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# Gender and Programming: A Comparison of Program Availability and Participation in U.S. Prisons for Men and Women

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Gender and Programming: A Comparison of Program Availability and Participation in  
U.S. Prisons for Men and Women

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2013

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## ABSTRACT

The current study examines the state of prison programming across the U.S. and whether availability of and participation in prison programs varies by gender and other key factors such as the interaction effects of race and gender, self-identified needs, and facility-level characteristics. Using Morash, Rucker, and Haarr's (1994) study, the last major study comparing prison programming for men and women in U.S. prisons, as a guide, I explore the current state of prison programming using national-level survey data. The results indicate that gender does indeed matter for both prison programming availability and participation with women having more programs available to them and participating in more programs than men. Moreover, the findings suggest that programming might be influenced by both stereotypical gender expectations and gender-responsive principles. The interactions of race and gender were also significant for at least one programming option in every domain examined. Results also indicated that inmates are being placed into programming based on self-identified needs, which is promising. Finally, facility-level characteristics are important factors for both program availability and participation.

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## **CHAPTER ONE: INTRODUCTION**

As long as there have been prisons, there has been hope of redemption for criminals. This hope has been reflected in the goal of rehabilitation, which has always been an important part of American corrections (Blumstein, 1989; Cullen & Jonson, 2011). Oftentimes, the goal of rehabilitation is manifested in prison programming. For example, in the earliest prisons, the program regimen consisted of quiet time and hard labor in order for inmates to reflect upon their crimes and repent (Meskell, 1999). Over time, programs have also evolved from solely focusing on male programming, to adding similar programming from male prisons to female ones (gender-blind policies) to recognizing the needs of prisoners and addressing them, especially due to gender differences (gender-specific policies). Now there are dozens of programming types ranging from vocational training to substance abuse treatment and parenting classes. All are consistent with the aim of rehabilitating offenders. Prison programming in more recent decades has been affected by a number of factors including the population boom in corrections, the economic strains caused by a recessive economy, and a proliferation of research examining the need and effectiveness of programs along with the efficacy of treating men and women similarly. In the sections below, I discuss each of these factors and their influence on contemporary prisons in the U.S.

### **Population Boom**

Since the 1970s, the correctional population has exploded on many levels. Currently, 1 in 31 adults in the U.S. are under some form of correctional supervision

(State Stats, 2009). Eighty-eight percent of this population is male (Glaze, 2010), but the population of women under the correctional system is growing at a much larger rate (Belknap, 2010). The increasing offender population has significantly impacted the correctional system in regards to management, programming, and budgeting issues and has sparked considerable growth in research on corrections.

Even though both men and women have been entering the system at higher rates than ever before, growth by gender in this population is staggeringly different. In 2008, the incarceration rate for men was eight times greater than that of the 1970s, while the incarceration rate for women was almost 20 times greater over that same period (Belknap, 2010). So while it is important to note that the overall incarceration and correctional supervision populations have been growing quite fast, women, specifically, have been entering the system at an alarming rate. Morash and Schram (2002) noted that since 1980, the number of incarcerated women increased over 500%. Additionally, this population increase of female inmates is one that the correctional system does not seem to be adequately prepared for (e.g., management, programming, risk assessments), especially given the differences between male and female offenders (Van Wormer, 2010).

While the rate increase for women coming into the system over the last several decades is more than twice the rate of men (Belknap, 2010), offending patterns for women has remained relatively stable (i.e., minor or non-violent). The majority of women coming into the criminal justice and correctional systems are arrested for larceny, theft, drunk-driving, prostitution, and drug offenses (Chesney-Lind, 2004), and most of them who come into the correctional system are supervised in the community. The

community corrections area, like all other forms of correctional supervision, has become increasingly populated with women. They now make up almost one-fourth (24%) of probationers (Glaze & Bonczar, 2010). Conversely, women comprise a very small portion (6.6%) of the incarcerated offenders in state and federal prisons (Greenfeld & Snell, 1999; Simon & Ahn-Redding, 2005).

The population trends for both male and female inmates seem to be, at the very least, slowing down. In 2009, the Bureau of Justice Statics reported the first decline in overall state prison populations since 1977 (Glaze, 2010; Porter, 2011). Nevertheless, the massive growth that occurred between the 1970s and 2009 had a major impact on the correctional system. More inmates meant that more beds and institutions were needed to house them. In fact, from 1990 to 2005, there was a 43% increase in the number of state and federal adult prisons (from 1,277 to 1,821 facilities, respectively; Kirchhoff, 2010). Prison systems increased their operating costs by over \$20 billion per year from 1986 to 2006 (Spelman, 2006). Meanwhile, constrained state-level budgets increasingly led to cuts in corrections.

### **Economic Crisis**

Currently, we are undergoing a financial recession that affects most aspects of our daily lives. The correctional system is no exception. Significant increases in the correctional population overall, and more specifically the prison population have netted a huge cost for the criminal justice system. As noted by Henrichson and Delaney (2012):

Decades of increasing incarceration and soaring corrections costs have been well documented and are a familiar story to policy makers and the public. Over the last 40 years, the United States has seen a dramatic increase in the use of prisons to combat crime. As a result, incarceration rates have skyrocketed, with the country's state prison population having grown by more than 700 percent since the 1970s (p. 2).

Not only have incarceration rates and the costs associated with those increases soared, there has been little money to pay for them in many state (and federal) budgets. Despite recent decreases in the prison population (Porter, 2011), lawmakers continue to look for ways to cut costs. Still, this is difficult to do at times because lawmakers are also responsible for protecting the public (Henrichson & Delaney, 2012; Porter, 2011).

Cutting costs while maintaining public safety can prove to be a difficult task.

States have reduced their expenditures using different strategies (Porter, 2011). Since approximately 90% of corrections' money goes to prisons, many of the cutbacks have been made to this particular area (State Stats, 2009). For instance, some states are cutting costs by closing prisons (Porter, 2011). Funds for management and programming have also been reduced (Porter, 2011). For states that have cut their operating budgets, these cuts mean that there are fewer resources for the types of programming that may have the potential to reduce recidivism (e.g. substance abuse treatment and mental health programming). This scenario is troubling to some scholars since cutting program resources or cutting entire programs altogether may result in inmates who are less prepared to re-enter the community. This, in turn, is likely to lead to higher recidivism and more offenders being returned to prison (Henrichson & Delaney, 2010). Still, the increasing number of inmates and related expenses has proven quite challenging for the correctional system to manage. While making cuts to prison programming may be one strategy to alleviate some of these budget concerns, having a better understanding of what programs are needed by inmates, which ones are made available to them, and what works in addressing problems and reducing recidivism would result in a more efficient use of limited programming resources.

## **Proliferation of Correctional Research**

Our field has witnessed an increase in corrections-related research over the last several decades (i.e., empirical-based research, meta-analyses of programming, risk assessment measures, gender neutral vs. gender-responsive programming). This is especially true of research concerning women offenders. The growth in this research appears to have mirrored the increase in the number of women entering the criminal justice system. However, despite the growing body of literature, there still remains significantly less knowledge regarding female offenders and their criminality when compared to their male counterparts (Salisbury & Van Voorhis, 2009).

There is still much more that we need to understand and explain about women offenders. It is important to study female offenders because research can and has led to more appropriate 1) policies; 2) programming and services; and 3) management and supervision for women offenders. For example, studying female offenders has led to the development of many gender-responsive programs and policies. Indeed, Bloom, Owen, and Covington (2005) note that policies, programs, and procedures that reflect empirical, gender-based differences can make an array of management practices and staff procedures more responsive and more effective. Therefore, while research regarding women has made significant advances, much more is still needed in order to better understand their lives and experiences before, during, and after incarceration.

Research examining male and female offenders has shown both similarities and differences by gender. Research on background characteristics of male and female offenders and the different criminogenic effects these characteristics have by gender have caused some scholars to argue that there are gender-specific pathways to crime (Daley,

1992; Huebner, DeJong, & Cobbina, 2010; Salisbury & Van Voorhis, 2009).

Furthermore, there has been a call for more gender-responsive programming, which takes gender differences, characteristics, and criminogenic effects into account (Bloom, Owen, & Covington, 2005; Reed & Leavitt, 2000; Salisbury, Van Voorhis, Wright & Bauman, 2009; Van Voorhis, Wright, Salisbury, & Bauman, 2010, Wright, Van Voorhis, Salisbury, & Bauman, 2009). The impact of this research on the correctional system and those working within the system is not fully understood.

The corrections literature contains many studies that address the issue of programming. These studies have typically examined two main themes: needed programming and evaluations of existing programming. Studies have explored what programming is needed for inmates in regards to their risk factors and needs both dynamic and static such as substance abuse, mental health issues, and dependent children (Andrews, Bonta, & Hoge, 1990; Cullen & Jonson, 2011; Cullen, Smith, Lowenkamp, & Latessa, 2009). Additionally, researchers have conducted program evaluations for specific programming options to examine whether or not they are effective in their specific goals and/or lowering recidivism (Cullen & Gendreau, 1989; Cullen & Jonson, 2011; French & Gendreau, 2006; MacKenzie, 2000). Few studies, however, have examined programming availability and participation on a large, national scale (for an exception, see Morash, Haarr, & Rucker, 1994). The last major study to explore programming availability and participation by inmates did so by looking at gender differences and was conducted by Morash and colleagues (1994) using data from the 1980s. While their findings are significant and important for the field because they showed differences in programming due to gender, the results are now several decades

old. Furthermore, as I have detailed previously we have seen tremendous changes in the corrections area, thus it would be informative to understand how programming that is offered to incarcerated men and women has changed, if any, since this influential study.

### **Study Background**

In the current study, I directly build upon the last major study comparing prison programming for men and women in U.S. prisons (Morash et al., 1994). The study which was done by Morash and colleagues (1994) used national-level data to address prison programming and its adequacy for prisoners, especially females. They utilized data from the *Survey of Inmates in State and Federal Prisons, 1986* and the *Census of State Adult Correctional Facilities, 1984* to examine various factors across prisons and inmates. Among them were: gender-housed, size of facility, security level of facility, region of country where facility was housed, race of inmate, programming offered, and participation in programming. Their examination resulted in several important findings about prisons at that time, including among other things, how correctional programming varied between incarcerated men and women.

Morash, Haarr, and Rucker (1994) found notable differences between male and female facilities. As was expected, most women (55.5%) were housed in smaller facilities (those housing 150-499 inmates), whereas 44.3% of men were housed in relatively large facilities (those housing 1,000 or more inmates). Additionally, they found that men tended to be concentrated in maximum security facilities, while women were more concentrated in medium security facilities, again as expected. Morash and colleagues (1994) focused on several types of programming in their study including, education, work and vocational training, medical and mental health services, and other services. Again,



they found notable differences across gender and some differences in programming were due to location and security level of the facility.

In regards to educational programs, Morash and colleagues (1994) found that women were more likely to take part in educational programming compared to men during their imprisonment. Additionally, they found that Hispanics participated in educational programming at a 20% higher rate than did non-Hispanics. Importantly, the researchers discovered that those with less education and no job just prior to incarceration were more likely to participate in education-related programs than their counterparts. Participation in programming also varied by region with the chances of an inmate being in an academic program being 30% higher if the inmate was incarcerated in the Northeast and 20% lower if the inmate was incarcerated in the South when compared with inmates from the West. Finally, they noted that inmates in large, maximum security facilities were more likely to participate in educational programming than those in smaller, lower security facilities. In conclusion, women, those with limited education, Hispanics, and those imprisoned in the Northeast were more likely than their counterparts to participate in educational programming.

Work and vocational training program participation was somewhat similar to that of education programming. Morash and her colleagues (1994) noted that incarcerated women were more likely to have work assignments than were incarcerated men (75% vs. 65%, respectively). The researchers stipulated that this finding might reflect common gender stereotypes because a majority of the work assignments were located in facilities and included cleaning, cooking, and other similar activities. Furthermore, women were disproportionately assigned to janitorial and kitchen work, while men were

overrepresented in farm and forestry, maintenance, and repair work assignments. The researchers also found that maximum and medium security facilities for both men and women were more likely to offer vocational programming than minimum security facilities (Morash et al., 1994).

The findings regarding mental and medical health services are noteworthy as well. The researchers found that women were slightly more likely to report receiving medical services in prison than men. Women were also twice as likely to receive psychotropic drugs in prison as men, even after taking alternative explanations into account (i.e., mental health history indicators, facility characteristics, and offender characteristics). Additionally, inmates in larger facilities were more likely to receive medical care than those in smaller facilities, although they were less likely to receive psychotropic drugs. Inmates in Northeastern facilities were more likely to report receiving medical care, whereas inmates in Midwestern facilities were the least likely to receive psychotropic drug treatments compared to inmates in other regions of the country. Finally, inmates in maximum security prisons were more likely to receive psychotropic drugs than those in other security levels for both males and females (Morash et al., 1994).

Women were also more likely than men to participate in 'other' services. Morash and colleagues (1994) noted that more women than men had contact with an attorney after incarceration. They also found that parental counseling was almost exclusively used in women's facilities, which again might highlight stereotypical treatment. Both men and women in prison are likely to be parents to dependent children (Glaze & Marushak, 2010); however, parental counseling was mainly found in women's prisons, emphasizing inmates' roles as mothers (Morash et al., 1994). It is interesting to note, however, that for

all programming categories (education, work, medical and mental health treatment, and other services) women were more likely to participate or receive services than their male counterparts (Morash et al., 1994).

The Morash study suggested several important implications for researchers and policy-makers. First, there is very low participation on the part of both incarcerated men and women in work, vocational training, mental health programs, and parenting programs. Second, females are more likely than their male counterparts to participate in these types of programming, even when it is available to both men and women. Third, this study also highlighted the stereotypical nature of treatment for women, especially in prisons. They noted that women's work in prisons was often gendered, and that prison work mirrored traditional society's expectations of women's work (i.e., domestic work, cleaning, cooking). They stated, "the message conveyed by the type of work available in the 1980s and the symbolism of more women than men working for no pay, is not subtle" (Morash et al., 1994, p. 218).

Additionally, there was minimal programming for fathers in regards to parental programs despite the fact that there are many men in prison who are fathers. Also, women were disproportionately more likely to be given psychotropic drugs while in prison, which Morash and colleagues (1994) says reflects what is happening in the larger U.S. context. Women are more likely to be medicated in the general society in an attempt to control their aggression (Baskin, Sommers, Tessler, & Steadman, 1989). Aggressive males in prison tend to be handled differently than aggressive females, with males being more likely to receive punishment or restrictions while women are more likely to be placed in mental health wards (Baskin et al., 1989). Therefore, attempts to

medicate more women may be an effort to exert control over them or to address their gender inappropriate aggressiveness (Baskin et al., 1989; Morash et al., 1994). At the time, Morash's (1994) national study was extremely important to those scholars focusing on women in corrections. It provided a much needed focus on correctional programming for women prisoners and many of their findings remain relevant and worthy of further examination today.

### **Current Study**

It has been more than twenty years since Morash and colleagues (1994) published their national-level examination of prison programming in the U.S. Since that time, the prison population has greatly expanded and new prisons have been built. During this time there have also been major constraints placed on correctional budgets, and there has been an increase of research on correctional programming, focusing specifically on what works for offenders. The culmination of these factors has had a great impact on the correctional system in general, and prisons specifically. Given the significant changes in the correctional system over the last few decades, it is important to discern whether anything has in fact changed since Morash and colleagues' (1994) national review of correctional programming.

The current study seeks to fill this void and examine programming availability and participation at the national level using two separate, but related studies. While my study uses the original study as a guide, the current study builds upon the earlier work by exploring the current state of programming in prisons and whether the availability of and participation in this programming varies by gender and/or facility characteristics (i.e., size, security, and location). I examine certain types of programming, which might be

viewed as stereotypical, and their offerings and how participation rates vary directly by gender, or by the simultaneous effects of race and gender. I also examine if participation in programming is guided by the self-identified needs of inmates.

To explore programming availability and factors that may influence or predict availability, I use data from the *Census of State and Federal Adult Correctional Facilities, 2000*. I also use the *Survey of Inmates in State and Federal Correctional Facilities, 2004* to look at program participation and determine what factors might influence the participation of inmates in different types of programming. Additionally, I link facility characteristics from the *Census of State and Federal Adult Correctional Facilities, 2000* to the *Survey of Inmates in State and Federal Correctional Facilities, 2004* in an effort to control for these characteristics in the analysis of program participation.

In the chapters that follow, I outline the plan for my study. In Chapters 2 through 4, I provide a review of relevant literature in regards to the prison system, rehabilitative efforts, women's traditional treatment by the system, and how gender stereotypes affect treatment. More specifically, in Chapter 2, I give a brief overview of the U.S. prison system. This includes a brief history of American prisons, rehabilitative efforts utilized by the correctional system, and a general overview of what we think works in regards to prison programming. In Chapter 3, I focus specifically on several issues concerning women and corrections. I discuss their historical treatment, characteristics of women in prison, their gendered pathways into offending, and their identified gendered needs. In Chapter 4, I address the importance of gender roles and expectations of gendered

behavior for both men and women in our society and how these expectations continue to affect them in the correctional system.

In Chapter 5, I discuss the data and methods that will be used to complete this study. First, I describe the *Census of State and Federal Adult Correctional Facilities, 2000*, why it is useful to answer questions about program availability, and my plan for data analysis. Second, I lay out a plan for answering my research questions regarding program participation through the utilization of the *Survey of Inmates in State and Federal Correctional Facilities, 2004* dataset. In Chapter 6, I present the findings of my data analysis from both studies and address each of the research questions concerning programming availability and participation. Finally, in Chapter 7, I highlight the key findings from both of my studies and discuss implications for correctional policies and further research.

## **CHAPTER TWO: HISTORY OF PUNISHMENT AND THE EMERGENCE OF THE AMERICAN PRISON**

*From its inception in the 1820s, the American prison was meant to be more than a sturdy cage of high, thick, stone walls in which the wayward could be restrained. The prison's founders called their invention a 'penitentiary,' a label that embodied their optimism that this carefully planned social institution had the power to reform even the most wicked spirit (Cullen & Gendreau, 1989, p. 23).*

In this chapter, I describe the history of punishment and the emergence of the prison system in America. I begin by describing colonial America, where brute force was used because the need for institutions had not yet been established. Next, I examine the progressive Jacksonian and Reformatory eras when penitentiaries and reformatories were first established. Additionally, I examine prisons and important changes in the 20<sup>th</sup> century, concluding with the current standing of American correctional facilities, rehabilitative programming, and what we think works in regards to programming. Throughout this chapter, I focus on the ideas and goals of punishment for each time period and how punishments, particularly prisons, were utilized to fulfill these goals.

### **History of Prisons**

Throughout the history of corrections, neither males nor females fared well, with long histories of abuse, neglect, and less than humane treatment characterizing the system (Belknap, 2003; Butler, 1997; Morash & Schram, 2002; Rafter, 1990). Considering much of crime is “predominately a ‘man’s game’” (Salisbury & Van Voorhis, 2009; p. 541), a great deal of the history of corrections is male dominated, therefore, historical descriptions of correctional time periods are dominated by the treatment of male

offenders and prisoners. These different punishment eras are not isolated periods, but instead represent shifting perspectives and evolving practices in corrections. These different correctional eras and prisons include the Colonial Era, the Penitentiary Era, the Jacksonian Era, the Reformatory Era, 20<sup>th</sup> century corrections, and modern prisons. Each of these will be discussed below.

### **Colonial Era**

Soon after the end of the Revolutionary War, states began assuming responsibility for the punishment of felons (Rafter, 1985). The punishments imposed on early criminals were typically corporal punishment and public humiliation (Kirchhoff, 2010; Meskell, 1999; Rothman, 1995). These punishments were meted out in accordance with early colonial criminal law. They have been described as being a mix of religion, English barbarity, and pragmatism (Meskell, 1999). When individuals committed crimes, their punishments could include corporal punishments such as whipping, flogging, branding and maiming, being gagged, or being placed on the ducking stool (Meskell, 1999, Rothman, 1995). Alternatively, their punishments could have included public humiliation such as public penance, being placed in the stocks or the pillory, or being marked with the scarlet letter (Meskell, 1999; Rothman, 1995).

These types of punishments were effective for several years, however, toward the end of the 1700s, there was a dramatic population increase in America. Up to this point, there had been no need to institutionalize convicts because their population had been so small (Meskell, 1999). After the population grew, however, the traditional punishments used by communities across American lost their effectiveness. Public punishments, which



had been acceptable and effective in smaller townships and communities, were no longer working in the larger, more transient areas that replaced them (Meskell, 1999).

At that time, America was also experiencing a change in the way the public viewed criminals and punishments. This change was brought about by the emerging Enlightenment movement across Europe. Americans were quite receptive to this new movement (Meskell, 1999; Schneider, 1979). Out of this Enlightenment period emerged two scholars who had a significant influence on our views of criminal sanctions, Jeremy Bentham and Cesare Beccaria. Jeremy Bentham noted that the purpose of laws was to prevent mischief and that while punishment in and of itself was inherently evil, societies must use it out of necessity to defend against other evils (Bentham, 1948). Bentham criticized the English code for its barbarism and capriciousness (Meskell, 1999). Furthermore, he, like Beccaria, believed that individuals rationally choose to commit crime. He also believed that the pains of imprisonment were sufficient to deter potential offenders due to the severity of prison life (Waid & Clements, 2001). Similarly, Beccaria argued that while offenders were rational, the source of crime lay in the disorganized, arbitrary and harsh criminal codes of the day (Meskell, 1999). He believed that if punishments were certain, swift, and severe enough they would deter criminals from action. Beccaria maintained that deterrence could be achieved if governments clearly defined punishments for law violations and made those punishments known to the public (Meskell, 1999). More to the point, imprisonment was seen as a good method of achieving deterrence.

In sum, multiple factors led to the decline of public corporal punishments: the Enlightenment movement in Europe, the growing population, and the work of Bentham,

Becarria, and other like-minded individuals. Between 1780 and 1850 there was a drastic decline in the use of corporal punishments, and by 1860 these public rituals were successfully redefined as cruel and came to be viewed as a politically illegitimate infliction of pain (Ignatieff, 1981). Around this same time, a new movement requiring a different approach to punishing criminals was emerging, the penitentiary.

### **Reform Efforts: The Penitentiary, Jacksonian and Reformatory Eras**

In 1786, Pennsylvania drafted a new criminal code that did away with many of the public corporal punishments and the liberal use of capital punishment (Meskell, 1999; Vaux, 1872). The newly devised code instituted a regimen of labor to punish crimes (Meskell, 1999; Vaux, 1872). New York passed a similar code in 1796 (Meskell, 1999) and other states eventually followed suit as well. As a part of the new criminal codes, imprisonment became the foremost penalty for felonies and other serious crimes (Ignatieff, 1981), and in 1790, America, or more specifically Pennsylvania, embarked on an extraordinary experiment: the penitentiary system (Kirchhoff, 2010; Meskell, 1999). Prisons began the practice of housing convicts in separate cells. While this was not original to America, it represented a radical new method for punishing offenders (Meskell, 1999; Schneider, 1979). All aspects of the prison were geared toward deterring criminals through humane punishment (Meskell, 1999; Rothman, 1971; Schneider, 1979; Vaux, 1872).

In large part under the influence of Quakers, Pennsylvania is credited with establishing the first penitentiary in this country at the Walnut Street Jail in 1790 (Roth, 2006; Waid & Clements, 2001). The Quakers believed that absolute solitary confinement and labor routines were necessary so that inmates would not be distracted, they would

have adequate time to reflect on their actions, and could learn to become hardworking individuals, all the while separating the prisoner from all forms of corruption – hence the need for solitary confinement (Roth, 2006; Rothman, 1971). The Walnut Street Jail contained 16 singular cells to house criminals along with common area spaces as well (Meskell, 1999; Schneider, 1979). The administrators of this facility worked to separate the different classes of people, especially the sexes (Meskell, 1999). To deter and rehabilitate offenders, the Walnut Street Jail imposed a regimen of mandatory labor and solitary confinement along with religious indoctrination (Ignatieff, 1981; Kirchoff, 2010; Meskell, 1999) so the inmates could learn the value of work and have quiet time for penance and solace. New York followed Pennsylvania and established their own penitentiary in 1796, and the beginning successes of both the Pennsylvania and New York models influenced many other states into adopting similar types of facilities (Meskell, 1999).

Despite their early successes and influence on other state correctional systems, the first penitentiaries ultimately failed (Meskell, 1999). The Walnut Street Jail, for example, experienced a terrible wave of uprisings and attempted escapes, as well as inmates who suffered from mental breakdowns and physical illnesses (Meskell, 1999; Waid & Clements, 2001). By the time the Walnut Street Jail had closed its doors in 1835, it was described as being dilapidated and poorly maintained (Meskell, 1999).

The fall of the first penitentiary system gave way to a new movement, the Jacksonians, beginning in the 1820s. The Jacksonians built new penitentiaries, the first insane asylums, and the first reformatories in an effort to move forward from their previous failed attempts in the correctional system (Rothman, 1980). This group of

reformers was determined to figure out why they had failed and define clear ways to move ahead in an effort to avoid the same mistakes (Meskell, 1999). Additionally, criminals were not merely born but, according to the Jacksonians, were influenced by society and the social problems within it (Meskell, 1999; Rothman, 1980). Accordingly, Jacksonians believed that offenders were individuals who had been led astray (Meskell, 1999). New penitentiaries were needed to change the mindset of criminals and teach them the proper mental attitudes of a “good” citizen. One of the main ways in which the Jacksonians felt rehabilitation could be achieved was through isolation. This was consistent with the early Pennsylvania penitentiary model (Schneider, 1979; Smith, 2006) and became a mainstay in the penitentiaries developed during this era and was used in both the Pennsylvania prison system as well as the newly developed prison system in New York.

The Pennsylvania penitentiary worked to address the problems of the past in an update to their system with the construction of the Eastern Penitentiary at Cherry Hill. Pennsylvania still remained under the solitary system where inmates worked in their cells alone – again causing significant occurrences of mental breakdowns and physical illness, yet the revised approach did cut down on the rioting and uprisings (Ignatieff, 1981; Meskell, 1999; Smith, 2006; Waid & Clements, 2001). Nevertheless, solitary confinement became a common component of the penitentiary model across the U.S. in the first half of the 19<sup>th</sup> century (Smith, 2006). The philosophy of rehabilitation through isolation and labor had an enormous impact on the whole country (Smith, 2006). Throughout the U.S., inmates were expected to utilize solitary confinement to turn inward, build a relationship with God, repent their sins (crimes), and eventually return to

society as a renewed moral, Christian citizen (Smith, 2006). However, this system was revealed to be as ineffective as its predecessor.

During this time period, while Pennsylvania was imprisoning criminals through a segregated system of complete isolation, New York developed a somewhat different system for housing inmates. Indeed, one of the first penitentiaries built under the Jacksonian influence was the Auburn Penitentiary in New York (1816). It originally adhered to the policy of solitary confinement without labor, however, because of rampant mental illnesses, Auburn evolved into what was referred to as a congregate system. The congregate style penitentiary involved inmates being isolated in their cells at night and working together with other inmates in common shops or common areas during the day – all under a strict rule of silence and the forbiddance of eye contact (Bosworth, 2003; Ignatieff, 1981; Meskell, 1999; Schneider, 1979; Smith, 2006). In fact, the congregate system was established as a direct response to the failings of the early Pennsylvania model (Waid & Clements, 2001), and even though the New York model was very similar to the Pennsylvania one, they were often viewed as rivals of one another due to their differences, the main one being the amount of isolation (Rothman, 1971). Despite the rule of total silence, inmates still had contact with others throughout the day and advocates believed this was a more humane form of punishment over that of complete isolation.

By the end of the Jacksonian era, neglect of inmates was rampant and the custodial care received by the inmates was typically inhumane care (Rothman, 1980). During this era, prison wardens and administrators enjoyed mostly unchecked freedom to operate and manage facilities completely at their discretion (Goodstein & MacKenzie, 1989). This level of discretion, however, resulted in multiple failures. In 1867, Enoch

Wines and Theodore Dwight drew the American public's attention to the failures of the penitentiaries (Meskell, 1999). Wines and Dwight revealed to the public the actual state of penitentiaries at the time. Penitentiaries were inhumane, dirty, and odorous, relied heavily on corporal punishment for discipline, and were ineffective in both their deterrent and rehabilitative efforts (Meskell, 1999). As with the previous era, critics became numerous and the era ended in acknowledgements of failure.

A new reformatory movement rose from the ashes of the Jacksonian era. This new movement was one that condemned all forms of corporal punishment and pushed for good behavior through incentives, rather than brutal tortures (Rafter, 1990). Its foundations were in Alexander Maconochie's methods and principles for crime and punishment which advocated that prisoners be rewarded for good behavior through the use of privileges (e.g., reduced sentences) and were in part adopted by the National Prison Congress in its first national meeting in 1870 (Meskell, 1999; Rafter, 1985). At its first meeting, the National Prison Congress declared that reformation was the purpose of penal treatment (Rafter, 1985). Moreover, the Congress felt that there was a need for prisoner classification made on the basis of a mark system that rewarded good behavior and inmate reformation through the use of sentence reduction and other privileges (Meskell, 1999; Rafter, 1985). This approach became the basis for systems such as indeterminate sentencing and parole. For the next 100 years, until the 1970s, the dominant themes of prison management, treatment, and policies included reformation and rehabilitation (Blumstein, 1989; Rothman, 1980; Rafter, 1985), yet the methods for achieving them did vary over that time.

The Reformatory Era moved forward at the conclusion of the Civil War and lasted from about 1870 to 1910 (Rafter, 1990). In addition to the use of a marks system and incentives for good behavior, this time period was also influenced by progressives who wanted to understand and cure crime, delinquency, and insanity using a case-by-case method (Rothman, 1980). Rehabilitation was also supported during this time period by providing inmates with remedial education, vocational, and recreation programs (Rafter, 1985). The new prisons established during this era were called reformatories. These institutions typically targeted adult offenders under the age of 25 or 30, who reformers believed could be rehabilitated (Rafter, 1985). The Elmira Reformatory, which opened in 1876 in New York, was the first reformatory built in America (Pisciotta, 1983). The opening of reformatories were particularly important to the progressive movement, since reformers believed that these institutions were all that stood between barbarism and civilization itself; as a result, the penal system had to do everything in its power to rehabilitate offenders in a humane way (Rothman, 1980).

During the Reformatory era, progressives hoped to overcome the Jacksonians' failure by identifying and fixing the problems of the penitentiary model. Progressives became convinced that penitentiaries failed due to faulty implementation rather than faulty philosophies (Rothman, 1980). Reformists worked to achieve rehabilitation in reformatories using different methods. For example, marks were used to reward good behavior and as inmates passed through different phases of prison, they would eventually earn what is called a "ticket-of-leave" and an eventual release from prison into what is now referred to as parole (Rothman, 1980). This held promise that convicts could be supervised in the community rather than being imprisoned because they posed less of a

risk to society. Additionally, the first federal prisons were established (1891) in Leavenworth (Kansas), Atlanta (Georgia), and McNeil Island (Washington) during the reformatory period (Roberts, 1997). Indeed, this era brought forth many progressive changes in the corrections system in the U.S. Still, not all regions of the country were making progressive strides during this time. The South utilized a leasing system for its inmates that neither cared nor focused on rehabilitation or other correctional goals of the North, but rather was concerned with rebuilding the South after the Civil War using prison labor to replace slave labor (Johnson, 2000; Rafter, 1990)<sup>1</sup>. Despite the leasing system of the South, the North's correctional system continued to evolve and focus on rehabilitation.

### **20th Century Corrections**

For the first half of the 20<sup>th</sup> century, the case-by-case approach that was established during the Reformatory era became known as the medical model and rehabilitation continued to be supported as the primary goal of corrections (Bosworth, 2003). The medical model was premised on the idea that the offender was somehow “damaged” and could be rehabilitated through individualized treatment (Blumstein, 1989; Bosworth, 2003). The medical model and its prescription for individualized treatment

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<sup>1</sup> Southern states developed the southern leasing system for prisons shortly after the conclusion of the Civil war and penal servitude quickly became a replacement for slavery after the war with prisoners being leased out to prison farms (Johnson, 2000; Rafter, 1990). These prison farms looked similar to plantations of the past, except prisoners replaced slave labor (Johnson, 2000). Prisoners on these farms had a relatively short life expectancy (less than 10 years) due to egregious conditions (i.e., brutal beatings, withholding of food and water, and no breaks; Johnson, 2000). While there are still a few in operation today (which are deemed tame compared to those of years past), the horrendous treatment of inmates along with the corruption of prison officials lead to the destruction of these lease systems (Flanagan, 1989) and by 1960 these types of prisons had, by and large, fell out of favor in the South (Johnson, 2000).



became the principle reformatory mechanism of American corrections. It replaced reform characterized by hard labor/work used in previous eras (Flanagan, 1989).

By the 1960s, there was still a general belief that correctional treatments could rehabilitate offenders. The newer model used in the 1960s was referred to as the rehabilitative model, and it allowed for a plethora of programs for prisoners and evaluation projects designed to assess the effectiveness of such programs (Goodstein & MacKenzie, 1989). Still, while the rehabilitative model was emphasized by the public and policy makers, order maintenance was and continues to be the primary goal inside prisons for correctional officers and officials (Craig, 2004; Sykes, 1958). The struggle between order and rehabilitation in correctional facilities is often considered a conflict of dual goals. Clemmer (1940) illustrated these goals when he noted the goals of prison were “to provide security standards to safeguard society and to provide the most efficient rehabilitation of prisoners” (p. 28). Even though rehabilitation typically fell second after order maintenance and security, this era was still considered to be one focused on rehabilitation over all other goals.

Another important development within prisons started in the 1960s as well: the prisoners’ rights movement. The prisoners’ rights movement was a broad scale effort to redefine the status – moral, political, economic, as well as legal – of prisoners in our democratic society (Jacobs, 1980). Until this time, the federal courts had adhered to a “hands off” approach toward prison issues. However, in the 1960s, courts began hearing these cases. The first cases brought before the courts dealt with the religious freedom of Black Muslims in prison (Jacobs, 1980). These cases paved the way for other prison cases of denied rights and abuses, which continued for many years. By the 1980s, though,

this movement had waned, and as noted by Jacobs in 1980, “the luster of the prisoners’ rights movement seems to be fading. The image of the prisoner as “hero, revolutionary, and victim is disappearing” (p. 439). Even though this movement has seemingly died out, there are still cases filed each year against perceived and real prison injustices.

### **Modern Prisons**

Beginning in the early 1970s, voices critical of rehabilitation increased and the focus on “individualized treatment” collapsed. Several factors contributed to the downfall of rehabilitation, including Martinson’s (1974) report that “nothing works” in regards to rehabilitative programming, dramatically increasing crime rates, concerns with disparate treatment across offenders, and the massive increase in the correctional population. In the face of these concerns, the public and policymakers began calling for policies to “get tough” on crime (Cullen, Fisher, & Applegate, 2000). In the late 1960s and early 1970s, it is fair to say that the public had become disillusioned with the idea of rehabilitation (Cullen & Jonson, 2011; Cullen et al., 2000), and they had become convinced that nothing could be done to make rehabilitation work (Cullen & Jonson, 2011). This mindset gave rise to a strong movement to change both the philosophy and control of imprisonment policy (Blumstein, 1989). The prison system became more concerned with goals of deterrence and incapacitation at this time and much less concerned with rehabilitation.

Even though there was a redefinition in the goals of corrections in the 1970s and 1980s away from rehabilitation and toward incapacitation and deterrence, and a decreasing support for rehabilitation among policymakers and the public, the public by and large still remained supportive of rehabilitative efforts (Cullen & Jonson, 2011;

Cullen et al., 2000). However, politicians typically only act on the public's call for punitive sanctions (i.e., longer sentences; mandatory sentences; three strikes policies; Goodstein & MacKenzie, 1989) and rarely do they act on the public's call for offender rehabilitation. As a part of the "get tough" on crime movement of the 1970s and 1980s, many new policies and changes were enacted in correctional and prison systems, most of which were largely punitive.

Policymakers called for many changes during this "get tough" period. One such call was for determinate sentencing and an emphasis on deterrence, retribution, and incapacitation over the previously preferred goal of rehabilitation (Blumstein, 1989). This call was consistent with the focus on legal factors (i.e., offense, prior criminal background). Another major change was that control over sentencing policy shifted from the rehabilitation professionals (e.g., individuals working within the correctional system) to legislatures and these legislatures enacted further punitive measures (Blumstein, 1989; Cullen & Gendreau, 1989). During the 1980s, in particular, the number of people under the supervision of corrections began significantly expanding (Feeley & Simon, 1992). Feeley and Simon (1992) note what they label as a "new penology" which emerged during the late 1980s and early 1990s that is more concerned with being able to identify, classify, and manage inmates based on risks than with treating or rehabilitating offenders. This new correctional movement worked to identify and manage unruly groups and maintain order rather than being concerned with providing programming or interventions for individuals (Feeley & Simon, 1992; Goodstein & MacKenzie, 1989). As Bottoms (1999) notes, maintenance order never just "happens" in prisons and there is nothing that

guarantees its continuance. Therefore, this perpetual concern with maintaining order and security is justified within prisons.

The move toward deterrence and incapacitation has greatly impacted the correctional system. Specifically, the deterrent and incapacitative effects of the criminal justice system have seemingly had a major impact on the prison population. Most notably, there has been a major increase in the population of incarcerated offenders who are more likely to be imprisoned and are more likely to receive longer sentences due to the “get tough” policies (Tonry & Farrington, 2005). Indeed, the U.S. currently has the highest imprisonment rate of most Western, industrialized countries with a rate exceeding 700 per 100,000 U.S. citizens (Tonry & Farrington, 2005). Some scholars have credited the prison growth over the last few decades as a contributing factor in the decreasing crime rates (Langan, 2005), yet Tonry and Farrington (2005) note that other countries have experienced decreasing crime rates as well (i.e., Canada, other Western nations) without experiencing the exponential growth of their prison populations. Thus, the massive influx of prisoners in the U.S. may or may not be contributing to the lowering crime rates.

The term “late modern” prison has been used to highlight the rapidly changing social context in which the prison currently exists (Liebling & Arnold, 2004). One major addition to the modern prison system is the super-maximum (supermax) facility. These relatively new facilities typically include solitary confinement 23 hours per day, continual high-tech surveillance, little to no social contact, intercom systems which are relied on heavily for communication between inmates and correctional officers, and access to limited programming (Smith, 2006). Currently, researchers are examining the impact of

supermax facilities on the mental and physical health of its occupants. Some believe that the effects of these prisons, with their use of solitary confinement, will yield similar effects seen with the early penitentiaries (Smith, 2006). Still, there is not yet enough evidence to make this determination. Nevertheless, research has shown that the public, while supportive of a punitive system, also supports rehabilitative efforts, intermediate sanctions, and restorative justice (Cullen et al., 2000).

Currently, with the budget problems and economic constraints, policymakers are searching for new approaches to punish offenders that also rehabilitate them, in an effort to save money and safeguard society (Henrichson & Delaney, 2012; Porter, 2011). In this regard, evidence-based research has emerged in recent decades (Andrews et al., 1990b; Cullen & Gendreau, 1989; MacKenzie, 2000). Still, the impact of this research on correctional policy remains largely unknown. In the next section I explore the goal of rehabilitation, describe common programming in today's prisons, and discuss evidence-based research and what findings have shown us in regards to effective elements of programming.

### **Rehabilitation and Correctional Programming**

*American prisons, perhaps more than those of any other country, have stood or fallen in public esteem according to their ability to fulfill their promise of rehabilitation (Martinson, 1974, p. 22).*

Throughout much of our history in corrections, the United States has generally supported the notion of rehabilitation and treatment for offenders. The purpose of corrections has been to improve the offender's life and reduce future criminal involvement. As succinctly stated by Cullen and Jonson (2011): "We were the nation, after all, that had *invented the penitentiary*, built *reformatories*, created a juvenile court to

*save wayward children*, and transformed prisons into *correctional* institutions where *therapeutic communities* could envelop offenders” (p. 293, italics in original). Although rehabilitation has been the major goal throughout much of the history of corrections, whether or not it is effective has been a central question for the corrections area, particularly after the publication of Martinson's 1974 report. The question of whether or not we can effectively rehabilitate offenders remains an important question for us even today.

In 1974, Robert Martinson published his controversial report, *What Works?* This report, based on 231 program evaluation studies conducted between 1945 and 1967, left the correctional world with one major implication: rehabilitation efforts are *not* effective (Martinson, 1974). Martinson (1974) even went so far as to say: “With few and isolated exceptions, the rehabilitative efforts that have been reported so far have had no appreciable effect on recidivism” (p. 25). He found no noticeable differences in the effects on recidivism for academic or educational programming, vocational education or social skills programming, individual or group counseling, or medical treatments administered in prisons. Additionally, Martinson (1974) noted that programs in non-institutional settings were no more effective than those in institutional settings. Even when positive effects were found (i.e., skill development programs, intensive supervision probation), Martinson questioned the validity of the program, treatment, or the evaluation study. He concluded by noting that some programming may be effective, but that our evaluations of these programs are too limited or too flawed to be able to tell (Martinson, 1974). He noted his results “give us very little reason to hope that we have in fact found a

sure way of reducing recidivism through rehabilitation” (Martinson, 1974, p. 49) – this had alarming implications for the corrections system.

Martinson’s (1974) essay introduced a number of questions about the validity of rehabilitative programming when he implied that “nothing works.” In his work, Martinson recognized that his results might partially be explained through poorly conducted research studies or treatment programs which were inadequately implemented (Cullen & Jonson, 2011; Martinson, 1974). Therefore, rehabilitative programming may work. However, the programs that were being utilized or the studies that analyzed these programs might have been flawed in some way. Even though Martinson (1974) recognized these limitations, his essay and its allegation that nothing works seemed to disseminate to all levels of society – academics, policy makers, and the general public, alike. It has been argued that people used Martinson’s research to justify their opinions (i.e., conservative political reactions to the disorder of the 1960s, reactions to liberals’ failure; Andrew et al., 1990b) rather than to inform policies or correctional treatments. Furthermore, “the doctrine of nothing works is best seen not as an established scientific truth, but as a socially constructed reality” (Cullen & Gendreau, 1989, p. 30), meaning people have used this doctrine to justify their opinions about correctional programming even though it may not be empirically accurate. Later research has shown positive results in correctional programs (e.g., evidence-based research), but the lingering supposition of nothing works remains. Cullen and Jonson (2011) observe that, “now more than three decades after Martinson’s essay, we should recognize his study for what it was: an important and sobering reminder that correctional treatment is a difficult enterprise

fraught with many failures” (p. 298). While there are failures in correctional programming, there is also some success.

Martinson (1974) was certainly not the first researcher or historian to question the effectiveness of correctional intervention on offenders’ lives, nor will he be the last. Still, researchers note that rehabilitation is possible and feasible (Andrews et al., 1990b; Cullen & Jonson, 2011). Moreover, even though the support of rehabilitation has declined since the 1960s, it has been noted the majority of the public rejects the “nothing works” doctrine and still strongly supports rehabilitation (Cullen & Jonson, 2011; Cullen et al., 2000; Goodstein & MacKenzie, 1989), particularly because they believe that rehabilitating offenders is often the “right thing to do” (Cullen & Jonson, 2011). Furthermore, new techniques of evaluating programs and treatments such as meta-analysis and evidence-based research have been developed and have shown that rehabilitative programming can work with specific offenders (i.e., high risk) and in certain programming areas (i.e., education, vocation). Recent research has worked to identify both strengths and weaknesses to develop more effective interventions (Cullen, Smith, Lowenkamp, & Latessa, 2009).

Both meta-analyses and evidence-based research which emerged in the 1980s have shown that correctional treatment can be effective and have noted to a degree which aspects or elements of programming are more effective than others (Cullen & Gendreau, 1989; Cullen & Jonson, 2011; Cullen et al., 2009; French & Gendreau, 2006; Gendreau, Little, & Goggin, 1996; Lipsey, 1992; Lipsey & Wilson, 1998; MacKenzie, 2000). Extensive reviews of evidence-based research have noted several elements of effective programming: interventions based on social learning or behavioral principles,



interventions which are structured, interventions which seek to build human capital or develop usable skills, and interventions which address multiple problems (Cullen & Jonson, 2011; MacKenzie, 2000). Also, vocational, educational, and multi-component programs have been found to reduce recidivism as well (Cullen & Jonson, 2011; MacKenzie, 2000). While this area of research has shown promising approaches for prisoners, not all of these programming types have been implemented across facilities. The most common programming types will be discussed below.

### **Common Programming Types**

Education and work programs, along with drug treatment programs are among the most popular types of correctional programming and can be found in virtually every state prison system (Cullen & Jonson, 2011). Education programs consist of basic education programs, GED classes, special education, and occasionally college-level courses. Work programs, which typically consist of jobs within the facility, were used in the first penitentiaries in an effort to rehabilitate inmates. More contemporary prison work is typically classified into three principle activities: prison industry, institutional maintenance and service tasks, and agriculture (Flanagan, 1989). Work programs are common because they are seen as reducing operating costs, and therefore have economic appeal, reducing idleness among prisoners and giving them work skills (Flanagan, 1989). As Clemmer (1940) noted, “most inmates know that idleness is not only boring and conducive to greater unhappiness, but they also know that unless they keep busy mentally and physically they are possibly headed for a breakdown” (p. 280). Additionally, there is also the belief that keeping inmates busy will limit the amount of misconduct problems in the institution (Roberts, 1997). Therefore, even though it has been stated that prisoners do

not generally want to work (Flanagan, 1989), these programs are very popular across the United States and approximately one-half of all inmates have a work assignment at some point during their incarceration (Stephan, 2008). The most common work assignments consist of facility support (e.g., office administration, food service, and building maintenance) followed by assignments to public works (Cullen & Jonson, 2011).

Education programs are also very common across the U.S. with Americans spending approximately \$493 million on educational programs in prisons each year (Corrections Compendium, 2008). Over 90% of state prisons and basically all federal prisons offer some form of educational programming. Approximately 8 in 10 state prisons and almost all federal prisons offer some form of basic education (Harlow, 2003). Vocational education programs mix work and education. These programs, along with GED preparation courses, are the most prevalent education-type programs in correctional facilities (Harlow, 2003). Currently, vocational education programs are found in about half of all state prisons and most federal prisons (Cullen & Jonson, 2011; Harlow, 2003). Approximately 26% of state inmates attain their GED while incarcerated (Harlow, 2003). Moreover, an estimated one-third of state and federal prisoners are enrolled in training programs that aim to equip inmates with work skills that can enhance post-release employment opportunities (Harlow, 2003). Prisons often have programming that continues into the community as well, such as work-release and education-release programs (Cullen & Jonson, 2011). Education and vocational education programs and participation in these programs by inmates may decrease disciplinary problems, increase prosocial activities in communities, and reduce recidivism (Cullen & Jonson, 2011).

Not only are work and education programs common in prisons, drug treatment programs are found throughout correctional systems as well (Bureau of Justice Statistics, 2008; Cullen & Jonson, 2011). Approximately 74% of state and federal prisons offer drug treatment in some form (BJS, 2008). Drug treatment programs are especially important considering that one of the main contributors to the escalating corrections population is the war on drugs, moreover, the impact felt from the war on drugs has been disproportionately felt by people of color and women, particularly women of color (Bush-Baskette, 2004), with many more females being brought into the system as a result (Kruttschnitt & Gartner, 2003; Morash & Schram, 2002). Additionally, many inmates report being under the influence of either alcohol or drugs while committing the offense for which they were incarcerated (Mumola, 2000). Offenders also report a pattern of substance use and bad behavior throughout their lives (Mumola, 2000). It is no wonder then that drug treatments are common and that many inmates (approximately 40% in state and federal prisons) participate in these programs (BJS, 2008). Common aspects of these programs include self-help and peer counseling, awareness and education classes, professional counseling, detoxification, and residential facility or unit (Cullen & Jonson, 2011; Mumola, 2000). Cullen and Jonson (2011) note that effective elements of these programs include intensive, long term, structured, multi-dimensional programming that is followed up with aftercare services. Again, these programs are found in many facilities across the country and while they are prominent, there still may not be enough programs to meet the demands of the inmate population, and many inmates in need of these programs may not be able or willing to participate in them (Welsh & Zajac, 2004).

Although other programs are found throughout the corrections system (e.g., life-skills, religious, etc.), work, education, and drug treatments are the most common. These programs work to rehabilitate offenders and work to reduce their recidivism upon release. They are based on rehabilitative goals such as providing legitimate work opportunities, fostering commitment and informal social control, and enhancing rehabilitation (Cullen & Jonson, 2011). Other programming such as treatments for sex offenders, parenting programs, and mental health services are also utilized in correctional settings to help rehabilitate offenders. Cullen and Jonson (2011) maintain that the public supports rehabilitative goals even if there is not enough money in the current budgets to sustain these programs because rehabilitating offenders in their view is “the right thing to do.” Moreover, rehabilitation should not be abandoned because when implemented correctly these programs have the ability to reduce recidivism (Cullen & Jonson, 2011; MacKenzie, 2000).

### **Evidence-Based Research on Rehabilitation: What Works**

Cullen and Jonson (2011) note that in order for an intervention to be effective for either male or female correctional populations, “it must reflect good science, good policy, and good practice” (p. 329). There is currently a movement within correctional research that examines evidence-based practices and programs. Much of this work consists of assessing and evaluating offenders and their risk levels using the risk principle (Van Voorhis, 2009). The risk principle suggests that higher levels of service are best used with high-risk offenders (Andrews et al., 1990b). These offenders are more likely to need treatment and treatment is more likely to reduce recidivism for them as compared to lower-risk offenders (Van Voorhis, 2009). Using this perspective, classification and

assessment instruments, and treatment programs based on their findings have been developed.

**Classifications.** Several types of classification and assessment instruments have been developed and tested throughout the years. One of the most recent and commonly discussed risk factor assessments is the Level of Supervision Inventory-Revised (LSI-R). The LSI-R consists of 54 items that measure factors such as age, criminal history, relationships, gender, substance abuse, mental health and other factors that have been shown to reflect criminogenic needs (Gendreau et al., 1996; Smith et al., 2009). Researchers have argued that this particular assessment can accurately predict recidivism and risk factors for both men and women (Gendreau et al., 1996; Smith et al., 2009), however there are others that disagree with this position. While the accuracy of the LSI-R and its ability to correctly assess men has not been questioned, its usefulness for women has. Taylor and Blanchette (2009) argue that there is not enough evidence yet to determine if the LSI-R is the only assessment needed for women and they maintain that women are different enough to warrant their own assessment tool. Moreover, Van Voorhis and colleagues (2010) state “even the most recent gender-neutral assessments were created for men and applied to women with limited attention to relevance and only later concern for validity” (p. 262). Additionally, Van Voorhis and colleagues (2010) note that adding gender-responsive factors (e.g., trauma and abuse, relationships, and parenting) to the gender-neutral LSI-R make more powerful predictions for the actual risks of women in prison.

In the end, these criticisms point to the lack of research on women in corrections, especially concerning their risks and needs. For example, there is limited knowledge

concerning the risk they pose, the factors that affect them, programming that is effective, and whether or not systems designed for men will work for women or if, alternatively, separate systems are needed for women that have been designed for them. Moreover, Bloom and colleagues (2005) posit that inaccuracies in the LSI-R and other gender-neutral risk assessments often result in the over-classification of women in prison (i.e., women being placed in higher custody levels than is warranted based on the risk they pose). Still, there is enough preliminary research on women and men and their different risk factors that it warrants more attention and discussion.

**Male risk factors.** When looking at risk factors and assessments in prison, most researchers examine which risk factors are likely to influence inmate misconduct. However, it is important to note that risk factors for misconduct in prison tend to mirror risk factors for recidivism as well (Gendreau et al., 1996). One study, which was based on a national sample of state inmates, found that misconduct for men is affected by age, prior incarceration, pre-arrest drug use, and level of security where an inmate is housed (Steiner & Wooldredge, in press). More specifically, younger men, those with prior incarcerations, those who used drugs prior to arrest, and those who were housed in a maximum security facility had increased odds of misconducts. Race is also a significant predictor with African Americans and Hispanics having increased odds of rule infractions compared to white male inmates (Steiner & Wooldredge, 2009b). Meta-analyses of risk factors have found evidence that factors such as age, criminal history, relationships, substance abuse, and mental health also affect misconducts and recidivism when male inmates are released (Gendreau et al., 1996).

**Female risk factors.** Females differ from male prisoners according to background characteristics, offense characteristics, danger they pose to prison security, needs, and recidivism factors (Wright, Van Voorhis, Salisbury, & Bauman, 2009). Women rarely commit acts of violence or serious misconduct while in prison (Harer & Langan, 2001; Wright et al., 2009) and while they do violate rules, their misconduct is much less violent than their male counterparts (Harer & Langan, 2001). Although women are less violent than men, both men and women share similar background characteristics that condition their potential for violence such as substance abuse and mental health (Gendreau et al., 1996; Harer & Langan, 2001). However, it has also been found that abuse history, age, ethnicity, pre-arrest drug use, prior incarceration, children, and unsupportive relationships along with substance abuse and mental health issues are all linked with, or increase the odds of rule breaking for women in prison (Steiner & Wooldredge, 2009a; Wright, Salisbury, & Van Voorhis, 2007; Wright et al., 2009). Wright and colleagues (2007) found that gender-neutral need factors were also correlated with misconduct such as antisocial attitudes, employment/financial difficulties, family conflict, limited family support, history of mental illness and limited anger control. Their findings suggest that *both* gender-responsive and gender-neutral needs are important to consider when predicting institutional misconduct.

**Effective Elements and Programming.** Taking what we know in regards to risk factors for misconduct in prison, scholars have also begun examining what programs or elements of programs utilized in prison are effective in reducing misconduct and recidivism. According to Drake, Aos, and Miller (2009), “some programs work, some programs do not, and careful analysis is needed to inform policy discussions” (p. 183).

For example, it has been noted by French and Gendreau (2006) that programs that take criminogenic needs and risk factors into account are more effective than those who do not. More evidence-based research is needed to examine which components currently being used in correctional facilities are effective because programs that successfully reduce prison misconduct tend to reduce recidivism as well.

Program staff is also important in the success or failure of treatment programs. “Effective rehabilitative efforts involve workers who are interpersonally warm, tolerant, flexible, yet sensitive to conditional rules and procedures (Andrews, Bonta, & Hoge, 1990a, p. 36). Moreover, the program staff needs to be both enthusiastic and clearly authoritative without being over-controlling – basically they need to be “firm but fair” (Andrews et al., 1990a). Therapeutic integrity is also very important for counseling and other therapy treatments with research indicating that programs with high integrity levels often lead to better results (French & Gendreau, 2006).

The types of treatments utilized are important in regards to effectiveness. Behavioral and cognitive treatments significantly contribute to the reduction of recidivism (Andrews et al., 1990b; Drake et al., 2009, MacKenzie, 2000) especially when compared with non-behavioral treatments. Behavioral and cognitive treatments are also more effective than educational and vocational strategies (French & Gendreau, 2006). However, there is evidence that educational and vocational programs can reduce recidivism. Drake and colleagues (2009) note in their meta-analyses of prison programming that vocational education, drug treatment, correctional industries, and employment and work programs are all effective in reducing crime in adults (both male and female). Finally, it has been posited that treatments based on better developed theory



and research regarding approaches for bringing about change tend to be more successful, for example: multi-systematic therapy, family therapy, and cognitive and behavioral therapy (Lipsey & Cullen, 2007). Multi-method programming and treatments have been widely called for in regards to women, especially by gender-responsive researchers, who note that successful programming for women somewhat differs from traditional programming for men (Bloom et al., 2005).

To better understand the needs of women, specifically, it is important to focus on them and their unique experiences. While it is true that women offenders share many background characteristics, criminogenic needs, and programming needs with their male counterparts (Robbins, Martin & Surratt, 2009), women have enough differences from men to warrant their own research (Covington, 2000; Huebner et al., 2010). In the next chapter, I explore women and their experiences with the correctional system.

## **CHAPTER THREE: WOMEN IN PRISON**

In this chapter, I discuss several issues concerning women in prison. I begin by looking at the history of women in prison, more specifically, the facilities in which they have been housed, the care they have received, and the opportunities afforded to them. Next, I describe the characteristics of women in prison (i.e., backgrounds, demographic characteristics, and offense types) and compare them to their male counterparts. Additionally, I review the gendered pathways literature, which notes that women offenders enter the criminal justice system through different avenues than men and that these differences warrant more research and specific types of programs for women. Finally, I discuss the needs of women offenders and recommendations for gender-responsive programming.

### **History of Women in Prison**

Historically, women have been overlooked and neglected by the correctional system and those studying the corrections area, this despite the fact that gender is one of the most important predictors of criminality (Belknap, 2007). One of the main reasons for this neglect and lack of attention is that women comprise a very small minority of the correctional population (Belknap, 2007; Butler, 1997; Koons, Burrow, Morash, & Bynum, 1997; Owen, 2001; Zatz, 2000). In fact, they are often referred to as an "invisible" population (Belknap, 2007), and as a result, have often been addressed or treated in the same manner by the correctional system as their male counterparts. For

instance, programs that have been developed for incarcerated males (i.e., the majority population) have been implemented in women's prisons without much thought as to whether the programs were appropriate for, or useful to incarcerated women (Rafter, 1989, 1990). At other times in history, the correctional system has viewed women as being different from men and in need of their own programs and policies. In the sections below, I trace the history of women's involvement in the correctional system and detail the fluctuating perspectives of treating women the same as, or different from men.

### **Early Correctional Treatment**

The first women incarcerated by the American correctional system in the late 18<sup>th</sup> century and the early 19<sup>th</sup> century were housed with men (Butler, 1997; Mays & Winfree, 2009; Rafter, 1990, Van Wormer, 2010). Women often suffered from neglect and abuse while in these facilities, typically because the larger population of males needed more attention and caused more problems for security (Butler, 1997; Mays & Winfree, 2009; Rafter, 1990). While imprisoned, women received similar brutal and tortuous punishments as men (Belknap, 2007; Butler, 1997) and in addition to conventional or sanctioned punishments they were tortured and raped by male officers and prisoners (Belknap, 2007; Butler, 1997). The injustices that women experienced in these early co-ed prisons were often dismissed because they were not regarded as “real women” deserving of social protection (Butler, 1997). In fact, criminal women were often viewed more negatively than their male counterparts, not only because they had committed a crime but also because they were *women* who had committed a crime. At the time, women were viewed as morally pure and represented all that was good and decent in civilized society. Criminal women not only violated laws and morality but they defied

what it meant to be a “good” woman (Butler, 1997; Schram, 2003). This view of women has been extremely influential in their treatment by the correctional system and it continues to have an impact on them.

It is important to note that during this time period not all women were incarcerated in the same way. Women were treated differently depending on what part of the country they were imprisoned. Facilities in some regions were more benign than others and treated women less harshly than facilities in other regions (Butler, 1997; Rafter, 1990). As was the case for men, the South tended to maintain different correctional goals from the North and often used women as domestic and field laborers (Rafter, 1990). In spite of these regional differences in the imprisonment of offenders, this period of time for corrections is typically regarded as a time of 'equal treatment' for male and female offenders (Rafter, 1990). Women and men often faced the same barbaric punishments, treatment, and amenities (e.g., exercise yards, recreational activities; Rafter, 1990). Since these punishments and treatments were originally designed to manage men, they were typically not effective or appropriate for women (Rafter, 1990).

Nicole Rafter (1990), a well-respected prison historian, refers to this early phase in American corrections and the history of women under correctional supervision as a time of “partial justice.” That is, women were not as likely as men to be imprisoned during this time, but when there were, they were treated just as poorly, if not more so than their male counterparts. They were punished, beaten, and raped by both male prisoners and the officers who were responsible for supervising them. Over time and because of several scandals (i.e., inmate pregnancy), females were moved into separate corrections facilities (Mays & Winfree, 2009; Rafter, 1990).

Although women were removed from these co-ed facilities, the new buildings that housed them remained on the same grounds as the original facilities (Rafter, 1990). This move did not necessarily benefit them. Women continued to suffer from neglect even after they were moved out of male housing areas. They lacked services and were prevented from being involved in vocational programs or work assignments, and when women were allowed to participate in work assignments they usually entailed domestic chores (Butler, 1997; Rafter, 1990). When amenities and services were provided to women, they were typically inferior to those that were given to men, and oftentimes, the wardens for the male prisons remained in charge of female prisoners rather than women having their own separate warden.

### **Late 19<sup>th</sup> Century Prison Reforms**

In the late 1800s, a reform movement, largely led by Elizabeth Fry and like-minded individuals, worked to help “fallen women” (i.e., female prisoners) get back on the “right track” through “proper” guidance by “proper” ladies (Grana, 2010). These early women reformers held the same stereotypical views towards female offenders as those held by the rest of society. They viewed female prisoners as wayward children and as a result, discouraged them from acting as independent adults (Rafter, 1989). New reformatories were built specifically for women and were in the style of cottages (Butler, 1997; Rafter, 1990; Owen, 2001). The new housing facilities departed from the traditional male custodial model, there were no walls or towers and the women’s housing area was divided into many smaller buildings rather than large congregate buildings (Belknap, 2010; Rafter, 1990; Rierden, 1997).

Women in these first reformatories were placed in small housing groups that allowed them to live with a matron in a “family” or “home-like” setting (Belknap, 2010; Rierden, 1997). The matrons who supervised the inmates served as role models (i.e., “proper ladies”); they were responsible for steering the misguided women who were in their care into a life that conformed to what society expected (Grana, 2010). The cottages in which they lived were designed to address the special needs of women (i.e., homemaking and parenting skills), and were inspired by the idea that criminal women could be reformed through domestic training (Rafter, 1990). Again, vocational training focused on institutional chores such as cleaning, sewing, and cooking (Rafter, 1990), rather than providing women with viable workforce skills that would help them become autonomous, independent citizens.

The reforms made to women's imprisonment varied by region of the country. Prisons for women in the South were quite different from prisons in other areas of the country. The South was apathetic about rehabilitation and was primarily concerned with other goals, such as rebuilding after the Civil War (Rafter, 1990). Southern prisons, instead, emphasized the custodial model and leased male and female prisoners out to both prison and private farms (Rafter, 1990). Unlike most male prisoners who worked in the fields (Johnson, 2000), female prisoners leased to farms were often given different tasks based on their race. White women worked as domestics in the house while Black women worked as field hands alongside men (Rafter, 1990).

### **Later Reforms and Contemporary Prisons**

Contemporary prisons, those built and managed since the 1960s, have incorporated many changes. Not only do contemporary facilities for women look

different from the previous cottage style reformatories (i.e., now they look similar to male facilities), but the goals of women's facilities have also changed over the last five decades. The goals shifted from those of different treatment (from earlier eras), to equal treatment, to finally gender-responsive treatment in corrections. Many of these changes were brought about by litigation on the part of female inmates (Kruttschnitt & Gartner, 2003). Taken together, these changes caused female facilities to evolve rather quickly over the last 50 years and the newer custodial and older reformatory models to merge with one another (Rafter, 1989).

The new prisons of today are large congregate housing facilities and purport to focus on equal treatment for men and women. Since incarcerated women remain in the minority, there are far fewer facilities to house women than there are to house men. Furthermore, facilities for women are frequently located in rural areas, and they are generally further distance from the prisoners' friends and families than are those built for men (Belknap, 2003). Prisons for women underwent significant changes beginning in the 1960s and those changes continue today.

Remember, during the 1960s women in the larger society were seeking more rights and equality with men. Similarly, incarcerated women were also working for equal treatment with men and pushed for more constitutional protections within prisons (Rafter, 1990). The equality position maintains that women should be offered similar services or similar amounts of services to that of men. There is concern on the part of some criminologists, however, that equality simply equates women's treatment to that of men (i.e., a male standard) and not vice versa (Grana, 2010; Rafter, 1990; Van Wormer, 2010). As such, equality is realized when what women receive is changed to reflect what

men receive while in prison. The unintended consequence of such a policy results in women being treated more harshly (e.g., making prison sentences more likely and longer) and being more controlled in the system. Additionally, a de-emphasis is placed on rehabilitation (Belknap, 2003; Chesney-Lind, 2004; Morash & Schram, 2002; Van Wormer, 2010).

Disparate treatment has been difficult to address in part because female inmates tend to cause less problems for prison officials (i.e., they are less likely to riot) and tend to be less litigious than their male counterparts (Belknap, 2007; Rafter, 1990). In the mid-1970s, women began to increasingly use litigation and the courts to fight sex discrimination within prisons (Laddy, 1996). Some notable cases that have advanced the treatment of women in prison include *Barefield v. Leach* (1974), *Glover v. Johnson* (1979), *Canterino v. Wilson* (1982), and *Casey v. Lewis* (1993). In each of these cases, the court ruled in favor of the women claiming disparate treatment (e.g., access to mental health services, vocational programming, work assignments, and educational programming), thus affirming that the corrections system was violating the equal protection clause of the 14th Amendment.

While the courts have ruled in favor of female prisoners in regards to disparate treatment, the courts have also remained firm that claims of sex discrimination must be scrutinized using a “heightened standard” (Lee, 2000) meaning that different treatment may be allowable in certain cases (i.e., penal interests, fiscal necessity). This is acceptable, according to the courts, since there may be legitimate penal interests and financial necessities that permit or justify differential treatment of male and female inmates (*United States v. Virginia (VMI)*, 1996). Accordingly, disparate treatment has



been acceptable in more recent cases (i.e., *Jeldness v. Pearce*, 1994; *Women Prisoners of the District of Columbia Department of Corrections v. District of Columbia*, 1994; *United States v. Virginia(VMI)*, 1996), where the courts found that treatment does not have to be identical, it only has to be “substantially equivalent” (Kocaba, 1999). Nevertheless, there have been improvements in women’s access to services and/or programs as a result of litigation. Women prisoners have been allowed more access to health care, mental health services, vocational and educational programming, work assignments, and other types of prison programs. Lord (2008), a former superintendent for a women’s prison in New York, noted that court litigation can be beneficial, as it forces changes in policies and procedures that might not otherwise occur. Prisoner litigation has helped fuel the movement for more equitable treatment of women and men in prisons, and has sparked research concerning the need for gender-responsive treatment.

The most recent reform movement concerning women in the correctional system has involved the drive for more equitable treatment that is gender-specific or gender-responsive. Historically, it was common to simply replicate programming that was developed for male inmates and blindly implement the same programming in female prisons (i.e., equal treatment standard; Rafter, 1990). Instead, researchers today maintain that female prisoners need programming that is tailored to their particular needs, for example, programming that recognizes the significance and role prior abuse and violence plays in the need for other programs and services (i.e., mental health services, substance abuse programming). Current reformers, therefore, view the goal to be pursued as one of equity and not equality. The need for equitable, yet gender-specific/-responsive treatment, is advocated for all women in the corrections system (institutional and

community settings). This is particularly important given the large number of women that now find themselves confined within the current prison system.

The incarceration rate for women has been increasing at a dramatic rate over the last several decades. Beginning in the 1980s and continuing today the population growth for women offenders has been particularly significant (Van Wormer, 2010). Specifically, the number of incarcerated women since 1980 has increased over 500% (Morash & Schram, 2002). Yet, despite the exponential increase in women inmates, only between 6% and 7% of the federal and state inmate population is female (Greenfeld & Snell, 1999; Simon & Ahn-Redding, 2005). The research suggests that the massive influx of female inmates is largely due to drug and property crimes rather than violent crimes (Simon & Ahn-Redding, 2005). Still, as more women have come into prison, researchers have increasingly looked at this offender population to see how they might look similar or different from the larger male offender population.

### **Characteristics of Women in Prison**

Women in prison mirror their male counterparts in many respects (Robbin et al., 2009). Both incarcerated males and females have high rates of victimization, high rates of drug and alcohol usage, are likely to come from situations of poverty and single parent families, tend to be young, undereducated, underemployed, are likely to be parents, and have higher rates of mental health problems than the general population (Belknap, 2003; Belknap, 2007; Belknap & Holsinger, 2006; Bloom, Owen & Covington 2005; Chesney-Lind, 2004; Covington, 2004; DeHart, 2008; Glaze & Maruschak, 2010; Greenfeld & Snell, 1999; James & Glaze, 2006; Mumola, 2000; National Research Council, 2008; Visher, Buer, & Naser, 2006). In fact, Steffensmeier and Allan (1996) observed that both

genders are influenced by similar social and legal forces in our society, and that these forces probably account for the similarity in offending trends (i.e. how crime rates change in similar patterns over time) between men and women. Still, Steffensmeier and Allan (1996) also acknowledge that there are differences between men and women with significant gaps in offending between them.

They state, “patterns of offending by men and women are notable both for their similarities and for their differences” (Steffensmeier & Allen, 1996, p. 460). To start, women are much less likely to come into contact with both the criminal justice and correctional systems (Simon & Ahn-Redding, 2005). Additionally, while both genders are more likely to commit property or drug crimes rather than violent crimes, women are much less likely to commit violent crimes than men (Glaze & Maruschak, 2010; Mumola, 2000; Owen, 2001). Women are also less likely to be convicted of more serious offenses and tend to have less extensive criminal histories than men (Koons-Witt, 2002; Ward & Kassebaum, 1965). Men consistently commit crimes at rates of 5 to 10 times that of women (Belknap, 2007). Furthermore, as part of their groundbreaking study of women in prison, Ward and Kassebaum (1965) observe what is still true today that, “women are far less likely to be arrested, tried, convicted, and imprisoned than are men” (p. 59). Simply, women commit less serious forms of crime, have less extensive criminal histories, and are generally regarded as less of a risk to society (Collins, 2010; Koons-Witt, 2002).

Even though the number of women offenders has increased over the last few decades (Van Wormer, 2010), offending for women has remained relatively minor, with a majority of females being arrested for larceny, theft, drunk-driving, prostitution, and

drug offenses (Chesney-Lind, 1997, 2004). In fact, it has been noted that one of the major factors behind the mass influx of women coming into the system is the war on drugs (Chesney-Lind, 2004), which has subsequently been labeled a “war on women,” or more specifically a “war on poor black women” by some scholars (Belknap, 2003; Bush-Baskette, 2004; Owen, 2001; Sokoloff, 2005; Van Wormer, 2010).

Women do not typically commit violent crime. They only comprise about 14% of all violent offenders (Greenfeld & Snell, 1999), and less than 5% of imprisoned violent offenders (Carson & Sabol, 2012). Women are much less likely than males to be incarcerated due to a violent crime (Sokoloff, 2005) with approximately 37% of women imprisoned for a violent offense (Carson & Sabol, 2012). When women are incarcerated for violent offenses, they are typically much less serious than those committed by men (Belknap, 2007; Chesney-Lind, 2004; Sokoloff, 2005) with a majority being simple assaults (Greenfeld & Snell, 1999). Interestingly, while other crime rates for women have increased, the percentage of arrests for homicide, arguably one of the most serious criminal offenses, has decreased from 0.3% in 1963 to 0.1% in 2003 (Simon & Ahn-Redding, 2005). So, as shown, while there are many similarities in male and female offenders and offending, there are fundamental differences as well, differences that historically have been neglected or ignored in the field of criminology and the criminal justice system. Many now argue that these differences warrant additional research on women offenders (Bloom et al., 2005; Covington, 2000; Harer & Langan, 2001; Salisbury et al., 2009; Taylor & Blanchette, 2009).

## **Pathways Perspective**

Historically, theories have been developed explaining male delinquency and criminality that may not be applicable to women because they were developed without considering the role gender plays in criminality (Belknap & Holsinger, 2006). Some argue that there is enough evidence of differences between men and women both in their background and offense characteristics to suggest women take unique pathways into criminality and imprisonment (Covington, 2000; Huebner et al., 2010). While many factors such as victimization, mental health, and drug use affect both men and women's criminality, researchers maintain that there are substantial differences in how women come to crime, compared to men (Covington, 2000). Those researchers studying these gender differences have coined their routes to crime as gendered "pathways" (Bloom et al., 2005; Daly, 1992; Huebner et al., 2010; Salisbury & Van Voorhis, 2009). The "pathways perspective" acknowledges that men and women enter the criminal world through different routes and that the most common routes for women are based on survival from abuse, poverty, and substance abuse (Bloom et al., 2005). It recognizes various biological, psychological, and social realities that are unique to female offenders as well (Salisbury & Van Voorhis, 2009).

The intersection of several factors often affects women's crime: victimization, substance abuse, mental health, and relationships with others (family and children). Each factor tends to have a significant impact on the others. For example, a woman's victimization may lead her to use drugs to cope with her pain (DeHart, 2008). Her drug use may in turn lead her to criminal activity (e.g., prostitution, shoplifting) to support her habit (Chesney-Lind, 2004; DeHart, 2008). Women's relationships can also be significant

factors in their criminality because research has shown repeatedly that women in general see themselves in terms of their relationship with others (Gilligan, 2000). Many relationships in women's lives can affect their criminality including those from their childhood, and those with their partners and their kids. Salisbury and Van Voorhis (2009) found that women's childhood traumas were connected to major mental health problems. In regards to romantic relationships, DeHart (2008) posited that women may commit crimes for their partners or may be forced into crimes by their partners. Finally, criminal women are often mothers and mothers at an early age (Belknap, 2003; Belknap, 2007; Chesney-Lind, 2004). Chesney-Lind (2004) and other feminist criminologists have also noted that it is not uncommon for women to commit crimes of necessity to feed either their children or their drug habits. Therefore, it is not implausible to say that women's relationships affect their criminality. The pathways literature stipulates that the convergence of many aspects of women's lives may influence their criminality, not just their relationships. One of the most noted attempts at identifying pathways to crime for women involves the work of Daly (1992).

Daly defines five general categorizations of women's pathways to crime: (1) harmed and harming women; (2) battered women; (3) street women; (4) drug connected women; and (5) 'other' women. *Harmed and harming* women are abused or neglected as children, have often been identified as problem children, may be drug addicted, have psychological problems, and are typically unable to cope. *Battered women* are in a relationship with a violent man or recently exited such a relationship. *Street women* have been pushed out or have run away from abusive households to the streets and gotten involved in petty hustles. They are often drug addicted and engaged in prostitution, theft,

or selling drugs to support their habits and these women typically have long criminal histories. *Drug connected* women are typically addicted to drugs due to a relationship with an intimate partner or have sold drugs due to a relationship with their children or mother. Finally, the category of '*other*' women includes those who had an immediate economic circumstance where they felt forced to commit a crime.

While these categories are not mutually exclusive and one woman may fit into multiple categories, each of these categories highlight important themes of women's criminality: drug use, victimization, mental health issues, relationships with family and friends, and economic marginality (Daly, 1992). Each pathway illustrates how complex the links between these factors and crimes can be for women. For example, women's abuse, mental health, and addiction have been noted as intersecting or as co-occurring disorders (Morash & Schram, 2002), meaning the causes and effects of these elements are happening together and are typically indistinguishable (Flower, 2010). The gender-responsive literature highlights the importance of these complexities and how these various factors might uniquely influence women's criminality (Van Voorhis, Wright, Salisbury, & Bauman, 2010).

### **Gender-Responsive Programming and Practices**

Gender-responsive programming and practices are policies, programs, and procedures that reflect empirical, gender-based differences that are believed to make management practices and staff procedures more effective when dealing with female offenders (Bloom et al., 2005). Gender-responsive practices emerged briefly in the 1960s and 1970s in specialized prison programming; however they quickly went away due to their stereotypic nature (Van Wormer, 2010). As has been previously noted, for much of

its history the correctional system has ignored the smaller population of incarcerated women and their unique circumstances and they have often received inferior programs (Rafter, 1990). Still, women need programs and services that are tailored to them rather than to men. They have different needs and problems than men, and this has led researchers to note that they need different solutions to address their differences. Gender-responsive literature addresses these differences and notes what women need to be rehabilitated.

Treatment has the ability to help women address substance abuse, victimization histories, mental illnesses, and can help women become more self-sufficient (Dowden & Blanchette, 2002; Gehring, Van Voorhis & Bell, 2010; Kennon, Mackintosh, & Myers, 2009). While these issues are also found within the incarcerated male population, there has been a growing body of evidence that illustrates that the current gender-neutral approach in the correctional system does not benefit women. Treatment and programming have been developed around the dominant male inmate population (Grana, 2010). Women offenders require the development of gender-specific/responsive programming and tools (Bloom et al., 2005; Harer & Langan, 2001; Reed & Leavitt, 2000; Salisbury et al., 2009; Taylor & Blanchette, 2009; Van Voorhis, et al., 2010). Bloom and colleagues (2005) state that paying attention to the differences in males and females both in their criminality and responses to supervision can lead to better outcomes in institutional and community settings (e.g., effective programs, lower recidivism).

Women in prison have higher rates of substance abuse, mental health issues, and victimization than their male counterparts (Anderson, 2003), however they consistently receive similar treatment to men. The more recent policy of equality has resulted in



tremendous increases in women's incarceration rates and a lengthening of their periods of confinement. Yet, there has been little to no attempt at equality in the availability of programs or health care for women while in prison (Zatz, 2000), further evidencing the idea that equality leaves women "short-changed" (Belknap, 2003; Chesney-Lind, 2004; Schram & Morash, 2002). Additionally, Schram and Morash (2002) argue that attempts to make women's prisons more "equal" can only lead to gender-responsive programs becoming less available for women and gender-responsive programs are a goal for many who study women offenders.

Gender-responsive scholars recognize the need to consider experiences that are not only shaped by gender but also by race and class. They note that many women who come into the criminal justice and correctional systems are poor, un-/under-educated, un-/under-skilled, and many of these women are women of color (Bloom et al., 2003; Covington & Bloom, 2006). Furthermore, many of these women come from disadvantaged, urban neighborhoods and have been convicted of drug or drug connected (i.e., crimes committed to obtain drug money) offenses (Bloom et al., 2003; Covington & Bloom, 2006). Due to these factors and others (i.e., trauma, relational issues), gender-responsive principles developed by scholars acknowledge the importance of addressing substance abuse and other problems faced by women in culturally relevant ways (Covington & Bloom, 2006). Covington and Bloom (2006) state: "programs need to take into consideration the larger social issues of poverty, abuse, and race and gender inequalities" (p. 30). The push for gender-responsive practices initially began with the recognition that men and women offenders are different, and women should be treated differently from their male counterparts due to their multiplicative and inter-related

needs. Then, as highlighted above, gender-responsive practices began noting the differences in needs among women that vary due to culture, race, ethnicity, age, and other individual factors. The proceeding discussion focuses on these individualized needs and the commonalities that many women under the supervision of the criminal justice system share.

### **Multiple Needs of Women**

Women offenders often have multiple problems – primarily with substance abuse, mental health deficiencies, and histories of victimization (Anderson, 2003). Flower (2010) states: “because the problems [of women] are multiplicative, complex, and comprehensive, the solutions should be likewise” (p. 7). Women offenders require programming that addresses their problems. They need drug and alcohol treatment programs, trauma-informed services, mental health programs, relationship programs, and other life-skills building programs (Wright, et al., 2009). Treatment for women in prison should respond to their multiple problems and issues, they need to be addressed through comprehensive, integrated, and culturally relevant services with appropriate supervision (Bloom et al., 2005). Service providers need to work together, especially in the community. They need to focus on wraparound services, or continuous services, that are holistic and culturally sensitive for women who are released from prison, and they need to do so in a coordinated manner (Bloom et al., 2005; Salisbury et al., 2009). Treatment cannot just start and end for an offender while they are in prison. Instead, women offenders need programs in the community that continue their treatment and programming after their release, include wraparound services, and that are available to them under community supervision. Moreover, staff in prisons need to be aware (i.e.,

classification and assessment policies), knowledgeable, and willing to recommend appropriate programs to women who need them (Vuolo & Kruttschnitt, 2008). It is important that services be based on women's needs and do not stereotype them in the process, which has been a common problem in the past (Morash, 2010).

In the following sections, I focus on the separate needs of women offenders. My discussion addresses the multiple issues women deal with in regards to their criminogenic risk factors, factors influencing adjustment into prison, and factors affecting the transition back into society. While doing so, I discuss the extent of the problems, how they generally affect women, and possible programming remedies to respond to these needs.

### **Victimization/Abuse Programming**

Both men and women in the correctional system are significantly likely to have experienced victimization during childhood or adulthood, and have traumatic childhoods that are indicators for later criminality (Belknap, 2003; Belknap & Holsinger, 2006; Browne, Miller, & Maguin, 1999; DeHart, 2008; Gilfus, 1992; Glaze & Maruschak, 2010; Najavits, 2002). Although, women in prison are significantly more likely than men to report any type of abuse in general (Messina et al., 2007). More specifically, women offenders are much more likely to experience childhood abuse or mistreatment than their male counterparts (DeHart, 2008). Also, abuse, specifically sexual abuse, is likely to continue throughout criminal women's lives while men's sexual abuse is likely to stop after age 16 (Messina, Grella, Burdon, & Predergast, 2007).

Women frequently experience victimization prior to incarceration; in fact most women in prison have experienced some form of abuse (Chesney-Lind, 2004; Owen, 1997). For example, Browne, Miller, and Maguin (1999) found that 70% of incarcerated

women in their sample (n=150) experienced severe physical violence at the hands of their caretaker or parent during childhood or adolescence and of those 80% reported later victimization by an intimate partner. Again, it is important to understand that many women in the criminal justice system have long histories of abuse and victimization, and that some of these women have suffered multiple victimizations or "polyvictimizations" (DeHart, 2008). Women not only suffer numerous victimizations, but these abuses have a deleterious cumulative effect on women's lives which is often minimized by conventional research on victimization:

We came to realize that quantitative accounts often decontextualized violence so much that accounts failed to attest to the entrenchment of victimization in these women's lives, transformed horrors into something readable, and most importantly eradicated much of the subjectivity that is so crucial in understanding impact (DeHart, 2008, p. 1364).

Many women in prison have suffered not only physical and sexual abuse (Browne et al., 1999; Glaze & Maruschak, 2010), they have suffered emotional abuse as well (Gilfus, 1992). Relationships are typically characterized for women by physical and sexual abuse, and they typically experience abuse from those they are supposed to trust most: their partners during adulthood, and their relatives and family friends during childhood (Owen, 1997). The reoccurrence of such abuse throughout their lives is generally connected to their criminal activity, and this connection tends to be reciprocal. Victimization relates directly to involvement in criminal activity frequently through abusive partners who force women to either commit or cover up crimes, or in some other way contributes to their female partner's criminality (Bui & Morash, 2010; DeHart, 2008). Furthermore, victimization influences all aspects of life for female offenders – it

affects their mental and physical health, their ability to function, involvement in families and relationships, and their work life (DeHart, 2008).

Once incarcerated, women may feel “safe” for the first time. They may see prison as a safe haven where their abuser(s) cannot get access to them. In addition to removing themselves from an abusive situation, their entry into the corrections system offers them an important opportunity to participate in needed programs and services meant to address their prior abuse and mental health needs (Henriques & Manatu-Rupert, 2001). Such opportunities might include support groups or individual counseling with professionally trained trauma counselors (Browne et al., 1999).

### **Mental Health Services and Programming**

In 2006, the Human Rights Watch announced that there are three times as many men and women with mental illness in U.S. prisons as there are in mental health institutions (Lord, 2008). Mental illness is more prevalent for women offenders than men with one study by the Department of Justice estimating nearly 75% of female inmates in prisons or jails have mental health problems (James & Glaze, 2006). Women’s traumatic and abusive backgrounds typically result in a serious amount of depression and even PTSD (Belknap, 2007). Women’s mental health problems are more frequent and serious than their male counterparts (Anderson, 2003), and like other factors that affect women’s imprisonment, mental health problems are closely linked to substance abuse and victimization for many women (Salisbury & Van Voorhis, 2009). Given that a significant majority of women in prison are suffering from some mental health deficiency (Chesney-Lind, 2004; Glaze & Maruschak, 2010), it is likely that one consequence for these women is its impact on how they experience their imprisonment.

Women who suffer from mental health issues can be violence prone even while remaining fragile and vulnerable (Lord, 2008). Their violence may be directed at other women, or their violence may be directed inward through acts of self-harm and mutilation. At the time that Lord (2008) served as a superintendent of a female corrections facility in New York, she wrote that women will use any item available to engage in self harm: broken light-bulbs, plastic, screws pulled out of objects, paperclips – anything. Furthermore, it is difficult to know when a woman’s mental illness will escalate to the level that she poses a danger to either herself or other prisoners. Lord (2008) explains that sometimes these women “snap” and attack other prisoners for no apparent reason. This type of offender brings uncertainty and instability to what is supposed to be a highly structured environment. Women such as those described by Lord increase the anxiety felt by both other inmates and staff members. Inmates with severe mental health issues become further isolated within the prison setting and lose access to other prison programs (Lord, 2008).

Mental illness, while common among incarcerated women, can affect them differently. Still, prisons often lack resources to help incarcerated women who suffer from mental health deficiencies (Grana, 2010; Lord, 2008). One important service prisons can provide is a professional diagnosis and treatment plan of the mental health problem (James & Glaze, 2006). It is important to understand what disorders women are suffering from because these issues can become a great hindrance to women’s adaptations and adjustments to prison. Additionally, some of these women may have sought treatment before incarceration or during incarceration, thus establishing a pattern of mental health problems that have not or cannot be corrected (Morash & Schram, 2002). This inability to

address mental health problems for women may be due to inefficacy of the programming or incorrect diagnoses (Morash & Schram, 2002). Issues of mental health have been and remain problematic for prisons and for inmates' ability to adjust to incarcerated life. Programs which have been offered or might be offered in prison to help women adjust, cope, and deal with their mental illnesses often include therapeutic programs such as individual counseling, peer-group counseling/self-help groups, and counseling led by a facilitator (Lord, 2008). Psychotropic medication is also a common response by the correctional system in dealing with mental health issues of women (James & Glaze, 2006).

### **Substance Abuse Programming**

Men and women offenders frequently have extensive drug involvement and a family history of substance abuse and criminality (Giordano et al., 2002; National Research Council, 2008). Men, specifically, are likely to have long histories of substance abuse (Giordano et al., 2002). However, there is some evidence that suggests that drug use among males in prison is not a response to mental illness or a history of abuse as has been found in research on women prisoners (Steiner & Wooldredge, 2009b). Moreover, women are more likely to come into the correctional system due to drug-related offenses (37% of female offenders vs. 25% of male offenders), and women are more likely to be under the influence of drugs, alcohol, or both at the time of their crime than are incarcerated men (40% vs. 32%, respectively; Greenfeld & Snell, 1999). Given this evidence it would appear that women offenders have more extensive problems with drugs and alcohol than their male counterparts (Chesney-Lind, 2004).

For women offenders, substance abuse is often used as a coping mechanism or a way of self-medicating to relieve the pain and trauma of their lives (Belknap, 2003; DeHart, 2008; Gilfus, 1992). Often times, women begin taking drugs to cope with childhood abuse at a young age (approximately age 13), or because of other negative relationships or aspects of their childhood (Gilfus, 1992; Najavits, 2002). Women offenders are also more likely to have major mental health problems related to childhood trauma such as depression and anxiety (Salisbury & Van Voorhis, 2009), which can in turn, cause women to use drugs to not only cope but to also relieve symptoms.

The policies of the “war on drugs” era have dramatically increased the number of male and female offenders in the criminal justice system, yet many researchers contend that the war has disproportionately affected women (Kruttschnitt & Gartner, 2003; Morash & Schram, 2002). When comparing the effects of the war on drugs by gender, Morash and Schram (2002) noted that the growth of incarcerated men for drug offenses from 1990-1999 was 18% while the growth of incarcerated women was 39%. Interestingly, the war on drugs has affected White and non-White women differently. According to Belknap (2003), research has reported an 800% increase in the incarceration of Black women due to drug offenses since the initiation of the war on drugs while White women’s incarceration rate increased by about 250%. Other research has also found drug use to be more prevalent among non-White women (Huebner et al., 2010), again furthering the argument that the war on drugs is a war on women of color, particularly Black women.

Even though Black female offenders are more likely than White female offenders to use drugs, many women under correctional supervision have substance abuse problems



(Greenfeld & Snell, 1999; Mumola, 2000). Often these problems are complex because women have been exposed to victimization and drug abuse their entire lives. Criminal women often grow up in households with addicted relatives (Gilfus, 1992; Glaze & Maruschak, 2010). Their exposure to their own parent's substance abuse problems deeply influences criminal women (Owen, 1997). Furthermore, women's first exposure to drugs and alcohol usually come from family members and friends (DeHart, 2008; Leverentz, 2006), and their own use is usually promoted or supported by those close to them (Bui & Morash, 2010).

Women who come into the correctional system as addicts can experience difficulty coping and adjusting to the new rules and guidelines they must follow (Mumola, 2000). Once incarcerated, it is harder for women to obtain drugs (although not impossible), and now they face both the strain of imprisonment along with the loss of substances to cope with their new adjustment. Therefore, not only are drugs a major reason why women are incarcerated, they may also affect their coping and adjustment while in prison. There are a number of programs currently in prisons trying to address substance abuse: alcohol and/or drug recover programs, substance detoxification units, support groups, and counseling (Covington, 2004).

Similarly to victimization and mental health issues, women offenders are more likely than their male counterparts to have substance abuse problems. Their substance abuse is often due to the culmination of child-/adult-hood victimizations and mental illness. All three of these seemingly build a complex web of issues for women offenders, and all seem to have a reciprocal role with one another, all of which has been regarded as a distinctly female problem (Flower, 2010). So, while it is true that men and women

offenders both suffer from higher rates of victimization, mental health issues, and substance abuse problems than men and women in the general population, these issues appear to influence men and women offenders differently. Thus, it is necessary for programming to recognize and address these critical differences in programs that are delivered to incarcerated men and women.

### **Parenting Skills and Family Programming**

Both men and women offenders are often parents (Glaze & Maruschak, 2010; Visher, Baer, & Naser, 2006) with at least 62% of women and 51% of men in prison having minor children (Glaze & Maruschak, 2010). Parenthood, though, affects men and women in diverse ways. For instance, male prisoners are often fathers, and approximately one in three reports living with children prior to incarceration (Visher et al., 2006), yet male inmates can typically depend on their partners or spouses to take care of their children during their incarceration (Glaze & Maruschak, 2010). This is not the experience for most female prisoners. Incarcerated mothers are also more likely to have been living with their children prior to incarceration (Mumola, 2000); they have more contact with children while incarcerated (Glaze & Maruschak, 2010; Mumola, 2000); and their children are more likely to end up in foster care than their male counterparts' children (Glaze & Maruschak, 2010; Johnston, 1995).

As is true with men, the majority of women in prison are mothers (Bloom et al., 2005; Chesney-Lind, 2004; Glaze & Maruschak, 2010; Koons-Witt, 2002; Leverentz, 2006; Simon & Ahn-Redding, 2005) with almost three-fourths of incarcerated women having minor children (Morash & Schram, 2002). Incarcerated mothers are typically the primary caregiver of their children before incarceration and are more likely to have been

emotional and financial providers for their children (Belknap, 2007). When mothers go to prison, the anxiety they have over the separation and worrying about their children becomes quite traumatic for them (Belknap, 2003). As Belknap (2007) states: “one of the greatest differences in stresses for women and men serving time is that the separation from children is generally a much greater hardship for women than for men” (p. 201). Women often endure guilt from the knowledge that they have exposed their children to their crimes and because they may have placed their children in danger as a result of their criminality (Brown & Bloom, 2009).

Also, women suffer because they cannot typically depend on their partner to take care of their children while they are incarcerated; instead, they are frequently forced to find someone, anyone, to care for their kids (Glaze & Maruschak, 2010; Mumola, 2000). The most common placement of children once a mother is incarcerated is with the grandparents (44.9%), followed by the other parent (37%), and other relatives (22.8%; Glaze & Maruschak, 2010). They also may have to worry about not only their children entering foster care but the possibility that their children will be separated from one another (Johnston, 1995). The stress of worrying about children and losing track of children can add to the pains of imprisonment and affect the coping abilities of incarcerated mothers. This is especially true for pregnant women that are incarcerated, and who must decide where to place their newborn child while they complete their prison sentence (Dodge & Pogrebin, 2001). These concerns are not typically ones that are experienced by their male counterparts.

It is not surprising, then, that children can often motivate women to do better; female prisoners acknowledge this fact (Bogart, Stevens, Hill, & Estrada, 2005). More

women who are mothers take advantage of prison programming than non-mothers, and many of the programs they participate in are parenting or childrearing classes (Glaze & Maruschak, 2010). Women also employ several strategies to deal with the separation anxiety they feel as a result of being away from their children. One way women cope is by affirming the notion that they are good mothers, and they are fit parents. Celinkska and Siegel (2010) suggest that women may attend classes to transform themselves into better mothers, to reaffirm or defend their parenting skills, and/or to cope with the separation from their children. Women also cope by attempting to mother from prison, meaning that they maintain ties with their children and might even continue to confer with the current caregiver on decisions regarding the children (Celinkska & Siegel, 2010). Finally, mothers often attempt to disassociate themselves from other prisoners (Celinkska & Siegel, 2010) and maintain their pre-prison identities (Owen, 2001). No matter the coping technique used, incarcerated mothers will usually try to do their time by becoming involved in programming and services that emphasize their children and address their role as mothers. Specific programs women may engage in while incarcerated include: parenting classes, support groups, prenatal care, visitation programs (e.g., daytime, overnight) and education programs about rights and proper parenting techniques (Koons et al., 1997; Zaplin & Dougherty, 1998).

### **Education and Employment/Jobs Programming**

Both incarcerated men and incarcerated women have backgrounds that can be best described as extreme poverty, social marginality, and low levels of achievement (Bloom et al., 2005; Chesney-Lind, 2004; Giordano et al., 2002; Owen, 1997; Simon & Ahn-Redding, 2005). Additionally, women inmates, like men, have a striking lack of

education (Belknap, 2010; Bloom et al., 2005; Brown & Bloom, 2009; Mumola, 2000; Schram, 2003) with one study approximating that 44% of women in state prisons having not graduated from high school (Schram, 2003). It is almost impossible to succeed or even be self-sufficient in today's society with a low level of education. Women offenders both in and out of prison need education programs to better themselves. Education for many women will help them gain self-sufficiency, which is an important factor for successful reentry. The most common education programs include: basic education classes, GED preparation classes, college courses, and vocational education programs (Cullen & Jonson, 2011; Harlow, 2003). Along with academic resources, women need employment resources as well to gain their economic independence.

Female inmates are less likely to have been employed full-time prior to their incarceration than their male counterparts with only 4 in 10 women versus 6 in 10 men being employed full-time prior to arrest (Greenfeld & Snell, 1999). Additionally, Schram and colleagues (2006) have pointed out that for women in particular, the typical offender has very limited job skills, which further contributes to their employment troubles upon release. Too often work duties in prison include stereotypical gender tasks such as sewing or cooking or other menial tasks that will not help women obtain meaningful employment once they are released (Grana, 2010). Traditional work industries in prison have also focused on occupations such as cosmetology and other 'pink collar' jobs that are arguably stereotypical for women. Equally concerning is the fact that some states prevent ex-felons from obtaining jobs in the cosmetology field, thus our prisons are preparing women for jobs they might not be able to fill once they return home (Flower, 2010). Incarcerated women need programming that will provide them with both marketable and usable job

skills once they get out of prison. Doing so will help women to be more successful during reentry and be able to reunite with their children and gain economic self-sufficiency.

Many incarcerated women require other related skills that are referred to as life-skills. These types of programs usually provide help with time and money management, problem solving, stress and anger management, negotiation skills, parenting, and employability skills and are believed to be useful for inmates as they transition from prison and into the community (Belknap, 2003; Flower, 2010; Morash, Bynum & Koons, 1998; Schram & Morash, 2002). The ability to be autonomous and self-sufficient is vital for women's desistance process (Elliott, Bjelajac, Falot, Markoff, & Reed, 2005). Again, many women under correctional supervision have limited job skills and a sporadic employment history (Bloom, Owen, & Covington, 2004). Being able to have financial independence upon release is a position that many women in prison want to obtain for themselves. Researchers have often promoted programs that assist women with skills to manage finances and bills (i.e., balancing a checkbook), be able to identify and solve problems independently (Flower, 2010), and transition successfully into the community (Belknap, 2003). Life-Skills programs are much more innovative than traditional work and vocational programs offered to women in prison. They are more likely to help women achieve economic and social independence by providing them with basic living skills and strategies and opportunities to improve their socio-economic standing, things women need (Bloom et al., 2005; Morash et al., 1998). Still, the traditional, stereotypical programs abound in the correctional system, often reinforcing women's "place" in the system and society. Some researchers argue that we need to be vigilant and continue to examine how the corrections system views and addresses women. History has shown us

that gender stereotypes have been influential in our definition and response to incarcerated women. These gender stereotypes also continue to be supported and reinforced in the larger society.

## **CHAPTER FOUR: GENDER STEREOTYPES AND TRADITIONAL GENDER EXPECTATIONS**

In this chapter, I discuss the importance of gender roles and expectations of gendered behavior for both men and women and their treatment by the correctional system. I begin by discussing social construction feminism (Lorber, 2001) and the concept “doing gender” developed by West and Zimmerman (1987) and subsequent research concerning the process of “doing gender” by adhering to norms of appropriate gendered behavior and attributes. I also explore how this concept developed by West and others has been criticized for its micropolitical view of gender, and how other factors, particularly race, effect behavioral expectations as well. I then examine how these gendered and racial behaviors influence expectations in broader society (i.e., division of labor, masculinity, femininity, and consequences for misbehavior) through controlling images. I also discuss the historical lack of emphasis on gender within the criminal justice system and the use of the male standard, and finally, I examine how the correctional system employs gender and other socially defined roles in work and programming expectations.

### **Social Construction of Gender**

According to social construction feminism, gender is a social institution that is reinforced through the interactions of individuals throughout our society, and in essence, creates differences among men and women due to socialization rather than biology



(Lorber, 2001). Moreover, daily interactions both enforce behavioral expectations and recreate boundaries between men and women (Lorber, 2001). Indeed, social constructionists note that for all people in our society, there are social definitions for being male and female, masculine and feminine; these definitions create expectations that influence gendered behavior (Goffman, 1977). Gender is not a static entity or identity, but rather a dynamic and continual state of accepted norms and behaviors learned, enforced, and reinforced through social interactions (Goffman, 1977; Lorber, 2001; West & Fenstermaker, 1995; West & Zimmerman, 1987). West and Fenstermaker (1995) state, “doing gender involves a complex of perceptual, interactional, and micropolitical activities that cast particular pursuits as expressions of manly and womanly ‘natures’”(p. 9). Importantly, gender is not the same as sex - it is not essential or biological (Lorber, 2001). West and Zimmerman (1987) stipulate that there are three differentiating groupings: sex, sex categorization, and gender.

Accordingly, *sex* is a determination made through biological, yet socially accepted, criteria that in our society is determined by genitalia (West & Zimmerman, 1987, 2009). In the Western world, sex and gender are binary statuses; an individual is either male or female (Kelan, 2010; Pullen & Simpson, 2009; West & Fenstermaker, 1995). Kelan (2010) notes that this view of gender has been criticized and that, “gender is like an empty binary construction into which meaning can be poured” (p. 188). Still, no other category is socially, legitimately recognized in the United States or other Western countries. Therefore, sex, in our society, remains a binary status. *Sex categorization* is achieved through the application of one’s sex determination and oftentimes stands as a proxy for one’s sex (i.e., male or female) (West & Zimmerman, 1987). Furthermore, sex

categorization is the appearance of one's sex, and it outlines the expectations of an individual accordingly (i.e., masculine or feminine). Individuals act out the expectations of their sex categorization through their gendered behavior (e.g., appropriate activities for individuals with regard to their gender as either male or female – for instance, men being aggressive and women nurturing children).

*Gender*, unlike sex and sex categorization, is a process. It is the activity of managing one's behaviors and attitudes in a socially appropriate manner due to one's sex and sex categorization (West & Zimmerman, 1987). Gender is what an individual does, not who s/he is (West & Zimmerman, 1987). Since gender is seen as a continual process, it is argued that it is (re)produced by interactions with others (Kelan, 2010; Lorber, 2001; Pullen & Simpson, 2009; West & Fenstermaker, 1995; West & Zimmerman, 1987). West and Zimmerman (1987) refer to this process as “doing gender.” The concept, of “doing gender” follows a constructionist approach, meaning it is based on the idea that interactions are the foundations of our socially defined world (Kelan, 2010; Lorber, 2001). It is these interactions among individuals in our culture, and expected behaviors which are (re)produced through encounters which construct our views of gender. Moreover, some believe that gender is relevant in shaping all situations at all times, especially gender in combination with race and class (Kelan, 2010).

Goffman (1977) noted that masculinity and femininity are viewed as “prototypes of essential expression” (p. 75). In fact, many aspects of our lives and behaviors may be labeled as either feminine or masculine. Moreover, West and Zimmerman (1987) note that gender is not just a coincidence, but rather an all important factor in social interactions when they state,

Gender is not something that happens in the nooks and crannies of interaction fitted here and there and not interfering with the serious business of life. While it is plausible to contend that gender displays – construed as conventional expressions – are optional, it does not seem plausible to say that we have the option of being seen by others as male or female (p. 130).

Society expects men and women to behave in certain ways because they are men and women. These expectations will change over time, however, since gender is fluid and dynamic and is constantly negotiated and renegotiated through social interactions (Chan et al., 2010; Kelan, 2010).

Over time, there have been changes to the norms that define gender and sexuality that have broadened the meanings and conditions of actions and behaviors attributed to these concepts (Kelan, 2010). For example, for several hundred years women, specifically white, middle-class women, were expected to stay at home and work within the household (e.g., household chores, child care tasks). Yet, over the last several decades, more women have entered the workplace in record numbers. During this time, an expectation of appropriate work and behaviors for women have progressed to a point that now it is acceptable for all women to enter the workforce (Morash & Haarr, 2012). Still, not all jobs are believed to be appropriate for women (i.e., policing, construction work), and while it is important to note that our concept of gender is constantly changing, one should also remember that gender is a larger function of society rather than just an individual role. Individual men and women behave in gender appropriate ways because it is expected of them by society. As argued by West and Fenstermaker (1995), gender is “a mechanism whereby situated social action contributes to the reproduction of social structure” (p. 21). Therefore, individuals behave according to societal expectations, and

social expectations are reinforced through individual behavior. One mechanism through which this process is accomplished is during the early socialization of children.

Gendered expectations and how to properly “do gender” are taught to all members of our society. Two institutions through which children are gendered are the family and school (Lorber, 2001). Children are often taught from an early age what it means to be a boy and what it means to be a girl (Lorber, 2001; Miller, Lurye, Zosuis, & Ruble, 2009). Furthermore, they are taught that there are consequences for behaving in ways that are outside of socially accepted gender expectations (i.e., ridicule and mocking). Miller and colleagues (2009) note, “from birth, children are surrounded by information that communicates the beliefs and behaviors that are considered appropriate for each gender group” (p. 870). One of the first places where children are taught gendered expectations is in the home, where men and women divide labor along stereotypical lines with women often doing more of the housework (i.e., laundry, dishwashing, cooking) and men completing more of the outside tasks (i.e., car or lawn maintenance; Lorber, 2001). Children are also taught gendered behavior in schools, where girls and boys are responded to differently and according to their gender (Lorber, 2001).

As I noted earlier, gender is not what someone is or something one has achieved, rather it is something that is continually practiced on a daily basis throughout one’s lifetime (Shield & Diccio, 2011). During childhood, boys are typically taught to value physical strength or appropriate skills characteristic of masculinity such as construction or problem solving (Goffman, 1977; West & Zimmerman, 1987), whereas girls are usually taught to value their appearance (West & Zimmerman, 1987). Once learned, these attitudes are reinforced both in the home and in school (Lorber, 2001). Throughout their

adolescence and adulthood, individuals learn and employ “appropriate” attributes and behavior according to their gender (Shield & Diccico, 2011).

Some scholars have criticized the works of West and Zimmerman (1987) and West and Fenstermaker (1995) and their view of gender (e.g., Collins, Maldonado, Takagi, Thorne, Weber, & Winant, 1995). These critics note that West and Fenstermaker (1995) focus more on micro-level interactions in everyday life, than on larger, macro-systems that influence our views of gender (Collins, 1995; Weber, 1995). Additionally, these scholars note that race, class, and other factors shape the meanings and expectations associated with gender. Furthermore, race and class are important social statuses that work in conjunction with gender in shaping individuals’ social position within society (Collins, 1995). Furthermore, in order to truly understand a person’s social position, gender along with race and class must be examined, and they must be examined at both the individual- and societal-level. Weber (1995) notes that West and Fenstermaker (1995) over-emphasize micro-level interactions, and in doing so, ignore social structures (i.e., institutional arrangements, community structures, and family systems) that are important in influencing the social positions of individuals. This scholarship acknowledges that “race, class, and gender are pervasive social arrangements” (Weber, 1995, p. 501) that influence day-to-day behaviors.

Consequently, a growing number of feminist scholars have evolved from solely focusing on gender in explaining women’s oppression and treatment in society to looking at the simultaneous effects of race, class, and gender (i.e., Black and critical race feminists and multiracial or multicultural feminists; Burgess-Procter, 2006; Collins, 2000; Lorber, 2001). For example, Burgess-Procter (2006) notes, “intersectionality

recognizes that systems of power such as race, class, and gender do not act alone to shape our experiences, but rather, are multiplicative, inextricably linked, and simultaneously experienced” (p. 31). These systems work together to construct a social location for individuals, which when taken together produces varying types of oppression depending on one’s membership in the multiple systems of domination (Lorber, 2001). It is not possible to disentangle gender from each of these other systems, but gender can be understood within the context of them (Barak, Leighton, & Flavin, 2010; Lorber, 2001; Shield, 2008). Thus, it is important to recognize that one system (i.e., gender) is not solely responsible for expectations of how people should act, but rather multiple systems of dominance and oppression shape behavioral expectations. As is the case with gender, race and class are also social constructions that are dynamic, continuously changing and evolving, and shaped through interactions over space and time (Shields, 2008; Weber, 1998; Weber, 2010).

Intersectional research has also criticized feminist scholarship for focusing on the experiences of white, middle-class women (Collins, 2000; Shields, 2008; Weber, 1995) and failing to acknowledge that these experiences do not represent the lived experiences of all women. Intersectional research notes the importance of understanding systems of privilege and oppression through multiple factors rather than one. This research also argues the importance of understanding the context of groups and their situations in systems of privilege in order to understand societal expectations of behavior and individuals’ social environments (Shields, 2008). When we talk about issues of dominance and oppression, including differentiated power between men and women, we need to recognize other factors which influence power and privilege as well, especially

when these factors help build and sustain controlling images (Shields, 2008; Collins, 2000).

Controlling images, as defined by Collins (2000), are images used to justify oppression. These images are typically based on sexist and racist ideologies and are found throughout our social structure in the U.S. (Collins, 2000). For instance, two controlling images of Black women are the “black matriarch” who dominates the Black family and is in control of the household, and the “mammy” who works for a White family and becomes a substitute or second mother to the White children (Young, 1986). These controlling images and the ideologies that influence them are often seen as “natural, normal, and inevitable” (Collins, 2000, p. 5), and perpetuate myths we hold about how people should behave and act. These images which are found throughout society influence our perceptions of how individuals “fit” in society. In the paragraphs below, I discuss expectations of masculinity and femininity, and how they vary by race and class.

### *Masculinity*

Men are considered the standard by which all else is measured in our culture and society (Franklin, 2008), particularly white, upper-/middle-class men. Men also command the public sphere, or activities conducted outside the home (Furnham & Mak, 1999; Goffman, 1977), meaning that men are expected to leave the home and join the workforce. Additionally, men have been perceived as the “breadwinners” for the family because of their freedom to venture out of the private sphere of the home and into public. Besides being gainfully employed, there are additional societal and behavioral expectations for men (e.g., assertive, rational, self-sufficient, and/or strong).

Men in U.S. society are supposed to be strong, in control, rational, autonomous, and they should be able to “stand apart” from other members of society on their own merit (Carpenter & Trentham, 1998; Franklin, 2008; Gilligan, 1993; Pullen & Simpson, 2009). Certain behaviors are associated with being more masculine and, therefore, more appropriate for men. Men are supposed to be more rational than women; they are also supposed to be able to keep a “cool head” in all situations (Pullen & Simpson, 2009). Men are also deemed more competent, disciplined, and authoritative than women in both the public and private spheres (Furnham & Mak, 1999; Pullen & Simpson, 2009), hence they often comprise the majority of legislators and lawmakers. Additionally, men are seen as more physically aggressive than women and are thought to be more physical in nature because men are supposed to enjoy horseplay and various other outdoor and/or physical activities (Goffman, 1977; Miller et al., 2009).

In regards to career expectations for men, the most favorable role for men in our society is that of the businessman because men in business positions are seen as in control, autonomous, and rational – all the characteristics that embody masculinity (Vonk & Ashmore, 2003). Men are also deemed appropriate for work that is considered violent, dangerous, and risky such as policing, correctional work, construction work, or mining (Morash & Haarr, 2012). Hegemonic masculinity signifies the acceptance of heterosexual male dominance in our society and is consistent with the views that men are suited for careers where they must be aggressive, strong, and assertive (Morash & Haarr, 2012). Again, careers as construction workers, handymen, businessmen, and police officers are all deemed appropriate for men. These career paths are considered traditional paths because they emphasize masculine qualities.



However, many men are blocked from entering these traditional career paths due to either class or race. For example, historically, Black men have been forced into occupations where they do not make enough money to sustain their family (Collins, 2000), and cannot achieve the masculine goal of being the “breadwinner.” These occupations often consist of low-skilled manufacturing jobs, and while these occupations pay more than jobs that Black women have been able to find (i.e., domestic jobs, service-industry jobs), they are often unstable and temporary positions (Collins, 2000). Collins (2000) notes that the instability of employment for Black males post-Civil War led to many Black men becoming employed through the drug trade of the 1980s – which was, itself, divided along gendered lines with males and females performing specific tasks. Additionally, Miller (1998) notes that robbers are disproportionately Black males and indicates this may be one way urban youth are accomplishing their gender – through being tough and masculine. Both of these career-types criminal and non-criminal, while not the ideal “business-man” role for men, still embody many traits that are deemed masculine, such as skill (i.e., manufacturing), and the need to be strong, aggressive, and ready to face danger (i.e., the drug trade; robbery). Therefore, it is important to note how these roles of masculinity vary due to social factors (i.e., class and race) in determining appropriate vocations. It is also important to note that not all men enter traditional career paths or vocational trades.

Some men enter non-traditional career paths, or occupations that are generally seen as more suitable for women (i.e., nursing, teaching), even though they are generally regarded as less prestigious, offer lower pay, and may cause them to face stigma and shame (Pullen & Simpson, 2009; Simpson, 2005). Research has found that men who

work in these job fields often face social consequences for their decisions (Pullen & Simpson, 2009; Simpson, 2005). Entering a non-traditional career path is one way that men may violate gender norms however it is not the only way that they might do so. They might violate their masculinity by being unemployed, lazy, or by staying home with their children, or by being homosexual (Pullen & Simpson, 2009; Simpson, 2005; Vonk & Ashmore, 2003). Men who fit these descriptions often face consequences or repercussions.

One frequent consequence for violating masculinity is that men are mocked or are labeled with a feminine attribute. Men may experience feelings of embarrassment, discomfort, and shame when they violate gender norms, especially if their actions are questioned by their friends, family, or other loved ones (Simpson, 2005). When confronted with this shame, embarrassment and/or resistance, men may become aggressive or overly assertive (Pullen & Simpson, 2009), presumably in an effort to compensate for perceived challenges to their masculinity. Hence, there are many reactions to these consequences, some of which might focus on trying to meet an appropriate gender standard or reinforcing one's manhood by behaving in traditionally very masculine ways. Women, too, have prescribed roles, behaviors, attributes, career paths, and consequences based on their gender.

### *Femininity*

Goffman (1977) noted in the late 1970s that the social roles of men and women tend to give women lesser rank and power, restrict women's use of public space, and may leave women focused on their domestic duties. Females are typically associated with less status and authority than are males (West & Zimmerman, 1987). Moreover, women,

specifically white, middle-class women (or “good” women), are seen as precious, ornamental, fragile, passive, emotional and ill-suited for various tasks that require trained skill sets because they are not seen as capable or as competent as men (Goffman, 1977; Young, 1986). This may be one reason that women are generally expected to do more work in the private sphere than men (West & Zimmerman, 1987). Additionally, two principle feminine attributes for women are that they should be nurturing and gentle, which is why housewives are typically viewed most favorably of all women in society (Haddock & Zanna, 1994; Morash & Haarr, 2012; Vonk & Ashmore, 2003).

Women who subscribe to traditional feminine attributes are highly regarded by both men and women alike (Haddock & Zanna, 1994) for their appropriate gender behavior. Traditional feminine attributes include characteristics such as compassion, emotion, empathy, passivity, supportiveness, dependence, vulnerability, and fragility (Goffman, 1977; Morash & Haarr, 2012; Young, 1986). All women should embody these characteristics in their attempts to “do gender.” Furthermore, these attributes dictate appropriate vocations for women, along with appropriate actions and behaviors.

Historically, women have been expected to stay at home to maintain the household and take care of the kids. However, this was not an option for *all* women. Black women, in particular, have been constant figures in the public sphere dating back to slavery. During the slave era, Black women were often expected to either perform the same work as men or work in the homes through domestic service (Collins, 2000). After the Civil War, many Black women were often required to leave their home to find employment to maintain the household (Collins, 2000). This work frequently included domestic work, which paid considerably less than other jobs in the public sphere, but

were often very stable for these women (Collins, 2000). Women working in these positions often embodied the image of a “mammy” who was seen as a substitute mother for the children of the white family for whom she worked (Young, 1986). Again, however, the work of Black women during this time still was consistent with many of the traditional gender expectations of the era– these women worked in homes as domestic servants rather than in manufacturing jobs or other careers in the public sphere.

Over the last 50 years, we have witnessed an increasing number of women, particularly white and middle-class women, leaving the private sphere to seek gainful employment outside the home. Yet, even when women do work outside the home, they tend to do more housework and childcare duties than their husbands (Blair, 2013; West & Zimmerman, 1987), and this is true for women of all races (Collins, 2000). Despite these trends, women who do leave the home and work in the public sphere are viewed less favorably than housewives by our society (Vonk & Ashmore, 2003). Therefore, even though it is more acceptable for women to have careers, it is more favorable for women to fulfill the role of the housewife and “stay at home mom,” unless these women are not from the middle-class or white. For example, the term “welfare mother” or “welfare queen” has been used as a class-specific controlling image (Collins, 2000). This image was developed to portray poor women, especially poor Black women, who take advantage of social welfare benefits available to them (Collins, 2000). This is a negative image for many in our society, because we see the mother, who may be staying home with her children – a traditionally positive feminine value – as having rejected conventional values of hard work because she is using a government service to which she is entitled to stay home with her children rather than working (Collins, 2000). This

image illustrates how the image of a stay at home mother is oftentimes both race and class specific.

Furthermore, Collins (2000) notes: “motherhood as a privatized, female ‘occupation’ never predominated in Black civil society because no social class foundation could be had to support it” (p. 5). This highlights the reality of many women who were not privileged through race or class. Even though many of these women were expected to abide by gender stereotypes based on the white, middle-class ideal, many of these women were unable to conform to these expectations. As such, they violated the ideal of femininity by entering the workforce, even though many of the jobs they performed were domestic service occupations and despite the fact that they were leaving home to work in what were considered to be more appropriate occupations according to their gender.

Some traditionally acceptable career paths for women have included nurturing occupations such as nursing, teaching, librarianship, and domestic labor (Collins, 2000; Simpson, 2005). Women in these vocations are still viewed as 'good' women because these jobs are consistent with feminine attributes. However, like men, not all women choose a traditional career path. Some women enter job areas that have been traditionally considered masculine such as business, military, and criminal justice occupations. Research indicates that women may enter these non-traditional occupations to advance their careers because non-traditional careers for women often come with more prestige, higher salaries, and more opportunities for advancement (Simpson, 2005). These careers, though, may also come with more harassment and discrimination because their male

coworkers may feel that women do not belong in these male professions (Chan, Doran & Marel, 2010).

Most careers in the field of criminal justice have been historically viewed as masculine occupations (i.e., police officers, attorneys, judges, and correctional officers). Policing and correctional work, especially, are considered masculine because they are thought to be risky and dangerous (Morash & Haarr, 2012), particularly because both fields require (potentially dangerous) interactions with criminals (Chan et al., 2010; Jurik & Halemba, 1984). Research examining women's experiences working in these typically male-dominated professions such as policing and corrections (e.g., Jurik and colleagues) emerged during the 1980s, when women began entering these professions in larger numbers. While early research has found that women who have entered the field of policing have been harassed and discriminated against by both citizens and their fellow officers (Belknap, 2007), more recent research has shown that the field of policing has become more accepting and less discriminatory towards women (Morash & Haarr, 2012). This has also been the experience of female correctional officers who also faced harassment, discrimination, and resistance, largely by their co-workers (Jurik & Halemba, 1984; Martin & Jurik, 1996). In sum, occupations in criminal justice are often seen as masculine and non-traditional careers for women. Women in these particular jobs have faced harassment and discrimination for their choices and their violation of gender norms, and although research suggests that these experiences have waned, there still remains some resistance to women working in these job areas (Martin & Jurik, 1996).

Similar to men, women who work in non-traditional jobs violate gender norms and experience consequences. Kelan (2010) states that "it is exactly in 'acting gender

inappropriately' that women confront multiple problems in masculine work areas.

Women are punished for not being woman enough and so gender accountability, far from being ignored or disrupted, is redoubled" (p. 184). As with men, the consequences of defying gender norms might cause women to try and act more feminine. Women may also face public shame and stigma as well. When women deviate from or violate traditional gender roles, they are viewed negatively and suffer social consequences such as peer rejection and humiliation (Miller et al., 2009; Vonk & Ashmore, 2003).

Additionally, there are many ways women can violate gender norms, aside from their career choices. Women who are sexually active, feminists, lesbians, smart, and liberated or independent women can all be seen as violating their gender (Haddock & Zanna, 1994; Vonk & Ashmore, 2003). Many qualities we as a society value and believe are necessary for adulthood such as autonomy, decisive decision-making, and responsible action are all considered masculine qualities and undesirable for women (Gilligan, 1993). For instance, many Black women have been stigmatized as being overbearing, overly assertive, and too independent through the image of the 'matriarch' (Collins, 2000; Young, 1986). This view of the Black matriarch has served as a control over both White and Black women because it shows what happens when patriarchy is challenged – women wind up alone, in poverty, and stigmatized because they are not feminine (Collins, 2000; Young, 1986). Another way women may violate femininity is through the commission of a crime. Criminal women are viewed more negatively than criminal men because they have not only broken criminal codes, they have also defied what it means to be a woman (Butler, 1997; Schram, 2003). Not all criminal women are treated similarly, however, with previous literature noting that Black women are seen differently than other

women (i.e., White women) in the criminal justice system (Young, 1986). The following section will explore the differential treatment of offenders in the criminal justice system due to social factors such as gender, race, and class. This discussion begins by focusing on the masculine history of criminology and criminal justice, and then discusses the emergence and utility of intersectional research in studying the treatment of offenders by the criminal justice system.

### **Gender, Criminology, and Criminal Justice**

The field of criminology and criminal justice is heavily masculine and has customarily focused on male offenders. Males make up the majority of criminals and some criminologists have even suggested that committing crime is the ultimate act of masculinity (Britton, 2004). This is one reason why criminology remains one of the most thoroughly masculinized of all the social science fields (Britton, 2004). Indeed, Britton (2004) notes, “given men’s overrepresentation as offenders and victims, the screaming silence in criminology around the connection between masculinity and crime has always been something of a paradox” (p. 64). In the field of criminology and criminal justice, men (i.e., the majority offender population) have been used as the standard in the definition of crime and they have also been used as the guide for policies utilized to control crime (Franklin, 2008).

The field of criminology, quite like other research fields, is heavily influenced by the male standard. For much of its history, criminology has developed explanations for male behavior and male delinquency (Belknap, 2007; Franklin, 2008). Theorists have implicitly adopted the male life as the norm and have tried to fashion women out of the masculine pattern or fit women into the same “masculine” box (Gilligan, 1993).



Importantly, this has occurred in very overt ways and out of ignorance when studies have failed to acknowledge that male samples were used to examine behavior and test theories (Daly & Chesney-Lind, 1988). When theorists attempted to explain female offending it was often based on negative, stereotypical images of women, or it was assumed that women should fit the general theories of crime based on the patterns observed for men (Daly & Chesney-Lind, 1988). This was especially true of biological and psychological theories, which looked at individual character flaws rather than broader social, economic, and political realities that female offenders face (Schram, Koons-Witt, & Morash, 2004).

In their classic article, *Feminism and Criminology*, Daly and Chesney-Lind (1988) argue that gender is relevant to the field of criminology. Moreover, theoretical explanations of crime must address two important questions: (1) what explains the gap in offending between men and women, and (2) can theories developed to explain men's offending be used or altered to explain women's offending? Flavin (2001) similarly notes that gender is relevant when examining the offending of *both* men and women. She states:

Studying how men and women accomplish masculinity and femininity prompts one to consider how social structures constrain and channel behavior that, in turn, may influence a person's criminal behavior or law-abiding behavior (p.273).

Miller (2002) also explores how gender and explanations of gendered behavior in the commissions of crimes, particularly violent crimes, work to broaden our understanding of crime and gender. She notes that sometimes females “cross” gender in their commissions of crime and criminal life, and adopt tough, masculine ideologies and action. However, at other times, women draw on their sexuality and men’s actions and attitudes toward them as females to commit crimes (Miller, 2002). It is important then to note that gender

influences crime in many ways and not all commissions of crime are highly masculinized. Additionally, Miller (2002) argues that when examining both male and female crime, it is significant to note other salient structures of a person's identity (i.e., race, class, sexuality, generation). The importance of multiple intersections of privilege and inequality for individuals within the U.S. and the criminal justice system must be recognized. Yet, even though criminologists have noted the need for examining the effects of multiple social systems, this recognition is quite recent (Barak et al., 2010; Burgess-Procter, 2006; Miller, 2002). While a considerable amount of progress has been made in the study of gender, race, intersections of inequality, crime, and criminal justice since the 1960s, further research is warranted in order to address these questions and as well as many other unresolved issues.

Gender, according to some criminologists, is the strongest predictor of criminality (Belknap, 2007; Flavin, 2001). Gender is not only relevant to the study of criminology but is also relevant when it comes to correctional policies, management, and programming. As I noted in the previous chapter, the majority of offenders under the supervision of the corrections system are men (Glaze, 2010; Glaze & Bonczar, 2010; Greenfeld & Snell, 1999; Simon & Ahn-Redding, 2005), therefore policies and programs are used to address this specific inmate population. Managing and imprisoning the majority population (i.e., males) has influenced the incarceration of women in very fundamental ways from the uniforms they wear, to the barbed wire and security towers that circle their facilities, and the programming that they have access to while serving their sentence. All too often, the smaller female offender population is treated the same as the much larger male offender population, but the extent to which this occurs varies from

state to state. Additionally, the treatment of women within the correctional system arguably varies due to differences among women themselves (i.e., race/ethnicity and class; Barak et al., 2010) For example, it has been argued that Black women are treated more like men than White women, and while all women are seen as weak and less dangerous to society than men, White women are seen as weaker and less dangerous to society than are Black women (Young, 1986). This has resulted in harsher sentences for Black women, compared to their White counterparts (Young, 1986). Therefore, even though all women are treated somewhat differently from men, not all women are treated similarly.

### **Gender and Correctional Programming and Policies**

While it is imperative to understand how the larger society reinforces social norms and controlling images, it is a focus in the current study to examine these issues within the criminal justice system. The field of corrections has historically used the male standard to manage and supervise its offender population and many of these policies continue to be used. Most correctional policies are established by administrators, specifically white, upper/middle class, heterosexual males, for the dominant correctional population: males (Franklin, 2008). Men have and still currently comprise the majority of incarcerated offenders, representing over 90% of inmates in U.S. prisons (Belknap, 2007; Simon & Ahn-Redding, 2005). Women are underrepresented in the correctional population (Britton, 2004), and policies focusing on women are typically limited (Rafter, 1990). Nevertheless, stereotypes and ideas about masculinity resemble core values of society in terms of what is good and desirable (Franklin, 2008), and this influence extends to corrections.

Although the correctional system primarily handles male offenders, recent trends in female incarceration rates reveal an unprecedented increase in the number of women entering the criminal justice and correctional systems, particularly non-White, impoverished women from urban areas (Belknap, 2003, Covington & Bloom, 2006; Davis & Shaylor, 2001). Franklin (2008) notes that, “greater numbers of women are more regularly coming into contact with an organization that has been traditionally designed by men to punish and treat other men” (p. 341). Consequently, their treatment is generally unsuited to what they need. One source of inferior treatment, as noted by Rafter (1989), has been the “nature” problem. She found that treatment was shaped by structures of relationships between sexes, which included stereotypes about women’s “true nature” (i.e., expectations about “traditional” women) and the realities of gender roles. Moreover, these expectations were highly racialized and based on the White, middle-class perspectives of appropriate female behavior (Rafter, 1990). These class and race based gender role ideas and stereotypes, for example, influenced the types of vocational programming made available to women (Rafter, 1989, 1990).

Furthermore, the criminal justice system has consistently been concerned with the sexuality of women and girls (Chesney-Lind & Sheldon, 2004; Franklin, 2008; Rafter, 1990). For example, girls in early family courts were continuously charged with “immorality” or “waywardness” which often meant there was evidence of sexual intercourse (Chesney-Lind, 1997). When girls were charged with “immorality,” the court would utilize vigorous methods of gathering evidence, which might involve examinations of the girls by doctors or intense interrogations by police and social workers (Chesney-Lind, 1997). Additionally, girls who were charged with “immorality” were more likely to

be sent to training schools than boys who faced similar charges. These training schools were often obsessed with female sexuality, and tended to limit the girls' contact with all men. In the 1950s, juvenile courts in California became preoccupied with the possibility of girls' having sexually transmitted diseases, and began giving physical exams and testing for diseases for all girls charged with status offenses (e.g., sexual misconduct; Chesney-Lind, 1997). More recently, Gaarder, Rodriguez, and Zatz (2004) noted that girls within the juvenile justice system are often seen as promiscuous and manipulative by the staff and case-workers who interact with them.

Adult women have had similar experiences in the criminal justice system. Those who were believed to be sexually promiscuous were and continue to be harshly treated by the criminal justice and correctional systems (Davis & Shaylor, 2001; Rafter, 1989). For instance, the criminalization of sex work has resulted in thousands of poor women coming into the criminal justice system and prison (Davis & Shaylor, 2001), and incarcerated women were often blamed by correctional officers for sex scandals and mischief that occurred in early prisons (Rafter, 1989). This has often resulted in a sexual double standard being applied to females and males by those working in the system.

Women who violated gender norms were deemed as threatening to the social order because they defied what it meant to be a "good" citizen and a "good" woman (Butler, 1997; Schram, 2003). This is yet another reason why women were punished more harshly by the system (Franklin, 2008; Sokoloff, 2005); not only were they criminals, they were also "bad" women. Even during the development of reformatories, facilities were built on the concept that women should be treated and reformed from being "bad" women to "good" or at least "better" women by teaching them homemaking

skills such as sewing and cooking (Belknap, 2001; Rafter, 1989, 1990). Again, it is important to remember that these views of women as either "good" or "bad" were narrow definitions based on the beliefs of White, middle class female reformers. As noted by Young (1986), Black women were not classified as good or bad, because the expectations of Black women were substantially different from those of White women, therefore, reformatories were often guided by misappropriate notions of femininity and reformation (Rafter, 1990). Oftentimes many of the early reformatories would not accept women of color, especially during the first few years of operation, and solely focused their efforts on reforming White women (Rafter, 1990). This further illustrates the racial and class-based treatment of women within the correctional system – White women were afforded treatment in reformatories, albeit stereotypical and in line with middle-class values of womanhood, while Black women and other women of color were sent to custodial institutions where programming was greatly limited and the focus was one of punishment and control (Rafter, 1990).

Some scholars and practitioners continue to maintain that corrections and the programs it offers are still influenced by stereotypes and other controlling images (Franklin, 2008; Lee, 2000; Morash & Robinson, 2002). Today, women's institutions continue to teach programming that teaches women domestic and childrearing classes (Bosworth, 2003; Franklin, 2008; Lee, 2000; Morash et al., 1994), and while it is true that women are typically mothers and primary caregivers (Belknap, 2007; Bloom et al., 2005; Glaze & Maruschak, 2010; Koons-Witt, 2002), these are not the only areas in which women need viable programming. As I discussed in the previous chapter, women have multiple needs that programming should address such as substance abuse issues,

education, and employable skills (Belknap, 2010; Bloom et al., 2005; Greenfield & Snell, 1999; Mumola, 2000; Schram, 2003; Schram et al., 2006).

Regardless of these needs, there have been fewer vocational and educational programs in female prisons in comparison to male facilities, and the programming that is available is often inferior or not as well developed and/or staffed as men's (Lee, 2000). These programs often prepare women to be wives and mothers and to be dependent on male "breadwinners" (Franklin, 2008). Encouraging women to be dependent on males is troubling since we know that many women have been dependent on abusive and/or criminal men and that these dependencies can cause many problems for women (DeHart, 2008). There is limited programming available to teach women legitimate skills for wage labor (Franklin, 2008). Women in prison (and jails) are often viewed unfavorably by correctional officers as well, especially male officers, who have expressed negative perspectives of women offenders, labeling them "manipulative," "too hard to supervise" and "crying and whining too much" (Morash, 2010, p. 1; Morash & Robinson, 2002). Notably, this view of criminal women is not solely based on those who are incarcerated, but probation officers have also reported negative views of females as manipulative, promiscuous, and needy (Gaarder et al., 2004). Thus, this seems to be an overarching view of women within corrections.

As I discussed in the previous chapter, the correctional system has used a gender blind approach at different times in history. Scholars have noted that gender blind policies which purport to treat men and women similarly, regardless of gender, have disproportionately affected females (Franklin, 2008; Sokoloff, 2005). Morash and Robinson (2002) noted in their study on correctional administrators' view of gender

arrangements that when administrators believed that there were no differences between males and females, there was a lack of gender-responsive programming within that facility. Sokoloff (2005) maintains that because of calls for equality which emerged in the form of gender blind policies in the criminal justice system “women, so to speak, have had ‘the book thrown at them’ for demanding equality in courts, at school and work, and in the home” (p. 128). This has resulted in harsher treatment of women and has translated into more certain prison sentences, lengthier sentences, and other negative consequences (Daly & Chesney-Lind, 1988; Davis & Dent, 2001). Furthermore, equal services and programs promoting the same treatment among genders usually mean the same services and programs for male and female inmates, and programs that were created for male inmates (Grana, 2010; Van Wormer, 2010). Rarely are these programs evaluated for their appropriateness for women, and considering that the male standard of treatment is harsh and based on control rather than rehabilitation, these policies and programs offer little benefits for female prisoners. Criminologists have cautioned that women will always lose with a gender blind system of equality because they will be measured against the male standard and that this approach fails to meet the needs of women offenders (Belknap, 2003; Chesney-Lind, 2004; Morash & Schram, 2002; Van Wormer, 2010).

Gender-responsive policies have also been enacted in an attempt to address women within the correctional system. These policies emphasize the fact that female offenders need and benefit from an extensive array of gender-relevant services (Bloom et al., 2005; Morash, 2010; Ritchie, 2001). Scholars examining programming for women also note that effective programs simultaneously address multiple problems for women (i.e., self-esteem, history of trauma and abuse, pregnancy, parenting, physical and mental



illness, substance abuse; Morash, 2010). Additionally, Covington and Bloom (2006), two prominent gender-responsive scholars, have argued that gender-responsive services should acknowledge key differences between men and women, but they also must recognize that there are key differences among women themselves. They note that gender-responsive treatment should be individualized and guided by the differences in women because of their race, sexuality, age, and other factors (Covington & Bloom, 2006).

Morash (2010) and others have noted two unintended or negative consequences of gender-responsive programming are that some of these programs actually increase punishment and/or control over women, and some programs reinforce stereotypical behavior for women (i.e., homemaking, parenting) rather than provide them with new opportunities. This continuation of stereotypical programming might occur when correctional administrators' and workers acknowledge gender differences between men and women, but heavily focus on the parental responsibilities of women to the point of ignoring all other needs (Morash & Robinson, 2002). Morash and Robinson (2002) found in their study of correctional administrators that when they recognized gender differences and the need for programming to be responsive to these differences, administrators often fell into one of two general groups: gender maintenance or gender issues. While both of these types of administrators recognized unique differences between male and female inmates, the gender maintenance group of administrators utilized traditional programming that reinforced gender stereotypes, while the gender issues group of administrators felt that other issues women face were equally important (i.e., abuse history, codependent relationships, mental health issues; Morash & Robinson,

2002). Current scholars and researchers support and promote gender-responsive policies and programming as the best alternative to gender-blind and male-dominated programs and policies, because while these programs do at times promote “traditional” skills which allow women to take care of themselves and their children, gender-responsive programs are also concerned with an array of other needs that women usually have (Bloom et al., 2005). More recently gender-responsive practices have worked to address the needs of all women, while taking into account how their race, class, sexuality, or any other factor might influence their needs or risk factors (Covington & Bloom, 2006).

### **The Current Study**

The criminal justice system has consistently struggled with how to address women offenders. In corrections, where women represent a clear minority in the inmate population, they have often been managed and supervised using the same policies and programming used in male prisons. In the very first prisons, because they were housed together, they experienced the same brutal conditions and sanctions as men (Butler, 1997; Rafter, 1990). Additionally, in the early prisons, women often received stereotypical treatments and services, if any were provided at all. During the 1960s and 1970s both scholars and female prisoners pushed for equality within the corrections system (Kruttschnitt & Gartner, 2003; Laddy, 1996). Much of this movement initially involved equal access to correctional programming for women offenders, and later the movement involved a focus on gender-specific policies and programs to meet the respective needs and differences between male and female prisoners (Bloom et al., 2005). More recently, scholars have argued that women are not a monolithic group but instead experience oppression and control differently depending on their race, class, age, and sexual

identities and correctional programming reflect these differences in female prisoners (Covington & Bloom, 2006).

My discussion of women in corrections highlights the fact that their history in the corrections system has had a profound effect on how they are currently viewed and managed. Significant progress has been made in terms of their access to quality programs that appear to address their particular experiences and pathways to crime. It continues to be important, however to consider that disparate and/or stereotypical treatment may remain (Morash et al., 1994). The purpose of the current study is to examine correctional programming in the U.S. and disparities or differences in the availability of and participation in these programs using national-level survey data. Using Morash, Haarr, and Rucker's 1994 study as a starting point, I examine both program availability and program participation for male and female state prisoners. I address similar questions as Morash and her colleagues, but do so with a slightly different analytic strategy.

For the first part of my study, I determine if there are important differences in available correctional programming for incarcerated men and women, and the extent to which programming options might vary by facility characteristics. Additionally, I determine the degree to which programming might be considered gender-specific and, in some cases, be stereotypical for men and women. I look at differences between male and female prisons in terms of the types of programs offered and consider whether the programs that are offered address needed areas for men and women inmates as well as examining participation in available programming and whether this participation is seemingly influenced by "traditional" gender expectations. Finally, I examine the relationship between imprisoned male or female offenders and the availability of specific

types of programs and also the level of programming (i.e., low, medium, or high amounts of programming) in broader programming areas.

For the second part of my study, I determine if male and female prisoners are participating differently in correctional programming and if participation in programming varies by facility characteristics. I then consider whether male and female prisoners are more likely to participate in certain work assignments that are stereotypically linked to their own gender and if participation in these work assignments might be conditioned by whether the inmate is Black or White. For example, I look at whether female prisoners are more likely than are male prisoners to be assigned to work as a janitor, a cook, or in the laundry or medical areas (i.e., “traditional” feminine work roles), or if White women are more likely than Black women to be assigned “traditional” feminine roles. Prior research suggests that these stereotypical views of women, and men for that matter, may not hold across all racial groups (Young, 1986). Therefore, the current study not only considers the direct effect of gender on program participation, but also considers the simultaneous effects of gender and race on both programming participation and work assignments.

Finally, I examine whether inmate gender and/or a “recognized need” directly influences program participation while controlling for other inmate-and facility-characteristics. Additionally, I also consider the interaction effect of gender and race on program participation. In the survey data used for this study, inmates are asked about their experiences or backgrounds in a number of areas (i.e., drug use, mental illness, education level, employment history, dependent children, etc.). A “recognized need” represents an area where inmates self-identified a history or deficiency that would likely

require programming or services. The current study considers whether any of the “recognized needs” influences participation by inmates in related programming.

In sum, the current study aims to provide a better understanding of both the availability of correctional programs for inmates and also differences in program participation between male and female prisoners. My intent is to add to the growing body of literature on corrections and programming by shedding light on the current state of prison programming across the U.S., filling a void in existing literature.

## CHAPTER FIVE: METHODS

In this chapter, I describe my research questions and my plan to address these questions through two separate studies. The first study examines program availability in U.S. adult state correctional facilities, while the second study examines participation in programs by inmates in U.S. adult state correctional facilities. I then explain my data and analytic strategies to address the following questions:

### Study 1: Gender Differences and Program Availability in U.S. Prisons

1. (A) Are there notable differences in the availability of programming options for incarcerated men and women? Additionally, do programming options vary by location, size, or security level of the facility?  
  
(B) Are the programs offered in correctional facilities limited by perceived gender stereotypes or expectations for men and women? In other words, to what extent do gender stereotypes or traditional expectations influence available programs?
2. Does the gender of inmates housed in the facility influence program availability controlling for other facility-level characteristics (e.g., size, security level, location)?

### Study 2: Gender Differences and Program Participation in U.S. Prison Programs

3. (A) Are there notable differences in program participation rates for incarcerated men and women? Additionally, does program participation vary by location, size, and security level of the facility?  
  
(B) Are female inmates more likely to participate in female stereotypical work assignments and conversely, are male inmates more likely to participate in male stereotypical work assignments, controlling for other individual-level and facility-level characteristics? Additionally, is there a significant interaction between inmate gender and race and participation in female and male stereotypical work assignments when controlling for other individual-level and facility-level characteristics?

4. Do gender and/or “recognized needs” influence program participation in state correctional facilities controlling for other individual-level and facility-level characteristics? Additionally, is there a significant interaction between inmate gender and race and program participation when controlling for other individual-level and facility-level characteristics?

To address these questions I employ two distinct, but related studies. Below, I describe these two studies separately. For each study I describe the data, sample, outcome measures, independent variables, and control measures to be used for each respective analysis. I then describe the proposed analytic plan for each study.

### **Study 1: Gender Differences and Program Availability in U.S. Prisons**

The first study focuses on program availability in state prisons for men and women throughout the U.S. To examine availability, I use the *Census of State and Federal Adult Correctional Facilities, 2000*. Utilizing this dataset, I examine the availability of several programming types: medical care, mental health services, drug/alcohol treatments, work assignments, vocational training, educational programs, and life-skills programming (including parent/child-rearing classes) and compare what is offered in male and female correctional institutions. I also compare program availability of male and female prisons across locations, security levels, and facility size.

Additionally, I examine to what extent available programs appear to rely on gender stereotypes and expectations for incarcerated men and women.

### **Data and Sample**

As noted, the dataset utilized for the first study is the *Census of State and Federal Adult Correctional Facilities, 2000*<sup>2</sup>(hereafter referred to as “Census”). The 2000 Census

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<sup>2</sup>U.S. Dept. of Justice, Bureau of Justice Statistics. CENSUS OF STATE AND FEDERAL ADULT CORRECTIONAL FACILITIES, 2000 [Computer file]. Conducted by U.S. Dept. of Commerce, Bureau of the Census. ICPSR ed. Ann Arbor, MI: Inter-

is the sixth enumeration of state institutions. The collection of these data is sponsored by the Bureau of Justice Statistics and is administered by the U.S. Census Bureau. Earlier waves were completed in 1974, 1979, 1984, 1990, and 1995 and a proceeding census was completed in 2005. Even though the 2000 Census is not the most current census of state and federal facilities, it is the most logical to use in the current study for several reasons. First and foremost, the 2000 Census serves as the sampling frame for the *Survey of Inmates in State and Federal Correctional Facilities, 2004*, which is used in the second phase of this research to examine inmate participation in programming. Therefore, using the 2000 Census permits the use of facility-level characteristics to be included in Study 2. Second, the 2000 Census contains more information regarding medical and mental health programming than the 2005 enumeration of the census. Since this is a program area important to women offenders, the 2000 Census is used in the study of program availability.

The 2000 Census surveyed 1,660 facilities through a survey questionnaire mailed by the U.S. Census Bureau to prison administrators. The Census Bureau conducted follow-up mailings and calls until a 100% response rate had been achieved. Facilities were included if they met the following criteria: 1) were staffed with federal, state, local, or private employees; 2) housed primarily state or federal prisoners; 3) were physically, functionally, and administratively separate from other facilities; and 4) were in operation on June 30, 2000. The current research aims at understanding programming in state prisons. Therefore, federal prisons were excluded due to the potential for both measured and unmeasured differences between state and federal prisons which might cause biased



results. Community based facilities – facilities where 50% or more of the residents were regularly allowed to leave the facility unsupervised – were also excluded. Due to the specificity of the research questions on gender differences, co-ed facilities were also eliminated from the sample. Finally, a unique facility variable was created in the 2000 Census to provide a link to the *Survey of Inmates in State and Federal Correctional Facilities, 2004*. Several types of data were collected as part of the 2000 Census study.

Information was collected on facilities, inmate characteristics, staff characteristics, inmate health and treatment, mental health treatment, and programming availability. Information collected about facility characteristics included who operated the facility, the gender of inmates housed in the facility, physical security, facility functions (e.g., general adult confinement, medical or mental health treatment confinement, reception, geriatric care, etc.), capacity, age of facility, construction plans, and any court orders the facility was under. Inmate characteristics collected by the Census included number of inmates held, the average population, gender composition, race/ethnicity composition, number of inmates under 18, security level and inmate classification, number of non-U.S. citizens, number of inmates housed for other authorities, and information about the health of inmates along with the treatment provided to them. Information about the staff included demographic characteristics (i.e., gender, race/ethnicity, level of education), along with the amount of staff who were employed either part- or full-time. Finally, program availability for education programs, work assignments, drug/alcohol dependency programs, life-skills programs, parenting classes, and other programming options was collected.

## Outcome Measures

To address the issue of program availability in state correctional facilities, I use several program-related outcome measures. I include the following program options as a part of the current analysis: medical care, mental health care, substance abuse programs, work assignments, educational programs, and life-skills programming. Prison officials surveyed indicated through a yes/no response if specific programs or services were available in their facility, thus all of these program areas are based on dichotomous measures (see Table 5.1).

*Medical care* in prisons accounts for various medical services that are available to inmates. Such services or treatments include suicide prevention efforts, tests for easily transmitted diseases (HCV, Hepatitis B, HIV/AIDS, tuberculosis), and any care for these diseases. For each treatment, officials at each facility indicated whether the service was available. As Table 5.1 indicates, many correctional facilities provided testing and screening for specific health issues such as HIV (96%), Hepatitis C (91%) and Tuberculosis (82%), yet only 59% of correctional facilities offered HIV/AIDS counseling. While facilities might test inmates for HIV, there may be certain designated correctional facilities within each state system that provide the needed care for those testing positive for the disease. *Mental health care* included whether or not the facility performed intake assessments or if the prison offered one or more of the following mental health treatments: 24 hour mental health care special housing, mental health therapy, psychotropic medicine, and psychological programs. For each treatment, officials at each facility indicated whether the treatment was available. Overall, correctional facilities generally provided mental health therapy and counseling (83%) and psychotropic

medications (81%) to inmates, along with psychological evaluations (77%). *Substance Abuse programs* included if the facility provided either a drug treatment program or an alcohol treatment program. Each of these programs was offered in most correctional facilities (91%).

*Work assignments* included inmates being assigned to prison industries, facility support work, farming, public works, or other work duties. For each assignment, officials at each facility indicated whether each work assignment was available. Almost all facilities (96%) reported having work assignments that supported the prison in some manner and a majority of facilities offered public works programming (63%). Less than half of the correctional facilities had prison industries programming (44%), farming/agriculture (31%), or work release (10%). *Education programs* included five types of programs: basic education, GED preparation, special education, college courses, and study release courses. Again, almost all facilities (95%) reported having educational programming with a large majority offering GED preparation (91%) and adult basic education (88%). A majority of facilities also had vocational education (68%), while less than half of prisons provided special education (44%) and college courses (31%). *Life-skills programs*<sup>3</sup> included various types of programs that might potentially provide inmates with “real-life” skills for reintegration. These programs included work release programs, vocational training, employment programs, life-skills programs, and parenting programs. A vast majority of correctional facilities offered some type of programming in this area (94%), with a majority of prisons offering life-skills (72%) and employment

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<sup>3</sup>The Life-Skills programs examined in this study were grouped by the Census in the questionnaire and were specifically listed as Life-Skills programs.

programs (64%). Less than half of the facilities offered parenting programs (43%) and about one in four facilities had some other type of life-skills programming (28%).

To examine the availability of correctional programming more broadly, two aggregate measures were computed (see Table 5.2). The first aggregate measure was computed by identifying whether the correctional facility offered “any” of the services or treatments within each programming domain. If the facility offered at least one of the identified services or treatment they were coded as yes, otherwise no. As noted in Table 5.2, almost all correctional facilities provided inmates with at least one service or treatment in each programming domain including medical care (100%), work assignments or job skills (99%), education (95%), mental health (94%), life-skills (94%), and substance abuse (93%). The second aggregate measure was computed by taking the sum of the services or treatments available within each programming domain. For example, in the medical care domain, facilities could make available between 0 and 7 types of services or treatment programs (see Table 5.2).

The score that was computed for each program domain and outcome measure was then recoded into an ordinal scale that classified each of the facilities as having either a low, medium, or high level of programs or services. This classification was conducted by examining the distributions for each value in the scale and making cut-offs as close to the 33 percentile as possible for each outcome measure. For example, for the medical care domain, low was computed as scores 0-5 (27.7%), medium was a score of 6 (33.4%), and high was a score of 7 (37.8%). All other outcome domains were classified similarly and are detailed in Table 5.3.

## **Independent and Control Variables**

Several independent and control variables are included in the first study to address the first set of research questions (see Table 5.4). The first independent measure included the *gender-housed* by the facility. As shown in Table 5.4, *gender-housed* was measured through two responses: men only or women only<sup>4</sup>. As expected, a clear majority of the facilities in the census survey housed incarcerated men (91%).

A series of other independent and control variables focus on facility-level characteristics that might influence programs within prisons. Over the last decade, a growing body of literature has examined facility-level factors and their influence on various penal interests, policies, and practices (Steiner & Wooldredge, 2009a). It has been noted that facility characteristics may have important implications for issues such as crowding, misconduct, safety for correctional officers and inmates, services, and other factors (Steiner & Wooldredge, 2009a). In their national-level study examining individual- and facility-level factors on prison misconduct, Steiner and Wooldredge (2009b) found that facility-level characteristics such as security level influenced misconduct. They also found that program participation coincided with prison misconduct – therefore, it may be reasonable to assume that program and treatment options and availability will also be influenced by facility characteristics.

Morash and her associates (1994) examined several facility measures including location, size, and security level for their influence on programming in male and female prisons. They found facility-level characteristics were important in regards to where male and female inmates were housed, with women being more likely to reside in smaller,

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<sup>4</sup> Coed facilities were excluded from analysis.

lower security facilities and men being housed in larger, higher security level facilities. They also found that all three of these characteristics had significant effects on programming. In particular, location influenced programming participation such as educational programming, medical care, and mental health services. Security level also influenced options, with higher level security facilities (i.e., medium and maximum versus minimum) offering more programs on the whole. Also, size influenced programming options, with larger facilities offering more programs such as educational and medical programs. Considering the findings from the original Morash study (1994) and the more recent findings showing facility-level factors as having important implications on penal interests and practices, it is necessary to incorporate these facility-level factors in the current study as control variables.

Using the state indicator for each facility, a *location* measure was computed to indicate the area of the country where the prison was located. Using U.S. Census Bureau regional designations (U.S. Census Bureau, 2012), states were assigned to the northeast (16%), south (48%), mid-west (22%), or the west (15%) region. *Age* of the facility is also included, measured in years with the average age of the facilities being approximately 30 years. *Security level* was also measured for each facility and included the following classifications: maximum/supermax, medium, and minimum. The majority of prisons were classified as medium (42%). The facility *size* was measured through both a ratio variable an ordinal variable that was created using facility size and computing a measure based on Morash and colleagues' (1994) study: less than 500, 500-999, and 1,000 or more. The average size of facilities was 1,028. The largest number of facilities in this

study housed 1,000 or more inmates (41%), followed by those facilities that housed fewer than 500 inmates (34%) and facilities that housed between 500 and 999 inmates (25%).

### **Analytic Plan**

The research questions for this study focus on what programming is available, who has access to it, and where it is available. Additionally, the research aims to explore whether stereotypical programming is still present in facilities. To address the research questions below, I use both bivariate and multivariate analyses.

#### *Question 1-A:*

*Are there notable differences in the availability of programming options for incarcerated men and women? Additionally, do programming options vary by location, size, or security level of the facility?*

As previously noted, throughout the history of corrections men and women have received different programming (Belknap, 2010; Butler, 1997; Rafter, 1990). For the most part, women have received *fewer* programs in prison than have men, and the programs received by women have often been developed for men and simply placed in female facilities (Rafter, 1989, 1990). Increasingly, studies have demonstrated that there are more programs in female facilities. Still, as recently as 2000, research has noted that the programming available to women is often inferior to men's because many of these treatments are still limited, stereotypical, and emphasize "women's work," especially vocational and educational programming (Lee, 2000). The first research question in study 1 examines if program availability differs between prisons for men and prisons for women. This question also considers if programming options for all inmates vary by the region of the country that the facility is located, along with the size and security level of the facility. For that reason, a chi-square analysis using appropriate strength of association measures will be used to look at the relationship between each type of

program that is available and each of the following independent variables, separately: gender-housed, location, size, and security level. A chi-square analysis is useful for making inferences about relationships for two variables, particularly nominal variables (Weisburd & Britt, 2007), and Cramer's V is an appropriate measure of strength of association for nominal variables (Szafran, 2012).

*Question 1-B:*

*Are the programs offered in correctional facilities limited by perceived gender stereotypes or expectations for men and women? In other words, to what extent do gender stereotypes or traditional expectations influence available programs?*

As with gender-specific programs in prison, several types of work and prison programming have been identified as stereotypical. Additionally, while arguably there have been significant developments in gender-specific programming over the last several decades some scholars caution that a number of programs may still be influenced by traditional gender stereotypes and expectations (Franklin, 2008; Morash, 2010; Rafter, 1990). Therefore, correctional programming may be reinforcing stereotypes due to their focus on issues such as parenting and other traditional "women's issues." Work programs in particular have been noted for their differences in men and women's facilities. Women have often been assigned work involving facility or food services that typically entail cleaning and cooking – traditional duties for women (Morash et al., 1994; Schram, 1998). Additionally, male facilities tend to offer work assignments such as computer training, construction or carpentry, maintenance, automotive repair, and/or farming (Brewster & Sharp, 2002; Morash et al., 1994) – again emphasizing "male work."

While work assignments have been highlighted as stereotypical in the literature, other programs might be based on gender roles as well. Parenting programs are typically found in female facilities rather than male facilities, even though males are just as likely



to be parents (Glaze & Maruschak, 2010). Therefore, if parenting programs are more likely found in female facilities, one might argue that prisons are continuing to reinforce this traditional gender expectation for women. Also, Morash and colleagues (1994) note in their study that psychotropic drugs are used significantly more often for females inmates than male inmates and that this too might be considered stereotypical programming if these drugs are used to “control” women rather than treat them. Finally, vocational training, employment programs, and life-skills programs, if heavily situated in only male facilities, might also suggest stereotypical treatment since they are historically lacking in female facilities (Lee, 2000).

To address the issue of gender stereotypes and available programs in correctional facilities, I focus on the following types of programs:

1. *Work assignments:* prison industries, facility services, farming, public works
2. *Mental health:* psychotropic drugs
3. *Life-skills:* parenting programs, vocational training, employment programs, and life-skills training

To answer Question 1-B, I examine the relationship between whether or not the facility housed male or female inmates and each of the aforementioned programs above using the results of the chi-square and strength of association analyses for Question 1-A.

*Question 2:*

*Does the gender of inmates housed in the facility influence program availability, controlling for other facility-level characteristics (e.g., size, security level, location)?*

The second research question examines whether or not the gender of inmates housed in a facility influences the programming that is available at that facility. As previously mentioned, men have been afforded more programming than women while incarcerated (Lee, 2000). Additionally, Morash and colleagues (1994) noted facility-level conditions seemingly affect program availability, with some regions of the country

providing more programming (i.e., Northeast) and some security levels offering significantly less programming (i.e., minimum security) than their counterparts. For that reason, it is important to control for these characteristics when examining the influence of gender-housed on programming availability.

I use both binary and ordered logistic regression to explore this question since the two outcome variables here are measured at different levels (i.e., nominal and ordinal). Binary logistic regression is appropriate for modeling dichotomous dependent variables (Hoffman, 2004) and will be used when the dependent variable, program availability, is defined as yes or no. Thus, I use binary logistic regression to analyze the influence of gender-housed on each individual program measure (i.e., the availability of each individual program). Ordered logistic regression is appropriate for analyzing ordinal level dependent variables (Menard, 2010), therefore I use this type of regression to analyze the influence of gender-housed on the level of availability of each program domain (i.e., low, medium, and high level of available programming in each broad programming area). The ordered logistic regression models will include the independent variable gender-housed, and facility size, security, and location which serve as control measures.

### **Study 2: Program Participation by Inmates in U.S. State Prisons**

The second study focuses on inmates' participation in programming in state prisons throughout the United States. To explore their participation, I use the *Survey of Inmates in State and Federal Correctional Facilities, 2004*<sup>5</sup> (hereafter referred to as

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<sup>5</sup>U.S. Dept. of Justice, Bureau of Justice Statistics. SURVEY OF INMATES IN STATE AND FEDERAL CORRECTIONAL FACILITIES, 2004 [Computer file]. ICPSR04572-v1. Ann Arbor, MI: Inter-university Consortium for Political and Social Research [producer and distributor], 2007-02-28. doi:10.3886/ICPSR04572.

“Survey”). Utilizing this dataset, I examine inmates’ participation in several programming areas: medical care, mental health services, drug and alcohol treatment programs, work assignments, vocational training, education programs, life-skills programming, parenting/child-rearing programs, recreational activities, and religious activities.

### **Data and Sample**

The sample for the Survey was selected through a two-stage process for both state and federal prisons. Similarly to the first study, I am interested in state inmates and therefore, only the collection process for state inmates in the Survey data is discussed<sup>6</sup>. In the first stage, correctional facilities were separated into two sampling frames – one for male facilities and one for female facilities – based on the universe sampling frame provided by the *2000 Census of State and Federal Adult Correctional Facilities*. Coed facilities were included in both sampling frames. The final sampling frame included 1,401 male facilities and 357 female facilities. Of these facilities the 14 largest male and 7 largest female facilities were selected with certainty. The remaining facilities were grouped into eight strata based on the U.S. Census regions<sup>7</sup>. Facilities were then ordered by size of population within each stratum and were selected based on probability proportional to size. This process resulted in 290 state prisons being selected, 225 were male and 65 were female facilities. The Bureau of Justice Statistics then compiled information on prisons that opened between the completion of the 2000 Census and April

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<sup>6</sup>For more information about the federal prison inmate sample please refer to the U.S. Department of Justice, Bureau of Justice Statistics, *Survey of Inmates in State and Federal Prisons, 2004*.

<sup>7</sup>The regions included Northeast except New York, New York, Midwest, South except Florida and Texas, Florida, Texas, West except California, and California.

1, 2003 which resulted in 27 male, 2 female, and 7 coed prisons. This sample was stratified exactly the same as the sample from the Census universe and resulted in 6 male prisons and 1 female prison being added. Due to non-responsiveness or missing data the final number of state prisons in the sample size was 287.

The second stage of the sampling process included the selection of inmates from these prisons. Inmates were selected from a list provided by the facility that contained all the inmates using a bed from the previous night. Each inmate was then assigned a number and entered into a computer database. Numbers (that represented specific inmates) were then systematically selected using a randomized starting point and a predetermined skip interval. This resulted in 13,098 males and 3,054 females being sampled. The interviews were conducted between October 2003 through May 2004, lasted approximately 1 hour, and were conducted using computer assisted personal interviewing. Due to the nature of data collection, a sampling weight, provided by the Survey is used in all of the analyses to allow for proper inference back to the population. This weight is based on the inverse of each inmate's chance of selection into the survey sample and was normalized for the sample size.

During the interviews data were collected that contained each inmate's individual characteristics, current offense and sentence, criminal history, family and personal background characteristics, prior drug and alcohol use and treatment, and prison life. Information about inmate's characteristics included demographic information such as gender, age, race, ethnicity, citizenship, marital status, and military service. Information about the offender's current offense included the offense type and number of charges of the most recent arrest, sentencing information, and incident characteristics. The criminal

history of inmates included offenses committed both as a juvenile and adult and previous sentences to institutional and/or community corrections. Additionally, previous sentences were included in this section be it to community corrections or incarceration.

Family and personal background characteristics included parental and other familial relations' criminal history, history of abuse, socioeconomic status, highest level of education, employment prior to incarceration, and if the inmate has children. Alcohol and drug use and treatment included drug/alcohol use history, frequency of use, being arrested while under the influence and any previous drug/alcohol treatments the offender had participated in. The information collected about prison life included activities the inmate participated in, and programs and services the inmate had received or been a part of while incarcerated. These items included medical services, mental health services, recreational activities, work assignments (both on and off prison grounds), educational programs, vocational education, participation in various inmate groups, and any disciplinary infractions committed by the inmate.

### **Outcome Measures**

While it is important to explore what programming is available for inmates in U.S. prisons, it is also imperative to examine whether inmates participate in available programming. For instance, if programming is available, yet inmates do not participate in it, resources are being underutilized and inmates are not benefitting from needed programming and services. Furthermore, it is also vital to understand what might influence their involvement in correctional programs. To examine inmates' participation in programming across state prisons in the U.S., I focus on several types of programming: medical treatment, mental health services, drug/alcohol treatment, recreational activities,

religious activities, work assignments, vocational training, educational programs, and life-skills programming. Inmates were asked to indicate through a yes/no response if they had participated in any of the programming since their admission to prison, thus each of these programming measures are dichotomous. Table 5.5 provides information on each of these outcome measures.

Participation in *medical care* included involvement in various treatments, screenings, and tests that inmates might need. Medical care and services included tuberculosis testing, pelvic/obstetric exam, HIV testing, examination of injuries, dental treatment, and exams for illness. A high proportion of inmates reported that they had been tested for Tuberculosis (95%), HIV (85%), or received a medical exam (84%) since their admission to prison. Approximately, 43% of inmates reported receiving some type of dental care during their current confinement to a correctional facility.

*Mental health participation* included if inmates indicated they had used some type of psychotropic medication, had a hospital stay, participated in counseling, or received some other type of mental health services since their admission to prison. Overall, approximately 15% of inmates reported that they were given psychotropic medication and 13% reported that they had participated in some form of mental health counseling during their current confinement to a correctional facility.

*Substance Abuse program participation* measured if inmates had been in a detoxification unit, inpatient drug treatment, outpatient treatment or counseling, a self-help group or peer counseling for substance abuse, a substance education/awareness program, a maintenance program, or any other drug or alcohol treatment program since their admission to prison. One in four inmates reported participating in self-help and peer

counseling programs (25%). Another 15% of inmates reported participating in some type of education and/or awareness drug program. Relatively few inmates participated in inpatient treatment (8%) and outpatient treatment (5%) programs.

*Recreational participation* measured the degree to which inmates had participated in physical exercise, watching television, reading, or making phone calls in the 24 hours prior to being surveyed. A majority of inmates reported participating in these activities with 84% of inmates indicated making telephone calls, 75% of inmates reading, 68% of inmates watching television, and 60% of inmates engaging in some form of physical exercise. *Religious participation* included if the inmate reported involvement in religious activities. A little over half of the inmates (55%) reported engaging in these types of activities.

*Participation in Work Assignments* involved assignments both on and off prison grounds, both with or without pay. The various work assignments included janitorial work, grounds/road maintenance, food preparation, laundry, medical services, farming/forestry/ranching, goods production, other services, maintenance/construction, and other work assignments. Additionally, whether or not inmates were paid for their work was noted with a majority of inmates not being paid for their work (62%), and two aggregate scales denoting gender stereotypical work assignments were computed. Most inmates reported having a work assignment on the grounds of their facility (60%). The most common work assignment for inmates was janitorial work (19%), followed by food preparation (12%). Only about 2% of inmates reported being assigned work in farming, forestry, or ranching, and less than 1% were assigned to medical services.

*Vocational training participation* was indicated through one measure that asked in the inmate had participated in a vocational or job training program. Approximately 28% of inmates reported participation in one of these training programs. *Educational participation* included five measures indicating inmate participation in: basic education, high school or GED preparation, college courses, English as a second language, and other educational programs. Participation in these educational activities was relatively low with about 19% of inmates reporting work on high school or GED preparation and 7% taking a college course. Finally, *life-skills participation* included inmates' participation in various types of programming which might potentially provide inmates with "real-life" skills for reentry. These programs included participation in employment counseling, parenting/child-rearing skills, life-skills/community adjustment, and pre-release programs. Almost one-fourth of inmates (24%) reported participating in a life-skills or community adjustment program, while only 9% and 8% reported participating in employment counseling or child-rearing classes, respectively.

Similarly to the first study, I computed an aggregate measure for each programming domain (i.e., each broad programming area) to provide an overall indication of involvement by each inmate. This aggregate measure is a dichotomous measure that noted whether or not an inmate participated in *any* type of program or service within the programming domain (see Table 5.6). Overall, every inmate (100%) reported their involvement in at least one medical service or treatment program during their incarceration and nearly every inmate (99%) reported participating in at least one of the recreation options. Approximately 66% of inmates reported participating in some type of work assignment, while less than half of the inmates reported participating in some



form of substance abuse programming (36%), educational programming (32%), life-skills programming (29%), and mental health care (19%).

Two additional work-related aggregate measures were created to measure participation in stereotypical work assignments. First, I created an aggregate measure of female stereotypical work assignments, which indicated through a dichotomous measure (yes/no) if an inmate participated in any of the work assignments that could be considered feminine (i.e., janitorial work, food preparation, laundry, and medical services). As shown in Table 5.6, approximately one-third (34%) of inmates indicated they had been assigned to a stereotypically feminine work assignment. Next, I created a similar aggregate measure of male stereotypical work assignments, which indicated if an inmate participated in any of the work assignments that could be considered masculine (i.e., ground/road maintenance, farming/forestry/ranching, and maintenance/construction). Only about 15% of inmates reported being assigned to any of these masculine work assignments.

### **Independent and Control Variables**

A series of independent variables and controls are included in study 2 to address the final set of research questions. Table 5.7 describes the measures that comprise demographic information, personal background information, information concerning their current confinement period, and facility-level characteristics. The demographic variables included are gender, race, and age. The first independent measure, *gender*, is a dichotomous measure indicating if the inmate was male or female. As expected, the sample of inmates was predominantly made up of males (93%). *Race* was measured using inmates' self-reports of their racial category being White, Black, or other. Whites

comprised the largest percentage, with 49% of inmates reporting they were White. Age is a continuous variable that measured the inmates' age in years with a range of age from 16 to 84 years and an average age of respondents being approximately 35 years.

Next, I included several independent measures that reflect the personal history of each inmate in terms of their dependent children, alcohol and drug dependency, abuse and victimization, mental health, education and employment. Self-reported information in each of these areas was utilized to represent "identified needs" for each inmate. I argue that it is important to include this type of background information since one would expect that inmates with specific programmatic needs such as abuse, addiction, or unemployment would participate in related programming to address their problems or deficiencies. Furthermore, I contend that that these "recognized needs" should have a direct effect on the inmates' program participation.

Inmates' *children* were measured in this study using one survey question: did the inmate have any children under age 18 (i.e., dependent children)? This is a dichotomous measure (yes/no), and a majority of inmates did have at least one dependent child (58%). Knowing whether or not an inmate has children is informative, since it would suggest that the inmate could benefit from parenting classes, new employment skills, GED, or life-skills programming to help provide for their children upon release.

Inmates were asked a series of eleven yes/no questions indicating their history of drug use which could indicate the presence of a *drug dependency*, should the inmate have one. Inmates were asked the following series of questions concerning their usage of drugs in the year prior to admission:

- (1) Did you use a drug in larger amounts or for longer periods than intended?

- (2) Did you more than once want to cut down on your drug use but found you could not?
- (3) Did you spend a lot of time getting and/or using drugs?
- (4) Did using drugs keep you from important activities?
- (5) Did you give up activities in favor of using drugs?
- (6) Did you use drugs even as it caused emotional problems?
- (7) Did you use drugs even as it caused personal problems?
- (8) Did you use drugs even as it caused physical health or medical problems?
- (9) Did your usual amount of drugs ever have less effect?
- (10) Did you experience withdrawal?
- (11) Did you keep using drugs to deal with bad after effects?

The responses to each of these questions for each inmate were aggregated into an additive scale to indicate an overall *drug dependency* measure. The minimum possible score was “0” and the maximum possible score was “11,” and the measure had a Cronbach alpha of 0.78. On average, inmates had an overall drug dependency score of 3.18 (see Table 5.7).

Inmates were also asked eleven questions to measure their possible dependency on alcohol. These questions were similar to the questions measuring drug dependency. Each of these questions asked the inmate to respond yes or no, if the scenario had presented itself in the year before their admission to prison. The questions measuring *alcohol dependency* included:

- (1) Did you drink more or for longer periods than intended?
- (2) Did you more than once want or try to cut down drinking but could not?
- (3) Did you spend a lot of time drinking and getting over the bad effects?
- (4) Did drinking keep you from doing work, going to school, or caring for children?
- (5) Did you give up activities in favor of drinking?
- (6) Did you continue to drink even though it was causing emotional problems?
- (7) Did you continue to drink even though it was causing problems with family, friend, or work?
- (8) Did you continue to drink even though it was causing physical problems?
- (9) Did you have to drink more to get the wanted effect?
- (10) Did you experience alcohol withdrawal?
- (11) Were you medicated to deal with bad after effects of drinking?

The responses to each of these questions were used to compute an additive composite scale indicating the level of alcohol dependency for each inmate. The lowest possible score computed was “0” and the highest possible score computed was “11,” and the scale had a Cronbach’s alpha of 0.93. On average, inmates reported an alcohol dependency score of 2.30 (see Table 5.7)<sup>8</sup>.

Previous abuse included both *sexual abuse* and *physical abuse* as reported by the inmate. To examine *sexual abuse* inmates were asked to indicate if prior to admission they had been forced to have any sexual contact against their will. Less than one-tenth (9%) of respondents indicated they had experienced sexual abuse. *Physical abuse* was measured through one question: inmates were asked if prior to admission they had ever been physically abused. Approximately 16% of inmates surveyed indicated they had experienced some form of physical abuse.

*Employment history* was measured through one survey item. Inmates were asked to indicate if during the year prior to imprisonment they had a job or a business. A majority of respondents (72%) indicated that they had been employed prior to incarceration. *Education* was measured through the inmates’ indication of their highest level of educational achievement. Education level was measured as less than high school, high school, or some or more college. Almost three-fourths of inmates (74%) indicated a high school education level.

To determine *mental health history* seven items were utilized. Each of these items was a dichotomous measure with a yes/no response. Inmates were asked to indicate if

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<sup>8</sup> Considering the similarities between the drug dependency and alcohol dependency measures, diagnostic tests were run to check for the possibility of collinearity between these measures. The diagnostic tests indicated that these measures are not highly correlated.

they had ever been diagnosed, by a medical professional, with any of the following disorders: depressive disorder; manic depression, bipolar disorder, or mania; schizophrenia or another psychotic disorder; post-traumatic stress disorder; another anxiety disorder – such as a panic disorder; a personality disorder; or any other mental conditions. I computed an aggregate measure to indicate whether the inmate had ever been diagnosed with *any* mental disorder. One-quarter of respondents (25%) indicated that they had been diagnosed with one or more mental health disorders.

The next series of measures described are used as control variables. These measures include mandatory sentence requirements, information about the inmate's criminal history and current confinement, and facility-level characteristics. *Mandatory drug treatment* and *mandatory alcohol treatment* were measured and used as control variables in this study. Inmates were asked if part of their sentence included mandatory drug or alcohol treatment (yes or no). Approximately 17% of respondents reported their sentence included a mandatory drug or alcohol treatment. Mandatory treatment sentences should influence an inmate's participation in drug and alcohol treatment.

Next, I include four variables that pertain to the inmate's criminal history and current confinement period: criminal history, current offense, time served on their present sentence, and rule violations. I include these measures since each factor is likely to influence inmates' participation in correctional programs. To account for the *criminal history* of individual inmates, a measure was computed by calculating the number of times an inmate had been incarcerated, excluding his/her current incarceration. On average, inmates had been previously incarcerated 1.56 times. *Current offense* indicated if the inmate was serving time for a violent, property, drug or some other type of crime

(i.e., escape, parole violation, public disorder). Approximately 48% of inmates were incarcerated for a violent offense, 22% for a drug offense, 19% for a property offense, and 12% were incarcerated other offenses.

*Time served* represents the calculation of the difference between the inmates' responses to their admission date to prison (month, date, and year of admission) and the date that they were surveyed. Time served was measured in months served. The average time served for respondents was 49 months or just over 4 years. Time served is important to control for since the longer an inmate has been incarcerated, the more time they have to possibly participate in programming. *Rule violations* were measured through the inmates' self-reports of any rules that were violated or whether they had been charged by the corrections system with violating rules. This variable was important to include as a control variable in the current analysis since arguably inmates with rule violations might be prevented from participating in (certain) correctional programs. A little over half of the inmates (51%) reported that they had violated rules and/or been charged with violating rules.

Finally, several facility-level measures were included in this analysis since these factors might also influence the participation of inmates in programs. Facility *security level*, *location*, and *size* were taken from the 2000 Census dataset, which served as the sampling frame for the Survey and linked to the Survey data. *Security level* indicated the level of security reported by the facility in the 2000 Census. One-half of inmates surveyed (50%) were housed in medium security level facilities. *Location* signified the region of the country where the inmate is housed and *size* represented the number of inmates housed in the facility in the 2000 Census. The largest group of inmates were

housed in the South (42%) followed by the West (23%). Additionally, 71% of inmates surveyed were in facilities housing 1,000 or more inmates. Each of the facility-level variables was included in the analysis to control for possible differences that might be found across facilities.

### **Analytic Plan**

I use both chi-square analyses and binary logistic regression to address the research questions in study 2. To answer Question 3a, I use chi-square analyses to examine the association between program participation and inmates' gender, and program participation and several facility characteristics. In Question 3B, I use binary logistic regression to examine the effect of gender and the interaction effects of race and gender on stereotypical work assignments. I also use binary logistic regression in the analysis for Question 4 to examine the importance of inmate gender, "identified needs", and the interaction effects of race and gender on predicting program participation, while controlling for other potentially influential factors (e.g., demographic characteristics, background characteristics, and facility-level characteristics, etc.).

#### *Question 3-A:*

*Are there notable differences in program participation rates for incarcerated men and women? Additionally, does program participation vary by location, size, and security level of the facility?*

In their study, Morash and colleagues (1994) noted differences in programming participation due to gender and facility characteristics, often resulting in women participating in more programming than men, even though women have historically been allowed less access to programming once incarcerated (Rafter, 1990; Lee, 2000). The current study examines whether participation varies by gender, and explores if the findings noted by Morash and colleagues (1994) continue. To address this research

question, I examine the relationship between participation in different types of programming and inmate gender using a series of chi-square analyses and measuring the strength of association using the appropriate statistics for each level of measurement. This question also considers if inmate participation varies by the location, size, or security level of the facility and chi-square analyses are also used to examine if participation rates vary by these facility characteristics, separately.

*Question 3-B:*

*Are female inmates more likely to participate in female stereotypical work assignments and conversely, are male inmates more likely to participate in male stereotypical work assignments, controlling for other individual-level and facility-level characteristics? Additionally, is there a significant interaction between inmate gender and race and participation in female and male stereotypical work assignments when controlling for other individual-level and facility-level characteristics?*

Next, I address participation by inmates in programming that is believed to focus on “traditional” gender roles by exploring whether or not inmates are participating in programs and assignments that might be seen as stereotypical behavior for their gender. As I noted in the first study, there are several types of programming and work assignments in prisons that are perhaps stereotypical or at least promote gender roles. Work assignments that might be considered stereotypical for women would include janitorial (facility) work, food preparation, laundry, and assignments to medical services. All of these assignments are related to traditional gender roles women since they are tied to household chores, duties, (i.e., cooking and cleaning) or nurturing roles (i.e., nursing; Goffman, 1977; Simpson, 2005; West & Zimmerman, 1987). Work assignments that might be considered stereotypical for men would consist of ground/road work assignments, farming or forestry or ranching assignments, or maintenance repair or construction assignments. Each of these assignments tends to be masculine because they



require hard labor and are more physical, or require a trained skill set (Goffman, 1977). Additionally, these assignments are conducted outside (or in public), rather than inside (or in private) – this would also be consistent with gender stereotypes that allow men access to the public sphere while maintaining women’s roles in the private sphere (Furnham & Mak, 1999; Goffman, 1977).

To address the issue of stereotypical endorsement, two binary, aggregate outcome measures were created: female stereotypical work assignments and male stereotypical work assignments. Work assignments that were considered stereotypically feminine were: janitorial services, food preparation, laundry, and medical services. The aggregate female stereotypical work assignments measure indicates if an inmate participated in any of these assignments (yes/no). Work assignments that were considered stereotypically masculine were ground/road maintenance, farming/forestry/ranching, and maintenance repair/construction. The aggregate male stereotypical work assignments measure indicates if an inmate participated in any of these assignments.

To determine if women and men are more likely to participate in work assignments that are stereotypical for their gender, binary logistic regression modeling will be used for each of the dichotomous dependent measures. The independent variable of interest for both regression models was inmate gender. Additionally, there were several individual- and facility-level controls. Age, race, and criminal history, along with several confinement related measures: amount of time served, current offense and rule violations were all controlled for at the individual-level. Three facility-level characteristics were also controlled for in both models: location, size, and security level of the facility.

Since gender stereotypes might be defined, applied, and reinforced depending on a person's race, I next consider the importance of an interaction between gender and race for participation in each of the gender stereotype models by adding an interaction term (gender x race) to the existing gender stereotype models. Therefore, the independent variables of interest for these models will be the interaction term for inmate gender and race. Two interaction terms of race and gender were created and included in the models (Hilbe, 2009).

The same individual-level and facility-level controls from the first binary logistic models will also be used in these interaction models. Age, criminal history, amount of time served, current offense, and rule violations will all be controlled for at the individual-level. Location, size, and security level of the facility will be controlled for as facility-level characteristic controls. Additionally, to control for any possible issues or errors due to the clustered nature of the data (i.e., errors due to the nested nature of the data of inmates being located within prisons), each of the models for Question 3 are run using cluster-robust standard errors (Cameron & Miller, 2010).

*Question 4: Do gender and/or "recognized needs" influence program participation in state correctional facilities, controlling for other individual-level and facility-level characteristics? Additionally, is there a significant interaction between inmate gender and race and program participation when controlling for other individual-level and facility-level characteristics?*

In Question 4, I am interested in determining whether gender and/or certain "recognized needs" influence the involvement of inmates in correctional programs, I am also interested in determining if there is a significant interaction effect of gender and race on programming participation. I focus on five particular programming domains in this

part of the analysis, along with individual programming types within these domains. The programming *domains* and types include<sup>9</sup>:

1. *Mental Health Treatment*: psychotropic medications, hospitalization, and counseling.
2. *Substance Abuse Treatment*: inpatient treatment, outpatient treatment, self-help/peer counseling, and education/awareness.
3. *Life-skills Programming*: life-skills/community adjustment, parenting/child-rearing classes, employment counseling, and pre-release programs.
4. *Educational Programming*: basic education, High school/GED, and college courses.
5. *Vocational Education/ Job Training*

I use binary logistic regression since the dependent variables are dichotomous (i.e., whether or not the inmate participated in programming). The primary independent variables of interest are inmate gender, the interaction of gender and race, and specific "recognized needs" for each particular program and program domain. Each of the "recognized needs" (i.e., mental health history, abuse history, alcohol and/or drug dependency, educational background, employment history, and dependent children) are included in the analysis of program participation since certain background factors should influence participation in certain types of programming. For example, inmates who report a history of sexual and/or physical abuse are likely to benefit from some form of mental health programming. Therefore, one would expect to find that inmates who report histories of abuse are more likely to participate in mental health programming than those without histories of abuse.

I include a series of independent measures in each of the specified regression models to control for their effect on program participation. Individual-level controls

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<sup>9</sup> Not all individual items for each program domain have been included in the analysis. Some have been excluded either due to extremely low participation rates or because they are an "other" group. All items are used, however, in the aggregate domain outcome measure.

include several demographic measures: age, race, and criminal history, as well as several confinement related measures: amount of time served, current offense, and rules violations. I also include several facility-level independent measures: location, size, and security level of the facility in which the inmate is housed. These independent measures are included to control for possible effects of differences due to the facilities. To address Question 4 for each programming type and domain, I first use binary logistic regression to model each individual program and then I use binary logistic regression to model each program domain. The use of binary logistic regression is appropriate in both instances since the dependent variable is dichotomous (Hoffman, 2004). Additionally, to account for any errors due to the clustered nature of the data (i.e., inmates within facilities), clustered-robust standard errors are included with each model (Cameron & Miller, 2010).

#### *Participation in Mental Health Treatment*

The first area of programming addressed in Question 4 involves participation in mental health treatment. More specifically, I first examine the influence of inmate gender, a history of mental illness, and a history of prior physical and sexual abuse on the likelihood of participation in mental health treatment. I then examine if there is a simultaneous effect of gender and race on program participation. I use two types of binary logistic regression models to address this issue. First, I use binary regression models to analyze the influence of the independent measures of interest on participation for each mental health treatment (i.e., psychotropic medications, hospitalization, and counseling). Second, I use binary logistic regression to analyze the influence of the independent measures of interest on participation in mental health programs more broadly (i.e., mental health domain).

The independent measures of interest for each of these regression models include inmate gender, the interaction effect of gender and race, a history of sexual and physical abuse, and a history of mental illness (i.e., computed using self-reported information about their mental health background). For each of the regression models, I also include individual-level measures (i.e., age, race, criminal history, current offense, amount of time served, and rules violations) and facility-level characteristics (i.e., size, location, security level) as controls.

#### *Participation in Substance Abuse Treatment*

For the second area of programming addressed in Question 4, I am interested in determining the influence of inmate gender and a history of drug and/or alcohol dependency on participation in substance abuse treatment. I am also interested in a possible interaction effect of race and gender on program participation. Again, two separate types of binary logistic regression models are used to address this issue. First, I use binary logistic regression to determine the influence of my independent measures of interest on the likelihood of participating in each type of substance abuse program (i.e., inpatient and outpatient treatment, self-help/peer counseling, and education/awareness). Next, I use binary logistic regression to analyze the impact of my independent measures of interest on participation in substance abuse treatment and programming more broadly (i.e., substance abuse treatment domain).

The independent variables of interest include inmate gender, gender and race interaction effects, alcohol dependency, and drug dependency (i.e., both dependency measures computed using self-reported information about usage in the year prior to

admission). Additionally, I include both individual-level and facility-level measures to control for their effects, as well as any required mandatory drug and/or alcohol treatment.

#### *Participation in Life-Skills Programming*

The third program area considered in Question 4 is Life-Skills. Specifically, I consider the influence of inmate gender, the interaction effects of race and gender, employment history, and the presence of dependent children on the likelihood of participation in life-skills programming. Life-skills participation is analyzed using binary logistic regression for both individual programming types (i.e., employment counseling, parenting/ child-rearing classes, life-skills/community adjustment, and pre-release programming) and the broader life-skills programming domain.

The independent variables of interest include inmate gender, the interaction effects of race and gender, employment history, and whether or not the inmate has children under the age of 18 years. Each of the regression models also includes individual-level measures (i.e., age, race, criminal history, current offense, amount of time served, and rules violations) and facility-level characteristics (i.e., size, location, security level) as controls.

#### *Participation in Educational Programming*

The fourth area of programming to be addressed analyzes inmates' participation in educational programs. Specifically, I examine the influence of inmate gender, the interaction effects of race and gender, educational background, and employment history on the likelihood of participation in educational programs. Again, two types of binary logistic regression are used to address this issue. First, I use binary regression models to look at the influence of my independent measures of interest on participation for each

individual educational program. Next, I use binary regression to examine the influence of my independent measures of interest on participation in the case of the broader educational programming domain.

For these analyses, the independent measures of interest involve inmate gender, the interaction between gender and race, educational background, and employment history. Additionally, individual-level and facility-level control variables are included in each of these regression models.

#### *Participation in Vocational Education*

The fifth and final program area addressed in Question 4 involves looking at inmate participation in vocational education or job training. In particular, I analyze the influence of inmate gender, the interaction between gender and race, educational background, employment history, and dependent children on the likelihood of participation in vocational education or job training. As was noted earlier in my discussion of measures, information on involvement in vocational education or job training was collected in the Survey using just one question. As a result, I use one binary logistic regression model to address this program area for Question 4 since there is no indicator of a broader vocational programming domain. My independent measures of interest comprise inmate gender, the interaction effects of gender and race, educational background, employment history, and child(ren) less than 18 years. I also include individual-level measures (i.e., age, race, criminal history, current offense, amount of time served, and rules violations) and facility-level characteristics (i.e., size, location, and security level) to control for their possible influence on the outcome measures.

Table 5.1. Outcome Measures for Program Availability, Descriptives (Study 1, Census)

Name	Yes (f)	No (f)	Description
<b>Medical Care</b>			
Hepatitis C Test	91.4% (931)	8.6% (88)	0 = not available; 1 = available
Hepatitis C Treatment	84.6% (862)	15.4% (157)	0 = not available; 1 = available
Hepatitis B Vaccine	80.9% (824)	19.1% (195)	0 = not available; 1 = available
Tuberculosis Screening	81.7% (847)	18.3% (190)	0 = not available; 1 = available
HIV Test	95.6% (975)	4.4% (45)	0 = not available; 1 = available
HIV/AIDS Counseling	58.7% (609)	41.3% (428)	0 = not available; 1 = available
Suicide Prevention	98.0% (1003)	2.0% (20)	0 = not available; 1 = available
<b>Mental Health Care</b>			
Psychological Evaluations	77.4% (803)	22.6% (234)	0 = not available; 1 = available
24 Hour Mental Health Care	62.7% (650)	37.3% (387)	0 = not available; 1 = available
Therapy/Counseling	83.2% (863)	16.8% (174)	0 = not available; 1 = available
Psychotropic Medication	81.3% (843)	18.7% (194)	0 = not available; 1 = available
Assist to Community Care	71.0% (736)	29.0% (201)	0 = not available; 1 = available
Other Mental Health Care	5.7% (59)	94.3% (978)	0 = not available; 1 = available
<b>Substance Abuse Programming</b>			
Drug Treatment	90.7% (941)	9.3% (96)	0 = not available; 1 = available
Alcohol Treatment	91.4% (948)	8.6% (89)	0 = not available; 1 = available
<b>Work Assignments</b>			
Prison Industries	43.8% (454)	56.2% (583)	0 = not available; 1 = available
Facility Support	95.8% (993)	4.2% (44)	0 = not available; 1 = available
Farming/Agriculture	31.3% (325)	68.7% (712)	0 = not available; 1 = available
Public Works	62.8% (651)	37.2% (386)	0 = not available; 1 = available
Work Release	9.8% (101)	90.2% (925)	0 = not available; 1 = available
Other	14.9% (154)	85.1% (883)	0 = not available; 1 = available



Name	Yes ( <i>f</i> )	No ( <i>f</i> )	Description
<b>Educational Programming</b>			
Adult Basic Education	88.2% (915)	11.8% (122)	0 = not available; 1 = available
GED Preparation	91.1% (945)	8.9% (92)	0 = not available; 1 = available
Special Education	44.4% (460)	55.6% (577)	0 = not available; 1 = available
Vocational Education	67.8% (703)	32.2% (334)	0 = not available; 1 = available
College Courses	30.9% (320)	69.1% (717)	0 = not available; 1 = available
Study Release	3.2% (33)	96.8% (1004)	0 = not available; 1 = available
<b>Life-Skills Programming</b>			
Employment Programs	63.8% (662)	36.2% (375)	0 = not available; 1 = available
Life-Skills	72.3% (750)	27.7% (287)	0 = not available; 1 = available
Parenting	43.3% (449)	56.7% (588)	0 = not available; 1 = available
Other	28.2% (292)	71.8% (745)	0 = not available; 1 = available

N = 1,037

Table 5.2. Aggregate Outcome Measures for Program Availability, Descriptives (Study 1, Census)

Name	Yes (f)	No (f)	Mean (SD)	Description
<b>Any Programming</b>				
Medical Care	99.8% (1035)	0.2% (2)		0 = not available; 1 = available
Mental Health Care	92.7% (961)	7.3% (76)		0 = not available; 1 = available
Substance Abuse Programming	93.4% (969)	6.6% (68)		0 = not available; 1 = available
Work Assignments	97.8% (921)	2.2% (21)		0 = not available; 1 = available
Educational Programming	94.9% (984)	5.1% (53)		0 = not available; 1 = available
Life-Skills Programming	94.4% (979)	5.6% (58)		0 = not available; 1 = available
<b>Programming Scale</b>				
Medical Care			5.93 (1.22)	# of services offered (0-7)
Mental Health Care			3.81 (1.60)	# of services offered (0-6)
Work Assignments			2.61 (1.09)	# of work assignments offered (0-6)
Educational Programming			3.26 (1.34)	# of programs offered (0-6)
Life-Skills Programming			2.81(1.40)	# of programs offered (0-5)

N = 1037

Table 5.3. Ordinal Outcome Measures for Program Availability, Descriptives (Study 1, Census)

Name	Low ( <i>f</i> )	Medium ( <i>f</i> )	High ( <i>f</i> )
Medical Care	26.7% (277)	33.4% (364)	37.8% (392)
Mental Health Care	29.7% (308)	21.9% (227)	48.4% (502)
Work Assignments	46.1% (478)	31.7% (329)	21.1% (219)
Educational Programming	24.8% (257)	29.3% (304)	45.9% (476)
Life-Skills Programming	39.3% (408)	24.0% (249)	36.6% (380)

N = 1037

Table 5.4. Independent Variable Measures for Program Availability, Descriptives (Study 1, Census)

Name	Yes (f)	No (f)	Mean (SD)	Description
Gender-Housed	90.9% (943)	9.1% (94)		Female = 0; Male = 1
Location - Region				
West	14.6% (151)	85.4% (886)		0=other; 1=West
Mid-West	21.6% (224)	78.4% (813)		0=other; 1=Mid-West
South	47.7% (495)	52.3% (542)		0=other; 1=South
Northeast	16.1% (167)	83.9% (870)		0=other; 1=Northeast
Facility Age			30.14 (32.30)	Age of facility in years
Facility Security Level				
Max/supermax	28.6% (297)	71.4% (740)		0=other; 1=supermax/max
Medium	42.1% (437)	57.9% (600)		0=other; 1=medium
Minimum	29.2% (303)	70.8% (734)		0=other; 1=minimum
Facility Size			1027.58 (969.92)	Size of facility (6 -7,223)
less than 500	33.7% (349)	66.3% (688)		0=other; 1=0-499
500-999	25.2% (261)	74.8% (776)		0=other; 1=500-999
1000 or more	41.2% (427)	58.8% (610)		0=other; 1=1,000 -7,223

N = 1037

Table 5.5. Outcome Measures for Program Participation, Descriptives (Study 2, Survey)

Name	Yes (f)	No (f)	Description
<b>Medical Care</b>			
Tuberculosis Testing	95.1% (13,189)	4.9% (676)	0=no; 1=yes
HIV Testing	84.7% (9,271)	15.3% (1,679)	0=no; 1=yes
Medical Exam	84.4% (11,707)	15.6% (2,157)	0=no; 1=yes
Pelvic Exam*	85.4% (800)	14.6% (137)	0=no; 1=yes
Dental Treatment	43.1% (5,975)	56.9% (7,898)	0=no; 1=yes
<b>Mental Health</b>			
Psychotropic Medication	15.1% (2,090)	84.9% (11,751)	0=no; 1=yes
Hospitalization	3.1% (424)	96.9% (13,415)	0=no; 1=yes
Counseling	12.7% (1,760)	87.3% (12,073)	0=no; 1=yes
Other	1.9% (261)	98.1% (13,555)	0=no; 1=yes
<b>Substance Abuse</b>			
Detoxification	0.7% (90)	99.3% (12,893)	0=no; 1=yes
Inpatient Treatment	7.5% (978)	92.5% (12,001)	0=no; 1=yes
Outpatient treatment	5.2% (672)	94.8% (12,305)	0=no; 1=yes
Self-Help/Peer Counseling	25.2% (3,276)	74.8% (9,699)	0=no; 1=yes
Education/Awareness	15.1% (1,956)	84.9% (11,016)	0=no; 1=yes
Maintenance	0.2% (24)	99.8% (12,957)	0=no; 1=yes
Other	1.4% (181)	98.6% (12,801)	0=no; 1=yes
<b>Recreation</b>			
Physical Exercise	59.7% (8,261)	40.3% (5,573)	0=no; 1=yes
Television	68.1% (9,424)	31.9% (4,410)	0=no; 1=yes
Reading	74.6% (10,312)	25.4% (3,517)	0=no; 1=yes
Phone calls	83.8% (11,573)	16.2% (2,244)	0=no; 1=yes
Other recreation	40.4% (5,595)	59.6% (8,242)	0=no; 1=yes

Name	Yes (f)	No (f)	Description
Religious	55.4% (7,666)	44.6% (6,166)	0=no; 1=yes
Work Assignment			
On-Grounds	60.1% (8,317)	39.9% (5,520)	0=no; 1=yes
Off-Grounds	7.5% (1,033)	92.5% (12,806)	0=no; 1=yes
Janitorial work	18.6% (2,577)	81.4% (11,259)	0=no; 1=yes
Grounds/road maintenance	8.0% (1,111)	92.0% (12,725)	0=no; 1=yes
Food preparation	12.0% (1,660)	88.0% (12,177)	0=no; 1=yes
Laundry	3.2% (445)	96.8% (13,392)	0=no; 1=yes
Medical Services	0.6% (86)	99.4% (13,750)	0=no; 1=yes
Farming/Forestry/Ranching	2.2% (310)	97.8% (13,526)	0=no; 1=yes
Goods production	3.3% (452)	96.7% (13,384)	0=no; 1=yes
Other Services	6.6% (915)	93.4% (12,922)	0=no; 1=yes
Maintenance/construction	5.0% (695)	95.0% (13,141)	0=no; 1=yes
Other work assignments	10.4% (1,439)	89.6% (12,396)	0=no; 1=yes
Paid for work	38.1% (5,262)	61.9% (8,553)	0=no; 1=yes
Vocational Training	27.5% (3,799)	72.5% (10,024)	0=no; 1=yes
Education			
Basic Education	2.0% (282)	98.0% (13,546)	0=no; 1=yes
High School/GED Preparation	19.3% (2,672)	80.7% (11,155)	0=no; 1=yes
College courses	7.3% (1,003)	92.7% (12,825)	0=no; 1=yes
English as Second Language	1.0% (144)	99.0% (13,684)	0=no; 1=yes
Other educational programs	5.4% (750)	94.6% (13,077)	0=no; 1=yes
Life-Skills			
Employment counseling	8.9% (1,229)	91.1% (12,585)	0=no; 1=yes
Parenting/child-rearing classes	8.3% (1,150)	91.7% (12,664)	0=no; 1=yes
Life-Skills/comm. adjustment	23.5% (3,250)	76.5% (10,561)	0=no; 1=yes
Pre-Release Programs	5.4% (740)	94.6% (13,074)	0=no; 1=yes

N = 14,499

\* female inmates only

Table 5.6. Aggregate Outcome Measures for Program Participation, Descriptives (Study 2, Survey)

Name	Yes (f)	No (f)	Description
Medical Care*	99.9% (10,900)	0.1% (12)	0=no; 1=yes
Mental Health Care	19.1% (2,632)	80.9% (11,160)	0=no; 1=yes
Substance Abuse Programming	36.5% (4,726)	63.5% (8,227)	0=no; 1=yes
Recreation	98.6% (13,603)	1.4% (186)	0=no; 1=yes
Work Assignments	66.2% (9,164)	33.8% (4,672)	0=no; 1=yes
Feminine Assignments	33.8% (4,682)	66.2% (9,154)	0=no; 1=yes
Masculine Assignments	14.9% (2,064)	85.1% (11,772)	0=no; 1=yes
Educational Programming	31.5% (4,357)	68.5% (9,471)	0=no; 1=yes
Life-Skills Programming	29.3% (4,047)	70.7% (9,762)	0=no; 1=yes

N = 14,499; \*excludes pelvic exam

Table 5.7. Independent Variable Measures for Program Participation, Descriptives (Study 2, Survey)

Name	Yes (f)	No (f)	Mean (SD)	Description
Gender	93.2% (13,091)	6.8% (951)		0=female; 1=male
Race				
White	48.8% (6,847)	51.2% (7,196)		0=no; 1= White
Black	43.0% (6,040)	57.0% (8,003)		0=no; 1=Black
Other	11.3% (1,598)	88.7% (12,454)		0=no; 1=other
Age			35.36 (10.60)	age in years (16-84)
Children	58.3% (8,093)	41.7% (5,793)		0=no children under 18; 1= yes
Drug dependency			3.18 (4.14)	score of self-assessed measures (0-11)
Alcohol dependency			2.30 (3.36)	score of self-assessed measures (0-11)
Sexual abuse	8.7% (1,202)	91.3% (12,646)		0=no abuse; 1=abuse
Physical abuse	16.2% (2,251)	83.8% (11,630)		0=no abuse; 1=abuse
Employment history	72.4% (9,857)	27.6% (3,749)		0=unemployed prior; 1=employed
Education				
Less than high school	11.7% (1,635)	88.3% (12,285)		0=other; 1=less than high school
High school	74.0% (10,306)	26.0% (3,615)		0=other; 1=high school
Some or more college	13.9% (1,933)	86.1% (11,987)		0=other; 1=some or more college
Mental Health History	25.4% (3,489)	74.6% (10,239)		0=no; 1= yes
Mandatory drug/alcohol treatment	16.6% (2,269)	83.4% (11,421)		0=no, 1=mandatory treatment
Criminal history			1.56 (2.94)	# of prior incarcerations (0-95)
Current Offense				
Violent offense	47.6% (6,591)	52.4% (7,269)		0=other; 1=violent
Property offense	19.1% (2,645)	80.9% (11,215)		0=other; 1=property



Name	Yes ( <i>f</i> )	No ( <i>f</i> )	Mean (SD)	Description
Drug offense	21.7% (3,011)	78.3% (10,849)		0=other; 1=drug
Other offense	11.6% (1,613)	88.4% (12,247)		0=violent, property or drug; 1=other
Time served			49.39 (61.09)	Time served so far in # of months (0-526)
Rule violations	51.3% (7,079)	48.7% (6,712)		0=none; 1=one or more violations
Facility Security Level				
Max/supermax	34.6% (4,859)	65.4% (9,184)		0=other; 1=supermax/maximum
Medium	49.7% (6,975)	50.3% (7,068)		0=other; 1=medium
Minimum	14.6% (2,054)	85.4% (11,989)		0=other; 1=minimum
Facility Location				
West	23.1% (3,237)	76.9% (10,805)		0=other; 1=West
Mid-West	20.4% (2,864)	79.6% (11,179)		0=other; 1=Mid-West
South	41.8% (5,865)	58.2% (8,177)		0=other; 1=South
Northeast	13.7% (1,921)	86.3% (12,122)		0=other; 1=Northeast
Facility Size			1938.30 (1547.46)	
under 500	11.7% (1,645)	88.3% (12,398)		0=other; 1=under 500
500-999	16.2% (2,270)	83.8% (11,773)		0=other; 1=500-999
1000 or more	71.0% (9,973)	29.0% (4,070)		0=other; 1=1,000-7,223

N = 14,499

## CHAPTER SIX: FINDINGS

### Study 1: Gender Differences and Program Availability in U.S. Prisons

#### Question 1-A:

*Are there notable differences in the availability of programming options for incarcerated men and women? Additionally, do programming options vary by location, size, or security level of the facility?*

Question 1-A examines the relationship between type of prison (male facility vs. female facility) and program availability. To address this question, I assessed the presence and strength of a relationship between type of prison and whether or not a program or service was offered using chi-square analysis and Cramer's V to test for strength of the association. I completed this analysis for each program within each of the program domains (i.e., medical programming, mental health care, substance abuse programming). As shown in Table 6.1, there was a significant relationship between whether the prison housed males or females and at least one type of programming within each domain. For each significant relationship, a higher percentage of female facilities offered the program or service compared to the percentage of male facilities.

In regards to medical programming, a significant but weak ( $V = 0.11$ ,  $p < 0.001$ ) relationship was found between gender-housed and HIV/AIDS counseling,  $\chi^2(1, N=1,020)=12.04$ ,  $p < 0.01$ ) with almost 76% of female prisons providing programming compared to 57% of male prisons. The percentage of 'other' available medical programs and services did not differ by whether or not the prison housed men or women. For mental health care, again only one program, assistance to community care significantly

differed by gender,  $\chi^2(1, N=1,037)=3.90, p < 0.01$ . The relationship was weak with approximately 80% of female prisons providing this kind of assistance compared to 70% of male prisons ( $V = 0.06, p < 0.01$ ). I also found a significant relationship between drug treatment availability and gender,  $\chi^2(1, N=1,037)=8.26, p < 0.01$ , however the relationship was weak ( $V = 0.09, p < 0.01$ ). Virtually all facilities that housed women offered some form of drug treatment (98.9%), while the percentage of male facilities that offered this programming was lower (89.9%).

For work assignments, only assignments to prison industries and work release programs significantly differed by gender. Just over half of female facilities (55.3%) offered prison industries compared to about 43% of male facilities,  $\chi^2(1, N=1,037)=5.59, p < 0.05$ , and while significant, this relationship was weak ( $V = 0.07, < 0.01$ ). Work release programs were less frequently offered to inmates overall, yet female institutions (20.2% of prisons) were still significantly more likely to offer these programs than institutions for their male counterparts (8.8% of prisons),  $\chi^2(1, N=1,026)=12.54, p < 0.001$ . Once again, the relationship was also weak ( $V = 0.11, p < 0.001$ ).

Two of the six educational programming options had a significant but weak relationship with whether the prison housed men or women. A majority of male and female prisons offered vocational education classes but a higher percentage of women's facilities (79.8%) than men's facilities (66.6%) offered these classes,  $\chi^2(1, N=1,037)=6.81, p < 0.01; V = 0.08, p < 0.01$ . Female facilities (42.6%) were also more likely to provide college level courses than were male facilities (29.7%),  $\chi^2(1, N=1,037)=6.63, p < 0.05; V = 0.08, p < .05$ . Finally, a higher percentage of female than male facilities reported offering three types of life-skills programming. Both employment programs

(76.6% vs. 62.6%,  $\chi^2(1, N=1,037)=7.29, p < 0.01$ ) and life-skills programs (84.0% vs. 71.2%,  $\chi^2(1, N=1,037)=7.09, p < 0.01$ ) were significantly associated with gender although each relationship was weak ( $V = 0.08, p < .01$  for each respectively). Lastly, there was a significant and moderate relationship found between available parenting programs and whether the prison was for men or women,  $\chi^2(1, N=1,037)=52.84, p < 0.001; V = 0.23, p < .001$ . Almost twice the percentage of women's prisons compared to men's prisons (78.7% vs. 39.8%) provided parenting programming to their inmates.

It is interesting to note that in regards to the gender housed by facility and programming availability within facilities, when programming significantly differed by gender-housed, female facilities reported offering more programs than male facilities. This is particularly striking since, historically, women have received significantly fewer programs than men, and the programming they did receive was often inferior to that of their male counterparts (Lee, 2000; Rafter, 1989, 1990). Therefore, these results may indicate a change in programming for women, where women are actually receiving more programs once incarcerated than ever before. However, it is important to remember that these findings only indicate whether a program was offered, they do not indicate how many people participated in these programs or the quality of these programs. Still, the fact that more women's prisons are offering many of these programs than men's prison is noteworthy.

Since prison programming might vary by security level, location, and size, I also examined the relationship between each of these factors and programming availability using chi-square analysis and Cramer's V as an indicator for strength of association. Table 6.2 presents the results for the analysis of security level and program availability.

Overall, the availability of programs and services tends to be related to whether the prison is a minimum, medium, or maximum security level facility. A significant relationship was found between facility security level and each type of program or service with the exception of one, farming and agriculture work assignments (see Table 6.2 for specific chi-square values and results).

A large percentage of prisons generally offer programming and services in the medical care area. A significant and moderate relationship was found between security level and Hepatitis C testing ( $V = 0.21, p < .001$ ), Hepatitis C treatment ( $V = 0.24, p < .001$ ), and HIV/AIDS testing ( $V = 0.21, p < .001$ ). A significant but weak relationship was found between security level and the remaining medical care areas noted in Table 6.2. I found primarily moderate or strong relationships between security level and available mental health care options. A strong relationship was found between security level and the availability of therapy and counseling for inmates ( $V = 0.37, p < .001$ ) with about 95% of maximum level prisons and 90% of medium level prisons, as compared to 62% of minimum level prisons offering this type of mental health care. I also found a strong relationship between security level and the availability of psychotropic medications ( $V = 0.37, p < .001$ ). Again, almost all maximum level prisons (94.6%), approximately 88% of medium level prisons, and 60% of minimum level prisons made psychotropic drugs available to their prisoners. A significant and moderate relationship was found between security level and psychological evaluations ( $V = 0.29, p < .001$ ), 24-hour mental health care ( $V = 0.24, p < .001$ ), and assistance to community care ( $V = 0.28, p < .001$ ). A significant yet weak relationship was found between facility security level and available

drug treatment programs ( $V = 0.13$ ,  $p < .001$ ) and alcohol treatment programs ( $V = 0.12$ ,  $p < .01$ ).

Work assignments such as prison industries, facility support, public works, and work release also appeared to vary by whether the prison was minimum, medium, or maximum/supermax security level. The relationship between security level and prison industries was moderate in strength ( $V = 0.28$ ,  $p < .001$ ) with almost 58% of maximum/supermax prisons offering prison industry programs compared to 48% of medium security prisons and 23% of minimum security prisons offering such programs. The relationship between facility security level and facility support programs ( $V = 0.11$ ,  $p < .01$ ), public works ( $V = 0.18$ ,  $p < .001$ ), and work release ( $V = 0.18$ ,  $p < .001$ ) were all weak in strength.

The availability of each educational program noted in Table 6.2 also varied depending on facility security level. I found a moderate relationship between facility security level and the availability of adult basic education programs ( $V = 0.20$ ,  $p < .001$ ) with 94% of medium security level facilities providing this type of programming compared to 89% of maximum/supermax facilities, and 79% of minimum facilities offering adult basic education programs. I also found a moderate relationship between security level and special education ( $V = 0.22$ ,  $p < .001$ ) with 50% of both medium and maximum/supermax prisons offering these programs and only 28% of minimum level facilities providing access to special education focused programs. A similar pattern was also found for the moderate relationship between security level and vocational education programs ( $V = 0.24$ ,  $p < .001$ ). Again, both medium and maximum/supermax facilities provided these programs at similar levels (75.7% and 74.1% respectively), whereas 50%

of minimum level facilities offered vocational programs to their inmates. The remaining educational programs (i.e., GED, College courses, study release) had a significant but weak relationship with facility security level. Finally, access to different life-skills programs also varied depending on the facility security level, but in each of these instances the relationship was also found to be weak.

I next examined the relationship between facility size and available programming since larger facilities might be able to offer more types of programs to their inmates than smaller facilities. The results presented in Table 6.3 confirm the fact that for almost every type of program there was a significant relationship with facility size. Most of the associations between facility size and program availability were weak to moderate. In the medical area, I found a moderate relationship between facility size and Hepatitis C testing ( $V = .21, p < .001$ ), Hepatitis C treatment ( $V = 0.26, p < .001$ ), HIV/Aids Testing ( $V = 0.22, p < .001$ ), and HIV/AIDS Counseling ( $V = 0.20, p < .001$ ). Mental health care varied by the size of the facility as well. In particular, I found a strong relationship between facility size and psychological evaluations ( $V = .31, p < .001$ ), access to therapy and counseling ( $V = 0.39, p < .001$ ), and the availability of psychotropic medications ( $V = .037, p < .001$ ). For example, therapy and counseling was offered in almost 96% of large prisons (i.e., 1000+ inmates), 90% of medium size prisons (500 to 999 inmates), compared to 63% of small prisons (under 500 inmates).

The relationship between facility size and prison industry programs was also strong ( $V = 0.35, p < .001$ ) with 62% of large prisons providing this type of programming compared to 44% of medium size prisons and 22% of smaller prisons. A moderate strength association was found between facility size and farming or agricultural prison

programs. In terms of educational offerings, I found a strong relationship between facility size and vocational programming ( $V = 0.41$ ,  $p < .001$ ). Again, larger prisons were more likely to offer vocational programs (86%) than were medium size prisons (72%) or smaller prisons (42%). Additionally, prison size was moderately associated with adult basic education ( $V = 0.25$ ,  $p < .001$ ), GED preparation ( $V = 0.22$ ,  $p < .001$ ), and special education programs ( $V = 0.28$ ,  $p < .001$ ).

Finally, I examined the relationship between location of the prison (i.e., region of the country) and programming since the prison literature suggests that this might be important in determining whether certain programs are likely to be offered to inmates (Morash et al., 1994). The results of this part of the analysis are presented in Table 6.4. I found significant relationships between facility location and programming in each of the domains except substance abuse programming. Prisons around the country generally provide programming in each of the medical areas. I found a significant but weak relationship between location and Hepatitis C testing, Hepatitis B vaccine, Tuberculosis screening, and HIV/AIDS testing (see Table 6.4). I also found a moderate relationship between location and HIV/AIDS counseling ( $V = 0.28$ ,  $p < .001$ ) with prisons in the Northeastern region of the United States offering this type of programming at higher levels (89%) than prisons in the Midwest (60%), South (52%) or West (47%). In the mental health care area, a significant but weak association was found between location and psychological evaluations, 24-Hour mental health care, and access to psychotropic medications.

Significant relationships between facility location and various work assignments were found, although most were weak in strength (e.g., prison industries, facility support,



public works, and work release). Not surprisingly, there was a moderate relationship between facility location and farming or agricultural programs ( $V = 0.26, p < .001$ ). Approximately, 44% of prisons in the South compared to 28% of prisons in the West, 19% of prisons in the Northeast, and 16% of prisons in the Midwest used farming and agricultural programs with their inmates. For educational programs, about half of the program areas (i.e., special education, vocational education, and college courses) were significantly associated with facility location, however the strength of the relationship was weak (see Table 6.4).

Life-skills programming, in particular, appeared to vary by facility location in the country. I found a significant and moderate relationship between location and each of the life-skills programs with prisons in the Northeastern part of the country providing each of the programs at higher levels than prisons in other parts of the country. For example, 82% of prisons in the Northeast provided life-skills related employment programs to their inmates compared to 71% of prisons in the Midwest, 70% of prisons in the West, and 53% of prisons in the South ( $V = 0.24, p < .001$ ). A similar pattern also held for parenting programs with almost 63% of prisons in the Northeast compared to 54% in the West, 50% of prisons in the Midwest, and 30% of prisons in the South providing such programming ( $V = 0.26, p < .001$ ).

In sum, when the chi-square analysis revealed significant relationships between gender and program availability, more female facilities reported offering more of the programs. Again, the fact that many of the programs were found in more female facilities than male facilities is somewhat surprising considering previous research has frequently found lacking or limited programming options within female facilities (Lee,

2000; Rafter, 1989, 1990). Additionally, I found that program availability differed by location, size, and security of the facility. This is consistent with the findings of Morash and colleagues (1994) who noted that these facility-level characteristics did influence program availability. Additionally, this study found that oftentimes, facilities with higher levels of security and larger facilities offered more programming than minimum security and smaller facilities. The results here confirm the importance of considering facility-level measures when examining correctional programming availability, therefore it is necessary to include these measures as control variables in multivariate analyses that examine the relationship between gender and program availability.

**Question 1-B:**

*Are the programs offered in correctional facilities limited by perceived gender stereotypes or expectations for men and women? In other words, to what extent do gender stereotypes or traditional expectations influence available programs?*

To answer the second part of question one, I focused on programming options that might be considered stereotypical and their relationships with gender. In order to assess the relationship between programming and gender, I examined the results from the previously performed chi-square analyses from Question 1-A for each of the following program options: prison industry assignments, facility services assignments, farming/agriculture assignments, public works assignments, the availability of psychotropic medications, and the availability of parenting programs, employment programs, life-skills, and vocational training. It was stipulated that psychotropic medication, parenting programs, and facility services, if more likely found in female facilities might indicate support of "traditional" gender expectations for women. Additionally, it was stipulated that prison industries, farming/agriculture, public works,

vocational training, employment programs, and life-skills programs, if more likely found in male facilities might indicate support of stereotypical gender expectations for men.

According to the analyses, only one of the programs examined that was thought to be indicative of feminine stereotypical programs was significant with female facilities offering more programs than male institutions (See Table 6.5). This programming option was parenting programs,  $\chi^2(1, N=1,037)=52.84, p < 0.001$ . The relationship was not only significant but also moderate in strength ( $V = 0.23, p < .001$ ). Over three-fourths (79%) of female facilities offered parenting programs, while only 40% of male facilities reported offering these programs. I found no significant differences between female and male prisons in terms of providing psychotropic medications or assigning inmates to facility services. Finally, the same number of male and female facilities reported offering facility support assignments (96%).

In regards to traditionally masculine program availability, I found a significant relationship between gender and four of the six programs. Significant but weak relationships were found between the gender housed in a facility and prison industries ( $V = 0.07, p < .01$ ), vocational education ( $V = 0.08, p < .01$ ), employment programs ( $V = 0.08, p < .01$ ), and life-skills programs ( $V = 0.08, p < .01$ ). However, the relationships were not in the expected direction with a higher percentage of female facilities reported offering these programs compared to the percentage of male facilities. For instance, 55% of female facilities compared to 43% of male facilities offered prison industries, and 80% of female facilities compared to 67% of male facilities offered vocational education programs. Additionally, 77% of female facilities versus 63% of male facilities offered employment programs, and 84% of female prisons compared to 71% of male prisons had

life-skills programming available. Thus, the availability of many of the stereotypically masculine programs differed significantly by whether the prison housed men or women, however the findings were not in the expected direction. Instead, female prisons were more likely to offer some of these stereotypically masculine programs to their inmates than were male prisons.

In sum, five of the nine possibly stereotypical programs examined were significantly related to the gender housed by the facility. When these relationships were significant, more female facilities than male facilities offered these assignments – even those that were stipulated to be stereotypically male. In fact, only one programming option examined was offered by more male facilities than female facilities:

farming/agriculture. However, the availability of this work assignment was not significantly different due to gender-housed. Again, the finding that female prisons offered more programs is particularly noteworthy in regards to vocational education and life-skills programming options because much research has shown female facilities often lack or have limited programming in regards to men, especially for these types of programs (Lee, 2000).

**Question 2:**

*Does the gender of inmates housed in the facility influence program availability controlling for other facility-level characteristics (e.g., size, security level, location)?*

In the first research question, I considered the bivariate relationship between gender-housed and each program option. Additionally, I examined the bivariate relationship between three facility-level measures and each program option. To address the second research question, I examined the relationship between gender-housed and each program option once again, but this time used binary logistic regression to control

for the possible influence of facility-level measures. Additionally, I used ordered logistic regression to explore the relationship between gender-housed and levels of programming (i.e., low, medium, and high) for each program domain (i.e., each broad programming area). However, the ordered logistic regression models for medical programming, mental health care, work assignments, and educational programming failed to meet the proportional odds assumption required for ordered logistic regression as determined through the Brant test of parallel lines. Therefore, these four programming domains were analyzed using the generalized ordered logit model (GOLM), which is considered an appropriate alternative for ordered logistic regression because it relaxes the proportional odds assumption (see Fu, 1998; Williams, 2006)<sup>10</sup>. For both the binary and ordinal outcome models, facility size, security, and location served as control measures.

#### *Binary Logistic Regression Models*

According to the binary logistic regression analysis for medical programming, the overall model for each individual program was significant<sup>11</sup>, yet gender was significant for only two medical programs: tuberculosis screening and HIV/AIDS counseling (see Table 6.6). For both program types, the odds of the programming being offered were significantly increased when the facility housed women. The odds of a prison offering

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<sup>10</sup>The GOLM frees all variables from the parallel line restraint even though all variables may not have violated the proportional odds assumption (Williams, 2006). Thus, this model may include more parameters than is necessary, which is a limitation of the model, but one that can be easily adjusted by fitting partial proportional odds models (Williams, 2006). These models only relax the proportional odds assumption for variables where it is not justified (Williams, 2006).

<sup>11</sup> Due to an extreme skew on the dependent variables, the final models for both HIV/AIDS testing and suicide prevention programs were modified, and only included the following main independent variable, gender-housed, and the reference categories of the control variables: the facility being located in the West, being a minimum level security facility, and facility size.

Tuberculosis screening increased by 113%<sup>12</sup> and the odds of a prison offering HIV/AIDS counseling increased by 285% if the facility housed women instead of men.

Notably, the size of the facility was significant for each of the medical program models. The odds of the medical program increased as the size of the facility increased. In other words, as the size of the facility increased by 500 inmates, the odds of the facility having Hepatitis C testing increased by 84%, Hepatitis C treatment increased by 42%, Hepatitis B vaccines increased by 21%, Tuberculosis screening increased by 33%, HIV/AIDS testing increased by 193%, HIV/AIDS therapy increased by 43%, and suicide prevention programs increased by 241%.

Security level was also significant for most of the medical models with higher levels of security being associated with increased odds of Hepatitis C testing (103% for maximum level, 99% for medium level compared to minimum level security facilities), Hepatitis C treatment (199% for maximum level, 86% for medium level), Tuberculosis screening (74% for maximum level), and suicide prevention (decreased odds of 80% for minimum level security) programs being available (see Table 6.6). Security level was also significant for HIV/AIDS Counseling, however, maximum level facilities had decreased odds (39%) of this programming being available compared to minimum level security.

Finally, location affected the odds of facilities offering medical programming in many models. Compared to the West, facilities in the Northeast had significantly increased odds of Hepatitis C testing (224%), Hepatitis B vaccines (152%), Tuberculosis screening (430%), and HIV/AIDS counseling (1,326%). Facilities located in the South

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<sup>12</sup>Odds ratios for female prisons were calculated by dividing 1 by the odds ratio (i.e., by taking its reciprocal).

had significantly increased odds compared to facilities located in the West of Hepatitis C treatment (77%), Hepatitis B vaccines (104%), Tuberculosis screening (158%), and available HIV/AIDS counseling (72%). Compared to facilities in the West, facilities in the Midwest had significantly increased odds of offering HIV/AIDS counseling (142%). Additionally, compared to facilities in other regions of the country, facilities located in the West had decreased odds of offering HIV/AIDS testing (67%).

Regarding mental health programming, the overall binary logistic regression models for each mental health program were also significant as shown in Table 6.7. Furthermore, whether or not the prison housed men or women significantly influenced the availability of each type of mental health offering except for ‘other’ mental health programming. The likelihood of availability for programming options such as psychological evaluations, 24-hour mental health care, therapy/counseling, psychotropic medication, and assistance to community care increased when the prison housed women. For facilities that housed females compared to males, the odds of the programming being available increased by 117% for psychological evaluations, 79% for 24-Hour mental health care, 194% for therapy or counseling, 156% for psychotropic medications, and 108% for assistance to the community care.

Similar to the results for medical programming, each mental health program was significantly influenced by facility size, except for ‘other’ mental health care. The odds of a mental health care program being offered were significantly increased as the size of the facility increased (except for ‘other’ mental health care). For every increase of 500 inmates housed in the facility, the odds of the facility offering psychological evaluations

increased by 69%, 24-hour mental health increased by 56%, therapy or counseling increased by 158%, and assistance to community care increased by 28%.

Additionally, the security level of the facility also affected the odds of many mental health care programs' availability. Maximum security facilities had increased odds of offering psychological evaluations (164%), therapy and counseling (307%), psychotropic medication (429%), and assistance to community care (253%) as compared to minimum security facilities. Conversely, maximum level facilities had significantly decreased odds of 'other' mental health care (63%) being available. Medium security level facilities had significantly increased odds of psychological evaluations (84%), 24-hour mental health care (101%), therapy and counseling (148%), psychotropic medication (135%), and assistance to community care (80%) being available compared to minimum security level facilities. The location of facilities also significantly affected the likelihood of programs being offered for many of the mental health care options. Facilities located in the South had decreased odds of offering 24-hour mental health care (42%) and increased odds of offering assistance to the community (57%) compared to facilities located in the West. Additionally, facilities located in the Midwest had significantly decreased odds of offering psychological evaluations (50%), 24-hour mental health care (51%), and psychotropic medication (45%) than facilities located in the West. Notably, there was no difference between prisons in the West and prisons in the Northeast in the availability of any of the mental health programs or services.

The binary logistic regression results for drug and alcohol treatments are presented in Table 6.8. The overall models for drug treatment and alcohol treatment were significant. Furthermore, whether the prison housed men or women significantly



influenced the availability of both types of programs. The odds of a facility offering drug treatment increased by 1,567% if it housed females, while the odds of a facility having alcohol addiction programs increased by 426% if the prison housed females. In regards to size, for both drug and alcohol treatment as the size of the facility increased the odds of the facility offering treatment also significantly increased. For drug and alcohol treatments, as the size of the facility grew by 500 inmates, the odds of having these programs increased by 39% and 96%, respectively. Security level of the facility also significantly influenced access to drug and alcohol treatment when the facility was a maximum level security facility. Compared to minimum level security facilities, maximum level security prisons had decreased odds of drug treatment (53%) and alcohol treatment (59%) being available. The location of a facility had a limited impact on the availability of drug and alcohol treatment. Facilities in the Northeast had significantly increased odds of drug treatment programs (246%) being available compared to facilities located in the West.

I next estimated binary logistic models for each of the work assignments and the overall models were found to be significant (see Table 6.9). Whether the prison housed men or women significantly influenced the availability of two types of work programs: prison industries and work release. The odds of a facility offering prison industries increased by 127% if the facility housed females and also increased the odds by 194% for work release if the prison housed females. Available facility support assignments, farming and agriculture work opportunities, and 'other' work assignments did not differ significantly by whether the prison housed men or women.

Size of the facility significantly affected the odds of a facility offering prison industries, farming and agriculture, and public works with increased odds of the programs being present as the size of the facility increased. Therefore, for every increase in size of 500 inmates, the odds of the facility offering prison industries increased by 44%, farming and agriculture increased by 32%, and public works assignments increased by 26%.

In regards to security level, there were increased odds of prison industries being available in both medium (137%) and maximum (201%) security prisons, while they had significantly decreased odds of offering public works in medium (66%) and in maximum (77%) security prisons as opposed to minimum security prisons. There were also decreased odds of work release programs being offered in medium (65%) and maximum (80%) security prisons compared to minimum security facilities. Additionally, when a facility was a maximum level prison, the odds of having 'other' work assignments available were significantly increased compared to minimum security facilities. The location of the facility also significantly affected the odds of work assignments being available. Compared to facilities located in the West, those in the Northeast had significantly decreased odds of offering prison industry assignments (55%) and significantly increased odds of facility support (218%) and work release assignments (287%) being available. Facilities located in the South had significantly decreased odds of prison industry assignments being available while having significantly increased odds of offering facility support (411%), farming and agriculture (235%), and public works assignments (107%) compared to facilities located in the West (see Table 6.9).

Next, I estimated a binary logistic regression model for all of the educational programs and each of the models was significant (see Table 6.10). Whether the facility

housed men or women significantly affected the odds of the following educational programs being available: adult basic education, GED preparation, vocational education, and college courses. For those programs that were significantly affected by gender, the odds for each program being offered were significantly increased if the facility housed females. For adult basic education the odds increased by 144%, the odds of GED preparation increased by 186%, the odds of vocational training increased by 270%, and the odds of college courses being available in facilities increased by 96% for facilities housing women compared to facilities housing men.

The size of the facility significantly affected all educational program offerings except study release programs, with the odds of the program being offered increasing as the size of the facility increased. For every increase of 500 inmates housed in the facility, the odds of the facility offering basic education increased by 120%, GED preparation increased by 102%, special education increased by 17%, vocational education increased by 141%, and college courses increased by 11%. Facilities that were medium level security had significantly increased odds of offering adult basic education (103%), special education (123%), and college courses (66%), while having significantly decreased odds of offering study release programs (70%) compared to minimum security facilities. Maximum security level facilities had significantly increased odds of offering special education (133%), but significantly decreased odds of offering study release programs (96%) compared to minimum level facilities. Also, in regards to location, the facilities in the Northeast had significantly increased odds of special education programs (78%) being available to their inmates, while facilities in the Midwest had significantly

decreased odds of offering vocational education programs (43%) to their inmates, compared to facilities in the West.

Finally, binary logistic models were estimated for each of the life-skills related programs. The results are presented in Table 6.11 and each of the overall models was significant. Whether the prison housed males or females significantly influenced the odds of employment programs, life-skills programs, and parenting programs being available. In regards to employment programs and life-skills programs, when facilities housed females the odds of these programs being available increased by 186% and 163%, respectively. The findings for parenting programs are quite notable. The odds of the program being available increased by 669% when the facility housed females compared to when the facility housed males. The size of the facility significantly affected the odds of all four life-skills programs being available with the odds of program availability increasing as the size of the facility increased. For every increase in size of 500 inmates, the odds of the facility providing employment programs increased by 37%, life-skills/community adjustment programs increased by 19%, parenting programs increased by 21%, and other life-skills programs increased by 10%.

Security level of the facility also significantly affected the odds of each of the life-skills programs being offered with maximum security prisons having decreased odds of offering employment programs (61%), life-skills (43%), and parenting programs (37%), but significantly increased odds of offering 'other' life-skills programs (112%) in comparison with minimum security facilities. Medium security facilities also had increased odds of offering 'other' life-skills programming (48%) in comparison with minimum security facilities. Additionally, the location of the facility was significant for

all life-skills programming options. Facilities located in the Northeast had significantly increased odds of having employment (155%), life-skills (89%), parenting programs (87%), and ‘other’ life-skills programs (293%) being offered to their inmates compared to programs being offered to inmates in the West. However, facilities in the South had significantly decreased odds of offering employment (42%), life-skills (54%), and parenting programs (55%) compared to facilities in the West, but significantly increased odds of ‘other’ life-skills programs (211%) being available. Facilities in the Midwest were not significantly different compared to those in the West.

#### *Ordered Logistic Regression and Generalized Ordered Logit Models*

As previously noted, I used either ordered logistic regression or generalized ordered logit models (GOLM) to analyze the effects of gender-housed on levels of programming domain availability. As shown in Table 6.12, the GOLM used to analyze medical, mental health, work assignments, and education programs indicated many significant findings. In regards to gender, facilities housing women had significantly higher odds of having high versus medium or low levels of medical care, mental health care, work assignments, and education programs available and significantly higher odds of having medium or high levels of these programs available versus a low level than facilities housing men. In other words, female facilities had 94% increased odds of having higher levels of medical care available versus lower levels compared to male facilities. Facilities housing female inmates also had increased odds of 133% compared to those housing males to have higher levels of mental health care versus a low level of this programming. Work assignments and education programs were also significantly affected by gender. Facilities housing females had 100% increased odds for work

assignments and 169% increased odds for educational programs of having higher levels of programming compared to lower levels of programming, than facilities housing men.

The findings for the effects of facility-level characteristics on programming levels also indicated several significant results (see Table 6.12). Regarding location, facilities in the Northeast had significantly increased odds of providing higher levels of medical programming versus lower levels than facilities in the West. For facilities in the South the odds of having higher levels (versus lower levels) of medical programming and work assignments were significantly increased while the odds of having higher levels versus lower levels of education programs significantly decreased compared to facilities in the West. Finally, facilities in the Midwest had significantly increased odds of offering higher levels of medical programming but significantly decreased odds of offering higher levels of mental health programming than facilities in the West.

The security level of facilities also influenced the levels of programming offered by facilities. For example, medium security facilities had significantly increased odds of offering higher levels of mental health care versus lower levels than minimum security facilities. However, medium security facilities had significantly decreased odds of offering higher levels (versus lower levels) of work assignments than minimum security facilities. Additionally, medium security facilities were not significantly different from minimum security facilities in regards to the levels of medical and educational programming offered. Maximum security facilities had significantly increased odds of providing medium to high levels of medical programming ( $e^B = 1.92$ ) compared to minimum security facilities, but was not significantly different in regards to having higher versus lower levels of medical programming. Maximum security facilities were

also associated with significantly greater odds of higher levels of mental health and educational programming versus lower levels, however, compared to minimum level security facilities, maximum security facilities were unrelated to higher levels of work assignments. Finally, regarding the size of the facility, as the size increased the odds of having more program offerings also significantly increased in all programming domains.

As was noted previously, the ordinal measures of medical programming, mental health care, work assignments, and educational programming failed to meet the proportional odds assumption, and were therefore analyzed through GOLM. The ordinal measure for life-skills programming availability, however, did meet this assumption. Therefore, this outcome was modeled using ordered logistic regression (see Table 6.13). In regards to life-skills availability, the gender housed in the facility significantly affected the odds of life-skills programming being offered to inmates. Facilities housing females had increased odds (331%) of offering higher levels of life-skills programming compared to male facilities. Regarding location, facilities in the Northeast had significantly increased odds while those in the South had significantly decreased odds of offering higher levels of life-skills programming compared to facilities in the West. Additionally, medium security facilities had significantly higher odds of offering greater amounts of life-skills programs, while maximum security facilities had decreased odds of offering higher levels when compared to minimum security facilities. Finally, the size of the facility significantly increased the odds of higher levels of life-skills programs being available.

In sum, for many programming options gender was significant, and in these instances female facilities typically offered more programs and had a significantly higher

likelihood of offering programs than male prisons. This was especially true when examining the levels of available programming (i.e., low, medium, and high), where gender was found to be significant for every model, and female facilities were associated with higher levels of programming being available compared to lower levels of programming. Thus, the results indicate that female facilities are not only more likely to have individual programs or services, but they are more likely to offer an array of programming options within the various program domains than male facilities. Again, this result is notable considering the vast amount of previous literature that criticizes the lack of programming within women's prisons. Additionally, location, security level, and size of the facility had significant effects for many program options. Oftentimes, programming availability varied by location. Specifically, I found that higher levels of security and larger institutions typically resulted in more programs being available to inmates.

## **Study 2: Gender Differences and Program Participation in U.S. Prison Programs**

### **Question 3–A:**

*Are there notable differences in program participation rates for incarcerated men and women? Additionally, does program participation vary by location, size, and security level of the facility?*

Question 3-A examines the relationship between inmates (males vs. females) and program participation. To assess the strength and relationship between programming participation and incarcerated men and women, I used chi-square analysis and Cramer's V to test for strength of association. This type of analysis was completed for each of the programs within all of the programming domains (i.e., medical care, mental health care, substance abuse programming). As shown in Table 6.14, there were significant relationships between the gender of the inmate and participation for many program



options. With the exception of recreational participation, when programming participation was significant with gender, it typically indicated that women participated in higher percentages than men.

In the medical programming area, the association between participation and gender was significant for only medical exams,  $\chi^2(1, N=13,864)=29.22, p < 0.001$ ), however, this association was weak ( $V=0.05; p < .001$ ). Approximately 91% of women indicated that they had been given a medical examination during their current incarceration compared to only 84% of men. Notably, 85% of women indicated they had received a pelvic examination while incarcerated. Most inmates, both male and female, indicated they had been tested for tuberculosis (95% for each respectively), while less than half of them reported receiving dental care during the incarceration (43% and 41%, respectively). For both of these medical programs and HIV testing, participation did not significantly vary between male and female inmates.

For mental health care, participation in three of the four programming options was significantly different by gender: psychotropic medication, counseling, and other mental health care. For each of these three options, a higher percentage of females reported participating in these programs or services than the percentage of males. In regards to the use of psychotropic medications, while the association was significant,  $\chi^2(1, N=13,841)=244.61, p < .001$ , the strength of the relationship was weak ( $V=0.13, p < .001$ ) with approximately one in three (32.8%) female inmates reporting having taken psychotropic medication during their current confinement, in comparison to about 14% of males. A significantly higher percentage of women (27.1%) than men (11.7%) also reported participating in mental health counseling,  $\chi^2(1, N=13,832)=185.83, p < .001$ ,

although again the relationships was weak ( $V = 0.12, p < .001$ ). Women also reported participating in other mental health care at a significantly higher percentage than men (3.2% vs. 1.8%),  $\chi^2(1, N=13,816)=9.42, p < .01$ , however this association was also weak ( $V = 0.03, p < .01$ ).

Much of the participation by inmates in the substance abuse programming options was also significantly different due to gender. Significantly more female inmates reported participating in detoxification,  $\chi^2(1, N=12,983)=11.53, p < .01$ , inpatient treatment,  $\chi^2(1, N=12,979) = 28.33, p < .001$ , outpatient treatment,  $\chi^2(1, N=12,977)=9.37, p < .01$ , self-help/peer counseling,  $\chi^2(1, N=12,976)=4.63, p < .05$ , and maintenance programs,  $\chi^2(1, N=12,981)=7.76, p < .01$ , than their male counterparts (see Table 6.14). It is worth noting here that participation in these programs was very low for both men and women. The highest percentage of participation by inmates was reported for self-help or peer counseling with approximately 28% of women and 25% of men indicating participation, respectively. Again, the strength of this relationship was weak ( $V = 0.02, p < .05$ ). The relationship between inmate gender and inpatient treatment ( $V = 0.05, p < .001$ ), outpatient treatment ( $V = 0.03, p < .01$ ), detoxification ( $V = 0.03, p < .001$ ), and maintenance ( $V = 0.02, p < .01$ ) were also weak.

Recreational participation stood apart from other program participation in that more often than not males reported higher levels of participation than females (see Table 6.14). For example, a significantly higher percentage of males (61%) reported their involvement in some form of physical exercise in the prior 24 hour period compared to their female counterparts (37.5%),  $\chi^2(1, N=13,834)=205.98, p < .001$ . Again, I found the strength of this relationship to be weak ( $V = 0.12, p < .001$ ). Watching television also

significantly differed by gender,  $\chi^2(1, N=13,834)=120.97, p < .001$ , however this association was weak ( $V = 0.09, p < .001$ ) with 69% of males and 52% of females reporting watching television in the last 24 hours. The relationship between inmate gender and participation in 'other' types of recreation during the prior 24 hour period was also significant,  $\chi^2(1, N=13,837)=82.61, p < .05$ , and weak ( $V = 0.02, p < .05$ ). Reading and making telephone calls did not significantly differ by gender.

In the survey, inmates were asked whether they had engaged in any religious programming or activities since their incarceration. The findings indicate that participation in these types of activities significantly differed by gender,  $\chi^2(1, N=13,831)=82.61, p < .001$ , with approximately 70% of women compared to 54% of men being involved in some form of religious programming. The relationship, however, was weak ( $V = 0.08, p < .001$ ). Overall, it does appear that a majority of inmates participate in some form of religious services or activities while incarcerated.

For work assignments, participation in approximately half of the options significantly differed by gender, although the relationships were weak (see Table 6.14). Assignments held on the facility grounds were significantly different by gender,  $\chi^2(1, N=13,837)=4.31, p < .05$ , while assignments to work off the facility grounds were not. More females (63%) than males (60%) indicated that their work assignment was on the facility grounds. In regards to the assignments themselves, work in food preparation, laundry, other services, maintenance and construction, and other work assignments were significantly different in regards to inmate gender. For each of these particular assignments with the exception of maintenance and construction, women were more likely than men to have been assigned to the work. Food preparation while significant,

$\chi^2(1, N=13,837)=7.82, p < .01$ , had a weak relationship with inmate gender ( $V = 0.02, p < .01$ ) with 15% of women compared to 12% of men being assigned to food preparation. Similarly, laundry services also had a significant,  $\chi^2(1, N=13,837)=8.22, p < .01$ ) but weak relationship ( $V = 0.02, p < .01$ ), with 5% of females and 3% of males being assigned to laundry work. As previously noted, the relationship between construction and maintenance work assignments and gender was significant,  $\chi^2(1, N=13,837)=4.08, p < .05$ , yet weak ( $V=0.02, p < .05$ ), however it is the only significant gender and work assignment relationship where more men (5%) than women (4%) were assigned to the task. Janitorial work, grounds and road maintenance, medical services, farming/forestry/ranching, and goods production did not significantly differ by gender. Although not significantly different by gender, it is worth noting that a little over one-third of men and women (38% and 39%, respectively) were paid for their work assignment. Vocational training did not significantly vary by gender either, with approximately one-fourth of both male and female inmates participating in this program (28% and 26% respectively).

Regarding educational programming, only adult basic education varied significantly by gender,  $\chi^2(1, N=13,828)=4.61, p < .05$ . However, the relationship between gender and basic education was weak ( $V=0.02, p < 0.05$ ) with 3% of females versus 2% of males participating in this type of programming. Participation in high school education or GED preparation, college courses, English as a second language, and other educational programs did not vary significantly for males and females. Interestingly, most inmates reported not participating in any type of educational program.

More specifically, the highest participation rates for programming in this domain were for high school or GED preparation (19% for male inmates and 18% for female inmates).

Finally, for life-skills programming, participation in all four programming types varied by gender but again each relationship was weak. Participation in parenting programs was associated with inmate gender,  $\chi^2(1, N=13,814)=166.66, p<0.001; V=0.11, p<0.001$ ), with many more women (20%) compared to men (8%) having participated in these types of programs. Females were also significantly more likely to have participated in employment counseling,  $\chi^2(1, N=13,815)=8.79, p<.01$ ), even though this association was weak ( $V=0.03, p<0.01$ ). Approximately, 12% of women compared to 9% of males indicated that they had participated in some type of employment counseling during their incarceration. Participation in life-skills and community adjustment programs also significantly differed by inmate gender,  $\chi^2(1, N=13,813)=22.34, p<0.001; V=0.04, p<0.001$ ) with slightly more women (30%) than men (23%) participating in these programs. Lastly, more women (7%) than men (5%) participated in pre-release programs,  $\chi^2(1, N=13,813)=4.50, p<0.05; V=0.02, p<0.05$ ).

In sum, for many of the programs included in study 2, participation significantly varied due to gender. Most often, women reported participating in programs in significantly higher percentages than males, however, often these relationships were weak. The one exception to this pattern involved participation in recreational activities and the work assignment, maintenance and construction. For these programs, a significantly higher percentage of men than women reported participating in them. Finally, although women tended to participate in many of the programs in higher

percentages than men, it is important to note that the overall participation by both men and women was generally low (except medical care and recreation).

Since participation in prison programming could differ due to security level, location, and size, I also examined the relationship between each of these factors and programming participation using chi-square analysis and Cramer's V as an indicator for strength of association. As shown in Table 6.15, significant relationships were found within each domain examined. While most inmates reported receiving medical care while incarcerated, significant but weak relationships were found between security level and Tuberculosis testing ( $V= 0.04, p < .001$ ), medical exams ( $V= 0.06, p < .001$ ), pelvic exams ( $V= 0.11, p < .01$ ), and dental services ( $V= 0.08, p < .001$ ). There was a significant difference found between facility security levels and HIV testing of inmates. For each of the significant relationships, inmates housed in maximum/supermax security level facilities reported higher levels of receiving these services. For mental health care, significant but weak relationships were found between facility security level and the provision of psychotropic medications ( $V= 0.10, p < .001$ ), hospitalization ( $V= 0.10, p < .001$ ), counseling ( $V= 0.09, p < .001$ ), and other mental health services ( $V= 0.05, p < .001$ ). Again, inmates housed in maximum/supermax security level facilities followed by inmates housed in medium level facilities reported receiving mental health care services in higher percentages than inmates housed in minimum level facilities.

For substance abuse programming, participation in four of the seven options significantly differed by security level. Being involved in inpatient treatment ( $V= 0.05, p < .001$ ), self-help or peer counseling ( $V= 0.05, p < .001$ ), education or awareness programs ( $V= 0.05, p < .001$ ), and using a maintenance drug ( $V= 0.03, p < .05$ ) were all

significant but had a weak relationship with facility security level. As shown in Table 6.15, inmates in either minimum or medium level security facilities reported higher level of participation in most of the programs. Similarly, participation in all of the recreational activities except for physical exercise was significantly related to security level of the facility where the inmate was housed (see Table 6.15). Security level of the facility had a weak relationship with viewing television ( $V= 0.09, p < .001$ ), reading ( $V= 0.07, p < .001$ ), making phone calls ( $V= 0.04, p < .001$ ), and other forms of recreation ( $V= 0.07, p < .001$ ). However, participating in religious activities did not significantly vary by facility security level.

Next, I considered the relationship between facility security level and various work assignments both on and off prison grounds. Only medical service assignments were not significantly related to the security level of the facility where the inmates were housed (see table 6.15). Additionally, all but one of the significant relationships examined between security level and participation were weak associations. Facility security level had a significant but weak association with the following work assignments: on grounds ( $V= 0.04, p < .001$ ), janitorial work ( $V= 0.05, p < .001$ ), grounds or road maintenance ( $V= 0.06, p < .001$ ), food preparation ( $V= 0.04, p < .001$ ), laundry ( $V= 0.03, p < .01$ ), farming or forestry ( $V= 0.02, p < .05$ ), goods production ( $V= 0.04, p < .001$ ), maintenance or construction ( $V= 0.03, p < .01$ ), and paid work ( $V= 0.16, p < .001$ ). I found a moderate relationship between security level and participation in off-grounds work assignments ( $V=0.20, p < 0.001$ ). Inmates housed in minimum security level facilities reported having more off-grounds work assignments (20%) than inmates housed in medium (6.2%) and maximum/supermax security level (4.2%) facilities.

Participation in most of the educational programs did not significantly differ due to prison security level. As indicated in Table 6.15, participation in college courses significantly varied by facility security level, however the relationship was weak ( $V=0.03$ ,  $p < .05$ ). Also, participation in 'other' education programs significantly differed by facility security level, but again the association was weak ( $V=0.03$ ,  $p<0.01$ ). Finally, I considered the association between inmate participation in four life-skills programs and facility security level (see Table 6.15). For each life-skills program type, I found a significant but weak relationship with security level. More specifically, there was a weak association between facility security level and inmate participation in employment counseling ( $V=0.06$ ,  $p < .001$ ), parenting/childrearing classes ( $V=0.06$ ,  $p < .001$ ), life-skills or community adjustment ( $V=0.07$ ,  $p < .001$ ), and pre-release programs ( $V=0.04$ ,  $p < .001$ ). For all of the life-skills programs, inmates in minimum security facilities reported higher levels of participation in employment counseling (12%), parenting or child-rearing courses (11%), life-skills or community adjustment (27%), and pre-release programs (6%) than those in medium or maximum/supermax security facilities.

I next examined the relationship between facility size and participation in programming. As shown in Table 6.16, for almost every type of program I found a significant relationship between participation and facility size. In the case of medical care, treatment received by inmates significantly varied due to facility size, except in the case of HIV testing. Facility size had a weak relationship with receiving Tuberculosis testing ( $V=0.06$ ,  $p < .001$ ), medical exams ( $V=0.07$ ,  $p < .001$ ), pelvic exams ( $V=0.09$ ,  $p < .05$ ), and dental care ( $V=0.10$ ,  $p < .001$ ). Additionally, for most of those services (i.e., tuberculosis testing, medical exams, and pelvic exams) inmates housed in medium-sized



prisons reported higher levels of receiving care, whereas inmates housed in small-sized prisons reported the lowest levels of receiving care.

A similar pattern was discovered for participation in mental health programs and services. I found a significant relationship between facility size and each of the mental health care options. Facility size had a weak relationship with the provision of psychotropic medications ( $V= 0.07, p < .001$ ), hospitalization ( $V= 0.05, p < .001$ ), counseling ( $V= 0.06, p < .001$ ), and other mental health care services ( $V= 0.03, p < .01$ ). Again, inmates housed in medium-sized prisons reported using these services in higher percentages, while inmates housed in smaller prisons reported using these services in lower percentages. For example, about 19% of inmates housed in medium-sized facilities reported receiving psychotropic drugs compared to 15% of inmates housed in large-sized facilities, and 9% of inmates housed in small-sized facilities.

Next, I examined the association between facility size and participation in substance abuse programs (see Table 6.16). Facility size was significantly related to several of the substance abuse programming options, but had a weak relationship with inpatient treatment ( $V= 0.11, p < .001$ ), outpatient treatment ( $V= 0.05, p < .001$ ), self-help or peer counseling ( $V= 0.07, p < .001$ ), education or awareness programs ( $V= 0.07, p < .001$ ), and 'other' substance abuse programs ( $V= 0.03, p < .01$ ). Additionally, participation in all of the recreational activities showed a significant, albeit weak relationship with facility size. Physical exercise ( $V= 0.02, p < .05$ ), viewing television ( $V= 0.06, p < .001$ ), reading ( $V= 0.06, p < .001$ ), making phone calls ( $V= 0.09, p < .001$ ), and participating in other recreation programs all had weak relationships with facility size.

Regarding work assignments, most of the work assignment options revealed a significant relationship between participation and the size of the facility in which the inmate is housed. In almost every instance, the relationship was weak and usually showed a higher percentage of inmates in smaller prisons reporting involvement in the particular work assignment. For example, 9% of inmates housed in small-sized facilities reported their involvement with maintenance or construction work, whereas 5% of inmates housed in medium-sized facilities and 4% of inmates housed in large facilities reported this type of work assignment. On the other hand, I found a strong relationship between facility size and off-grounds work assignments, with approximately 29% of inmates housed in small-sized facilities, compared to 6% of inmates housed in medium-sized facilities, and 4% of inmates housed in large-sized facilities indicating that they were assigned to this type of work ( $V = 0.30, p < .001$ ). Inmate participation in vocational training was also significantly associated with facility size, but the strength of the relationship was weak ( $V = 0.07, p < 0.001$ ).

Next, I considered the association between participation in education programs and facility size. I found that participation significantly varied for each of the education programs due to facility size, yet each of the significant relationships was weak (see Table 6.16). More specifically, I found a weak relationship between facility size and participation in basic education ( $V = 0.03, p < .01$ ), high school/ GED preparation ( $V = 0.03, p < .01$ ), college courses ( $V = 0.03, p < .01$ ), ESL ( $V = 0.03, p < .01$ ), and 'other' educational programs ( $V = 0.03, p < .01$ ). Finally, inmate participation in each life-skills program had a significant but weak relationship with facility size, with inmates housed in small-sized prisons reporting more involvement in employment counseling (13%),

parenting or child-rearing classes (12%), life-skills or community adjustment (32%), and pre-release programs (8%) than inmates housed in medium- or large-sized prisons. A weak relationship was found between facility size and employment counseling ( $V= 0.06$ ,  $p < .001$ ), parenting or child-rearing classes ( $V= 0.06$ ,  $p < .001$ ), life-skills or community adjustment ( $V= 0.08$ ,  $p < .001$ ), and pre-release programs ( $V= 0.06$ ,  $p < .001$ ).

Lastly, I examined the relationship between location of the facility and participation in programming. The results presented in Table 6.17 confirm that for most types of programs there was a significant relationship between facility location and program participation. Typically, when participation significantly varied by location, inmates in the Northeast region reported the highest percentages of participation (exception of medical care area) compared to inmates in the other regions of the country (see table 6.17). Participation for three of the five programs under the medical care domain significantly varied by facility location, although the relationships were weak with HIV testing ( $V= 0.14$ ,  $p < .001$ ), medical exams ( $V= 0.11$ ,  $p < .001$ ), and dental care ( $V= 0.04$ ,  $p < .01$ ). For mental health care, a significant but weak association was found between facility location and the use of psychotropic medication ( $V= 0.03$ ,  $p < .01$ ), hospitalization ( $V= 0.03$ ,  $p < .05$ ), and counseling ( $V= 0.03$ ,  $p < .01$ ).

Next, I looked at the relationship between participation in substance abuse programming and facility location. Again, participation in all but one program (i.e., maintenance treatment) was significant with location but each association was weak (see Table 6.17). More specifically, I found weak relationships between facility location and participation in detoxification treatment ( $V= 0.03$ ,  $p < .01$ ), inpatient treatment ( $V= 0.06$ ,  $p < .001$ ), outpatient treatment ( $V= 0.05$ ,  $p < .001$ ), self-help or peer counseling ( $V= 0.06$ ,  $p$

< .001), education or awareness programming ( $V= 0.08, p < .001$ ), and other substance abuse programming ( $V= 0.06, p < .001$ ). Additionally, for all of the substance abuse programs, prisoners in the Northeast reported the highest levels of participation compared to prisoners in other regions of the country.

For recreational activities, participation in each activity significantly varied by facility location. I found a significant but weak association between where the prison was located and inmate participation in physical exercise ( $V= 0.08, p < .001$ ), television viewing ( $V= 0.07, p < .001$ ), reading ( $V= 0.04, p < .001$ ), using the phone ( $V= 0.17, p < .001$ ), and other types of recreational activities ( $V= 0.05, p < .001$ ). Participating in religious activities was also significantly associated with facility location, but once more it was a weak relationship ( $V=0.09, p < .001$ ).

Participation in all but two of the work assignments (i.e., food preparation and ‘other’ services) varied significantly by facility location, with inmates in the Northeast or South often reporting higher levels of participation (see table 6.17). I found that whether or not an inmate was paid for work varied significantly by location and that this particular association was strong ( $V= 0.33, p < .001$ ), with 63% of inmates from the Northeast getting paid for their work, compared to 54% of inmates from the Midwest, 38% from the West, and 22% from the South. The remaining relationships that were significant between facility location and work assignments included on-grounds ( $V= 0.12, p < .001$ ), off-grounds ( $V= 0.11, p < .001$ ), janitorial work ( $V= 0.07, p < .001$ ), grounds or road maintenance ( $V= 0.12, p < .001$ ), laundry ( $V= 0.06, p < .001$ ), medical service work ( $V= 0.03, p < .01$ ), farming or forestry ( $V= 0.09, p < .001$ ), goods production ( $V= 0.03, p < .05$ ), maintenance or construction ( $V= 0.04, p < .001$ ), and other work assignments ( $V= 0.03, p <$

.01). For vocational training, participation by inmates significantly differed by facility location, however I found a weak relationship ( $V= 0.08$ ,  $p< .001$ ).

Next, I examined the relationship between facility location and participation in educational programs. I found a significant but weak association between location and inmate participation in basic education ( $V= 0.04$ ,  $p< .001$ ), high school or GED preparation ( $V= 0.09$ ,  $p< .001$ ), college courses ( $V= 0.06$ ,  $p< .001$ ), ESL ( $V= 0.06$ , and other educational programs ( $V= 0.03$ ,  $p< .01$ ). Finally, participation in each of the four life-skills programs differed significantly by location as well, and once again the relationship for each was weak. In particular, I found a weak relationship between facility location and employment counseling ( $V= 0.06$ ,  $p< .001$ ), parenting or child-rearing classes ( $V= 0.08$ ,  $p< .001$ ), life-skills or community adjustment ( $V= 0.13$ ,  $p< .001$ ), and pre-release programs ( $V= 0.05$ ,  $p< .001$ ). Inmates housed in the Northeast reported higher levels of participation in all four programs: employment counseling (13%), parenting or child-rearing classes (12%), life-skills or community adjustment programs (37%), and pre-release programs (8%) compared to inmates housed in other regions of the country.

In sum, facility-level characteristics such as size, location, and security level do matter in regards to program participation. As the findings suggest in Tables 6.15, 6.16, and 6.17, inmate participation in many programs was significantly influenced by the facility in which they were housed. This was true in regards to each of the facility-level characteristics. The current findings are consistent with Morash and colleagues (1994) original findings, as well.

**Question 3-B:**

*Are female inmates more likely to participate in female stereotypical work assignments and conversely, are male inmates more likely to participate in male stereotypical work assignments, controlling for other individual-level and facility-level characteristics?*

*Additionally, is there a significant interaction between inmate gender and race and participation in female and male stereotypical work assignments when controlling for other individual-level and facility-level characteristics?*

To address whether or not inmates participate in programs and assignments that might be seen as stereotypical behavior for their gender, binary logistic regression was used to model two dichotomous measures: female stereotypical work assignments and male stereotypical work assignments. The female stereotypical work assignment outcome measured if an inmate had involvement in any of the following traditionally stereotypical assignments: janitorial services, food preparation, laundry, and medical services. The male stereotypical work assignment outcome measure examined whether an inmate had involvement in any of the following traditionally masculine assignments: ground/road maintenance, farming/forestry/ranching, and maintenance repair/construction. The independent variables of interest for these models were gender and the interaction effects of race and gender<sup>13</sup>. Additionally, individual- and facility-level measures were controlled for in these models and both models were estimated using robust standard errors to account for any errors due to clustering. As shown in Table 6.18, model 1 presents the results for the main effects model and model 2 presents the results for the interaction model. Overall, I found both of these models to be statistically significant (see Table 6.18).

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<sup>13</sup> The interaction effects odds ratio and significance values were calculated using Hilbe's (2009) method of calculation because research has indicated that you cannot interpret the interaction coefficient in nonlinear models using the same logic as from linear regression models (Norton, Wang, & Ai, 2004). Therefore, the results in the tables do not indicate the actual significance or odds ratios of the effects. A complete example of how the odds ratios, standard errors, and the significance levels were calculated using Hilbe's (2009) method is located in Appendix C.

Notably, for the main effects female stereotypical work assignments model gender was not significant in determining whether or not an inmate was assigned to these types of work duties (see Table 6.18). In other words, women were no more likely than men to have participated in janitorial services, food preparation, laundry, and medical services. A number of the other factors included as control variables were statistically significant. For instance, Black inmates had 30% increased odds of being assigned to female stereotypical work duties compared to their White counterparts. However, the odds of being assigned to female stereotypical work assignments did not significantly differ for individuals who were from 'other' races (vs. White inmates). Interestingly, the interaction effects of race and gender in model 2 did not significantly influence participation. The odds of Black men ( $e^B = 1.20$ ;  $p = .46$ ) and 'other' race men ( $e^B = 1.22$ ;  $p = .44$ ) of participating in these work assignments were not significantly different from that of White men. Furthermore, the odds of Black women ( $e^B = 1.31$ ;  $p = .49$ ) and 'other' race women ( $e^B = 1.06$ ;  $p = .32$ ) of having a feminine work assignment were not significantly different from White women.

Time served significantly influenced the likelihood of being assigned to a female stereotypical work duty with serving longer prison time resulting in a higher likelihood of receiving this type of work assignment. Regarding the facility-level characteristics examined, inmates in maximum security facilities had significantly reduced odds of having a feminine work assignment compared to inmates in minimum security facilities, however being in a medium security facility was not significantly different. Finally, the size of the facility was influential in determining involvement in feminine work

assignments. More specifically, as facility size increased, the odds of an inmate being involved in one of these work assignments decreased (see Table 6.18).

The findings for both the main effects model and interaction model for male stereotypical work assignments are presented in Table 6.19. Gender was a significant factor for involvement in male stereotypical work assignments (i.e., ground/road maintenance, farming/forestry/ranching, and maintenance repair/ construction). The odds of an inmate participating in a masculine work assignment increased by 69% when the inmate was male compared to when the inmate was female. Race was once again a significant influence. Black inmates had 26% decreased odds of being involved in masculine work assignments when compared to their White counterparts. As with feminine work assignments, inmates who were in the 'other' race group did not significantly differ from White inmates. The interactions between race and gender in model 2 were not significant for 'other' race men ( $e^B = 0.83$ ;  $p = .11$ ) and 'other' race women ( $e^B = 1.12$ ;  $p = .33$ ) compared to White men and White women, respectively (i.e., 'other' race men vs. White men and 'other' race women vs. White women). However, Black men and Black women were significantly different in regards to participation. Compared to White men, Black men had 26% decreased odds ( $p = .03$ ) of participating in masculine work assignments while Black women had 32% decreased odds ( $p = .01$ ) of participating in the these jobs compared to White women.

Several control variables significantly affected assignment of inmates to male stereotypical work duties. Inmates who had a longer criminal history and those who had committed a violent offense compared to another type of offense had decreased odds of having a masculine work assignment. Conversely, inmates who admitted to having a



rules violation or those who were housed in the South (vs. the West) had increased odds of participating in a masculine stereotypical work assignment (see Table 6.19).

Overall, inmate gender was significant for masculine stereotypical work assignments but not for feminine stereotypical work assignments. The results indicate that while men are not necessarily excluded from or refusing to participate in more feminine type assignments, it seems women might be excluded from more “masculine” work activities. Additionally, for both models Black inmates significantly differed from White inmates with increased odds of performing feminine work assignments, but decreased odds of performing masculine work assignments.

**Question 4:**

*Do gender and/or “recognized needs” influence program participation in state correctional facilities, controlling for other individual-level and facility-level characteristics? Additionally, is there a significant interaction between inmate gender and race and program participation when controlling for other individual-level and facility-level characteristics?*

In Question 3, I considered the bivariate relationships between gender and participation for each program option. I also examined the bivariate relationship between three facility-level measures and participation in each program option. Additionally, I explored participation in stereotypical programming through binary logistic regression and whether gender and the interaction of race and gender influenced participation while controlling for individual- and facility-level characteristics. To examine the fourth research question, I again examined the relationship between gender and participation in certain programming options with binary logistic regression in order to control for the influence of both individual- and facility-level characteristics. Furthermore, I also examined the interactions of gender and race, to see if these factors simultaneously influence participation. Finally, I considered the influence of self-reported “recognized

needs,” and if these needs directly influenced participation in appropriate prison programming.

### *Mental Health Treatment*

In the mental health area, I specifically examined the influence of gender, gender and race interactions, and recognized needs (i.e., mental health history, prior physical abuse, and prior sexual abuse) for three mental health care programs separately and an aggregate dichotomous measure of any mental health treatment participation (i.e., domain) using binary logistic regression. According to this analysis, the overall model for each mental health program and the mental health domain measure was significant (see Tables 6.20, 6.21, 6.22, and 6.23).

Table 6.20 presents the results for both the main effects model (1) and the interaction model (2) for the use of psychotropic medications. For female inmates, the odds of taking psychotropic medications increased by 59% compared to their male counterparts. Race was also significant for psychotropic medication with both Black inmates and 'other' race inmates having decreased odds of receiving psychotropic medications (18% and 27% respectively) than White inmates. The recognized needs examined for mental health care were mental health history, a history of physical abuse, and a history of sexual abuse. Inmates with a history of mental health illness had 3,492% increased odds of receiving psychotropic medications, while inmates with a history of physical abuse had 33% increased odds and inmates with a history of sexual abuse had 29% increased odds of receiving psychotropic medications during their incarceration.

The results for the interaction model (2) suggest that, the effects of the interaction between gender and race were significant for men but not for women. While Black

women ( $e^B = 1.00$ ;  $p = .50$ ) and 'other' race women ( $e^B = 1.23$ ;  $p = .40$ ) had similar levels of receiving psychotropic medication as White women, Black and 'other' race men had significantly decreased odds (20% and 32%, respectively) of receiving psychotropic medication compared to White men. Additionally, control variables including age, violating rules, violent and property offenses, and being housed in maximum security prisons were significantly related to being given psychotropic medications for inmates (see Table 6.20).

Next, I considered the influence of gender, recognized mental health needs, and the interaction between race and gender on whether or not inmates had been hospitalized for mental health treatment (see Table 6.21). Again, gender was significant but males had increased odds of 91% of being hospitalized compared to females. Inmate race did not have a significant impact on hospitalizations. As expected, recognized mental health needs resulted in increased odds of inmates being hospitalized for mental health treatment and care. More specifically, inmates with a prior mental health diagnosis had 1,884% increased odds of being hospitalized, while inmates with a history of physical abuse had 55% increased odds and inmates with a history of sexual abuse had 75% increased odds of being hospitalized for mental health services. The results for the interaction effects of race and gender on hospitalization were not significant. In other words, Black men ( $e^B = 1.07$ ;  $p = .30$ ) and Black women ( $e^B = 1.59$ ;  $p = .48$ ) as well as 'other' race men ( $e^B = 0.90$ ;  $p = .17$ ) and 'other' race women ( $e^B = 1.28$ ;  $p = .35$ ) were not significantly more or less likely to be hospitalized than White men and White women. Several control variables were significantly associated with inmates being hospitalized including the amount of time served, having rules violations, being incarcerated for drug offenses (vs.

other offense), and being housed in a maximum security prison as opposed to a minimum security prison (see Table 6.21).

For participation in mental health counseling, I found that female inmates had increased odds of 37% compared to male inmates. Inmate race did not significantly influence whether or not they received counseling while incarcerated. Recognized mental health needs, however, were significantly related to receiving counseling for inmates. For instance, inmates with a prior mental health diagnosis had 1,880% increased odds of receiving counseling, whereas inmates who reported a history of physical abuse or sexual abuse had 47% and 49% increased odds of participating in counseling services. Results from the interaction model (2) for counseling in Table 6.22 indicate no significant effects for the interaction of race and gender on participation in counseling. Thus, Black men ( $e^B = 0.95$ ;  $p = .19$ ) and Black women ( $e^B = 1.12$ ;  $p = .38$ ) and 'other' race men ( $e^B = 0.84$ ;  $p = .11$ ) and 'other' race women ( $e^B = 1.23$ ;  $p = .41$ ) participate in counseling at relatively similar rates to White men and women. Control variables such as time served, rules violations, current offense, location, and security level were significantly related to the likelihood of an inmate participating in counseling (see Table 6.22).

For the mental health programming area more broadly, I examined the relationship between my measures of interest and participation in any of the noted mental health programs or services (i.e., mental health program domain). The results for this part of the analysis are presented in Table 6.23. I found inmate gender and race significantly affected participation in this broader mental health program measure. Female inmates had increased odds of 61% compared to male inmates. Both Black inmates and 'other'

race inmates had decreased odds compared to their White counterparts (14% and 19% respectively) for participating in any of the mental health treatments or services.

As anticipated, inmates with a prior mental health diagnosis had 2,347% increased odds of receiving some type of mental health treatment, while inmates with prior physical abuse or prior sexual abuse also had increased odds of receiving mental health treatment while incarcerated (62% and 55% respectively). Results from the interaction model (2) suggest that the interaction effects of race and gender were significant for men but not for women. Black men had 16% decreased odds ( $p = .048$ ) of participating in any mental health program option compared to White men, but there were no significant effects for participation by 'other' race men ( $e^B = .76$ ;  $p = .05$ ). Additionally, both Black women ( $e^B = 1.12$ ;  $p = .39$ ) and 'other' race women ( $e^B = 1.33$ ;  $p = .46$ ) were not significantly different from White women in regards to participating in any of the programs within the mental health domain. Several control variables such as inmate age, time served, rules violations, violent offense, and being housed in the Northeast also significantly influenced involvement in any mental health programming (see Table 6.23).

### *Substance Abuse Treatment*

Binary logistic regression was again utilized to examine the effects of gender, the interaction of race and gender, and recognized substance abuse needs (i.e., mandatory drug treatment and alcohol or drug dependency) on participation in four types of substance abuse programs (i.e., inpatient treatment, outpatient treatment, self-help/peer counseling groups, and awareness or education programs), and an aggregate substance abuse domain measure of any participation. The overall model for each program and the domain measure were significant (see Tables 6.24, 6.25, 6.26, 6.27, and 6.28).

First, I considered the relationship between gender, race, recognized substance abuse needs, and the interaction between race and gender on inmate participation in inpatient drug treatment. The main effects of gender and race did not significantly influence involvement of inmates in inpatient drug treatment. On the other hand, recognized needs were influential. Inmates with mandatory drug treatment orders had 114% increased odds of participating in inpatient drug treatment, while inmates with an alcohol dependency had 4% and inmates with a drug dependency had 8% increased odds of participating in the programming. The results for the interaction model (2) and participation in inpatient drug treatment are also presented in Table 6.24. Regarding the interaction effects of race and gender on inpatient treatment, only 'other' race women had significantly different odds of participating in treatment. Specifically, 'other' race women had significantly decreased odds of 36% ( $p = .04$ ) of participating in inpatient treatment compared to White women. On the other hand, Black men ( $e^B = 0.89$ ;  $p = .14$ ) and Black women ( $e^B = 0.94$ ;  $p = .19$ ) and 'other' race men ( $e^B = 0.79$ ;  $p = .11$ ) did not have significantly different levels of participation compared to White men and White women, respectively. Several of the control variables including criminal history, time served, violent offenses, and facility size were all significantly related to participation of inmates in inpatient drug treatment programs.

Next, I examined the same variables of interest for participation in outpatient drug treatment programs (see Table 6.25). Again, inmate gender and race did not directly affect participation in these types of programs, however recognized needs did. Inmates with a mandatory drug treatment order had increased odds (52%), as well as inmates with an alcohol dependency (7%) or a drug dependency (9%) of participating in outpatient

drug treatment. The results for the interaction model (2), which are presented in Table 6.25, suggest that none of the gender and race interactions significantly influenced participation in outpatient drug treatment programs. Black men ( $e^B = 0.94$ ;  $p = .19$ ) and women ( $e^B = 1.31$ ;  $p = .45$ ) and 'other' race men ( $e^B = 0.87$ ;  $p = .17$ ) and women ( $e^B = 1.06$ ;  $p = .28$ ) participated in outpatient treatments in similar rates as their White counterparts. A few of the control variables such as time served, being housed in southern prisons (vs. western prisons), and facility size were significantly related to participation in outpatient drug treatment programs (see Table 6.25).

The next part of my analysis involved using binary logistic regression to examine the relationship between gender, recognized substance abuse needs, and the interaction between race and gender with participation in self-help or peer counseling drug treatment programming (see Table 6.26). Consistent with the previous substance abuse findings, inmate gender and race were not directly related to participation in self-help or peer counseling drug treatment programs. Alternatively, recognized substance abuse needs significantly influenced participation in self-help or peer counseling drug treatment programs. Inmates with mandatory drug treatment orders had 72% increased odds and inmates dependent on either alcohol or drugs also had 6% and 7% increased odds of participating in these types of programs. In terms of the interaction model for self-help or peer counseling program participation, race and gender interactions were not significant. Compared to White men and White women, respectively, Black men ( $e^B = 1.04$ ;  $p = .31$ ), Black women ( $e^B = 1.09$ ;  $p = .38$ ), 'other' race men ( $e^B = 0.96$ ;  $p = .22$ ), and 'other' race women ( $e^B = 1.13$ ;  $p = .35$ ) participated in self-help or peer counseling programs at similar levels. Several of the control variables including time served, rules violations, and

facility size significantly influenced the likelihood of participation by inmates in self-help or peer counseling drug treatment programs (see Table 6.26)

For the education and awareness substance abuse programming, I also looked at the relationship between gender, recognized needs, and the interaction between race and gender on participation. Once again, inmate gender and race were not important, however, recognized needs were significantly related to participation in education and awareness drug treatment programs (see Table 6.27). Inmates with mandatory drug treatment orders (83%), inmates with an alcohol dependency (4%), and inmates with a drug dependency all had increased odds of participating in drug education or drug awareness programs. Table 6.27 also presents results for the interaction model (2) and involvement in drug education or awareness programs. Participation in drug education or awareness programs was not significantly affected by the interaction of race and gender. In other words, Black men ( $e^B = 0.96$ ;  $p = .20$ ) and Black women ( $e^B = 1.19$ ;  $p = .43$ ), as well as 'other' race men ( $e^B = 0.88$ ;  $p = .14$ ) and 'other' race women ( $e^B = 1.19$ ;  $p = .38$ ) were not significantly different from White men and women, respectively, in regards to participation. Several control variables such as time served, rules violations, facility location and size were significantly related to participation in drug education or awareness programs (see Table 6.27).

Finally, I used binary logistic regression to analyze the effect of gender, recognized needs, and the interaction between race and gender on an aggregate measure of participation in substance abuse treatment (i.e., any involvement in the substance abuse program domain). As shown in Table 6.28, the results are consistent with what I found in the earlier individual drug treatment program models. For instance, inmate



gender and inmate race were not significantly related to drug treatment participation, whereas the three recognized needs were influential on participation. Inmates having a mandatory drug treatment order had 118% increased odds of participating in any type of drug treatment program. Additionally, inmates dependent on alcohol had 6% increased odds and inmates dependent on drugs had 7% increased odds of participating in some type of drug treatment program during their incarceration. Findings from the interaction model (2) in Table 6.28 indicate that none of the gender and race interactions significantly influenced participation in any type of drug treatment program. Thus, Black men ( $e^B = 1.01$ ;  $p = .27$ ) and Black women ( $e^B = 0.99$ ;  $p = .23$ ) and 'other' race men ( $e^B = 0.99$ ;  $p = .23$ ) and 'other' race women ( $e^B = 1.01$ ;  $p = .26$ ) participated in drug treatment programs at similar levels as their White counterparts. Finally, time served, violating rules, facility security level, and size were all in some way significantly related to participation in any type of drug treatment program (see Table 6.28).

### *Life-Skills Programming*

In the life-skills programming area, I used binary logistic regression to examine the effects of gender, the interaction of race and gender, and recognized needs on participation in four types of life-skills programming, as well as an aggregate measure of participation in any life-skills programming (i.e., program domain). For each of the four life-skills programs and the aggregate life-skills program domain, the overall models were significant (see Table 6.29, 6.30, 6.31, 6.32, and 6.33).

For life-skills and community adjustment programs, inmate gender significantly influenced participation in these programs (see Table 6.29). Female inmates had increased odds of 61% compared to male inmates of participating in life-skills or

community adjustment programming. Inmate race was not significant in this regression analysis. Recognized needs as defined by employment history and the presence of minor children significantly affected involvement in life-skills and community adjustment programming. Inmates who had employment histories prior to incarceration had 17% increased odds and inmates with minor children had 25% increased odds of participating in these types of programs. The results for the interaction model (2) are also presented in Table 6.29, and indicate that the interaction effects of race and gender were not significant. Therefore, Black men ( $e^B = 1.14$ ;  $p = 0.40$ ) and Black women ( $e^B = 0.84$ ;  $p = .06$ ) as well as 'other' race men ( $e^B = 1.06$ ;  $p = .30$ ) and 'other' race women ( $e^B = 1.09$ ,  $p = .33$ ) were not significantly different from White men and White women, respectively, in regards to participation in life-skills or community adjustment programming. As shown in Table 6.29, several control variables were significantly related to inmate participation in life-skills or community adjustment programs.

Next, I looked at the relationship between my measures of interest and participation in parenting or childrearing classes (see Table 6.30). As expected, gender was significant with female inmates having 233% increased odds compared to male inmates of participating in parenting programs. A history of employment was not influential for inmates, however, inmates with minor children not surprisingly had 239% increased odds of participating in parenting or childrearing classes. Results from the interaction model (2) suggest that there were no significant interaction effects on participation in parenting or childrearing classes. Thus, Black men ( $e^B = 1.06$ ;  $p = .31$ ) and Black women ( $e^B = 0.87$ ;  $p = .11$ ) and 'other' race men ( $e^B = 1.09$ ,  $p = .33$ ) and 'other' race women ( $e^B = 1.19$ ;  $p = .39$ ) were not significantly different from their White

counterparts concerning participation in parenting or childrearing programming. Several control variables including age, time served, violating rules, facility location and size also significantly affected participation in parenting or childrearing classes (see Table 6.30).

The binary regression analysis results for employment programs are presented in Table 6.31. Female inmates were significantly more likely to participate in employment programs than male inmates. In fact, females had 64% increased odds of participating in this type of programming during their imprisonment. Race was also significantly related to participation, with Black inmates having 53% increased odds and 'other' race inmates having 26% increased odds compared to White inmates. I found mixed findings in terms of the recognized needs measures. Interestingly, employment history did not influence the likelihood of an inmate participating in a life-skills employment program, but having children did. Inmates with children had 16% increased odds of participating in this type of program. Table 6.31 also presents the results of the interaction model (2). The interaction effects of race and gender for participation in employment programs were not significant. In other words, regarding participation in these programs, Black men ( $e^B = 1.60$ ;  $p = .49$ ) and Black women ( $e^B = 1.05$ ;  $p = .31$ ) as well as 'other' race men ( $e^B = 1.27$ ;  $p = .44$ ) and 'other' race women ( $e^B = 1.19$ ;  $p = .41$ ) participated at similar levels as White men and White women. Finally, many of the control variables were significantly associated with the likelihood of an inmate participating in life-skills employment programs (see Table 6.31).

Next, I examined the relationship between gender, recognized needs, the interaction between race and gender, and participation in pre-release programming (see Table 6.32). The main effects of gender and race were not influential in the likelihood of

an inmate participating in pre-release programming, however both recognized needs variables were important. Inmates with an employment history had 29% increased odds of participating in pre-release programming, while inmates with minor children had 27% increased odds of participating in this programming. The results from the interaction model (2) suggest that participation in pre-release programs for Black men ( $e^B = 1.12$ ;  $p = .34$ ) and 'other' race men ( $e^B = 1.11$ ;  $p = .33$ ) and 'other' race women ( $e^B = 1.01$ ;  $p = .26$ ) was not significantly different from White men and White women, respectively. Yet, Black women had significantly decreased odds of 31% ( $p = .03$ ) of participating in pre-release programs compared to White women. Control variables including criminal history, time served, violating rules, being housed in the South, and facility size were all significantly related to participation by inmates in pre-release programs (see Table 6.32).

The final binary logistic regression analysis in the life-skills programming area examined the relationship between gender, recognized needs, race and gender interactions, and participation in any of the life-skills programs (see Table 6.33). Gender significantly influenced participation in life-skills programming, with female inmates having 89% increased odds of participation compared to male inmates. Inmate race was not a significant factor in the likelihood of participation in life-skills programming. Alternatively, the recognized needs associated with employment history (i.e., having a job in the 6 months prior to incarceration) and minor children both significantly increased the odds (22% and 32% respectively) of inmates participating in these types of programs. The results of the interaction model for the life-skills program domain indicate that Black men ( $e^B = 1.11$ ;  $p = .38$ ) and Black women ( $e^B = 0.86$ ;  $p = .08$ ) as well as 'other' race men ( $e^B = 1.13$ ;  $p = .36$ ) and 'other' race women ( $e^B = 1.20$ ;  $p = .41$ ) were not significantly

different from their White counterparts. Thus, the interaction effects of race and gender did not significantly influence participation in any life-skill program within the life-skills domain. Many of the control variables in the domain model were significantly related to participation, including age, time served, rules violations, violent and drug offenses, inmates housed in the South or Midwest (vs. West), maximum security prisons, and facility size (see Table 6.33).

### *Educational Programming*

Binary logistic regression was utilized to examine the effects of gender, the interaction of race and gender, and recognized needs (i.e., employment history and educational level) on participation in three types of educational programs (i.e., basic education, high school/GED courses, college courses), and an aggregate educational program domain measure (i.e., any participation). For each of the three programs and the aggregate educational program domain, the overall models were significant (see Tables 6.34, 6.35, 6.36, and 6.37).

For basic education programs, gender significantly affected the odds of participation. As shown in Table 6.34, the odds of participating increased by 82% for women compared to men. Inmate race did not significantly affect participation in basic education programs. The inmate's employment history was not influential, yet the inmate's educational level did significantly affect participation. Inmates with a high school diploma had 81% decreased odds and those with some or more college had 94% decreased odds of participating in basic education programs compared to those with less than a high school diploma. Table 6.34 also presents the results of the interaction model (2). Results suggest that the interaction effects of race and gender were not significant for

participation in basic education courses. Participation by Black men ( $e^B = 1.26$ ;  $p = .30$ ) and Black women ( $e^B = 1.06$ ;  $p = .26$ ) and 'other' race men ( $e^B = 1.27$ ;  $p = .35$ ) and 'other' race women ( $e^B = 1.12$ ;  $p = .30$ ) was not significantly different from that of White men and women, respectively. As shown in Table 6.34, several of the control variables also significantly influenced participation, such as time served, and inmates housed in the Midwest (vs. West).

Next, I looked at the relationship between my measures of interest and participation in high school/GED courses. As shown in Table 6.35, gender did not significantly affect the odds of participating in a high school or GED program. Compared to White inmates, Black inmates and 'other' race inmates had increased odds of participating in high school/GED courses (22% and 26%, respectively). Recognized needs as defined by employment history and low education levels significantly influenced participation in high school/GED courses. Inmates who had been employed prior to incarceration had decreased odds of 11% of participating in high school/GED courses compared to those without a job. As expected, inmates with higher levels of education also had decreased odds of participating and those with a high school diploma or GED had 21% decreased odds while those with some college or more had 95% decreased odds compared to those with less than a high school diploma. Results indicated that while race had a direct effect on participation in high school/GED courses, the interaction effects of race and gender did not. Thus, Black men ( $e^B = 1.21$ ;  $p = .47$ ) and Black women ( $e^B = 1.27$ ;  $p = .49$ ) and 'other' race men ( $e^B = 1.25$ ;  $p = .45$ ) and 'other' race women ( $e^B = 1.52$ ;  $p = .50$ ) participated in high school/ GED programs at similar levels as White men and White women, respectively. Many of the control variables also

significantly affected participation in high school/GED courses like age, time served, rules violations, violent offenses, inmates housed in the Northeast and the Midwest (vs. West), maximum level facilities, and facility size (see Table 6.35).

For college courses, inmates' gender significantly affected the participation with the odds of being involved in this type of programming increasing by 79% for women compared to men (see Table 6.36). The race of the inmate also significantly affected the likelihood of participation in college courses with Black inmates having 20% decreased odds of participating compared to White inmates. For recognized needs, both employment history and educational levels significantly influenced participation in college courses. Inmates who had been employed prior to incarceration had 24% increased odds of participating in a college course compared to those who were not employed prior to incarceration. Inmates with higher levels of education also had increased odds of participating in college courses. For example, those with a high school diploma or GED had 98% increased odds while those with some college or more had 394% increased odds of participating compared to those with less than a high school diploma. Table 6.36 also presents the results of the interaction model (2). Regarding participation in college courses, Black men ( $e^B = 0.83$ ;  $p = .08$ ), 'other' race men ( $e^B = 0.92$ ;  $p = .20$ ), and 'other' race women ( $e^B = 0.99$ ;  $p = .24$ ) participated in college courses at similar levels as their White counterparts. However, Black women had 44% decreased odds ( $p = .00$ ) of participating in college courses compared to White women. Several control measures also significantly influenced participation in college courses such as age, time served, rules violations, violent and drug offenses, inmates housed in the South (vs. West), and facility size (see Table 6.36).

Finally, binary logistic regression was used to examine the effects of gender, the interaction of race and gender, and recognized needs on the aggregate educational domain measure. As shown in Table 6.37, gender significantly influenced participation in any educational program. The odds of participating in this type of programming increased 45% for female inmates compared to male inmates. Race was also significantly related to participation with inmates of 'other' races having 22% increased odds of participating in any educational program compared to White inmates. An inmate's employment history did not significantly affect participation in any education program, however, education levels did. Inmates with a diploma or GED had 31% decreased odds and those with some or more college education had 95% decreased odds of participating in any educational program compared to inmates with less than a high school diploma. The interaction effects of race and gender were not significant for participation in any educational program. In other words, Black men ( $e^B = 1.09$ ;  $p = .39$ ) and Black women ( $e^B = 0.98$ ;  $p = .21$ ) and 'other' race men ( $e^B = 1.21$ ;  $p = .45$ ) and 'other' race women ( $e^B = 1.38$ ;  $p = .49$ ) were not significantly different in regards to participation in these programs compared to White men and women, respectively. Many of the control variables in the domain model were significantly related to participation, including age, time served, rules violations, violent offenses, inmates housed in maximum level facilities, and facility size (see Table 6.37).

#### *Vocational Education/Job Training*

The last programming option examined in Question 4 involved vocational education/job training programs. Once again, I used binary logistic regression analysis to explore the relationship between gender, the interaction between race and gender, three



recognized needs (i.e., employment history, educational background, and children under 18) and participation in vocational education or job training programs. The overall model for vocational education was significant, as shown in Table 6.38.

Inmate gender significantly affected participating in vocational education/job training programs with female inmates having 37% increased odds of participating compared to male inmates. For race, Black inmates had increased odds of 13% for vocational education participation compared to Whites. All of the recognized needs examined significantly affected participation in vocational education/job training programs. Inmates who had been employed 6 months prior to incarceration had 15% increased odds of participating compared to those who did not have a job. Additionally, inmates with increased educational levels had increased odds of participating as well. Compared to inmates with less than a high school diploma, inmates with a diploma or GED had 28% increased odds and those with some college or more had 62% increased odds of participating in a vocational education/job training program. Inmates with minor children had 12% increased odds of participating in vocational education programs.

The results from the interaction model (2) indicate that the interaction effects of race and gender were not significant for participation in vocational training. Therefore, Black men ( $e^B = 1.13$ ;  $p = .41$ ) and Black women ( $e^B = 1.05$ ;  $p = .34$ ) as well as 'other' race men ( $e^B = 1.11$ ;  $p = .34$ ) and 'other' race women ( $e^B = 1.12$ ;  $p = .36$ ) participated in vocational training at similar levels as did White men and White women. Several of the control measures significantly influenced participation in vocational education and job training programs including age, time served, rules violations, violent and property and drug offenses, inmates housed in the Northeast (vs. West), and medium security facilities.

In sum, many of the factors examined significantly affected the odds of inmates participating in correctional programming. While gender was not significant for participation in all programming, it did significantly affect participation in many program offerings (i.e., mental health, life-skills, and vocational programming). Notably, though, gender did not significantly affect participation in substance abuse treatment. Still, like the findings in study 1 on program availability, with the exception of mental health hospitalization, when gender was significant, women were more likely to participate in the programming or services than men. The interaction of race and gender for men significantly affected some of the programs examined, although the findings were mixed. When there were significant interactional effects, I often found that Black men and Black women were less likely to participate in the programming than White males and White females, respectively. This finding was also true for ‘other’ race men compared to White men, and ‘other’ race women compared to White women. Finally, as one would hope to find, the recognized needs examined in each of the programming areas were highly significant and more often than not affected the odds of participation on the part of inmates. Finally, many of the individual- and facility-level characteristics also significantly affected participation in correctional programs.

Table 6.1. Prison Programming by Gender-Housed

Name	Female (% Yes)	Male (% Yes)	$\chi^2$	Cramer's V
<b>Medical Programming</b>				
Hepatitis C Test	91.5	91.4	0.00	0.00
Hepatitis C Treatment	86.2	84.4	0.20	0.01
Hepatitis B Vaccine	75.5	81.4	1.90	0.04
Tuberculosis Screening	87.2	81.1	2.13	0.05
HIV/AIDS Test	96.8	95.5	0.37	0.02
HIV/AIDS Counseling	75.5	57.1	12.04**	0.11**
Suicide Prevention	97.9	98.1	0.02	0.00
<b>Mental Health Care</b>				
Psychological Evaluations	83.0	76.9	1.82	0.04
24-Hour Mental Health Care	67.0	62.2	0.83	0.03
Therapy/Counseling	89.4	82.6	2.79	0.05
Psychotropic Medication	87.2	80.7	2.40	0.05
Assist to Community Care	79.8	70.1	3.90*	0.06*
Other Mental Health Care	6.4	5.6	0.09	0.01
<b>Substance Abuse Programming</b>				
Drug Treatment	98.9	89.9	8.26**	0.09**
Alcohol Treatment	96.8	90.9	3.83	0.06
<b>Work Assignments</b>				
Prison Industries	55.3	42.6	5.59*	0.07**
Facility Support	95.7	95.8	0.00	0.00
Farming/Agriculture	26.6	31.8	1.08	0.03
Public Works	67.0	62.4	0.80	0.03
Work Release	20.2	8.8	12.54***	0.11***
Other	14.9	14.8	0.00	0.00
<b>Educational Programming</b>				
Adult Basic Education	91.5	87.9	1.05	0.03
GED Preparation	94.7	90.8	1.61	0.04
Special Education	48.9	43.9	0.88	0.03
Vocational Education	79.8	66.6	6.81**	0.08**
College Courses	42.6	29.7	6.63*	0.08*
Study Release	6.4	2.9	3.44	0.06
<b>Life-Skills Programming</b>				
Employment Programs	76.6	62.6	7.29**	0.08**
Life-Skills	84.0	71.2	7.09**	0.08**
Parenting	78.7	39.8	52.84***	0.23***
Other	29.8	28.9	0.14	0.01

\*\*\* p < 0.001, \*\* p < 0.01, \* p < 0.05

Table 6.2. Prison Programming by Security Level

Name	Minimum (% Yes)	Medium (% Yes)	Max/Supermax (% Yes)	$\chi^2$	Cramer's V
<b>Medical Programming</b>					
Hepatitis C Test	82.2	94.7	95.6	43.81***	0.21***
Hepatitis C Treatment	71.5	87.8	92.9	57.21***	0.24***
Hepatitis B Vaccine	74.9	81.1	86.4	12.49**	0.11**
Tuberculosis Screening	74.9	80.8	89.9	22.90***	0.15***
HIV/AIDS Test	89.0	97.9	100.0	45.60***	0.21***
HIV/AID Counseling	49.5	67.3	55.6	25.04***	0.16***
Suicide Prevention	94.2	99.5	99.7	31.89***	0.18***
<b>Mental Health Care</b>					
Psychological Evaluations	58.7	83.1	88.2	88.25***	0.29***
24-Hour Mental Health Care	45.5	73.2	64.6	59.30***	0.24***
Therapy/Counseling	61.7	90.2	94.9	144.68***	0.37***
Psychotropic Medication	59.1	87.6	94.6	144.58***	0.37***
Assist to Community Care	52.5	73.9	85.5	82.68***	0.28***
Other Mental Health Care	8.6	5.3	3.4	7.85*	0.09*
<b>Substance Abuse Programming</b>					
Drug Treatment	88.1	95.2	86.9	18.10***	0.13***
Alcohol Treatment	88.1	95.2	89.2	13.97**	0.12**
<b>Work Assignments</b>					
Prison Industries	23.4	48.3	57.9	78.67***	0.28***
Facility Support	92.4	97.3	97.0	11.84**	0.11**
Farming/Agriculture	28.1	31.6	34.3	2.78	0.05
Public Works	75.2	60.6	53.2	33.68***	0.18***

Name	Minimum (% Yes)	Medium (% Yes)	Max/Supermax (% Yes)	$\chi^2$	Cramer's V
Work Release	18.1	7.8	4.7	33.31***	0.18***
Other	10.9	11.7	23.6	25.11***	0.16***
Educational Programming					
Adult Basic Education	78.9	94.1	89.2	40.07***	0.20***
GED Preparation	84.2	95.0	92.6	26.95***	0.16***
Special Education	27.7	50.1	52.9	48.54***	0.22***
Vocational Education	50.2	75.7	74.1	61.14***	0.24***
College Courses	24.8	36.2	29.3	11.38**	0.11**
Study Release	7.3	2.3	0.3	25.30***	0.16***
Life-Skills Programming					
Employment Programs	61.7	72.5	53.2	29.49***	0.17***
Life-Skills	70.0	79.2	64.6	19.84***	0.14***
Parenting	39.6	49.9	37.4	13.65**	0.12**
Other	17.8	29.3	37.0	27.85***	0.16***

\*\*\*p < 0.001, \*\* p < 0.01, \* p < 0.05

Table 6.3. Prison Programming by Facility Size

Name	Under 500 (% Yes)	500-999 (% Yes)	1,000+ (% Yes)	$\chi^2$	Cramer's V
<b>Medical Programming</b>					
Hepatitis C Test	83.4	93.0	96.7	43.16***	0.21***
Hepatitis C Treatment	71.9	87.5	93.0	66.29***	0.26***
Hepatitis B Vaccine	71.9	84.0	86.1	26.77***	0.16***
Tuberculosis Screening	74.2	82.4	87.4	22.28***	0.15***
HIV/AIDS Test	89.3	96.5	100.0	51.35***	0.22***
HIV/AID Counseling	45.8	59.0	69.1	42.81***	0.20***
Suicide Prevention	95.0	99.2	99.8	25.01***	0.16***
<b>Mental Health Care</b>					
Psychological Evaluations	58.7	84.3	88.5	106.89***	0.31***
24 Hour Mental Health Care	43.8	68.2	74.7	82.76***	0.28***
Therapy/Counseling	62.8	90.4	95.6	160.91***	0.39***
Psychotropic Medication	61.0	88.5	93.4	144.58***	0.37***
Assist to Community Care	53.0	74.3	83.6	89.12***	0.29***
Other Mental Health Care	7.7	4.6	4.7	4.11	0.06
<b>Substance Abuse Programming</b>					
Drug Treatment	86.2	92.7	93.2	12.71**	0.11**
Alcohol Treatment	84.5	93.9	95.6	32.41***	0.18***
<b>Work Assignments</b>					
Prison Industries	21.5	43.7	62.1	128.43***	0.35***
Facility Support	92.3	96.9	97.9	16.17***	0.13***
Farming/Agriculture	22.1	25.7	42.4	42.08***	0.20***
Public Works	66.2	54.4	65.1	10.56**	0.10**

Name	Under 500 (% Yes)	500-999 (% Yes)	1,000+ (% Yes)	$\chi^2$	Cramer's V
Work Release	17.0	7.0	5.9	29.48***	0.17***
Other	11.5	11.9	19.4	12.10**	0.11**
Educational Programming					
Adult Basic Education	77.4	91.2	95.3	62.55***	0.25***
GED Preparation	82.5	94.3	96.3	49.00***	0.22***
Special Education	25.5	47.9	57.6	81.99***	0.28***
Vocational Education	41.8	72.4	86.2	176.40***	0.41***
College Courses	21.2	34.1	36.8	23.52***	0.15***
Study Release	6.3	1.5	1.6	16.64***	0.13***
Life-Skills Programming					
Employment Programs	56.2	60.5	72.1	22.87***	0.15***
Life-Skills	66.2	71.6	77.8	12.91**	0.11**
Parenting	35.5	47.1	47.3	12.93**	0.11**
Other	20.9	24.9	36.1	23.61***	0.15***

\*\*\*p < 0.001, \*\* p < 0.01, \* p < 0.05

Table 6.4. Prison Programming by Facility Location

Name	West (% Yes)	Midwest (% Yes)	South (% Yes)	Northeast (% Yes)	$\chi^2$	Cramer's V
<b>Medical Programming</b>						
Hepatitis C Test	89.6	89.6	90.8	97.0	8.20*	0.09*
Hepatitis C Treatment	78.5	84.8	85.9	86.0	5.00	0.07
Hepatitis B Vaccine	74.1	74.4	83.8	86.7	16.53**	0.13**
Tuberculosis Screening	72.8	72.3	85.1	92.2	37.13***	0.19***
HIV/AIDS Test	89.5	94.2	97.1	98.2	19.01***	0.14***
HIV/AID Counseling	47.0	59.8	51.5	89.2	83.34***	0.28***
Suicide Prevention	96.5	98.2	97.8	100.0	5.29	0.07
<b>Mental Health Care</b>						
Psychological Evaluations	76.8	65.6	81.0	83.2	24.75***	0.15***
24-Hour Mental Health Care	70.9	54.0	58.6	79.0	34.17***	0.18***
Therapy/Counseling	78.1	81.7	84.6	85.6	4.57	0.07
Psychotropic Medication	80.1	75.0	84.6	80.8	9.65*	0.10*
Assist to Community Care	66.2	65.6	73.9	73.7	7.46	0.09
Other Mental Health Care	6.0	8.0	3.8	7.8	6.85	0.08
<b>Substance Abuse Programming</b>						
Drug Treatment	88.7	88.4	90.7	95.8	7.29	0.08
Alcohol Treatment	90.7	88.4	91.9	94.6	5.03	0.07
<b>Work Assignments</b>						
Prison Industries	59.6	50.4	36.2	43.1	31.11***	0.17***
Facility Support	90.7	93.3	98.0	97.0	19.38***	0.14***
Farming/Agriculture	27.2	16.1	43.6	19.2	71.79***	0.26***
Public Works	61.6	55.8	68.9	55.1	16.89**	0.13**



Name	West (% Yes)	Midwest (% Yes)	South (% Yes)	Northeast (% Yes)	$\chi^2$	Cramer's V
Work Release	6.9	9.8	8.1	17.5	13.87**	0.12**
Other	14.6	13.4	16.2	13.2	1.43	0.04
Educational Programming						
Adult Basic Education	87.4	86.6	88.7	89.8	1.17	0.03
GED Preparation	90.1	88.4	91.3	95.2	5.75	0.07
Special Education	45.0	50.9	36.6	58.1	28.83***	0.17***
Vocational Education	72.8	64.3	65.5	74.9	8.08*	0.09*
College Courses	36.4	40.2	25.9	28.1	17.69**	0.13**
Study Release	6.0	3.1	2.6	2.4	4.62	0.07
Life-Skills Programming						
Employment Programs	69.5	71.4	52.5	82.0	59.11***	0.24***
Life-Skills	80.8	75.4	63.2	87.4	45.97***	0.21***
Parenting	53.6	50.4	30.3	62.9	71.36***	0.26***
Other	15.2	17.9	33.1	38.9	39.84***	0.20***

\*\*\*p < 0.001, \*\* p < 0.01, \* p < 0.05

Table 6.5. Stereotypical Programming Availability by Gender-Housed

	Female (% Yes)	Male (% Yes)	$\chi^2$	Cramer's V
<b>Female Stereotypical Programming</b>				
Psychotropic Medication	87.2	80.7	2.40	0.05
Facility Support	95.7	95.8	0.00	0.00
Parenting	78.7	39.8	52.84***	0.23***
<b>Male Stereotypical Programming</b>				
Prison Industries	55.3	42.6	5.59*	0.07**
Farming/Agriculture	26.6	31.8	1.08	0.03
Public Works	67.0	62.4	0.80	0.03
Vocational Education	79.8	66.6	6.81**	0.08**
Employment Programs	76.6	62.6	7.29**	0.08**
Life-Skills	84.0	71.2	7.09**	0.08**

\*\*\* p < 0.001, \*\* p < 0.01, \* p < 0.05

Table 6.6 Binary Logistic Regression Model for Medical Programming Availability

Variable	Hepatitis C Test		Hepatitis C Treatment		Hepatitis B Vaccine		Tuberculosis Screening	
	B (SE)	$e^b$	B (SE)	$e^b$	B (SE)	$e^b$	B (SE)	$e^b$
Male prisons	-0.35(0.41)	0.71	-0.38(0.33)	0.68	0.18 (0.26)	1.19	-0.75 (0.33)	0.47*
Location								
West ( <i>reference</i> )	---	---	---	---	---	---	---	---
Northeast	1.18 (0.54)	3.24*	0.48(0.32)	1.61	0.92 (0.30)	2.52**	1.67 (0.35)	5.30***
South	0.07(0.33)	1.07	0.57 (0.26)	1.77*	0.71 (0.23)	2.04**	0.95 (0.23)	2.58***
Midwest	-0.04(0.36)	0.96	0.62(0.22)	1.66	0.11(0.25)	1.12	0.06(0.25)	1.06
Security Level								
Minimum ( <i>reference</i> )	---	---	---	---	---	---	---	---
Medium	0.69 (0.30)	1.99*	0.62 (0.22)	1.86**	0.01 (0.20)	1.01	-0.21(0.20)	0.81
Maximum	0.71 (0.35)	2.03*	1.09 (0.29)	2.99***	0.40(0.24)	1.49	0.55 (0.25)	1.74*
Size	0.00 (0.00)	1.00***	0.00 (0.00)	1.00**	0.00 (0.00)	1.00**	0.00 (0.00)	1.00***
LL	-263.409		-397.545		-477.107		-450.730	
LR	57.78***		56.19***		37.05***		76.56***	
McFadden's pseudo R <sup>2</sup>	0.121		0.09		0.04		0.09	
N	1,019		1,019		1,019		1,037	

Notes:\*\*\*p < .001, \*\*p< .01, \*p< .05; LL = log likelihood; LR = likelihood ratio test of full versus naïve model; --- = reference category or interaction term excluded.

Table 6.6. Binary Logistic Regression Model for Medical Programming Availability, continued

Variable	HIV/AIDS Test <sup>a</sup>		HIV/AIDS Counseling		Suicide Prevention <sup>a</sup>	
	B (SE)	<i>e<sup>b</sup></i>	B (SE)	<i>e<sup>b</sup></i>	B (SE)	<i>e<sup>b</sup></i>
Male prisons	-0.94 (0.66)	0.39	-1.36 (0.28)	0.26***	-0.24 (0.69)	0.79
Location						
West ( <i>reference</i> )	-1.11 (0.37)	0.33***	---	---	-0.47 (0.53)	0.62
Northeast	---	---	2.66 (0.32)	14.26***	---	---
South	---	---	0.54 (0.22)	1.72*	---	---
Midwest	---	---	0.89 (0.25)	2.42***	---	---
Security Level						
Minimum ( <i>reference</i> )	-0.70 (0.36)	0.49	---	---	-1.63 (0.49)	0.20***
Medium	---	---	0.25 (0.18)	1.28	---	---
Maximum	---	---	-0.49 (0.21)	0.61	---	---
Size	0.00 (0.00)	1.00***	0.00 (0.00)	1.00***	0.00 (0.00)	1.00***
LL	-144.014		-604.151		-78.720	
LR	57.40***		138.04***		19.73***	
McFadden's pseudo R <sup>2</sup>	0.22		0.14		0.20	
N	1,020		1,037		1,023	

Notes:\*\*\*p < .001, \*\*p< .01, \*p< .05; LL = log likelihood; LR = likelihood ratio test of full versus naïve model; --- = reference category or interaction term excluded. <sup>a</sup>Due to an extreme skew in the dependent variables HIV/AIDS test and suicide, final models had to be adjusted and only included the reference categories for comparison.

Table 6.7. Binary Logistic Regression Model for Mental Health Program Availability

Variable	Psychological Evaluations		24 Hour Mental Health Care		Therapy/Counseling		Psychotropic Medication	
	B (SE)	$e^B$	B (SE)	$e^B$	B (SE)	$e^B$	B (SE)	$e^B$
Male prisons Location	-0.77 (0.29)	0.46**	-0.59 (0.24)	0.56*	-1.06 (0.35)	0.34**	-0.94(0.32)	0.39**
West ( <i>reference</i> )	---	---	---	---	---	---	---	---
Northeast	0.30(0.30)	1.35	0.44(0.28)	1.55	0.23(0.34)	1.26	-0.31(0.31)	0.73
South	0.25(0.25)	1.28	-0.55 (0.23)	0.58*	0.33(0.28)	1.39	0.20(0.26)	1.21
Midwest	-0.69 (0.27)	0.50*	-0.72 (0.25)	0.49**	0.04(0.31)	1.04	-0.60(0.28)	0.55*
Security Level								
Minimum ( <i>reference</i> )	---	---	---	---	---	---	---	---
Medium	0.61 (0.19)	1.84**	0.70 (0.18)	2.01***	0.91 (0.23)	2.48***	0.85(0.20)	2.35***
Maximum	0.97 (0.23)	2.64***	0.11(0.20)	1.12	1.40 (0.29)	4.07***	1.67(0.30)	5.29***
Size	0.00 (0.00)	1.00***	0.00 (0.00)	1.00***	0.00 (0.00)	1.00***	0.00(0.00)	1.00***
LL	-475.955		-605.950		-359.745		-392.082	
LR	114.25		92.51		104.94		128.53	
McFadden's pseudo R <sup>2</sup>	0.140***		0.116***		0.233***		0.215***	
N	1,037		1,037		1,037		1,037	

Table 6.7. Binary Logistic Regression Model for Mental Health Program Availability, continued

Variable	Assist to Community Care		Other Mental Health Care	
	B (SE)	$e^B$	B (SE)	$e^B$
Male prisons	-0.74 (0.27)	0.48**	-0.16(0.45)	0.85
Location				
West ( <i>reference</i> )	---	---	---	---
Northeast	0.36(0.26)	1.44	0.43 (0.44)	1.53
South	0.45 (0.22)	1.57*	-0.36(0.40)	0.70
Midwest	0.04 (0.24)	1.04	0.37(0.41)	1.44
Security Level				
Minimum ( <i>reference</i> )	---	---	---	---
Medium	0.59 (0.18)	1.80**	-0.52(0.33)	0.59
Maximum	1.26 (0.22)	3.53***	-1.01 (0.41)	0.37*
Size	0.00 (0.00)	1.00**	0.00(0.00)	1.00
LL	-567.720		-291.240	
LR	88.42		16.28	
McFadden's pseudo R <sup>2</sup>	0.091***		0.032*	
N	1,037		1,037	

Notes:\*\*\*p < .001, \*\*p< .01, \*p< .05; LL = log likelihood; LR = likelihood ratio test of full versus naïve model; --- = reference category or interaction term excluded.

Table 6.8. Binary Logistic Regression Model for Substance Abuse Program Availability

Variable	Drug Treatment		Alcohol Treatment	
	B (SE)	$e^B$	B (SE)	$e^B$
Male prisons	-2.76 (1.02)	0.06**	-1.67 (0.63)	0.19**
Location				
West ( <i>reference</i> )	---	---	---	---
Northeast	1.24 (0.48)	3.46**	0.66 (0.46)	1.94
South	0.40 (0.32)	1.50	0.25 (0.35)	1.28
Midwest	0.19 (0.34)	1.21	-0.15 (0.37)	0.86
Security Level				
Minimum ( <i>reference</i> )	---	---	---	---
Medium	0.52 (0.31)	1.68	0.24 (0.32)	1.27
Maximum	-0.75 (0.31)	0.47*	-0.88 (0.31)	0.41**
Size	0.00 (0.00)	1.00*	0.00 (0.00)	1.00***
LL	-291.952		-272.783	
LR	42.56		39.68	
McFadden's pseudo R <sup>2</sup>	0.087***		0.101***	
N	1,037		1,037	

Notes:\*\*\*p < .001, \*\*p< .01, \*p< .05; LL = log likelihood; LR = likelihood ratio test of full versus naïve model; --- = reference category or interaction term excluded.

Table 6.9. Binary Logistic Regression Model for Work Assignment Availability

<i>Variable</i>	Prison Industries		Facility Support		Farming/Agriculture		Public Works	
	B (SE)	$e^B$	B (SE)	$e^B$	B (SE)	$e^B$	B (SE)	$e^B$
Male prisons	-0.82 (0.23)	0.44***	-0.34 (0.58)	0.71	-0.02(0.25)	0.98	-0.49(0.25)	0.61
Location								
West ( <i>reference</i> )	---	---	---	---	---	---	---	---
Northeast	-0.79 (0.28)	0.45**	1.16 (0.55)	3.18*	-0.02(0.31)	0.97	0.13(0.24)	1.13
South	-1.04 (0.24)	0.35***	1.63 (0.42)	5.11***	1.21 (0.26)	3.35***	0.72 (0.21)	2.07**
Midwest	-0.32 (0.25)	0.72	0.39(0.40)	1.48	-0.28(0.30)	0.76	0.00(0.22)	1.00
Security Level								
Minimum ( <i>reference</i> )	---	---	---	---	---	---	---	---
Medium	0.86 (0.19)	2.37***	0.45(0.42)	1.57	-0.35(0.19)	0.71	-1.08 (0.19)	0.34***
Maximum	1.10 (0.21)	3.01***	0.32(0.51)	1.38	-0.31(0.21)	0.73	-1.49 (0.21)	0.23***
Size	0.00 (0.00)	1.00***	0.00(0.00)	1.00	0.00 (0.00)	1.00***	0.00 (0.00)	1.00***
LL	-614.332		-165.167		-582.608		-641.853	
LR	108.05		29.02		104.67		62.44	
McFadden's pseudo R <sup>2</sup>	0.136***		0.092***		0.097***		0.062***	
N	1,037		1,037		1,037		1,037	



Table 6.9. Binary Logistic Regression Model for Work Assignments, continued

Variable	Work Release		Other	
	B (SE)	$e^B$	B (SE)	$e^B$
Male prisons	-1.07 (0.30)	0.34***	-0.01(0.32)	0.99
Location				
West ( <i>reference</i> )	---	---	---	---
Northeast	1.35 (0.40)	3.87**	-0.09(0.34)	0.92
South	0.34(0.38)	1.40	0.15(0.27)	1.17
Midwest	0.40(0.41)	1.50	-0.07(0.32)	0.93
Security Level				
Minimum ( <i>reference</i> )	---	---	---	---
Medium	-1.05 (0.26)	0.35***	-0.01(0.25)	0.99
Maximum	-1.60 (0.36)	0.20***	0.82 (0.25)	2.27**
Size	-0.00(0.00)	1.00	0.00(0.00)	1.00
LL	-300.362		-422.594	
LR	65.82		26.35	
McFadden's pseudo R <sup>2</sup>	0.090***		0.030***	
N	1,026		1,037	

Notes:\*\*\*p < .001, \*\*p< .01, \*p< .05; LL = log likelihood; LR = likelihood ratio test of full versus naïve model; --- = reference category or interaction term excluded.

Table 6.10. Binary Logistic Regression Model for Education Program Availability

<i>Variable</i>	Adult Basic Education		GED Preparation		Special Education		Vocational Education	
	B (SE)	$e^B$	B (SE)	$e^B$	B (SE)	$e^B$	B (SE)	$e^B$
Male prisons	-0.88 (0.39)	0.41*	1.04 (0.50)	0.35*	-0.35(0.22)	0.70	-1.32 (0.28)	0.27***
Location								
West ( <i>reference</i> )	---	---	---	---	---	---	---	---
Northeast	0.09(0.38)	1.09	0.69(0.47)	2.00	0.58 (0.25)	1.78	0.01(0.29)	1.01
South	0.05(0.30)	1.05	0.11(0.33)	1.12	-0.29(0.21)	0.75	-0.42(0.24)	0.66
Midwest	-0.09(0.33)	0.91	-0.20(0.36)	0.82	0.40(0.23)	1.49	-0.56 (0.26)	0.57*
Security Level								
Minimum ( <i>reference</i> )	---	---	---	---	---	---	---	---
Medium	0.71 (0.26)	2.03**	0.53(0.31)	1.70	0.80 (0.17)	2.23***	0.31(0.19)	1.36
Maximum	-0.23(0.27)	0.80	-0.10(0.31)	0.91	0.85 (0.19)	2.33***	-0.09(0.22)	0.91
Size	0.00 (0.00)	1.00***	0.00 (0.00)	1.00***	0.00 (0.00)	1.00**	0.00 (0.00)	1.00***
LL	-328.602		-277.174		-662.626		-537.223	
LR	53.59		50.33		84.99		96.31	
McFadden's pseudo R <sup>2</sup>	0.125***		0.108***		0.070***		0.176***	
N	1,037		1,037		1,037		1,037	

Table 6.10. Binary Logistic Regression of Education Program Availability, continued

Variable	College Course		Study Release	
	B (SE)	$e^B$	B (SE)	$e^B$
Male prisons	-0.67 (0.23)	0.51**	-0.92(0.48)	0.40
Location				
West ( <i>reference</i> )	---	---	---	---
Northeast	-0.32(0.26)	0.73	-0.63(0.63)	0.53
South	-0.40(0.22)	0.67	-0.63(0.46)	0.53
Midwest	0.31(0.24)	1.36	-0.63(0.52)	0.53
Security Level				
Minimum ( <i>reference</i> )	---	---	---	---
Medium	0.51 (0.18)	1.66**	-1.20 (0.43)	0.30**
Maximum	0.10(0.20)	1.11	-3.20 (1.10)	0.04**
Size	0.00 (0.00)	1.00*	0.00 (0.00)	1.00
LL	-617.661		-130.505	
LR	42.90		29.07	
McFadden's pseudo R <sup>2</sup>	0.036***		0.108***	
N	1,037		1,037	

Notes:\*\*\*p < .001, \*\*p< .01, \*p< .05; LL = log likelihood; LR = likelihood ratio test of full versus naïve model; --- = reference category or interaction term excluded.

Table 6.11. Binary Logistic Regression Model for Life-Skills Program Availability

Variable	Employment Programs		Life-Skills		Parenting		Other	
	B (SE)	$e^B$	B (SE)	$e^B$	B (SE)	$e^B$	B (SE)	$e^B$
Male prisons Location	-1.04 (0.28)	0.35***	-0.97 (0.31)	0.38**	-2.06 (0.28)	0.13***	-0.24 (0.26)	0.79
West ( <i>reference</i> )	---	---	---	---	---	---	---	---
Northeast	0.93 (0.28)	2.55**	0.64 (0.31)	1.89*	0.63 (0.24)	1.87**	1.37 (0.31)	3.93***
South	-0.54 (0.22)	0.58*	-0.77 (0.24)	0.46**	-0.81 (0.21)	0.45***	1.13 (0.29)	3.11***
Midwest	0.34 (0.25)	1.40	-0.15 (0.26)	0.86	0.11 (0.23)	1.11	0.32 (0.32)	1.38
Security Level								
Minimum ( <i>reference</i> )	---	---	---	---	---	---	---	---
Medium	0.18 (0.18)	1.20	0.32 (0.19)	1.38	0.26 (0.17)	1.29	0.39 (0.20)	1.48
Maximum	-0.04 (0.20)	0.39***	-0.55 (0.21)	0.57**	-0.46 (0.20)	0.63*	0.75 (0.21)	2.12***
Size	0.00 (0.00)	1.00***	0.00 (0.00)	1.00**	0.00 (0.00)	1.00***	0.00 (0.00)	1.00*
LL	-606.433		-566.386		-625.117		-581.210	
LR	103.85		80.71		140.57		53.71	
McFadden's pseudo R <sup>2</sup>	0.106***		0.074***		0.118***		0.057***	
N	1,037		1,037		1,037		1,037	

Notes:\*\*\*p < .001, \*\*p< .01, \*p< .05; LL = log likelihood; LR = likelihood ratio test of full versus naïve model; --- = reference category or interaction term excluded.

Table 6.12. Program Domain Availability Proportional Odds Model

Variable	Medical		Mental Health		Work Assignments		Education	
	Medium $e^B$	High $e^B$	Medium $e^B$	High $e^B$	Medium $e^B$	High $e^B$	Medium $e^B$	High $e^B$
Male Prison Location	0.515**		0.429***		0.499**		0.372***	
West ( <i>reference</i> )	---	---	---	---	---	---	---	---
Northeast	6.201***	11.583***	1.314		0.957		1.338	
South	2.537***		1.080		1.721**		0.685*	
Midwest	1.884**		0.544*		0.800		1.095	
Security Level								
Minimum ( <i>reference</i> )	---	---	---	---	---	---	---	---
Medium	1.314		2.091***		0.675*		1.934	
Maximum	1.924**	0.911	3.476***	1.667**	0.816		1.628**	
Size	1.001***		1.001***		1.001***		1.001***	1.001***
Constant	0.819	0.171***	1.617	0.661	1.110	0.226***	2.005*	0.897
LL	-986.316		-978.252		-1014.246		-987.869	
LR	178.08; p < 0.000		152.98; p < 0.000		95.56; p < 0.000		149.78; p < 0.000	
McFadden's pseudo R <sup>2</sup>	0.107		0.097		0.059		0.104	
Brant	2.76; p = 0.737		14.92; p = 0.021		9.08; p = 0.247		10.06; p = 0.122	
N	1,015		1,037		1,026		1,037	

Notes: Coefficients for Medium and High correspond to the logits formed from the contrasts {1, 23} and {12,3}, respectively; \* p < .05, \*\* p < .01, \*\*\* p < .001;  $e^B$  are exponentiated coefficients; LL = log likelihood; LR = likelihood ratio test of full vs. naive model; Brant = omnibus test of proportional odds; constants are not exponentiated; --- = interaction term excluded or not applicable; blank cells exclude coefficients because they are redundant with the first column.

Table 6.13. Ordered Logistic Regression for Life-Skills Program Domain Availability

<i>Variable</i>	$e^B$
Male Prison	0.232***
Location	
West ( <i>reference</i> )	---
Northeast	2.352***
South	0.581**
Midwest	1.248
Security Level	
Minimum ( <i>reference</i> )	---
Medium	1.549**
Maximum	0.642*
Size	1.001***
LL	-1020.34
LR	193.94; p < 0.000
McFadden's pseudo R <sup>2</sup>	0.087
Brant	10.05; p = 0.186
N	1,037

Notes: Response categories for Life-skills were 1= low, 2 = medium, 3 = high; \* p < 0.05, \*\* p < 0.01; \*\*\* p < 0.001;  $e^B$  are exponentiated coefficient; LL = log likelihood; LR = likelihood ratio test of full versus naïve model; Brant = omnibus test of proportional odds; --- = reference category or interaction term excluded.

Table 6.14. Program Participation by Gender

Name	Female (% Yes)	Male (% Yes)	$\chi^2$	Cramer's V
<b>Medical Care</b>				
Tuberculosis Testing	95.0	95.1	0.04	0.00
HIV Testing	86.0	84.6	1.08	0.01
Medical Exam	90.6	84.0	29.22***	0.05***
Pelvic Exam <sup>a</sup>	85.4	-	-	-
Dental Treatment	41.4	43.2	1.13	0.01
<b>Mental Health</b>				
Psychotropic Medication	32.8	13.8	244.61***	0.13***
Hospitalization	3.7	3.0	1.53	0.01
Counseling	27.1	11.7	185.83***	0.12***
Other	3.2	1.8	9.42**	0.03**
<b>Substance Abuse</b>				
Detoxification	1.6	0.6	11.53**	0.03**
Inpatient Treatment	12.2	7.2	28.33***	0.05***
Outpatient Treatment	7.4	5.0	9.37**	0.03**
Self-Help/Peer Counseling	28.3	25.0	4.63*	0.02*
Education/Awareness	15.6	15.0	0.22	0.00
Maintenance	0.6	0.2	7.76**	0.02**
Other	1.5	1.4	0.08	0.00
<b>Recreation</b>				
Physical Exercise	37.5	61.3	205.98***	0.12***
Television	51.9	69.3	120.97***	0.09***
Reading	74.7	74.6	0.01	0.00
Phone calls	82.6	83.8	0.93	0.01
Other recreation	36.7	40.7	5.73*	0.02*
<b>Religious</b>				
	69.7	54.4	82.61***	0.08***
<b>Work Assignments</b>				
On-Grounds	63.3	59.9	4.31*	0.02*
Off-Grounds	9.0	7.4	3.32	0.02
Janitorial work	18.8	18.6	0.02	0.00
Grounds/road maintenance	7.0	8.1	1.58	0.01
Food preparation	14.9	11.8	7.82**	0.02**
Laundry	4.8	3.1	8.22**	0.02**
Medical Services	0.9	0.6	0.89	0.01
Farming/Forestry/Ranching	1.5	2.3	2.53	0.01
Goods production	2.9	3.3	0.45	0.01
Other Services	9.1	6.4	9.97**	0.03**

Name	Female (% Yes)	Male (% Yes)	$\chi^2$	Cramer's V
Maintenance/construction	3.6	5.1	4.08*	0.02*
Other work assignments	13.2	10.2	8.24**	0.02**
Paid for work	39.1	38.0	0.45	0.00
Vocational Training	25.8	27.6	1.42	0.01
Education				
Basic Education	3.0	2.0	4.61*	0.02*
High School/GED Preparation	17.8	19.4	1.51	0.01
College courses	8.8	7.1	3.51	0.02
English as Second Language	0.7	1.1	0.83	0.01
Other educational programs	6.7	5.3	3.37	0.02
Life-Skills				
Employment counseling	11.6	8.7	8.79**	0.03**
Parenting/child-rearing classes	19.6	7.5	166.66***	0.11***
Life-Skills/comm. adjustment	29.9	23.1	22.34***	0.04***
Pre-Release Programs	6.9	5.2	4.50*	0.02*

N = 14,499; \*\*\* p < 0.001; \*\* p < 0.01; \* p < 0.05; <sup>a</sup> female inmates only



Table 6.15. Programming Participation by Facility Security Level

Name	Minimum (% Yes)	Medium (% Yes)	Max/Supermax (% Yes)	$\chi^2$	Cramer's V
<b>Medical Care</b>					
Tuberculosis Testing	93.3	95.3	95.7	17.99***	0.04***
HIV Testing	82.8	85.0	84.9	4.71	0.02
Medical Exam	80.7	83.8	86.9	47.05***	0.06***
Pelvic Exam <sup>a</sup>	79.7	84.1	89.5	10.46**	0.11**
Dental Treatment	35.9	41.8	47.9	93.48***	0.08***
<b>Mental Health</b>					
Psychotropic Medication	8.8	14.2	19.1	126.76***	0.10***
Hospitalization	0.9	2.2	5.2	123.24***	0.10***
Counseling	7.1	12.0	16.4	118.70***	0.09***
Other	0.5	1.9	2.5	30.56***	0.05***
<b>Substance Abuse</b>					
Detoxification	0.6	0.7	0.8	0.85	0.01
Inpatient Treatment	10.7	7.1	6.5	36.21***	0.05***
Outpatient treatment	6.0	5.3	4.6	5.36	0.02
Self-Help/Peer Counseling	26.1	26.8	22.2	31.00***	0.05***
Education/Awareness	16.3	16.3	12.9	26.07***	0.05***
Maintenance	0.0	0.3	0.1	8.80*	0.03*
Other	1.1	1.5	1.3	1.92	0.01
<b>Recreation</b>					
Physical Exercise	59.8	59.6	59.8	0.04	0.00
Television	63.7	72.2	63.7	112.40***	0.09***
Reading	67.2	75.8	76.2	70.46***	0.07***
Phone calls	85.6	84.2	82.0	16.82***	0.04***
Other recreation	37.3	43.7	37.0	62.48***	0.07***

Name	Minimum (% Yes)	Medium (% Yes)	Max/Supermax (% Yes)	$\chi^2$	Cramer's V
Religious	56.0	55.4	55.5	0.26	0.00
Work Assignments					
On-Grounds	57.1	61.6	58.8	17.71***	0.04***
Off-Grounds	20.0	6.2	4.2	543.57***	0.20***
Janitorial work	22.6	18.2	17.3	27.76***	0.05***
Grounds/road maintenance	10.6	6.6	9.1	43.71***	0.06***
Food preparation	14.3	12.4	10.6	20.47***	0.04***
Laundry	4.2	3.4	2.6	13.38**	0.03**
Medical Services	0.4	0.6	0.8	5.84	0.02
Farming/Forestry/Ranching	1.8	2.6	2.0	8.39*	0.02*
Goods production	1.4	3.6	3.7	26.23***	0.04***
Other Services	5.3	7.3	6.1	13.11**	0.03**
Maintenance/construction	6.2	5.2	4.3	11.62**	0.03**
Other work assignments	13.5	10.4	8.9	33.27***	0.05***
Paid for work	48.5	41.5	27.8	340.28***	0.16***
Vocational Training	19.5	29.3	28.1	77.27***	0.08***
Education					
Basic Education	1.8	2.1	1.9	1.24	0.01
High School/GED Preparation	20.1	19.0	19.2	1.21	0.01
College courses	5.8	7.3	7.8	8.91*	0.03*
English as Second Language	1.0	1.2	0.8	5.25	0.02
Other educational programs	5.8	6.1	4.5	14.13**	0.03**
Life-Skills					
Employment counseling	12.0	9.4	6.7	56.22***	0.06***
Parenting/child-rearing classes	10.7	9.0	6.3	43.74***	0.06***
Life-Skills/community adjustment	26.9	24.9	19.3	66.43***	0.07***
Pre-Release Programs	6.3	5.8	4.3	16.72***	0.04***

Notes: \*\*\* p < .001; \*\* p < .01; \* p < .05

Table 6.16. Program Participation by Facility Size (N = 14,499)

Name	Under 500 (% Yes)	500-999 (% Yes)	1,000+ (% Yes)	$\chi^2$	Cramer's V
<b>Medical Care</b>					
Tuberculosis Testing	91.9	96.1	95.5	43.17***	0.06***
HIV Testing	84.7	85.3	84.5	0.67	0.01
Medical Exam	78.2	87.4	84.7	64.10***	0.07***
Pelvic Exam <sup>a</sup>	80.0	88.5	86.0	7.67*	0.09*
Dental Treatment	30.1	44.5	44.9	127.00***	0.10***
<b>Mental Health</b>					
Psychotropic Medication	9.4	19.1	15.2	69.64***	0.07***
Hospitalization	1.2	4.2	3.1	28.89***	0.05***
Counseling	9.0	16.7	12.5	51.73***	0.06***
Other	0.9	2.2	2.0	9.74**	0.03**
<b>Substance Abuse</b>					
Detoxification	0.6	0.8	0.7	0.19	0.00
Inpatient Treatment	14.8	8.7	6.0	155.64***	0.11***
Outpatient treatment	7.1	7.0	4.5	35.26***	0.05***
Self-Help/Peer Counseling	30.0	30.1	23.2	65.65***	0.07***
Education/Awareness	19.0	19.0	13.6	59.45***	0.07***
Maintenance	0.3	0.3	0.1	3.87	0.02
Other	2.1	1.8	1.2	11.85**	0.03**
<b>Recreation</b>					
Physical Exercise	58.4	57.8	60.4	6.42*	0.02*
Television	60.0	68.5	69.1	53.22***	0.06***
Reading	68.1	77.5	75.1	47.24***	0.06***
Phone calls	86.2	90.7	81.6	120.03***	0.09***
Other recreation	36.2	43.6	40.4	21.48***	0.05***

Name	Under 500 (% Yes)	500-999 (% Yes)	1,000+ (% Yes)	$\chi^2$	Cramer's V
Religious	57.2	58.5	54.5	13.92**	0.03**
Work Assignments					
On-Grounds	55.0	61.3	60.5	19.15***	0.04***
Off-Grounds	28.7	6.3	4.3	1189.20***	0.30***
Janitorial work	23.4	19.8	17.4	36.54***	0.05***
Grounds/road maintenance	12.1	7.6	7.5	39.91***	0.05***
Food preparation	14.9	11.1	11.8	15.01**	0.03**
Laundry	3.7	3.3	3.1	1.41	0.01
Medical Services	0.4	0.7	0.7	1.22	0.01
Farming/Forestry/Ranching	2.0	2.3	2.3	0.45	0.01
Goods production	1.8	3.7	3.5	13.70**	0.03**
Other Services	5.7	6.9	6.7	2.73	0.01
Maintenance/construction	9.4	5.2	4.3	75.14***	0.07***
Other work assignments	15.7	9.8	9.6	56.63***	0.06***
Paid for work	52.4	41.4	34.5	206.09***	0.12***
Vocational Training	19.4	27.3	28.8	61.74***	0.07***
Education					
Basic Education	0.9	2.3	2.1	11.18**	0.03**
High School/GED Preparation	15.8	19.6	19.8	14.39**	0.03**
College courses	5.4	6.5	7.7	13.22**	0.03**
English as Second Language	0.4	1.5	1.0	12.07**	0.03**
Other educational programs	6.2	6.6	5.1	10.13**	0.03**
Life-Skills					
Employment counseling	13.3	9.6	8.0	51.36***	0.06***
Parenting/child-rearing classes	12.4	9.9	7.3	55.57***	0.06***
Life-Skills/community adjustment	31.9	25.1	21.4	90.42***	0.08***
Pre-Release Programs	7.5	7.2	4.6	42.74***	0.06***

Notes: \*\*\*p<.001; \*\*p<.01; \*p<.05

Table 6.17. Program Participation by Facility Location (N=14,999)

Name	West (% Yes)	Midwest (% Yes)	South (% Yes)	Northeast (% Yes)	$\chi^2$	Cramer's V
<b>Medical Care</b>						
Tuberculosis Testing	94.7	95.3	95.6	94.4	6.80	0.02
HIV Testing	77.0	85.1	89.5	79.4	220.20***	0.14****
Medical Exam	77.4	87.3	86.7	84.9	159.56***	0.11***
Pelvic Exam <sup>a</sup>	84.6	83.9	86.5	84.4	0.93	0.03
Dental Treatment	40.4	42.5	43.9	45.9	17.30**	0.04**
<b>Mental Health</b>						
Psychotropic Medication	16.8	15.4	14.1	15.2	12.26**	0.03**
Hospitalization	2.7	2.4	3.3	3.9	11.16*	0.03*
Counseling	12.5	12.7	12.2	15.4	13.78**	0.03**
Other	2.0	1.8	1.7	2.4	3.46	0.02
<b>Substance Abuse</b>						
Detoxification	0.7	0.6	0.6	1.4	13.05**	0.03**
Inpatient Treatment	6.9	9.1	6.1	10.3	44.88***	0.06***
Outpatient treatment	4.7	5.9	4.3	7.8	37.09***	0.05***
Self-Help/Peer Counseling	22.3	25.3	24.9	30.8	42.48***	0.06***
Education/Awareness	13.5	13.9	14.3	22.7	89.03***	0.08***
Maintenance	0.1	0.2	0.2	0.3	2.40	0.01
Other	1.1	0.9	1.3	3.0	40.38***	0.06***
<b>Recreation</b>						
Psychical Exercise	64.9	60.0	55.6	63.0	84.99***	0.08***
Television	70.0	71.4	64.0	71.5	73.73***	0.07***
Reading	71.8	74.1	75.6	77.5	24.60***	0.04***
Phone calls	79.3	91.5	79.1	92.9	374.85***	0.17***
Other recreation	44.7	40.8	37.9	40.1	39.99***	0.05***

Name	West (% Yes)	Midwest (% Yes)	South (% Yes)	Northeast (% Yes)	$\chi^2$	Cramer's V
Religious	52.8	49.4	60.2	54.8	104.77***	0.09***
Work Assignments						
On-Grounds	49.8	59.1	64.1	65.7	204.96***	0.12***
Off-Grounds	6.3	5.1	10.9	3.1	177.13***	0.11***
Janitorial work	13.9	19.9	19.8	20.2	58.85***	0.07***
Grounds/road maintenance	5.2	5.9	11.8	4.6	191.54***	0.12***
Food preparation	11.1	12.9	11.8	13.1	6.96	0.02
Laundry	1.7	3.0	4.1	3.4	41.34***	0.06***
Medical Services	0.3	0.4	0.9	0.5	15.59**	0.03**
Farming/Forestry/Ranching	0.9	1.2	3.9	1.1	122.15***	0.09***
Goods production	3.9	3.0	2.9	4.0	10.63*	0.03*
Other Services	6.2	6.3	6.5	7.8	5.84	0.02
Maintenance/construction	4.2	3.9	5.5	6.7	25.15***	0.04***
Other work assignments	11.2	10.1	9.4	12.0	12.94**	0.03**
Paid for work	37.5	53.9	21.8	63.3	1458.53***	0.33***
Vocational Training	25.6	24.6	26.9	36.5	94.27***	0.08***
Education						
Basic Education	2.7	1.3	1.8	2.4	19.1***	0.04***
High School/GED Preparation	13.2	23.3	19.5	22.7	120.07***	0.09***
College courses	6.6	9.9	6.1	7.9	44.13***	0.06***
English as Second Language	1.6	0.4	0.7	2.1	48.41***	0.06***
Other educational programs	5.5	4.8	5.2	7.2	13.56**	0.03**
Life-Skills						
Employment counseling	7.5	9.4	8.1	12.9	50.55***	0.06***
Parenting/child-rearing classes	10.1	9.2	5.9	11.5	85.85***	0.08***
Life-Skills/community adjustment	21.3	19.7	21.7	36.8	225.74***	0.13***
Pre-Release Programs	4.7	6.4	4.4	7.6	36.19***	0.05***

Notes: \*\*\*p<.001; \*\*p<.01; \*p<.05

Table 6.18. Binary Logistic Regression Model for Participation in Female Stereotypical Work Assignments

Variable	Female Stereotypical Assignments			
	Model 1		Model 2	
	B (SE)	$e^B$	B (SE)	$e^B$
Females	0.19(0.10)	1.21	0.21(0.11)	1.23
Race				
White ( <i>reference</i> )	---	---	---	---
Black	0.27(0.05)	1.30***	0.27(0.05)	1.31***
Other	0.07(0.07)	1.08	0.06(0.08)	1.07
Gender/Race Interaction				
Gender*Race2	---	---	-0.09(0.11)	0.91
Gender*Race3	---	---	0.14(0.16)	1.15
Criminal History	0.01 (0.01)	1.01	0.01(0.01)	1.01
Time Served	0.00 (0.00)	1.00*	0.00(0.00)	1.00*
Rules Violation	-0.02(0.05)	0.98	-0.02(0.05)	0.98
Current Offense				
Violent	0.11(0.07)	1.11	0.11(0.07)	1.12
Property	-0.04(0.77)	0.96	-0.03(0.08)	0.97
Drug	0.03(0.08)	1.03	0.03(0.07)	1.03
Other ( <i>reference</i> )	---	---	---	---
Facility Location				
West ( <i>reference</i> )	---	---	---	---
Northeast	0.18(0.12)	1.20	0.18(0.12)	1.20
South	0.18(0.11)	1.20	0.18(0.11)	1.20
Midwest	0.18(0.13)	1.19	0.18(0.13)	1.19
Facility Security Level				
Minimum ( <i>reference</i> )	---	---	---	---
Medium	-0.16 (0.11)	0.85	-0.16 (0.11)	0.85
Maximum	-0.36 (0.12)	0.70**	-0.36 (0.12)	0.70**
Facility Size	-0.00 (0.00)	1.00***	-0.00 (0.00)	1.00***
LL	-8,054.86		-8,054.38	
LR	122.06***		124.36***	
McFadden's Pseudo R <sup>2</sup>	0.016		0.016	
N	13,301		13,301	

Notes:\*\*\*p < .001, \*\*p< .01, \*p< .05

LL = log likelihood; LR = likelihood ratio test of full versus naïve model

--- = reference category or interaction term excluded.

Table 6.19. Binary Logistic Regression Model for Male Stereotypical Work Assignments Participation

Variable	Male Stereotypical Assignments			
	Model 1		Model 2	
	B (SE)	$e^B$	B (SE)	$e^B$
Males	0.52 (0.15)	1.69**	0.53 (0.16)	1.70**
Race				
White ( <i>reference</i> )	---	---	---	---
Black	-0.30 (0.08)	0.74***	-0.38 (0.18)	0.68*
Other	-0.17 (0.10)	0.84	0.11 (0.19)	1.12
Gender/Race Interaction				
Gender*Race2	---	---	0.08 (0.19)	1.08
Gender*Race3	---	---	-0.30 (0.22)	0.74
Criminal History	-0.06 (0.01)	0.95***	-0.06 (0.02)	0.95***
Time Served	-0.00 (0.00)	1.00	-0.00 (0.00)	1.00
Rules Violation	0.17 (0.06)	1.19**	0.17 (0.06)	1.19**
Current Offense				
Violent	-0.40 (0.10)	0.67***	-0.40 (0.10)	0.67***
Property	-0.02 (0.12)	0.98	-0.02 (0.12)	0.98
Drug	0.00 (0.10)	1.00	0.00 (0.10)	1.00
Other ( <i>reference</i> )	---	---	---	---
Facility Location				
West ( <i>reference</i> )	---	---	---	---
Northeast	0.16 (0.21)	1.18	0.16 (0.21)	1.18
South	0.81 (0.17)	2.25***	0.81 (0.17)	2.25***
Midwest	-0.04 (0.20)	0.96	-0.04 (0.20)	0.96
Facility Security Level				
Minimum ( <i>reference</i> )	---	---	---	---
Medium	-0.18 (0.18)	0.84	-0.18 (0.18)	0.84
Maximum	-0.14 (0.21)	0.87	-0.14 (0.21)	0.87
Facility Size	-0.00 (0.00)	1.00	-0.00 (0.00)	1.00
LL	-5,228.12		-5,227.58	
LR	158.58***		163.20***	
McFadden's pseudo R <sup>2</sup>	0.037		0.037	
N	13,301		13,301	

Notes:\*\*\*p < .001, \*\*p< .01, \*p< .05

LL = log likelihood; LR = likelihood ratio test of full versus naïve model

--- = reference category or interaction term excluded



Table 6.20. Binary Logistic Regression Model for Psychotropic Medication Participation

Variable	Psychotropic Medication			
	Model 1		Model 2	
	B (SE)	$e^B$	B (SE)	$e^B$
Males	-0.46 (0.13)	0.63***	-0.32 (0.15)	0.73*
Race				
White ( <i>reference</i> )	---	---	---	---
Black	-0.19 (0.08)	0.82*	0.00 (0.11)	1.00
Other	-0.31 (0.10)	0.73**	0.21 (0.20)	1.24
Gender/Race Interaction				
Gender*Race2	---	---	-0.22 (0.14)	0.80
Gender*Race3	---	---	-0.59 (0.22)	0.55**
Mental Health History	3.58 (0.10)	35.92***	3.58 (0.10)	35.90***
Physical Abuse	0.29 (0.08)	1.33***	0.29 (0.08)	1.33***
Sexual Abuse	0.26 (0.10)	1.29**	0.26 (0.10)	1.30**
Age	0.02 (0.00)	1.02***	0.02 (0.00)	1.02***
Criminal History	0.00 (0.01)	1.00	0.00 (0.01)	1.00
Time Served	-0.00 (0.00)	1.00	-0.00 (0.00)	1.00
Rules Violation	0.43 (0.08)	1.54***	0.43 (0.08)	1.54***
Current Offense				
Violent	0.38 (0.11)	1.46**	0.38 (0.11)	1.46**
Property	0.30 (0.11)	1.35**	0.31 (0.11)	1.36**
Drug	0.05 (0.12)	1.04	0.05 (0.12)	1.05
Other ( <i>reference</i> )	---	---	---	---
Facility Location				
West ( <i>reference</i> )	---	---	---	---
Northeast	0.18 (0.16)	1.19	0.18 (0.16)	1.20
South	-0.10 (0.14)	0.91	-0.09 (0.14)	0.91
Midwest	-0.08 (0.16)	0.92	-0.08 (0.16)	0.93
Facility Security Level				
Minimum ( <i>reference</i> )	---	---	---	---
Medium	0.04 (0.18)	1.04	0.04 (0.18)	1.04
Maximum	0.40 (0.20)	1.49*	0.40 (0.20)	1.50*
Facility Size	0.00 (0.00)	1.00	0.00 (0.00)	1.00
LL	-3155.577		-3153.693	
LR	1955.74***		1952.36***	
McFadden's pseudo R <sup>2</sup>	0.398		0.398	
N	13,107		13,107	

Notes:\*\*\*p < .001, \*\*p< .01, \*p< .05

LL = log likelihood; LR = likelihood ratio test of full versus naïve model

--- = reference category or interaction term excluded

Table 6.21. Binary Logistic Regression Model for Hospitalization Participation

Variable	Hospitalization			
	Model 1		Model 2	
	B (SE)	$e^B$	B (SE)	$e^B$
Males	0.65 (0.19)	1.91**	0.82 (0.25)	2.29**
Race				
White ( <i>reference</i> )	---	---	---	---
Black	0.11 (0.13)	1.12	0.46 (0.30)	1.59
Other	-0.07 (0.21)	0.93	0.24 (0.41)	1.28
Gender/Race Interaction				
Gender*Race2	---	---	-0.39 (0.33)	0.68
Gender*Race3	---	---	-0.35 (0.47)	0.70
Mental Health History	2.99 (0.18)	19.84***	2.98 (0.18)	19.75***
Physical Abuse	0.44 (0.12)	1.55***	0.44 (0.12)	1.55***
Sexual Abuse	0.56 (0.17)	1.75**	0.56 (0.17)	1.76**
Age	-0.00 (0.01)	1.00	-0.00 (0.01)	1.00
Criminal History	0.02 (0.02)	1.02	0.02 (0.02)	1.02
Time Served	0.00 (0.00)	1.00***	0.00 (0.00)	1.00***
Rules Violation	0.50 (0.14)	1.64***	0.49 (0.14)	1.63***
Current Offense				
Violent	-0.11 (0.25)	0.90	-0.11 (0.25)	0.90
Property	-0.10 (0.24)	0.90	-0.10 (0.24)	0.90
Drug	-0.61 (0.31)	0.55*	-0.60 (0.31)	0.55*
Other ( <i>reference</i> )	---	---	---	---
Facility Location				
West ( <i>reference</i> )	---	---	---	---
Northeast	0.22 (0.23)	1.25	0.23 (0.23)	1/26
South	0.09 (0.20)	1.09	0.09 (0.20)	1.09
Midwest	-0.37 (0.25)	0.69	-0.37 (0.25)	0.69
Facility Security Level				
Minimum ( <i>reference</i> )	---	---	---	---
Medium	0.22 (0.25)	1.25	0.22 (0.25)	1.25
Maximum	0.95 (0.29)	2.57**	0.95 (0.29)	2.58**
Facility Size	-0.00 (0.00)	1.00	-0.00 (0.00)	1.00
LL	-1218.224		-1217.761	
LR	629.69***		636.92***	
McFadden's pseudo R <sup>2</sup>	0.262		0.262	
N	13,103		13,103	

Notes:\*\*\*p < .001, \*\*p< .01, \*p< .05

LL = log likelihood; LR = likelihood ratio test of full versus naïve model

--- = reference category or interaction term excluded

Table 6.22. Binary Logistic Regression Model for Counseling Participation

Variable	Counseling			
	Model 1		Model 2	
	B (SE)	$e^B$	B (SE)	$e^B$
Males	-0.32 (0.12)	0.73**	-0.22 (0.13)	0.80
Race				
White ( <i>reference</i> )	---	---	---	---
Black	-0.03 (0.08)	0.97	0.11 (0.14)	1.12
Other	-0.13 (0.10)	0.88	0.20 (0.17)	1.23
Gender/Race Interaction				
Gender*Race2	---	---	-0.16 (0.17)	0.85
Gender*Race3	---	---	-0.38 (0.20)	0.68
Mental Health History	2.99 (0.09)	19.80***	2.98 (0.09)	19.77***
Physical Abuse	0.39 (0.09)	1.47***	0.39 (0.09)	1.47***
Sexual Abuse	0.40 (0.10)	1.49***	0.40 (0.10)	1.49***
Age	0.01 (0.00)	1.01	0.01 (0.00)	1.01
Criminal History	-0.00 (0.01)	1.00	-0.00 (0.01)	1.00
Time Served	0.00 (0.00)	1.00***	0.00 (0.00)	1.00***
Rules Violation	0.47 (0.07)	1.59***	0.46 (0.07)	1.59***
Current Offense				
Violent	0.34 (0.12)	1.40**	0.34 (0.12)	1.40**
Property	0.25 (0.12)	1.29*	0.26 (0.12)	1.29*
Drug	-0.11 (0.13)	0.90	-0.10 (0.13)	0.90
Other ( <i>reference</i> )	---	---	---	---
Facility Location				
West ( <i>reference</i> )	---	---	---	---
Northeast	0.39 (0.15)	1.48*	0.40 (0.15)	1.49*
South	-0.07 (0.13)	0.93	-0.07 (0.13)	0.93
Midwest	-0.09 (0.14)	0.91	-0.09 (0.14)	0.91
Facility Security Level				
Minimum ( <i>reference</i> )	---	---	---	---
Medium	0.13 (0.17)	1.14	0.14 (0.17)	1.15
Maximum	0.41 (0.19)	1.50*	0.41 (0.19)	1.50*
Facility Size	-0.00 (0.00)	1.00	-0.00 (0.00)	1.00
LL	-3211.62		-3210.768	
LR	2009.50***		2015.86***	
McFadden's pseudo R <sup>2</sup>	0.320		0.320	
N	13,105		13,105	

Notes:\*\*\*p < .001, \*\*p< .01, \*p< .05

LL = log likelihood; LR = likelihood ratio test of full versus naïve model

--- = reference category or interaction term excluded.

Table 6.23. Binary Logistic Regression Model for Mental Health Care Domain Participation

Variable	Mental Health Care Domain			
	Model 1		Model 2	
	B (SE)	$e^B$	B (SE)	$e^B$
Males	-0.47 (0.12)	0.62***	-0.31 (0.14)	0.73*
Race				
White ( <i>reference</i> )	---	---	---	---
Black	-0.15 (0.08)	0.86*	0.11 (0.12)	1.12
Other	-0.21 (0.10)	0.81*	0.29 (0.19)	1.33
Gender/Race Interaction				
Gender*Race2	---	---	-0.29 (0.15)	0.75*
Gender*Race3	---	---	-0.56 (0.21)	0.57**
Mental Health History	3.20 (0.08)	24.47***	3.20 (0.08)	24.46***
Physical Abuse	0.48 (0.08)	1.62***	0.49 (0.08)	1.62***
Sexual Abuse	0.44 (0.10)	1.55***	0.44 (0.10)	1.55***
Age	0.01 (0.00)	1.01***	0.01 (0.00)	1.01***
Criminal History	-0.00 (0.01)	1.00	-0.00 (0.01)	1.00
Time Served	0.00 (0.00)	1.00**	0.00 (0.00)	1.00**
Rules Violation	0.44 (0.07)	1.56***	0.44 (0.07)	1.55***
Current Offense				
Violent	0.30 (0.11)	1.35**	0.30 (0.11)	1.35**
Property	0.15 (0.11)	1.16	0.15 (0.11)	1.17
Drug	-0.17 (0.12)	0.85	-0.16 (0.12)	0.85
Other ( <i>reference</i> )	---	---	---	---
Facility Location				
West ( <i>reference</i> )	---	---	---	---
Northeast	0.31 (0.15)	1.36*	0.31 (0.15)	1.37*
South	-0.14 (0.13)	0.87	-0.14 (0.13)	0.87
Midwest	-0.09 (0.14)	0.92	-0.08 (0.14)	0.92
Facility Security Level				
Minimum ( <i>reference</i> )	---	---	---	---
Medium	0.05 (0.15)	1.06	0.06 (0.15)	1.06
Maximum	0.31 (0.16)	1.36	0.31 (0.16)	1.36
Facility Size	0.00 (0.00)	1.00	0.00 (0.00)	1.00
LL	-3773.041		-3771.017	
LR	2401.28***		2398.62***	
McFadden's pseudo R <sup>2</sup>	0.375		0.376	
N	13,084		13,084	

Notes:\*\*\*p < .001, \*\*p< .01, \*p< .05

LL = log likelihood; LR = likelihood ratio test of full versus naïve model

--- = reference category or interaction term excluded

Table 6.24. Binary Logistic Regression Model for Inpatient Drug Treatment Participation

Variable	Inpatient Drug Treatment			
	Model 1		Model 2	
	B (SE)	$e^B$	B (SE)	$e^B$
Males	-0.27 (0.17)	0.76	-0.27 (0.19)	0.76
Race				
White ( <i>reference</i> )	---	---	---	---
Black	-0.12 (0.11)	0.89	-0.06 (0.13)	0.94
Other	-0.27 (0.16)	0.77	-0.44 (0.29)	0.64
Gender/Race Interaction				
Gender*Race2	---	---	-0.06 (0.18)	0.94
Gender*Race3	---	---	0.20 (0.34)	1.22
Mandatory Drug Treatment	0.76 (0.09)	2.14***	0.76 (0.09)	2.14***
Alcohol Dependency	0.04 (0.01)	1.04***	0.04 (0.01)	1.04***
Drug Dependency	0.08 (0.01)	1.08***	0.08 (0.01)	1.08***
Age	-0.00 (0.00)	1.00	-0.00 (0.00)	1.00
Criminal History	0.04 (0.01)	1.04***	0.04 (0.01)	1.04***
Time served	0.00 (0.00)	1.00**	0.00 (0.00)	1.00**
Rules violation	0.15 (0.10)	1.17	0.15 (0.10)	1.17
Current Offense				
Violent	-0.32 (0.14)	0.72*	-0.32 (0.14)	0.72*
Property	-0.06 (0.14)	0.94	-0.06 (0.14)	0.94
Drug	0.17 (0.13)	1.18	0.17 (0.13)	1.18
Other ( <i>reference</i> )	---	---	---	---
Facility Location				
West ( <i>reference</i> )	---	---	---	---
Northeast	0.16 (0.26)	1.18	0.16 (0.26)	1.18
South	-0.36 (0.25)	0.70	-0.26 (0.25)	0.70
Midwest	-0.08 (0.26)	0.92	-0.08 (0.26)	0.92
Facility Security Level				
Minimum ( <i>reference</i> )	---	---	---	---
Medium	-0.13 (0.21)	0.88	-0.13 (0.21)	0.87
Maximum	-0.07 (0.25)	0.93	-0.07 (0.25)	0.93
Facility Size	-0.00 (0.00)	1.00**	-0.00 (0.00)	1.00**
LL	-2567.955		-2567.795	
LR	371.52***		372.31***	
McFadden's pseudo R <sup>2</sup>	0.084		0.084	
N	10,452		10,452	

Notes:\*\*\*p < .001, \*\*p< .01, \*p< .05

LL = log likelihood; LR = likelihood ratio test of full versus naïve model

--- = reference category or interaction term excluded

Table 6.25. Binary Logistic Regression Model for Outpatient Drug Treatment Participation

Variable	Outpatient Drug Treatment			
	Model 1		Model 2	
	B (SE)	$e^B$	B (SE)	$e^B$
Males	-0.26 (0.14)	0.77	-0.13 (0.16)	0.88
Race				
White ( <i>reference</i> )	---	---	---	---
Black	-0.02 (0.11)	0.98	0.27 (0.21)	1.31
Other	-0.13 (0.16)	0.88	0.06 (0.31)	1.06
Gender/Race Interaction				
Gender*Race2	---	---	-0.32 (0.24)	0.73
Gender*Race3	---	---	-0.20 (0.35)	0.82
Mandatory Drug Treatment	0.42 (0.12)	1.52***	0.42 (0.12)	1.52***
Alcohol Dependency	0.06 (0.01)	1.07***	0.06 (0.01)	1.07***
Drug Dependency	0.09 (0.01)	1.09***	0.09 (0.01)	1.10***
Age	0.01 (0.01)	1.01	0.01 (0.01)	1.01
Criminal History	0.01 (0.01)	1.01	0.00 (0.01)	1.00
Time served	0.00 (0.00)	1.00**	0.00 (0.00)	1.00**
Rules violation	0.22 (0.12)	1.25	0.22 (0.12)	1.25
Current Offense				
Violent	-0.21 (0.19)	0.81	-0.21 (0.19)	0.81
Property	0.05 (0.19)	1.05	0.05 (0.19)	1.05
Drug	-0.08 (0.19)	0.92	-0.08 (0.19)	0.92
Other ( <i>reference</i> )	---	---	---	---
Facility Location				
West ( <i>reference</i> )	---	---	---	---
Northeast	0.35 (0.26)	1.42	0.35 (0.26)	1.43
South	-0.45 (0.22)	0.64*	-0.45 (0.23)	0.64*
Midwest	-0.18 (0.24)	0.83	-0.18 (0.24)	0.83
Facility Security Level				
Minimum ( <i>reference</i> )	---	---	---	---
Medium	0.07 (0.21)	1.07	0.07 (0.21)	1.07
Maximum	0.02 (0.23)	1.02	0.02 (0.23)	1.02
Facility Size	-0.00 (0.00)	1.00***	-0.00 (0.00)	1.00***
LL	-1936.041		-1935.578	
LR	270.12***		270.75***	
McFadden's pseudo R <sup>2</sup>	0.073		0.074	
N	10,451		10,451	

Notes:\*\*\*p < .001, \*\*p< .01, \*p< .05; LL = log likelihood; LR = likelihood ratio test of full versus naïve model; --- = reference category or interaction term excluded

Table 6.26. Binary Logistic Regression Model for Self-Help/Peer-Counseling Participation

Variable	Self-Help and Peer-Counseling			
	Model 1		Model 2	
	B (SE)	$e^B$	B (SE)	$e^B$
Males	-0.09 (0.10)	0.92	-0.05 (0.12)	0.95
Race				
White ( <i>reference</i> )	---	---	---	---
Black	0.04 (0.06)	1.04	0.09 (0.13)	1.09
Other	-0.02 (0.09)	0.98	0.12 (0.23)	1.14
Gender/Race Interaction				
Gender*Race2	---	---	-0.05 (0.14)	0.95
Gender*Race3	---	---	-0.16 (0.25)	0.85
Mandatory Drug Treatment	0.54 (0.08)	1.72***	0.54 (0.08)	1.72***
Alcohol Dependency	0.06 (0.01)	1.06***	0.06 (0.01)	1.06***
Drug Dependency	0.07 (0.01)	1.07***	0.07 (0.01)	1.07***
Age	0.00 (0.00)	1.00	0.00 (0.00)	1.00
Criminal History	0.01 (0.01)	1.01	0.01 (0.01)	1.01
Time served	0.01 (0.00)	1.01***	0.01 (0.00)	1.01***
Rules violation	0.14 (0.06)	1.15*	0.14 (0.06)	1.15*
Current Offense				
Violent	-0.08 (0.11)	0.92	-0.08 (0.11)	0.92
Property	0.03 (0.10)	1.03	0.03 (0.10)	1.03
Drug	0.05 (0.10)	1.06	0.05 (0.10)	1.05
Other ( <i>reference</i> )	---	---	---	---
Facility Location				
West ( <i>reference</i> )	---	---	---	---
Northeast	0.16 (0.15)	1.18	0.16 (0.15)	1.18
South	-0.19 (0.13)	0.83	-0.18 (0.13)	0.83
Midwest	-0.19 (0.15)	0.83	-0.19 (0.15)	0.83
Facility Security Level				
Minimum ( <i>reference</i> )	---	---	---	---
Medium	0.12 (0.16)	1.13	0.12 (0.16)	1.13
Maximum	-0.23 (0.17)	0.79	-0.23 (0.17)	0.79
Facility Size	-0.00 (0.00)	1.00***	-0.00 (0.00)	1.00***
LL	-5492.467		-5492.308	
LR	511.20***		511.17***	
McFadden's pseudo R <sup>2</sup>	0.069		0.069	
N	10,453		10,453	

Notes:\*\*\*p < .001, \*\*p< .01, \*p< .05; LL = log likelihood; LR = likelihood ratio test of full versus naïve model; --- = reference category or interaction term excluded

Table 6.27. Binary Logistic Regression Model for Education/Awareness Drug Treatment Participation

Variable	Education/Awareness Drug Treatment			
	Model 1		Model 2	
	B (SE)	$e^B$	B (SE)	$e^B$
Males	0.07 (0.12)	1.08	0.18 (0.15)	1.20
Race				
White ( <i>reference</i> )	---	---	---	---
Black	-0.03 (0.07)	0.97	0.17 (0.14)	1.18
Other	-0.11 (0.10)	0.90	0.17 (0.22)	1.18
Gender/Race Interaction				
Gender*Race2	---	---	-0.21 (0.16)	0.81
Gender*Race3	---	---	-0.30 (0.25)	0.74
Mandatory Drug Treatment	0.60 (0.08)	1.83***	0.60 (0.08)	1.83***
Alcohol Dependency	0.04 (0.01)	1.04***	0.04 (0.10)	1.04***
Drug Dependency	0.06 (0.01)	1.06***	0.06 (0.01)	1.06***
Age	0.00 (0.00)	1.00	0.00 (0.00)	1.00
Criminal History	0.01 (0.01)	1.01	0.01 (0.01)	1.01
Time served	0.00 (0.00)	1.00***	0.00 (0.00)	1.00***
Rules violation	0.26 (0.08)	1.30**	0.26 (0.08)	1.30**
Current Offense				
Violent	0.01 (0.12)	1.02	0.01 (0.12)	1.01
Property	0.00 (0.14)	1.00	0.00 (0.14)	1.00
Drug	0.12 (0.15)	1.13	0.12 (0.15)	1.13
Other ( <i>reference</i> )	---	---	---	---
Facility Location				
West ( <i>reference</i> )	---	---	---	---
Northeast	0.35 (0.21)	1.43	0.35 (0.21)	1.43
South	-0.31 (0.19)	0.73	-0.31 (0.19)	0.73
Midwest	-0.43 (0.20)	0.65*	-0.42 (0.20)	0.65*
Facility Security Level				
Minimum ( <i>reference</i> )	---	---	---	---
Medium	0.23 (0.16)	1.26	0.23 (0.16)	1.26
Maximum	-0.06 (0.19)	0.94	-0.06 (0.19)	0.94
Facility Size	-0.00 (0.00)	1.00***	-0.00 (0.00)	1.00***
LL	-4138.222		-4137.650	
LR	491.00***		492.57***	
McFadden's pseudo R <sup>2</sup>	0.068		0.068	
N	10,451		10,451	

Notes:\*\*\*p < .001, \*\*p< .01, \*p< .05

LL = log likelihood; LR = likelihood ratio test of full versus naïve model

--- = reference category or interaction term excluded



Table 6.28. Binary Logistic Regression Model for Substance Abuse Treatment Domain Participation

Variable	Any Substance Abuse			
	Model 1		Model 2	
	B (SE)	$e^B$	B (SE)	$e^B$
Males	-0.09 (0.09)	0.91	-0.10 (0.11)	0.91
Race				
White ( <i>reference</i> )	---	---	---	---
Black	0.01 (0.06)	1.01	-0.01 (0.11)	0.99
Other	-0.01 (0.08)	0.99	0.01 (0.19)	1.01
Gender/Race Interaction				
Gender*Race2	---	---	0.02 (0.13)	1.02
Gender*Race3	---	---	-0.02 (0.20)	0.98
Mandatory Drug Treatment	0.78 (0.07)	2.18***	0.78 (0.07)	2.18***
Alcohol Dependency	0.06 (0.01)	1.06***	0.06 (0.01)	1.06***
Drug Dependency	0.07 (0.01)	1.07***	0.07 (0.01)	1.07***
Age	-0.00 (0.00)	1.00	-0.00 (0.00)	1.00
Criminal History	0.02 (0.01)	1.02	0.02 (0.01)	1.02
Time served	0.01 (0.01)	1.01***	0.01 (0.00)	1.01***
Rules violation	0.21 (0.06)	1.23***	0.21 (0.06)	1.23***
Current Offense				
Violent	-0.13 (0.09)	0.87	-0.13 (0.09)	0.87
Property	-0.01 (0.10)	0.99	-0.01 (0.10)	0.99
Drug	0.10 (0.10)	1.11	0.10 (0.10)	1.11
Other ( <i>reference</i> )	---	---	---	---
Facility Location				
West ( <i>reference</i> )	---	---	---	---
Northeast	0.26 (0.15)	1.29	0.25 (0.15)	1.29
South	-0.23 (0.14)	0.79	-0.23 (0.14)	0.79
Midwest	-0.22 (0.15)	0.80	-0.22 (0.15)	0.80
Facility Security Level				
Minimum ( <i>reference</i> )	---	---	---	---
Medium	-0.02 (0.13)	0.99	-0.01 (0.13)	0.99
Maximum	-0.30 (0.15)	0.74*	-0.30 (0.15)	0.74*
Facility Size	-0.00 (0.00)	1.00***	-0.00 (0.00)	1.00***
LL	-6172.633		-6172.622	
LR	603.48***		604.96***	
McFadden's pseudo R <sup>2</sup>	0.087		0.087	
N	10,439		10,439	

Notes:\*\*\*p < .001, \*\*p< .01, \*p< .05; LL = log likelihood; LR = likelihood ratio test of full versus naïve model; --- = reference category or interaction term excluded

Table 6.29. Binary Logistic Regression Model for Life-Skills and Community Adjustment Program Participation

Variable	Life-Skills			
	Model 1		Model 2	
	B (SE)	$e^B$	B (SE)	$e^B$
Males	-0.48 (0.13)	0.62***	-0.59 (0.15)	0.56***
Race				
White ( <i>reference</i> )	---	---	---	---
Black	0.11 (0.06)	1.11	-0.18 (0.13)	0.83
Other	0.06 (0.08)	1.06	0.09 (0.15)	1.10
Gender/Race Interaction				
Gender*Race2	---	---	0.31 (0.15)	1.37*
Gender*Race3	---	---	-0.03 (0.17)	0.97
Employment History	0.15 (0.05)	1.17**	0.16 (0.05)	1.17**
Children	0.22 (0.04)	1.25***	0.22 (0.04)	1.25***
Age	-0.02 (0.00)	0.98***	-0.02 (0.00)	0.98***
Criminal History	0.01 (0.01)	1.01	0.01 (0.01)	1.01
Time served	0.01 (0.00)	1.01***	0.01 (0.00)	1.01***
Rules violation	0.31 (0.06)	1.36***	0.31 (0.06)	1.36***
Current Offense				
Violent	0.25 (0.09)	1.29**	0.26 (0.09)	1.29**
Property	0.14 (0.10)	1.15	0.14 (0.10)	1.15
Drug	0.17 (0.10)	1.18	0.16 (0.10)	1.18
Other ( <i>reference</i> )	---	---	---	---
Facility Location				
West ( <i>reference</i> )	---	---	---	---
Northeast	0.13 (0.17)	1.14	0.13 (0.17)	1.13
South	-0.66 (0.15)	0.52***	-0.66 (0.15)	0.52***
Midwest	-0.80 (0.15)	0.45***	-0.80 (0.15)	0.45***
Facility Security Level				
Minimum ( <i>reference</i> )	---	---	---	---
Medium	-0.05 (0.15)	0.95	-0.05 (0.15)	0.95
Maximum	-0.49 (0.15)	0.61**	-0.49 (0.15)	0.61**
Facility Size	-0.00 (0.00)	1.00***	-0.00 (0.00)	1.00***
LL	-6337.568		-6335.747	
LR	425.06***		432.00***	
McFadden's pseudo R <sup>2</sup>	0.074		0.074	
N	12,969		12,969	

Notes:\*\*\*p < .001, \*\*p< .01, \*p< .05

LL = log likelihood; LR = likelihood ratio test of full versus naïve model

--- = reference category or interaction term excluded

Table 6.30. Binary Logistic Regression Model for Parenting Program Participation

Variable	Parenting Program			
	Model 1		Model 2	
	B (SE)	$e^B$	B (SE)	$e^B$
Males	-1.20 (0.15)	0.30***	-1.26 (0.18)	0.29***
Race				
White ( <i>reference</i> )	---	---	---	---
Black	0.04 (0.09)	1.04	-0.14 (0.14)	0.87
Other	0.10 (0.11)	1.11	0.17 (0.16)	1.18
Gender/Race Interaction				
Gender*Race2	---	---	0.20 (0.18)	1.22
Gender*Race3	---	---	-0.08 (0.20)	0.93
Employment History	0.14 (0.08)	1.15	0.14 (0.08)	1.15
Children	1.22 (0.10)	3.39***	1.22 (0.10)	3.39***
Age	-0.03 (0.00)	0.97***	-0.03 (0.00)	0.97***
Criminal History	-0.01 (0.01)	0.99	-0.01 (0.01)	0.99
Time served	0.01 (0.00)	1.01***	0.01 (0.00)	1.01***
Rules violation	0.32 (0.09)	1.37***	0.31 (0.09)	1.37***
Current Offense				
Violent	0.03 (0.14)	1.03	0.03 (0.14)	1.03
Property	-0.02 (0.15)	0.98	-0.01 (0.15)	0.99
Drug	0.15 (0.15)	1.17	0.15 (0.15)	1.16
Other ( <i>reference</i> )	---	---	---	---
Facility Location				
West ( <i>reference</i> )	---	---	---	---
Northeast	-0.20 (0.23)	0.82	-0.20 (0.23)	0.82
South	-0.98 (0.22)	0.38***	-0.98 (0.22)	0.38***
Midwest	-0.45 (0.23)	0.64	-0.45 (0.23)	0.64
Facility Security Level				
Minimum ( <i>reference</i> )	---	---	---	---
Medium	0.08 (0.19)	1.08	0.08 (0.19)	1.08
Maximum	-0.21 (0.18)	0.73	-0.31 (0.18)	0.73
Facility Size	-0.00 (0.00)	1.00**	-0.00 (0.00)	1.00**
LL	-3264.340		-3263.731	
LR	480.02***		494.57***	
McFadden's pseudo R <sup>2</sup>	0.096		0.096	
N	12,969		12,969	

Notes:\*\*\*p < .001, \*\*p< .01, \*p< .05

LL = log likelihood; LR = likelihood ratio test of full versus naïve model

--- = reference category or interaction term excluded

Table 6.31. Binary Logistic Regression Model for Employment Program Participation

Variable	Employment Program			
	Model 1		Model 2	
	B (SE)	$e^B$	B (SE)	$e^B$
Males	-0.50 (0.13)	0.61***	-0.67 (0.18)	0.51***
Race				
White ( <i>reference</i> )	---	---	---	---
Black	0.42 (0.08)	1.53***	0.05 (0.17)	1.05
Other	0.23 (0.11)	1.26*	0.17 (0.17)	1.18
Gender/Race Interaction				
Gender*Race2	---	---	0.42 (0.19)	1.52*
Gender*Race3	---	---	0.07 (0.20)	1.08
Employment History	0.11 (0.07)	1.12	0.11 (0.07)	1.12
Children	0.15 (0.07)	1.16*	0.15 (0.07)	1.16*
Age	-0.02 (0.00)	0.98***	-0.02 (0.00)	0.98***
Criminal History	0.02 (0.01)	1.02*	0.02 (0.01)	1.02*
Time served	0.01 (0.00)	1.01***	0.01 (0.00)	1.01***
Rules violation	0.28 (0.07)	1.32***	0.28 (0.07)	1.33***
Current Offense				
Violent	0.13 (0.13)	1.13	0.13 (0.13)	1.14
Property	0.30 (0.14)	1.35*	0.30 (0.14)	1.35*
Drug	0.29 (0.14)	1.34*	0.29 (0.14)	1.33*
Other ( <i>reference</i> )	---	---	---	---
Facility Location				
West ( <i>reference</i> )	---	---	---	---
Northeast	0.18 (0.14)	1.20	0.18 (0.14)	1.19
South	-0.34 (0.13)	0.71*	-0.34 (0.14)	0.71*
Midwest	-0.21 (0.16)	0.81	-0.22 (0.16)	0.80
Facility Security Level				
Minimum ( <i>reference</i> )	---	---	---	---
Medium	-0.18 (0.16)	0.83	-0.18 (0.16)	0.83
Maximum	-0.68 (0.17)	0.50***	-0.69 (0.17)	0.50***
Facility Size	-0.00 (0.00)	1.00**	-0.00 (0.00)	1.00**
LL	-3554.067		-3552.527	
LR	242.57***		242.55***	
McFadden's pseudo R <sup>2</sup>	0.046		0.047	
N	12,970		12,970	

Notes:\*\*\*p < .001, \*\*p< .01, \*p< .05

LL = log likelihood; LR = likelihood ratio test of full versus naïve model

--- = reference category or interaction term excluded

Table 6.32. Binary Logistic Regression Model for Pre-Release Program Participation

Variable	Pre-Release Program			
	Model 1		Model 2	
	B (SE)	$e^B$	B (SE)	$e^B$
Males	-0.32 (0.18)	0.72	-0.49 (0.21)	0.61*
Race				
White ( <i>reference</i> )	---	---	---	---
Black	0.07 (0.11)	1.07	-0.37 (0.21)	0.69
Other	0.09 (0.13)	1.09	0.01 (0.19)	1.01
Gender/Race Interaction				
Gender*Race2	---	---	0.48 (0.24)	1.62*
Gender*Race3	---	---	0.09 (0.24)	1.09
Employment History	0.26 (0.10)	1.29*	0.26 (0.10)	1.30*
Children	0.24 (0.10)	1.27*	0.24 (0.10)	1.27*
Age	-0.01 (0.00)	0.99	-0.01 (0.00)	0.99
Criminal History	0.05 (0.01)	1.05***	0.05 (0.01)	1.05***
Time served	0.00 (0.00)	1.00***	0.00 (0.00)	1.00***
Rules violation	0.40 (0.09)	1.50***	0.41 (0.09)	1.50***
Current Offense				
Violent	-0.04 (0.17)	0.96	-0.03 (0.17)	0.97
Property	0.28 (0.15)	1.32	0.28 (0.16)	1.33
Drug	0.20 (0.18)	1.22	0.20 (0.18)	1.22
Other ( <i>reference</i> )	---	---	---	---
Facility Location				
West ( <i>reference</i> )	---	---	---	---
Northeast	0.02 (0.18)	1.02	0.02 (0.18)	1.02
South	-0.67 (0.17)	0.51***	-0.67 (0.17)	0.51***
Midwest	-0.26 (0.19)	0.77	-0.26 (0.19)	0.77
Facility Security Level				
Minimum ( <i>reference</i> )	---	---	---	---
Medium	0.21 (0.18)	1.23	0.20 (0.18)	1.22
Maximum	-0.08 (0.21)	0.92	-0.08 (0.21)	0.92
Facility Size	-0.00 (0.00)	1.00***	-0.00 (0.00)	1.00***
LL	-2502.244		-2501.037	
LR	144.30***		149.60***	
McFadden's pseudo R <sup>2</sup>	0.045		0.045	
N	12,969		12,969	

Notes:\*\*\*p < .001, \*\*p< .01, \*p< .05

LL = log likelihood; LR = likelihood ratio test of full versus naïve model

--- = reference category or interaction term excluded

Table 6.33. Binary Logistic Regression Model for Life-Skills Program Domain Participation

Variable	Any Life-Skills			
	Model 1		Model 2	
	B (SE)	$e^B$	B (SE)	$e^B$
Males	-0.64 (0.13)	0.53***	-0.72 (0.14)	0.49***
Race				
White ( <i>reference</i> )	---	---	---	---
Black	0.08 (0.06)	1.08	-0.15 (0.12)	0.86
Other	0.13 (0.07)	1.14	0.18 (0.14)	1.20
Gender/Race Interaction				
Gender*Race2	---	---	0.25 (0.14)	1.28
Gender*Race3	---	---	-0.06 (0.16)	0.95
Employment History	0.20 (0.05)	1.22***	0.20 (0.05)	1.22***
Children	0.27 (0.04)	1.32***	0.27 (0.04)	1.31***
Age	-0.02 (0.00)	0.98***	-0.02 (0.00)	0.98***
Criminal History	0.01 (0.01)	1.01	0.01 (0.01)	1.01
Time served	0.01 (0.00)	1.01***	0.01 (0.00)	1.01***
Rules violation	0.38 (0.05)	1.46***	0.38 (0.05)	1.46***
Current Offense				
Violent	0.20 (0.09)	1.22*	0.20 (0.09)	1.22*
Property	0.18 (0.09)	1.19	0.18 (0.09)	1.20
Drug	0.24 (0.10)	1.27*	0.24 (0.10)	1.27*
Other ( <i>reference</i> )	---	---	---	---
Facility Location				
West ( <i>reference</i> )	---	---	---	---
Northeast	0.16 (0.16)	1.17	0.16 (0.16)	1.17
South	-0.64 (0.13)	0.53***	-0.64 (0.13)	0.53***
Midwest	-0.59 (0.14)	0.56***	-0.59 (0.14)	0.56***
Facility Security Level				
Minimum ( <i>reference</i> )	---	---	---	---
Medium	0.03 (0.13)	1.03	0.03 (0.13)	1.03
Maximum	-0.45 (0.14)	0.64**	-0.46 (0.14)	0.63**
Facility Size	-0.00 (0.00)	1.00***	-0.00 (0.00)	1.00***
LL	-7013.964		-7012.565	
LR	444.38***		451.66***	
McFadden's pseudo R <sup>2</sup>	0.073		0.073	
N	12,965		12,965	

Notes:\*\*\*p < .001, \*\*p< .01, \*p< .05

LL = log likelihood; LR = likelihood ratio test of full versus naïve model

--- = reference category or interaction term excluded

Table 6.34. Binary Logistic Regression Model for Basic Education Participation

Variable	Basic Education			
	Model 1		Model 2	
	B (SE)	$e^B$	B (SE)	$e^B$
Males	-0.59 (0.27)	0.55*	-0.69 (0.28)	0.50*
Race				
White ( <i>reference</i> )	---	---	---	---
Black	0.27 (0.14)	1.31	0.06 (0.24)	1.07
Other	0.23 (0.20)	1.23	0.11 (0.32)	1.12
Gender/Race Interaction				
Gender*Race2	---	---	0.23 (0.28)	1.26
Gender*Race3	---	---	0.13 (0.37)	1.14
Employment History	-0.17 (0.13)	0.84	-0.17 (0.13)	0.84
Education				
Less than High School ( <i>reference</i> )	---	---	---	---
Diploma/GED	-1.67 (0.14)	0.19***	-1.67 (0.14)	0.19***
Some College or More	-2.75 (0.42)	0.06***	-2.76 (0.42)	0.06***
Age	0.01 (0.01)	1.01	0.01 (0.01)	1.01
Criminal History	0.02 (0.02)	1.02	0.02 (0.02)	1.02
Time served	0.00 (0.00)	1.00*	0.00 (0.00)	1.00*
Rules violation	0.11 (0.16)	1.12	0.11 (0.16)	1.12
Current Offense				
Violent	0.12 (0.28)	1.13	0.12 (0.28)	1.13
Property	0.26 (0.29)	1.29	0.26 (0.29)	1.29
Drug	-0.44 (0.32)	0.64	-0.45 (0.32)	0.64
Other ( <i>reference</i> )	---	---	---	---
Facility Location				
West ( <i>reference</i> )	---	---	---	---
Northeast	-0.19 (0.30)	0.83	-0.19 (0.30)	0.83
South	-0.59 (0.24)	0.55*	-0.59 (0.24)	0.55*
Midwest	-0.99 (0.29)	0.37**	-0.99 (0.29)	0.37**
Facility Security Level				
Minimum ( <i>reference</i> )	---	---	---	---
Medium	-0.21 (0.29)	0.81	-0.21 (0.29)	0.81
Maximum	-0.48 (0.31)	0.62	-0.48 (0.31)	0.62
Facility Size	0.00 (0.00)	1.00	0.00 (0.00)	1.00
LL	-1096.614		-1096.500	
LR	261.85***		263.85***	
McFadden's pseudo R <sup>2</sup>	0.099		0.099	
N	12,985		12,985	

Notes:\*\*\*p < .001, \*\*p< .01, \*p< .05; LL = log likelihood; LR = likelihood ratio test of full versus naïve model; --- = reference category or interaction term excluded

Table 6.35. Binary Logistic Regression Model for GED Education Participation

Variable	GED Education			
	Model 1		Model 2	
	B (SE)	$e^B$	B (SE)	$e^B$
Males	-0.13 (0.10)	0.88	-0.08 (0.12)	0.92
Race				
White ( <i>reference</i> )	---	---	---	---
Black	0.20 (0.06)	1.22**	0.24 (0.11)	1.27*
Other	0.23 (0.08)	1.26**	0.42 (0.16)	1.52**
Gender/Race Interaction				
Gender*Race2	---	---	-0.05 (0.12)	0.95
Gender*Race3	---	---	-0.20 (0.17)	0.82
Employment History	-0.11 (0.05)	0.89*	-0.11 (0.05)	0.90*
Education				
Less than High School ( <i>reference</i> )	---	---	---	---
Diploma/GED	-0.23 (0.07)	0.79**	-0.23 (0.07)	0.79**
Some College or More	-2.98 (0.22)	0.05***	-2.98 (0.22)	0.05***
Age	-0.04 (0.00)	0.97***	-0.04 (0.00)	0.97***
Criminal History	-0.02 (0.01)	0.98	-0.02 (0.01)	0.98
Time served	0.00 (0.00)	1.00***	0.00 (0.00)	1.00***
Rules violation	0.48 (0.06)	1.62***	0.48 (0.06)	1.62***
Current Offense				
Violent	0.27 (0.09)	1.31**	0.27 (0.09)	1.31**
Property	0.09 (0.10)	1.09	0.09 (0.10)	1.09
Drug	0.13 (0.10)	1.13	0.13 (0.10)	1.13
Other ( <i>reference</i> )	---	---	---	---
Facility Location				
West ( <i>reference</i> )	---	---	---	---
Northeast	0.32 (0.14)	1.37*	0.32 (0.14)	1.37*
South	0.14 (0.12)	1.15	0.14 (0.12)	1.15
Midwest	0.34 (0.14)	1.40*	0.34 (0.14)	1.41*
Facility Security Level				
Minimum ( <i>reference</i> )	---	---	---	---
Medium	-0.08 (0.12)	0.93	-0.08 (0.12)	0.93
Maximum	-0.25 (0.12)	0.78*	-0.25 (0.12)	0.78*
Facility Size	-0.00 (0.00)	1.00*	-0.00 (0.00)	1.00*
LL	-5462.747		-5462.52	
LR	522.22***		526.21***	
McFadden's pseudo R <sup>2</sup>	0.101		0.101	
N	12,985		12,985	

Notes:\*\*\*p < .001, \*\*p< .01, \*p< .05; LL = log likelihood; LR = likelihood ratio test of full versus naïve model; --- = reference category or interaction term excluded



Table 6.36. Binary Logistic Regression Model for College Courses Participation

Variable	College Courses			
	Model 1		Model 2	
	B (SE)	$e^B$	B (SE)	$e^B$
Males	-0.58 (0.16)	0.56***	-0.69 (0.19)	0.50***
Race				
White ( <i>reference</i> )	---	---	---	---
Black	-0.22 (0.08)	0.80**	-0.58 (0.22)	0.56**
Other	-0.08 (0.12)	0.93	-0.01 (0.21)	0.99
Gender/Race Interaction				
Gender*Race2	---	---	0.39 (0.24)	1.48
Gender*Race3	---	---	-0.07 (0.25)	0.93
Employment History	0.21 (0.10)	1.24*	0.22 (0.09)	1.24*
Education				
Less than High School ( <i>reference</i> )	---	---	---	---
Diploma/GED	0.68 (0.16)	1.98***	0.68 (0.16)	1.97***
Some College or More	1.59 (0.17)	4.94***	1.59 (0.17)	4.93***
Age	-0.04 (0.01)	0.97***	0.97 (0.02)	0.97***
Criminal History	-0.01 (0.02)	0.99	-0.01 (0.02)	0.99
Time served	0.01 (0.00)	1.01***	0.01 (0.00)	1.01***
Rules violation	0.71 (0.10)	2.04***	0.72 (0.10)	2.05***
Current Offense				
Violent	0.66 (0.16)	1.93***	0.66 (0.16)	1.93***
Property	0.27 (0.18)	1.31	0.27 (0.18)	1.31
Drug	0.44 (0.19)	1.56*	0.44 (0.19)	1.55*
Other ( <i>reference</i> )	---	---	---	---
Facility Location				
West ( <i>reference</i> )	---	---	---	---
Northeast	-0.22 (0.21)	0.80	-0.22 (0.21)	0.80
South	-0.42 (0.19)	0.65*	-0.43 (0.19)	0.65*
Midwest	0.08 (0.19)	1.09	0.08 (0.19)	1.08
Facility Security Level				
Minimum ( <i>reference</i> )	---	---	---	---
Medium	0.14 (0.21)	1.15	0.14 (0.21)	1.14
Maximum	-0.08 (0.22)	0.92	-0.09 (0.22)	0.92
Facility Size	-0.00 (0.00)	1.00*	-0.00 (0.00)	1.00*
LL	-2829.300		-2828.306	
LR	707.26***		736.35***	
McFadden's pseudo R <sup>2</sup>	0.143		0.143	
N	12,985		12,985	

Notes:\*\*\*p < .001, \*\*p< .01, \*p< .05; LL = log likelihood; LR = likelihood ratio test of full versus naïve model; --- = reference category or interaction term excluded

Table 6.37. Binary Logistic Regression Model for Education Domain Participation

Variable	Any Education			
	Model 1		Model 2	
	B (SE)	$e^B$	B (SE)	$e^B$
Males	-0.38 (0.10)	0.69***	-0.40 (0.12)	0.67**
Race				
White ( <i>reference</i> )	---	---	---	---
Black	0.08 (0.05)	1.08	-0.02 (0.11)	0.98
Other	0.20 (0.07)	1.22**	0.32 (0.12)	1.38**
Gender/Race Interaction				
Gender*Race2	---	---	0.11 (0.12)	1.11
Gender*Race3	---	---	-0.13 (0.14)	0.87
Employment History	0.03 (0.05)	1.03	0.03 (0.05)	1.03
Education				0.69
Less than High School ( <i>reference</i> )	---	---	---	---
Diploma/GED	-0.38 (0.07)	0.69***	-0.38 (0.07)	0.69***
Some College or More	-0.77 (0.10)	0.46***	-0.77 (0.10)	0.46***
Age	-0.03 (0.00)	0.97***	-0.03 (0.00)	0.97***
Criminal History	-0.02 (0.01)	0.98	-0.02 (0.00)	0.98
Time served	0.01 (0.00)	1.01***	0.01 (0.00)	1.01***
Rules violation	0.50 (0.05)	1.66***	0.51 (0.05)	1.66***
Current Offense				
Violent	0.33 (0.09)	1.40***	0.34 (0.09)	1.40***
Property	0.10 (0.09)	1.10	0.10 (0.09)	1.10
Drug	0.15 (0.09)	1.17	0.15 (0.09)	1.16
Other ( <i>reference</i> )	---	---	---	---
Facility Location				
West ( <i>reference</i> )	---	---	---	---
Northeast	0.16 (0.13)	1.17	0.16 (0.13)	1.17
South	-0.14 (0.11)	0.87	-0.14 (0.11)	0.87
Midwest	0.09 (0.11)	1.10	0.09 (0.11)	1.10
Facility Security Level				
Minimum ( <i>reference</i> )	---	---	---	---
Medium	0.03 (0.10)	1.04	0.03 (0.10)	1.04
Maximum	-0.30 (0.11)	0.74**	-0.30 (0.11)	0.74**
Facility Size	-0.00 (0.00)	1.00***	-0.00 (0.00)	1.00***
LL	-7160.301		-7159.804	
LR	619.07***		623.58***	
McFadden's pseudo R <sup>2</sup>	0.076		0.076	
N	12,985		12,985	

Notes:\*\*\*p < .001, \*\*p< .01, \*p< .05; LL = log likelihood; LR = likelihood ratio test of full versus naïve model; --- = reference category or interaction term excluded

Table 6.38. Binary Logistic Regression Model for Vocational Education Participation

Variable	Vocational Education			
	Model 1		Model 2	
	B (SE)	$e^B$	B (SE)	$e^B$
Males	-0.32 (0.10)	0.73**	-0.34 (0.12)	0.71**
Race				
White ( <i>reference</i> )	---	---	---	---
Black	0.12 (0.06)	1.13*	0.05 (0.11)	1.06
Other	0.09 (0.07)	1.10	0.11 (0.17)	1.11
Gender/Race Interaction				
Gender*Race2	---	---	0.07 (0.13)	1.07
Gender*Race3	---	---	-0.01 (0.19)	0.99
Employment History	0.14 (0.05)	1.15**	0.14 (0.05)	1.15**
Education				
Less than High School ( <i>reference</i> )	---	---	---	---
Diploma/GED	0.25 (0.07)	1.28**	0.25 (0.07)	1.28**
Some College or More	0.48 (0.10)	1.62***	0.48 (0.10)	1.62***
Children	0.11 (0.05)	1.12*	0.11 (0.05)	1.12*
Age	-0.02 (0.00)	0.98***	-0.02 (0.00)	0.98***
Criminal History	-0.00 (0.01)	1.00	-0.00 (0.01)	1.00
Time served	0.01 (0.00)	1.01***	0.01 (0.00)	1.01***
Rules violation	0.62 (0.06)	1.85***	0.62 (0.06)	1.86***
Current Offense				
Violent	0.32 (0.10)	1.37**	0.32 (0.10)	1.37**
Property	0.23 (0.10)	1.26*	0.23 (0.10)	1.26*
Drug	0.19 (0.09)	1.21*	0.19 (0.09)	1.21*
Other ( <i>reference</i> )	---	---	---	---
Facility Location				
West ( <i>reference</i> )	---	---	---	---
Northeast	0.37 (0.16)	1.45*	0.37 (0.16)	1.45*
South	-0.08 (0.12)	0.92	-0.09 (0.12)	0.92
Midwest	-0.23 (0.15)	0.80	-0.23 (0.15)	0.80
Facility Security Level				
Minimum ( <i>reference</i> )	---	---	---	---
Medium	0.32 (0.13)	1.38*	0.32 (0.14)	1.38*
Maximum	-0.05 (0.15)	0.95	-0.05 (0.15)	0.95
Facility Size	0.00 (0.00)	1.00	0.00 (0.00)	1.00
LL	-6564.653		-6564.561	
LR	671.05***		672.71***	
McFadden's pseudo R <sup>2</sup>	0.099		0.099	
N	12,951		12,951	

Notes:\*\*\*p < .001, \*\*p< .01, \*p< .05; LL = log likelihood; LR = likelihood ratio test of full versus naïve model; --- = reference category or interaction term excluded

## CHAPTER 7: DISCUSSION

In this chapter, I highlight important findings from my study on program availability within prisons and program participation by inmates, and discuss the relevance of my findings for the existing literature on women and corrections. The main purpose of my research was to examine the relationship between gender and programming for prison inmates since a considerable amount of literature is critical of programming for women in the corrections system. Using one of the last significant studies in this area by Morash, Rucker, and Haarr from 1994 as a guide, I considered the influence of gender on the types of programs that were available in facilities and participation by inmates in different types of programs.

Even though I used the 1994 Morash study as a guide and asked similar questions, I sometimes addressed those questions with a different analytic approach. For instance, in my study of program availability, I considered whether female or male prisons provided similar or different programs to their inmates by looking at individual program areas as Morash had done. I extended this examination by looking at program levels across broader programming domains and examined various levels of programming in each domain (i.e., low, medium, and high), because it is important to also understand if there were significant gender differences in amounts of certain programming areas or what I refer to as domains.

In regards to inmate participation in correctional programming, like the Morash study, I examined the relationship between inmate gender and participation in a variety of

programs and gender stereotypical programming. I addressed this issue at the individual program level, but also grouped feminine stereotypical work assignments together and masculine stereotypical work assignments together and then considered if there were gender differences (and race x gender difference) in program participation. I also extended the work of Morash and her colleagues' study by considering additional issues, such as the possible influence of race and gender interactions and the significance of recognized needs (i.e., background characteristics or experiences) for inmate participation in correctional programs.

In the remaining portion of this chapter, I organize the discussion of key findings from program availability and participation around my three primary independent variables of interest: gender, the interaction between race and gender, and recognized needs. Additionally, I discuss the importance of considering facility-level factors when conducting research on prison programming. Finally, I address the limitations associated with my research and discuss implications for future research.

### **Gender Matters**

First and foremost, for correctional programming, gender matters. Gender was significant for many programming options, both for availability and participation. For available prison programming, gender was significant for at least one type of program within each programming domain. Moreover, when the gender housed by the facility was significant, more female facilities reported offering the program and were more likely to have it available. In the chi-square analysis, ten of the programs examined were significantly different by gender-housed. Female facilities reported offering more HIV/AIDS counseling, mental health assistance to community care, drug treatments,

prison industry assignments, work-release assignments, vocational education, college courses, employment programs, life-skills programs, and parenting programs. In the binary logistic regression analysis, the gender housed by the facility significantly affected the likelihood of the facility having the program, with female facilities having increased odds of offering the program compared to males. Significant findings were found within each of the program domains: medical care (i.e., Tuberculosis screening and HIV/AIDS counseling), mental health care (i.e., psychological evaluations, 24-hour mental health care, therapy/counseling, psychotropic medications, and assistance to community care), substance abuse treatment (i.e., drug and alcohol treatments), work assignments (i.e., prison industries and work release), educational courses (i.e., adult basic education, GED preparation, vocational education, and college courses), and life-skills programs (i.e., employment programs, life-skills, and parenting). Finally, in the ordered logistic regression and GOLM analysis, female facilities compared to male facilities reported offering higher levels of programming versus lower levels. Therefore, for many program options, female facilities were more likely to have these programs available than male facilities.

The findings for program participation were very similar to those of program availability regarding gender. Oftentimes, when gender was significant, females reported more participation or were more likely to participate in programming than males which was often consistent with previous literature that suggests women are more likely to take advantages of programming than men (Ditton, 1999; Glaze & Maruschak, 2010; Jiang & Winfree, 2006; Morash et al., 1994). This was true for all programming domains except the recreational programming area, where men reported more participation than women

in several of the options. Regarding the relationship between gender and programming participation, at least one program option within each of the programming domains was significantly influenced by gender, and more often than not women were participating at higher levels than men.

For medical programming, most inmates reported some medical treatment while incarcerated. Still, women were more likely to report receiving medical exams, which is consistent with Morash and associates' original study (1994). Women were also more likely to report receiving mental health psychotropic medications, counseling, and other treatments than men. Almost one-third of women reported using psychotropic medication (33%) and receiving counseling (27%) while incarcerated. In the multivariate analysis, these findings showed that women were more likely to receive mental health treatments than men. This was especially true for psychotropic medication where the odds increased by 59% for women compared to men. Women were also more likely to receive mental health counseling and any mental health treatment than men, which was consistent with Morash and colleagues' (1994) findings. On the other hand, men were more likely than women to report hospitalization to treat their mental health disorders.

The availability of and participation in mental health treatments for women could be considered both stereotypical and gender-responsive, because for many of these programs gender was significant and women were either more likely to participate or have the service available even after controlling for facility- and/or individual- level characteristics. In their study Morash and colleagues (1994) stipulated that the higher likelihood of mental health care being available for, or being used by, women might be indicative of stereotypical treatment, because these options might be used to control



rather than treat women. This is especially true for psychotropic medication, and more current research has noted it is continually used as a common response for dealing with women's mental health issues (James & Glaze, 2006), which is supported by the findings of this study. Not only were female facilities significantly more likely to have psychotropic medications available for use, women reported using these medications at significantly higher rates than men.

The use of medication for women has also been a trend noted in general society – we are more apt to treat “aggressive” women through medication in an effort to control their aggression (Baskin et al., 1989). When women are mentally ill or aggressive, we control these inappropriate actions through medication. Additionally, we know from research that incarcerated men have higher rates of mental health disorders than the general public, too (James & Glaze, 2006; Lord, 2008). However, it seems that many of these treatments are situated in female prisons and being used by females. Perhaps these treatments are heavily situated in female prisons simply because there are more male prisons than female prisons, and not all of these facilities have the resources to specialize or treat inmates with mental health disorders, or there may be designated male facilities within each system to deal with these specialized issues. The fact that mental health treatments are much more likely in female facilities may be because there are significantly fewer prisons for women, so all (or most) of these institutions must offer these treatments because there is no specific facility designed to treat all mentally ill women. Additionally, the higher rates of usage by female inmates indicate that not only are female facilities more apt to have mental health care programs, they are likely to treat women with these programs.

It is also noteworthy that men were significantly more likely to be hospitalized for mental health issues than women. While all other mental health treatments were more likely to be used by women, men were more likely to report hospitalization. There might be several explanations for the hospitalization of men. One explanation might be that mentally ill men are seen as more aggressive or more of a risk to the general prison population than women. Another explanation might be that prison officials primarily focus on men with extreme mental illnesses or that by the time men seek and/or are diagnosed they are much more severely mentally ill. So, therefore, only men with severe mental illness are truly being treated, and they are more apt to need hospitalization. Additional research should try to better understand why male prisoners are being hospitalized for mental illness at a higher rate than women, especially considering women offenders are much more likely to have mental disorders than their male counterparts (Lord, 2008).

For substance abuse, more women than men reported participating in detoxification, inpatient, outpatient, self-help or peer counseling, and maintenance programs. However, the participation rates for these treatments were very low for both men and women. The highest percentage of inmates reported participating in a self-help or peer-counseling group, however this was only 28% of women and 25% of men. Considering the high rates of addiction shown in previous studies (Greenfeld & Snell, 1999), the lack of participation for both men and women is notable. However, participation in these programs is up from when Morash and her colleagues (1994) examined it. Their study found that only about 15% of men and women were participating in drug treatments. They also found that women were slightly less likely

than men to participate in these treatments. The current study found that gender differences were not significant for any of the substance abuse programs analyzed through logistic regression, which might indicate that men and women are receiving services at a comparable level. However, upon further investigation of the Survey data, I found that while men and women were not significantly different in regards to their alcohol dependency, women had significantly higher levels of drug dependency than men. Considering these additional results, it might be that while women addicted to alcohol are treated similarly to men, drug addicted women are still not receiving as many services as they need.

As noted, recreational programming was the only programming domain examined where more men reported participating than women. Men reported exercising, watching television, and participating in other recreation more than women with 61% of men reporting exercising and 69% watching television compared to just 38% and 52% of women, respectively. Additionally, both men and women reported high rates of reading and making phone calls, therefore these programming options did not vary by gender. In regards to religious acts, a majority of both men and women reported participating in religious acts, but women reported significantly higher participation (70% of women vs. 54% of men).

Men being more likely to participate in physical exercise than women was notable (61% vs. 38%, respectively), because this seems to fall in line with stereotypical expectations. Both men and women in prison, and general society, need to exercise for better health outcomes. However, it does not seem that many women are exercising in prison. Considering that men in our society are viewed as being physical and tending to

enjoy the outdoors and outdoor activities (Goffman, 1977; Miller et al., 2009), women selecting not to exercise and men selecting to exercise might be indicative of stereotypical gendered expectations. While it might be that women are purposefully selecting not to engage in physical activities, more should be done by correctional staff to encourage women to exercise as their lack of exercising might lead to negative health outcomes in the future.

Women also reported significantly higher levels of participation in several different work assignments than men. More women had on-grounds assignments than men, yet participation rates for off-grounds assignments were similar. More women also reported participating in food preparation, laundry, other services and other work assignments. In fact, 15% of women participated in food preparation and 5% of women worked in laundry services. When I used logistical regression analysis to examine stereotypically feminine work assignments (i.e., janitorial services, food preparation, laundry, and medical assignments), participation in these assignments was not significantly affected by gender. Additionally, more men reported participating in maintenance repair and construction assignments than women. When masculine stereotypical assignments (i.e., ground/road maintenance, farming/forestry/ranching, and maintenance repair/construction) were considered as a group, men were significantly more likely to participate in these assignments than women.

Work assignment participation also emerged as a possible stereotypical trend in prisons, especially because women reported higher levels of participating or being assigned to food preparation and laundry services than men. Additionally, while feminine stereotypical work assignments did not vary by gender, masculine stereotypical

work assignments did, with men being more likely to be assigned to jobs such as maintenance, construction, or farming, forestry, or ranching. The higher levels of women working in laundry (5% vs. 3% of men) and food preparation (15% vs. 12% of men) are notable, because these tasks are more closely related to “domesticity” than other work assignments examined. This finding may lend support to previous research that has noted that women’s prison continue to use and/or emphasize programming that focuses on domestic and childrearing abilities (Bosworth, 2003; Franklin, 2008; Lee, 2000; Morash & Robinson, 2002). If women are more likely to participate in work assignments consisting of laundry and food preparation, this is because prison officials are assigning them to such duties. One would assume that laundry services and food preparation are needed in both male and female facilities, so the higher percentage of women completing these tasks may be because prison officials deem women more suitable to these tasks than men. Moreover, the completion of these assignments does not add to the repertoire of usable skills that women need in order to find sustainable employment once released. Therefore, not only does participation in these assignments tend to follow the guidelines of traditional gender roles, it also is not practical for women once they are released.

Additionally, the findings that men were more likely to be assigned work that was deemed “masculine” may also be stereotypical. The work assignments examined consisted of mainly outdoor activities and assignments requiring some skill. The finding that men were more likely to be assigned to these jobs is notable because we often view men in our society as being tough, physical, tending to enjoy the outdoors, and having usable skills (Goffman, 1977; Miller et al., 2009), at least more so than women. Therefore, the higher likelihood of men being assigned to these jobs possibly indicates

stereotypical gender expectations on the part of prison officials who are assigning these tasks. It might also be the case that the stereotypically feminine assignments examined were not significant by gender because these service-oriented roles may help the institution run more smoothly, so all inmates are needed to perform these tasks.

However, regarding the masculine work, these assignments are not absolutely necessary for the prison to function, and since we do not need women to fulfill these roles in female facilities, we do not let them perform these duties.

Whether inmates were paid for the work they completed did not significantly vary by gender, and just over one-third of men and women (38% and 39%, respectively) reported being paid. Thus, it seems that while some work assignments may be divided along gender lines, whether or not an inmate is paid for their work does not. The findings for work assignments are both in line with and depart from the 1994 Morash study. For one, they found that work assignments were divided along stereotypical gender lines, and the current study found evidence that this trend is continuing in prisons. They also found that women were significantly less likely to be paid for their work than men, and the current findings revealed that the likelihood of being paid is now similar for men and women.

Regarding education, neither men nor women participated in these programming options at high rates. Moreover, the only program that significantly varied by gender in the bivariate analysis was adult basic education where women reported significantly higher rates of participation than men. Still, only 3% of women and 2% of men reported participating in adult basic education. When using multivariate analyses, the findings suggest that women were significantly more likely to take an adult basic education

course, a college course, or “any” educational course compared to men. Additionally more men reported participating in vocational education or job training than women (28% vs. 26%, respectively), but women were more likely than men to participate in these programs according to the logistic regression analysis. Overall, it seems that women are slightly more likely than men to take advantage of educational and vocational programming. This seems to correspond with the availability of programming, as well, because female facilities were more likely to have these programs than male facilities.

Finally, each of the life-skills programs examined varied by gender, with women reporting higher levels of participation and being more likely to participate in the program. Interestingly, the overall levels of participation for these programming options were not very high. The highest level of participation was found in life-skills and community adjustment programs with 30% of women and 23% of men participating in these programs. The largest difference found between participation and gender in the life-skills programming domain was found in parenting programs with 20% of women and only 8% of men participating. In fact, for the multivariate analysis, the odds of participating in parenting programs increased by 233% for women compared to men. The lack of participation by males is particularly surprising considering a vast majority of men are fathers (Glaze & Maruschak, 2010). Mothers are also underrepresented in these programming offerings as well, considering only 20% of women participate in parenting class while a clear majority of them are mothers too (Glaze & Maruschak, 2010).

Despite the fact that women are more likely to participate in these programs, not all mothers are getting this valuable training. My findings are consistent with those of Morash and colleagues (1994) who also noted low participation by both men and women

in regards to parenting programs, even though women were more likely to participate than men. Women were also more likely to participate in employment programs, and were overall more likely to participate in any type of life-skills program than were men. Again, these findings seem to corroborate my findings for program availability. Women are more likely to have life-skills programs available to them, and they are more likely to participate in these programs as well.

The overall findings for life-skills programs might be deemed both stereotypical and gender-responsive. For example, parenting programs were found to be heavily situated in female facilities. The findings showed that the odds of availability for parenting programs increased by 669% when the facility housed women, and women had 233% increased odds of participating in these programs compared to men. This concentration of parenting programs in women's prisons could be based on traditional gender roles and expectations. However, parenting programs can also be seen as gender-responsive because women are highly likely to be parents and the primary caregiver (Belknap, 2007; Bloom et al., 2005; Glaze & Maruschak, 2010; Koons-Witt, 2002). These findings highlight the significance of Morash's (2010) warning that gender-responsive programs might work to reinforce stereotypical gender roles and expectations, especially if parenting programs are being offered at the expense of other program options. Additionally, men too are highly likely to be parents (Glaze & Maruschak, 2010). Yet, only 40% of male facilities (versus 79% of female facilities) offered some type of parenting programs. Therefore, it should be noted that this service is lacking for many men who could benefit from these parenting programs.



Again, as noted, women were more likely than men to participate in parenting programs, even though, as repeatedly noted, both men *and* women are highly likely to be parents. Therefore, the significant difference in participation for men and women may be due to stereotypical or traditional expectations of gender. Again, the findings show that female prisons are more likely to have parenting programs available, and women are more likely to participate in them. One reason for this might be because prison administrators and program providers focus on women as mothers more than they focus on men as fathers. Previous research has noted that in some cases where prison administrators acknowledge differences between men and women, they focus on women in their roles as mothers and other relational roles over all other needs women might have (Morash & Robinson, 2002). This abundance of parenting programs in female facilities might then be an expression of this concern and focus for women. Moreover, women may feel more pressure to participate in these programs for several reasons. Womanhood is often associated with motherhood, especially for White women or the “ideal” woman, hence women may feel stigmatized as bad women or bad mothers by society because they are incarcerated, and may participate in parenting classes as an effort to make themselves better women. On the other hand, women may recognize their own needs and volunteer to be in a class because they are in fact mothers. Therefore, the higher likelihood of availability and participation might be either stereotypical or gender-responsive, or it could be both. More research is needed to see what types of issues are focused on in these programs, and possible reasons why men are not participating or being offered these programs at the rates of women.

Overall, women tended to participate in programming at higher levels than men, even though oftentimes participation was low for both men and women. This pattern is consistent with what Morash and colleagues (1994) found in their study. One example of low participation rates was for that of GED programs. While we know that many men and women in prison have low education levels (Belknap, 2010; Bloom et al., 2005; Brown & Bloom, 2009; Mumola, 2000; Schram, 2003), only about 20% of inmates reported participating in GED programs, and these programs had the highest levels of participation within the educational domain.

In sum, gender matters. For many program options examined, availability and participation were significant by gender. Furthermore, when gender was significant, more often than not women were receiving more programming or were participating at higher rates. Some of these findings could be seen as stereotypical (i.e., psychotropic medication, work assignments, parenting programs) while others might be viewed as gender-responsive (i.e., mental health treatment, educational programs, life-skills programs). Additionally, the findings from this study deviate from many previous findings, because historically women have received limited programming compared to men in both quality and quantity (Lee, 2000; Rafter, 1990). There could be several possible explanations for what appears to be a new direction in prison programming. The first and most optimistic explanation would be recognition on the part of states and prison administrators for the programming needs of women.

Another explanation might concern the very nature of women's prisons themselves. Facilities for women are fewer in number, and male facilities greatly outnumber those for women because men greatly outnumber women as prisoners.

Therefore, within state systems, there might be certain male prisons that are designated for certain risks or needs (i.e., substance abuse, mental illness, high-risk inmates). Given the limited number of female facilities around the country, it is less likely that this specialization occurs in women's prisons. Therefore, the prisons that are available for women may offer a variety of programs because there is a limited number of facilities in many states that can house women, so these facilities are more "generalized" and try to service multiple needs and programming areas. Additionally, prisons or entire prison systems might be under court order to provide certain programming for women. Recall that litigation has been a major factor for increasing women's programming (Kruttschnitt & Gartner, 2003). Therefore, this litigation might have resulted in court orders that require women's prisons to offer certain levels of programs. Whatever the case may be, the current findings show that women's facilities are offering more programs. Additionally, women's higher levels of participation are consistent with the findings of the Morash study (1994), and may indicate that these higher levels of availability in women's prisons are justified, because women seem to be making greater use of these programs than men.

### **Gender and Race Interact to Influence Program Participation**

In addition to examining the effects of race and gender separately on programming participation, this study also examined the simultaneous effects of gender and race on participation in various programming options. The interaction effects of gender and race were mixed with regards to program participation. Inmate involvement in some programs and treatments were significantly influenced by the interaction but for others were not. Additionally, for some programs effects were significant for male

inmates but not female inmates or for Black men and women but not ‘other’ race men and women, or vice versa. For example, regarding masculine stereotypical work assignments, (i.e., ground/road maintenance, farming/forestry/ranching, and maintenance repair/construction), effects were significant for Black men and women compared to White men and women, but not for ‘other’ race men and women. In other words, Black women, compared to White women and Black men compared to White men were significantly less likely to perform a masculine work assignment. However, ‘other’ race men and women participate in masculine work assignments at similar rates of White men and women, respectively. Notably, the assignment of feminine stereotypical work assignments was not affected by the interaction of race and gender. Therefore, all men and women tend to be assigned feminine stereotypical work assignments at similar rates.

Interaction effects continued to be significant for many of the programming types examined. For mental health care, two interaction effects were found to be significant. Black men, compared to White men, had significantly decreased odds of taking psychotropic medication or participating in ‘any’ mental health option in the mental health care domain, while ‘other’ race men had lower odds of receiving psychotropic medication compared to White men. Considering that mental health care disorders are a major problem in all prisons and for many inmates (Lord, 2008), this finding is problematic because it may indicate that Black and ‘other’ men are not receiving proper services, especially in regards to mental health problems.

Inpatient treatment was the only program within the substance abuse programming domain where the interaction of gender and race were significant. The results showed that ‘other’ race women were less likely than White women to participate

in inpatient drug treatments. This finding is interesting because we know that the War on Drugs has been referred to by some researchers as a war on women of color (Bush-Baskette, 2004). The lower likelihood of ‘other’ women to receive inpatient drug treatment may be problematic, because while it seems that Black women and White women are participating in these programs at similar rates, ‘other’ race women are not. It may be that correctional administrators have recognized the treatment needs of Black women and White women, but do not see these needs for other women. It would be important to understand whether this difference is due to differences in actual drug use and addiction, or if it is simply due to certain inmates not being recognized as having a need for these types of programs. Still, on the whole for mental health and substance abuse treatments, men and women of different races tended to participate in these programs at similar rates (except Black men for mental health).

The interaction effects of race and gender were also examined for participation in life-skills programming. I found no significant race effects for men in regards to life-skills programming, suggesting that Black, White, and ‘other’ race men participated in life-skills programming at similar rates. Additionally, it seems that women of ‘other’ races and White women were participating in life-skills programs at similar rates. Black women also participated in life-skills programs at similar rates to White women, with one exception: pre-release programs. Black women were less likely to participate in pre-release programs than White women. One reason for this difference may be due to the way Black women are often seen by the criminal justice system. Previous literature has noted that Black women are seen differently than White women and are treated similar to men due to the fact that they are thought to be more dangerous or prone to violence

(Young, 1986). Considering pre-release programs may most likely involve inmates leaving the facility, admittance to this program may be based on risk-levels as determined by correctional administrators or by perceptions of dangerousness. Therefore, if Black women are not being admitted to this type of programming at the same rate as White women, it may be an indication that prison officials deem these women to be more dangerous. Still, it is important to note that for most life-skills programs, men and women of all races were participating at similar rates, which is promising.

For educational programming, the effect of race was not significant for male inmates. It seems that all men regardless of their race are participating in educational programming in similar ways. Additionally, for most of the educational programs examined, women of all races seemed to be participating at similar levels. The one exception to this pattern was for Black women who were less likely than White women to participate in college courses. Considering, we know that many women come into the system with low levels of achievement for both education and employment (Bloom et al., 2005; Chesney-Lind, 2004; Owen, 1997; Simon & Ahn-Redding, 2005), all women may be in need of this type of programming. However, it seems that Black women, while receiving the same levels of basic education as White women, are not receiving similar amounts of higher education.

Finally, for vocational education and job training courses the interaction effects of race and gender were not significant for men or women. Thus, Black and 'other' race men participated in vocational education and job training courses at similar rates to White men. Additionally, all women seemed to participate in these programs at similar rates as well.

Overall, there were several programs significantly affected by the simultaneous effects of race and gender. Often, when the interaction effects were influential, Black men and Black women were receiving fewer services/programming than their White counterparts. Black men were less likely than White men to receive psychotropic medication, participate in any program measured in the mental health program domain, and perform a masculine stereotypical work assignment. Black women were less likely than White women to perform a masculine stereotypical work assignment, participate in a pre-release program, or take a college course. Still, for a vast amount of programming, men and women of different races seem to be participating at similar rates. It is also worth noting that considering women of all races are participating in many programs at the same rates, both stereotypical and gender-responsive, it might indicate that gender stereotypes are influencing participation for all women regardless of race, or that correctional and program officials view all women in a similar way.

### **The Influence of Recognized Needs**

Participation within five programming domains was examined for the possible influence of self-reported needs associated with those programs, and in all five domains the recognized needs were generally significant. The programming domains I examined included mental health, substance abuse, life-skills, education, and vocational education/job training programs. For each of these domains, I considered specific background characteristics or needs that would be relevant to the particular programming area. As you may recall, the *Survey* asked prisoners about their background including information about their use of drugs, mental illnesses, prior abuse, education level, and employment experiences among other things. Therefore, I identified having prior mental

health diagnosis, a history of physical or a history of sexual abuse as recognized needs for mental health programming. My belief was that having these background characteristics or experiences should directly influence an inmate's participation in mental health programming. My findings, in fact, showed that all three of these needs significantly affected participation in each of the mental health programs. For instance, if an inmate had a previous mental health diagnosis, the odds of the inmate receiving psychotropic medication were 35 times that of a person without a previous disorder. Previous mental health diagnoses also significantly increased the likelihood of them using any of the other mental health programs examined. Previous histories of physical and sexual abuse, which are often related to mental disorders for women (Flower, 2010; Morash & Schram, 2002), also increased the likelihood of an inmate participating in any mental health program. These findings are promising, in that it seems that prison employees and/or program staff are identifying mental health needs and treating prisoners accordingly.

For substance abuse, I examined three separate factors that might influence the need of participation: mandatory drug treatment, drug dependency, and alcohol dependency. As expected, all three of these recognized needs significantly increased the likelihood of a person participating in all five substance abuse programming options. My findings here coincide with Morash and colleagues' (1994) findings that drug dependency influences participation and, like those of mental health treatments, are promising with inmates with higher needs being more likely to receive treatment or help.

The current study also examined the effects of inmates' employment history and having minor children on participation in life-skills programming. The first recognized need, employment history was significant for three of the five life-skills programs: life-



skills and community adjustment, pre-release programs, and “any” life-skills programming, although in an unexpected direction. It seemed plausible that if an inmate did not have a job prior to incarceration they would be more likely to “need” life-skills programming. Yet, the results revealed that inmates who had a job six months prior to incarceration were more likely to participate in life-skills and community adjustment, pre-release programs, and “any” life-skills programming. One reason that inmates with an employment history might have been more likely to participate in these programs is that these programs might have been seen as more beneficial to them by programming staff, prison administrators, or the prisoners themselves. These prisoners may have been more apt to participate in these programs in an effort to develop needed skills to be employable upon release. The other stipulated need, having minor children, also significantly affected participation in life-skills programming. In fact, if inmates had a minor child, they were more likely to participate in all five of the programming options examined. Importantly, the skills developed in these programs would be necessary for parents returning to their children, because they will have to provide for their children as well as themselves when they return to general society.

The recognized needs explored in accordance with education also showed promising results. The current study stipulated that having a limited employment history and educational background might represent a need for educational programming for an inmate. The results indicated that employment history was significant for two of the four educational programs: GED programs and college courses. Interestingly, if a person had a job in the six months before they were incarcerated they were less likely to take a GED course, but more likely to take a college course. These findings are somewhat at odds

with the findings of Morash and associates (1994) who noted that individuals with no job just prior to incarceration were more likely to participate in educational programs than their counterparts. The current findings may indicate that those who had been employed prior to incarceration already had a high school diploma or GED, and therefore did not need this GED classes or preparation, while those without a job did need this program. It may also indicate that even though individuals were employed prior to incarceration, they may not have been employed in a high-earning wage position. Therefore, those who had a history of employment may have been more focused on college courses in an effort to better their employability upon release.

The educational background of inmates was also stipulated to be a likely factor for participation in educational programming. It was thought that inmates with low educational levels would be more in need of educational programming than those with higher levels of education, particularly for adult basic education and GED preparation courses. The findings revealed that educational backgrounds did influence all four programming options. Individuals with a high school education or better had decreased odds of taking adult basic education, GED, and “any” educational courses than those with less than a high school education. Thus, these findings are quite similar to those found by Morash (1994) who found that lower education levels were correlated with more educational program participation. Individuals with the lowest levels of education seem to be participating in more basic or general education programs at the highest rates. Additionally, inmates who had backgrounds of some college or more were more likely than those with less than a high school education to take college courses. Again, this may

indicate that those with low education levels are trying to obtain basic educational levels while those who already a basic education participate in higher levels of education.

Regarding vocational education or job training, the current study proposed that an inmate's employment history, educational background, and whether or not the inmate had minor children might influence their need to participate in this type of program. It was thought that inmates with no employment history and low levels of education would be in more need of vocational education or job training programs than those with employment histories and higher levels of educational attainment. Additionally, it was believed that if an inmate had minor children they might be more likely to participate in such programming in order to provide for their children upon release. The findings showed that employment, education, and having children all significantly affected the odds of participating in these programs. However, inmates with employment histories were significantly more likely to participate in vocational education than those who had not been employed prior to incarceration. Moreover, those with higher levels of education were more likely to participate in these programs rather than those with lower education. Hence, these "needs" did not affect vocational training the way it was thought they would. Like educational programming, it seems that those with jobs prior to incarceration may be actively working to increase their employability or marketable job skills. Additionally, those with higher levels of education may be doing the same thing – working to make themselves more employable upon release. As for minor children, inmates who had kids were more likely than those without kids to participate in vocational training. Therefore, children too, may be another reason why inmates are

working to have more job-skills upon release, because inmates will have to provide not only for themselves, but also for their children.

Overall, the recognized needs explored in the current study were significant for many programming options. These results are very promising. They indicate that prison officials are doing a good job recognizing the potential needs of inmates and addressing them. These results imply that inmates are being funneled into appropriate programming options to address their risk factors, which may in turn result in positive outcomes for the prison (i.e., lower misconduct, lower violent acts) and the inmate. Nevertheless, participation for many of these options is still relatively low among inmates, as it was when examined by Morash, Rucker, and Haarr (1994), and not all inmates are getting the services they need. Gender is still significant for many of these program models even after controlling for risk factors and recognized needs. This is disconcerting in certain instances, especially with programs such as psychotropic medication, where prisons may be medicating women to control rather than treat them. Additionally, the significance of gender despite accounting for other factors is also important because men are less likely to participate in many services compared to women that they also need. More research is needed to explore whether this is problematic for the male inmate population since they seem to be participating in programming in lower numbers than expected. The corrections system should be concerned with providing appropriate programming to both male and female inmates and also should focus on preparing both inmate populations for returning home to their communities.

## **The Importance of Facility-Level Factors**

In addition to focusing on my central measures of interest, I also felt it was important to consider the relationship between program availability, program participation and facility-level measures. The limited existing research suggested that it was necessary to consider these factors as control variables in the current study (Morash et al., 1994; Steiner & Wooldredge, 2008a). Consequently, I included three specific facility-level measures, security level, size, and location in my analyses.

### *Security Level*

Consistent with the 1994 Morash study, the security level of the facility was significantly related to many programming options, and more often than not, higher level security facilities offered more programs than lower level security facilities. For medical and mental health programming the amount of treatments offered usually increased as the level of the security of the facility increased. However, HIV/AIDS counseling was a notable exception, with minimum security facilities being more likely to offer this service. Additionally, inmates in medium and maximum security facilities generally reported the highest level of medical and mental health programming usage. Overall, programming availability and participation for medical and mental health programming seemed to coincide with higher security levels having and using more medical and mental health services.

While the findings of substance abuse programming were somewhat different than the findings for medical and mental health programming, the level of security still significantly affected programming availability and participation. For alcohol and drug treatments, medium level facilities offered the highest percentages of availability. Still,

higher levels of security were more likely to offer substance abuse programs than minimum security facilities. Even though higher levels of security were more likely to offer substance abuse programs, inmates in minimum security facilities were more likely to take advantage of these programs. Although, the findings for program availability are consistent with the earlier study by Morash and her colleagues (1994), the findings for program participation were not. They noted that inmates in maximum security facilities were more likely to receive treatment. Therefore, more research is needed to explore and better understand the inconsistency between availability and participation in regards to substance abuse treatments in prisons, especially since this seems to be a newer trend in correctional programming.

Work assignments were also significantly affected by the security level of the facility. However, the effects were mixed. For example, maximum security facilities were more likely to offer assignments in prison industries and farming/agriculture while medium security facilities were more likely to offer assignments such as facility support and minimum security facilities were more likely to offer public works and work release assignments. Minimum security facilities might be more likely to offer these work assignments because they manage lower-risk inmates, and they can allow their inmates to work outside the institution without much worry of escape or violence. Additionally, inmates in maximum security facilities were more likely to report working in goods production while those in minimum security facilities were more likely to be assigned to assignments off facility grounds. Therefore, even though the effects of security level were mixed on work assignments, the findings from study 1 and 2 were generally consistent with one another.

Similarly to the other programming options already discussed, educational programs varied by security level. Generally, medium or maximum security prisons were more likely to offer educational programs, however, there was one exception: work release programs. Minimum security facilities were more likely to offer these programs, which might be because they house inmates who pose less of a risk for escape and violence than higher security levels. The results for educational programming participation indicate that even though higher security level facilities are offering more programs, inmates in minimum level facilities tend to take advantage of these programs with these inmates being significantly more likely to participate in GED courses and any course within the educational domain.

Finally, in regards to life-skills programming, the security level of facility was again significant for both program availability and participation. For these programs, lower level security facilities were more likely to offer these programs than maximum or supermax facilities. Inmates in minimum level facilities were also more likely to participate in life-skills programs compared to those housed in maximum security facilities. The findings here are somewhat different from the other program domains. It might be that lower level security facilities are focusing more on life-skills programming because inmates housed in facilities are more likely to be released and be released sooner than those in maximum security facilities. Moreover, it seems the higher levels of availability are justified because it appears that inmates in minimum security facilities are taking advantage of these programs.

*Size*

The size of the facility was highly likely to affect both programming availability and participation. In fact, for every program option examined, with the exception of ‘other’ mental health care, availability of the program significantly varied by size. Typically, larger facilities were more likely to offer programs than smaller facilities. This was especially true for medical, mental health, and substance abuse programming. Larger facilities may be more likely to offer these programs because they are more likely to house inmates with higher risks and needs, and therefore they have more resources and programs to address these needs. However, even though larger facilities were more likely to offer these programs, inmates in these facilities were not necessarily more likely to participate in these programs. For example, inmates in smaller prisons were more likely to receive or participate in inpatient, outpatient, self-help/peer counseling, and education/awareness programs, which was consistent with what was found in the earlier Morash study (1994). Inmates in larger prisons were less likely to receive drug treatments in their study. More research is needed to understand the discrepancies between program availability and participation, especially for substance abuse programming options.

For work assignments, the size of the facility was often significant, with larger facilities offering more work assignments than smaller facilities. One reason that larger facilities might be more likely to offer these assignments could be they have enough inmates for these assignments to properly function, because the more inmates you have, the larger your pool of eligible workers. However, like substance abuse programming, even though larger facilities were more likely to offer work assignments, inmates in smaller facilities were more likely to participate or be assigned to these duties. This was



particularly the case for inmates reporting being paid for their work assignments with 52% of inmates in small prisons getting paid compared to 41% and 35% of inmates in mid-sized and large facilities, respectively.

Most of the education and life-skills programs were also more likely to be available in larger prisons compared to smaller prisons. The only option where smaller facilities were more likely to offer the program than larger prisons was for study release programs. One might stipulate that smaller facilities, in general, are probably associated with lower levels of security. Therefore, their inmates might pose a lower risk to society and be more eligible for study release programs. Again, like substance abuse programs and work assignments, even though larger facilities were more likely to offer programs, inmates in smaller facilities were more likely to participate in the programs

### *Location*

The location of the facility was not as influential on program availability as security level or size. However, it did affect several different programming options. For instance, the availability of most medical programs varied by location with facilities in the Northeast often reporting the most availability followed by facilities in the South. Additionally, inmates located in the South and the Northeast often reported using more medical services than inmates in other locations. Facilities in the Northeast were also more likely to offer several mental health treatments as well, while the Midwest tended to offer the least amount of treatments. This was similar to Morash and her colleagues' (1994) previous findings. Inmates in the Northeast were also more likely to participate in mental health services. Notably, even though facilities in the South offered the most psychotropic medications, inmates in the South actually reported the lowest level of

usage. Still, all in all, facilities in the Northeast were more likely to offer many of the medical and mental health care services than facilities in other locations, and they were most likely to experience inmate participation in the programs as well.

Interestingly, the availability of substance abuse programming varied very little by facility location. Across the country, approximately 9 in 10 facilities in this study reported offering alcohol and/or drug treatments for inmates. Nevertheless, facilities in the Northeast were more likely to offer drug treatments (vs. West). Additionally, inmates in the Northeast consistently reported the highest levels of participation for all options examined even though the logistic regression analysis did not indicate that inmates in the Northeast were significantly more likely to participate in substance abuse programming. Overall, the findings for program availability and participation in substance abuse programming appear to be consistent with one another.

Work assignments were greatly affected by the facility location. However, the findings were mixed. For example, facilities in the West offered the most prison industry assignments while those in the South offered the most farming/agriculture assignments. Moreover, for many work assignments, facilities in the South were more likely to offer these programs than facilities in the West. Notably, inmates in the Northeast reported the highest levels of participation in work assignments (i.e., janitorial work, food preparation, goods productions, other services, maintenance/construction, other work assignments), and the Northeast also had the most inmates being paid for their work (63%). However, inmates housed in the South were more likely to be assigned to a stereotypical work assignment (vs. West). Still, overall, when you compare the results from study 1 to those of study 2 for work assignments, they seem to correspond.

Similar to substance abuse treatments, the availability of education programs was not really affected by the location of facilities because most facilities offered basic education and GED preparation courses. However, facilities in the Midwest were significantly less likely to offer vocational education programs but more likely to offer college courses (vs. West). For participation in educational and vocational training, for many programs inmates in the Midwest or the Northeast reported the highest levels of participation. Additionally, inmates in the South did not participate in education programs as much as other regions of the country, even though it seems that such programming is available to them.

Finally, the availability of and participation in life-skills programming varied by location. Facilities in the Northeast consistently offered higher levels of programming than other regions of the country and inmates in the Northeast reported the highest levels of participation. However, facilities in the South were less likely to offer most of the life-skills programs examined (vs. West), and inmates in the South tended to report less participation compared to inmates in other areas of the country. Considering the facilities in the South were highly likely to offer many of the other types of programs, this is quite interesting. It might be that facilities in the South are committed to other goals such as providing medical, mental health, and substance abuse treatment over the goals of building life-skills and social capital, or it might be that facilities in the South do not have the resources to provide these programs. Since the South had the most prisons located within it compared to all other regions of the country, we should question why the South is not offering life-skills programs at the same level as other regions of the country.

Overall, I found that facility-level factors do matter. The security level, size, and location of the facility greatly affected both availability and participation in programs. Additionally, many of these findings were consistent with the original findings of the Morash study. Therefore, one might speculate that, overall, the influences of facility-level factors on programming have remained consistent over the last few decades. There were some notable exceptions, though. For instance, both availability and participation in programs in the South has seemingly increased, especially in regards to substance abuse and mental health, but it still remains lower than other regions of the country in regards to availability of and participation in life-skills programs. Also, for several program options (i.e., education), while maximum level facilities were more likely to offer the programming, inmates in minimum level facilities were more likely to participate in it. This issue should be further examined, and may indicate that more resources should be allocated to programs within minimum security facilities, considering they are more likely to use them. A similar issue was also true in regards to facility size, where larger facilities were more likely to have programs available, but inmates in smaller facilities were more likely to participate. These characteristics are likely related, with smaller prisons being more likely to also be a lower security level. Again, this issue should be further examined.

### **Limitations**

The current study was a national-level examination of programming in prisons across the U.S. More specifically, it examined factors that might produce variations in programming, such as gender, the interaction effects of gender and race, recognized needs, and facility-level characteristics. This is the first time since Morash, Rucker, and

Haarr's (1994) study that a national-level examination of programming availability and participation has been conducted focusing primarily on gender and other related factors. Like the original study, the current study has limitations that must be addressed.

First and foremost, the current study was conducted using secondary data. While both the *Census* and the *Survey* are comprehensive and excellent sources of data, they were not collected necessarily with my own research questions in mind. Therefore, like any researcher who uses secondary data sources, I must rely on the definition and measurement of data that has been collected by others and for possibly other purposes than my own. Some information that would have provided more insight for my research topic is limited. For instance, for substance abuse programming availability, I do not know exactly what type of drug or alcohol treatment was available within facilities (i.e., detox, inpatient, outpatient, self-help, education/awareness), prison officials only reported if any type of drug or alcohol treatment was available. Furthermore, in regards to information gathered from the *Survey*, this data was based on self-reports of inmates. Inmates may have either over- or under-reported participation or recognized needs, which could impact the results of the study. Also, we only know if the inmate participated in specific programming, we do not know if they successfully completed the program. Additionally, only knowing if the program was available or if the inmate participated in it means that whether or not programs are stereotypical or gender-responsive cannot be fully determined due to the way in which programs were measured, rather the findings only indicate that programming might be stereotypical or gender-responsive.

Another limitation that should be noted is the age of the data that was used. The current study utilized the 2000 enumeration of the *Census* rather than the most current

one because it had more information on programming, particularly programming that might be deemed gender-responsive or stereotypical, and it served as the sampling frame for the 2004 *Survey*. Even though this provided richer information for study, the data is over 12 years old. The information derived from the *Survey* was collected in 2004, and even though it is the most current enumeration of this data, it is still over 8 years old. Considering the changes found from Morash and colleagues' (1994) study to this one, there may have been more changes that have occurred over the past few years that are not accounted for in this study.

Finally, while the regression models used to analyze program participation accounted for possible correlated errors due to inmates being nested within facilities, it could not control for nesting issues of state systems. Each state department of corrections determines policies for the prisons within their system, including programming decisions. Therefore, the results cannot account for likely state-level influences on prisons and prison programming. It might be the case that some prisons or state systems are under a court order to provide specific programming, which would influence the results of the study. Also, state corrections systems differ in size and number of inmates under their supervision, therefore in larger state corrections systems they may have certain facilities that handle specific issues, such as mental health or substance abuse issues. This may not be possible for smaller state corrections systems. This logic could also be applied to differences in men's and women's prisons. There are often many more male facilities compared to female facilities in every state, so men may have more specialized housing assignments to treat specific offenders – much like larger state corrections systems compared to their smaller counterparts. Additionally, different states are likely to have

different philosophies and approaches to corrections and programming for prisoners, which could have an effect on the results of a study such as this one. Still, despite the limitations, the findings from the current study have important implications for the field of corrections and correctional programming. Again, this research provides us with an indication of what is occurring nationally with programming for state inmates. It is the first national-level study to examine gender and other related factors for their effects on programming in prison since the early 1990s.

### **Conclusions**

Several notable and interesting findings emerged from this research. First and foremost, the findings indicate that gender is still important when it comes to correctional programming. Not only is gender important, but also the interactions of race and gender and recognized needs which significantly affect programming in prisons. Moreover, while it seems that on the whole all men women, regardless of race, are participating in programs at similar rates, there were a few programming options where Black men and women were participating at lower levels than White men and women, respectively. Considering these findings, more in-depth research is needed to better understand why Black men are receiving less mental health programming than White men and Black women are less likely to be in college courses and pre-release programs. Additionally, it seems that both stereotypical and gender-responsive programs are utilized in male and female prisons. This is a slight departure from Morash and colleagues' (1994) study where they noted only stereotypical programming within prisons. Therefore, even though stereotypical programming remains it appears that the correctional system,

prisons in particular, maybe advancing in regards to their treatment of inmates. The findings in regards to recognized needs may further evidence this stipulation.

While the findings of this research are promising, more research is needed. For example, while this research was able to note how many programs are available within prisons, there was no indication of the quality of these programs. Thus, future research should focus on the quality of the current prison programming. Moreover, even though prisons might have programming available or “on the books,” that does not necessarily mean that all the programs available are being utilized. Indeed, it seems that there may be cases where programs are available but not used given the inconsistencies between availability and participation that were found in the current study. Therefore, future research should also examine how many, if any, programs are listed as available at prisons or correctional facilities but are not regularly utilized by correctional or programming staff. These issues might be of particular significance to researchers interested in gender-responsive programming, because the results indicate that some programs may be based upon gender-responsive principles. However, this research can only stipulate the possible motive, while future research should examine these possible gender-responsive programs more in-depth.

In total, the current study adds to correctional literature because it provides an examination of prison programming trends across the U.S. It seems the adage “the more things change, the more things stay the same” may hold some truth for prison programs. While the current study found many changes from the study conducted by Morash, Rucker, and Haarr in the early 1990s, many consistencies were also found. This study not only builds upon Morash and colleague’s (1994) study by providing a much needed



update, it also includes factors not previously examined such as the effects of gender and race interactions and self-identified needs which proved to significantly influence program participation. Future research should build upon this study by further exploring the programs in prisons, both their guiding principles and their quality.

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**APPENDIX A: CONTINGENCY TABLES FOR STUDY 1 CHI-SQUARE ANALYSIS**

***Medical Treatment by Gender-Housed***

**Hepatitis C Testing by Gender-Housed**

			<i>Hepatitis C Testing</i>		Total
			Yes	No	
Gender-Housed	Male	Count	845	80	925
		%	91.4%	8.6%	100.0%
	female	Count	86	8	94
		%	91.5%	8.5%	100.0%
Total		Count	931	88	1,019
		%	91.4%	8.6%	100.0%

$X^2 = 0.002$ ,  $V=0.001$ ; Notes: \*\*\* $p<.001$ ; \*\* $p<.01$ ; \* $p<.05$

**Hepatitis C Treatment by Gender-Housed**

			<i>Hepatitis C Treatment</i>		Total
			Yes	No	
Gender-Housed	male	Count	781	144	925
		%	84.4%	15.6%	100.0%
	female	Count	81	13	94
		%	86.2%	13.8%	100.0%
Total		Count	862	157	1,019
		%	84.6%	15.4%	100.0%

$X^2 = 0.198$ ;  $V= 0.014$ ; Notes: \*\*\* $p<.001$ ; \*\* $p<.01$ ; \* $p<.05$

**Hepatitis B Vaccine by Gender-Housed**

			<i>Hepatitis B Vaccine</i>		Total
			Yes	No	
Gender-Housed	male	Count	753	172	943
		%	81.4%	18.6%	100.0%
	female	Count	71	23	94
		%	75.5%	24.5%	100.0%
Total		Count	824	195	1,037
		%	80.9%	19.1%	100.0%

$X^2 = 1.902$ ;  $V = 0.043$ ; Notes: \*\*\* $p<.001$ ; \*\* $p<.01$ ; \* $p<.05$

### Tuberculosis Screening by Gender-Housed

			<i>Tuberculosis Screening</i>		Total
			Yes	No	
Gender-Housed	male	Count	765	178	943
		%	81.1%	18.9%	100.0%
	female	Count	82	12	94
		%	87.2%	12.8%	100.0%
Total		Count	847	190	1,037
		%	81.7%	18.3%	100.0%

$X^2 = 2.132$ ;  $V = 0.045$ ; Notes: \*\*\* $p < .001$ ; \*\* $p < .01$ ; \* $p < .05$

### HIV/AIDS Test by Gender-Housed

			<i>HIV/AIDS Test</i>		Total
			Yes	No	
Gender-Housed	male	Count	884	42	926
		%	95.5%	4/5%	100.0%
	female	Count	91	3	94
		%	96.8%	3.2%	100.0%
Total		Count	975	45	1,020
		%	95.6%	4.4%	100.0%

$X^2 = 0.366$ ;  $V = 0.019$ ; Notes: \*\*\* $p < .001$ ; \*\* $p < .01$ ; \* $p < .05$

### HIV/AIDS Counseling by Gender-Housed

			<i>HIV/AIDS Counseling</i>		Total
			Yes	No	
Gender-Housed	male	Count	538	405	943
		%	57.1%	42.9%	100.0%
	female	Count	71	23	94
		%	75.5%	24.5%	100.0%
Total		Count	609	428	1,037
		%	58.7%	41.3%	100.0%

$X^2 = 12.044$ \*\*;  $V = 0.108$ \*\*; Notes: \*\*\* $p < .001$ ; \*\* $p < .01$ ; \* $p < .05$

### Suicide Prevention by Gender-Housed

			<i>Suicide Prevention</i>		Total
			Yes	No	
Gender-Housed	male	Count	911	18	929
		%	98.1%	1.9%	100.0%
	female	Count	92	2	94
		%	97.9%	2.1%	100.0%
Total		Count	1003	20	1,023
		%	98.0%	2.0%	100.0%

$X^2 = 0.016$ \*\*;  $V = 0.004$ \*\*; Notes: \*\*\* $p < .001$ ; \*\* $p < .01$ ; \* $p < .05$

***Mental Health Care by Gender-Housed***

**Psychological Evaluations by Gender-Housed**

			<i>Psychological Evaluations</i>		Total
			Yes	No	
Gender-Housed	male	Count	725	218	943
		%	76.9%	23.1%	100.0%
	female	Count	78	16	94
		%	83.0%	17.0%	100.0%
Total		Count	803	234	1,037
		%	77.4%	22.6%	100.0%

$X^2 = 1.818$ ;  $V = 0.042$ ; Notes: \*\*\* $p < .001$ ; \*\* $p < .01$ ; \* $p < .05$

**24-Hour Mental Health Care by Gender-Housed**

			<i>24-Hour Mental Health Care</i>		Total
			Yes	No	
Gender-Housed	male	Count	587	356	943
		%	62.2%	37.8%	100.0%
	female	Count	63	31	94
		%	67.0%	33.0%	100.0%
Total		Count	650	387	1,037
		%	62.7%	37.3%	100.0%

$X^2 = 0.833$ ;  $V = 0.028$ ; Notes: \*\*\* $p < .001$ ; \*\* $p < .01$ ; \* $p < .05$

**Therapy/Counseling by Gender-Housed**

			<i>Therapy/Counseling</i>		Total
			Yes	No	
Gender-Housed	male	Count	779	164	943
		%	82.6%	17.4%	100.0%
	female	Count	84	10	94
		%	89.4%	10.6%	100.0%
Total		Count	863	174	1,037
		%	83.2%	16.8%	100.0%

$X^2 = 2.792$ ;  $V = 0.052$ ; Notes: \*\*\* $p < .001$ ; \*\* $p < .01$ ; \* $p < .05$

**Psychotropic Medication by Gender-Housed**

			<i>Psychotropic Medication</i>		Total
			Yes	No	
Gender-Housed	male	Count %	761 80.7%	182 19.3%	943 100.0%
	female	Count %	82 87.2%	12 12.8%	94 100.0%
Total		Count %	843 81.3%	194 18.7%	1,037 100.0%

$X^2 = 2.400$ ;  $V = 0.048$ ; Notes: \*\*\* $p < .001$ ; \*\* $p < .01$ ; \* $p < .05$

**Assist to Community Care by Gender-Housed**

			<i>Assist to Community Care</i>		Total
			Yes	No	
Gender-Housed	male	Count %	661 70.1%	282 29.9%	943 100.0%
	female	Count %	75 79.8%	19 20.2%	94 100.0%
Total		Count %	736 71.0%	301 29.0%	1,037 100.0%

$X^2 = 3.897^*$ ;  $V = 0.061^*$ ; Notes: \*\*\* $p < .001$ ; \*\* $p < .01$ ; \* $p < .05$

**Other Mental Health Care by Gender-Housed**

			<i>Other Mental Health Care</i>		Total
			Yes	No	
Gender-Housed	male	Count %	53 5.6%	890 94.4%	943 100.0%
	female	Count %	6 6.4%	88 93.6%	94 100.0%
Total		Count %	59 5.7%	978 94.3%	1,037 100.0%

$X^2 = 0.093$ ;  $V = 0.009$ ; Notes: \*\*\* $p < .001$ ; \*\* $p < .01$ ; \* $p < .05$

***Substance Abuse Programming by Gender-Housed***

**Drug Treatment by Gender-Housed**

			<i>Drug Treatment</i>		Total
			Yes	No	
Gender-Housed	male	Count %	848 89.9%	95 10.1%	943 100.0%
	female	Count %	93 98.9%	1 1.1%	90 100.0%
Total		Count %	941 90.7%	96 9.3%	1,037 100.0%

$X^2 = 8.261^{**}$ ;  $V = 0.09^{**}$ ; Notes:  $***p < .001$ ;  $**p < .01$ ;  $*p < .05$

**Alcohol Treatment by Gender-Housed**

			<i>Alcohol Treatment</i>		Total
			Yes	No	
Gender-Housed	male	Count %	857 90.9%	86 9.1%	943 100.0%
	female	Count %	91 96.8%	3 3.2%	94 100.0%
Total		Count %	948 91.4%	89 8.6%	1,037 100.0%

$X^2 = 3.829$ ;  $V = 0.06$ ; Notes:  $***p < .001$ ;  $**p < .01$ ;  $*p < .05$

***Work Assignments by Gender-Housed***

**Prison Industries by Gender-Housed**

			<i>Prison Industries</i>		Total
			Yes	No	
Gender-Housed	male	Count %	402 42.6%	541 57.4%	943 100.0%
	female	Count %	52 55.3%	42 44.7%	94 100.0%
Total		Count %	454 43.8%	583 56.2%	1,037 100.0%

$X^2 = 5.592^{*}$ ;  $V = 0.07^{*}$ ; Notes:  $***p < .001$ ;  $**p < .01$ ;  $*p < .05$

### Facility Support by Gender-Housed

			<i>Facility Support</i>		Total
			Yes	No	
Gender-Housed	male	Count %	903 95.8%	40 4.2%	943 100.0%
	female	Count %	90 95.7%	4 4.3%	94 100.0%
Total		Count %	993 95.8%	44 4.2%	1,037 100.0%

$X^2 = 0.000$ ;  $V = 0.00$ ; Notes: \*\*\* $p < .001$ ; \*\* $p < .01$ ; \* $p < .05$

### Farming/Agriculture by Gender-Housed

			<i>Farming/Agriculture</i>		Total
			Yes	No	
Gender-Housed	male	Count %	300 31.8%	643 68.2%	943 100.0%
	female	Count %	25 26.6%	69 73.4%	94 100.0%
Total		Count %	325 31.3%	712 68.7%	1,037 100.0%

$X^2 = 1.081$ ;  $V = 0.03$ ; Notes: \*\*\* $p < .001$ ; \*\* $p < .01$ ; \* $p < .05$

### Public Works by Gender-Housed

			<i>Public Works</i>		Total
			Yes	No	
Gender-Housed	male	Count %	588 62.4%	355 37.6%	943 100.0%
	female	Count %	63 67.0%	31 33.0%	94 100.0%
Total		Count %	651 62.8%	386 37.2%	1,037 100.0%

$X^2 = 0.797$ ;  $V = 0.03$ ; Notes: \*\*\* $p < .001$ ; \*\* $p < .01$ ; \* $p < .05$

### Work Release by Gender-Housed

			<i>Work Release</i>		Total
			Yes	No	
Gender-Housed	male	Count	850	82	932
		%	91.2%	8.8%	100.0%
	female	Count	75	19	94
		%	79.8%	20.2%	100.0%
Total		Count	925	101	1,026
		%	90.2%	9.8%	100.0%

$X^2 = 12.54^{***}$ ;  $V = 0.11^{***}$ ; Notes:  $^{***}p < .001$ ;  $^{**}p < .01$ ;  $^{*}p < .05$

### Other Work Assignments by Gender-Housed

			<i>Other Work</i>		Total
			Yes	No	
Gender-Housed	male	Count	140	803	943
		%	14.8%	85.2%	100.0%
	female	Count	14	80	94
		%	14.9%	85.1%	100.0%
Total		Count	154	883	1,037
		%	14.9%	85.1%	100.0%

$X^2 = 0.000$ ;  $V = 0.00$ ; Notes:  $^{***}p < .001$ ;  $^{**}p < .01$ ;  $^{*}p < .05$

### Educational Programming by Gender-Housed

#### Adult Basic Education by Gender-Housed

			<i>Adult Basic Education</i>		Total
			Yes	No	
Gender-Housed	male	Count	829	114	943
		%	87.9	12.1%	100.0%
	female	Count	86	8	94
		%	91.5%	8.5%	100.0%
Total		Count	915	122	1,037
		%	88.2%	11.8%	100.0%

$X^2 = 1.054$ ;  $V = 0.03$ ; Notes:  $^{***}p < .001$ ;  $^{**}p < .01$ ;  $^{*}p < .05$

### GED Preparation by Gender-Housed

			<i>GED Preparation</i>		Total
			Yes	No	
Gender-Housed	male	Count	856	87	943
		%	90.8%	9.2%	100.0%
	female	Count	89	5	94
		%	94.7%	5.3%	100.0%
Total		Count	945	92	1,037
		%	91.1%	8.9%	100.0%

$X^2 = 1.614$ ;  $V = 0.04$ ; Notes: \*\*\* $p < .001$ ; \*\* $p < .01$ ; \* $p < .05$

### Special Education by Gender-Housed

			<i>Special Education</i>		Total
			Yes	No	
Gender-Housed	male	Count	414	529	943
		%	43.9%	56.1%	100.0%
	female	Count	46	48	94
		%	48.9%	51.1%	100.0%
Total		Count	460	577	1,037
		%	44.4%	55.6%	100.0%

$X^2 = 0.878$ ;  $V = 0.03$ ; Notes: \*\*\* $p < .001$ ; \*\* $p < .01$ ; \* $p < .05$

### Vocational Education by Gender-Housed

			<i>Vocational Education</i>		Total
			Yes	No	
Gender-Housed	male	Count	628	315	943
		%	66.6%	33.4%	100.0%
	female	Count	75	19	94
		%	79.8%	20.2%	100.0%
Total		Count	703	334	1,037
		%	67.8%	32.2%	100.0%

$X^2 = 6.812^{**}$ ;  $V = 0.08^{**}$ ; Notes: \*\*\* $p < .001$ ; \*\* $p < .01$ ; \* $p < .05$



**College Courses by Gender-Housed**

			<i>College Courses</i>		Total
			Yes	No	
Gender-Housed	male	Count %	280 29.7%	663 70.3%	943 100.0%
	female	Count %	40 42.6%	54 57.4%	94 100.0%
Total		Count %	320 30.9%	717 69.1%	1,037 100.0%

$X^2 = 6.626^*$ ;  $V = 0.08^*$ ; Notes: \*\*\* $p < .001$ ; \*\* $p < .01$ ; \* $p < .05$

**Study Release by Gender-Housed**

			<i>Study Release</i>		Total
			Yes	No	
Gender-Housed	male	Count %	27 2.9%	916 97.1%	943 100.0%
	female	Count %	6 6.4%	88 93.6%	94 100.0%
Total		Count %	33 3.2%	1,004 96.8%	1,037 100.0%

$X^2 = 3.437$ ;  $V = 0.06$ ; Notes: \*\*\* $p < .001$ ; \*\* $p < .01$ ; \* $p < .05$

***Life-Skills Programming by Gender-Housed***

**Employment Programs by Gender-Housed**

			<i>Employment</i>		Total
			Yes	No	
Gender-Housed	male	Count %	590 62.6%	353 37.4%	943 100.0%
	female	Count %	72 76.6%	22 23.4%	94 100.0%
Total		Count %	662 63.8%	375 36.2%	1,037 100.0%

$X^2 = 7.288^{**}$ ;  $V = 0.08^{**}$ ; Notes: \*\*\* $p < .001$ ; \*\* $p < .01$ ; \* $p < .05$

### Life-Skills by Gender-Housed

			<i>Life-Skills</i>		Total
			Yes	No	
Gender-Housed	male	Count %	671 71.2%	272 28.8%	943 100.0%
	female	Count %	79 84.0%	15 16.0%	94 100.0%
Total		Count %	750 72.3%	287 27.7%	1,037 100.0%

$X^2 = 7.092^{**}$ ;  $V = 0.08^{*}$ ; Notes:  $***p < .001$ ;  $**p < .01$ ;  $*p < .05$

### Parenting by Gender-Housed

			<i>Parenting</i>		Total
			Yes	No	
Gender-Housed	male	Count %	375 39.8%	568 60.2%	943 100.0%
	female	Count %	74 78.7%	20 21.3%	94 100.0%
Total		Count %	449 43.3%	588 56.7%	1,037 100.0%

$X^2 = 52.840^{***}$ ;  $V = 0.23^{***}$ ; Notes:  $***p < .001$ ;  $**p < .01$ ;  $*p < .05$

### Other Life-Skills by Gender-Housed

			<i>Other Life-Skills</i>		Total
			Yes	No	
Gender-Housed	male	Count %	264 28.0%	679 72.0%	943 100.0%
	female	Count %	28 29.8%	66 70.2%	94 100.0%
Total		Count %	292 28.2%	745 71.8%	1,037 100.0%

$X^2 = 0.136$ ;  $V = 0.01$ ; Notes:  $***p < .001$ ;  $**p < .01$ ;  $*p < .05$

**Medical Programming by Security Level**

**Hepatitis C Test by Security Level**

			<i>Hepatitis C Test</i>		Total
			Yes	No	
Security	Minimum	Count %	240 82.2%	52 17.8%	292 100.0%
	Medium	Count %	411 94.7%	23 5.3%	434 100.0%
	Maximum	Count %	280 95.6%	13 4.4%	293 100.0%
Total		Count %	931 91.4%	88 8.6%	1,019 100.0%

$X^2 = 43.806^{***}$ ;  $V = 0.207^{***}$ ; Notes:  $***p < .001$ ;  $**p < .01$ ;  $*p < .05$

**Hepatitis C Treatment by Security Level**

			<i>Hepatitis C Treatment</i>		Total
			Yes	No	
Security	Minimum	Count %	208 71.5%	83 28.5%	291 100.0%
	Medium	Count %	318 87.8%	53 12.2%	434 100.0%
	Maximum	Count %	273 92.9%	21 7.1%	294 100.0%
Total		Count %	862 84.6%	157 15.4%	1,019 100.0%

$X^2 = 57.211^{***}$ ;  $V = 0.237^{***}$ ; Notes:  $***p < .001$ ;  $**p < .01$ ;  $*p < .05$

**Hepatitis B Vaccine by Security Level**

			<i>Hepatitis B Vaccine</i>		Total
			Yes	No	
Security	Minimum	Count %	218 74.9%	73 25.1%	291 100.0%
	Medium	Count %	352 81.1%	82 18.9%	434 100.0%
	Maximum	Count %	254 86.4%	40 13.6%	294 100.0%
Total		Count %	824 80.9%	195 19.1%	1,019 100.0%

$X^2 = 12.485^{**}$ ;  $V = 0.111^{**}$ ; Notes:  $***p < .001$ ;  $**p < .01$ ;  $*p < .05$

### Tuberculosis Screening by Security Level

			<i>Tuberculosis Screening</i>		Total
			Yes	No	
Security	Minimum	Count %	227 74.9%	76 25.1%	303 100.0%
	Medium	Count %	353 80.8%	84 19.2%	437 100.0%
	Maximum	Count %	267 89.9%	30 10.1%	297 100.0%
Total		Count %	847 81.7%	190 18.3%	1,037 100.0%

$X^2 = 22.903^{***}$ ;  $V = 0.149^{***}$ ; Notes:  $^{***}p < .001$ ;  $^{**}p < .01$ ;  $^{*}p < .05$

### HIV/AIDS Test by Security Level

			<i>HIV/AIDS Test</i>		Total
			Yes	No	
Security	Minimum	Count %	259 89.0%	32 11.0%	291 100.0%
	Medium	Count %	421 97.0%	13 3.0%	434 100.0%
	Maximum	Count %	295 100.0%	0 0.0%	295 100.0%
Total		Count %	975 95.6%	45 4.4%	1,020 100.0%

$X^2 = 45.600^{***}$ ;  $V = 0.211^{***}$ ; Notes:  $^{***}p < .001$ ;  $^{**}p < .01$ ;  $^{*}p < .05$

### HIV/AIDS Counseling by Security Level

			<i>HIV/AIDS Counseling</i>		Total
			Yes	No	
Security	Minimum	Count %	150 49.5%	153 50.5%	303 100.0%
	Medium	Count %	294 67.3%	143 32.7%	437 100.0%
	Maximum	Count %	165 55.6%	132 44.4%	297 100.0%
Total		Count %	609 58.7%	428 41.3%	1,037 100.0%

$X^2 = 25.043^{***}$ ;  $V = 0.155^{***}$ ; Notes:  $^{***}p < .001$ ;  $^{**}p < .01$ ;  $^{*}p < .05$

### Suicide Prevention by Security Level

			<i>Suicide Prevention</i>		Total
			Yes	No	
Security	Minimum	Count %	275 94.2%	17 5.8%	292 100.0%
	Medium	Count %	432 99.5%	2 0.5%	434 100.0%
	Maximum	Count %	296 99.7%	1 0.3%	297 100.0%
Total		Count %	1,003 98.0%	20 2.0%	1,023 100.0%

$X^2 = 31.892^{***}$ ;  $V = 0.177^{***}$ ; Notes:  $^{***}p < .001$ ;  $^{**}p < .01$ ;  $^{*}p < .05$

### Mental Health Care by Security Level

#### Psychological Evaluations by Security Level

			<i>Psychological Evaluation</i>		Total
			Yes	No	
Security	Minimum	Count %	178 58.7%	125 41.3%	303 100.0%
	Medium	Count %	363 83.1%	74 16.9%	437 100.0%
	Maximum	Count %	262 88.2%	35 11.8%	297 100.0%
Total		Count %	803 77.4%	234 22.6%	1,037 100.0%

$X^2 = 88.254^{***}$ ;  $V = 0.292^{***}$ ; Notes:  $^{***}p < .001$ ;  $^{**}p < .01$ ;  $^{*}p < .05$

#### 24-Hour Mental Health Care by Security Level

			<i>24-Hour Mental Health Care</i>		Total
			Yes	No	
Security	Minimum	Count %	138 45.5%	165 54.5%	303 100.0%
	Medium	Count %	320 73.2%	117 26.8%	437 100.0%
	Maximum	Count %	192 64.6%	105 35.4%	297 100.0%
Total		Count %	650 62.7%	387 37.3%	1,037 100.0%

$X^2 = 59.304^{***}$ ;  $V = 0.239^{***}$ ; Notes:  $^{***}p < .001$ ;  $^{**}p < .01$ ;  $^{*}p < .05$

### Therapy/Counseling by Security Level

			<i>Therapy/Counseling</i>		Total
			Yes	No	
Security	Minimum	Count %	197 61.7%	116 38.3%	303 100.0%
	Medium	Count %	394 90.2%	43 9.8%	437 100.0%
	Maximum	Count %	282 94.9%	15 5.1%	297 100.0%
Total		Count %	863 83.2%	174 16.8%	1,037 100.0%

$X^2 = 144.676^{***}$ ;  $V = 0.374^{***}$ ; Notes:  $^{***}p < .001$ ;  $^{**}p < .01$ ;  $^{*}p < .05$

### Psychotropic Medication by Security Level

			<i>Psychotropic Medication</i>		Total
			Yes	No	
Security	Minimum	Count %	179 59.1%	124 40.9%	303 100.0%
	Medium	Count %	383 86.7%	54 12.4%	437 100.0%
	Maximum	Count %	281 94.6%	16 5.4%	297 100.0%
Total		Count %	843 81.3%	194 18.7%	1,037 100.0%

$X^2 = 144.578^{***}$ ;  $V = 0.373^{***}$ ; Notes:  $^{***}p < .001$ ;  $^{**}p < .01$ ;  $^{*}p < .05$

### Assist to Community Care by Security Level

			<i>Assist to Community Care</i>		Total
			Yes	No	
Security	Minimum	Count %	159 52.5%	144 47.5%	303 100.0%
	Medium	Count %	323 73.9%	114 26.1%	437 100.0%
	Maximum	Count %	254 85.5%	43 14.5%	297 100.0%
Total		Count %	736 71.0%	301 29.0%	1,037 100.0%

$X^2 = 82.676^{***}$ ;  $V = 0.282^{***}$ ; Notes:  $^{***}p < .001$ ;  $^{**}p < .01$ ;  $^{*}p < .05$

**Other Mental Health Care by Security Level**

			<i>Other Mental Health Care</i>		Total
			Yes	No	
Security	Minimum	Count %	26 8.6%	277 91.4%	303 100.0%
	Medium	Count %	23 5.3%	414 94.7%	437 100.0%
	Maximum	Count %	10 3.4%	287 96.6%	297 100.0%
Total		Count %	59 5.7%	978 94.3%	1,037 100.0%

$X^2 = 7.854^*$ ;  $V = 0.087^*$ ; Notes: \*\*\* $p < .001$ ; \*\* $p < .01$ ; \* $p < .05$

**Substance Abuse Programming by Security Level**

**Drug Treatment by Security Level**

			<i>Drug Treatment</i>		Total
			Yes	No	
Security	Minimum	Count %	267 88.1%	36 11.9%	303 100.0%
	Medium	Count %	416 95.2%	21 4.8%	437 100.0%
	Maximum	Count %	258 86.9%	39 13.1%	297 100.0%
Total		Count %	941 90.7%	96 9.3%	1,037 100.0%

$X^2 = 18.099^{***}$ ;  $V = 0.132^{***}$ ; Notes: \*\*\* $p < .001$ ; \*\* $p < .01$ ; \* $p < .05$

**Alcohol Treatment by Security Level**

			<i>Alcohol Treatment</i>		Total
			Yes	No	
Security	Minimum	Count %	267 88.1%	36 11.9%	303 100.0%
	Medium	Count %	416 95.2%	21 4.8%	437 100.0%
	Maximum	Count %	265 89.2%	32 10.8%	297 100.0%
Total		Count %	948 91.4%	89 8.6%	1,037 100.0%

$X^2 = 13.967^{**}$ ;  $V = 0.116^{**}$ ; Notes: \*\*\* $p < .001$ ; \*\* $p < .01$ ; \* $p < .05$

**Work Assignments by Security Level**

**Prison Industries by Security Level**

			<i>Prison Industries</i>		Total
			Yes	No	
Security	Minimum	Count %	71 23.4%	232 76.6%	303 100.0%
	Medium	Count %	211 48.3%	226 51.7%	437 100.0%
	Maximum	Count %	172 57.9%	125 42.1%	297 100.0%
Total		Count %	454 43.8%	583 56.2%	1,037 100.0%

$X^2 = 78.671^{***}$ ;  $V = 0.275^{***}$ ; Notes:  $***p < .001$ ;  $**p < .01$ ;  $*p < .05$

**Facility Support by Security Level**

			<i>Facility Support</i>		Total
			Yes	No	
Security	Minimum	Count %	280 92.4%	23 7.6%	303 100.0%
	Medium	Count %	425 97.3%	12 2.7%	437 100.0%
	Maximum	Count %	288 97.0%	9 3.0%	297 100.0%
Total		Count %	993 95.8%	44 4.2%	1,037 100.0%

$X^2 = 11.843^{**}$ ;  $V = 0.107^{**}$ ; Notes:  $***p < .001$ ;  $**p < .01$ ;  $*p < .05$

**Farming/Agriculture by Security Level**

			<i>Farming/Agriculture</i>		Total
			Yes	No	
Security	Minimum	Count %	85 28.1%	218 71.9%	303 100.0%
	Medium	Count %	138 31.6%	299 68.4%	437 100.0%
	Maximum	Count %	102 34.3%	195 65.7%	297 100.0%
Total		Count %	325 31.3%	712 68.7%	1,037 100.0%

$X^2 = 2.778$ ;  $V = 0.052$ ; Notes:  $***p < .001$ ;  $**p < .01$ ;  $*p < .05$



**Public Works by Security Level**

			<i>Public Works</i>		Total
			Yes	No	
Security	Minimum	Count %	228 75.2%	75 24.8%	303 100.0%
	Medium	Count %	265 60.6%	172 39.4%	437 100.0%
	Maximum	Count %	158 53.2%	139 46.8%	297 100.0%
Total		Count %	651 62.8%	386 37.2%	1,037 100.0%

$X^2 = 32.679^{***}$ ;  $V = 0.178^{***}$ ; Notes:  $^{***}p < .001$ ;  $^{**}p < .01$ ;  $^{*}p < .05$

**Work Release by Security Level**

			<i>Work Release</i>		Total
			Yes	No	
Security	Minimum	Count %	53 18.1%	240 81.9%	293 100.0%
	Medium	Count %	34 7.8%	402 92.2%	436 100.0%
	Maximum	Count %	14 4.7%	283 95.3%	297 100.0%
Total		Count %	101 9.8%	925 90.2%	1,026 100.0%

$X^2 = 33.305^{***}$ ;  $V = 0.180^{***}$ ; Notes:  $^{***}p < .001$ ;  $^{**}p < .01$ ;  $^{*}p < .05$

**Other Work Assignments by Security Level**

			<i>Other Work</i>		Total
			Yes	No	
Security	Minimum	Count %	33 10.9%	270 89.1%	303 100.0%
	Medium	Count %	51 11.7%	386 88.3%	437 100.0%
	Maximum	Count %	70 23.6%	227 76.4%	297 100.0%
Total		Count %	154 14.9%	883 85.1%	1,037 100.0%

$X^2 = 25.105^{***}$ ;  $V = 0.156^{***}$ ; Notes:  $^{***}p < .001$ ;  $^{**}p < .01$ ;  $^{*}p < .05$

**Educational Programming by Security Level**

**Adult Basic Education by Security Level**

			<i>Adult Basic Education</i>		Total
			Yes	No	
Security	Minimum	Count %	239 78.9%	64 21.1%	303 100.0%
	Medium	Count %	411 94.1%	26 5.9%	437 100.0%
	Maximum	Count %	265 89.2%	32 10.8%	297 100.0%
Total		Count %	915 88.2%	122 11.8%	1,037 100.0%

$X^2 = 40.074^{***}$ ;  $V = 0.197^{***}$ ; Notes:  $^{***}p < .001$ ;  $^{**}p < .01$ ;  $^{*}p < .05$

**GED Preparation by Security Level**

			<i>GED Preparation</i>		Total
			Yes	No	
Security	Minimum	Count %	255 84.2%	48 15.8%	303 100.0%
	Medium	Count %	415 95.0%	22 5.0%	437 100.0%
	Maximum	Count %	275 92.6%	22 7.4%	297 100.0%
Total		Count %	945 91.1%	92 8.9%	1,037 100.0%

$X^2 = 26.954^{***}$ ;  $V = 0.161^{***}$ ; Notes:  $^{***}p < .001$ ;  $^{**}p < .01$ ;  $^{*}p < .05$

**Special Education by Security Level**

			<i>Special Education</i>		Total
			Yes	No	
Security	Minimum	Count %	84 27.7%	219 72.3%	303 100.0%
	Medium	Count %	219 50.1%	218 49.9%	437 100.0%
	Maximum	Count %	157 52.9%	140 47.1%	297 100.0%
Total		Count %	460 44.4%	577 55.6%	1,037 100.0%

$X^2 = 48.541^{***}$ ;  $V = 0.216^{***}$ ; Notes:  $^{***}p < .001$ ;  $^{**}p < .01$ ;  $^{*}p < .05$

### Vocational Education by Security Level

			<i>Vocational Education</i>		Total
			Yes	No	
Security	Minimum	Count %	152 50.2%	151 49.8%	303 100.0%
	Medium	Count %	331 75.7%	106 24.3%	437 100.0%
	Maximum	Count %	220 74.1%	77 25.9%	297 100.0%
Total		Count %	703 67.8%	334 32.2%	1,037 100.0%

$X^2 = 61.141^{***}$ ;  $V = 0.243^{***}$ ; Notes:  $^{***}p < .001$ ;  $^{**}p < .01$ ;  $^{*}p < .05$

### College Courses by Security Level

			<i>College Courses</i>		Total
			Yes	No	
Security	Minimum	Count %	75 24.8%	228 75.2%	303 100.0%
	Medium	Count %	158 36.2%	279 63.8%	437 100.0%
	Maximum	Count %	87 29.3%	210 70.7%	297 100.0%
Total		Count %	320 30.9%	717 69.1%	1,037 100.0%

$X^2 = 11.383^{**}$ ;  $V = 0.105^{**}$ ; Notes:  $^{***}p < .001$ ;  $^{**}p < .01$ ;  $^{*}p < .05$

### Study Release by Security Level

			<i>Study Release</i>		Total
			Yes	No	
Security	Minimum	Count %	22 7.3%	281 92.7%	303 100.0%
	Medium	Count %	10 2.3%	427 97.7%	437 100.0%
	Maximum	Count %	1 0.3%	296 99.7%	297 100.0%
Total		Count %	33 3.2%	1,004 96.8%	1,037 100.0%

$X^2 = 25.298^{***}$ ;  $V = 0.156^{***}$ ; Notes:  $^{***}p < .001$ ;  $^{**}p < .01$ ;  $^{*}p < .05$

***Life-Skills Programming by Security Level***

**Employment Programs by Security Level**

			<i>Employment Programs</i>		Total
			Yes	No	
Security	Minimum	Count %	187 61.7%	116 38.3%	303 100.0%
	Medium	Count %	317 72.5%	120 27.5%	437 100.0%
	Maximum	Count %	158 53.2%	139 46.8%	297 100.0%
Total		Count %	662 63.8%	375 36.2%	1,037 100.0%

$X^2 = 29.489^{***}$ ;  $V = 0.169^{***}$ ; Notes:  $^{***}p < .001$ ;  $^{**}p < .01$ ;  $^{*}p < .05$

**Life-Skills by Security Level**

			<i>Life-Skills</i>		Total
			Yes	No	
Security	Minimum	Count %	212 70.0%	91 30.0%	303 100.0%
	Medium	Count %	346 79.2%	91 20.8%	437 100.0%
	Maximum	Count %	192 64.6%	105 35.4%	297 100.0%
Total		Count %	750 72.3%	287 27.7%	1,037 100.0%

$X^2 = 19.838^{***}$ ;  $V = 0.138^{***}$ ; Notes:  $^{***}p < .001$ ;  $^{**}p < .01$ ;  $^{*}p < .05$

**Parenting by Security Level**

			<i>Parenting</i>		Total
			Yes	No	
Security	Minimum	Count %	120 39.6%	183 60.4%	303 100.0%
	Medium	Count %	218 49.9%	219 50.1%	437 100.0%
	Maximum	Count %	111 37.4%	186 62.6%	297 100.0%
Total		Count %	449 43.3%	588 56.7%	1,037 100.0%

$X^2 = 13.654^{**}$ ;  $V = 0.115^{**}$ ; Notes:  $^{***}p < .001$ ;  $^{**}p < .01$ ;  $^{*}p < .05$

### Other Life-Skills by Security Level

			<i>Other</i>		Total
			Yes	No	
Security	Minimum	Count %	54 17.8%	249 82.2%	303 100.0%
	Medium	Count %	128 29.3%	309 70.7%	437 100.0%
	Maximum	Count %	110 37.0%	187 63.0%	297 100.0%
Total		Count %	292 28.2%	745 71.8%	1,037 100.0%

$X^2 = 27.854^{***}$ ;  $V = 0.164^{***}$ ; Notes:  $^{***}p < .001$ ;  $^{**}p < .01$ ;  $^{*}p < .05$

### Medical Programming by Size of Facility

#### Hepatitis C Test by Size

			<i>Hepatitis C Test</i>		Total
			Yes	No	
Size	Less than 500	Count %	282 83.4%	56 16.6%	338 100.0%
	500-999	Count %	238 93.0%	18 7.0%	256 100.0%
	1,000 or more	Count %	411 96.7%	14 3.3%	425 100.0%
Total		Count %	931 91.4%	88 8.6%	1,019 100.0%

$X^2 = 43.159^{***}$ ;  $V = 0.206^{***}$ ; Notes:  $^{***}p < .001$ ;  $^{**}p < .01$ ;  $^{*}p < .05$

#### Hepatitis C Treatment by Size

			<i>Hepatitis C Treatment</i>		Total
			Yes	No	
Size	Less than 500	Count %	243 71.9%	95 28.1%	338 100.0%
	500-999	Count %	223 87.5%	32 12.5%	255 100.0%
	1,000 or more	Count %	396 93.0%	30 7.0%	426 100.0%
Total		Count %	862 84.6%	157 15.4%	1,019 100.0%

$X^2 = 66.292^{***}$ ;  $V = 0.255^{***}$ ; Notes:  $^{***}p < .001$ ;  $^{**}p < .01$ ;  $^{*}p < .05$

### Hepatitis B Vaccine by Size

			<i>Hepatitis B Vaccine</i>		Total
			Yes	No	
Size	Less than 500	Count %	243 71.9%	95 28.1%	338 100.0%
	500-999	Count %	215 84.0%	41 16.0%	256 100.0%
	1,000 or more	Count %	366 86.1%	59 13.9%	425 100.0%
Total		Count %	824 80.9%	195 19.1%	1,019 100.0%

$X^2 = 26.768^{***}$ ;  $V = 0.162^{***}$ ; Notes:  $^{***}p < .001$ ;  $^{**}p < .01$ ;  $^{*}p < .05$

### Tuberculosis Screening by Size

			<i>Tuberculosis Screening</i>		Total
			Yes	No	
Size	Less than 500	Count %	259 74.2%	90 25.8%	349 100.0%
	500-999	Count %	215 82.4%	46 17.6%	261 100.0%
	1,000 or more	Count %	373 87.4%	54 12.6%	427 100.0%
Total		Count %	847 81.7%	190 18.3%	1,037 100.0%

$X^2 = 22.275^{***}$ ;  $V = 0.147^{***}$ ; Notes:  $^{***}p < .001$ ;  $^{**}p < .01$ ;  $^{*}p < .05$

### HIV/AIDS Test by Size

			<i>HIV/AIDS Test</i>		Total
			Yes	No	
Size	Less than 500	Count %	302 89.3%	36 10.7%	338 100.0%
	500-999	Count %	247 96.5%	9 3.5%	256 100.0%
	1,000 or more	Count %	426 100.0%	0 0.0%	426 100.0%
Total		Count %	975 95.6%	45 4.4%	1,020 100.0%

$X^2 = 51.348^{***}$ ;  $V = 0.224^{***}$ ; Notes:  $^{***}p < .001$ ;  $^{**}p < .01$ ;  $^{*}p < .05$

### HIV/AIDS Counseling by Size

			<i>HIV/AIDS Counseling</i>		Total
			Yes	No	
Size	Less than 500	Count %	160 45.8%	189 54.2%	349 100.0%
	500-999	Count %	154 59.0%	107 41.0%	261 100.0%
	1,000 or more	Count %	295 69.1%	132 30.9%	427 100.0%
Total		Count %	609 58.7%	428 41.3%	1,037 100.0%

$X^2 = 42.808^{***}$ ;  $V = 0.203^{***}$ ; Notes:  $^{***}p < .001$ ;  $^{**}p < .01$ ;  $^{*}p < .05$

### Suicide Prevention by Size

			<i>Suicide Prevention</i>		Total
			Yes	No	
Size	Less than 500	Count %	322 95.0%	17 5.0%	339 100.0%
	500-999	Count %	256 99.2%	2 0.8%	258 100.0%
	1,000 or more	Count %	425 99.8%	1 0.2%	426 100.0%
Total		Count %	1003 98.0%	20 2.0%	1,023 100.0%

$X^2 = 25.008^{***}$ ;  $V = 0.156^{***}$ ; Notes:  $^{***}p < .001$ ;  $^{**}p < .01$ ;  $^{*}p < .05$

### Mental Health Care by Size of Facility

#### Psychological Evaluations by Size

			<i>Psychological Evaluation</i>		Total
			Yes	No	
Size	Less than 500	Count %	205 58.7%	144 41.3%	349 100.0%
	500-999	Count %	220 84.3%	41 15.7%	261 100.0%
	1,000 or more	Count %	378 88.5%	49 11.5%	427 100.0%
Total		Count %	803 77.4%	234 22.6%	1,037 100.0%

$X^2 = 106.887^{***}$ ;  $V = 0.321^{***}$ ; Notes:  $^{***}p < .001$ ;  $^{**}p < .01$ ;  $^{*}p < .05$

### 24-Hour Mental Health Care by Size

			24-Hour Mental Health Care		Total
			Yes	No	
Size	Less than 500	Count %	153 43.8%	196 56.2%	349 100.0%
	500-999	Count %	178 68.2%	83 31.8%	261 100.0%
	1,000 or more	Count %	319 74.7%	108 25.3%	427 100.0%
Total		Count %	650 62.7%	387 37.3%	1,037 100.0%

$X^2 = 82.764^{***}$ ;  $V = 0.283^{***}$ ; Notes:  $^{***}p < .001$ ;  $^{**}p < .01$ ;  $^{*}p < .05$

### Therapy/Counseling by Size

			Therapy/Counseling		Total
			Yes	No	
Size	Less than 500	Count %	219 62.8%	130 37.2%	349 100.0%
	500-999	Count %	236 90.4%	25 9.6%	261 100.0%
	1,000 or more	Count %	408 95.6%	19 4.4%	427 100.0%
Total		Count %	863 83.2%	174 16.8%	1,037 100.0%

$X^2 = 160.905^{***}$ ;  $V = 0.394^{***}$ ; Notes:  $^{***}p < .001$ ;  $^{**}p < .01$ ;  $^{*}p < .05$

### Psychotropic Medication by Size

			Psychotropic Medication		Total
			Yes	No	
Size	Less than 500	Count %	213 61.0%	136 39.0%	349 100.0%
	500-999	Count %	231 88.5%	30 11.5%	261 100.0%
	1,000 or more	Count %	399 93.4%	28 6.6%	427 100.0%
Total		Count %	843 81.3%	194 18.7%	1,037 100.0%

$X^2 = 144.584^{***}$ ;  $V = 0.373^{***}$ ; Notes:  $^{***}p < .001$ ;  $^{**}p < .01$ ;  $^{*}p < .05$



**Assist to Community Care by Size**

			<i>Assist to Community Care</i>		Total
			Yes	No	
Size	Less than 500	Count %	185 53.0%	164 47.0%	349 100.0%
	500-999	Count %	194 74.3%	67 25.7%	261 100.0%
	1,000 or more	Count %	357 83.6%	70 16.4%	427 100.0%
Total		Count %	736 71.0%	301 29.0%	1,037 100.0%

$X^2 = 89.181^{***}$ ;  $V = 0.293^{***}$ ; Notes:  $^{***}p < .001$ ;  $^{**}p < .01$ ;  $^{*}p < .05$

**Other Mental Health Care by Size**

			<i>Other Mental Health</i>		Total
			Yes	No	
Size	Less than 500	Count %	27 7.7%	322 92.3%	349 100.0%
	500-999	Count %	12 4.6%	249 95.4%	261 100.0%
	1,000 or more	Count %	29 4.7%	407 95.3%	427 100.0%
Total		Count %	59 5.7%	978 94.3%	1,037 100.0%

$X^2 = 4.110$ ;  $V = 0.063$ ; Notes:  $^{***}p < .001$ ;  $^{**}p < .01$ ;  $^{*}p < .05$

**Substance Abuse Programming by Size of Facility**

**Drug Treatment by Size**

			<i>Drug Treatment</i>		Total
			Yes	No	
Size	Less than 500	Count %	301 86.2%	48 13.8%	349 100.0%
	500-999	Count %	242 92.7%	19 7.3%	261 100.0%
	1,000 or more	Count %	398 93.2%	29 6.8%	427 100.0%
Total		Count %	941 90.7%	96 9.3%	1,037 100.0%

$X^2 = 12.705^{**}$ ;  $V = 0.111^{**}$ ; Notes:  $^{***}p < .001$ ;  $^{**}p < .01$ ;  $^{*}p < .05$

### Alcohol Treatment by Size

			<i>Alcohol Treatment</i>		Total
			Yes	No	
Size	Less than 500	Count %	295 84.5%	54 15.5%	349 100.0%
	500-999	Count %	245 93.9%	16 6.1%	261 100.0%
	1,000 or more	Count %	408 95.6%	19 4.4%	427 100.0%
Total		Count %	948 91.4%	89 8.6%	1,037 100.0%

$X^2 = 32.414^{***}$ ;  $V = 0.177^{***}$ ; Notes:  $^{***}p < .001$ ;  $^{**}p < .01$ ;  $^{*}p < .05$

### Work Assignments by Size of Facility

#### Prison Industries by Size

			<i>Prison Industries</i>		Total
			Yes	No	
Size	Less than 500	Count %	75 21.5%	274 78.5%	349 100.0%
	500-999	Count %	114 43.7%	147 56.3%	261 100.0%
	1,000 or more	Count %	265 62.1%	162 37.9%	427 100.0%
Total		Count %	454 43.8%	583 56.2%	1,037 100.0%

$X^2 = 128.428^{***}$ ;  $V = 0.352^{***}$ ; Notes:  $^{***}p < .001$ ;  $^{**}p < .01$ ;  $^{*}p < .05$

### Facility Support by Size

			<i>Facility Support</i>		Total
			Yes	No	
Size	Less than 500	Count %	322 92.3%	27 7.7%	349 100.0%
	500-999	Count %	253 96.9%	8 3.1%	261 100.0%
	1,000 or more	Count %	418 97.9%	9 2.1%	427 100.0%
Total		Count %	993 95.8%	44 4.2%	1,037 100.0%

$X^2 = 16.166^{***}$ ;  $V = 0.125^{***}$ ; Notes:  $^{***}p < .001$ ;  $^{**}p < .01$ ;  $^{*}p < .05$

**Farming/Agriculture by Size**

			<i>Farming/Agriculture</i>		Total
			Yes	No	
Size	Less than 500	Count %	77 22.1%	272 77.9%	349 100.0%
	500-999	Count %	67 25.7%	194 74.3%	261 100.0%
	1,000 or more	Count %	181 42.4%	246 57.6%	427 100.0%
Total		Count %	325 31.3%	712 68.7%	1,037 100.0%

$X^2 = 42.081^{***}$ ;  $V = 0.201^{***}$ ; Notes:  $***p < .001$ ;  $**p < .01$ ;  $*p < .05$

**Public Works by Size**

			<i>Public Works</i>		Total
			Yes	No	
Size	Less than 500	Count %	231 66.2%	118 33.8%	349 100.0%
	500-999	Count %	142 54.4%	119 45.6%	261 100.0%
	1,000 or more	Count %	278 65.1%	149 34.9%	427 100.0%
Total		Count %	651 62.8%	386 37.2%	1,037 100.0%

$X^2 = 10.556^{**}$ ;  $V = 0.101^{**}$ ; Notes:  $***p < .001$ ;  $**p < .01$ ;  $*p < .05$

**Work Release by Size**

			<i>Work Release</i>		Total
			Yes	No	
Size	Less than 500	Count %	58 17.0%	284 83.0%	342 100.0%
	500-999	Count %	18 7.0%	240 93.0%	258 100.0%
	1,000 or more	Count %	25 5.9%	401 94.1%	426 100.0%
Total		Count %	101 9.8%	925 90.2%	1,026 100.0%

$X^2 = 29.484^{***}$ ;  $V = 0.170^{***}$ ; Notes:  $***p < .001$ ;  $**p < .01$ ;  $*p < .05$

### Other Work Assignments by Size

			<i>Other Work</i>		Total
			Yes	No	
Size	Less than 500	Count %	40 11.5%	309 88.5%	349 100.0%
	500-999	Count %	31 11.9%	230 88.1%	261 100.0%
	1,000 or more	Count %	83 19.4%	344 80.6%	427 100.0%
Total		Count %	154 14.9%	883 85.1%	1,037 100.0%

$X^2 = 12.101^{**}$ ;  $V = 0.108^{**}$ ; Notes:  $***p < .001$ ;  $**p < .01$ ;  $*p < .05$

### Educational Programming by Size of Facility

#### Adult Basic Education by Size

			<i>Adult Basic Education</i>		Total
			Yes	No	
Size	Less than 500	Count %	270 77.4%	79 22.6%	349 100.0%
	500-999	Count %	238 91.2%	23 8.8%	261 100.0%
	1,000 or more	Count %	407 95.3%	20 4.7%	427 100.0%
Total		Count %	915 88.2%	122 11.8%	1,037 100.0%

$X^2 = 62.551^{***}$ ;  $V = 0.246^{***}$ ; Notes:  $***p < .001$ ;  $**p < .01$ ;  $*p < .05$

#### GED Preparation by Size

			<i>GED Preparation</i>		Total
			Yes	No	
Size	Less than 500	Count %	288 82.5%	61 17.5%	349 100.0%
	500-999	Count %	246 94.3%	15 5.7%	261 100.0%
	1,000 or more	Count %	411 96.3%	16 3.7%	427 100.0%
Total		Count %	945 91.1%	92 8.9%	1,037 100.0%

$X^2 = 49.000^{***}$ ;  $V = 0.217^{***}$ ; Notes:  $***p < .001$ ;  $**p < .01$ ;  $*p < .05$

### Special Education by Size

			<i>Special Education</i>		Total
			Yes	No	
Size	Less than 500	Count %	89 25.5%	260 74.5%	349 100.0%
	500-999	Count %	125 47.9%	136 52.1%	261 100.0%
	1,000 or more	Count %	246 57.6%	181 42.4%	427 100.0%
Total		Count %	460 44.4%	577 55.6%	1,037 100.0%

$X^2 = 81.986^{***}$ ;  $V = 0.281^{***}$ ; Notes:  $^{***}p < .001$ ;  $^{**}p < .01$ ;  $^{*}p < .05$

### Vocational Education by Size

			<i>Vocational Education</i>		Total
			Yes	No	
Size	Less than 500	Count %	146 41.8%	203 58.2%	349 100.0%
	500-999	Count %	189 72.4%	72 27.6%	261 100.0%
	1,000 or more	Count %	368 86.2%	59 13.8%	427 100.0%
Total		Count %	703 67.8%	334 32.2%	1,037 100.0%

$X^2 = 176.399^{***}$ ;  $V = 0.412^{***}$ ; Notes:  $^{***}p < .001$ ;  $^{**}p < .01$ ;  $^{*}p < .05$

### College Courses by Size

			<i>College Courses</i>		Total
			Yes	No	
Size	Less than 500	Count %	74 21.2%	275 78.8%	349 100.0%
	500-999	Count %	89 34.1%	172 65.9%	261 100.0%
	1,000 or more	Count %	157 36.8%	270 63.2%	427 100.0%
Total		Count %	320 30.9%	717 69.1%	1,037 100.0%

$X^2 = 23.523^{***}$ ;  $V = 0.151^{***}$ ; Notes:  $^{***}p < .001$ ;  $^{**}p < .01$ ;  $^{*}p < .05$

**Study Release by Size**

			<i>Study Release</i>		Total
			Yes	No	
Size	Less than 500	Count %	22 6.3%	327 93.7%	349 100.0%
	500-999	Count %	4 1.5%	257 98.5%	261 100.0%
	1,000 or more	Count %	7 1.6%	420 98.4%	427 100.0%
Total		Count %	33 3.2%	1,004 96.8%	1,037 100.0%

$X^2 = 16.642^{***}$ ;  $V = 0.127^{***}$ ; Notes:  $^{***}p < .001$ ;  $^{**}p < .01$ ;  $^{*}p < .05$

***Life-Skills Programming by Size of Facility***

**Employment Programs by Size**

			<i>Employment Programs</i>		Total
			Yes	No	
Size	Less than 500	Count %	196 56.2%	153 43.8%	349 100.0%
	500-999	Count %	158 60.5%	103 39.5%	261 100.0%
	1,000 or more	Count %	308 72.1%	119 27.9%	427 100.0%
Total		Count %	662 63.8%	375 36.2%	1,037 100.0%

$X^2 = 22.865^{***}$ ;  $V = 0.148^{***}$ ; Notes:  $^{***}p < .001$ ;  $^{**}p < .01$ ;  $^{*}p < .05$

**Life-Skills by Size**

			<i>Life-Skills</i>		Total
			Yes	No	
Size	Less than 500	Count %	231 66.2%	118 33.8%	349 100.0%
	500-999	Count %	187 71.6%	74 28.4%	261 100.0%
	1,000 or more	Count %	332 77.8%	95 22.2%	427 100.0%
Total		Count %	750 72.3%	287 27.7%	1,037 100.0%

$X^2 = 12.907^{**}$ ;  $V = 0.112^{**}$ ; Notes:  $^{***}p < .001$ ;  $^{**}p < .01$ ;  $^{*}p < .05$

### Parenting by Size

			<i>Parenting</i>		Total
			Yes	No	
Size	Less than 500	Count %	124 35.5%	225 64.5%	349 100.0%
	500-999	Count %	123 47.1%	138 52.9%	261 100.0%
	1,000 or more	Count %	202 47.3%	225 52.7%	427 100.0%
Total		Count %	449 43.3%	588 56.7%	1,037 100.0%

$X^2 = 12.931^{**}$ ;  $V = 0.112^{**}$ ; Notes:  $***p < .001$ ;  $**p < .01$ ;  $*p < .05$

### Other Life-Skills by Size

			<i>Other Life-Skills</i>		Total
			Yes	No	
Size	Less than 500	Count %	73 20.9%	276 79.1%	349 100.0%
	500-999	Count %	65 24.9%	196 75.1%	261 100.0%
	1,000 or more	Count %	154 36.1%	273 63.9%	427 100.0%
Total		Count %	292 28.2%	745 71.8%	1,037 100.0%

$X^2 = 23.611^{***}$ ;  $V = 0.151^{***}$ ; Notes:  $***p < .001$ ;  $**p < .01$ ;  $*p < .05$

### Medical Programming by Location of Facility

#### Hepatitis C Test by Location

			<i>Hepatitis C Test</i>		Total
			Yes	No	
Location	West	Count %	129 89.6%	15 10.4%	144 100.0%
	Midwest	Count %	199 89.6%	23 10.4%	222 100.0%
	South	Count %	443 90.8%	45 9.2%	488 100.0%
	Northeast	Count %	160 97.0%	5 3.0%	165 100.0%
Total		Count %	931 91.4%	88 8.6%	1,019 100.0%

$X^2 = 8.199^*$ ;  $V = 0.090^*$ ; Notes:  $***p < .001$ ;  $**p < .01$ ;  $*p < .05$

### Hepatitis C Treatment by Location

			<i>Hepatitis C Treatment</i>		Total
			Yes	No	
Location	West	Count %	113 78.5%	31 21.5%	144 100.0%
	Midwest	Count %	189 84.8%	34 15.2%	223 100.0%
	South	Count %	419 85.9%	69 14.1%	488 100.0%
	Northeast	Count %	141 86.0%	23 14.0%	164 100.0%
Total		Count %	862 84.6%	157 15.4%	1,019 100.0%

$X^2 = 4.986$ ;  $V = 0.070$ ; Notes: \*\*\* $p < .001$ ; \*\* $p < .01$ ; \* $p < .05$

### Hepatitis B Vaccine by Location

			<i>Hepatitis B Vaccine</i>		Total
			Yes	No	
Location	West	Count %	106 74.1%	37 25.9%	143 100.0%
	Midwest	Count %	166 74.4%	57 25.6%	223 100.0%
	South	Count %	408 83.8%	79 16.2%	487 100.0%
	Northeast	Count %	144 86.7%	22 13.3%	166 100.0%
Total		Count %	824 80.9%	195 19.1%	1,019 100.0%

$X^2 = 16.529^{**}$ ;  $V = 0.127^{**}$ ; Notes: \*\*\* $p < .001$ ; \*\* $p < .01$ ; \* $p < .05$

### Tuberculosis Screening by Location

			<i>Tuberculosis Screening</i>		Total
			Yes	No	
Location	West	Count %	110 72.8%	41 27.2%	151 100.0%
	Midwest	Count %	162 72.3%	62 27.7%	224 100.0%
	South	Count %	421 85.1%	74 14.9%	495 100.0%
	Northeast	Count %	154 92.2%	13 7.8%	167 100.0%
Total		Count %	847 81.7%	190 18.3%	1,037 100.0%

$X^2 = 37.125^{***}$ ;  $V = 0.189^{***}$ ; Notes: \*\*\* $p < .001$ ; \*\* $p < .01$ ; \* $p < .05$



### HIV/AIDS Test by Location

			<i>HIV/AIDS Test</i>		Total
			Yes	No	
Location	West	Count %	128 89.5%	15 10.5%	143 100.0%
	Midwest	Count %	210 94.2%	13 5.8%	223 100.0%
	South	Count %	474 97.1%	14 2.9%	488 100.0%
	Northeast	Count %	163 98.2%	3 1.8%	166 100.0%
Total		Count %	975 95.6%	45 4.4%	1,020 100.0%

$X^2 = 19.014^{***}$ ;  $V = 0.137^{***}$ ; Notes:  $^{***}p < .001$ ;  $^{**}p < .01$ ;  $^{*}p < .05$

### HIV/AIDS Counseling by Location

			<i>HIV/AIDS Counseling</i>		Total
			Yes	No	
Location	West	Count %	71 47.0%	80 53.0%	151 100.0%
	Midwest	Count %	134 59.8%	90 40.2%	224 100.0%
	South	Count %	255 51.5%	240 48.5%	495 100.0%
	Northeast	Count %	149 89.2%	18 10.8%	167 100.0%
Total		Count %	609 58.7%	428 41.3%	1,037 100.0%

$X^2 = 83.341^{***}$ ;  $V = 0.283^{***}$ ; Notes:  $^{***}p < .001$ ;  $^{**}p < .01$ ;  $^{*}p < .05$

### Suicide Prevention by Location

			<i>Suicide Prevention</i>		Total
			Yes	No	
Location	West	Count %	139 96.5%	5 3.5%	144 100.0%
	Midwest	Count %	220 98.2%	4 1.8%	224 100.0%
	South	Count %	478 97.8%	11 2.2%	489 100.0%
	Northeast	Count %	166 100.0%	0 0.0%	166 100.0%
Total		Count %	1,003 98.0%	20 2.0%	1,023 100.0%

$X^2 = 5.294$ ;  $V = 0.072$ ; Notes:  $^{***}p < .001$ ;  $^{**}p < .01$ ;  $^{*}p < .05$

***Mental Health Care by Location of Facility***

**Psychological Evaluations by Location**

			<i>Psychological Evaluation</i>		Total
			Yes	No	
Location	West	Count %	116 76.8%	35 23.2%	151 100.0%
	Midwest	Count %	147 65.6%	77 34.4%	224 100.0%
	South	Count %	401 81.0%	94 19.0%	495 100.0%
	Northeast	Count %	139 83.2%	28 16.8%	167 100.0%
Total	Count %	803 77.4%	234 22.6%	1,037 100.0%	

$X^2 = 24.747^{***}$ ;  $V = 0.154^{***}$ ; Notes:\*\*\* $p < .001$ ; \*\* $p < .01$ ; \* $p < .05$

**24-Hour Mental Health Care by Location**

			<i>24-Hour Mental Health Care</i>		Total
			Yes	No	
Location	West	Count %	107 70.9%	44 29.1%	151 100.0%
	Midwest	Count %	121 54.0%	103 46.0%	224 100.0%
	South	Count %	290 58.6%	205 41.4%	495 100.0%
	Northeast	Count %	132 79.0%	35 21.0%	167 100.0%
Total	Count %	650 62.7%	387 37.3%	1,037 100.0%	

$X^2 = 34.165^{***}$ ;  $V = 0.182^{***}$ ; Notes:\*\*\* $p < .001$ ; \*\* $p < .01$ ; \* $p < .05$

### Therapy/Counseling by Location

			Therapy/Counseling		Total
			Yes	No	
Location	West	Count %	118 78.1%	33 21.9%	151 100.0%
	Midwest	Count %	183 81.7%	41 18.3%	224 100.0%
	South	Count %	419 84.6%	76 15.4%	495 100.0%
	Northeast	Count %	143 85.6%	24 14.4%	167 100.0%
Total		Count %	863 83.2%	174 16.8%	1,037 100.0%

$X^2 = 4.572$ ;  $V = 0.066$ ; Notes:\*\*\* $p < .001$ ; \*\* $p < .01$ ; \* $p < .05$

### Psychotropic Medication by Location

			Psychotropic Medication		Total
			Yes	No	
Location	West	Count %	121 80.1%	30 19.9%	151 100.0%
	Midwest	Count %	168 75.0%	56 25.0%	224 100.0%
	South	Count %	419 84.6%	76 15.4%	495 100.0%
	Northeast	Count %	135 80.8%	32 19.2%	167 100.0%
Total		Count %	843 81.3%	194 18.7%	1,037 100.0%

$X^2 = 9.650^*$ ;  $V = 0.096^*$ ; Notes:\*\*\* $p < .001$ ; \*\* $p < .01$ ; \* $p < .05$

### Assist to Community Care by Location

			Assist to Community Care		Total
			Yes	No	
Location	West	Count %	100 66.2%	51 33.8%	151 100.0%
	Midwest	Count %	147 65.6%	77 34.4%	224 100.0%
	South	Count %	366 73.9%	129 26.1%	495 100.0%
	Northeast	Count %	123 73.7%	44 26.3%	167 100.0%
Total		Count %	736 71.0%	301 29.0%	1,037 100.0%

$X^2 = 7.459$ ;  $V = 0.085$ ; Notes:\*\*\* $p < .001$ ; \*\* $p < .01$ ; \* $p < .05$

**Other Mental Health Care by Location**

			<i>Other Mental Health</i>		Total
			Yes	No	
Location	West	Count %	9 6.0%	142 94.0%	151 100.0%
	Midwest	Count %	18 8.0%	206 92.0%	224 100.0%
	South	Count %	19 3.8%	476 96.2%	495 100.0%
	Northeast	Count %	13 7.8%	154 92.2%	167 100.0%
Total		Count %	59 5.7%	978 94.3%	1,037 100.0%

$X^2 = 6.846$ ;  $V = 0.081$ ; Notes:\*\*\* $p < .001$ ; \*\* $p < .01$ ; \* $p < .05$

***Substance Abuse Programming by Location of Facility***

**Drug Treatment by Location**

			<i>Drug Treatment</i>		Total
			Yes	No	
Location	West	Count %	134 88.7%	17 11.3%	151 100.0%
	Midwest	Count %	198 88.4%	26 11.6%	224 100.0%
	South	Count %	449 90.7%	46 9.3%	495 100.0%
	Northeast	Count %	160 95.8%	7 4.2%	167 100.0%
Total		Count %	941 90.7%	96 9.3%	1,037 100.0%

$X^2 = 7.294$ ;  $V = 0.084$ ; Notes:\*\*\* $p < .001$ ; \*\* $p < .01$ ; \* $p < .05$

### Alcohol Treatment by Location

			<i>Alcohol Treatment</i>		Total
			Yes	No	
Location	West	Count %	137 90.7%	14 9.3%	151 100.0%
	Midwest	Count %	198 88.4%	26 11.6%	224 100.0%
	South	Count %	455 91.9%	40 8.1%	495 100.0%
	Northeast	Count %	158 94.6%	9 5.4%	167 100.0%
Total		Count %	948 91.4%	89 8.6%	1,037 100.0%

$X^2 = 5.033$ ;  $V = 0.070$ ; Notes:\*\*\* $p < .001$ ; \*\* $p < .01$ ; \* $p < .05$

### Work Assignments by Location of Facility

#### Prison Industries by Location

			<i>Prison Industries</i>		Total
			Yes	No	
Location	West	Count %	90 59.6%	61 40.4%	151 100.0%
	Midwest	Count %	113 50.4%	111 49.6%	224 100.0%
	South	Count %	179 36.2%	316 63.8%	495 100.0%
	Northeast	Count %	72 43.1%	95 56.9%	167 100.0%
Total		Count %	454 43.8%	583 56.2%	1,037 100.0%

$X^2 = 31.106$ \*\*\*;  $V = 0.173$ \*\*\*; Notes:\*\*\* $p < .001$ ; \*\* $p < .01$ ; \* $p < .05$

### Facility Support by Location

			<i>Facility Support</i>		Total
			Yes	No	
Location	West	Count %	137 90.7%	14 9.3%	151 100.0%
	Midwest	Count %	209 93.3%	15 6.7%	224 100.0%
	South	Count %	485 98.0%	10 2.0%	495 100.0%
	Northeast	Count %	162 97.0%	5 3.0%	167 100.0%
Total		Count %	993 95.8%	44 4.2%	1,037 100.0%

$X^2 = 19.377^{***}$ ;  $V = 0.137^{***}$ ; Notes:\*\*\* $p < .001$ ; \*\* $p < .01$ ; \* $p < .05$

### Farming/Agriculture by Location

			<i>Farming/Agriculture</i>		Total
			Yes	No	
Location	West	Count %	41 27.2%	110 72.8%	151 100.0%
	Midwest	Count %	36 16.1%	188 83.9%	224 100.0%
	South	Count %	216 43.6%	279 56.4%	495 100.0%
	Northeast	Count %	32 19.2%	135 80.8%	167 100.0%
Total		Count %	325 31.3%	712 68.7%	1,037 100.0%

$X^2 = 71.791^{***}$ ;  $V = 0.263^{***}$ ; Notes:\*\*\* $p < .001$ ; \*\* $p < .01$ ; \* $p < .05$

### Public Works by Location

			<i>Public Works</i>		Total
			Yes	No	
Location	West	Count %	93 61.6%	58 38.4%	151 100.0%
	Midwest	Count %	125 55.8%	99 44.2%	224 100.0%
	South	Count %	341 68.9%	154 31.1%	495 100.0%
	Northeast	Count %	92 55.1%	75 44.9%	167 100.0%
Total		Count %	651 62.8%	386 37.2%	1,037 100.0%

$X^2 = 16.889^{**}$ ;  $V = 0.128^{**}$ ; Notes:\*\*\* $p < .001$ ; \*\* $p < .01$ ; \* $p < .05$

### Work Release by Location

			Work Release		Total
			Yes	No	
Location	West	Count %	10 6.9%	134 93.1%	144 100.0%
	Midwest	Count %	22 9.8%	202 90.2%	224 100.0%
	South	Count %	40 8.1%	452 91.9%	492 100.0%
	Northeast	Count %	29 17.5%	137 82.5%	166 100.0%
Total		Count %	101 9.8%	925 90.2%	1,026 100.0%

$X^2 = 13.870^{**}$ ;  $V = 0.116^{**}$ ; Notes:\*\*\* $p < .001$ ; \*\* $p < .01$ ; \* $p < .05$

### Other Work Assignments by Location

			Other Work		Total
			Yes	No	
Location	West	Count %	22 14.6%	129 85.4%	151 100.0%
	Midwest	Count %	30 13.4%	194 86.6%	224 100.0%
	South	Count %	80 16.2%	415 83.8%	495 100.0%
	Northeast	Count %	22 13.2%	145 86.8%	167 100.0%
Total		Count %	154 14.9%	883 85.1%	1,037 100.0%

$X^2 = 1.430$ ;  $V = 0.037$ ; Notes:\*\*\* $p < .001$ ; \*\* $p < .01$ ; \* $p < .05$

**Educational Programming by Location of Facility**

**Adult Basic Education by Location**

			<i>Adult Basic Education</i>		Total
			Yes	No	
Location	West	Count %	132 87.4%	19 12.6%	151 100.0%
	Midwest	Count %	194 86.6%	30 13.4%	224 100.0%
	South	Count %	439 88.7%	56 11.3%	495 100.0%
	Northeast	Count %	150 89.8%	17 10.2%	167 100.0%
Total	Count %	915 88.2%	122 11.8%	1,037 100.0%	

$X^2 = 1.171$ ;  $V = 0.034$ ; Notes:\*\*\* $p < .001$ ; \*\* $p < .01$ ; \* $p < .05$

**GED Preparation by Location**

			<i>GED Preparation</i>		Total
			Yes	No	
Location	West	Count %	136 90.1%	15 9.9%	151 100.0%
	Midwest	Count %	198 88.4%	26 11.6%	224 100.0%
	South	Count %	452 91.3%	43 8.7%	495 100.0%
	Northeast	Count %	159 95.2%	8 4.8%	167 100.0%
Total	Count %	945 91.1%	92 8.9%	1,037 100.0%	

$X^2 = 5.746$ ;  $V = 0.074$ ; Notes:\*\*\* $p < .001$ ; \*\* $p < .01$ ; \* $p < .05$



### Special Education by Location

			<i>Special Education</i>		Total
			Yes	No	
Location	West	Count %	68 45.0%	83 55.0%	151 100.0%
	Midwest	Count %	114 50.9%	110 49.1%	224 100.0%
	South	Count %	181 36.6%	314 63.4%	495 100.0%
	Northeast	Count %	97 58.1%	70 41.9%	167 100.0%
Total		Count %	460 44.4%	577 55.6%	1,037 100.0%

$X^2 = 28.829^{***}$ ;  $V = 0.167^{***}$ ; Notes:\*\*\* $p < .001$ ; \*\* $p < .01$ ; \* $p < .05$

### Vocational Education by Location

			<i>Vocational Education</i>		Total
			Yes	No	
Location	West	Count %	110 72.8%	41 27.2%	151 100.0%
	Midwest	Count %	144 64.3%	80 35.7%	224 100.0%
	South	Count %	324 65.5%	171 34.5%	495 100.0%
	Northeast	Count %	125 74.9%	42 25.1%	167 100.0%
Total		Count %	703 67.8%	334 32.2%	1,037 100.0%

$X^2 = 8.078^*$ ;  $V = 0.088^*$ ; Notes:\*\*\* $p < .001$ ; \*\* $p < .01$ ; \* $p < .05$

### College Courses by Location

			<i>College Courses</i>		Total
			Yes	No	
Location	West	Count %	55 36.4%	96 63.6%	151 100.0%
	Midwest	Count %	90 40.2%	134 59.8%	224 100.0%
	South	Count %	128 25.9%	367 74.1%	495 100.0%
	Northeast	Count %	47 28.1%	120 71.9%	167 100.0%
Total		Count %	320 30.9%	717 69.1%	1,037 100.0%

$X^2 = 17.688^{**}$ ;  $V = 0.131^{**}$ ; Notes:\*\*\* $p < .001$ ; \*\* $p < .01$ ; \* $p < .05$

**Study Release by Location**

			<i>Study Release</i>		Total
			Yes	No	
Location	West	Count %	9 6.0%	142 94.0%	151 100.0%
	Midwest	Count %	7 3.1%	217 96.9%	224 100.0%
	South	Count %	13 2.6%	482 97.4%	495 100.0%
	Northeast	Count %	4 2.4%	163 97.6%	167 100.0%
Total		Count %	33 3.2%	1,004 96.8%	1,037 100.0%

$X^2 = 4.617$ ;  $V = 0.067$ ; Notes:\*\*\* $p < .001$ ; \*\* $p < .01$ ; \* $p < .05$

***Life-Skills Programming by Location of Facility***

**Employment Programs by Location**

			<i>Employment Programs</i>		Total
			Yes	No	
Location	West	Count %	105 69.5%	46 30.5%	151 100.0%
	Midwest	Count %	160 71.4%	64 28.6%	224 100.0%
	South	Count %	260 52.5%	235 47.5%	495 100.0%
	Northeast	Count %	137 82.0%	30 18.0%	167 100.0%
Total		Count %	662 63.8%	375 36.2%	1,037 100.0%

$X^2 = 59.113$ \*\*\*;  $V = 0.239$ \*\*\*; Notes:\*\*\* $p < .001$ ; \*\* $p < .01$ ; \* $p < .05$

### Life-Skills by Location

			<i>Life-Skills</i>		Total
			Yes	No	
Location	West	Count %	122 80.8%	29 19.2%	151 100.0%
	Midwest	Count %	169 75.4%	55 24.6%	224 100.0%
	South	Count %	313 63.2%	182 36.8%	495 100.0%
	Northeast	Count %	146 87.4%	21 12.6%	167 100.0%
Total		Count %	750 72.3%	287 27.7%	1,037 100.0%

$X^2 = 45.971^{***}$ ;  $V = 0.211^{***}$ ; Notes:\*\*\* $p < .001$ ; \*\* $p < .01$ ; \* $p < .05$

### Parenting by Location

			<i>Parenting</i>		Total
			Yes	No	
Location	West	Count %	81 53.6%	70 46.4%	151 100.0%
	Midwest	Count %	113 50.4%	111 49.6%	224 100.0%
	South	Count %	150 30.3%	345 69.7%	495 100.0%
	Northeast	Count %	105 62.9%	62 37.1%	167 100.0%
Total		Count %	449 43.3%	588 56.7%	1,037 100.0%

$X^2 = 71.360^{***}$ ;  $V = 0.262^{***}$ ; Notes:\*\*\* $p < .001$ ; \*\* $p < .01$ ; \* $p < .05$

### Other Life-Skills by Location

			<i>Other Life-Skills</i>		Total
			Yes	No	
Location	West	Count %	23 15.2%	128 84.8%	151 100.0%
	Midwest	Count %	40 17.9%	184 82.1%	224 100.0%
	South	Count %	164 33.1%	331 66.9%	495 100.0%
	Northeast	Count %	65 38.9%	102 61.1%	167 100.0%
Total		Count %	292 28.2%	745 71.8%	1,037 100.0%

$X^2 = 39.839^{***}$ ;  $V = 0.196^{***}$ ; Notes:\*\*\* $p < .001$ ; \*\* $p < .01$ ; \* $p < .05$

**APPENDIX B: CONTINGENCY TABLES FOR STUDY 2 CHI-SQUARE ANALYSIS**

***Medical Treatment by Gender***

**Tuberculosis Testing by Gender**

			<i>Tuberculosis Testing</i>		Total
			Yes	No	
Gender	male	Count	12,298	629	12,927
		%	95.1%	4.9%	100.0%
	female	Count	891	47	938
		%	95.0%	5.0%	100.0%
Total		Count	13,189	676	13,865
		%	95.1%	4.9%	100.0%

$X^2 = 0.040$ ;  $V = 0.002$ ; Notes:\*\*\* $p < .001$ ; \*\* $p < .01$ ; \* $p < .05$

**HIV/AIDS Testing by Gender**

			<i>HIV/AIDS Testing</i>		Total
			Yes	No	
Gender	male	Count	8,638	1,575	10,213
		%	84.6%	15.4%	100.0%
	female	Count	633	103	736
		%	86.0%	14.0%	100.0%
Total		Count	9,271	1,678	10,949
		%	84.7%	15.3%	100.0%

$X^2 = 1.077$ ;  $V = 0.010$ ; Notes:\*\*\* $p < .001$ ; \*\* $p < .01$ ; \* $p < .05$

**Medical Exam by Gender**

			<i>Medical Exam</i>		Total
			Yes	No	
Gender	male	Count	10,857	2,069	12,926
		%	84.0%	16.0%	100.0%
	female	Count	850	88	938
		%	90.6%	9.4%	100.0%
Total		Count	11,707	2,157	13,864
		%	84.4%	15.6%	100.0%

$X^2 = 29.215$ \*\*\*;  $V = 0.046$ \*\*\*;Notes: \*\*\* $p < .001$ ; \*\* $p < .01$ ; \* $p < .05$

### Dental Treatment by Gender

			<i>Dental Treatment</i>		Total
			Yes	No	
Gender	male	Count	5,587	7,349	12,936
		%	43.2%	56.8%	100.0%
	female	Count	388	549	937
		%	41.4%	58.6%	100.0%
Total		Count	5,975	7,898	13,873
		%	43.1%	56.9%	100.0%

$X^2 = 1.130$ ;  $V = 0.009$ ; Notes:\*\*\* $p < .001$ ; \*\* $p < .01$ ; \* $p < .05$

### Mental Health Care by Gender

#### Psychotropic Medication by Gender

			<i>Psychotropic Medication</i>		Total
			Yes	No	
Gender	male	Count	1,783	11,121	12,904
		%	13.8%	86.2%	100.0%
	female	Count	307	630	937
		%	32.8%	67.2%	100.0%
Total		Count	2,090	11,751	13,841
		%	15.1%	84.9%	100.0%

$X^2 = 244.612$ \*\*\*;  $V = 0.133$ \*\*\*\*; Notes:\*\*\* $p < .001$ ; \*\* $p < .01$ ; \* $p < .05$

### Mental Health Hospitalization by Gender

			<i>Hospitalization</i>		Total
			Yes	No	
Gender	male	Count	389	12,513	12,902
		%	3.0%	97.0%	100.0%
	female	Count	35	902	937
		%	3.7%	96.3%	100.0%
Total		Count	424	13,415	13,839
		%	3.1%	96.9%	100.0%

$X^2 = 1.526$ ;  $V = 0.011$ ; Notes:\*\*\* $p < .001$ ; \*\* $p < .01$ ; \* $p < .05$

### Mental Health Counseling by Gender

			<i>Counseling</i>		Total
			Yes	No	
Gender	Male	Count %	1,506 11.7%	11,391 88.3%	12,897 100.0%
	Female	Count %	253 27.1%	682 72.9%	935 100.0%
Total		Count %	1,759 12.7%	12,073 87.3%	13,832 100.0%

$X^2 = 185.828^{***}$ ;  $V = 0.116^{***}$ ; Notes:  $^{***}p < .001$ ;  $^{**}p < .01$ ;  $^{*}p < .05$

### Other Mental Health Care by Gender

			<i>Other Mental Health</i>		Total
			Yes	No	
Gender	Male	Count %	231 1.8%	12,659 98.2%	12,881 100.0%
	Female	Count %	30 3.2%	905 96.8%	935 100.0%
Total		Count %	261 1.9%	13,555 98.1%	13,816 100.0%

$X^2 = 9.420^{**}$ ;  $V = 0.026^{**}$ ; Notes:  $^{***}p < .001$ ;  $^{**}p < .01$ ;  $^{*}p < .05$

### Substance Abuse Programs by Gender

#### Detoxification by Gender

			<i>Detoxification</i>		Total
			Yes	No	
Gender	male	Count %	76 0.6%	12,042 99.4%	12,118 100.0%
	female	Count %	14 1.6%	851 98.4%	865 100.0%
Total		Count %	90 0.7%	12,893 99.3%	12,983 100.0%

$X^2 = 11.526^{**}$ ;  $V = 0.030^{**}$ ; Notes:  $^{***}p < .001$ ;  $^{**}p < .01$ ;  $^{*}p < .05$

### Inpatient Treatment by Gender

			<i>Inpatient Treatment</i>		Total
			Yes	No	
Gender	male	Count	873	11,242	12,115
		%	7.2%	92.8%	100.0%
	female	Count	105	759	864
		%	12.2%	87.8%	100.0%
Total		Count	978	12,001	12,979
		%	7.5%	92.5%	100.0%

$X^2 = 28.325^{***}$ ;  $V = 0.047^{***}$ ; Notes:  $^{***}p < .001$ ;  $^{**}p < .01$ ;  $^{*}p < .05$

### Outpatient Treatment by Gender

			<i>Outpatient Treatment</i>		Total
			Yes	No	
Gender	male	Count	608	11,505	12,113
		%	5.0%	95.0%	100.0%
	female	Count	64	800	864
		%	7.4%	92.6%	100.0%
Total		Count	672	12,305	12,977
		%	5.2%	94.8%	100.0%

$X^2 = 9.366^{**}$ ;  $V = 0.027^{**}$ ; Notes:  $^{***}p < .001$ ;  $^{**}p < .01$ ;  $^{*}p < .05$

### Self-Help/Peer Counseling by Gender

			<i>Self-Help/Peer Counseling</i>		Total
			Yes	No	
Gender	male	Count	3,032	9,079	12,111
		%	25.0%	75.0%	100.0%
	female	Count	245	620	865
		%	28.3%	71.7%	100.0%
Total		Count	3,277	9,699	12,976
		%	25.3%	74.7%	100.0%

$X^2 = 4.625^{*}$ ;  $V = 0.019^{*}$ ; Notes:  $^{***}p < .001$ ;  $^{**}p < .01$ ;  $^{*}p < .05$

### Education/Awareness by Gender

			<i>Education/Awareness</i>		Total
			Yes	No	
Gender	male	Count %	1,821 15.0%	10,287 85.0%	12,108 100.0%
	female	Count %	135 15.6%	729 84.4%	864 100.0%
Total		Count %	1,956 15.1%	11,016 84.9%	12,972 100.0%

$X^2 = 0.216$ ;  $V = 0.004$ ; Notes: \*\*\* $p < .001$ ; \*\* $p < .01$ ; \* $p < .05$

### Maintenance by Gender

			<i>Maintenance</i>		Total
			Yes	No	
Gender	male	Count %	19 0.2%	12,097 99.8%	12,116 100.0%
	female	Count %	5 0.6%	860 99.4%	865 100.0%
Total		Count %	24 0.2%	12,957 99.8%	12,981 100.0%

$X^2 = 7.762^{**}$ ;  $V = 0.024^{**}$ ; Notes: \*\*\* $p < .001$ ; \*\* $p < .01$ ; \* $p < .05$

### Other Substance Abuse Programs by Gender

			<i>Other Substance Abuse</i>		Total
			Yes	No	
Gender	male	Count %	168 1.4%	11,950 98.6%	12,118 100.0%
	female	Count %	13 1.5%	852 98.5%	865 100.0%
Total		Count %	181 1.4%	12,802 98.6%	12,983 100.0%

$X^2 = 0.080$ ;  $V = 0.002$ ; Notes: \*\*\* $p < .001$ ; \*\* $p < .01$ ; \* $p < .05$



## Recreational Programming by Gender

### Physical Exercise by Gender

			<i>Physical Exercise</i>		Total
			Yes	No	
Gender	male	Count	7,911	4,989	12,900
		%	61.3%	38.7%	100.0%
	female	Count	350	584	934
		%	37.5%	62.5%	100.0%
Total		Count	8,261	5,573	13,834
		%	59.7%	40.3%	100.0%

$X^2 = 205.980^{***}$ ;  $V = 0.122^{***}$ ; Notes:  $^{***}p < .001$ ;  $^{**}p < .01$ ;  $^{*}p < .05$

### Watching Television by Gender

			<i>Watching Television</i>		Total
			Yes	No	
Gender	male	Count	8,939	3,961	12,900
		%	69.3%	30.7%	100.0%
	female	Count	485	449	934
		%	51.9%	48.1%	100.0%
Total		Count	9,424	4,410	13,834
		%	68.1%	31.9%	100.0%

$X^2 = 120.970^{***}$ ;  $V = 0.094^{***}$ ; Notes:  $^{***}p < .001$ ;  $^{**}p < .01$ ;  $^{*}p < .05$

### Reading by Gender

			<i>Reading</i>		Total
			Yes	No	
Gender	male	Count	9,615	3,281	12,896
		%	74.6%	25.4%	100.0%
	female	Count	697	236	933
		%	74.7%	25.3%	100.0%
Total		Count	10,312	3,517	13,829
		%	74.6%	25.4%	100.0%

$X^2 = 0.010$ ;  $V = 0.001$ ; Notes:  $^{***}p < .001$ ;  $^{**}p < .01$ ;  $^{*}p < .05$

### Phone Calls by Gender

			<i>Phone Calls</i>		Total
			Yes	No	
Gender	male	Count	10,801	2,082	12,883
		%	83.8%	16.2%	100.0%
	female	Count	771	162	933
		%	82.6%	17.4%	100.0%
Total		Count	11,572	2,244	13,816
		%	83.8%	16.2%	100.0%

$X^2 = 0.925$ ;  $V = 0,008$ ; Notes: \*\*\* $p < .001$ ; \*\* $p < .01$ ; \* $p < .05$

### Other Recreation by Gender

			<i>Other Recreation</i>		Total
			Yes	No	
Gender	male	Count	5,252	7,651	12,903
		%	40.7%	59.3%	100.0%
	female	Count	343	591	934
		%	36.7%	63.3%	100.0%
Total		Count	5,595	8,242	13,837
		%	40.4%	59.6%	100.0%

$X^2 = 5.728^*$ ;  $V = 0.020^*$ ; Notes: \*\*\* $p < .001$ ; \*\* $p < .01$ ; \* $p < .05$

### Religious Programs by Gender

### Religious Programs by Gender

			<i>Religious Programs</i>		Total
			Yes	No	
Gender	male	Count	3,853	9,028	12,881
		%	29.9%	70.1%	100.0%
	female	Count	341	341	934
		%	36.5%	36.5%	100.0%
Total		Count	4,194	4,194	13,815
		%	30.4%	30.4%	100.0%

$X^2 = 17.928^{***}$ ;  $V = 0.036^{***}$ ; Notes: \*\*\* $p < .001$ ; \*\* $p < .01$ ; \* $p < .05$

**Work Assignments by Gender**

**Work Assignments On-Grounds by Gender**

			<i>On-Grounds</i>		Total
			Yes	No	
Gender	male	Count	7,725	5,177	12,902
		%	59.9%	40.1%	100.0%
	female	Count	592	343	935
		%	63.3%	36.7%	100.0%
Total		Count	8,317	5,520	13,837
		%	60.1%	39.9%	100.0%

$X^2 = 4.305^*$ ;  $V = 0.018^*$ ; Notes: \*\*\* $p < .001$ ; \*\* $p < .01$ ; \* $p < .05$

**Work Assignments Off-Grounds by Gender**

			<i>Off-Grounds</i>		Total
			Yes	No	
Gender	male	Count	950	11,955	12,905
		%	7.4%	92.6%	100.0%
	female	Count	84	851	935
		%	9.0%	91.0%	100.0%
Total		Count	1,034	12,806	13,840
		%	7.5%	92.5%	100.0%

$X^2 = 3.320$ ;  $V = 0.015$ ; Notes: \*\*\* $p < .001$ ; \*\* $p < .01$ ; \* $p < .05$

**Janitorial Work by Gender**

			<i>Janitorial Work</i>		Total
			Yes	No	
Gender	male	Count	2,402	10,500	12,902
		%	18.6%	81.4%	100.0%
	female	Count	176	759	935
		%	18.8%	81.2%	100.0%
Total		Count	2,578	11,259	13,837
		%	18.6%	81.4%	100.0%

$X^2 = 0.024$ ;  $V = 0.001$ ; Notes: \*\*\* $p < .001$ ; \*\* $p < .01$ ; \* $p < .05$

### Grounds/Road Maintenance by Gender

			<i>Grounds/Road Maintenance</i>		Total
			Yes	No	
Gender	male	Count %	1,046 8.1%	11,856 91.9%	12,902 100.0%
	female	Count %	65 7.0%	870 93.0%	935 100.0%
Total		Count %	1,111 8.0%	12,726 92.0%	13,837 100.0%

$X^2 = 1.576$ ;  $V = 0.011$ ; Notes: \*\*\* $p < .001$ ; \*\* $p < .01$ ; \* $p < .05$

### Food Preparation by Gender

			<i>Food Preparation</i>		Total
			Yes	No	
Gender	male	Count %	1,521 11.8%	11,381 88.2%	12,902 100.0%
	female	Count %	139 14.9%	796 85.1%	935 100.0%
Total		Count %	1,660 12.0%	12,177 88.0%	13,837 100.0%

$X^2 = 7.821^{**}$ ;  $V = 0.024^{**}$ ; Notes: \*\*\* $p < .001$ ; \*\* $p < .01$ ; \* $p < .05$

### Laundry by Gender

			<i>Laundry</i>		Total
			Yes	No	
Gender	male	Count %	400 3.1%	12,502 96.9%	12,902 100.0%
	female	Count %	45 4.8%	890 95.2%	935 100.0%
Total		Count %	445 3.2%	13,392 96.8%	13,837 100.0%

$X^2 = 8.215$ ;  $V = 0.024$ ; Notes: \*\*\* $p < .001$ ; \*\* $p < .01$ ; \* $p < .05$

### Medical Services by Gender

			<i>Medical Services</i>		Total
			Yes	No	
Gender	male	Count %	78 0.6%	12,824 99.4%	12,902 100.0%
	female	Count %	8 0.9%	927 99.1%	935 100.0%
Total		Count %	86 0.6%	13,751 99.4%	13,837 100.0%

$X^2 = 0.890$ ;  $V = 0.008$ ; Notes: \*\*\* $p < .001$ ; \*\* $p < .01$ ; \* $p < .05$

### Farming/Forestry/Ranching by Gender

			<i>Farming/Forestry/Ranching</i>		Total
			Yes	No	
Gender	male	Count %	296 2.3%	12,606 97.7%	12,902 100.0%
	female	Count %	14 1.5%	921 98.5%	935 100.0%
Total		Count %	310 2.2%	13,527 97.8%	13,837 100.0%

$X^2 = 2.528$ ;  $V = 0.014$ ; Notes: \*\*\* $p < .001$ ; \*\* $p < .01$ ; \* $p < .05$

### Goods Production by Gender

			<i>Goods Production</i>		Total
			Yes	No	
Gender	male	Count %	425 3.3%	12,477 96.7%	12,902 100.0%
	female	Count %	27 2.9%	907 97.1%	934 100.0%
Total		Count %	452 3.3%	13,384 96.7%	13,836 100.0%

$X^2 = 0.448$ ;  $V = 0.006$ ; Notes: \*\*\* $p < .001$ ; \*\* $p < .01$ ; \* $p < .05$

### Other Services by Gender

			<i>Other Services</i>		Total
			Yes	No	
Gender	male	Count	830	12,072	12,902
		%	6.4%	93.6%	100.0%
	female	Count	85	850	935
		%	9.1%	90.9%	100.0%
Total		Count	915	12,922	13,837
		%	6.6%	93.4%	100.0%

$X^2 = 9.972^{**}$ ;  $V = 0.027^{**}$ ; Notes: \*\*\* $p < .001$ ; \*\* $p < .01$ ; \* $p < .05$

### Maintenance/Construction by Gender

			<i>Maintenance/Construction</i>		Total
			Yes	No	
Gender	male	Count	662	12,240	12,902
		%	5.1%	94.9%	100.0%
	female	Count	34	901	935
		%	3.6%	96.4%	100.0%
Total		Count	696	13,141	13,837
		%	5.0%	95.0%	100.0%

$X^2 = 4.077^*$ ;  $V = 0.017^*$ ; Notes: \*\*\* $p < .001$ ; \*\* $p < .01$ ; \* $p < .05$

### Other Work Assignments by Gender

			<i>Other Work Assignments</i>		Total
			Yes	No	
Gender	male	Count	1,316	11,585	12,901
		%	10.2%	89.8%	100.0%
	female	Count	123	811	934
		%	13.2%	86.8%	100.0%
Total		Count	1,439	12,396	13,835
		%	10.4%	89.6%	100.0%

$X^2 = 8.235^{**}$ ;  $V = 0.024^{**}$ ; Notes: \*\*\* $p < .001$ ; \*\* $p < .01$ ; \* $p < .05$

### **Paid for Work by Gender**

			<i>Paid for Work</i>		Total
			Yes	No	
Gender	male	Count	4,897	7,985	12,882
		%	38.0%	62.0%	100.0%
	female	Count	365	568	933
		%	39.1%	60.9%	100.0%
Total		Count	5,262	8,553	13,815
		%	38.1%	61.9%	100.0%

$X^2 = 0.452$ ;  $V = 0.006$ ; Notes: \*\*\* $p < .001$ ; \*\* $p < .01$ ; \* $p < .05$

### ***Vocational Training Programs by Gender***

#### **Vocational Training by Gender**

			<i>Vocational Training</i>		Total
			Yes	No	
Gender	male	Count	3,558	9,332	12,890
		%	27.6%	72.4%	100.0%
	female	Count	241	693	934
		%	25.8%	74.2%	100.0%
Total		Count	3,799	10,025	13,824
		%	27.5%	72.5%	100.0%

$X^2 = 1.416$ ;  $V = 0.010$ ; Notes: \*\*\* $p < .001$ ; \*\* $p < .01$ ; \* $p < .05$

### ***Educational Programming by Gender***

#### **Adult Basic Education by Gender**

			<i>Adult Basic Education</i>		Total
			Yes	No	
Gender	male	Count	254	12,640	12,894
		%	2.0%	98.0%	100.0%
	female	Count	28	906	934
		%	3.0%	97.0%	100.0%
Total		Count	282	13,546	13,828
		%	2.0%	98.0%	100.0%

$X^2 = 4.607^*$ ;  $V = 0.018^*$ ; Notes: \*\*\* $p < .001$ ; \*\* $p < .01$ ; \* $p < .05$

### High School/GED Preparation by Gender

			<i>High School/GED Preparation</i>		Total
			Yes	No	
Gender	male	Count %	2,506 19.4%	10,388 80.6%	12,894 100.0%
	female	Count %	166 17.8%	767 82.2%	933 100.0%
Total		Count %	2,672 19.3%	11,155 80.7%	13,827 100.0%

$X^2 = 1.507$ ;  $V = 0.010$ ; Notes: \*\*\* $p < .001$ ; \*\* $p < .01$ ; \* $p < .05$

### College Courses by Gender

			<i>College Courses</i>		Total
			Yes	No	
Gender	male	Count %	921 7.1%	11,974 92.9%	12,895 100.0%
	female	Count %	82 8.8%	851 91.2%	933 100.0%
Total		Count %	1,003 7.3%	12,825 92.7%	13,828 100.0%

$X^2 = 3.506$ ;  $V = 0.016$ ; Notes: \*\*\* $p < .001$ ; \*\* $p < .01$ ; \* $p < .05$

### English as a Second Language by Gender

			<i>English as a Second Language</i>		Total
			Yes	No	
Gender	male	Count %	137 1.1%	12,757 98.9%	12,894 100.0%
	female	Count %	7 0.7%	927 99.3%	934 100.0%
Total		Count %	144 1.0%	13,684 99.0%	13,828 100.0%

$X^2 = 0.828$ ;  $V = 0.008$ ; Notes: \*\*\* $p < .001$ ; \*\* $p < .01$ ; \* $p < .05$



### Other Educational Programs by Gender

			<i>Other Education</i>		Total
			Yes	No	
Gender	male	Count %	688 5.3%	12,207 94.7%	12,895 100.0%
	female	Count %	63 6.7%	871 93.3%	934 100.0%
Total		Count %	751 5.4%	13,078 94.6%	13,829 100.0%

$X^2 = 3.370$ ;  $V = 0.016$ ; Notes: \*\*\* $p < .001$ ; \*\* $p < .01$ ; \* $p < .05$

### Life-Skills Programming by Gender

#### Employment Counseling by Gender

			<i>Employment Counseling</i>		Total
			Yes	No	
Gender	male	Count %	1,121 8.7%	11,760 91.3%	12,881 100.0%
	female	Count %	108 11.6%	826 88.4%	934 100.0%
Total		Count %	1,229 8.9%	12,586 91.1%	13,815 100.0%

$X^2 = 8.792^{**}$ ;  $V = 0.025^{**}$ ; Notes: \*\*\* $p < .001$ ; \*\* $p < .01$ ; \* $p < .05$

### Parenting/Childrearing Classes by Gender

			<i>Parenting/Childrearing Classes</i>		Total
			Yes	No	
Gender	male	Count %	967 7.5%	11,913 92.5%	12,880 100.0%
	female	Count %	183 19.6%	751 80.4%	934 100.0%
Total		Count %	1,150 8.3%	12,664 91.7%	13,814 100.0%

$X^2 = 166.661^{***}$ ;  $V = 0.110^{***}$ ; Notes: \*\*\* $p < .001$ ; \*\* $p < .01$ ; \* $p < .05$

**Life-Skills/Community Adjustment by Gender**

			<i>Life-Skills/Community Adjustment</i>		Total
			Yes	No	
Gender	male	Count %	2,972 23.1%	9,907 76.9%	12,879 100.0%
	female	Count %	279 29.9%	279 29.9%	934 100.0%
Total		Count %	3,251 23.5%	3,251 23.5%	13,813 100.0%

$X^2 = 22.344^{***}$ ;  $V = 0.040^{***}$ ; Notes:  $^{***}p < .001$ ;  $^{**}p < .01$ ;  $^{*}p < .05$

**Pre-Release Programs by Gender**

			<i>Pre-Release Programs</i>		Total
			Yes	No	
Gender	male	Count %	675 5.2%	12,205 94.8%	12,880 100.0%
	female	Count %	64 6.9%	869 93.1%	933 100.0%
Total		Count %	739 5.4%	13,074 94.6%	13,813 100.0%

$X^2 = 4.503^{*}$ ;  $V = 0.018^{*}$ ; Notes:  $^{***}p < .001$ ;  $^{**}p < .01$ ;  $^{*}p < .05$

**Medical Programming by Security**

**Tuberculosis Testing by Security**

			<i>Tuberculosis Testing</i>		Total
			Yes	No	
Security	Minimum	Count %	1,892 93.3%	135 6.7%	2,027 100.0%
	Medium	Count %	6,584 95.3%	322 4.7%	6,906 100.0%
	Maximum	Count %	4,574 95.7%	206 4.3%	4,780 100.0%
Total		Count %	13,050 95.2%	663 4.8%	13,713 100.0%

$X^2 = 17.988^{***}$ ;  $V = 0.036^{***}$ ; Notes:  $^{***}p < .001$ ;  $^{**}p < .01$ ;  $^{*}p < .05$

### HIV/AIDS Testing by Security

			<i>HIV/AIDS Testing</i>		Total
			Yes	No	
Security	Minimum	Count %	1,258 82.8%	261 17.2%	1,519 100.0%
	Medium	Count %	4,553 85.0%	802 15.0%	5,355 100.0%
	Maximum	Count %	3,360 84.9%	597 15.1%	3,957 100.0%
Total		Count %	9,171 84.7%	1,600 15.3%	10,831 100.0%

$X^2 = 4.711$ ;  $V = 0.021$ ; Notes: \*\*\* $p < .001$ ; \*\* $p < .01$ ; \* $p < .05$

### Medical Exam by Security

			<i>Medical Exams</i>		Total
			Yes	No	
Security	Minimum	Count %	1,639 80.7%	393 19.3%	2,032 100.0%
	Medium	Count %	5,778 83.8%	1,121 16.2%	6,899 100.0%
	Maximum	Count %	4,157 86.9%	625 13.1%	4,782 100.0%
Total		Count %	11,574 84.4%	2,139 15.6%	13,713 100.0%

$X^2 = 47.054$ \*\*\*;  $V = 0.059$ \*\*\*; Notes: \*\*\* $p < .001$ ; \*\* $p < .01$ ; \* $p < .05$

### Pelvic Exam by Security

			<i>Pelvic Exam</i>		Total
			Yes	No	
Security	Minimum	Count %	153 79.7%	39 20.3%	192 100.0%
	Medium	Count %	312 84.1%	59 15.9%	371 100.0%
	Maximum	Count %	332 89.5%	39 10.5%	371 100.0%
Total		Count %	797 85.3%	137 14.7%	934 100.0%

$X^2 = 10.459$ \*\*;  $V = 0.106$ \*\*; Notes: \*\*\* $p < .001$ ; \*\* $p < .01$ ; \* $p < .05$

### Dental Treatment by Security

			<i>Dental Treatment</i>		Total
			Yes	No	
Security	Minimum	Count %	728 35.9%	1,302 64.1%	2,030 100.0%
	Medium	Count %	2,892 41.8%	4,020 58.2%	6,912 100.0%
	Maximum	Count %	2,291 47.9%	2,488 52.1%	4,779 100.0%
Total		Count %	5,911 43.1%	7,810 56.9%	13,721 100.0%

$X^2 = 93.475^{***}$ ;  $V = 0.083^{***}$ ; Notes:  $^{***}p < .001$ ;  $^{**}p < .01$ ;  $^{*}p < .05$

### Mental Health Care by Security

#### Psychotropic Medication by Security

			<i>Psychotropic Medication</i>		Total
			Yes	No	
Security	Minimum	Count %	179 8.8%	1,847 91.2%	2,026 100.0%
	Medium	Count %	980 14.2%	5,918 85.8%	6,898 100.0%
	Maximum	Count %	912 19.1%	3,853 80.9%	4,765 100.0%
Total		Count %	2,071 15.1%	11,618 84.9%	13,689 100.0%

$X^2 = 126.761^{***}$ ;  $V = 0.096^{***}$ ; Notes:  $^{***}p < .001$ ;  $^{**}p < .01$ ;  $^{*}p < .05$

### Hospitalization by Security

			<i>Hospitalization</i>		Total
			Yes	No	
Security	Minimum	Count %	19 0.9%	2,011 99.1%	2,030 100.0%
	Medium	Count %	153 2.2%	6,741 97.8%	6,894 100.0%
	Maximum	Count %	250 5.2%	4,514 94.8%	4,764 100.0%
Total		Count %	422 3.1%	13,266 96.9%	13,688 100.0%

$X^2 = 123.242^{***}$ ;  $V = 0.095^{***}$ ; Notes:  $^{***}p < .001$ ;  $^{**}p < .01$ ;  $^{*}p < .05$

### Counseling by Security

			<i>Counseling</i>		Total
			Yes	No	
Security	Minimum	Count %	143 7.1%	1,885 92.9%	2,028 100.0%
	Medium	Count %	826 12.0%	6,069 88.0%	6,895 100.0%
	Maximum	Count %	779 16.4%	3,980 83.6%	4,759 100.0%
Total		Count %	1,748 12.8%	11,934 87.2%	13,682 100.0%

$X^2 = 118.696^{***}$ ;  $V = 0.093^{***}$ ; Notes:  $^{***}p < .001$ ;  $^{**}p < .01$ ;  $^{*}p < .05$

### Other Mental Health Care by Security

			<i>Other Mental Health</i>		Total
			Yes	No	
Security	Minimum	Count %	11 0.5%	2,014 99.5%	2,025 100.0%
	Medium	Count %	129 1.9%	6,762 98.1%	6,891 100.0%
	Maximum	Count %	121 2.5%	4,628 97.5%	4,749 100.0%
Total		Count %	261 1.9%	13,404 98.1%	13,665 100.0%

$X^2 = 30.560^{***}$ ;  $V = 0.047^{***}$ ; Notes:  $^{***}p < .001$ ;  $^{**}p < .01$ ;  $^{*}p < .05$

### Substance Abuse Treatment by Security

#### Detoxification by Security

			<i>Detoxification</i>		Total
			Yes	No	
Security	Minimum	Count %	12 0.6%	1,923 99.4%	1,935 100.0%
	Medium	Count %	43 0.7%	6,448 99.3%	6,491 100.0%
	Maximum	Count %	35 0.8%	4,380 99.2%	4,415 100.0%
Total		Count %	90 0.7%	12,751 99.3%	12,841 100.0%

$X^2 = 0.854$ ;  $V = 0.008$ ; Notes:  $^{***}p < .001$ ;  $^{**}p < .01$ ;  $^{*}p < .05$

### Inpatient Treatment by Security

			<i>Inpatient Treatment</i>		Total
			Yes	No	
Security	Minimum	Count %	207 10.7%	1,724 89.3%	1,931 100.0%
	Medium	Count %	464 7.1%	6,028 92.9%	6,492 100.0%
	Maximum	Count %	288 6.5%	4,127 93.5%	4,415 100.0%
Total		Count %	959 7.5%	11,879 92.5%	12,838 100.0%

$X^2 = 36.209^{***}$ ;  $V = 0.053^{***}$ ; Notes:  $^{***}p < .001$ ;  $^{**}p < .01$ ;  $^{*}p < .05$

### Outpatient Treatment by Security

			<i>Outpatient Treatment</i>		Total
			Yes	No	
Security	Minimum	Count %	116 6.0%	1,819 94.0%	1,935 100.0%
	Medium	Count %	343 5.3%	6,142 94.7%	6,485 100.0%
	Maximum	Count %	205 4.6%	4,209 95.4%	4,414 100.0%
Total		Count %	664 5.2%	12,170 94.8%	12,834 100.0%

$X^2 = 5.357$ ;  $V = 0.020$ ; Notes:  $^{***}p < .001$ ;  $^{**}p < .01$ ;  $^{*}p < .05$

### Self-Help/Peer Counseling by Security

			<i>Self-Help/Peer Counseling</i>		Total
			Yes	No	
Security	Minimum	Count %	506 26.1%	1,430 73.9%	1,936 100.0%
	Medium	Count %	1,740 26.8%	4,746 73.2%	6,486 100.0%
	Maximum	Count %	980 22.2%	3,433 77.8%	4,413 100.0%
Total		Count %	3,226 25.1%	9,609 74.9%	12,835 100.0%

$X^2 = 31.004^{***}$ ;  $V = 0.049^{***}$ ; Notes:  $^{***}p < .001$ ;  $^{**}p < .01$ ;  $^{*}p < .05$

### Education/Awareness by Security

			<i>Education/Awareness</i>		Total
			Yes	No	
Security	Minimum	Count %	315 16.3%	1,622 83.7%	1,937 100.0%
	Medium	Count %	1,057 16.3%	5,425 83.7%	6,482 100.0%
	Maximum	Count %	569 12.9%	3,843 87.1%	4,412 100.0%
Total		Count %	1,941 15.1%	10,890 84.9%	12,831 100.0%

$X^2 = 26.065^{***}$ ;  $V = 0.045^{***}$ ; Notes:  $^{***}p < .001$ ;  $^{**}p < .01$ ;  $^{*}p < .05$

### Maintenance Drug by Security

			<i>Maintenance Drug</i>		Total
			Yes	No	
Security	Minimum	Count %	0 0.0%	1,935 100.0%	1,935 100.0%
	Medium	Count %	19 0.3%	6,473 99.7%	6,492 100.0%
	Maximum	Count %	5 0.1%	4,407 99.9%	4,412 100.0%
Total		Count %	24 0.2%	12,815 99.8%	12,839 100.0%

$X^2 = 8.795^{*}$ ;  $V = 0.026^{*}$ ; Notes:  $^{***}p < .001$ ;  $^{**}p < .01$ ;  $^{*}p < .05$

### Other Substance Abuse Treatment by Security

			<i>Other Substance Abuse Treatment</i>		Total
			Yes	No	
Security	Minimum	Count %	21 1.1%	1,914 98.9%	1,935 100.0%
	Medium	Count %	97 1.5%	6,395 98.5%	6,492 100.0%
	Maximum	Count %	59 1.3%	4,354 98.7%	4,413 100.0%
Total		Count %	177 1.4%	12,663 98.6%	12,840 100.0%

$X^2 = 1,918$ ;  $V = 0.012$ ; Notes:  $^{***}p < .001$ ;  $^{**}p < .01$ ;  $^{*}p < .05$

## Recreation Participation by Security

### Physical Exercise by Security

			<i>Physical Exercise</i>		Total
			Yes	No	
Security	Minimum	Count %	1,212 59.8%	815 40.2%	2,027 100.0%
	Medium	Count %	4,110 59.6%	2,783 40.4%	6,893 100.0%
	Maximum	Count %	2,847 59.8%	1,914 40.2%	4,761 100.0%
Total		Count %	8,169 59.7%	5,512 40.3%	13,681 100.0%

$X^2 = 0.042$ ;  $V = 0.002$ ; Notes: \*\*\* $p < .001$ ; \*\* $p < .01$ ; \* $p < .05$

### Watching Television by Security

			<i>Watching Television</i>		Total
			Yes	No	
Security	Minimum	Count %	1,292 63.7%	735 36.3%	2,027 100.0%
	Medium	Count %	4,975 72.2%	1,919 27.8%	6,894 100.0%
	Maximum	Count %	3,033 63.7%	1,729 36.3%	4,762 100.0%
Total		Count %	9,300 68.0%	4,383 32.0%	13,683 100.0%

$X^2 = 112.400$ \*\*\*;  $V = 0.091$ \*\*\*; Notes: \*\*\* $p < .001$ ; \*\* $p < .01$ ; \* $p < .05$

### Reading by Security

			<i>Reading</i>		Total
			Yes	No	
Security	Minimum	Count %	1,362 67.2%	665 32.8%	2,027 100.0%
	Medium	Count %	5,222 75.8%	1,666 24.2%	6,888 100.0%
	Maximum	Count %	3,628 76.2%	1,134 23.8%	4,762 100.0%
Total		Count %	10,212 74.7%	3,465 25.3%	13,677 100.0%

$X^2 = 70.455$ \*\*\*;  $V = 0.072$ \*\*\*; Notes: \*\*\* $p < .001$ ; \*\* $p < .01$ ; \* $p < .05$



### Phone Calls by Security

			<i>Phone Calls</i>		Total
			Yes	No	
Security	Minimum	Count %	1,729 85.6%	291 14.4%	2,020 100.0%
	Medium	Count %	5,796 84.2%	1,088 15.8%	6,884 100.0%
	Maximum	Count %	3,902 82.0%	858 18.0%	4,760 100.0%
Total		Count %	11,427 83.6%	2,237 16.4%	13,664 100.0%

$X^2 = 16.823^{***}$ ;  $V = 0.035^{***}$ ; Notes:  $^{***}p < .001$ ;  $^{**}p < .01$ ;  $^{*}p < .05$

### Other Recreation by Security

			<i>Other Recreation</i>		Total
			Yes	No	
Security	Minimum	Count %	756 37.3%	1,272 62.7%	2,028 100.0%
	Medium	Count %	3,013 43.7%	3,883 56.3%	6,896 100.0%
	Maximum	Count %	1,761 37.0%	3,002 63.0%	4,763 100.0%
Total		Count %	5,530 40.4%	8,157 59.6%	13,687 100.0%

$X^2 = 62.483^{***}$ ;  $V = 0.068^{***}$ ; Notes:  $^{***}p < .001$ ;  $^{**}p < .01$ ;  $^{*}p < .05$

### Religious Participation by Security

#### Religious Act by Security

			<i>Religious Act</i>		Total
			Yes	No	
Security	Minimum	Count %	1,135 56.0%	892 44.0%	2,027 100.0%
	Medium	Count %	3,815 55.4%	3,076 44.6%	6,891 100.0%
	Maximum	Count %	2,641 55.5%	2,121 44.5%	4,762 100.0%
Total		Count %	7,591 55.5%	6,089 44.5%	13,680 100.0%

$X^2 = 0.256$ ;  $V = 0.004$ ; Notes:  $^{***}p < .001$ ;  $^{**}p < .01$ ;  $^{*}p < .05$

**Work Assignments Participation by Security**

**On-Grounds Work Assignments by Security**

			<i>On-Grounds</i>		Total
			Yes	No	
Security	Minimum	Count %	1,159 57.1%	871 42.9%	2,030 100.0%
	Medium	Count %	4,247 61.6%	2,644 38.4%	6,891 100.0%
	Maximum	Count %	2,801 58.8%	1,964 41.2%	4,765 100.0%
Total		Count %	8,207 60.0%	5,479 40.0%	13,686 100.0%

$X^2 = 17.714^{***}$ ;  $V = 0.036^{***}$ ; Notes:  $^{***}p < .001$ ;  $^{**}p < .01$ ;  $^{*}p < .05$

**Off-Grounds Work Assignments by Security**

			<i>Off-Grounds</i>		Total
			Yes	No	
Security	Minimum	Count %	405 20.0%	1,624 80.0%	2,029 100.0%
	Medium	Count %	430 6.2%	6,463 93.8%	6,893 100.0%
	Maximum	Count %	198 4.2%	4,567 95.8%	4,765 100.0%
Total		Count %	1,033 7.5%	12,654 92.5%	13,687 100.0%

$X^2 = 543.567^{***}$ ;  $V = 0.199^{***}$ ; Notes:  $^{***}p < .001$ ;  $^{**}p < .01$ ;  $^{*}p < .05$

**Janitorial Work by Security**

			<i>Janitorial Work</i>		Total
			Yes	No	
Security	Minimum	Count %	458 22.6%	1,571 77.4%	2,029 100.0%
	Medium	Count %	1,252 18.2%	5,640 81.8%	6,892 100.0%
	Maximum	Count %	822 17.3%	3,943 82.7%	4,765 100.0%
Total		Count %	2,532 18.5%	11,154 81.5%	13,686 100.0%

$X^2 = 27.762^{***}$ ;  $V = 0.045^{***}$ ; Notes:  $^{***}p < .001$ ;  $^{**}p < .01$ ;  $^{*}p < .05$

### Grounds/Road Maintenance by Security

			<i>Grounds/Road Maintenance</i>		Total
			Yes	No	
Security	Minimum	Count %	216 10.6%	1,813 89.4%	2,029 100.0%
	Medium	Count %	457 6.6%	6,434 93.4%	6,891 100.0%
	Maximum	Count %	432 9.1%	4,333 90.9%	4,765 100.0%
Total		Count %	1,105 8.1%	12,580 91.9%	13,685 100.0%

$X^2 = 43.705^{***}$ ;  $V = 0.057^{***}$ ; Notes:  $^{***}p < .001$ ;  $^{**}p < .01$ ;  $^{*}p < .05$

### Food Preparation by Security

			<i>Food Preparation</i>		Total
			Yes	No	
Security	Minimum	Count %	290 14.3%	1,739 85.7%	2,029 100.0%
	Medium	Count %	855 12.4%	6,036 87.6%	6,891 100.0%
	Maximum	Count %	503 10.6%	4,261 89.4%	4,764 100.0%
Total		Count %	1,648 12.0%	12,036 88.0%	13,684 100.0%

$X^2 = 20.472^{***}$ ;  $V = 0.039^{***}$ ; Notes:  $^{***}p < .001$ ;  $^{**}p < .01$ ;  $^{*}p < .05$

### Laundry Services by Security

			<i>Laundry Services</i>		Total
			Yes	No	
Security	Minimum	Count %	86 4.2%	1,943 95.8%	2,029 100.0%
	Medium	Count %	231 3.4%	6,660 96.6%	6,891 100.0%
	Maximum	Count %	123 2.6%	4,641 97.4%	4,764 100.0%
Total		Count %	440 3.2%	13,244 96.8%	13,684 100.0%

$X^2 = 13.384^{**}$ ;  $V = 0.031^{**}$ ; Notes:  $^{***}p < .001$ ;  $^{**}p < .01$ ;  $^{*}p < .05$

### Medical Services by Security

			<i>Medical Services</i>		Total
			Yes	No	
Security	Minimum	Count %	8 0.4%	2,021 99.6%	2,029 100.0%
	Medium	Count %	38 0.6%	6,853 99.4%	6,891 100.0%
	Maximum	Count %	40 0.8%	4,724 99.2%	4,764 100.0%
Total		Count %	86 0.6%	13,598 99.4%	13,684 100.0%

$X^2 = 5.838$ ;  $V = 0.021$ ; Notes: \*\*\* $p < .001$ ; \*\* $p < .01$ ; \* $p < .05$

### Farming/Forestry/Ranching by Security

			<i>Farming/Forestry/Ranching</i>		Total
			Yes	No	
Security	Minimum	Count %	36 1.8%	1,993 98.2%	2,029 100.0%
	Medium	Count %	181 2.6%	6,710 97.4%	6,891 100.0%
	Maximum	Count %	93 2.0%	4,672 98.0%	4,765 100.0%
Total		Count %	310 2.3%	13,375 97.7%	13,685 100.0%

$X^2 = 8.389^*$ ;  $V = 0.025^*$ ; Notes: \*\*\* $p < .001$ ; \*\* $p < .01$ ; \* $p < .05$

### Goods Production by Security

			<i>Goods Production</i>		Total
			Yes	No	
Security	Minimum	Count %	29 1.4%	2,000 98.6%	2,029 100.0%
	Medium	Count %	248 3.6%	6,643 96.4%	6,891 100.0%
	Maximum	Count %	175 3.7%	4,590 96.3%	4,765 100.0%
Total		Count %	452 3.3%	13,233 96.7%	13,685 100.0%

$X^2 = 26.232^{***}$ ;  $V = 0.044^{***}$ ; Notes: \*\*\* $p < .001$ ; \*\* $p < .01$ ; \* $p < .05$

### Other Services by Security

			<i>Other Services</i>		Total
			Yes	No	
Security	Minimum	Count %	108 5.3%	1,921 94.7%	2,029 100.0%
	Medium	Count %	504 7.3%	6,388 92.7%	6,892 100.0%
	Maximum	Count %	290 6.1%	4,475 93.9%	4,765 100.0%
Total		Count %	902 6.6%	12,784 93.4%	13,686 100.0%

$X^2 = 13.107^{**}$ ;  $V = 0.031^{**}$ ; Notes:  $***p < .001$ ;  $**p < .01$ ;  $*p < .05$

### Maintenance/Construction by Security

			<i>Maintenance/Construction</i>		Total
			Yes	No	
Security	Minimum	Count %	125 6.2%	1,904 93.8%	2,029 100.0%
	Medium	Count %	361 5.2%	6,530 94.8%	6,891 100.0%
	Maximum	Count %	204 4.3%	4,561 95.7%	4,765 100.0%
Total		Count %	690 5.0%	12,995 95.0%	13,685 100.0%

$X^2 = 11.621^{**}$ ;  $V = 0.029^{**}$ ; Notes:  $***p < .001$ ;  $**p < .01$ ;  $*p < .05$

### Other Work Assignments by Security

			<i>Other Work</i>		Total
			Yes	No	
Security	Minimum	Count %	274 13.5%	1,755 86.5%	2,029 100.0%
	Medium	Count %	717 10.4%	6,174 89.6%	6,891 100.0%
	Maximum	Count %	422 8.9%	4,342 91.1%	4,764 100.0%
Total		Count %	1,413 10.3%	12,271 89.7%	13,684 100.0%

$X^2 = 33.265^{***}$ ;  $V = 0.049^{***}$ ; Notes:  $***p < .001$ ;  $**p < .01$ ;  $*p < .05$

**Paid for Work by Security**

			<i>Paid for Work</i>		Total
			Yes	No	
Security	Minimum	Count %	980 48.5%	1,042 51.5%	2,022 100.0%
	Medium	Count %	2,853 41.5%	4,028 58.5%	6,881 100.0%
	Maximum	Count %	1,323 27.8%	3,438 72.2%	4,761 100.0%
Total		Count %	5,156 37.7%	8,508 62.3%	13,664 100.0%

$X^2 = 340.278^{***}$ ;  $V = 0.158^{***}$ ; Notes:  $^{***}p < .001$ ;  $^{**}p < .01$ ;  $^{*}p < .05$

**Vocational Training Participation by Security**

**Vocational Training by Security**

			<i>Vocational Training</i>		Total
			Yes	No	
Security	Minimum	Count %	395 19.5%	1,631 80.5%	2,026 100.0%
	Medium	Count %	2,017 29.3%	4,867 70.7%	6,884 100.0%
	Maximum	Count %	1,339 28.1%	3,423 71.9%	4,762 100.0%
Total		Count %	3,751 27.4%	9,921 72.6%	13,672 100.0%

$X^2 = 77.274^{***}$ ;  $V = 0.075^{***}$ ; Notes:  $^{***}p < .001$ ;  $^{**}p < .01$ ;  $^{*}p < .05$

**Educational Programming Participation by Security**

**Basic Education by Security**

			<i>Basic Education</i>		Total
			Yes	No	
Security	Minimum	Count %	37 1.8%	1,991 98.2%	2,028 100.0%
	Medium	Count %	147 2.1%	6,741 97.9%	6,888 100.0%
	Maximum	Count %	90 1.9%	4,670 98.1%	4,760 100.0%
Total		Count %	274 2.0%	13,402 98.0%	13,676 100.0%

$X^2 = 1.238$ ;  $V = 0.010$ ; Notes:  $^{***}p < .001$ ;  $^{**}p < .01$ ;  $^{*}p < .05$

### High School/GED Preparation by Security

			<i>High School/GED</i>		Total
			Yes	No	
Security	Minimum	Count %	408 20.1%	1,619 79.9%	2,027 100.0%
	Medium	Count %	1,312 19.0%	5,577 81.0%	6,889 100.0%
	Maximum	Count %	913 19.2%	3,847 80.8%	4,760 100.0%
Total		Count %	2,633 19.3%	11,043 80.7%	13,676 100.0%

$X^2 = 1.207$ ;  $V = 0.009$ ; Notes: \*\*\* $p < .001$ ; \*\* $p < .01$ ; \* $p < .05$

### College Courses by Security

			<i>College Courses</i>		Total
			Yes	No	
Security	Minimum	Count %	117 5.8%	1,911 94.2%	2,028 100.0%
	Medium	Count %	505 7.3%	6,384 92.7%	6,889 100.0%
	Maximum	Count %	372 7.8%	4,388 92.2%	4,760 100.0%
Total		Count %	994 7.3%	12,683 92.7%	13,677 100.0%

$X^2 = 8.914^*$ ;  $V = 0.026^*$ ; Notes: \*\*\* $p < .001$ ; \*\* $p < .01$ ; \* $p < .05$

### English as a Second Language by Security

			<i>English as a Second Language</i>		Total
			Yes	No	
Security	Minimum	Count %	20 1.0%	2,008 99.0%	2,028 100.0%
	Medium	Count %	85 1.2%	6,803 98.8%	6,888 100.0%
	Maximum	Count %	38 0.8%	4,722 99.2%	4,760 100.0%
Total		Count %	143 1.0%	13,533 99.0%	13,676 100.0%

$X^2 = 5.246$ ;  $V = 0.020$ ; Notes: \*\*\* $p < .001$ ; \*\* $p < .01$ ; \* $p < .05$

### Other Educational Programs by Security

			<i>Other Education</i>		Total
			Yes	No	
Security	Minimum	Count %	118 5.8%	1,910 94.2%	2,028 100.0%
	Medium	Count %	417 6.1%	6,472 93.9%	6,889 100.0%
	Maximum	Count %	213 4.5%	4,547 95.5%	4,760 100.0%
Total		Count %	748 5.5%	12,929 94.5%	13,677 100.0%

$X^2 = 14.127^{**}$ ;  $V = 0.032^{**}$ ; Notes: \*\*\* $p < .001$ ; \*\* $p < .01$ ; \* $p < .05$

### Life-Skills Participation by Security

### Employment Programs by Security

			<i>Employment Programs</i>		Total
			Yes	No	
Security	Minimum	Count %	244 12.0%	1,785 88.0%	2,029 100.0%
	Medium	Count %	649 9.4%	6,233 90.6%	6,882 100.0%
	Maximum	Count %	317 6.7%	4,436 93.3%	4,753 100.0%
Total		Count %	1,210 8.9%	12,454 91.1%	13,664 100.0%

$X^2 = 56.223^{***}$ ;  $V = 0.064^{***}$ ; Notes: \*\*\* $p < .001$ ; \*\* $p < .01$ ; \* $p < .05$

### Parenting/Child-Rearing Classes by Security

			<i>Parenting/Child-Rearing Classes</i>		Total
			Yes	No	
Security	Minimum	Count %	217 10.7%	1,811 89.3%	2,028 100.0%
	Medium	Count %	619 9.0%	6,262 91.0%	6,881 100.0%
	Maximum	Count %	301 6.3%	4,451 93.7%	4,752 100.0%
Total		Count %	1,137 8.3%	12,524 91.7%	13,661 100.0%

$X^2 = 43.735^{***}$ ;  $V = 0.057^{***}$ ; Notes: \*\*\* $p < .001$ ; \*\* $p < .01$ ; \* $p < .05$



### Life-Skills/Community Adjustment by Security

			<i>Life-Skills/Community Adjustment</i>		Total
			Yes	No	
Security	Minimum	Count %	545 26.9%	1,483 73.1%	2,028 100.0%
	Medium	Count %	1,713 24.9%	5,168 75.1%	6,881 100.0%
	Maximum	Count %	918 19.3%	3,833 80.7%	4,751 100.0%
Total		Count %	3,176 23.3%	10,484 76.7%	13,660 100.0%

$X^2 = 66.428^{***}$ ;  $V = 0.070^{***}$ ; Notes:  $^{***}p < .001$ ;  $^{**}p < .01$ ;  $^{*}p < .05$

### Pre-Release Programs by Security

			<i>Pre-Release</i>		Total
			Yes	No	
Security	Minimum	Count %	128 6.3%	1,901 93.7%	2,029 100.0%
	Medium	Count %	398 5.8%	6,484 94.2%	6,882 100.0%
	Maximum	Count %	204 4.3%	4,547 95.7%	4,751 100.0%
Total		Count %	730 5.3%	12,932 94.7%	13,662 100.0%

$X^2 = 16.716^{***}$ ;  $V = 0.035^{***}$ ; Notes:  $^{***}p < .001$ ;  $^{**}p < .01$ ;  $^{*}p < .05$

### Mental Health Care Participation by Size

#### Psychotropic Medication by Size

			<i>Psychotropic Medication</i>		Total
			Yes	No	
Size	Less than 500	Count %	152 9.4%	1,472 90.6%	1,624 100.0%
	500-999	Count %	427 19.1%	1,808 80.9%	2,235 100.0%
	1,000 or more	Count %	1,492 15.2%	8,338 84.8%	9,830 100.0%
Total		Count %	2,071 15.1%	11,618 84.9%	13,689 100.0%

$X^2 = 69.637^{***}$ ;  $V = 0.071^{***}$ ; Notes:  $^{***}p < .001$ ;  $^{**}p < .01$ ;  $^{*}p < .05$

### Hospitalization by Size

			<i>Hospitalization</i>		Total
			Yes	No	
Size	Less than 500	Count %	20 1.2%	1,604 98.8%	1,624 100.0%
	500-999	Count %	95 4.2%	2,141 95.8%	2,236 100.0%
	1,000 or more	Count %	306 3.1%	9,521 96.9%	9,827 100.0%
Total		Count %	421 3.1%	13,266 96.9%	13,687 100.0%

$X^2 = 28.893^{***}$ ;  $V = 0.046^{***}$ ; Notes:  $^{***}p < .001$ ;  $^{**}p < .01$ ;  $^{*}p < .05$

### Counseling by Size

			<i>Counseling</i>		Total
			Yes	No	
Size	Less than 500	Count %	146 9.0%	1,478 91.0%	1,624 100.0%
	500-999	Count %	372 16.7%	1,860 83.3%	2,232 100.0%
	1,000 or more	Count %	1,231 12.5%	8,596 87.5%	9,827 100.0%
Total		Count %	1,749 12.8%	11,934 87.2%	13,683 100.0%

$X^2 = 51.732^{***}$ ;  $V = 0.061^{***}$ ; Notes:  $^{***}p < .001$ ;  $^{**}p < .01$ ;  $^{*}p < .05$

### Other Mental Health Care by Size

			<i>Other Mental Health Care</i>		Total
			Yes	No	
Size	Less than 500	Count %	15 0.9%	1,608 99.1%	1,623 100.0%
	500-999	Count %	48 2.2%	2,178 97.8%	2,226 100.0%
	1,000 or more	Count %	198 2.0%	9,618 98.0%	9,816 100.0%
Total		Count %	261 1.9%	13,404 98.1%	13,665 100.0%

$X^2 = 9.740^{**}$ ;  $V = 0.027^{**}$ ; Notes:  $^{***}p < .001$ ;  $^{**}p < .01$ ;  $^{*}p < .05$

### *Substance Abuse Treatment Participation by Size*

### Detoxification by Size

			<i>Detoxification</i>		Total
			Yes	No	
Size	Less than 500	Count %	10 0.6%	1,540 99.4%	1,550 100.0%
	500-999	Count %	16 0.8%	2,081 99.2%	2,097 100.0%
	1,000 or more	Count %	64 0.7%	9,130 99.3%	9,194 100.0%
Total		Count %	90 0.7%	12,751 99.3%	12,841 100.0%

$X^2 = 0.188$ ;  $V = 0.004$ ; Notes: \*\*\* $p < .001$ ; \*\* $p < .01$ ; \* $p < .05$

### Inpatient Treatment by Size

			<i>Inpatient Treatment</i>		Total
			Yes	No	
Size	Less than 500	Count %	229 14.8%	1,319 85.2%	1,548 100.0%
	500-999	Count %	183 8.7%	1,913 91.3%	2,096 100.0%
	1,000 or more	Count %	547 6.0%	8,646 94.0%	9,193 100.0%
Total		Count %	959 7.5%	11,878 92.5%	12,837 100.0%

$X^2 = 155.641$ \*\*\*;  $V = 0.110$ \*\*\*; Notes: \*\*\* $p < .001$ ; \*\* $p < .01$ ; \* $p < .05$

### Outpatient Treatment by Size

			<i>Outpatient Treatment</i>		Total
			Yes	No	
Size	Less than 500	Count %	110 7.1%	1,439 92.9%	1,549 100.0%
	500-999	Count %	146 7.0%	1,949 93.0%	2,095 100.0%
	1,000 or more	Count %	409 4.5%	8,782 95.5%	9,191 100.0%
Total		Count %	665 5.2%	12,170 94.8%	12,835 100.0%

$X^2 = 35.258$ \*\*\*;  $V = 0.052$ \*\*\*; Notes: \*\*\* $p < .001$ ; \*\* $p < .01$ ; \* $p < .05$

### Self-Help/Peer Counseling by Size

			<i>Self-Help/Peer Counseling</i>		Total
			Yes	No	
Size	Less than 500	Count %	465 30.0%	1,085 70.0%	1,550 100.0%
	500-999	Count %	631 30.1%	1,466 69.9%	2,097 100.0%
	1,000 or more	Count %	2,129 23.2%	7,058 76.8%	9,187 100.0%
Total		Count %	3,225 25.1%	9,609 74.9%	12,834 100.0%

$X^2 = 65.648^{***}$ ;  $V = 0.072^{***}$ ; Notes:  $^{***}p < .001$ ;  $^{**}p < .01$ ;  $^{*}p < .05$

### Education/Awareness by Size

			<i>Education/Awareness</i>		Total
			Yes	No	
Size	Less than 500	Count %	295 19.0%	1,255 81.0%	1,550 100.0%
	500-999	Count %	398 19.0%	1,698 81.0%	2,096 100.0%
	1,000 or more	Count %	1,249 13.6%	7,936 86.4%	9,185 100.0%
Total		Count %	1,942 15.1%	10,889 84.9%	12,831 100.0%

$X^2 = 59.449^{***}$ ;  $V = 0.068^{***}$ ; Notes:  $^{***}p < .001$ ;  $^{**}p < .01$ ;  $^{*}p < .05$

### Maintenance Drug by Size

			<i>Maintenance Drug</i>		Total
			Yes	No	
Size	Less than 500	Count %	4 0.3%	1,546 99.7%	1,550 100.0%
	500-999	Count %	7 0.3%	2,089 99.7%	2,096 100.0%
	1,000 or more	Count %	13 0.1%	9,181 99.9%	9,194 100.0%
Total		Count %	24 0.2%	12,816 99.8%	12,840 100.0%

$X^2 = 3.871$ ;  $V = 0.017$ ; Notes:  $^{***}p < .001$ ;  $^{**}p < .01$ ;  $^{*}p < .05$

### Other Substance Abuse Treatment by Size

			<i>Other Substance Abuse</i>		Total
			Yes	No	
Size	Less than 500	Count %	33 2.1%	1,517 97.9%	1,550 100.0%
	500-999	Count %	37 1.8%	2,059 98.2%	2,096 100.0%
	1,000 or more	Count %	107 1.2%	9,087 98.8%	9,194 100.0%
Total		Count %	177 1.4%	12,663 98.6%	12,840 100.0%

$X^2 = 11.846^{**}$ ;  $V = 0.030^{**}$ ; Notes: \*\*\* $p < .001$ ; \*\* $p < .01$ ; \* $p < .05$

### *Recreational Participation by Size*

#### **Physical Exercise by Size**

			<i>Physical Exercise</i>		Total
			Yes	No	
Size	Less than 500	Count %	948 58.4%	675 41.6%	1,623 100.0%
	500-999	Count %	1,291 57.8%	944 42.4%	2,235 100.0%
	1,000 or more	Count %	5,931 60.4%	3,894 39.6%	9,825 100.0%
Total		Count %	8,170 59.7%	5,513 40.3%	13,683 100.0%

$X^2 = 6.421^*$ ;  $V = 0.022^*$ ; Notes: \*\*\* $p < .001$ ; \*\* $p < .01$ ; \* $p < .05$

#### **Watching Television by Size**

			<i>Watching Television</i>		Total
			Yes	No	
Size	Less than 500	Count %	974 60.0%	648 40.0%	1,622 100.0%
	500-999	Count %	1,534 68.5%	704 31.5%	2,238 100.0%
	1,000 or more	Count %	6,792 69.1%	3,032 30.9%	9,824 100.0%
Total		Count %	9,300 68.0%	4,384 32.0%	13,684 100.0%

$X^2 = 53.216^{***}$ ;  $V = 0.062^{***}$ ; Notes: \*\*\* $p < .001$ ; \*\* $p < .01$ ; \* $p < .05$

### Reading by Size

			<i>Reading</i>		Total
			Yes	No	
Size	Less than 500	Count %	1,105 68.1%	517 31.9%	1,622 100.0%
	500-999	Count %	1,734 77.5%	503 22.5%	2,237 100.0%
	1,000 or more	Count %	7,373 75.1%	2,445 24.9%	9,818 100.0%
Total		Count %	10,212 74.7%	3,465 25.3%	13,677 100.0%

$X^2 = 47.237^{***}$ ;  $V = 0.059^{***}$ ; Notes:  $^{***}p < .001$ ;  $^{**}p < .01$ ;  $^{*}p < .05$

### Phone Calls by Size

			<i>Phone Calls</i>		Total
			Yes	No	
Size	Less than 500	Count %	1,398 86.2%	224 13.8%	1,622 100.0%
	500-999	Count %	2,027 90.7%	207 9.3%	2,234 100.0%
	1,000 or more	Count %	8,002 81.6%	1,806 18.4%	9,808 100.0%
Total		Count %	11,427 83.6%	2,237 16.4%	13,664 100.0%

$X^2 = 120.029^{***}$ ;  $V = 0.094^{***}$ ; Notes:  $^{***}p < .001$ ;  $^{**}p < .01$ ;  $^{*}p < .05$

### Other Recreation by Size

			<i>Other Recreation</i>		Total
			Yes	No	
Size	Less than 500	Count %	587 36.2%	1,035 63.8%	1,622 100.0%
	500-999	Count %	975 43.6%	1,261 56.4%	2,236 100.0%
	1,000 or more	Count %	3,967 40.4%	5,860 59.6%	9,827 100.0%
Total		Count %	5,529 40.4%	8,156 59.6%	13,685 100.0%

$X^2 = 21.481^{***}$ ;  $V = 0.040^{***}$ ; Notes:  $^{***}p < .001$ ;  $^{**}p < .01$ ;  $^{*}p < .05$

### Religious Participation by Size

### Religious Act by Size

			<i>Religious Act</i>		Total
			Yes	No	
Size	Less than 500	Count %	928 57.2%	694 42.8%	1,622 100.0%
	500-999	Count %	1,308 58.5%	928 41.5%	2,236 100.0%
	1,000 or more	Count %	5,355 54.5%	4,468 45.5%	9,823 100.0%
Total		Count %	7,591 55.5%	6,090 44.5%	13,681 100.0%

$X^2 = 13.919^{**}$ ;  $V = 0.032^{**}$ ; Notes: \*\*\* $p < .001$ ; \*\* $p < .01$ ; \* $p < .05$

### Work Assignments Participation by Size

#### On-Grounds Work Assignments by Size

			<i>On-Grounds</i>		Total
			Yes	No	
Size	Less than 500	Count %	894 55.0%	730 45.0%	1,624 100.0%
	500-999	Count %	1,373 61.3%	865 38.7%	2,238 100.0%
	1,000 or more	Count %	5,940 60.5%	3,884 39.5%	9,824 100.0%
Total		Count %	8,207 60.0%	5,479 40.0%	13,686 100.0%

$X^2 = 19.153^{***}$ ;  $V = 0.037^{***}$ ; Notes: \*\*\* $p < .001$ ; \*\* $p < .01$ ; \* $p < .05$

#### Off-Grounds Work Assignments by Size

			<i>Off-Grounds</i>		Total
			Yes	No	
Size	Less than 500	Count %	466 28.7%	1,158 71.3%	1,624 100.0%
	500-999	Count %	141 6.3%	2,097 93.7%	2,238 100.0%
	1,000 or more	Count %	427 4.3%	9,399 95.7%	9,826 100.0%
Total		Count %	1,034 7.6%	12,654 92.4%	13,688 100.0%

$X^2 = 1189.200^{***}$ ;  $V = 0.295^{***}$ ; Notes: \*\*\* $p < .001$ ; \*\* $p < .01$ ; \* $p < .05$

### Janitorial Work by Size

			<i>Janitorial Work</i>		Total
			Yes	No	
Size	Less than 500	Count %	380 23.4%	1,243 76.6%	1,623 100.0%
	500-999	Count %	443 19.8%	1,795 80.2%	2,238 100.0%
	1,000 or more	Count %	1,708 17.4%	8,115 82.6%	9,823 100.0%
Total		Count %	2,531 18.5%	11,153 81.5%	13,684 100.0%

$X^2 = 36.540^{***}$ ;  $V = 0.052^{***}$ ; Notes:  $^{***}p < .001$ ;  $^{**}p < .01$ ;  $^{*}p < .05$

### Grounds/Road Maintenance by Size

			<i>Grounds/Road Maintenance</i>		Total
			Yes	No	
Size	Less than 500	Count %	196 12.1%	1,427 87.9%	1,623 100.0%
	500-999	Count %	170 7.6%	2,067 92.4%	2,237 100.0%
	1,000 or more	Count %	738 7.5%	9,086 92.5%	9,824 100.0%
Total		Count %	1,104 8.1%	12,580 91.9%	13,684 100.0%

$X^2 = 39.913^{***}$ ;  $V = 0.054^{***}$ ; Notes:  $^{***}p < .001$ ;  $^{**}p < .01$ ;  $^{*}p < .05$

### Food Preparation by Size

			<i>Food Preparation</i>		Total
			Yes	No	
Size	Less than 500	Count %	242 14.9%	1,381 85.1%	1,623 100.0%
	500-999	Count %	249 11.1%	1,988 88.9%	2,237 100.0%
	1,000 or more	Count %	1,157 11.8%	8,667 88.2%	9,824 100.0%
Total		Count %	1,648 12.0%	12,036 88.0%	13,684 100.0%

$X^2 = 15.011^{**}$ ;  $V = 0.033^{**}$ ; Notes:  $^{***}p < .001$ ;  $^{**}p < .01$ ;  $^{*}p < .05$



### Laundry Services by Size

			<i>Laundry Services</i>		Total
			Yes	No	
Size	Less than 500	Count %	60 3.7%	1,564 96.3%	1,624 100.0%
	500-999	Count %	73 3.3%	2,165 96.7%	2,238 100.0%
	1,000 or more	Count %	308 3.1%	9,516 96.9%	9,824 100.0%
Total		Count %	441 3.2%	13,245 96.8%	13,686 100.0%

$X^2 = 1.412$ ;  $V = 0.010$ ; Notes: \*\*\* $p < .001$ ; \*\* $p < .01$ ; \* $p < .05$

### Medical Services by Size

			<i>Medical Services</i>		Total
			Yes	No	
Size	Less than 500	Count %	7 0.4%	1,617 99.6%	1,624 100.0%
	500-999	Count %	15 0.7%	2,223 99.3%	2,238 100.0%
	1,000 or more	Count %	65 0.7%	9,759 99.3%	9,824 100.0%
Total		Count %	87 0.6%	13,599 99.4%	13,686 100.0%

$X^2 = 1.224$ ;  $V = 0.009$ ; Notes: \*\*\* $p < .001$ ; \*\* $p < .01$ ; \* $p < .05$

### Farming/Forestry/Ranching by Size

			<i>Farming/Forestry/Ranching</i>		Total
			Yes	No	
Size	Less than 500	Count %	33 2.0%	1,590 98.0%	1,623 100.0%
	500-999	Count %	51 2.3%	2,187 97.7%	2,238 100.0%
	1,000 or more	Count %	226 2.3%	9,598 97.7%	9,824 100.0%
Total		Count %	310 2.3%	13,375 97.7%	13,685 100.0%

$X^2 = 0.451$ ;  $V = 0.006$ ; Notes: \*\*\* $p < .001$ ; \*\* $p < .01$ ; \* $p < .05$

### Goods Production by Size

			<i>Goods Production</i>		Total
			Yes	No	
Size	Less than 500	Count %	29 1.8%	1,595 98.2%	1,624 100.0%
	500-999	Count %	83 3.7%	2,155 96.3%	2,238 100.0%
	1,000 or more	Count %	341 3.5%	9,483 96.5%	9,824 100.0%
Total		Count %	453 3.3%	13,233 96.7%	13,686 100.0%

$X^2 = 13.698^{**}$ ;  $V = 0.032^{**}$ ; Notes:  $***p < .001$ ;  $**p < .01$ ;  $*p < .05$

### Other Services by Size

			<i>Other Services</i>		Total
			Yes	No	
Size	Less than 500	Count %	92 5.7%	1,531 94.3%	1,623 100.0%
	500-999	Count %	155 6.9%	2,082 93.1%	2,237 100.0%
	1,000 or more	Count %	654 6.7%	9,170 93.3%	9,824 100.0%
Total		Count %	901 6.6%	12,783 93.4%	13,684 100.0%

$X^2 = 2.730$ ;  $V = 0.14$ ; Notes:  $***p < .001$ ;  $**p < .01$ ;  $*p < .05$

### Maintenance/Construction by Size

			<i>Maintenance/Construction</i>		Total
			Yes	No	
Size	Less than 500	Count %	152 9.4%	1,472 90.6%	1,624 100.0%
	500-999	Count %	117 5.2%	2,121 94.8%	2,238 100.0%
	1,000 or more	Count %	421 4.3%	9,403 95.7%	9,824 100.0%
Total		Count %	690 5.0%	12,996 95.0%	13,686 100.0%

$X^2 = 75.144^{***}$ ;  $V = 0.074^{***}$ ; Notes:  $***p < .001$ ;  $**p < .01$ ;  $*p < .05$

### Other Work Assignments by Size

			<i>Other Work Assignments</i>		Total
			Yes	No	
Size	Less than 500	Count %	254 15.7%	1,369 84.3%	1,623 100.0%
	500-999	Count %	219 9.8%	2,018 90.2%	2,237 100.0%
	1,000 or more	Count %	939 9.6%	8,883 90.4%	9,822 100.0%
Total		Count %	1,412 10.3%	12,270 89.7%	13,682 100.0%

$X^2 = 56.626^{***}$ ;  $V = 0.064^{***}$ ; Notes:  $^{***}p < .001$ ;  $^{**}p < .01$ ;  $^{*}p < .05$

### Paid for Work Assignments by Size

			<i>Paid for Work</i>		Total
			Yes	No	
Size	Less than 500	Count %	849 52.4%	770 47.6%	1,619 100.0%
	500-999	Count %	926 41.4%	1,311 58.6%	2,237 100.0%
	1,000 or more	Count %	3,381 34.5%	6,426 65.5%	9,807 100.0%
Total		Count %	5,156 37.7%	8,507 62.3%	13,663 100.0%

$X^2 = 206.093^{***}$ ;  $V = 0.123^{***}$ ; Notes:  $^{***}p < .001$ ;  $^{**}p < .01$ ;  $^{*}p < .05$

### Vocational Training Participation by Size

#### Vocational Training by Size

			<i>Vocational Training</i>		Total
			Yes	No	
Size	Less than 500	Count %	315 19.4%	1,308 80.6%	1,623 100.0%
	500-999	Count %	609 27.3%	1,624 72.7%	2,233 100.0%
	1,000 or more	Count %	2,827 28.8%	6,989 71.2%	9,816 100.0%
Total		Count %	3,751 27.4%	9,921 72.6%	13,672 100.0%

$X^2 = 61.736^{***}$ ;  $V = 0.067^{***}$ ; Notes:  $^{***}p < .001$ ;  $^{**}p < .01$ ;  $^{*}p < .05$

## Educational Program Participation by Size

### Basic Education by Size

			<i>Basic Education</i>		Total
			Yes	No	
Size	Less than 500	Count %	15 0.9%	1,608 99.1%	1,623 100.0%
	500-999	Count %	51 2.3%	2,183 97.7%	2,234 100.0%
	1,000 or more	Count %	208 2.1%	9,612 97.9%	9,820 100.0%
Total		Count %	274 2.0%	12,403 98.0%	13,677 100.0%

$X^2 = 11.175^{**}$ ;  $V = 0.029^{**}$ ; Notes: \*\*\* $p < .001$ ; \*\* $p < .01$ ; \* $p < .05$

### High School/GED Preparation by Size

			<i>High School/GED Preparation</i>		Total
			Yes	No	
Size	Less than 500	Count %	256 15.8%	1,367 84.2%	1,623 100.0%
	500-999	Count %	437 19.6%	1,797 80.4%	2,234 100.0%
	1,000 or more	Count %	1,940 19.8%	7,879 80.2%	9,819 100.0%
Total		Count %	2,633 19.3%	11,043 80.7%	13,676 100.0%

$X^2 = 14.386^{**}$ ;  $V = 0.032^{**}$ ; Notes: \*\*\* $p < .001$ ; \*\* $p < .01$ ; \* $p < .05$

### College Courses by Size

			<i>College Courses</i>		Total
			Yes	No	
Size	Less than 500	Count %	88 5.4%	1,535 94.6%	1,623 100.0%
	500-999	Count %	146 6.5%	2,088 93.5%	2,234 100.0%
	1,000 or more	Count %	760 7.7%	9,060 92.3%	9,820 100.0%
Total		Count %	994 7.3%	12,683 92.7%	13,677 100.0%

$X^2 = 13.222^{**}$ ;  $V = 0.031^{**}$ ; Notes: \*\*\* $p < .001$ ; \*\* $p < .01$ ; \* $p < .05$

### English as a Second Language by Size

			<i>English as a Second Language</i>		Total
			Yes	No	
Size	Less than 500	Count %	6 0.4%	1,617 99.6%	1,623 100.0%
	500-999	Count %	34 1.5%	2,200 98.5%	2,234 100.0%
	1,000 or more	Count %	103 1.0%	9,717 99.0%	9,820 100.0%
Total		Count %	143 1.0%	13,524 99.0%	13,677 100.0%

$X^2 = 12.067^{**}$ ;  $V = 0.030^{**}$ ; Notes:  $***p < .001$ ;  $**p < .01$ ;  $*p < .05$

### Other Educational Programs by Size

			<i>Other Education</i>		Total
			Yes	No	
Size	Less than 500	Count %	100 6.2%	1,523 93.8%	1,623 100.0%
	500-999	Count %	148 6.6%	2,086 93.4%	2,234 100.0%
	1,000 or more	Count %	499 5.1%	9,320 94.9%	9,819 100.0%
Total		Count %	747 5.5%	12,929 94.5%	13,676 100.0%

$X^2 = 10.134^{**}$ ;  $V = 0.027^{**}$ ; Notes:  $***p < .001$ ;  $**p < .01$ ;  $*p < .05$

### Life-Skills Participation by Size

### Employment Counseling by Size

			<i>Employment</i>		Total
			Yes	No	
Size	Less than 500	Count %	216 13.3%	1,407 86.7%	1,623 100.0%
	500-999	Count %	214 9.6%	2,016 90.4%	2,230 100.0%
	1,000 or more	Count %	780 8.0%	9,031 92.0%	9,811 100.0%
Total		Count %	1,210 8.9%	12,454 91.1%	13,664 100.0%

$X^2 = 51.355^{***}$ ;  $V = 0.061^{***}$ ; Notes:  $***p < .001$ ;  $**p < .01$ ;  $*p < .05$

### Parenting/Childrearing Classes by Size

			<i>Parenting/Childrearing Classes</i>		Total
			Yes	No	
Size	Less than 500	Count %	201 12.4%	1,422 87.6%	1,623 100.0%
	500-999	Count %	220 9.9%	2,009 90.1%	2,229 100.0%
	1,000 or more	Count %	716 7.3%	9,094 92.7%	9,810 100.0%
Total		Count %	1,137 8.3%	12,525 91.7%	13,662 100.0%

$X^2 = 55.571^{***}$ ;  $V = 0.064^{***}$ ; Notes:  $^{***}p < .001$ ;  $^{**}p < .01$ ;  $^{*}p < .05$

### Life-Skills/Community Adjustment by Size

			<i>Life-Skills/Community Adjustment</i>		Total
			Yes	No	
Size	Less than 500	Count %	517 31.9%	1,105 68.1%	1,622 100.0%
	500-999	Count %	559 25.1%	1,670 74.9%	2,229 100.0%
	1,000 or more	Count %	2,100 21.4%	7,709 78.6%	9,809 100.0%
Total		Count %	3,176 23.3%	10,484 76.7%	13,660 100.0%

$X^2 = 90.415^{***}$ ;  $V = 0.081^{***}$ ; Notes:  $^{***}p < .001$ ;  $^{**}p < .01$ ;  $^{*}p < .05$

### Pre-Release Programs by Size

			<i>Pre-Release</i>		Total
			Yes	No	
Size	Less than 500	Count %	122 7.5%	1,501 92.5%	1,623 100.0%
	500-999	Count %	161 7.2%	2,068 92.8%	2,229 100.0%
	1,000 or more	Count %	447 4.6%	9,363 95.4%	9,810 100.0%
Total		Count %	730 5.3%	12,932 94.7%	13,662 100.0%

$X^2 = 42.737^{***}$ ;  $V = 0.056^{***}$ ; Notes:  $^{***}p < .001$ ;  $^{**}p < .01$ ;  $^{*}p < .05$

**Medical Care Programming by Location**  
**Tuberculosis Testing by Location**

			<i>Tuberculosis Testing</i>		Total
			Yes	No	
Location	West	Count %	3,027 94.7%	170 5.3%	3,197 100.0%
	Midwest	Count %	2,701 95.3%	133 4.7%	2,834 100.0%
	South	Count %	5,559 95.6%	255 4.4%	5,814 100.0%
	Northeast	Count %	1,763 94.4%	105 5.6%	1,868 100.0%
Total	Count %	13,050 05.2%	663 4.8%	13,713 100.0	

$X^2 = 6.798$ ;  $V = 0.022$ ; Notes: \*\*\* $p < .001$ ; \*\* $p < .01$ ; \* $p < .05$

**HIV/AIDS Testing by Location**

			<i>HIV/AIDS Test</i>		Total
			Yes	No	
Location	West	Count %	1,721 77.0%	513 23.0%	2,234 100.0%
	Midwest	Count %	1,847 85.1%	324 14.9%	2,171 100.0%
	South	Count %	4,428 89.5%	520 10.5%	4,948 100.0%
	Northeast	Count %	1,175 79.4%	304 20.6%	1,479 100.0%
Total	Count %	9,171 84.7%	1,661 15.3%	10,832 100.0%	

$X^2 = 220.201$ \*\*\*;  $V = .143$ \*\*\*; Notes: \*\*\* $p < .001$ ; \*\* $p < .01$ ; \* $p < .05$

### Medical Exam by Location

			<i>Medical Exam</i>		Total
			Yes	No	
Location	West	Count %	2,475 77.4%	722 22.6%	3,197 100.0%
	Midwest	Count %	2,475 87.3%	360 12.7%	2,835 100.0%
	South	Count %	5,036 86.7%	775 13.3%	5,811 100.0%
	Northeast	Count %	1,588 84.9%	282 15.1%	1,870 100.0%
Total	Count %	11,574 84.4%	2,139 15.6%	13,713 100.0%	

$X^2 = 159.558^{***}$ ;  $V = 0.108^{***}$ ; Notes:  $^{***}p < .001$ ;  $^{**}p < .01$ ;  $^{*}p < .05$

### Pelvic Exam by Location

			<i>Pelvic Exam</i>		Total
			Yes	No	
Location	West	Count %	198 84.6%	36 15.4%	234 100.0%
	Midwest	Count %	146 83.9%	28 16.1%	174 100.0%
	South	Count %	372 86.5%	58 13.5%	430 100.0%
	Northeast	Count %	81 84.4%	15 15.6%	96 100.0%
Total	Count %	797 85.3%	137 14.7%	934 100.0%	

$X^2 = 0.926$ ;  $V = 0.031$ ; Notes:  $^{***}p < .001$ ;  $^{**}p < .01$ ;  $^{*}p < .05$



### Dental Treatment by Location

			<i>Dental Treatment</i>		Total
			Yes	No	
Location	West	Count %	1,294 40.4%	1,906 59.6%	3,200 100.0%
	Midwest	Count %	1,205 42.5%	1,632 57.5%	2,837 100.0%
	South	Count %	2,553 43.9%	3,258 56.1%	5,811 100.0%
	Northeast	Count %	860 45.9%	1,014 54.1%	1,874 100.0%
Total	Count %	5,912 43.1%	7,810 56.9%	13,722 100.0%	

$X^2 = 17.304^{**}$ ;  $V = 0.036^{**}$ ; Notes:  $***p < .001$ ;  $**p < .01$ ;  $*p < .05$

### Mental Health Care Participation by Location

#### Psychotropic Medication by Location

			<i>Psychotropic Medication</i>		Total
			Yes	No	
Location	West	Count %	536 16.8%	2,654 83.2%	3,190 100.0%
	Midwest	Count %	426 15.4%	2,397 84.6%	2,833 100.0%
	South	Count %	816 14.1%	4,987 85.9%	5,803 100.0%
	Northeast	Count %	283 15.2%	1,579 84.8%	1,862 100.0%
Total	Count %	2,071 15.1%	11,617 84.9%	13,688 100.0%	

$X^2 = 12.263^{**}$ ;  $V = 0.030^{**}$ ; Notes:  $***p < .001$ ;  $**p < .01$ ;  $*p < .05$

### Hospitalization by Location

			<i>Hospitalization</i>		Total
			Yes	No	
Location	West	Count %	86 2.7%	3,102 97.3%	3,188 100.0%
	Midwest	Count %	68 2.4%	2,765 97.6%	2,833 100.0%
	South	Count %	194 3.3%	5,607 96.7%	5,801 100.0%
	Northeast	Count %	72 3.9%	1,792 96.1%	1,864 100.0%
Total	Count %	420 3.1%	13,266 96.9%	13,686 100.0%	

$X^2 = 11.162^*$ ;  $V = 0.029^*$ ; Notes: \*\*\* $p < .001$ ; \*\* $p < .01$ ; \* $p < .05$

### Counseling by Location

			<i>Counseling</i>		Total
			Yes	No	
Location	West	Count %	396 12.4%	2,790 87.6%	3,186 100.0%
	Midwest	Count %	360 12.7%	2,471 87.3%	2,831 100.0%
	South	Count %	705 12.2%	5,095 87.8%	5,800 100.0%
	Northeast	Count %	287 15.4%	1,578 84.6%	1,865 100.0%
Total	Count %	1,748 12.8%	11,934 87.2%	13,682 100.0%	

$X^2 = 13.783^{**}$ ;  $V = 0.032^{**}$ ; Notes: \*\*\* $p < .001$ ; \*\* $p < .01$ ; \* $p < .05$

### Other Mental Health Care by Location

			<i>Other Mental Health Care</i>		Total
			Yes	No	
Location	West	Count %	65 2.0%	3,116 98.0%	3,181 100.0%
	Midwest	Count %	52 1.8%	2,776 98.2%	2,828 100.0%
	South	Count %	100 1.7%	5,694 98.3%	5,794 100.0%
	Northeast	Count %	44 2.4%	1,819 97.6%	1,863 100.0%
Total	Count %	261 1.9%	13,405 98.1%	13,666 100.0%	

$X^2 = 3.456$ ;  $V = 0.016$ ; Notes: \*\*\* $p < .001$ ; \*\* $p < .01$ ; \* $p < .05$

### Substance Abuse Treatment Participation by Location

#### Detoxification by Location

			<i>Detoxification</i>		Total
			Yes	No	
Location	West	Count %	21 0.7%	3,027 99.3%	3,048 100.0%
	Midwest	Count %	15 0.6%	2,678 99.4%	2,693 100.0%
	South	Count %	30 0.6%	5,374 99.4%	5,404 100.0%
	Northeast	Count %	23 1.4%	1,673 98.6%	1,696 100.0%
Total	Count %	89 0.7%	12,752 99.3%	12,841 100.0%	

$X^2 = 13.052^{**}$ ;  $V = 0.032^{**}$ ; Notes: \*\*\* $p < .001$ ; \*\* $p < .01$ ; \* $p < .05$

### Inpatient Treatment by Location

			<i>Inpatient Treatment</i>		Total
			Yes	No	
Location	West	Count	210	2,836	3,046
		%	6.9%	93.1%	100.0%
	Midwest	Count	245	2,449	2,694
		%	9.1%	90.9%	100.0%
	South	Count	331	5,071	5,402
		%	6.1%	93.9%	100.0%
	Northeast	Count	174	1,522	1,696
		%	10.3%	89.7%	100.0%
Total	Count	960	11,878	12,838	
	%	7.5%	92.5%	100.0%	

$X^2 = 44.880^{***}$ ;  $V = 0.059^{***}$ ; Notes:  $^{***}p < .001$ ;  $^{**}p < .01$ ;  $^{*}p < .05$

### Outpatient Treatment by Location

			<i>Outpatient Treatment</i>		Total
			Yes	No	
Location	West	Count	142	2,905	3,047
		%	4.7%	95.3%	100.0%
	Midwest	Count	158	2,532	2,690
		%	5.9%	94.1%	100.0%
	South	Count	233	5,171	5,404
		%	4.3%	95.7%	100.0%
	Northeast	Count	133	1,562	1,695
		%	7.8%	92.2%	100.0%
Total	Count	666	12,170	12,836	
	%	5.2%	94.8%	100.0%	

$X^2 = 37.086^{***}$ ;  $V = 0.054^{***}$ ; Notes:  $^{***}p < .001$ ;  $^{**}p < .01$ ;  $^{*}p < .05$

### Self-Help/Peer Counseling by Location

			<i>Self-Help/Peer Counseling</i>		Total
			Yes	No	
Location	West	Count %	678 22.3%	2,369 77.7%	3,047 100.0%
	Midwest	Count %	680 25.3%	2,012 74.7%	2,692 100.0%
	South	Count %	1,346 24.9%	4,054 75.1%	5,400 100.0%
	Northeast	Count %	522 30.8%	1,173 69.2%	1,695 100.0%
Total	Count %	3,226 25.1%	9,608 74.9%	12,834 100.0%	

$X^2 = 42.482^{***}$ ;  $V = 0.058^{***}$ ; Notes:  $^{***}p < .001$ ;  $^{**}p < .01$ ;  $^{*}p < .05$

### Education/Awareness by Location

			<i>Education/Awareness</i>		Total
			Yes	No	
Location	West	Count %	410 13.5%	2,636 86.5%	3,046 100.0%
	Midwest	Count %	375 13.9%	2,315 86.1%	2,690 100.0%
	South	Count %	771 14.3%	4,630 85.7%	5,401 100.0%
	Northeast	Count %	385 22.7%	1,308 77.3%	1,693 100.0%
Total	Count %	1,941 15.1%	10,889 84.9%	12,830 100.0%	

$X^2 = 89.026^{***}$ ;  $V = 0.083^{***}$ ; Notes:  $^{***}p < .001$ ;  $^{**}p < .01$ ;  $^{*}p < .05$

### Maintenance Drugs by Location

			<i>Maintenance Drugs</i>		Total
			Yes	No	
Location	West	Count	3	3,045	3,048
		%	0.1%	99.9%	100.0%
	Midwest	Count	5	2,686	2,691
		%	0.2%	99.8%	100.0%
	South	Count	10	5,393	5,403
		%	0.2%	99.8%	100.0%
	Northeast	Count	5	1,691	1,696
		%	0.3%	99.7%	100.0%
Total		Count	23	12,815	12,838
		%	0.2%	99.8%	100.0%

$X^2 = 2.397$ ;  $V = 0.014$ ; Notes: \*\*\* $p < .001$ ; \*\* $p < .01$ ; \* $p < .05$

### Other Substance Abuse Treatment by Location

			<i>Other Substance Abuse Treatment</i>		Total
			Yes	No	
Location	West	Count	33	3,015	3,048
		%	1.1%	98.9%	100.0%
	Midwest	Count	23	2,670	2,693
		%	0.9%	99.1%	100.0%
	South	Count	71	5,331	5,402
		%	1.3%	98.7%	100.0%
	Northeast	Count	51	1,646	1,697
		%	3.0%	97.0%	100.0%
Total		Count	178	12,662	12,840
		%	1.4%	98.6%	100.0%

$X^2 = 40.378$ \*\*\*;  $V = 0.056$ \*\*\*; Notes: \*\*\* $p < .001$ ; \*\* $p < .01$ ; \* $p < .05$

**Recreational Participation by Location**

**Physical Exercise by Location**

			<i>Physical Exercise</i>		Total
			Yes	No	
Location	West	Count %	2,065 64.9%	1,115 35.1%	3,180 100.0%
	Midwest	Count %	1,702 60.0%	1,133 40.0%	2,835 100.0%
	South	Count %	3,230 55.6%	2,577 44.4%	5,807 100.0%
	Northeast	Count %	1,172 63.0%	688 37.0%	1,860 100.0%
Total	Count %	8,169 59.7%	5,513 40.3%	13,682 100.0%	

$X^2 = 84.991^{***}$ ;  $V = 0.079^{***}$ ; Notes:  $^{***}p < .001$ ;  $^{**}p < .01$ ;  $^{*}p < .05$

**Watching Television by Location**

			<i>Watching Television</i>		Total
			Yes	No	
Location	West	Count %	2,227 70.0%	953 30.0%	3,180 100.0%
	Midwest	Count %	2,023 71.4%	809 28.6%	2,832 100.0%
	South	Count %	3,719 64.0%	2,089 36.0%	5,808 100.0%
	Northeast	Count %	1,331 71.5%	531 28.5%	1,862 100.0%
Total	Count %	9,300 68.0%	4,382 32.0%	13,682 100.0%	

$X^2 = 73.731^{***}$ ;  $V = 0.073^{***}$ ; Notes:  $^{***}p < .001$ ;  $^{**}p < .01$ ;  $^{*}p < .05$

### Reading by Location

			<i>Reading</i>		Total
			Yes	No	
Location	West	Count	2,282	895	3,177
		%	71.8%	28.2%	100.0%
	Midwest	Count	2,100	734	2,834
		%	74.1%	25.9%	100.0%
	South	Count	4,388	1,418	5,806
		%	75.6%	24.4%	100.0%
	Northeast	Count	1,442	418	1,860
		%	77.5%	22.5%	100.0%
Total		Count	10,212	3,465	13,677
		%	74.7%	25.3%	100.0%

$X^2 = 24.595^{***}$ ;  $V = 0.042^{***}$ ; Notes:  $^{***}p < .001$ ;  $^{**}p < .01$ ;  $^{*}p < .05$

### Phone Calls by Location

			<i>Phone Calls</i>		Total
			Yes	No	
Location	West	Count	2,515	655	3,170
		%	79.3%	20.7%	100.0%
	Midwest	Count	2,591	240	2,831
		%	91.5%	8.5%	100.0%
	South	Count	4,590	1,211	5,801
		%	79.1%	20.9%	100.0%
	Northeast	Count	1,732	132	1,864
		%	92.9%	7.1%	100.0%
Total		Count	11,428	2,238	13,666
		%	83.6%	16.4%	100.0%

$X^2 = 374.848^{***}$ ;  $V = 0.166^{***}$ ; Notes:  $^{***}p < .001$ ;  $^{**}p < .01$ ;  $^{*}p < .05$



### Other Recreation by Location

			<i>Other Recreation</i>		Total
			Yes	No	
Location	West	Count	1,423	1,758	3,181
		%	44.7%	55.3%	100.0%
	Midwest	Count	1,157	1,678	2,835
		%	40.8%	59.2%	100.0%
	South	Count	2,202	3,606	5,808
		%	37.9%	62.1%	100.0%
	Northeast	Count	747	1,114	1,861
		%	40.1%	59.9%	100.0%
Total		Count	5,529	8,156	13,685
		%	40.4%	59.6%	100.0%

$X^2 = 39.987^{***}$ ;  $V = 0.054^{***}$ ; Notes:  $^{***}p < .001$ ;  $^{**}p < .01$ ;  $^{*}p < .05$

### Religious Participation by Location

#### Religious Act by Location

			<i>Religious Act</i>		Total
			Yes	No	
Location	West	Count	1,676	1,501	3,177
		%	52.8%	47.2%	100.0%
	Midwest	Count	1,398	1,434	2,832
		%	49.4%	50.6%	100.0%
	South	Count	3,496	2,313	5,809
		%	60.2%	39.8%	100.0%
	Northeast	Count	1,021	841	1,862
		%	54.8%	45.2%	100.0%
Total		Count	7,591	6,089	13,680
		%	55.5%	44.5%	100.0%

$X^2 = 104.766^{***}$ ;  $V = 0.088^{***}$ ; Notes:  $^{***}p < .001$ ;  $^{**}p < .01$ ;  $^{*}p < .05$

**Work Assignment Participation by Location**

**On-Grounds Work Assignments by Location**

			<i>On-Grounds</i>		Total
			Yes	No	
Location	West	Count	1,582	1,595	3,177
		%	49.8%	50.2%	100.0%
	Midwest	Count	1,675	1,160	2,835
		%	59.1%	40.9%	100.0%
	South	Count	3,725	2,085	5,810
		%	64.1%	35.9%	100.0%
	Northeast	Count	1,224	639	1,863
		%	65.7%	34.3%	100.0%
Total		Count	8,206	5,479	13,685
		%	60.0%	40.0%	100.0%

$X^2 = 204.960^{***}$ ;  $V = 0.122^{***}$ ; Notes:  $^{***}p < .001$ ;  $^{**}p < .01$ ;  $^{*}p < .05$

**Off-Grounds Work Assignments by Location**

			<i>Off-Grounds</i>		Total
			Yes	No	
Location	West	Count	200	2,979	3,179
		%	6.3%	93.7%	100.0%
	Midwest	Count	145	2,690	2,835
		%	5.1%	94.9%	100.0%
	South	Count	632	5,179	5,811
		%	10.9%	89.1%	100.0%
	Northeast	Count	57	1,806	1,863
		%	3.1%	96.9%	100.0%
Total		Count	1,034	12,654	13,688
		%	7.6%	92.4%	100.0%

$X^2 = 177.128^{***}$ ;  $V = 0.114^{***}$ ; Notes:  $^{***}p < .001$ ;  $^{**}p < .01$ ;  $^{*}p < .05$

### Janitorial Work by Location

			<i>Janitorial Work</i>		Total
			Yes	No	
Location	West	Count	441	2,737	3,178
		%	13.9%	86.1%	100.0%
	Midwest	Count	565	2,271	2,836
		%	19.9%	80.1%	100.0%
	South	Count	1,150	4,660	5,810
		%	19.8%	80.2%	100.0%
	Northeast	Count	376	1,486	1,862
		%	20.2%	79.8%	100.0%
Total	Count		2,532	11,154	13,686
	%		18.5%	81.5%	100.0%

$X^2 = 58.847^{***}$ ;  $V = 0.066^{***}$ ; Notes:  $^{***}p < .001$ ;  $^{**}p < .01$ ;  $^{*}p < .05$

### Grounds/Road Maintenance by Location

			<i>Grounds/Road Maintenance</i>		Total
			Yes	No	
Location	West	Count	166	3,011	3,177
		%	5.2%	94.8%	100.0%
	Midwest	Count	168	2,668	2,836
		%	5.9%	94.1%	100.0%
	South	Count	685	5,125	5,810
		%	11.8%	88.2%	100.0%
	Northeast	Count	85	1,777	1,862
		%	4.6%	95.4%	100.0%
Total	Count		1,104	12,581	13,685
	%		8.1%	91.9%	100.0%

$X^2 = 191.538^{***}$ ;  $V = 0.118^{***}$ ; Notes:  $^{***}p < .001$ ;  $^{**}p < .01$ ;  $^{*}p < .05$

### Food Preparation by Location

			<i>Food Preparation</i>		Total
			Yes	No	
Location	West	Count %	354 11.1%	2,823 88.9%	3,177 100.0%
	Midwest	Count %	367 12.9%	2,468 87.1%	2,835 100.0%
	South	Count %	684 11.8%	5,126 88.2%	5,810 100.0%
	Northeast	Count %	244 13.1%	1,619 86.9%	1,863 100.0%
Total	Count %	1,649 12.0%	12,036 88.0%	13,685 100.0%	

$X^2 = 6.962$ ;  $V = 0.023$ ; Notes:\*\*\* $p < .001$ ; \*\* $p < .01$ ; \* $p < .05$

### Laundry Services by Location

			<i>Laundry Services</i>		Total
			Yes	No	
Location	West	Count %	53 1.7%	3,124 98.3%	3,177 100.0%
	Midwest	Count %	84 3.0%	2,752 97.0%	2,836 100.0%
	South	Count %	241 4.1%	5,569 95.9%	5,810 100.0%
	Northeast	Count %	63 3.4%	1,800 96.6%	1,863 100.0%
Total	Count %	441 3.2%	13,245 96.8%	13,686 100.0%	

$X^2 = 41.339$ \*\*\*;  $V = 0.055$ \*\*\*; Notes:\*\*\* $p < .001$ ; \*\* $p < .01$ ; \* $p < .05$

### Medical Services by Location

			<i>Medical Services</i>		Total
			Yes	No	
Location	West	Count	10	3,167	3,177
		%	0.3%	99.7%	100.0%
	Midwest	Count	12	2,823	2,835
		%	0.4%	99.6%	100.0%
	South	Count	54	5,756	5,810
		%	0.9%	99.1%	100.0%
	Northeast	Count	10	1,852	1,862
		%	0.5%	99.5%	100.0%
Total		Count	86	13,598	13,684
		%	0.6%	99.4%	100.0%

$X^2 = 15.593^{**}$ ;  $V = 0.034^{**}$ ; Notes:  $***p < .001$ ;  $**p < .01$ ;  $*p < .05$

### Farming/Forestry/Ranching by Location

			<i>Farming/Forestry/Ranching</i>		Total
			Yes	No	
Location	West	Count	29	3,149	3,178
		%	0.9%	99.1%	100.0%
	Midwest	Count	35	2,800	2,835
		%	1.2%	98.8%	100.0%
	South	Count	227	5,583	5,810
		%	3.9%	96.1%	100.0%
	Northeast	Count	20	1,842	1,862
		%	1.1%	98.9%	100.0%
Total		Count	311	13,374	13,685
		%	2.3%	97.7%	100.0%

$X^2 = 122.153^{***}$ ;  $V = 0.094^{***}$ ; Notes:  $***p < .001$ ;  $**p < .01$ ;  $*p < .05$

### Goods Production by Location

			<i>Goods Production</i>		Total
			Yes	No	
Location	West	Count %	124 3.9%	3,053 96.1%	3,177 100.0%
	Midwest	Count %	86 3.0%	2,749 97.0%	2,835 100.0%
	South	Count %	167 2.9%	5,643 97.1%	5,810 100.0%
	Northeast	Count %	75 4.0%	1,787 96.0%	1,862 100.0%
Total	Count %	452 3.3%	13,232 96.7%	13,684 100.0%	

$X^2 = 10.632^*$ ;  $V = 0.028^*$ ; Notes:\*\*\* $p < .001$ ; \*\* $p < .01$ ; \* $p < .05$

### Other Services by Location

			<i>Other Services</i>		Total
			Yes	No	
Location	West	Count %	198 6.2%	2,980 93.8%	3,178 100.0%
	Midwest	Count %	178 6.3%	2,657 93.7%	2,835 100.0%
	South	Count %	380 6.5%	5,430 93.5%	5,810 100.0%
	Northeast	Count %	146 7.8%	1,717 92.2%	1,863 100.0%
Total	Count %	902 6.6%	12,784 93.4%	13,686 100.0%	

$X^2 = 5.842$ ;  $V = 0.021$ ; Notes:\*\*\* $p < .001$ ; \*\* $p < .01$ ; \* $p < .05$

### Maintenance/Construction by Location

			<i>Maintenance/Construction</i>		Total
			Yes	No	
Location	West	Count	135	3,042	3,177
		%	4.2%	95.8%	100.0%
	Midwest	Count	110	2,726	2,836
		%	3.9%	91.6%	100.0%
	South	Count	321	5,489	5,810
		%	5.5%	94.5%	100.0%
	Northeast	Count	124	1,739	1,863
		%	6.7%	93.3%	100.0%
Total		Count	690	12,996	13,686
		%	5.0%	95.0%	100.0%

$X^2 = 21.153^{***}$ ;  $V = 0.043^{***}$ ; Notes:  $^{***}p < .001$ ;  $^{**}p < .01$ ;  $^{*}p < .05$

### Other Work Assignments by Location

			<i>Other Work</i>		Total
			Yes	No	
Location	West	Count	355	2,822	3,177
		%	11.2%	88.8%	100.0%
	Midwest	Count	286	2,548	2,834
		%	10.1%	89.9%	100.0%
	South	Count	549	5,261	5,810
		%	9.4%	90.6%	100.0%
	Northeast	Count	223	1,639	1,862
		%	12.0%	88.0%	100.0%
Total		Count	1,413	12,270	13,683
		%	10.3%	89.7%	100.0%

$X^2 = 12.935^{**}$ ;  $V = 0.031^{**}$ ; Notes:  $^{***}p < .001$ ;  $^{**}p < .01$ ;  $^{*}p < .05$

### Paid for Work by Location

			<i>Paid for Work</i>		Total
			Yes	No	
Location	West	Count	1,189	1,984	3,173
		%	37.5%	62.5%	100.0%
	Midwest	Count	1,526	1,303	2,829
		%	53.9%	46.1%	100.0%
	South	Count	1,268	4,541	5,809
		%	21.8%	78.2%	100.0%
	Northeast	Count	1,173	679	1,852
		%	63.3%	36.7%	100.0%
Total		Count	5,156	8,507	13,663
		%	37.7%	62.3%	100.0%

$X^2 = 1458.527^{***}$ ;  $V = .327^{***}$ ; Notes:  $^{***}p < .001$ ;  $^{**}p < .01$ ;  $^{*}p < .05$

### Vocational Training Participation by Location

#### Vocational Training by Location

			<i>Vocational Training</i>		Total
			Yes	No	
Location	West	Count	813	2,363	3,176
		%	25.6%	74.4%	100.0%
	Midwest	Count	697	2,133	2,830
		%	24.6%	75.4%	100.0%
	South	Count	1,562	4,246	5,808
		%	26.9%	73.1%	100.0%
	Northeast	Count	678	1,179	1,857
		%	36.5%	63.5%	100.0%
Total		Count	3,750	9,921	13,671
		%	27.4%	72.6%	100.0%

$X^2 = 94.267^{***}$ ;  $V = 0.083^{***}$ ; Notes:  $^{***}p < .001$ ;  $^{**}p < .01$ ;  $^{*}p < .05$



***Educational Programming Participation by Location***

**Basic Education by Location**

			<i>Basic Education</i>		Total
			Yes	No	
Location	West	Count %	87 2.7%	3,089 97.3%	3,176 100.0%
	Midwest	Count %	36 1.3%	2,797 98.7%	2,833 100.0%
	South	Count %	106 1.8%	5,703 98.2%	5,809 100.0%
	Northeast	Count %	45 2.4%	1,814 97.6%	1,859 100.0%
Total	Count %	274 2.0%	13,403 98.0%	13,677 100.0%	

$X^2 = 19.100^{***}$ ;  $V = 0.037^{***}$ ; Notes:\*\*\* $p < .001$ ; \*\* $p < .01$ ; \* $p < .05$

**High School/GED Preparation by Location**

			<i>High School/GED Preparation</i>		Total
			Yes	No	
Location	West	Count %	418 13.2%	2,758 86.8%	3,176 100.0%
	Midwest	Count %	660 23.3%	2,173 76.7%	2,833 100.0%
	South	Count %	1,134 19.5%	4,675 80.5%	5,809 100.0%
	Northeast	Count %	422 22.7%	1,437 77.3%	1,859 100.0%
Total	Count %	2,634 19.3%	11,043 80.7%	13,677 100.0%	

$X^2 = 120.067^{***}$ ;  $V = 0.094^{***}$ ; Notes:\*\*\* $p < .001$ ; \*\* $p < .01$ ; \* $p < .05$

### College Courses by Location

			<i>College Courses</i>		Total
			Yes	No	
Location	West	Count	209	2,967	3,176
		%	6.6%	93.4%	100.0%
	Midwest	Count	281	2,552	2,833
		%	9.9%	90.1%	100.0%
	South	Count	356	5,453	5,809
		%	6.1%	93.9%	100.0%
	Northeast	Count	147	1,712	1,859
		%	7.9%	92.1%	100.0%
Total		Count	993	12,684	13,677
		%	7.3%	92.7%	100.0%

$X^2 = 44.126^{***}$ ;  $V = 0.057^{***}$ ; Notes:  $^{***}p < .001$ ;  $^{**}p < .01$ ;  $^{*}p < .05$

### English as a Second Language by Location

			<i>English as a Second Language</i>		Total
			Yes	No	
Location	West	Count	52	3,123	3,175
		%	1.6%	98.4%	100.0%
	Midwest	Count	12	2,821	2,833
		%	0.4%	99.6%	100.0%
	South	Count	40	5,769	5,809
		%	0.7%	99.3%	100.0%
	Northeast	Count	39	1,820	1,859
		%	2.1%	97.9%	100.0%
Total		Count	143	13,533	13,676
		%	1.0%	99.0%	100.0%

$X^2 = 48.406^{***}$ ;  $V = 0.059^{***}$ ; Notes:  $^{***}p < .001$ ;  $^{**}p < .01$ ;  $^{*}p < .05$

### Other Educational Programs by Location

			<i>Other Education</i>		Total
			Yes	No	
Location	West	Count %	174 5.5%	3,001 94.5%	3,175 100.0%
	Midwest	Count %	135 4.8%	2,697 95.2%	2,832 100.0%
	South	Count %	304 5.2%	5,504 94.8%	5,808 100.0%
	Northeast	Count %	133 7.2%	1,726 92.8%	1,859 100.0%
Total	Count %	746 5.5%	12,928 94.5%	13,674 100.0%	

$X^2 = 13.561^{**}$ ;  $V = 0.031^{**}$ ; Notes:\*\*\* $p < .001$ ; \*\* $p < .01$ ; \* $p < .05$

### *Life-Skills Program Participation by Location*

#### Employment Counseling by Location

			<i>Employment</i>		Total
			Yes	No	
Location	West	Count %	237 7.5%	2,937 92.5%	3,174 100.0%
	Midwest	Count %	267 9.4%	2,563 90.6%	2,830 100.0%
	South	Count %	468 8.1%	5,337 91.9%	5,805 100.0%
	Northeast	Count %	239 12.9%	1,616 87.1%	1,855 100.0%
Total	Count %	1,211 8.9%	12,453 91.1%	13,664 100.0%	

$X^2 = 50.549^{***}$ ;  $V = 0.061^{***}$ ; Notes:\*\*\* $p < .001$ ; \*\* $p < .01$ ; \* $p < .05$

### Parenting/Child-Rearing Classes by Location

			<i>Parenting/Child-Rearing Classes</i>		Total
			Yes	No	
Location	West	Count %	322 10.1%	2,851 89.9%	3,173 100.0%
	Midwest	Count %	260 9.2%	2,569 90.8%	2,829 100.0%
	South	Count %	342 5.9%	5,462 94.1%	5,804 100.0%
	Northeast	Count %	213 11.5%	1,642 88.5%	1,855 100.0%
Total	Count %	1,137 8.3%	12,524 91.7%	13,661 100.0%	

$X^2 = 85.846^{***}$ ;  $V = 0.079^{***}$ ; Notes:\*\*\* $p < .001$ ; \*\* $p < .01$ ; \* $p < .05$

### Life-Skills/Community Adjustment by Location

			<i>Life-Skills/Community Adjustment</i>		Total
			Yes	No	
Location	West	Count %	675 21.3%	2,497 78.7%	3,172 100.0%
	Midwest	Count %	558 19.7%	2,271 80.3%	2,829 100.0%
	South	Count %	1,260 21.7%	4,544 78.3%	5,804 100.0%
	Northeast	Count %	683 36.8%	1,172 63.2%	1,855 100.0%
Total	Count %	3,176 23.3%	10,484 76.7%	13,660 100.0%	

$X^2 = 225.736^{***}$ ;  $V = 0.129^{***}$ ; Notes:\*\*\* $p < .001$ ; \*\* $p < .01$ ; \* $p < .05$

**Pre-Release Programs by Location**

			<i>Pre-Release</i>		Total
			Yes	No	
Location	West	Count	150	3,022	3,172
		%	4.7%	95.3%	100.0%
	Midwest	Count	180	2,649	2,829
		%	6.4%	93.6%	100.0%
	South	Count	258	5,547	5,805
		%	4.4%	95.6%	100.0%
	Northeast	Count	141	1,714	1,855
		%	7.6%	92.4%	100.0%
Total		Count	729	12,932	13,661
		%	5.3%	94.7%	100.0%

$X^2 = 36.192^{***}$ ;  $V = 0.051^{***}$ ; Notes:  $^{***}p < .001$ ;  $^{**}p < .01$ ;  $^{*}p < .05$

**APPENDIX C: CALCULATING THE ODDS RATIO, STANDARD ERROR, AND SIGNIFICANCE FOR INTERACTION EFFECTS**

Example: Feminine Stereotypical Work Assignments using Hilbe’s (2009) method of interpretation

Table 6.18. Binary Logistic Regression Model for Participation in Female Stereotypical Work Assignments

Variable	Female Stereotypical Assignments			
	Model 1		Model 2	
	B (SE)	$e^b$	B (SE)	$e^b$
Females	0.19(0.10)	1.21	0.21(0.11)	1.23
Race				
White ( <i>reference</i> )	---	---	---	---
Black	0.27(0.05)	1.30***	0.27(0.05)	1.31***
Other	0.07(0.07)	1.08	0.06(0.08)	1.07
Gender/Race Interaction				
Gender*Race2	---	---	-0.09(0.11)	0.91
Gender*Race3	---	---	0.14(0.16)	1.15
Criminal History	0.01 (0.01)	1.01	0.01(0.01)	1.01
Time Served	0.00 (0.00)	1.00*	0.00(0.00)	1.00*
Rules Violation	-0.02(0.05)	0.98	-0.02(0.05)	0.98
Current Offense				
Violent	0.11(0.07)	1.11	0.11(0.07)	1.12
Property	-0.04(0.77)	0.96	-0.03(0.08)	0.97
Drug	0.03(0.08)	1.03	0.03(0.07)	1.03
Other ( <i>reference</i> )	---	---	---	---
Facility Location				
West ( <i>reference</i> )	---	---	---	---
Northeast	0.18(0.12)	1.20	0.18(0.12)	1.20
South	0.18(0.11)	1.20	0.18(0.11)	1.20
Midwest	0.18(0.13)	1.19	0.18(0.13)	1.19
Facility Security Level				
Minimum ( <i>reference</i> )	---	---	---	---
Medium	-0.16 (0.11)	0.85	-0.16 (0.11)	0.85
Maximum	-0.36 (0.12)	0.70**	-0.36 (0.12)	0.70**
Facility Size	-0.00 (0.00)	1.00***	-0.00 (0.00)	1.00***
LL	-8,054.86		-8,054.38	
LR	122.06***		124.36***	
McFadden's Pseudo R <sup>2</sup>	0.016		0.016	
N	13,301		13,301	

Notes:\*\*\*p < .001, \*\*p< .01, \*p< .05; LL = log likelihood; LR = likelihood ratio test of full versus naïve model; --- = reference category or interaction term excluded.

*Calculating Odds Ratio* (Hilbe, 2009, pp. 202-204)

In order to calculate the odds ratios, the following coefficients from the interaction models were used: Black coefficient ( $B_2$ ), 'Other' race coefficient ( $B_3$ ), Gender \* Race2 coefficient ( $B_4$ ), and Gender\* Race3 coefficient ( $B_5$ ). These coefficients were then plugged into the following formulas: Black women =  $\exp ( B_2 + B_4 * \text{sex} = 1)$ ; 'Other' race women =  $\exp ( B_3 + B_5 * \text{sex} = 1)$ ; Black men =  $\exp ( B_2 + B_4 * \text{sex} = 0)$ ; 'Other' race men =  $\exp ( B_3 + B_5 * \text{sex} = 0)$ .

- a) Black women =  $\exp (.27 + -.09*1) = 1.20$
- b) 'Other' race women =  $\exp (.27 + .14*1) = 1.22$
- c) Black men =  $\exp (.29 + -.09*0) = 1.31$
- d) 'Other' race men =  $\exp (.27+.14*0) = 1.06$

*Calculating Standard Errors* (Hilbe, 2009, p. 215).

In order to calculate the standard errors, the variance covariance matrix of coefficients for the logistical regression models were used. Below is an example of the covariance matrix of coefficients for Feminine Stereotypical Work Assignments:

Variance Covariance Matrix of Coefficients for Feminine Stereotypical Work Assignments

	Female	Race 2	Race 3	Female x Race 2	Female x Race 3
Female	.01176686				
Race 2	.00097892	.00284375			
Race 3	.00141963	.00124835	.00580238		
Female x Race 2	-.00426009	-.00281791	-.00107281	.01314642	
Female x Race 3	-.00473428	-.00095971	-.00555862	.00461047	.027207

Notes: The covariance values for all other variables are included in the logistic regression model are not included in this table, because they are not needed for calculating the SE of the interaction effects.

The following formula was used to calculate the standard errors for the interaction effects using values from the Covariance Matrix above:  $SE = \sqrt{(r_1-r_0)^2 * V(\beta_1) + x(r_1-r_0)^2 * V(\beta_3) + 2x(r_1-r_0)^2 * CV(\beta_1, \beta_3)}$ .

- a) SE for Black Women/Men =  $\sqrt{.01176686 + 1^2 * .01314642 + 2*1*(-.00426009)} = .12803555$
- b) SE for Other Women/Men =  $\sqrt{.01176686 + 1^2 * .027207 + 2*1*(-.00473428)} = .17177106$

*Calculating Coefficients* (Hilbe, 2009, p0. 193-194)

In order to calculate the coefficients needed to determine significance for females, you have to add the log-odds for interaction using the following formulas: Black women =  $(B_2 + B_4 * \text{sex} = 1)$ ; 'Other' race women =  $(B_3 + B_5 * \text{sex} = 1)$ ; Black men =  $(B_2 + B_4 * \text{sex} = 0)$ ; 'Other' race men =  $(B_3 + B_5 * \text{sex} = 0)$ .

- a) Black women =  $.27 + -.09*1 = .18$
- b) Other women =  $.06 + .14*1 = .20$
- c) Black men =  $.27 + -.09*0 = .27$
- d) Other men =  $.06 + .14*0 = .06$

*Calculating Significance of Effects* (Hilbe, 2009, p. 217)

In order to calculate the significance of the effects, you take the coefficients calculated above and divide them by their corresponding standard errors. Then you calculate the normal probability of that value divided by two.

- a) Black women =  $.18/.12803555 = 1.4058595$ ;  $\text{normprob}(1.4058595)/2 = .46$ .  $p = .46$ , therefore it is NOT significant
- b) 'Other' race women =  $.06/.17177106 = .11643477$ ;  $\text{normprob}(1.1643477)/2 = .44$ .  $p = .44$ , therefore it is NOT significant
- a) Black men =  $.27/.1280355 = 2.109375$ ;  $\text{normprob}(2.109375)/2 = .49$ .  $p = .49$ , therefore it is NOT significant
- c) 'Other' race men =  $.06/.17177106 = 0.35087719$ ;  $\text{normprob}(0.35087719)/2 = .3185$ .  $p = .32$ , therefore it is NOT significant.