an early age because such involvement reduces the likelihood of developing a number of deleterious health-related conditions. For example, active girls' high caloric expenditure decreases their risk of becoming obese. (Introduction; Research Report, Section I)
- Specific mechanisms which enhance girls' opportunities to be physically active must be developed and supported. Recreational, school-based physical education and sport programs are ideal ways to facilitate both health-related fitness and the acquisition of fundamental motor skills for a lifetime of activity. (Research Report, Section I)
- Involvement in sport and physical activity has tremendous potential to enhance a girl's sense of competence and control. Therefore, leaders should incorporate cooperative as well as competitive opportunities to learn physical skills in a nonthreatening environment. (Research Report, Sections II and III)
- Parents, coaches and teachers must be aware of girls' motives for participating in sport and physical activity. Girls participate not only for competitive reasons, but to get in shape, socialize, improve skills and have fun. All motives, not just those related to highly competitive activity, must be respected and validated. (Research Report, Sections II and III)
- Physical educators, exercise leaders and coaches are in a primary position to recognize disordered eating patterns among girls. These individuals must be knowledgeable about the physical and psychological signs and be able to make referrals to specialists as necessary. (Research Report, Section II)
- Girls and boys need to work and play together, starting from an early age. It is often easier for both sexes to play together and learn in small, relaxed groups where children know each other well and have the prerequisite skills. (Research Report, Section III)

- Coaches and physical educators should give girls equal access and attention. Girls as well as boys should play the important and interesting positions in a game and receive feedback to help improve their physical skills. (Research Report, Section III)
- Professionals must actively intervene in the face of discrimination. When adults observe inequities or gender stereotyping on the playing field or in the physical education classroom, it is often best to openly confront issues of prejudice such as sexism. (Research Report, Section III)
- Involvement in physical activity, exercise and sport promotes psychological well-being; the therapeutic use of physical activity and exercise for improving the mental health of adolescent girls goes beyond traditional treatment and mental health programs. (Research Report, Section IV)
- Physical activity and exercise have been shown to be a mood enhancer and an anxiety reducer, thereby acting as a natural, cost-effective intervention for the mental health of adolescent girls. (Introduction; Research Report, Sections II and IV)

### Directions for Future Research

Because of the importance of sport and physical activity in the lives of girls, it is incumbent for us to continue to expand our scientific knowledge base regarding the physiological, psychological, sociological and mental health consequences of participation in these activities. A summary of some of the most important directions and agendas for future research suggests that:

- **Research studies must be conducted** to develop and implement motivational strategies encouraging physical activity during childhood and into adulthood. (Research Report, Section I)
- **Research should establish guidelines** for appropriate training levels. When establishing these guidelines, scholars should consider areas that are particularly critical for girls, such as the prevalence of overuse injuries and issues related to body composition. For example, specific guidelines for appropriate activity levels can prevent injuries due to excessive training and/or early specialization in one sport. Knowledge regarding appropriate levels of training can also minimize an undue focus on body composition (e.g., body image) that can lead to exercise addiction. (Research Report, Sections I and II)
- **Research studies need to be designed** that better distinguish between sport-specific or sport-general dropouts--versus sport transfers--to ascertain if girls are leaving organized sport entirely or simply sampling a variety of sporting activities. These investigations should collect and analyze participation statistics and conduct exit interviews with children who drop out in order to identify negative reasons for cessation and address them in future programs. (Research Report, Section II)
- **We need to increase our research agenda** to be more inclusive. For example, future research must be expanded beyond an analysis of highly competitive sport to include a broader range of activities (e.g., personal fitness) and settings (e.g., physical education classrooms). Additionally, studies should include participants from racially, ethnically, economically and ability-diverse backgrounds because gender interacts with these diversities in complex ways (Gill, 1993). (Research Report, Sections II, III and IV)
- **Research studies must utilize** an interdisciplinary perspective. For example, we need to adopt a biopsychosocial perspective that takes into account physical, psychological and

social context variables simultaneously. We also need to develop "research teams" that enhance partnerships between scholars and practitioners. (Research Report, Sections II and IV)

- **Future research should be guided** by the principle that strategies for improving participation rates must also address the quality of the sport and physical activity experience for girls. (Research Report, Section III)
- **Scientific studies should identify** which factors influence exercise as treatment interventions. When using exercise as a treatment intervention to restore mental health for adolescent girls, we need to examine the impact of peer (same-sex and cross-sex) influences and individual versus group approaches. (Research Report, Section IV)

## Overview of the Report

*For a complete list of the citations in this Overview, see the [References](#) section.*

WHEN THE PRESIDENT'S COUNCIL ON PHYSICAL FITNESS AND SPORTS was established by Executive Order in 1956, few Americans could have imagined the surge of participation in physical activity and sport among girls and women over the last two decades. Millions of girls now participate in a rapidly expanding variety of physical activities, and female athletes perform feats that once were deemed physiologically impossible. Despite the startling speed of these recent changes, however, the explosion of women's participation and ability is more accurately viewed as an acceleration of a centuries-long march toward greater physical freedom and athletic excellence.

During the nineteenth century, health reformers and educators included "female gymnastics," walking, riding and dancing as key components of young women's education (Vertinsky, 1994). In the countryside and towns, archery, tennis, bicycling, ice boating, roller skating, croquet, golf and dance became popular among girls and women. A "new model of able-bodied womanhood" emerged, which challenged traditional notions about female frailty and ladylike behavior (Verbrugge, 1988, p. 196). The integration of exercise and athletic activity into school curricula expanded during the twentieth century. Recreational athletics for girls became popular in the form of "play days" between 1920 and 1950 and competitive varsity sports such as basketball and track and field multiplied after World War II (Hult, 1994). The passage of Title IX in 1972 ushered in an era of coed physical education and greater opportunities for girls to play high school and college sports. The fitness revolution also grabbed the attention and allegiance of millions of girls and women during the 1970s and 1980s.

*Physical Activity and Sport in the Lives of Girls: Physical and Mental Health Dimensions from an Interdisciplinary Approach* presents an interdisciplinary portrayal of the connections among the physical, psychological, social and cultural aspects of physical activity and sport in girls' lives. When viewed collectively, the research findings discussed here show how physical activity and sport impact the "complete girl": that is, the many interrelated aspects of a girl's life ranging from musculoskeletal and cardiovascular functioning, to psychological well-being, gender identity, relationships with friends and family and performance in school. Physical activity and sport offer girls more than gateways to fun, competition or an elevated heart rate. While the authors of this report are aware that girls' experiences vary a great deal, the vision of the complete girl fosters a comprehensive awareness that exercise and sport are not just about physical movement but personal development, identity and values as well.

## **Participation, Opportunity and Barriers**

American girls now participate in a wider range of physical activities and sports, and at more levels of competition, than ever before in our history. While Oregon girls learn to square their shoulders to the volleyball net, a group of girls play "four squares" in rural New Hampshire, an Arkansas teenager teaches hopscotch to her little sister, and Native American teenagers meet for lacrosse practice. As girls bounce and chatter through double-dutch jump rope in Bedford-Stuyvesant, in-line skaters glide through a Houston suburb. As an Ohio high school basketball team runs through drills, friends from DeKalb, Illinois, meet for an aerobics class. And women give gutsy performances while winning gold medals at the 1996 Summer Olympic Games in sports ranging from softball, soccer and basketball to gymnastics, track and field and swimming.

Females have become prime movers in the fitness realm. A recent nationwide survey conducted by the National Sporting Goods Association indicated that more women (55.4 million) than men (43.4 million) participate in several leading fitness activities--aerobic exercising, bicycling, exercising with equipment, exercise walking, running and swimming. A more specific breakdown reveals that an estimated 18.3 million women do aerobics, 26.5 million bike for exercise or mountain bike, 23.8 million exercise with weights, 45.2 million walk, 8.65 million run or jog and 32.6 million swim (National Sporting Goods Association, 1995).

Girls' participation in school athletic programs and community-based programs is also mushrooming. Girls now comprise about 37 percent of all high-school athletes, representing an increase from one in 27 girls who participated in 1971 to one in three girls in 1994. The ratio for boys during this timeframe remained constant at one in two. In 1994-1995, 2,240,000 girls participated in high-school sports, compared to 3,554,429 boys, 37 percent and 63 percent respectively (National Federation of State High Schools Associations, 1995-1996). In terms of some specific sports, an estimated eight million girls under age 17 played basketball in 1994 (compared to 12.5 million boys) while 6.7 million girls played soccer. As more girls developed athletic interests and physical skills at the grassroots levels of competition during the 1970s and 1980s, participation in college and Olympic sports also exploded. Women now comprise 33 percent of all college athletes and approximately 39 percent of United States Olympic team members. Reciprocally, as more female role models become available for young girls to emulate, their interest and involvement in fitness and athletic activities will continue to grow.

Despite these gains, it is important to realize that women's historical trek toward greater physical and athletic opportunity has been filled with barriers. In the past, various individuals have condemned exercise and sport as unladylike and eminent physicians warned women against overstrain and sterility. One of the authors of this report, sport sociologist Margaret Carlisle Duncan, points out that stereotypes associated with traditional notions of femininity and masculinity exalted boys' strength and athletic feats while equating girls' athletic talents with "tomboyism." Parents, coaches and teachers often encouraged boys to test their physical and emotional limits while ignoring or coddling girls.

Today, girls' achievements in physical activity and sport remain overshadowed by the cultural prominence of men's sports. In school and community-based programs, boys still receive a disproportionate share of opportunities to participate in exercise and sport. Male-dominated sports organizations remain mired in policies and beliefs that shortchange girls and women, and parents or advocates of girls are forced to wage expensive legal battles in the pursuit of gender equity. Indeed, it is unlikely that the large increase in girls' athletic participation and growing cultural acceptance of physically active and athletic females would have occurred without the passage of Title IX (Birrell & Cole, 1994; Cahn, 1994a; Messner & Sabo, 1990). Pressured by the perceived threat of lawsuits or payment of legal fees, and pulled by increasing demands for greater opportunity for girls, Parent Teacher Associations and school administrators began to rethink

traditional clichés like "girls just aren't as physical as boys" or "sports are more important for boys than for girls."

*Harsh economic conditions, prejudice and institutional barriers have limited the participation of many poor girls, girls of color and girls with disabilities*

And finally, harsh economic conditions, prejudice and institutional barriers have limited the participation of many poor girls, girls of color and girls with disabilities. Ironically, where the real and potential health outcomes of physical activity and sport are probably most needed, participation rates and access to resources are most lacking. As the authors of this report repeatedly document, girls' increasing participation and interest in physical activity and sport bode well for their health. Yet these positive national trends are being undermined by the growing numbers of adolescents who are becoming sedentary and obese, the substantial numbers of girls who are dropping out of sports, and the persistence of social and economic barriers that limit girls' opportunities to develop physically active lifestyles.

### **Understanding the Complete Girl**

Physical activity and sport are not simply things young girls do *in addition to* the rest of their lives, but rather, they comprise an interdependent set of physiological, psychological and social processes that can influence, and, in varying degrees, sustain girls' growth and development. The interdisciplinary approach that underpins this report is designed to make more visible some of the connections among physical activity, sport and the rest of girls' lives. Some examples of the broader linkages that are examined in the body of this report are highlighted below.

### **Psychological Well-Being**

Within the traditional framework of psychoanalytic theory, nonconformity to traditional gender expectations was considered pathological. Hence, women's interest and involvement in business, science, sport or other "masculine" activities were clinically suspect. In contrast, the review of psychological research presented in this report shows that physical activity and sport are apt to strengthen rather than worsen the psychological health of girls. The authors document a combination of psychosocial benefits such as self-confidence, self-esteem, higher energy levels and positive body image. It is important to note that these gains appear to be influenced by interactions with parents, who can either encourage or dampen a daughter's interest and involvement. So, too, do persistent and narrow cultural prescriptions for appropriately "feminine" behavior erode the potential of physical activity and sport to enhance girls' mental health. On the other end of the interdisciplinary spectrum, some of the biological and chemical processes associated with health and fitness concerns are also highlighted. And finally, two of the authors of this report, psychology of sport scholars Doreen Greenberg and Carole Oglesby, discuss the growing recognition among mental health professionals that exercise and sport can be effective treatment interventions for the significant number of girls who suffer from depression or anxiety disorders.

### **Obesity**

The Surgeon General's report on nutrition and health (Public Health Service, 1988) identified obesity as a major public health problem in the United States; subsequently, the Surgeon General's report on physical activity and health (United States Department of Health and Human Services, 1996) identified physical inactivity as a serious public health problem nationwide. Aware of this concern, the authors of this report discuss a variety of factors associated with the rising rate of obesity among American adolescents. Social factors include the influence of

television, dwindling requirements for physical education in the schools, and the steep sport dropout rate among adolescents. Related to physical health concerns, this report explores the physiological and epidemiological aspects of obesity such as the links between the development of hyperlipidemia, hypercholesterolemia, hypertension and diabetes, which in turn elevate risk for coronary heart disease. Finally, in her section on the psychological dimensions of participation, psychology of sport scholar Diane Wiese-Bjornstal stresses the need to help overweight or obese girls overcome social pressures and personal misgivings about physical activity so that they can become less sedentary.

### **The Female Athlete Triad**

Several authors discuss the complex combination of psychological and physiological processes that operate in relation to the female athlete triad. In Section I, exercise physiologist Patty Freedson and psychology of sport scholar Linda Bunker document many physiological benefits of exercise and sport participation for girls such as potential gains in strength and aerobic power. It also appears promising that girls' involvement in sport and exercise could effect increased immune functioning and the prevention of certain cancers in adult life. They also express their concerns about the "female athlete triad," which refers to three interrelated health problems that are prevalent among some types of female athletes and some girls who engage in excessive exercise: eating disorders, exercise-induced amenorrhea and bone loss. Several authors demonstrate how these syndromes have complex psychological, physiological and social origins and profiles. For example, girls' perceptions of their bodies are partly shaped by unrealistic media images that create false connections between a lean body type or "washboard abs" and subsequent success, sex appeal and self-mastery. The obsession with thinness can also be fed by a coach who demands weight loss from the athlete, or the desire to be attractive to boys and accepted by one's peers. Because we are in the early stages of investigating this syndrome, the data we have are very limited. Female athletes most at risk should certainly be aware of the dangers, but we should not assume that the triad is limited to an athletic population (Lutter & Jaffee, 1996).

*On average, female athletes fare better academically than their nonathletic counterparts.*

### **Sport and Academic Achievement**

It is said that "the fish are the last ones to discover the ocean." In Section III, Margaret Carlisle Duncan illustrates how several research findings debunk the "dumb jock" stereotype that high school athletes perform poorly in the classroom. School administrators are often unaware of the positive interplay between high-school athletics and academic achievement as measured by grade point average, standardized achievement test scores, lowered risk for dropout and greater likelihood to attend college. On average, female athletes fare better academically than female nonathletes, though Caucasian and Hispanic female athletes are more apt to derive some direct educational gains than are their African-American counterparts ("Women's Sports Foundation Report: Minorities in Sport," 1989). Good physical and mental health are also correlates of academic performance and social adjustment. Hence, from an interdisciplinary perspective, it is likely that athletic participation is part of a mutually reinforcing array of physical, psychological and social processes that enhance the overall educational experiences and commitments of many girls.

In summary, understanding the role of physical activity and sport in the life of the "complete girl" is a dauntingly complex agenda. The mosaic of interdisciplinary findings and interpretations assembled in this report will deepen both insight and resolve in this regard.

## Poverty, Race and Physical Ability

Girls from economically disadvantaged backgrounds, girls of color and girls with disabilities can face unique obstacles in relation to physical activity and sport. Poor families cannot afford to invest in health club memberships, exercise machines and equipment for their daughters. Families of color, who are disproportionately poor, often cannot pay user fees or transportation costs to bring daughters back and forth between home and school. Fitness and sport are often seen as unattainable luxuries rather than potential resources. Dual-worker parents or single parents (most often mothers) sometimes depend on older daughters to cook or care for smaller children after school, thus curbing their involvement with extracurricular activities. Poor or working-class girls often work part-time jobs to help families make ends meet, thereby reducing the amount of time and energy available for exercise or sports. Parental perceptions of the benefits of exercise and athletic participation for daughters also vary by race and class. For example, one national survey found that Caucasian parents more often mentioned health-related benefits, character benefits and social factors than did African-American parents ("The Wilson Report: Moms, Dads, Daughters and Sports," 1988).

*Little is known about the dreams, interests and physical activities of girls of color.*

Many of the problems girls of color experience in relation to physical activity and sport grow out of the same soil--poverty. Epidemiological research shows that exposure to violence, family fragmentation, substance abuse, sexually transmitted diseases and greater risk for unwanted sexual activity often share the common causality of poverty. Lack of physical activity and athletic opportunity can be added to this list. Economically disadvantaged girls of color are more likely to suffer from an unsafe and unhealthy environment. The simple act of walking or jogging may be problematic in neighborhoods where crime flourishes. Poor girls often do not have access to athletic resources, effective coaching and expert training. There is a lack of basic information about exercise, diet and sport. They are less apt to receive quality physical education and athletic training at earlier ages which, in turn, erodes the foundation for subsequent motor development. Because school and community athletic programs depend on tax dollars to thrive, capital flight from many urban areas is undermining the provision of adequate exercise and athletic opportunities for both minority girls and boys. The rising cost of liability insurance is also making it difficult for school districts, especially poorer ones, to provide quality athletic and intramural programs.

Little is known about the dreams, interests and physical activities of girls of color. Although women of color are often more visible in sport media, and in certain sports like basketball and track and field, they are underrepresented in sports such as swimming and tennis (Abney & Richey, 1992). During the early 1980s, African-American and Hispanic adolescent females comprised about 4.4 percent and 3.2 percent of high school athletes respectively, compared to 29.1 percent of their Caucasian counterparts (Melnick, Sabo, & Vanfossen, 1992). There is also indirect evidence that African-American and other ethnic minority females are less physically active than Caucasian females (King et al., 1992; Pate et al., 1995).

And finally, despite the accomplishments of the Special Olympics and Paralympics, few opportunities exist for emotionally or physically challenged adolescents to engage in exercise and sport. Differently-abled children are three times more likely to be sedentary than their able-bodied peers and the physical activity levels of children with disabilities drop precipitously during adolescence (Longmuir & Bar-Or, 1994). It should be noted that the authors of this report make only periodic references to socioeconomic status, race, ethnicity and physical disability. This is due not so much to choice, however, as to the fact that so little research has focused on these groups of girls.

## **What Researchers Don't Know Can Hurt Girls**

This report is the first to assemble the bulk of existing research on girls' involvement with physical activity and sport. However, because of the lack of available data and analysis, the authors of this report were unable to address in any depth some key aspects of girls' experiences with physical activity and sport. Three emerging research concerns are briefly discussed below.

### **Unwanted Sexual Behavior and Adolescent Pregnancy**

Adolescent pregnancy is a major social problem in the United States. Though the belief that sports can help many young girls avoid unwanted sexual behavior and pregnancy is widespread among coaches and athletes, precious little research has been done in this area (Sabo & Melnick, 1996). Two recent studies shed some initial empirical light on the hypothesized connections among exercise, athletics and adolescent girls' sexual behavior. First, Brown, Ellis, Guerrina, Paxton and Poleno (1996) analyzed female adolescents' responses to the United States Department of Health and Human Services, Public Health Service, Centers for Disease Control and Prevention (1995) survey, "Health Risk Behavior for the Nation's Youth." The researchers found that the more days adolescent females exercised per week, the more likely they were to postpone their first experience with sexual intercourse. Second, preliminary analysis from a study of adolescents from western New York (an area with one of the highest rates of adolescent pregnancy in the United States) indicated that higher rates of athletic participation among adolescent females were significantly associated with lower rates of both sexual activity and pregnancy (Sabo, Farrell, Melnick, & Barnes, 1996).

### **Sexual Harassment**

Sexual harassment is experienced by approximately 31 percent of female high school students (American Association of University Women Educational Foundation [AAUW], 1993). Sport scholars have recently begun to study the prevalence and social-psychological dynamics of sexual harassment in athletic settings (Sabo & Oglesby, 1995). Many key questions need to be addressed. For example, how do female athletes perceive and react to sexual harassment from boys and adults? Do higher self-esteem and physical prowess fostered by sports help females to be more assertive with inappropriately invasive males than their non-athletic counterparts? Additional research needs to be done on the ways that athletic participation may empower girls to more effectively cope with sexually hostile situations.

### **Exercise and Sport as a Family Asset**

*In what ways can parents effectively encourage their daughters' involvement with physical activity and sport?*

Regretfully, little research has focused on the ways that exercise and sport promote interaction and insight between parents and children. As is the case with sexual harassment, many important questions in this area remain unanswered. Do parents look to sport to provide after-school activities that keep daughters physically active, socially engaged and off the streets? To what extent do physical activity and sport help parents nurture moral development and values in their children? In what ways can parents effectively encourage their daughters' involvement with physical activity and sport? Clearly, more investigation of the interdependencies among physical activity, sport, families and schools is needed.

### **Conclusion: Expanding the Resource**

This report will fuel the growing awareness that physical activity and sport are enormously important in the lives of girls. Perhaps this message is being sent by girls themselves who are, as

the saying goes, "voting with their feet," and entering the realms of fitness and sport in vastly increasing numbers. In contrast to the nineteenth century naysayers who decried strenuous exercise and athletic participation for women as dangerous and unladylike, today, educators and public health advocates recognize the overall benefits for girls' physical health and emotional well-being. As health care costs continue to escalate, and pressures on the American health care system to provide quality care intensify, the logic of preventive health strategies that involve physical activity and sport becomes economically salient.

The overall vision that emerges from this report frames physical activity as a developmental aid and public health asset for girls and, by inference, for boys as well. Physical activity can serve as a social and cultural intersection where adolescents, parents and caring adults can come together in mutually supportive ways. The aerobics class, fitness run or basketball court are safety zones where young girls can hang out together, test and challenge themselves, learn about competition, develop physical fitness components such as cardiovascular endurance, strength and flexibility, and have fun all at the same time.

The real and potential benefits that physical activity and sport have to offer girls, their families and communities, however, continue to be stymied by several factors. Economic and cultural barriers block wider participation, especially for poor girls and girls of color. Despite increasing interest and participation rates, physical activity and sport remain underutilized resources for the many girls who are mired by sedentary lifestyles or dissuaded from getting involved because of gender stereotypes, discriminatory practices and lack of opportunity. There are also appreciable numbers of girls for whom athletic participation is associated with illness, injury and addiction to exercise rather than with physical and mental well-being. And finally, there needs to be more systematic research on the numerous ways that physical activity and sport influence girls' lives. Simply put, too little research has been done in an area where girls have too much to gain. For this reason, each of the authors has listed priorities for future research at the end of their respective sections.

This report concludes with a list of policy recommendations. The information and analyses gathered here hold implications for parents, educators, coaches, athletic administrators, public health officials and lawmakers. There is more at stake in the struggle to expand girls' physical abilities and athletic opportunities than learning to do jumping jacks or winning and losing games. Future policy decisions need to be grounded in the broader understanding that girls' involvement with physical activity and sport is just as much about physical vitality, emotional well-being, community health and educational opportunity as it is about who runs the farthest or scores the most points.

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