COPING WITH REENTRY BARRIERS: STRATEGIES USED BY WOMEN OFFENDERS

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Abstract

Recently released offenders face multiple barriers during reentry from prison to society. The coping strategies of female offenders differ from those of their male counterpart. The goal of this research was to explore female offenders' coping strategies during the reentry phase. Although some health professions commonly research coping, there is little known about coping mechanisms used during reentry for women offenders. The participants in the study were dual diagnosis women offenders who had been recently released from prison (n=20). The research question examined was, "Which coping mechanisms do women reentering society from prison commonly use to address their barriers?" The research question was derived from a similar study conducted with male participants, but our study sought to analyze a gendered approach to this phenomenon. In an effort to capture how women cope with reentry, interviews were used to investigate themes surrounding coping strategies once released. Data analysis for this study was primarily qualitative. The Coping Inventory for Stressful Situations [CISS; Endler & Parker, 1999] was used to further support the interviews to determine specific coping strategies used during stressful situations.

Introduction

Literature on coping consistently informs us of the ways in which individuals cope in stressful situations such as school, work, parenting, dissolution of marriage, etc. however it fails to specifically address how *women offenders* cope with reentry barriers. Spjeldnes & Goodkind provide a comprehensive review of the literature on gender and coping. Their work reflects the notion that women and men face different barriers as well as react differently to such barriers [2009]. This research investigated the barriers women face as well as the ways in which they began to cope with their respective barriers. Current research in this area falls short in understanding how coping strategies may be related to criminal behavior both before a period of incarceration and during the reentry phase. This study focused on female coping during the reentry phase. The transitory event of reentering society from prison raises concern for one's ability to cope in a healthy and productive manner [Zamble & Porporino, 1988; Sampson & Laub, 1992, 1993]. This event along the life course as well as those events preceding it may contribute to the difficulty women face during this time. Historically, research has shown that those who engage in criminal activity often lack the ability to cope in an effective way when faced with challenging situations [Phillips & Lindsay, 2009].

Relevant Literature

Gender-Neutral Barriers to Reentry

The process of reentry impacts both male and female offenders. Although the unique barriers women face will be highlighted in this paper, it is also important to discuss the general barriers that all offenders may encounter. Establishing an effective reentry plan is paramount for an offender's success. Historically, prisoners were prepared for release under the medical model. This model provided rehabilitative programs addressing basic needs such as education, vocational skills, counseling, and substance abuse. These programs were developed to ease the transition back to society [Seiter & Kadela, 2003; Belknap, 2007; Covington, 2001]. These programs were based on a male-centered model. Vocational skills such as carpentry, auto-mechanics, and construction management were the focus. Counseling services focused primarily on anger management for male offenders with a history of domestic violence, uncontrollable behaviors, and impulsiveness. Although perhaps effective for males, these programs were not gender-specific and fail to consider the needs of women offenders during reentry.

During the 1980's our approach to inmate programs began to shift. "Tough on Crime" rhetoric, "truth in sentencing", mandatory minimums, and "three strikes" policies played a role in these changes. Women offenders often bear the brunt of such policies. Conservative in nature, these policies have resulted in longer prison sentences, fewer opportunities for parole, and they often target single mothers, those who are already financially and emotionally struggling [Belknap, 2007; Chesney-Lind, 1998]. In 1974, Robert Martinson's article, "What Works? Questions and Answers About Prison Reform" addressed the idea that nothing was working in terms of rehabilitation. The question, "what works?" began a movement in a new direction for our system of "corrections" in the U.S. According to Seiter and Kadela [2003] "the current model of prison operations and prisoner reentry does not focus on inmate rehabilitation and preparation for release, but on punishment, deterrence, and incapacitation to prevent future crimes" [p. 363]. This is concerning as the surge of inmates being released yearly continues to increase for both males and females. In 2006, approximately 713,000 offenders were released [Sabol & Couture, 2008]. In 2007, almost 800,000 offenders were in the parole system [Glaze & Bonczar, 2008]. Based on this increase, it is necessary to investigate coping mechanisms used when faced with a stressful or challenging situation in particular those faced with when reentering society from prison.
Petersilia [2003, 2005] discusses the challenges male parolees face in terms of education, employment, housing, substance use, mental health care, and access to rehabilitative programs. These barriers can make the process of reentry a difficult one for both males and females. In terms of education, Harlow [2003] found that nearly half of state inmates (about 41%) have not earned a high school diploma or GED. This study supports literature that suggests there is a relationship between one's level of education and likelihood of recidivism. [Brennan, Dietrich, & Ehert, 2009; Horney, Osgood, & Marshall, 1995; Jensen & Reed, 2006; O'Connell, 2003; Ulmer, 2001]. In addition to the literature on education, research has also shown that employment is linked to recidivism [Brenda, Harm & Tombs, 2005; Kim Joo, & McCarty 2008; O'Connell, 2003]. This is evident as many employers are hesitant to hire people with lower education and in addition, those who have been convicted of a felony [Petersilia, 2003, 2005]. Makarios, Steiner, and Travis [2010] provide evidence that there is a relationship between education, employment, and recidivism. The authors state, "inmates who fail to succeed in school or obtain stable employment are less likely to successfully reenter society" [p.1387].

In terms of housing as a barrier to reentry, Petersilia [2005] found that many landlords refuse to enter into lease agreements with an inmate once the inmate's felony record has been discovered during a background check. This presents further challenges for inmates as they leave prison with limited education, poor finances, and lacking employment and now a lack of housing options. For example, finding adequate housing in an area free of drugs and crime is difficult with no job, limited income, and poor education. In addition, many inmates return to the community they were living in prior to incarceration which is often riddled with difficulties discussed. Many inmates are also released with a history of substance use and mental illness [Rosenfeld, Petersilia, & Visher, 2008] and access to rehabilitative programs for this population is weak creating further barriers [Petersilia, 2003].

Petersilia's conclusions are supported by additional research on reentry. For example, Seiter and Kadela [2003] refer to a study done in 1999 by the Vera Institute of Justice in New York City where 88 recently released inmates were randomly selected to be interviewed in terms of issues they confronted upon release [as cited in Nelson, Deess, & Allen, 1999; Makarios, Steiner, and Travis's, 2010]. The barriers identified include securing housing and employment, creating ties with family and friends, substance use, and the effect of parole supervision.

Gender-Specific Barriers to Reentry

Although men and women offenders do face similar struggles during reentry, there are some important differences in the barriers they face, they type of programming offered, and how they cope with their situation.

Richie [2001] conducted a qualitative study interviewing 42 minority women who were living in low-income areas. The challenges and barriers identified in their process of reentry included those identified in the Vera Institute of Justice study of 1999 such as education and employment, housing, family reunification, and substance use. Additional barriers identified in the Richie study included those associated with health care, mental health issues, and preventing domestic violence. In another study examining women who identified as being "successfully reintegrated" O'Brien [2001], found that their success was a result of finding housing, obtaining a legal income, redeveloping social connections, gaining confidence, and developing community membership.

In addition to the barriers previously mentioned, the following barriers uniquely impact women.

Family History

Women offenders often find themselves in the midst of a generational prison cycle. Many women report that at least one of their relatives has been or is currently incarcerated [Covington, 2001]. Since women typically are the primary caregivers for their children in both single and coupled homes, their experience may have a greater impact on their children. According to Dallaire [2007] "Children of incarcerated parents are more likely to drop out of school, engage in delinquency, and subsequently be incarcerated themselves" [p. 440]. Enhancing reentry efforts to incorporate reunification plans will likely decrease future generations of criminal involvement.

Employment

Socioeconomic issues seem to impact women more as they are less often employed full-time and more often than males already receiving welfare benefits prior to arrest. More women (60%) report not having full-time employment at the time of arrest, compared to males (40%) [Mumola, 2000]. Almost half (44%) of women have not completed high school at the time of arrest [Greenfeld & Snell, 1999].

Health

Physical and mental health issues are another concern for both males and females, however, for females, more than half (57%) report being sexually or physically abused before their arrest [Mumola, 2000]. Women were also diagnosed with mental illness more often (23%) compared to men (16%) [Ditton, 1999]. Women (40%) were also more likely to report drug use than males (32%) at the time of arrest [Mumola, 2000; Greenfeld & Snell, 1999].

Parenting

Unique challenges for women also include childcare while incarcerated, maintaining familial bonds, and loss of parental rights. Children are left with either their father (28%) or a close relative (grandparent, sibling, or close family friend) during their development stages making the transition difficult for child and caregiver [Mumola, 2000]. Women are often faced with difficulties maintaining family bonds since most prisons are over 100 miles from their family [Mumola, 2000]. More than half of women inmates have never had a visit from their children [Lapidus, Luthra, Verma, Small, Allard, & Levingston, 2005]. Longer prison sentences have made it difficult for women to maintain their parental rights while serving time. Typically most states terminate parental rights after 15 months and nearly 60% of mothers are serving sentences longer than 24 months [Mumola, 2000].

These barriers are met by males in some instances, but perhaps impact women offenders differently. Women in general cope, process events, and problem-solve differently than men do and women offenders present another layer of difficulty than those who do not engage in criminal activity. An exploration of coping has been studied and may enlighten our understanding of how women offenders cope.

Coping with Reentry Barriers

Offenders face a number of barriers as part of their reentry. How they cope with these obstacles to successfully stay out of prison is important. Coping, defined by Lazarus & Folkman [1986] is "constantly changing cognitive and behavioral efforts to manage specific external and/or internal demands that are appraised as taxing or exceeding the resources of a person" [p. 141]. There are a number of ways in which an individual will "cope" with a demand. Drawing from a variety of literature on the subject, the research consistently shows women offenders tend to utilize strategies that are problem-focused (task), emotion-focused, or avoidance-focused [Lazarus and Folkman, 1986; Endler and Parker, 1999; Phillips & Lindsay, 2009].

Folkman and Lazarus [1986] define the three type of coping explored in this study. Problem-focused is defined by: "Purposeful task-oriented efforts aimed at solving the problem, cognitively restructuring the problem, or attempts to alter the situation. The main emphasis is on the task or planning, and on attempts to solve the problem." [p. 993] For example, a woman who seeks substance abuse treatment for 30 days per the recommendation of a treatment provider is performing a task or problem solving strategy to her substance use.

Emotion-focused is defined by: "Reactions that are self-oriented. The aim is to reduce stress (but this is not always successful). Reactions include emotional responses (e.g., blame myself for being too emotional, get angry, become tense), self-preoccupation, and fantasizing (daydreaming reactions). In some cases the reaction actually increases stress (e.g., become very upset, become very tense). The reaction is oriented towards the person." [p. 993] For example, substance abuse treatment hasn't worked in the past so there is no reason to try again.

Avoidance-focused is defined by: "Activities and cognitive changes aimed at avoiding the stressful situation. This can occur via distracting oneself with other situations or tasks (task oriented) or via social diversion (person oriented) as a means of alleviating stress." [p. 993] For example, finding an excuse to not attend substance abuse treatment.

The goal of our study was to conduct a similar approach to Phillips and Lindsay's [2009] research, which focused on coping strategies male offenders used when reentering society. These authors used both a qualitative and quantitative approach. The participants (*n=20*) were incarcerated males who had recidivated after being released from prison. The reasons for their most recent incarceration varied greatly.

For the men, upon their initial release, the participants were optimistic about their ability to cope. That feeling soon changed as they experienced drug cravings, faced unemployment, and became overwhelmed with the reentry process. During the course of the interviews, the participants identified 57 instances of coping. In 48 of them, avoidance coping strategies were used [Phillips & Lindsay, 2009]. The strategies of avoidance that were used included abusing substances, avoiding stressors such as family and treatment, staying isolated from friends and family, and engaging in high-risk sexual behavior. This supported the coping-criminality hypothesis of Zamble and Poprorino [1988], which suggests that people with criminal histories have poor coping skills, which make them more likely to turn to crime. Phillips and Lindsay [2009] found that "the inability to adequately cope with barriers faced during the reentry process led to the return to unhealthy strategies, avoidance of the problem by drug use or running from the problem, and ultimately criminal behavior, including abusing substances, selling illegal substances, stealing, and illegal sexual behavior" [p.150]. All of the participants relapsed into substance abuse, which increased their problems and caused them to recidivate. Zamble and Poprorino's [1988] coping-criminality hypothesis is derived from life course principles. The hypothesis states, "coping difficulties are a central cause of the maintenance and repetition of criminal acts, if not their origin." [Zamble & Poprorino, 1990; 56] This hypothesis supports the notion that how women cope early on in life may precede their entry into and lack of desistance from criminal activity.

Barriers to Reentry and The Life Course

Understanding how female offenders cope with barriers during reentry may provide insight into what led them to criminality from the onset. The life course perspective emphasizes the changing nature of criminal behavior over the life cycle [Glueck and Glueck, 1950; Sampson and Laub, 1993; Elder, 1985; Moffitt, 1993; and Thornberry, 1997]. It provides an appropriate framework from which to explore a pattern of barriers typically found in female offenders' history and how these barriers resurface during reentry.   This perspective, often utilized by feminist criminologists, is ultimately concerned with transitions during the life course and "trajectories", a concept relating to continued criminality or desistance.   Transitions are characterized as events that account for trajectory, such as: gaining employment, committing a delinquent act, or having a child.   We find it useful to draw from this body of literature because life course theory applies particularly well in understanding whether barriers to reentry reflect earlier pathways.

For females, some of the events that are expected to alter trajectory outcomes (i.e. barriers) are parenthood, substance use, childhood abuse (physical, sexual, emotional), access to education/opportunity, mental health, death of a loved one, and family background. Each of these events is processed differently for each person and there are multiple factors that often lead to criminal behavior. [van Wormer & Bartollas, 2007].

The work of many feminist criminologists has paved the way in understanding the female offender separate from her male counterpart [Belknap 2007; Daly, 1992; Owen, 1998]. Women's needs and risks vary substantially when compared with males. Although some have even identified "typical" or "typified" pathways specifically for female offenders, they too can differ greatly. Childhood victimization [Chesney-Lind, 1997; Covington, 1998], poverty, homelessness, lack of education, marginalization [Richie, 1996; Bloom, Owen, & Covington 2003], and dysfunctional relationships (IPA) are among the most common pathways found in female offenders [Widom, 1989; Brennan, Breitenbach, & Dieterich, 2010]. How women cope with earlier life events will likely predict their coping mechanisms used during reentry. For example, women who have a history of substance use coped using "avoidance-oriented" strategies, common to this barrier. Women in this study all were substance users struggling with addiction and all continue to report using "avoidance-oriented" strategies during reentry when asked how they were coping with their addiction. Although there are other factors, this notion supports the need to learn positive coping strategies earlier in life, which may in turn alter the pathway.

Data Analysis

This research aimed to gain a further understanding of how female offenders cope with reentry. The research question investigated was, "Which coping mechanisms do women reentering society from prison commonly use to address their barriers?" This question was explored mainly using qualitative methods. The Coping Inventory for Stressful Situations (CISS) was used to broaden the understanding of coping strategies used to address barriers in daily situations. This research contributes to earlier studies, which focus primarily on male offenders and their coping strategies during reentry [Phillips & Lindsay, 2009; Gendreau, Little & Goggin, 1996]. In relation to reentry and coping, this phenomenon has been studied in males, but is relatively new from the female perspective. Gaining preliminary insight from the perspective of the individual reentering society may help in successful reentry programming in the future. This is the impetus of using primarily qualitative measures.

Phenomenological methodology is best performed by exploring the experiences of an individual [Creswell, 2007; Moustakas, 1994; Morse & Field, 1995]. Women who participated in this research experienced similar barriers and coping mechanisms to one another. Breaking down the coping strategies identified during the interviews helped the investigators better understand the research question of how women cope with reentry barriers and which coping strategies were typically used during this phase. The qualitative analysis generated prominent themes, statements, and descriptions of experiences.

Although the study was mainly qualitative, the self-report inventory (quantitative) provided additional support for the themes found in content analysis. The use of both qualitative and quantitative methodology was done to triangulate the data.

Participants (n=20)

Participants for the study were recruited from a non-profit reentry program located in Hartford, Connecticut. All participants were women. The reason women were studied is because related literature focuses specifically on male offenders. The age of participants ranged from 35-61 with an average age of 46.60 (*SD=6.79*). The women were all released between 1 month and 5 months from York Correctional Institute (YCI), the only women's prison in the state of Connecticut. Participants were eligible for the study if they had been incarcerated at least once prior to their most recent offense. Women were asked to look retrospectively at their coping mechanisms once released so it was important

that they had served at least one other sentence prior to their most recent offense (offenses were classified as either felony and misdemeanor). All of the women were currently out of prison at the time of the interview, however some were under supervision for probation or parole with Court Support Services Division (CSSD) or the Department of Correction-Board of Pardons and Paroles (DOC-BOPP) respectively. Participants were from diverse ethnic backgrounds. Fifteen identified as *Black*, 3 identified as *White*, and 2 identified as *Hispanic*.

The convictions of the women varied. Most of the women reported having multiple convictions served together so there is overlap in some of the data. Six women were incarcerated for assault/battery. Six women were incarcerated for property crimes. Five women served for technical violations. Four women were incarcerated for drug-related offenses. Two women were incarcerated for solicitation/trespassing and finally, due to the sensitive nature of some of the charges, some have been omitted to maintain confidentiality.

Participants were asked to provide the number of times they were incarcerated. Some of the women used an approximate number as they were not sure of the exact number. The range was 1-30 incarcerations (including both jail and prison) with an average of 7.04 (*SD=8.08*). Participants were asked about the length of their most recent incarceration. The average length of time sentenced for their most recent offense was 60.08 (*SD=62.95*) months.

Instruments

Materials for the study included a paper interview questionnaire including demographic information and the Coping Inventory for Stressful Situations (CISS). An informed consent form was also read and provided to each participant. Interviews began once the participant gave their verbal consent. Signatures were not collected to protect the participant's confidentiality.

The interview served as a method of gathering in-depth information about each woman and her experiences. Background information was collected as well as information about criminal history, substance use, release and reentry, recidivism, and coping strategies. The interview was purposely set up to allow for flexibility for the researcher to ask follow-up questions. Each question was developed to establish a deeper understanding of the participant's reentry process.

Portions of the interview questions were duplicated from Zamble and Quinsey [1997] and Phillips and Lindsay [2009]. These portions included questions on substance use and criminal history. Permission from the authors was obtained prior to commencement of the study. A debriefing statement was included at the conclusion of the interview.

The CISS developed by Endler & Parker [1990] measures multidimensional coping styles and is often used in the medical and health professions to assess how one might react when faced with a stressful or challenging situation. The inventory has 48 items answered using a 5-point Likert scale (Not At All [1]-Very Much [5]) The CISS measures whether a style of coping is considered task-oriented (problem-focused), emotion-oriented, or avoidance-oriented. Two subcomponents of avoidance-oriented are distraction and social diversion. Sample items include (See Appendix A for a sample of inventory items): *think about how I solved similar problems* (Task-oriented), *become very upset* (Emotion-oriented), *take some time off and get away from the situation* (Avoidance-oriented). Although the CISS has not been normed on women inmates, it has been normed on women in general and male inmates in a correctional population. The CISS was administered to participants after the interview. Participants who were unable to read had the assessment read to them and they delivered their responses orally.

Procedure

The cooperating agency posted information about the study. The agency then began seeking volunteers for the study and when they received 20 participants who met the eligibility requirements, the interviews began. Participants received a $20.00 gift card to a local clothing store, supplied by the researchers, to avoid potential staff/client bias in recruiting. Program staff is aware of the names of each volunteer, however researchers were only provided a number for each participant. All materials associated with that particular individual were coded with the same number. Program staff has the original participant names and they are being kept confidentially locked away. Each participant verbally consented to the study and was given a written copy of the informed consent. This study was conducted with the approval of Central Connecticut State University's Human Studies Council.

Participants met with one of two researchers at one of the available program sites (program office or residential transitional facility). Interviews were conducted in these locations for two reasons: to ensure that program staff was available in the event that a participant needed support or comforting during or once the interview concluded and for participant convenience. Data was collected for both the interview and the inventory during the same session. Each session lasted approximately 90 minutes.

Methods

Qualitative methods were combined with the CISS (quantitative) to provide a broader understanding of the results. Qualitative interviews were transcribed and analyzed for common themes using both qualitative and quantitative software programs. Statements relevant to coping were selected to begin building the phenomenological analysis. Phenomenological analysis involves identifying particular themes and organizing them into common coping-related categories. The themes were coded as nominal data in combination with the quantitative data gathered by the CISS. The themes used were coded based on a prior study by Phillips and Lindsay [2009] to make future comparisons between males and females[1]. They were coded as emotion-focused, problem-focused (task oriented), or avoidance-focused [Folkman & Lazarus, 1986; Endler & Parker, 1999; Phillips & Lindsay, 2009].

Findings

Qualitative

The women in the study identified barriers that they faced during reentry, once the barriers were identified; they were then asked about ways in which they coped with such barriers. The information here will summarize initial feelings upon reentry, barriers to reentry, and ways in which the women coped with the barriers to reentry.

Similar to experiences reported by male participants, the female participants in our study identified a myriad of feelings when first released. Participants were asked what those feelings were and how they began to cope with them upon reentry. The feelings most commonly described were *scared, anxious, excited, hopeful, hopeless, low self-esteem,* and *uncertainty*.

A 54-year-old participant who had been incarcerated more than 15 times reported feeling scared and recalls her struggle with substance use during reentry,

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[1] Although some general comparisons can be made, the males studied in the study conducted by Phillips & Lyndsay (2009) were incarcerated at the time of the interview whereas the women in this study were released at the time of the interview.

At the beginning of my releases, it was like I would go to jail and come out and set my mind that when I was coming out...I was just was healthier and could go back to my drug use and that's all I did, the time that I went to the program now I was tired. I was tired of just going in and out and now so I tried, so I said let me try something different and I went to the program, but still like in the back of my mind I wasn't ready, I didn't want to be ready so um I winded up relapsing, after a year and a half because um I knew I wasn't ready, I really wasn't ready, so um I relapsed.

Another participant, a 45 year old, also reported feeling scared. She struggled with cultural changes after serving a manslaughter conviction. She stated,

Like oh my god...yeah like I said, cause prison is like oh my god, disgusting, and people are crazy, it's not like before, the young people are like they think they're the rulers and this and that, and they got a lot to learn. And it's crazy like that outside too.

The majority of feelings tended toward uncertainty and trepidation. A 46-year-old participant who had several bids in prison for property crimes stated,

I just always thought when I got out it would be better and then I could never get no job and never get no insurance and never get no nothing...it gets you get desperate like and do what you do. I feel bad now though, you know...

Another participant, a 60-year-old mother describes feeling scared about being reunified with her daughter and getting her life back too quickly.

I was scared. Umm I didn't know how I was going to handle getting my daughter back. I kept saying wait, wait, but I couldn't - I couldn't wait, uh which I should have waited because when you're um, when your mind is when you come out of prison it's devastating to you, you might not know it, it takes away from you- doesn't give you anything, and so if you don't have anything, if you came in here with something, you don't have nothing and you have to build yourself up, and I didn't get that time to do that you know. I just I was scared, but I just came out full running- and um that's no way to be cause you're just gonna run into a wall and that's what I did you know, and you're back to do the same thing.

Although many experienced negative feelings upon release, others felt hopeful at first and then later faced barriers that made them consider old habits. A 61-year-old participant stated,

Well um, you know you come out hopeful, thinking things you know, you're gonna do it, or whatever but once you get out into society, you hit brick walls, and you just go back to that society that life you lived cause you're hitting so many brick walls you know.

Other participants were dealing with self-esteem issues as their entire life was often described as a lie. A 42-year-old participant struggled with her self-esteem both in and out of prison, "I mean, yeah it was like everyone always putting you down and shit. How you gonna feel growin' up?" she also noted that it took a toll while incarcerated, "...[the abuse] continued in there too. I let it."

A 51-year-old woman, incarcerated 5 times for solicitation offenses describes in detail the day she was finally free,

> Oh I- I -I just being able to I mean I remember being able to get off the bus in the court house in [omit] and I remember [omit] waiting for me and I had my bag of stuff and I had my TV and I was wearing grey sweats and I just couldn't believe I was free, and the trees were green it was [omit] so everything was just starting to green up and there's no green, there's no color when you're in prison its awful, the trees there are dead there's mold all over there, I was breathing fresh air, she took me out to breakfast, I had actual food for the first time in a year and half, I drank soda for the first time in a year and a half um I just just couldn't believe it you know...

Many of the participants experienced similar feelings to one another; one recurring theme was the feeling that their struggle with substance use often contributed to their unsuccessful reentry in the past. This struggle also made it difficult to obtain and maintain employment, reunify with family members and secure safe housing. A 40-year-old participant with multiple property crime convictions describes her struggle as a cycle of unhealthy thoughts,

> Most times, I self sabotage myself, um cause I had an urge to use and or I would say something if the relationship didn't go right that was an excuse to go you, you fuck everything, screw it all and you know let me just get back out here, and when my money's gone now I gotta find out how to get some more, you know, that's when the criminal thinking starts to come in, the scheming and conniving to get what I need, it starts to take over and so once again you're right back into what's familiar.

Others reflected on how substance use often came with criminal activity, a 53-year-old with a number of possession and property offenses stated,

> There were times when I had every intentions of doing the right things, but um if you don't have the funding to go get your id, you know, or have cab fare, you resort to you old ways that you know you can get some money, and I know that's what always happen to me and I always went to the stores to shoplift and then I'd say fuck it and get the drugs and it comes hand in hand.

The impact of family members, friends, and others who had a negative influence was largely a struggle for the participants. When asked about their biggest challenge in staying free from criminal activity many reported similar responses, "to stay away from negative people, the streets," "staying away from users," "people that were getting high, and drinking."

Participants in the study discussed their feelings upon reentry, barriers they faced at that time, the challenges to a life free of crime, and their coping mechanisms during this process. The majority utilized some type of problem-focused strategy most often. This differs from males that were asked similar questions in a previous study. According to Phillips & Lindsay [2009], males typically coped using avoidance and emotion coping strategies most often. The variation will be addressed in the *Discussion* section.

Quantitative

The CISS uses T-scores which can be interpreted as follows: Above 70=Very much above average; 45-55=Average; and below 30=Very much below average. These were averages associated with the type of coping mechanism most often used for a particular group used during the norming process.

The women in this study had the following average scores: task-oriented yielded an average score of 62.95 (*SD = 9.69)*, emotion-oriented scores yielded an average of 49.30 (*SD = 12.88),* and avoidance-oriented scores yielded an average of 54.90 (SD = 12.85). There are two subcomponents of the avoidance category, social diversion and distraction. Social diversion yielded an average score of 18.10 (*SD = 5.14*) while distraction yielded an average score of 27.60 (*SD = 7.64*). Task-oriented ranges were slightly higher than the average for women inmates originally normed and emotion-oriented ranges were slightly lower for women inmates originally normed. This information was helpful in supporting the qualitative interviews. Women identified greater task-oriented coping when taking the CISS inventory, but appeared to express all 3 types during the personal interviews. We find the interviews important for precisely this conclusion. One simple inventory does not truly provide the full picture.

Participants were asked to identify barriers they were faced with during reentry from prison to society. Barriers most often identified were employment, education, housing, transportation, reunification with children/family, financial, and substance use. They were then asked about the ways they coped with each barrier. There were a total of 42 instances in which the participants used one of six coping strategies. Participants identified anywhere from one to four barriers and typically used more than one coping mechanism to deal with a stressful situation. Problem-focused coping was used in 30 instances, avoidance-focused was used in 22 instances, and emotion-focused was used in 15 instances. Participants were most likely to use problem-focused strategies alone (P). In 9 instances, problem-focused was combined with emotion-focused strategies (P+E). In 6 instances, participants used avoidance strategies alone (A). In 4 instances participants used avoidance strategies when problem-focused strategies did not work (P➔A). They used avoidance and followed it with problem-focused in 6 instances (A➔P). Participants used emotion-focused followed by avoidance in 6 instances (E➔A). No participants used emotion-focused strategies alone (E). Although the participants credited many others for their success, they most often identified problem-focused coping mechanisms to tackle barriers they faced upon reentry.

Discussion

The present research sought to identify common themes in coping strategies for female offenders. To look more closely at the common coping strategies 20 women were interviewed and asked to take a self-inventory (CISS) to determine coping strategies utilized during reentry from prison to society. In a similar study by Lindsay & Phillips [2009] where a group of 20 men were given a similar interview and the same self-inventory (CISS), avoidance-focused strategies were most often used. For women in the present study, problem-focused strategies were most commonly reported. Avoidance-focused and emotion-focused strategies respectively were used less often for women coping with reentry.

Responses from the CISS supported information collected in the qualitative interview. Both yielded problem-focused strategies as being most commonly used for women coping with reentry followed by avoidance and emotion-focused strategies. However, most women used a combination of coping strategies. For example, if problem-focused was originally used to tackle a barrier and that strategy did not work, participants then resorted to avoidance strategies. Similarly, when emotion-focused did not work some women resorted to avoidance strategies. When avoidance strategies did not work some

women resorted to problem-focused strategies. The final combination of coping mechanisms was the use of problem-focused and emotion-focused strategies simultaneously.

Previous literature suggests that the offending population often uses avoidance strategies warranting them less likely to cope with barriers [Gendreau, et al., 1996]. For women in this study, avoidance strategies were used, but not nearly as often as problem-focused strategies. One possible explanation is that although problem-focused strategies were reported they were not actually used, they were often reported because it is the strategy that one *would like* to use, but whether they actually did was another story [Phillips & Lindsay, 2009; Rokach & Cripps, 1998].

Literature also suggests that criminal women face a multitude of barriers. If problem-focused strategies were most commonly reported, then the question remains "why weren't these strategies used in previous reentry episodes?" If these strategies were used, why weren't they successful? A possible explanation is that criminal women often face barriers such as: high rates of substance use, mental illness, dependents, and an overall history of physical/mental/sexual abuse. Working on multiple issues at one time certainly may seem problem-focused, but also may yield additional strain in the process leading to relapse or recidivism [Covington, 2003].

Another possible explanation is that participants in this research were currently experiencing reentry at the time of the interview whereas interviews of incarcerated participants may yield alternative results. Participants noted various tasks they were currently working on to "get back on track." Incarcerated individuals may not be empowered with resources or the ability to problem-solve, but instead more likely to use avoidance or emotion-focused strategies [Phillips &Lindsay, 2009].

Implications for Gender-Specific Reentry Programming

Although problem-focused strategies were reported most often for women, the use of healthy coping strategies still remains a concern. Women in the study indicated problem-focused strategies were used more often than avoidance or emotion-focused, but throughout the interview women identified other coping mechanisms that were more avoidant focused. Reentry programs could benefit from focusing on critical barriers and past coping methods. Identifying coping mechanisms and educating the population about healthy versus unhealthy strategies may empower the women to tackle their barriers using problem-focused mechanisms as a natural tool to confront future barriers. The coping-criminal hypothesis suggests that poor coping strategies often lead to criminal behavior when "unhealthy" ways of coping are used [Zamble & Proporino, 1988]. Program clients may benefit from learning the tools to cope in healthy ways so that it becomes a natural problem solving technique used when facing a difficult situation.

Women enter the criminal justice system for different reasons than men do and the ways in which they *re*enter society differs as well [Bloom, Owen & Covington, 2003; Belknap, 2007; Chesney-Lind, 1993]. An important transitional practice is to educate women on healthy coping strategies. This transition should start at least 3-6 months prior to release. Women can begin working on real and perceived barriers prior to release in order to better cope with such barriers once released such as reunification with children.

Other areas that may be addressed prior to release deal with some of the feelings women have upon reentry. When first released, participants identified a number of initial feelings upon reentry these included feeling scared, anxious, and/or hopeless. More importantly many identified feelings of uncertainty. These feelings typically led the women directly back to old habits where they were met

with, although unhealthy, certainty. Awareness of this process may help programs approach these feelings by addressing barriers immediately and potentially preventing relapse or recidivism.

Limitations

A limitation of the study was that all of the women interviewed were currently involved in a program helping them with their reentry. Some were still on some form of supervision (probation or parole), but none were incarcerated at the time. However, not all of the women were at the same stage of reentry and some women had numerous episodes of reentry.

Another limitation of the study was that one of the criteria of the reentry program (where the women were recruited) was that they be labeled as dual diagnosis (substance use and mental illness combined). Little research has been done in this area specifically involving female offenders and it is unknown what role this diagnosis may play in one's ability to cope with barriers [Covington, 2003].

The CISS, the inventory chosen to support the interviews was not normed on women offenders, but male offenders only. Although it supported the information gathered in the interviews, there may be a more appropriate coping inventory to assess women offenders.

The sample size of the study was small (n=20) which possess a concern for generalizability. However, the goal of this study is to describe women offenders and advance the knowledge of women offenders. Future research would benefit from a larger sample size, however qualitative analysis yields smaller sample sizes due to the nature of the data collection. Interviews for each woman ran on average ninety minutes and content analysis, interview transcription, and extrapolation of information is often time consuming.

Two additional limitations may exist within this study. The women were not racially diverse and the setting was an urban area. This may in fact have contributed to less variation in the results.

Conclusion

Understanding coping mechanisms is important when understanding why someone may engage in a particular activity. Researchers may benefit from exploring the coping-crime hypothesis proposed by Zamble and Proporino [1988] from a gendered approach. This hypothesis largely addresses the needs of men while ignoring the needs of women. As noted earlier, women enter into criminal behavior for different reasons than men and, therefore, a better understanding of the link between coping and criminality should be explored from a gendered approach.

A closer look at the life course theory and feminist pathways theory and one's ability to cope in stressful or challenging situations may also provide researchers with a better understanding of why women cope differently than their male counterparts.

Another potential area of importance is *supervision*. Part of reentry is navigating the supervision (probation or parole) end of the criminal justice system. Supervision presents offenders with a number of barriers that contribute to coping (both healthy and unhealthy) and in addition, successful reentry.

This study supports the literature that there is a need to examine how offenders cope with a stressful situation such as reentering society from prison. Additionally, an examination of female offenders and their patterns of coping with reentry is needed. This study investigated the question, "What characteristics describe how women cope with reentry?" Using a mixed methodology to gather data offered a broader understanding of the needs of female offenders with regard to their reentry and potentially to the impact on gender-specific reentry programming.

References

1. Endler, N. S., & Parker, J. D. A. (1999). *CISS: Coping inventory for stressful situations manual* (2nd ed.). North Tonawanda, NY: Multi-Health Systems.
2. Spjeldnes, S., & Goodkind, S. (2009). Gender differences and offender reentry: A review of the literature. *Journal of Offender Rehabilitation.* *48*: 4, 314-335.
3. Zamble, E., & Porporino, F. (1988). *Coping behavior and adaptation in prison individuals who are incarcerated.* New York: Springer.
4. Sampson, R. J. & Laub, J. H. (1992). Crime and deviance in the life course. *Annual Review of Sociology, 18*, 63-84.
5. Sampson, R. J. & Laub, J. H. (1993). *Crime in the making: pathways and turning points through life.* Cambridge, MA: Harvard University Press.
6. Phillips, L. & Lindsay, M. (2009). Prison to Society: A Mixed Methods Analysis of Coping with Reentry. *International Journal of Offender Therapy and Comparative Criminology*, 55(1), 136 – 154.
7. Seiter, R.& Kadela, K. (2003). Prisoner Reentry: What Works, What Does Not, and What Is Promising. *Crime & Delinquency, 49*, 360 – 388.
8. Belknap, J. (2007). *The invisible woman: Gender, crime, and justice* (2nd ed.). Cincinnati, OH: Wadsworth.
9. Chesney-Lind, M. (1998). The forgotten offender: Women in prison: From partial justice to vengeful equity. *Corrections Today*, December, 66-73.
10. Covington, S. (2001). A woman's journey home: Challenges for female offenders and their children. Paper commissioned for The National Policy Conference: U.S. Department of Health and Human Services, The Urban Institute.
11. Martinson, R. (1974). Questions and answers about prison reform. *The Public Interest, 35*, 22-54.
12. Sabol, W. J., & Couture, H. (2008). *Prison inmates at midyear, 2007.* Washington, DC: U.S. Department of Justice.
13. Glaze, L. E., & Bonczar, T. P. (2008). *Probation and parole in the United States*, *2007: Statistical tables.* Washington, DC: Bureau of Justice Statistics.
14. Petersilia, J. (2003). *When prisoners come home: Parole and prisoner reentry.* New York, NY: Oxford University Press.
15. Petersilia, J. (2005). Hard time: Ex-offenders returning home after prison. *Corrections Today*, *67*, 66-72.
16. Harlow, C. (2003). *Education and Correctional Populations.* Washington, DC: Bureau of Justice Statistics.
17. Brennan, T., Dieterich, W., & Ehret, B. (2009). Evaluating the predictive validity of the Compass Risk and Needs Assessment System. *Criminal Justice and Behavior*, *36*, 21-40.
18. Horney, J., Osgood, D. W., & Marshal, I. H. (1995). Individual careers in the short-term: Intra-individual variability in crime and its relation to local life circumstances. *American Sociological Review*, *60*, 655-673.
19. Jensen, E. L., & Reed, G. (2006). Adult correctional educational programs: An update on current status based on recent studies. *Journal of Offender Rehabilitation*, *44*, 81-98.
20. O'Connell, D. J. (2003). Investigating latent trait and life course theories as predictors of recidivism among an offender sample. *Journal of Criminal Justice*, *31*, 455-467.
21. Ulmer, J. T. (2001). Intermediate sanctions: A comparative analysis of the probability and severity of recidivism. *Sociological Inquiry*, *71*, 164-193.

22. Brenda, B. B., Harm, N. J., & Tombs, N. J. (2005). Survival analysis of recidivism in male and female boot camp graduates using life-course theory. *Rehabilitation Issues*, *Problems and Prospects in Boot Camp*, *1*, 87-113.
23. Kim, D., Joo, H., & McCarty, W. P. (2008). Risk assessment and classification of day reporting center clients: An actuarial approach. *Criminal Justice and Behavior*, *35*, 792-812.
24. Makarios, M., Steiner, B. and Travis III, L. (2010). Examining the predictors of recidivism among men and women released from prison in Ohio. *Criminal Justice and Behavior,* 37, 1377 – 1391.
25. Rosenfeld, R., Petersilia, J., & Visher, C. (2008). The first days after release can make a difference. *Corrections Today*, *70*, 86-87.
26. Nelson, M., Deess, P.,&Allen, C. (1999). *The first month out: Post-incarceration experiences in New York City*. Unpublished monograph, New York: The Vera Institute.
27. Richie, B. E. (2001). Challenges incarcerated women face as they return to their communities: Findings from life history interviews. *Crime and Delinquency, 47*, 368-389.
28. O'Brien, P. (2001). "Just like baking a cake": Women describe the necessary ingredients for successful reentry after incarceration. *Families in Society: Journal of Contemporary Human Services, 82*, 287-295.
29. Dallaire, D.H. (2007). Incarcerated mothers and fathers: A Comparison of risks for children and families. *Family Relations*, 56(5), 440-453.
30. Mumola, C. (2000). *Incarcerated parents and their children*. Washington, DC: Bureau of Justice Statistics.
31. Greenfeld, L. & Snell, T. (1999). *Women Offenders*. (NCJ No. 1175688). Washington, DC: Bureau of Justice Statistics.
32. Ditton, P. (1999). Mental health and treatment of inmates and probationers. Washington, DC: Bureau of Justice Statistics.
33. Lapidus, L., Luthra, N., Verma, A., Small, D., Allard, P., & Levingston, K. (2005). *Caught in the net: The impact of drug policies on women and families*. American Civil Liberties Union, Break the Chains: Communities of Color and the War on Drugs. New York: NYU School of Law
34. Lazarus, R.S., & Folkman, S. (1984). *Stress, appraisal, and coping.* New York: Springer.
35. Folkman, S., & Lazarus, R. S. (1986). Stress process and depressive symptomology. *Journal of Abnormal Psychology, 95*, 107-113.
36. Zamble, E., & Porporino, F. (1990). Coping, imprisonment, and rehabilitation: Some data and their implication. *Criminal Justice and Behavior, 17*(1), 53-70.
37. Glueck, S. & Glueck, E. (1950). Unraveling juvenile delinquency. Cambridge, MA, Harvard University Press.
38. Elder, G. H. (1985). Life Course Dynamics. Ithaca, NY: Cornell University Press.
39. Moffitt, T. E. (1993). Adolescent-limited and life-course-persistent antisocial behavior: A developmental taxonomy. Psychological Review, 674-701.
40. Thornberry, T. P., (Ed.) (1997). Introduction: some advantages of developmental and life-course perspectives for the study of crime and delinquency. Developmental theories of crime and delinquency: Advances in criminological theory. New Brunswick: Transaction Publishers.
41. van Wormer, K. S., & Bartollas, C. (2007). Women and the Criminal Justice System. Boston: Allyn & Bacon.
42. Belknap, J. (2007). The Invisible Woman: Gender, Crime, and Justice. Belmont: Wadsworth Publishing Company.

43. Daly, K. (1992). A women's pathway to felony court: Feminist theories of lawbreaking and problems of representation. Southern California Review of Law and Women's Studies, 2, 11-52.
44. Owen, B. (1998). In the mix: Struggle and survival in a women's prison. Albany: State University of Albany Press.
45. Chesney-Lind, M. (1993). The incarcerated woman. In S.F.Sharp (Ed.), *Reinventing women's corrections*. 3-13. NJ: Prentice Hall.
46. Bloom, B., Owen, B., & Covington, S. (2003). Gender-responsive strategies: Research, practice, and guiding principles for women offenders. Washington, DC: National Institute of Corrections.
47. Widom, C. (1989). Child abuse, neglect, and violent criminal behavior. Criminology, 27, 2, 251-271.
48. Brennan, T., Breitenbach, M., & Dieterich, W. (2010). Unraveling women's pathways to serious crime: New findings and links to prior feminist pathways. American Parole and Probation Association.
49. Gendreau, P., Little, T., Goggin, C. (1996). A meta-analysis of the predictors of adult offender recidivism: What works! *Criminology, 34 (4),* 575-608.
50. Creswell, J. W. (2007). *Qualitative inquiry and research design: Choosing among five approaches* (2nd ed.). Thousand Oaks, CA: SAGE.
51. Moustakas, C. (1994). Phenomenological research methods. Thousand Oaks, CA: Sage Publications.
52. Morse, J.M. & Field, P.A. (1995). Qualitative research methods for health professionals, Thousand Oaks, CA: Sage
53. Zamble, E., & Quinsey, V. L. (1997). *The criminal recidivism process*. Cambridge, UK: Cambridge University Press.
54. Rokach, A., & Cripps, J. E. (1998). Coping with loneliness in prison. *Psychological Studies, 43*, 49-57.
55. Covington, S. (2003). A women's journey home: Challenges for female offenders. In J. Travis & M. Waul (Eds.) Prisoners once removed: The impact of incarceration and reentry on children, families, and communities. Washington, DC: The Urban Institute.

Appendix A: Sample CISS Short-Item Inventory

1. Take some time off and get away from the situation (A)
2. Focus on the problem and see how I can solve it (T)
3. Blame myself for having gotten into this situation (E)
4. Treat myself to a favorite food or snack (A)
5. Feel anxious about not being able to cope (E)
6. Think about how I solved similar problems (T)
7. Visit a friend (A)
8. Determine a course of action and follow it (T)
9. Buy myself something (A)
10. Blame myself for being too emotional about the situation (E)
11. Work to understand the situation (T)
12. Become very upset (E)
13. Take corrective action immediately (T)

14. Blame myself for not knowing what to do (E)
15. Spend time with a special person (A)
16. Think about the event and learn from my mistakes (T)
17. Wish that I could change what had happened or how I felt (E)
18. Go out for a snack or meal (A)
19. Analyze my problem before reacting (T)
20. Focus on my general inadequacies (E)
21. Phone a friend (A)

T = Task-oriented coping
E = Emotion-oriented coping
A = Avoidance coping

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