DOUBLE JEOPARDY

A Report on Training and Educational Programs for New Hampshire’s Female Offenders

Findings and Recommendations of the Sub-Committee on Incarcerated Women

NEW HAMPSHIRE COMMISSION ON THE STATUS OF WOMEN

DECEMBER 2004

(Reflects errata changes, January 6, 2005)
STATE OF NEW HAMPSHIRE
COMMISSION ON THE STATUS OF WOMEN

The New Hampshire Commission on the Status of Women (NHCSW) advocates on behalf of the diverse population of the state's women by identifying and seeking to remedy historical and institutional discrimination that act as social, political, and economic barriers to the full realization of women's basic rights.

Under the Commission's legislative mandate, RSA 19-B, the duties of the Commission are designed to enhance opportunities and to promote positive change for women in New Hampshire:

I. Stimulate and encourage study and revision of the statutes relative to women in this state;
II. Recommend methods of overcoming discrimination against women in public and private employment and civil and political rights;
III. Promote more effective methods for enabling women to develop their skills and continue their education; and
IV. Secure, so far as possible, appropriate recognition of women's accomplishments and contributions to the state.

Members of the Commission are appointed by the Governor and Executive Council to ensure geographical representation and leadership expertise from across the state. Members are non-salaried and may serve for two three-year terms. As of November 2004, Commissioners are:

Patricia Yosha, Chair, Exeter
Laurie Chandler, Vice Chair, East Kingston
Jessica Stern, Treasurer, Concord
Janice Markey, Secretary, Center Tuftonboro
Phyllis Abell, Portsmouth
Anne Botteri, Bedford
Mary Gillette, Nashua
Linda Johnson, Manchester
Marie Metoyer, Manchester
Elizabeth Paine, Center Sandwich
Lillye Ramos-Spooner, Epsom
Pamela Remick, Lancaster
Bonnie White, Hopkinton
Ronna Wise, Contoocook

Two full-time staff members oversee the administration of all program and project initiatives of NHCSW. As of November 2004, staff members are:

Theresa de Langis, Ph.D., Executive Director
Cara Pearson, Program Assistant I

Special gratitude is extended to Colleen Heffernan, previous Program Assistant to the Commission, and Jeanne Brooks, intern to the Commission for the purposes of collecting and analyzing data relevant to this report.
ACKNOWLEDGEMENTS

The work of the Sub-Committee on Incarcerated Women could not have been completed without the help of many individuals whose skills and insights directly contributed to our report.

We extend special thanks to the staff and administrators of the New Hampshire Department of Corrections, whose commitment to state service was consistently demonstrated in a willingness to share information and expertise about current correctional practices and potential areas of improvement within the Department. In particular, former Acting Commissioner Les Dolecal and Warden Richard M. Gerry provided information for the report in the form of NHDOC documentation and in personal interviews. Commissioner Stephen J. Curry was generous enough to meet with representatives of the Commission within weeks of first taking his post.

The Citizen’s Advisory Council to the New Hampshire State Prison for Women provided indispensable insight into the needs and challenges of female inmates. Our thanks to Nancy LeBoutillier, Chair of the Advisory Committee, for allowing us this opportunity for exchange. Advisory Committee member Elaine Rizzo, Ph.D., a faculty member of Saint Anselm College, administered a community assessment of female inmates in the spring of 2003. Her willingness to share preliminary findings with us added greatly to our understanding of the life experiences of female inmates. When completed, we believe Dr. Rizzo’s research will be an important cornerstone for identifying vital services and programs for gender-responsive strategies in the management of the state’s female offender population.

In the past year, the Commission has received hundreds of letters, e-mails, and calls from family, friends, and other concerned citizens about the conditions of confinement for incarcerated women in New Hampshire. Although some of the information is beyond the purview of this report, all of it was helpful in creating a context for our review of the educational and training opportunities available to New Hampshire female inmates.

For informational gathering purposes, the New Hampshire Commission on the Status of Women held listening sessions with inmates at the New Hampshire State Prison for Women (NHSP/W) and the Lakes Region Facility. We thank the women for their willingness to share their stories. Alice Roberts, volunteer chaplain for the state prisons, generously facilitated our listening sessions at NHSP/W. We thank her for lending us a measure of her own rapport and trust with inmates during this process. Wardens at both facilities, Richard Gerry and John Sanfilippo, assisted in the arrangements for the sessions, and staff at both facilities provided important professional perspective on best practices in the management of the female inmate population.

Jeanne Brooks served as research assistant for the report, culling through hundreds of pages of correspondence, reports, and other materials in order to construct the comparative charts of training and educational opportunities available to female inmates. Her contributions allowed the Sub-Committee to complete its work in a timely and meaningful manner.

Finally, we especially acknowledge former Commissioner Phil Stanley for his professional foresight in requesting a technical assistance site review from the National Institute of Corrections. Through no cost to the state, NIC consultants were able to expertly identify the need for a systemic planning initiative to address the state’s responsibility to effectively manage women involved in the criminal justice system.

Sub-Committee on Incarcerated Women
New Hampshire Commission on the Status of Women
December 2004
Methodology

In September of 2003, Kevin Smith, liaison to the Executive Council in the Governor’s office, notified Theresa de Langis, Ph.D., the executive director of the New Hampshire Commission on the Status of Women (NHCSW), that the agency was requested by Governor Benson and Councilor Griffin to conduct a survey of educational and training programs offered to female inmates within the correctional system of New Hampshire. NHCSW accepted the charge to conduct an inventory of educational and training programs for the state’s female inmates with the aim of better understanding how well inmates were prepared for their own support and that of their children upon release. The report that follows, “Double Jeopardy,” is the product of our inquiry.

Materials Requested, Received, Reviewed:
We requested from NHDOC a breakdown of the current allocation of the department’s resources for state funded programming at the women’s facility as well as a list of state-funded programs and community service projects at the women’s facility. We received the following materials from NHDOC:

1. Annual Reports, 1994-2003, New Hampshire Department of Corrections
2. Index of Health Services Policy and Procedure Directive
3. NHDOC Canteen order form
4. Statistical monthly reports from NHDOC, February 01, 2003 and January 07, 2004
6. Correspondence from Warden Richard M. Gerry, NHSP/W, February 27, 2004

Both the information included and the method of reporting in the NHDOC Annual Reports is inconsistent from year to year, making comparative analysis difficult and at times impossible. Additionally, neither statistical reports nor budget allocations are broken down by gender by NHDOC. As a result, we depended for our inquiry upon the NHDOC website, more comprehensive than the 2003 NHDOC Annual Report and reviewed by the author in September 2004, as our primary source of information.

To meet the charge from the Governor and Executive Council, we attempted to address three recommendations included in the NIC report: to review the current program offerings at the women’s facility, to assess the frequency and availability of published programs, and to determine the current allocation of the department’s program resources for appropriate state-funded programming at the women’s facility. We have attempted to provide this information to our best ability with the information at our disposal.

At the time of our information gathering, women were still held at the Lakes Region Facility (LRF). Yet, outside of anecdotal information provided by staff and inmates, we do not include this facility in our comparative analysis due to its distinct rehabilitative mission and the difficulty presented by the analysis of resources for a mixed-gender population. Additionally, the NHDOC has been in a tremendous state of flux in the year since we began our inquiry, limiting the usefulness of static claims and conclusions. Nevertheless, we present a snapshot of a composite profile in order to identify and analyze patterns over time as a tool for future planning.

NHCSW Listening Sessions and other significant interviews:
Appointed members of the New Hampshire Commission on the Status of Women (NHCSW) held a series of informal “listening sessions” in October 2003 with NHDOC staff, administration, and inmates at the Goffstown and Laconia facilities. In February of 2004, NHCSW representatives met with NHSP/W Warden Dick Gerry and NHDOC Acting Commissioner Les Dolecal. In May 2004, NHCSW representatives met with Representative David Welch and members of the Citizen’s Advisory Committee to NHSP/W. In November of 2004, NHCSW representatives met with newly-appointed NHDOC Commissioner Stephen Curry. These informational interviews were indispensable for the completion of the report.
INTRODUCTION: THE CURRENT CONDITIONS & RECOMMENDATIONS FOR CHANGE

The current conditions of confinement for female offenders present an opportunity for the State to create a model program at NHSP/W on the use of gender-responsive approaches for the optimal management of state offenders. To that end, the New Hampshire Commission on the Status of Women makes the following recommendations:

- Implement comprehensive data collection about female offenders as a foundation for targeting resources and building gender-responsive policy and practice within NHDOC.
- Formally establish a statewide planning initiative for the deliberate and gender-responsive management of women offenders as distinct from their male counterparts.
- Develop strategies for gender-specific training for all NHDOC personnel working with women offenders.

FINDINGS

1. The vast majority of the State’s female inmates are mothers, presenting additional burdens to incarceration, release, and successful re-entry into the community.
2. A comparison of the allocation of NHDOC state-funded program resources suggests the state is adversely hampered by “economy of scale” in providing effective gender-appropriate services and facilities to female offenders.
3. No state dollars are dedicated to life skill programs for women offenders at NHSP/W, despite an overwhelming prevalence among inmates of sexual and physical trauma, substance abuse and addiction, and mental illness.
4. Income generation for incarcerated women at NHSP/W is constrained by the absence of a state-funded industry program as well as limited in-house work assignments and off-site community service programs.
5. A single state-funded vocational program is available to female inmates, unduly limiting employability and earning capacity after release to low-wage, entry-level clerical jobs.
6. Educational opportunities at NHSP/W are limited to G.E.D. prep, losing the opportunity to rehabilitate a highly trainable inmate population with a great interest in services to increase their success upon release.

CONCLUSION: “WHAT ARE WE SUPPOSED TO DO WHEN WE GET OUT?”

- Lack of gender-responsive programs and services results in a “cycle of incarceration” for women offenders and a “double jeopardy” for incarcerated mothers, further disrupting families and adding exorbitant cost to the State.

APPENDIX

A. A Comparative Analysis of Fiandaca and the NIC Technical Assistance Site Review
B. A Composite Profile of New Hampshire Female Inmates
INTRODUCTION
THE CURRENT CONDITIONS & RECOMMENDATIONS FOR CHANGE

In September of 2003, Kevin Smith, liaison to the Executive Council in the Governor’s office, notified Theresa de Langis, Ph.D., the executive director of the New Hampshire Commission on the Status of Women (NHCSW), that the agency was requested to conduct a survey of educational and training programs offered to female inmates within the correctional system of New Hampshire. The request was generated through a conversation that had transpired at that morning’s Governor and Executive Council meeting: in accepting a donation of sewing needles and thread to the State Prison for Women, Councilor Ruth Griffin queried what programs were provided to women in state custody, concerned that skills such as sewing did little to prepare offenders for employment outside of prison. Governor Benson echoed this concern. NHCSW accepted the charge to conduct an inventory of educational and training programs for the state’s female inmates with the aim of better understanding how well inmates were prepared for their own support and that of their children upon release.

Shortly after receiving a request for an inventory of educational and training programs at NHSP/W, NHCSW contacted outgoing Commissioner Philip Stanley of New Hampshire Department of Corrections (NHDOC) to request information and data relevant to women’s programming in the state correctional system.

During this same time period, NHDOC, in creating its FY04-05 budget request, proposed closing the women’s prison in Goffstown and relocating the population of female offenders to the Lakes Region Facility (LRF) in Laconia. In response to the proposal, NHCSW received numerous calls, e-mails, and letters from staff, family and inmates involved in the New Hampshire State Prison for Women (NHSP/W), expressing urgent concern over the proposed closing of the facility. Most pressing of these concerns was the lack of programming provided to the female inmates of the state and the fear they would be curtailed to the point of elimination with the move to Laconia. As one staff member wrote to NHCSW during the FY04-05 budget discussions:

There is a long history of incarcerated women being discriminated against. They do not have the facilities or programs that are available to the men. Incarcerated men are taught many skills that will help them find jobs after release: metalwork, woodwork, machine and car repair, industrial skills to mention a few. They have the capability to build/make products to sell while incarcerated to earn extra money. They have full-time dental and mental health services, extensive educational programs, and well-equipped gyms. The women have only a small portion of this now and will be further reduced if and when they move to Laconia.

NHCSW decided to hold informal focus groups in order to gather information about education and training programs as well as other concerns brought to our attention. A series of “listening sessions” ensued with appointed members of NHCSW and NHDOC administration, staff, and inmates at the Goffstown and Laconia facilities as well as with the members of NHSP/W Citizens Advisory Committee. Commissioners held meetings for informational-gathering purposes with Warden Dick Gerry, NHDOC Acting Commissioner Les Dolecal, and Representative David Welch. We met with new Commissioner Stephen Curry shortly after his arrival. A graduate student intern, Jeanne Brooks, was secured to analyze and process hundreds of pages of data, correspondence, and reports provided by various sources.
**Current Conditions at NHSP/W**

The amount and urgency of the information gathered was quickly overwhelming. Hundreds of people had contacted us; hundreds of pages of material had been collected. And the concerns of NHDOC administrators, staff, correctional officers, and inmates were both alarming and disturbing.

Major concerns included severe shortages of therapeutic staff in an antiquated facility; two inmate suicides linked to the stress provoked by the proposed move to Laconia; mothers fighting to keep parental rights without legal assistance and others losing custody without being informed of the proceedings.

We heard that female inmates were theoretically eligible for work release out in the community—but there was only one van for this and all other purposes at NHSP/W. Female inmates were theoretically eligible for early release if they completed a substance abuse program—but there were no such programs offered at NHSP/W. Inmates participated in job training at the facility, but the computers and software used for the training were no longer compatible with the modern office environment.

We learned that the large majority of female inmates—one study estimates 85-90% of women incarcerated at NHSP/W are mothers to 2.5 children each—and are sole providers for their children. Yet, because of space considerations, the facility has no formal visitation program with children and spouses, as is offered at the men’s facilities. In fact, NHSP/W is the only facility in the NHDOC system that does not offer a state-funded parenting program—despite the fact its population is unique by overwhelmingly having custodial responsibility of multiple children before, during, and after release.

We heard about needs. And we heard about desires. An opportunity to make money to send home to help in the support of children; to train for a job that pays enough to support a family; to learn how not to repeat an abusive relationship and deal with depression without dope; a strategy for how best to create a new life on the outside and not return to prison.

The comments of Valerie Hall, an inmate serving a ten-year sentence at NHSP/W, echo the concerns of the women with whom we met as to the impact of lack of programming for female offenders:

> It just gives a bleak outlook to women who want to get out, who want to do better, but they are trapped by their record, their lack of education, and their lack of opportunity when they get out. They have nothing. And they end up returning to the same lifestyle that brought them in the first place.

There could be no more ready audience, it seems to NHCSW, for a targeted investment in rehabilitative programs and educational and training opportunities.

**Objective of the Report**

Yet, in the vast ocean that has become the NHDOC, the needs of the female inmate population are like the smallest minnow: easy to overlook and often swallowed up by the demands of the much larger male offender population.

This report is about that small minority population of women within NHDOC. It is not about what the male inmates have that the female inmates do not. It is about a state facility with a dedicated staff attempting to provide services to a vulnerable population with scant resources. That might describe any NHDOC facility, male or female. But, this time, for this report, the focus is on the terms of confinement for women.
Shining the spotlight on a snapshot in time on one of the largest departments in the state can only tell a portion of the story. It is not our intention to be critical. Rather, the report hopes to identify problems in order to begin work on their solutions.

Our report is about the distinct needs of female offenders and the necessity for gender-responsive approaches to meet those needs. It recognizes that, because NHSP/W is the only NHDOC prison facility housing only female inmates, its mission is more complex than other institutions within the NHDOC system. Among these complexities is the fact that the services and programs normally spread across a number of institutions are provided at NHSP/W in a single institution with only a skeletal staff.

Our report tries to collect the valuable insights of committed professionals, community volunteers, and researchers. It attempts to capture the daily reality of the female inmate and the struggles of staff and correctional officers in meeting her needs. It points to areas for further analysis into best practices—including the department's own male-only Northern New Hampshire Correctional Facility (NCF).

Above all, this report is an invitation. Again and again we heard how, due to "economy of scale," the small numbers of female offenders is a disadvantage. Our report invites NHDOC, with the support of the Governor and Council, the legislature, and the community, to make this disadvantage an asset.

The findings of this report urge the state to create a model program at NHSP/W on the use of gender-responsive approaches for the optimal management of state offenders. With less than 200 female inmates, the cost to the state for such an initiative will be minimal. Yet, our research suggests the potential positive benefits of this investment to children, families, and communities are far-reaching.

Recommendations

To that end, this report proposes three fundamental recommendations, two of which are adopted from the priority recommendations of the National Institute of Corrections technical assistance review of the terms of confinement for New Hampshire's female offenders:

1. **Implement comprehensive data collection about female offenders as a foundation for targeting resources and building gender-responsive policy and practice.**

   This first step involves understanding the profile of women offenders, their unique pathways to criminality, and their differential response to custody and supervision. Data collection must include information regarding the number, ages, and current custodial status of offenders' children. Such information is instrumental in performing a thorough budget analysis that examines both the needs and the resources dedicated to female offenders.

2. **Formally establish a statewide planning initiative for the deliberate and gender-responsive management of women offenders. Membership should represent all aspects of the criminal justice system, with an aim to most effectively incorporate appropriate gender-responsive policies and procedures into the operational protocol of NHDOC**

   It is our view that a planning initiative must address a series of broad questions as to the effective management of female offenders:

   - How most effectively can the unique characteristics of women offenders—including prevalence of sexual trauma and domestic violence, mental illness, and substance abuse and addiction—serve to shape the services and programs provided to female offenders? How might NHDOC better integrate recent research demonstrating the positive outcomes of a case-management approach to women's multiple treatment needs both within prison and upon release in the community?
How might NHDOC best accommodate the central role of parenting in the lives of female inmates? How can NHDOC use to best advantage research pointing to the central role of parenting in helping to rehabilitate women offenders and to the importance of family visits in countering recidivism? What programs should be offered to female inmates in best assisting them in maintaining custodial rights of their children and in fostering positive parent-child relationships during and after incarceration?

How can NHDOC best address the demographic profile of female offenders as disproportionately low-income women with limited skills and sporadic employment histories? What educational, vocational, and training opportunities do women need to prepare them for life on the outside as sole providers to children? What income opportunities are open to female offenders at NHSP/W and how do they compare to other facilities? What transitional programs should be offered to female offenders for a successful reentry into the community and, for the majority of NHSP/W inmates, as head of household to children?

How might female offenders be better served with community corrections programs? The majority of incarcerated females in the state are low-risk offenders. Does the effectiveness of incarceration outweigh the social cost of crimes women typically commit, the cost of public assistance to children whose mothers are in prison, the cost of recidivism for technical violations of probation and parole, and the likelihood of future costs of incarcerating children of incarcerated parents? How might public safety be better served by reserving expensive prison space for the most dangerous offenders and by targeting community resources to gender-responsive treatment strategies that address the underlying causes of criminality in women?

3. Develop strategies for gender-specific training for all NHDOC personnel, especially those working with women offenders.

In their review of the terms of confinement for female offenders in the state, NIC consultants conclude: “While many staff work effectively with the women, few have the training to manage the many facets of working with women offenders. The result is a caring environment, but one with limited services and staff training to impact a women’s chances to return successfully to the community.”

Positive change ultimately will come “within the ranks” of administration, staff, and correction officers who work directly with female offenders and best understand their daily needs and challenges. The complexity of the mission of NHSP/W is distinct from other NHDOC facilities. The Governor, Executive Council, Legislature, and NHDOC Commissioner should recognize this complexity by committing adequate resources for staff training and by demonstrating a willingness to incorporate operational changes that reflect best practices in the gender-appropriate management of female offenders.

As the NIC report points out, appropriate staff training can be secured free of charge through local organizations, video training modules, and no-cost NIC training resources. To best enhance the professional expertise of staff and to optimize outcomes for inmates, training should incorporate:

- The dynamics involved in staff/offender relationships with women offenders and the distinct ways in which women manage differently than men similar experiences.

- The different characteristics women demonstrate from their male counterparts, including being sole providers for their children; limited job skills and work experience; high instances of sexual and physical abuse; dependency on drugs and alcohol to mask the abuse; and complicated mental health involvement.
It is our sincere hope that the enclosed report, prepared by the Sub-Committee on Incarcerated Women of the Commission on the Status of Women, will serve as a launching point to assist in the implementation of both recommendations. Working in tandem, a professionalized staff and a strategic planning initiative will effectively result in a more comprehensive understanding of the state’s female offender population and a more gender-responsive management approach to their incarceration.


3 NIC Report, page 25.
1. The vast majority of the State’s female inmates are mothers, presenting additional burdens to incarceration, release, and successful re-entry into the community.

Incarcerated women are mothers. One source estimates that 85-90 percent of women incarcerated at NHSP/W are mothers to an average of 2.5 children each.\(^1\) The vast majority of these women, prior to incarceration, were the sole providers of their children as single heads of households. Most intend to reunite with their children upon release.

This fact alone makes the typical female inmate quite distinct from her male counterpart. In 2003, consultants from the National Institute of Corrections (NIC) performed a technical assistance site review of the terms of conditions of New Hampshire’s female inmates. Precisely because “most men are not the primary caretakers of their children,” the NIC consultants advised in their final report, “women’s economic realities are often different than men’s.” As such, training and educational programs, as well as transitional services, are that much more urgently needed. Otherwise, the NIC consultants state, “women [in prison] particularly experience a ‘double jeopardy’ of losing their children and being returned to prison when housing and work opportunities do not materialize.”\(^2\)

In interviews with NHCSW, NHDOC officials frequently repeated their concern about the preparedness of female inmates who upon release are immediately responsible not just for their own economic support but for that of their children as well. The women we spoke to expressed profound depression over the separation from their children—to such an extent that one might argue that the punishment of incarceration is much more severe for primary parents of minor children.

The term “double jeopardy” is significant on multiple levels. When women are incarcerated, their children are profoundly impacted. “My children are doing this sentence also,” shared one inmate. “They are being punished for my crime.” Indeed, the incarceration of mothers often leads to the disruption of entire families. “When women go to prison, the children go to foster care” shared a staff member at the Family Connections Center, an inmate parenting and visitation program at the Lakes Region Facility (LRF). “When men go, the children go to family members.”

The long-term impact on children can be alarming. The Bureau of Justice estimates that children of inmates are six times more likely than other children to be incarcerated when they get older. They are also more likely to leave school and to fall prey to depression, substance abuse, anxiety, and delinquency.\(^3\)

This negative impact on children is not lost on incarcerated mothers. According to the Family Connections staff member who attended our listening sessions, “the biggest concern for mothers in prison is that they have failed their kids on some level. Now they have to deal with the stigma of ‘horrible mom’ when they get out in a culture where moms are supposed to be perfect and nurturing.” When the Family Resource Center first opened at LRF, the staff member reported, the audience was mostly men. “When we asked the women why they were not participating, they said it was because they were ashamed by the fact they are away from their children and disrupting their children’s lives.”

Because women are no longer housed at LRF, female inmates no longer have access to the Family Connections Center. As such, they lack an important opportunity to increase their parenting skills through the programs offered by the Center. In fact, we were surprised to learn, NHSP/W is the only facility in the NHDOC system that does not offer a state-funded parenting...
program—despite the fact its population is unique by overwhelmingly having custodial responsibility of multiple children before, during, and after release.

Additionally, due to space considerations, NHSP/W has no formal visitation program with family and inmates, as is offered at the men’s facilities. Such programs are instrumental in maintaining child-parent bonds during incarceration. “Why is there no furlough system for low-risk inmates to visit with kids?” asked one female offender during listening sessions. “Why can’t we have a Family Connections Center here?” asked an inmate at NHSP/W. Inmates mentioned other such programs throughout the country, including one in Bedford Hills, New York, which allows children to stay overnight with their parents. Others mentioned the Oxford House and the Phoenix House, both privately-run facilities in New Hampshire, as model programs that incorporate children into the correctional plan of female offenders. One of the two pregnant women who attended listening sessions suggested an alternative place for expecting mothers.

These comments, it seemed to NHCSW representatives, demonstrated a desire to remain active parents during incarceration and a commitment to reuniting with children after release. Indeed, the mothers with whom we spoke expressed a deep concern for the well-being of their children while in prison. “There needs to be a network so that people taking care of our kids are really doing their job,” said one inmate, concerned her children were being cared for by a couple she suspected of using drugs. “I have a daughter I haven’t seen in 9 months because of the people who have her,” shared another inmate. “How do I know she’s okay?”

While many women expressed a desire in active parenting, multiple barriers often hampered access to children. The most pronounced of these was transportation and lack of cooperation from current caregivers. One inmate hadn’t seen her children for nine months due to distance; another, whose ex-husband had current custody, hadn’t seen her child in two years; another had complained to DCYF that when the transporter for her daughter is unavailable, there is no back up plan; yet another had only recently been able to work with the foster parent to see her daughter once a week and have regular phone calls.

There are agencies that provide transportation, inmates shared, but funding is constantly in jeopardy and demand far exceeds supply.

These and other examples suggest women face a double jeopardy in that, with incarceration, they lose not only their liberty, but their children as well. Indeed, the Adoption and Safe Families Act of 1997 enables states to begin termination of parental rights (TPR) after a child has been in foster care for 15 out of last 22 months. In New Hampshire, termination of parental rights can happen even sooner. According to RSA 169-c:24, the state can initiate TPR proceedings if a child has been in foster care 12 out of the last 22 months. The average sentence for female offenders is two years. The loss of children is a real and present danger for these women.

Many of the women we spoke with were involved in both criminal and civil suits in the form of custody and termination of parental rights. We were unable to determine how many of these cases were initiated by the state itself. According to state statute, counsel must be appointed to represent parents whose rights are being terminated by a state action. Yet, most of the women we spoke with were preparing to defend themselves in court without legal representation. One inmate who was in the process of custody proceedings shared with us: “I’m trying to use the law library, but there aren’t a lot of materials on probate and we only get so much time in the library. And there is no one to help me. Some people here can’t even read. How are we supposed to understand these books?”

Double Jeopardy
During listening sessions, it was unclear what the right of female inmates are in instances where a civil custody case is filed to terminate parental rights by the custodian of the child while the parent is incarcerated. In addition to lacking legal representation, women reported at listening sessions missing custody hearings because of lack of transportation, while others reported not being informed custody proceedings were even taking place. Shared one inmate, “Many women need advocates here to help deal with legal issues, especially dealing with DCYF and child custody. We just don't know what's going on most of the time with our kids. We're not being asked, we're not being informed.”

Double jeopardy also means that incarcerated women, faced with the unique obstacle of parenting, are likely to return to prison a second time. In particular, the halfway house system seemed especially onerous for incarcerated mothers, according to the comments of inmates. As one inmate pointed out, “We're supposed to be save money, pay rent at the halfway house, find a job, find an apartment, keep up with parole. Where are the kids in all of this?” Another inmate commented, “I don't live anywhere near Concord or Manchester, and my daughter doesn’t live there, but that is where the halfway houses are. Do we need to relocate? I’ll need to change my daughter's school, her entire life. She continues to be punished for my crime.”

In particular, inmates expressed concern about reuniting with their children upon release. “There needs to be better programs to reunite women with their children,” said one offender. “I need to find a program where I can get my children back together. The halfway houses are not working.” At the time of our visit, the social worker position at NHSP/W was vacant. As a result, the women lacked an important resource for connecting to DCYF and for public and community service referrals after release, including medical care and housing. Without this assistance, the women faced additional burdens to reuniting their children, in some instances spread across various placements.

Incarcerated women face a double jeopardy. The State does as well, when one considers the rate of recidivism among New Hampshire offenders. As primary providers for children, female offenders—along with their children—face unique obstacles during incarceration, release, and reunification. As the remainder of this report points out, when these realities are not appropriately addressed, offenders are much more likely to return to prison a second time. In the meantime, families are profoundly disrupted, and the children face a much greater likelihood of their own incarceration as adults. The state pays not only for this cycle of incarceration, but also for the social services provided to children whose parents are repeatedly behind bars.

Strategic Planning Considerations: How might NHDOC implement more comprehensive data collection about female offenders, including information regarding the number, ages, and current custodial status of offenders’ children? How might NHSP/W use to best advantage research pointing to the positive impact on rehabilitation and recidivism by fostering child-parent bonds during incarceration? How might agencies across state systems, including NHDOC, DCYF, and DHHS, better coordinate in the provision of services to incarcerated women and their children? What might an institutional review of custody cases, especially those initiated by the state, reveal about the needs of incarcerated mothers, the resources at their disposal, and the impact on children of terminating parental rights? What are the stipulations for female offenders to reunite with their children in foster care and how do social services assist in this reunification?

2. A comparison of the allocation of NHDOC state-funded program resources suggests the state is adversely hampered by “economy of scale” in providing effective gender-appropriate services and facilities to female offenders.

We requested from NHDOC a breakdown of the current allocation of the department’s resources for state-funded programming at the women's facility. We were provided NHDOC Annual Reports from the year 1999 to 2003. We point to the annual and per diem cost per inmate for each facility as reported in the NHDOC 2003 Annual Report. The chart below shows the distribution of funds for each of the three facilities and demonstrates a trend over time to cuts in the NHSP/W.

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<td>Cost/inmate/day</td>
<td>$70.21</td>
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</table>

*First year of operation

In 2003, NHDOC reported spending $4,564 less annually per female inmate as compared to male inmates at New Hampshire State Prison for Men (NHSP/M) and $1,906 less annually as compared to inmates at the Northern Correctional Facility (NCF). We emphasize the significance of the finding. In conversation with NHDOC administrators and staff as well as state legislators, we came to understand women are more expensive than men to incarcerate, largely due to increased medical costs and the need for more intensive therapy interventions.

The resource allocation among NHDOC facilities suggests the state is adversely hindered by “economy of scale” in providing effective gender-appropriate services and facilities to its female offenders. Women constitute less than 10% of the state’s total prison population. Economy of scale would dictate that the smallest percentage of the total NHDOC population gets the least amount of space, services and programs. Yet, without consistent and conscientious analysis, such a formula can easily overlook the specific demands of a small minority population and, therefore, fail to appropriately and optimally meet those needs.

Like other states, New Hampshire has experienced a dramatic increase in the female offender population. In 1983, the year the class-action Fiandaca suit was filed, eventually creating NHSP/W, 23 women were in state custody under the NHDOC. By 2003, that number had grown to 182 women—an increase of close to 700 percent.
Nationally, policy, planning, and funding have not kept pace with this growth. In New Hampshire, because of the small numbers and quick growth of the female offender population, little systemic planning on a state level has been done regarding women in the criminal justice system. Rather, to use the words of NIC consultants in their technical assistance review, the state has fallen prey to the predictable pitfall of “responding to the women as an afterthought” (NIC 22).

Nowhere does this seemed more apparent than in the allocation of program resources. Indeed, due to the economy of scale, it appears that NHSP/W has absorbed a disproportionate share of recent NHDOC budget reductions: When NHSP/W is asked to contribute its “share” of budget cuts, because the facility has so little, that small portion can prove too much.

To illustrate this point, we use an example provided to us by correctional administration. If budget reductions call for each facility within the NHDOC to cut a single vocational training program, NHSP/M would have seven remaining programs and NCF would have two remaining programs. In contrast, because NHSP/W has one vocational training program, the cut would prompt the complete closure of the vocational department at the facility.

The situation is not theoretical. In 2003, due to the elimination of a single staff position, NHSP/W lost its entire industry program. As a result, female inmates lost a significant opportunity to generate income within the prison as well as the opportunity to train for employable skills outside of prison.

Again and again, NHDOC administration and staff pointed out how repeated cuts over the last few years have forced dramatic changes in the management of female offenders. The facility operates without a “bench,” we learned in listening sessions, so that the loss of any resource leaves a gaping void in the total operations of the women’s prison. According to the NHDOC 2003 Annual Report, in that year alone NHSP/W received no major federal grants; the industry supervisor position (and, therefore, the entire program) was eliminated; one nurse staffed the second shift and no medical staff was available on the third shift; the social worker position was vacated due to retirement, which also meant the loss of 6 interns under her supervision. Under “Major Incidents,” in the Annual Report, the facility has a single listing: the suicide of an inmate.

For correctional personnel, cuts to the facility have led to staffing levels which, we heard again and again, were “dangerous” for security and inadequate to accomplish even routine functions. As one staff member at NHSP/W shared with NHCSW during listening sessions: “Concord has recreational staff, high school faculty, an industries staff, a librarian. We don’t have any of these positions at Goffstown, so staff all pitch in to get it done.” A Correctional Officer shared, “You can see the effect of being short staffed in the everyday mood of the prison. Inmates feel like nobody cares, nobody’s listening. If I’m running to the other side of the building to address a security issue, I may not have a minute to give, to listen. But that minute could mean suicide for that inmate.”

Another staff person added: “As a department, we’re warehousing, especially now there is so much need in terms of space, staff, money that we can’t even talk about rehabilitation. The most we can do is help inmates get through the day. Until we decide that we are rehabilitating, we can only provide the bare essentials.” Indeed, even the “bare essentials” are hard to provide. Due to staffing shortages we were told, female inmates at NHSP/W were not able to get out each day for physical recreation or exercise, as is mandated by federal law. Many days, inmates shared with us, sewing, crocheting, and knitting constitute the recreational program at the women’s facility.

Yet, we learned, more staff can only do so much in an antiquated facility that administration predicts will be filled to capacity with state inmates alone in the next five years.

NHSP/W was established as the result of a class action suit filed in 1983 by Mary Ann Fiandaca and 22 other plaintiffs. At the time, female inmates in state custody were housed in various out-of-state
facilities throughout the country. As a result, they had little access to their children, case managers, or legal counsel.

The final ruling of Fiandaca required the state to provide a “facility, conditions of confinement and programs and services on parity with those provided to male New Hampshire State prisoners.” The NHSP/W in Goffstown was created as a result. Yet, in visiting the facility in 2003 for a technical assistance site review, consultants from the National Institute of Corrections concluded that the facility “is woefully inadequate to offer even minimal housing, programming, and services to the inmate population” (5) and that such “very limiting conditions create a myriad of potential management concerns and potential legal liability” (22).

Retrofitted from a male county facility to a female state prison in the late 1980’s, the facility is leased, not owned, by the state for $100,000 per year. The lease arrangement reflects the use of the facility as a “temporary solution” to meet the terms of Fiandaca, yet it has hampered the state from investing capital on improving or expanding the facility over the years. The facility is largely designed for short-term, pre-sentence offenders. When the prison first opened, such a design might have been appropriate, as the large majority of female inmates were being held as county prisoners with stays of short duration. Yet, in recent years, the population of female inmates has completely reversed itself, we came to learn: today, 75% of inmates at NHSP/W are state prisoners, while only 25% are county inmates, NHDOC administrators shared with us.

The facility is ill-equipped to meet the needs of post-sentence, longer-term inmates, NHDOC administrators shared with us. NHSP/W has no on-site medical unit; is out of ADA compliance for its aging population; is out of compliance for ACA accreditation standards for cell space; lacks adequate space for appropriate therapeutic, rehabilitative, training, and education programs; and lacks adequate accommodations for attorney and family visits. Due to lack of adequate space, all levels of classification co-exist in the women’s prison, a situation unique to the facility. As a result, staff shared with us, it is difficult to effectively utilize the current classification system, raising issues of safety and security. Although the design capacity is for approximately 104 offenders, the day-to-day offender population frequently exceeds this number and has been as high as 112 several times in recent years.

The facility’s inadequacy, and the obstacles presented by its leased status, is reflected in the passage of HB1414, Chapter 67:1, during the 2004 legislative session, establishing a commission to study issues regarding the women’s prison facility. The commission’s final report, filed in November 2004, points to the operational challenges for staff due to the deficiencies of the facility, in particular a diverse inmate population that combines state sentenced inmates, county pre-trial detainees, sentenced county jail inmates, and federal detainees. “By comparison,” the commission’s report points out, “male county inmates are not incarcerated normally in state prison facilities. County offenders are housed at the women’s prison due to lack of confinement areas within the respective county jail.” Also unique to NHSP/W, the report outlines, the “women’s prison houses within the same building inmates classified from C-5 to C-2”—that is, the most violent and aggressive inmates with those considered minimum security.

The legislatively-enacted commission clearly concludes that “current facility is inadequate.” Yet, because “there are currently no existing state-owned facilities that are suitable for a women’s prison,” the report recommends that the “lease for the New Hampshire State Prison for Women in Goffstown should be renewed.” This would again extend a provisional solution to the problem. In the meantime, the report, recommends, a new commission should be created to formulate a strategic capital plan that encompasses all NHDOC facilities. This new commission should “consider acquiring a suitable site for a women’s prison or a new prison complex.”

The capital investment for an adequate female prison facility is significant, and considerations of “economy of scale” may hamper its progress. Yet the Fiandacca ruling and the reality of a quickly
growing female offender population require the deliberate and immediate attention of state leadership. Beyond “bricks and mortar,” strategic planning for an appropriate women’s prison must consider the different “pathways to prison” of men and women; the distinct life experiences and socio-economic characteristics of male and female offenders; and best practices for optimum outcomes for female offenders in institutional settings.

Adequate space in an adequate facility is the most fundamental prerequisite for the state to meet its obligations under the Fiandaca ruling and provide appropriate programming and services to female offenders.

Throughout this report, we include in appropriate sections special attention to the Northern New Hampshire Correctional Facility (NCF), a male-only facility, as an illustration on how NHDOC has successfully braided state-of-the-art facility design, appropriate programming resources, and gender-responsive management to best address the specific needs of its inmate population. Yet, we note here, at the same time NHDOC was thoughtfully planning and investing resources in NCF, resources were consistently depleted from NHSP/W.

We also include Strategic Planning Considerations to highlight some of the provocative questions prompted by our research for the purposes of this strategic planning project.

Strategic Planning Considerations: What is the true cost of incarcerating women when one considers the cost of public assistance to children whose parents are incarcerated, the cost of recidivism, and the likelihood of future costs of incarcerating children of incarcerated parents? How does the effectiveness of incarceration compare to the social cost of crimes typically committed by non-violent, low-risk female offenders? What is the appropriate staff-to-female-inmate ratio, when one considers the intensive therapy needs of women inmates? What best practices are available for facility design to accommodate the distinct profile and specific programming needs of female offenders?
3. No state dollars are dedicated to life skill programs for women offenders, despite an overwhelming prevalence among inmates of sexual and physical trauma, substance abuse and addiction, and mental illness.

Life skill programs, such as anger management, parenting classes, and AA/NA, enhance an inmate's ability to function as a productive member of society and as a positive member of a family. Chart 1, below, shows that NHSP/M and NCF have 12 and 8 life skill programs, respectively, state-run and state-funded.

In contrast, outside of chaplaincy services, NHSP/W has no state-funded life skill programs conducted by professionals in state service. All such programs are volunteer run. The distinction is considerable: Volunteer programs are subject to change based on the availability of volunteers. Programs, therefore, are sporadic and quality may be inconsistent over time. As one inmate shared with Commission representatives during listening sessions at NHSP/W, “Programming is always short-lived and always surface level. It is never deep enough to make life-changing impact.” Any recovery, therefore, accomplished in what for many women is the “safe haven” of prison, is seldom sustained outside in the community.

**CHART I.**

We requested from NHDOC a listing of state-funded programs and community service projects at the women's facility. We were provided NHDOC Annual Reports from the year 1999 to 2003. The chart below provides a listing of life skill programming in the NHSP/W, NHSP/M and NCF as published on the NHDOC website, dated June 30, 2003, and reviewed by NHCSW August 2004. Please see “Methodology” section for more information about the choice of this source.

<table>
<thead>
<tr>
<th>NHSP/W</th>
<th>NHSP/M</th>
<th>NCF</th>
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</thead>
<tbody>
<tr>
<td><strong>Life Skill Programs</strong>&lt;br&gt;(State-run)</td>
<td><strong>Life Skill Programs</strong>&lt;br&gt;(State-run)</td>
<td><strong>Life Skill Programs</strong>&lt;br&gt;(State-run)</td>
</tr>
<tr>
<td>Religious/Chaplaincy services</td>
<td>Peer exchange group</td>
<td>Drug/Alcohol Therapeutic Unit</td>
</tr>
<tr>
<td>Anger management</td>
<td>Domestic violence</td>
<td>Sex Offender Therapeutic Unit</td>
</tr>
<tr>
<td>Parenting</td>
<td>Alternatives to violence</td>
<td>Anger management</td>
</tr>
<tr>
<td>Domestic violence</td>
<td>Mediation</td>
<td>Positive mental attitude</td>
</tr>
<tr>
<td>Alternatives to violence</td>
<td>Stress control</td>
<td>Positive Connections (Alcohol/drug education)</td>
</tr>
<tr>
<td>Mediation</td>
<td>AA/NA</td>
<td>Parenting</td>
</tr>
<tr>
<td>Stress control</td>
<td>Self-help</td>
<td>Hobbycraft</td>
</tr>
<tr>
<td>AA/NA</td>
<td>Domestic violence</td>
<td>Alternatives to Violence weekend retreat</td>
</tr>
<tr>
<td>Aid to incarcerated marriage</td>
<td>Cognitive problem solving</td>
<td>Marriage retreat</td>
</tr>
<tr>
<td>Cognitive problem solving</td>
<td>Alternatives to violence</td>
<td>Kairo</td>
</tr>
<tr>
<td>Hobbycraft</td>
<td>Self esteem groups</td>
<td>Religious/Worship studies</td>
</tr>
<tr>
<td>Religious/Chaplaincy services</td>
<td>AA/NA</td>
<td></td>
</tr>
<tr>
<td>Hobbycraft</td>
<td>Women’s chorus</td>
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<tr>
<td>Bible study</td>
<td>Self-help</td>
<td></td>
</tr>
<tr>
<td>Worship/Religious studies</td>
<td>Domestic violence</td>
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The profile of the female offender is quite different from the profile of the male offender. NIC consultants emphasize the “importance of specifically planning for women’s services based on the gender-specific issues presented by this population.” Indeed, in their report, NIC consultants identify a “pathway to prison” for women offenders: incarcerated females overwhelmingly have histories of sexual trauma and physical abuse; they disproportionately suffer from mental illness, most often as a result of earlier trauma; and they frequently resort to substance abuse and addiction as a means of “self-medicating” the adverse affects of mental illness and unresolved trauma.

These characteristics make the average female inmate quite distinct from her male counterpart and call for a distinct approach as to determining appropriate treatment and management strategies. NHCSW findings demonstrate, and the NIC report confirms, that the state’s incarcerated women are faced with additional burdens to successfully transition out of prison because of the lack of policies and programs specifically aimed at addressing the unique characteristics of female inmates.

**NOTE:** Please see “Finding 1” for a discussion on the absence of parenting and visitation programs at NHSP/W.

**Childhood and adult abuse.** National research shows that, overwhelmingly among female offenders, women are victims of crime before becoming perpetrators of crime. Of the 28 inmates at NHSP/W who attended listening sessions with NHCSW representatives, 18 (64%) reported having survived sexual assault and 22 (78.5%) reported histories with violent partners. At one listening session, an inmate shared her story of having been repeatedly raped by her father as a young girl. “I survived by escaping,” she said. “I’ve been on my own since 16.” NHDOC Correctional personnel identify high incidences of abuse as unique to female inmates.

State-run and state-funded domestic violence programs are provided to inmates at NHSP/M and NCF. Yet, the state does not provide programming to female victims of abuse, which research suggests is a contributing factor for criminality in women. Additionally, the prevalence of histories of abuse among female offenders has gone largely unaddressed in the operational practices of the prison. One staff member at NHSP/W shared with Commissioners her own recent training on how management might better reflect the gender-specific needs of female offenders with histories of trauma: “Women have different issues than men and need to be treated differently than men. To a much higher degree, women are victims of violent offenses. That calls for different treatment and management strategies. You can’t stand and yell at a woman who’s been beaten by her husband for years and expect her to respond appropriately. You need to respect the differences of women’s experiences for treatment to be successful.”

**Mental illness.** A survey of prisoners conducted by the U.S. Department of Justice revealed that mental illness is an “acute barrier to reentry” for women offenders. Of the 28 inmates at NHSP/W who attended listening sessions with NHCSW representatives, 24 (85.7%) reported dealing with mental health issues while in prison. Again, correctional personnel identified this as a characteristic largely unique to female offenders.

The lack of one-on-one counseling available at the facility was a focus of conversation with both staff and inmates during listening sessions. There is no psychiatrist assigned to NHSP/W, and inmates who want to see the psychologist must first pay $3 to have a sick call with the nurse. If the nurse does not give approval for the psychologist visit, the $3 sick call charge is not refunded. Inmates reported having medication changed without first being notified and unreliable distribution schedules of medications. Many mentioned lack of confidentiality regarding medical concerns. “There is none,” said one inmate. Because there is no Secure Psychiatric Unit (SPU) at NHSP/W, female inmates are sent to the SPU at the Concord prison, where women constitute, on average, a population of one among 60 men with profound psychological disorders.

Because female inmates disproportionately suffer from mental illness, concern was raised about the preparedness of staff to identify and appropriately respond to gender-specific manifestations of mental illness in women. Generally, research shows, men externalize anger while women internalize anger, hurting themselves rather than others. In particular, both inmates and staff cited during listening sessions high instances of self-mutilation and eating disorders among female inmates, two forms of mental illness much more common in women than in men. Often, inmates shared, the symptoms of these illnesses are handled as instances of “acting out”—a response more appropriate to typical male expressions of anger. Rather than being approached with a gender-responsive treatment
intervention, such behavior often results in punishment for the female inmate. One young inmate shared her own story during a listening session: “I grew up in group homes, and I’ve been bulimic since 12. I was given a disciplinary report because I cut up [self-mutilated]. I’m considered a trouble maker because I have a mental health issue.”

Staff shared a similar concern, from a different perspective. Severe space and staff shortages have forced personnel to provide little more than what’s needed to “help inmates get through the day,” in the words of one staff member. Correctional Officers, in particular, expressed a need for more support from other programming areas, especially mental health counselors. “I’m security,” shared one Correctional Officer at the listening session. “I’m not trained to be a counselor. You can see the effect of being short staffed in the everyday mood of the prison. Inmates feel like nobody cares, nobody’s listening. If I’m running to the other side of the building to address a security issue, I may not have a minute to give, to listen. But that minute could mean suicide for that inmate.”

Indeed, the trauma of two recent suicides at NHSP/W was a topic of concern for both staff and inmates during listening sessions at the facility. Because of the lack of treatment professionals in the facility, punitive segregation apparently was increasingly used to control inmates with mental illness. The female offenders we spoke with directly linked such segregation to two suicides at NHSP/W shortly before our visit. “When someone is crying out for help,” shared one inmate, “you are sent to isolation. There’s been a couple of suicides as a result.” One suicide had hung herself in her cell. “She was strong,” shared a younger inmate. “She had been tortured her whole life before coming here. She had cigarette burns all over her body. But she was sent to segregation and couldn’t take the isolation.” We were especially struck by the word “torture” to describe the longevity of the abuse.

Another inmate mentions that, in the past year, 5 women have committed suicide after release, “because they hadn’t been healed on the inside and they couldn’t find treatment on the outside.” We did not verify the occurrence of these post-release suicides, but one inmate’s response to them was significant: “I want to get better, but I am scared to death to leave.”

Substance abuse and addiction. In April of 2004, NHDOC officials estimated that as many as 85% of inmates are in need of treatment for drug and alcohol abuse. In February of 2004, violations of the Controlled Drug Act constituted 18% of the female incarcerated population; another 20% was serving theft related offenses, which also were largely linked, we were told by NHDOC administrators, to drug and alcohol use (i.e., stealing property in order get cash to purchase drugs). NHDOC administrators generally agree that substance abuse issues are more prevalent among female than male offenders and consider this a unique characteristic of the female inmate population. Yet, no state-funded programs are available at NHSP/W, as they are at NHSP/M and NCF, to address substance abuse treatment and recovery.

The lack of such programming has a direct impact on expense to the state in an increased likelihood of recidivism and in longer sentences served by female inmates. The opportunity is lost for rehabilitative intervention. “Almost everyone who comes here is a drug addict,” said one inmate during listening sessions. “When they leave here, they are going to go back to what they know.” What they know, eventually, will land them back in prison. In short, we heard during listening sessions, women with addictions are forced into “cold turkey” when in prison; yet they are not building the skills to sustain recovery after release.

Additionally, female offenders are forced to serve longer sentences than their male counterparts due to lack of treatment programs. Many inmates—both male and female—are sent to prison with an opportunity to modify, or shorten, their sentences if they participate in court-ordered treatment programs while incarcerated. Several female inmates stated during listening sessions that they could not comply with the terms of their sentences because of the lack of treatment programs offered at NHSP/W. “How can a judge sentence you to something that isn’t there?” asked one inmate. Staff members expressed their own frustration with the situation: “We need to get the word out that these programs don’t exist here. We need to get the message across, don’t send someone to prison to recover from substance abuse, send them to a rehab facility.”

Female inmates, much more than their male counterparts, are also faced with the added complexity of co-occurring disorders when recovering from substance abuse—that is, suffering from addiction and mental illness simultaneously. Inmates on anti-depressants and similar medications are disabled from participation in NHDOC-sanctioned treatment programs, which means longer sentences if their court-order allows for modification. Others report that, under punitive segregation, inmates are cut off from all programming, including AA/NA. Yet, listening
Session participants overwhelmingly expressed a desire to use their time in prison to learn how to manage their own recovery to better succeed in life on the outside.

“We’re going out on the street with no skills to live a clean, drug-free life,” shared one inmate during listening sessions. “And we’re going to be raising kids,” adds another. A third inmate, who’s never lived as an adult outside of prison, expressed her own concerns: “I came here at 17. I’ve never had a job, rented an apartment, paid taxes. I need a mentor. I need help to figure out, ‘What kind of woman will I be?’”

The profile of the average female inmate demonstrates an urgent need for life skill programming for successful reentry into society. Anger management, parenting classes, self-esteem building, substance abuse recovery, and dealing with trauma, anxiety and depression are a few of the programs identified during listening sessions as especially needed. In addition, many younger female offenders have little to no experience living as productive citizens in the community and need coaching on such basic life skills as renting an apartment and understanding a lease; opening a bank account and balancing a checkbook; and how to search for and keep a job.

Community resources, staff shared with us, also must be identified to sustain the positive treatment outcomes for female offenders after release. Incarcerated women are poor, with little to no resources. They express deep concern about their ability to transition out to the community. “I need my current medications so I can remain stable and get a job and start a new life, but I don’t have any insurance,” one inmate shared. “Is there any way to get insurance for health care and medications after release and before I get a job with benefits?” “What do I do when I feel myself relapsing?” asked another inmate. One woman, at a different listening session, asked, “Will the State of New Hampshire throw me back in prison because I’m not able to afford a program when I get out?”

Strategic Planning Considerations: How might the effective management of female offenders be optimized by investing targeted resources in programs and services to address the specificity of women’s experiences before, during, and after incarceration? What best practices have been shown to meaningfully address the prevalence of childhood and adult sexual and physical violence, substance abuse and addition, and mental illness among incarcerated women? Considering the intensive therapeutic needs of female offenders, what is the appropriate staff-to-inmate ratio, especially for treatment professionals? What community-based resources are needed for sustainable treatment outcomes?

NCF as a model: The management of life skill programs provided to the men in this facility show thoughtful and creative management. The facility has a variety of programs that specifically reflect the priority needs of the population: drug and alcohol; sex offenses; domestic violence and other forms of anger management; and parenting. In order to best utilize state dollars for these programs and the needs they address, two of the facility’s units are therapeutic, allowing for the state’s investment in specialty training to be targeted for greatest impact and for staff to observe and reinforce behavior modifications in all aspects of the inmate’s experience in the prison. Also of note is the targeted investment of community volunteers: people from the community provide programs that enhance skills in establishing positive relationships with the community. Most likely, those programs that deal with maintaining relations with spouses (alternatives to violence weekend retreat, a marriage retreat, and Kairos) are coordinated by the spouses themselves. Considering the high rate of divorce and domestic violence reported by female inmates, the absence of such programs at NHSP/W did not seem surprising. Yet, the women we spoke to overwhelmingly expressed a desire to maintain familial relations during incarceration with their children. A program at NHSP/W could be modeled after a marriage retreat to allow mothers to spend meaningful time with their children while incarcerated.

1 NIC Report, page 27.
3 “Budget cuts mean less substance abuse help.” Concord Monitor, 04.05.04.
4 Correspondence from Warden Dick Gerry to NHCSW, 2.27.04.
In February of 2004, after NHCSW conducted its listening sessions, NHDOC launched Substance Abuse Services at NHSP/W. Until then, the Goffstown facility did not offer any substance abuse treatment besides volunteer-run AA and NA. The program is educational rather than therapeutic, and its effectiveness with female inmates has already been questioned. In an interview with the Concord Monitor (“Budget cuts mean less substance abuse help,” April 5, 2004), Joni O’Brien, who lead the program for women in the then co-ed Laconia facility, expressed concern that inmates need individual therapy to deal with the issues underlying their substance abuse. According to the article, women’s addictions often hide other issues, like sexual abuse, abandonment, post-traumatic stress and abusive relationships. Because women are more likely to stay at home, they successfully hide their addictions longer; by the time they land in prison, they need intense therapy. “They may cry about it [during class], but there’s no medium to process and work through and move beyond,” O’Brien said.
4. **Income opportunities for incarcerated women at NHSP/W is constrained by the absence of a state-funded industry program as well as by limited in-house work assignments and off-site community work programs.**

Industry programming provides inmates with the opportunity for skill training as well as a means to earn extra money in prison through the sale of goods and services, such as furniture building and repair, caning and upholstery, and ceramics and other “hobby craft” products. As the largest state facility, NHSP/M has the widest industry offerings for resident inmates. Although only a few years old, NCF has an established and growing industry program. In contrast, NHSP/W has no industry programming. Chart II, below, outlines programs offered.

**CHART II.**

We requested from NHDOC a listing of industry programs available at the women’s facility. We were provided NHDOC Annual Reports from the year 1999 to 2003. The chart below provides a listing of industry programming in the NHSP/W, NHSP/M and NCF as published on the NHDOC website, dated June 30, 2003 and reviewed by NHCSW August 2004. Please see “Methodology” section for more information about the choice of this source.

<table>
<thead>
<tr>
<th>NHSP/W</th>
<th>NHSP/M</th>
<th>NCF</th>
</tr>
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<tbody>
<tr>
<td><strong>Industry Programs</strong></td>
<td><strong>Industry Programs</strong></td>
<td><strong>Industry Programs</strong></td>
</tr>
<tr>
<td>None listed</td>
<td>Furniture shop</td>
<td>Information technology (Moved from NHSP/W in 2003)</td>
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<td></td>
<td>License plate shop</td>
<td>Caning/upholstery manufacturing technology</td>
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<td>Information technology</td>
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</tbody>
</table>

Conversations with inmates and staff suggest the industry program at NHSP/W has been sporadic for the past few years, largely due to inadequate space and staffing. In a February 2004 interview with NHCSW representatives, Acting Commissioner Les Dolecal and Warden Dick Gerry reported the industry supervisor position at NHSP/W had been eliminated. As a result, the industry program at the women’s prison effectively had been shut down due to lack of staff to supervise inmates. The major industry program then available at NHSP/W, a data entry EMS program, was transferred to NCF.

Significantly, the EMS program, as described by inmates, was a source of self-esteem for the women and its transfer deeply disappointing. “We took all the emergency calls for the entire state,” said one inmate with evident pride. The program also was viewed by inmates as an important source of training for employable skills. “We need a profession, just like the men, when we leave here. At least the EMS data entry was something. But they gave it to the men.”

Industry programs, along with in-house and off-site work assignments, are an important source of income for inmates. All inmates held at NHDOC facilities must contribute to the cost of their incarceration, including fees for food, sick call, collect calls out of the facility to legal counsel and family, and the purchase of personal hygiene products. Inmates at NHSP/W appeared to have limited opportunity to earn such income. A long-term inmate shared during listening sessions, “There are very few opportunities to
make money here, as compared to the men. There are fewer jobs. There is no industry program. We can send our sewing and craft items to sell at the store, but the men are making furniture and woodwork to sell.”

Income is a real and present necessity for all inmates, but is especially so for incarcerated mothers who serve as the sole providers of their children. Many expressed concern over the cost of collect phone calls, for some the only connection they have to their children while in prison. Many expressed a desire to earn income to send home to contribute to the support of their children. Almost all expressed anxiety about how they would be able to care for and reunite their children after release without savings for housing and other needs.

Along with industry programs, in-house work assignments are an important source of income for all inmates. We were unable to verify inmate in-house work assignments and wages across NHDOC facilities, but comments by staff and offenders suggest female inmates lack variety and quantity of work assignments as compared to the men. As a result, female inmates have limited access both to income-generating activities and to training opportunities for employable skills outside of prison. For example, a male inmate assigned to “maintenance” as part of inmate services is trained in the building trades, plumbing, painting, carpentry, boiler, electrical maintenance, welding and clerical—all transferable skills to paid employment outside the prison facility. Additionally, inmates assigned to this work detail at NHSP/M have the opportunity to reinforce “hands-on” training through employment with the completion of certification through the facility’s vocational department (a program not available at NHSP/W).

Off-site community work programs also appear unduly restricted for female offenders. Off-site community work programs allow minimum security inmates to leave the facility for employment in the community, considered an important step in transitioning back into society. During listening sessions, we heard from staff and inmates that greater numbers of women were eligible for community work programs than the facility could accommodate. The reason for this, we were told, was due to lack of transportation: the facility has a single van, which must be used for all the transportation needs of inmates, including medical emergencies.

Strategic Planning Considerations: What are the specific income needs of women offenders, especially mothers, and how can these needs be best addressed through industry programs, work assignments, and community work programs? How many incarcerated women are court-ordered to provide child support now that they are non-custodial parents? Is the variety, quality, and quantity of income opportunities across facilities equitable and is compensation comparable?

NCF as model: Although limited in scope, industry programs at this facility provide some variety of skill building for inmates, with the upholstery program complementing skills learned in wood shop. Likewise, the information technology program can utilize classroom space and equipment already at the facility as part of the educational programming. It is worth noting that the latter program includes EMS data entry, which was relocated from NHSP/W, effectively shutting down that facility’s entire industry program.
5. **A single state-funded vocational program is available to female inmates, unduly limiting employability and earning capacity after release to low-wage, low-skill jobs.**

Vocational training aims to assist inmates in acquiring marketable skills for employment outside of prison. NHSP/M houses 8 vocational programs available to inmates; NCF houses 2 such programs; NHSP/W houses one such program. Chart III, below, outlines the state-funded vocational programs provided in these NHDOC facilities.

**CHART III.**
We requested from NHDOC a listing of vocational programs available at the women’s facility. We were provided NHDOC Annual Reports from the years 1999 to 2003. The chart below provides a listing of vocational programming in the NHSP/W, NHSP/M and NCF as published on the NHDOC website, dated June 30, 2003, and reviewed by NHCSW August 2004. Please see “Methodology” section for more information about the choice of this source.

<table>
<thead>
<tr>
<th>NHSP/W</th>
<th>NHSP/M</th>
<th>NCF</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Vocational Programs</strong></td>
<td><strong>Vocational Programs</strong></td>
<td><strong>Vocational Programs</strong></td>
</tr>
<tr>
<td>Office Occupations*</td>
<td>Informational technology</td>
<td>CAD/CAM</td>
</tr>
<tr>
<td>Auto mechanics</td>
<td>Culinary arts</td>
<td></td>
</tr>
<tr>
<td>Small engine repair</td>
<td>3D Visualization</td>
<td></td>
</tr>
<tr>
<td>Auto body repair technology</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Horticulture</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Food service management</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Business education</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Building trades</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

*NHDOC website lists “keyboarding; word processing; database; spreadsheets; bookkeeping; accounting.” These are specific skill-training components that fall under the single program, “Office Occupations.”

As a complement to industry programs, the vocational programs at NHSP/M and NCF provide a variety of training opportunities and utilize a variety of skills—from information technology to building trades, automotive repair to food service management. In contrast, the vocational training at NHSP/W constitutes a single program, “Office Occupations,” and focuses on a single area of training, entry-level office clerical skills. During listening sessions, we learned this training is on antiquated computers running Office 97 platforms and Word Perfect software—both incompatible with modern office environments.

**NCF as model:** Two programs at the facility, CAD/CAM and 3D Visualization, can utilize the same computer hardware, making investment in specialized software the only added cost to increase programming. The two computer-based programs now offered complement but do not duplicate each other. As specialized skills, they offer high wages and income advancement. The culinary arts program provides training in both a marketable skill in the restaurant industry and a life skill for use in home management and family nutrition.

The single vocational program provided to female inmates seemed unnecessarily limiting, preparing inmates for low-wage, limited-skill employment in conventionally “female” occupations. Such stereotypical programming underutilizes the potential of women and underestimates the important economic role of the average female inmate as the primary provider for children. A preliminary analysis of employment prospects and earning capacity for all inmates as they directly relate to vocational training programs
available in NHDOC, shows a $7,545 income disparity between male and female inmates. This analysis is outlined in Chart IV, below.

**CHART IV.**


**A. EMPLOYMENT PREPAREDNESS & PROSPECTIVE WAGES: MALE INMATES**

<table>
<thead>
<tr>
<th>NHDOC Program: Males</th>
<th>Occupational Title</th>
<th>Median Wage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Auto mechanics</td>
<td>Auto Service Technician</td>
<td>$30,800</td>
</tr>
<tr>
<td>Small engine repair</td>
<td>Small Engine Mechanic</td>
<td>$26,700</td>
</tr>
<tr>
<td>Auto body repair technology</td>
<td>Auto Body Repair Technician</td>
<td>$34,200</td>
</tr>
<tr>
<td>Horticulture</td>
<td>Landscaping/ Groundskeeper</td>
<td>$22,500</td>
</tr>
<tr>
<td></td>
<td>First-line Supervisor</td>
<td>$33,400</td>
</tr>
<tr>
<td>Food service management</td>
<td>First-line Supervisor</td>
<td>$24,800</td>
</tr>
<tr>
<td>Building trades</td>
<td>General Maintenance/Repair</td>
<td>$28,900</td>
</tr>
<tr>
<td></td>
<td>Roofing Applicator</td>
<td>$30,800</td>
</tr>
<tr>
<td></td>
<td>Laborer-Carpentry</td>
<td>$32,200</td>
</tr>
<tr>
<td></td>
<td>Rough Carpenter/ General Construction</td>
<td>$27,400</td>
</tr>
<tr>
<td></td>
<td>Carpenter</td>
<td>$38,800</td>
</tr>
</tbody>
</table>

**Average Annual Wage:** $30,045

**B. EMPLOYMENT PREPAREDNESS & PROSPECTIVE WAGES: FEMALE INMATES**

<table>
<thead>
<tr>
<th>NHDOC Program: Females</th>
<th>Occupational Title</th>
<th>Median Wage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Office Occupations*</td>
<td>Receptionist</td>
<td>$21,700</td>
</tr>
<tr>
<td></td>
<td>Office Clerk</td>
<td>$23,300</td>
</tr>
</tbody>
</table>

**Average Annual Wage:** $22,500

*The Office Occupations program, as defined in the NHDOC 2002 report, prepares “inmates for entry-level office employment upon release into the community.” As such, we have used “Receptionist” and “Office Clerk” as two occupations representative of entry-level employment in an office setting.

Constricted by staff, space, and resources, the vocational program at NHSP/W nevertheless shows diligent creativity in leveraging resources with community volunteers in order to expand meaningful training opportunities to female inmates. In particular, the facility has created the “New Journey.”
Program with support from the New Hampshire Human Resources Association. The eight-week course runs twice a week for 2.5 hours each day. It features human resource professionals as guest speakers on such topics as job interviewing, resume writing, and understanding employment benefits. Evaluations of the program are overwhelmingly positive and indicate that participants gain self-confidence, motivation, and tangible tools for learning about themselves and searching for employment.

It should be noted that, while facilitation of the course is headed by the facility’s paid staff, the program is greatly supported by the Human Resources Association and its volunteer members rather than by state funds. Additionally, this added dimension does not mitigate the limitations of the core vocational program in office occupations. Shared one inmate during listening sessions, who had been released and returned to prison, “The certificate I earned in prison did little good on the outside.” Yet, female inmates expressed strong desire and possess great incentive for acquiring skills for economic self-sufficiency upon release. “I’m taking whatever they have to offer to get back on the right track” shared one first-time inmate. “I have kids to support when I leave here.”

Strategic Planning Considerations: How might NHSP/W provide greater variety of vocational programs and training for higher-skilled (and better compensated) occupations? What is the average employment history and work experience of the female inmate? What wage do incarcerated mothers need to earn in their home communities in order to provide for the economic support of themselves and their children? What occupational training programs might meet these wage requirements?
6. Educational opportunities at NHSP/W are limited to G.E.D. prep, losing the opportunity to rehabilitate a highly trainable inmate population with a great interest in educational services to increase their success upon release.

Under RSA 194:60, NHDOC established a special school district to serve the educational needs of eligible adult offenders. As a result, in 1999, Granite State High School (GSHS) was established at NHSP/M in Concord. In addition to providing basic GED preparation, GSHS offers a variety of credited high school courses in history, literature, writing, science, computers, as well as courses in personal finance, conflict resolution, and interpersonal boundaries. Inmates at NHSP/M are provided the opportunity to enroll in college courses at their own expense.

The program has been successful in helping inmates meet state requirements for full high school graduation. As the NHDOC 2003 annual report puts it, inmates at NHSP/M “are returning to high school and they are succeeding. They are also beginning to report higher academic goals for themselves.” Additionally, according to staff, the wide menu of courses offered through the high school contributes to the “success in both the world of work and as a responsible citizen” of inmates.

Theoretically, medium security inmates at all NHDOC facilities are eligible to take courses through Granite State High School. Yet, due to the economy of scale, NHDOC has been unable to provide a variety of instruction to female inmates. On-site educational programs at NHSP/W are limited to G.E.D. prep only.

One female inmate during listening sessions at NHSP/W expressed her own assessment of lost opportunity to increase education while incarcerated: “There is a lot of need here. Some inmates are illiterate, can't read or write. When we're released, we're bound to get into drugs. I myself didn't graduate. I have tried to drain the system for all the education I can.” Yet, after four years in the prison, she still had not managed to get her G.E.D. “Mostly because of the paperwork,” she shared. “There are pre-GED prep classes, but no one to help you one-on-one when you need help. I come from a different country, and I spell everything in Spanish. There's only one person here who speaks Spanish, and she's leaving.”

Non-English speaking inmates, we learned, are at a distinct disadvantage in the facility, alienated by language from staff and other prisoners. Inmates with learning disabilities also brought up during listening sessions the lack of one-on-one time with instructors for educational assistance.

While NHSP/W has a law library, it appears to be limited in scope for the needs of female offenders, many of whom are involved with both criminal and child custody proceedings simultaneously. Additional access and legal assistance, inmates told us, are needed. An inmate who was in the process of custody proceedings shared: “I'm trying to use the law library, but there aren't a lot of materials on probate and we only get so much time in the library. And there is no one to help me. Some people here can't even read. How are we supposed to understand these books?”

Staffing shortages and inadequate space, according to staff, keep the women's prison from more creative efforts at educational approaches. As one staff member stated, “Concord has recreational staff, high school faculty, an industries staff, a librarian. We don't have any of these positions at Goffstown, so that staff all pitch in to get it done.” Shared another staff member, “As a department, we're warehousing, especially now there is so much need in terms of space, staff, money that we can't even talk about rehabilitation. The most we can do is help inmates get through the day. Until we decide that we are rehabilitating, we can only provide the bare essentials.”

This appears to be a lost opportunity. The inmate population at NHSP/W, as the comments above suggest, expressed great interest in educational services to increase their success upon release.
Additionally, we came to learn that the female inmates are highly trainable, with an educational profile quite distinct from their male offenders.

Statistical information gathered by NHDOC is not reported by gender. As such, NHDOC and its subsidiary facilities have no tool to examine female offenders as a distinct population within NHDOC and, therefore, identify their distinct assets or needs. Educational programming at the facility is an example. The NHDOC 2003 Annual Report estimates that 83-85 percent of all NHDOC inmates do not have a high school diploma or a G.E.D. Yet the preliminary findings of an assessment of NHSP/W inmates alone, done by volunteers, shows 93% of female inmates do possess either a G.E.D. or a high school diploma.

The average female inmate is “highly trainable,” in the words of Dr. Elaine Rizzo, who conducted the community assessment and sits on the NHSP/W Citizens Advisory Council. Additionally, in its 2003 Annual Report, NHDOC provides information to show that C3 inmates far outstrip their counterparts (including minimum security custody, C-2 inmates) for average academic performance. Approximately 80% of female inmates are classified at C-3 level.

With such a diversified population, coupled with a strong desire to learn, the prison has great potential to be its own educational community. “I could tutor the girl that needs G.E.D. prep,” one inmate with a college degree suggested during listening sessions. “She could teach me Spanish in return. That women over there, she’s an incredible artist. She should be teaching us classes. All of us have wonderful qualities we could bring to the table. Where there is weakness, we can bring strength.” Additionally, one of the state’s premier colleges, which already has established strong links to NHSP/W, is less than two miles away, providing an opportunity for significant public-private partnership.

Yet, we came to learn, lack of staff and space, and the security issues these entail, severely hinders the possibility for such innovation.

A felony conviction, our research also revealed, significantly limits self-initiated educational goals for inmates after release. Federal law disqualifies felons from receiving federal student financial aid. We learned this fact in answer to one inmate who asked if she could return to school after release. She stated she was taking classes at the Berlin Technical College on federal Pell grants before she was arrested on drug charges. She will not longer qualify for this financial educational support as a felon.

Strategic Planning Considerations: How might NHSP/W better leverage community resources to provide meaningful educational opportunities to female inmates? What best practices are shown for adequately providing services to inmates who are non-native speakers? What educational programs might be used as models for innovations within NHSP/W?

NCF as a Model. It is our understanding that, like NHSP/W, the educational program at NCF provides G.E.D. prep only. It therefore is likewise limited in its ability to provide rehabilitative opportunities through educational programming.

4 Preliminary findings of the Community Assessment of NHSP/M conducted by Professors Margaret Hayes, R.N., and Elaine Rizzo, Ph.D., of Saint Anselm College in the spring of 2003.
CONCLUSION: “What are we supposed to do when we get out?”

- Our findings suggest that lack of gender-responsive programs and services contributes to a “cycle of incarceration” for women offenders and a “double jeopardy” for incarcerated mothers, further disrupting families and adding exorbitant cost to the State.

The profile of the female offender is quite different than the male offender.

Distinct characteristics make the average female inmate distinct from her male counterpart and call for a distinct approach as to determining appropriate treatment and management strategies. Indeed, NIC consultants emphasize the “importance of specifically planning for women’s services based on the gender-specific issues presented by this population.”

NHCSW findings demonstrate, and the NIC report confirms, the state’s incarcerated women are faced with additional burdens to successfully transition out of prison because of the lack of policies and programs specifically aimed at addressing the unique characteristics of female inmates.

Inadequate planning for and understanding of the specific needs of female offenders results in an increased likelihood of recidivism for women. The words of NIC consultants are explicit on this point:

While many staff work effectively with the women, few have the training to manage the many facets of working with women offenders. The result is a caring environment, but one with limited services and staff training to impact a women’s chances to return successfully to the community. Staff work diligently to meet the many needs of women who are separated from children, detoxing from intake status, doing long term sentences, threatened with loss of custody of their children, and managing various degrees of mental health complications. The lack of program and clinical staff puts undue responsibility on the current staff who may or may not have the skills to address serious clinical issues. It appears to the consultants that limited services for the women contribute to the cycle of incarceration.

Because the vast majority of female inmates in the state are mothers, women in particular face a “double jeopardy” upon release, forced to provide not only their own support, but for that of their children as well. The challenges are considerable and the economic reality largely unique to the female offender population.

NIC consultants stress in their report, “most men are not the primary caretakers of their children” and as such “women’s economic realities are often different than men’s regarding children.” Women particularly experience a ‘double jeopardy’ of losing their children and being returned to prison when housing and work opportunities do not materialize after release.

Again and again, during our own information gathering, we heard the concern of NHDOC administrators and staff: when female inmates are released, most are immediately responsible for the economic support of their children. Without acquired skills and appropriate transitional services, they are set up to fail in the system.

Nowhere is this more apparent than in transition back to the community. In particular, in the halfway house system, if an offender has not secured housing and employment within a reasonable timeframe, she is considered a program failure and can be returned to prison. The situation, NIC consultants conclude, “contributes to the financial burden experienced by many women, particularly those reuniting with their children.”
Likewise, the absence of programs designed to enhance job skills clearly thwarts the success of the average woman upon release from state prison. NHDOC staff reported that many of the female offenders do not have viable skills upon release from prison and thus return to “what they know,” e.g. prostitution, etc. Additionally, staff reported, “for the most part, the women can only find jobs that pay minimum wage and have no benefits. If they miss one day of work due to illness, they lose their jobs.” Many of these women, staff shared, “resort to taking money from prior associates, and thus have returned to the same environment that led to their incarceration.” As one inmate shared with us, “You need training to fall back on when you get out. If you need to work three jobs and have children, you’ll fall back into your old life. If we got the training, we wouldn’t be recycled back into the system.”

Life skills also are urgently needed for successful reentry. “Many of the women are young, and before coming to prison, have never lived on their own, written a check, paid bills, or been responsible for running a household,” according to one halfway house staff member. To be successful, life skill programming must address the distinct “pathway to prison” for female offenders, including histories of abuse, addiction, and mental illness. As one inmate, a drug addict since the age of 11, shared with us: “I need to learn to live without drugs. I’ve been living on the street, from place to place, for years. Even general living skills would be useful.”

Programs and services for female inmates must address the complexity and challenges of incarcerated motherhood. As one inmate shared with us, “I need help to figure myself out, my strengths and weaknesses, to get back on my feet. I need to build everything up again—stability, job, career, home, children, day care. I’m afraid I’m going to lose my children.” Another inmate, more succinct, articulated the concern of many of the women with whom we spoke:

“What are we supposed to do when we get out?”

As felons, like all felons, these women’s lives are marked forever. They are no longer eligible for Section 8 housing vouchers and other public assistance. They are barred from federal financial student aid. And they will have difficulty finding employment with little skills and a criminal record. “Chances are pretty poor that I’ll get a good paying job when I get out,” shared one inmate during listening sessions. “Other people who haven’t been to prison will get a job before me.” This was not her first time at the facility. She spoke from experience.

Yet, these felons, as a distinct population, are responsible for the care and support of children upon release. When they fail, entire families fail.

Women are expensive to incarcerate, in both social and financial terms. In 2003, the NHDOC spent close to $24,000 per year per female inmate. For every child put into foster care while the mother is incarcerated, estimates show the state pays an additional $25,000 per year. And the state, most likely, will pay more than once: The rate of recidivism among New Hampshire inmates is 50%. Meanwhile, families are broken apart, children are traumatized, and entire communities disrupted.

“There is an opportunity to start a new life in prison,” one NHDOC administrator shared with us, expressing a sentiment shared by so much of the staff with whom we spoke. “I want to shut down new prisons, not build new ones.”

We urge the State, its agencies, and its communities to adopt such an outlook. At the current rate of growth for female offenders, New Hampshire’s lone women’s prison will be filled beyond capacity in a few short years. Curbing recidivism can significantly ebb that growth. It is in the best interest of the State and its families, our findings strongly suggest, to invest today in the development of gender-responsive services for the optimal outcomes of the female offender population.
NIC Report, page 27.
3 NIC Report, page 29.
5 NIC Report, page 15.
6 NIC Report, page 18.
7 NIC Report, page 17.
8 NIC Report, page 18.
9 NIC Report, page 18.
10 NIC Report, page 18.
APPENDIX A: A COMPARATIVE ANALYSIS OF FIANDACA AND THE NIC TECHNICAL ASSISTANCE SITE REVIEW

The New Hampshire State Prison for Women (NHSP/W) was established as the result of a class action suit filed in 1983 by Mary Ann Fiandaca and 22 other plaintiffs (hereafter “Fiandaca”). At the time, female inmates in state custody were housed in county facilities and at various out-of-state facilities throughout the country. As a result, they had constricted contact with their children, case managers, and legal counsel as well as little access to services, programs, and pre-release facilities.

The presiding judge, the Honorable Martin Loughlin, decided in favor of the plaintiff class, writing:

“[F]emale state prisoners experience conditions of confinement different than and inferior to that for male inmates at the New Hampshire State Prison for reasons based solely on their gender.”

Judge Loughlin cited specific examples of the gross disparities between the treatment of male and female prisoners, including “lack of equal visitation privileges, same access to counsel, same immediate access to their case managers, cost of long distance telephone calls, lack of access to an attorney located at the NH prison, lack of equal classification, recreational facilities, equal rights to compensatory pay, right to refuse unequal onerous jobs . . . , right to be subject to the rules solely of the NH prison, access to law libraries, the right to appear at periodic classification, equal educational rights and equal rights of grievance, pre-release services and facilities, and lack of the same commensurate treatment that male inmates experience.”

After a series of procedural appeals, Judge Loughlin issued his final order in September 1992:

“It is hereby ordered, adjudged and decreed that, effectively immediately, defendant will provide all members of the plaintiff class with a facility, conditions of confinement and programs and services on parity with those provided to male New Hampshire State prisoners.”

More than twenty years after the Fiandaca suit had first been filed, and more than ten years after the final order creating the NHSP/W in Goffstown, the state continues to face challenges in providing programs, services, and conditions of confinement for female offenders on par with male offenders. In 2003, the National Institute of Corrections (NIC) was invited by the Commissioner of NHDOC to conduct a technical assistance site review of the conditions of confinement for female inmates. In their final report, NIC consultants concluded:

The New Hampshire Department of Corrections is at a critical point in planning for and managing the state’s female offender population. The history of managing this population includes a 1992 lawsuit (Civil Action No. c-83-400-L), which directed the state to house women offenders in a facility separated from men offenders. The state was further mandated to provide parity between women’s and men’s programs in those separate facilities. During this technical assistance site visit, there was little evidence that the key components of the lawsuit were consistently embraced during this last decade (emphasis added, page 25).

The chart attached examines lingering issues first brought forward in the Fiandaca suit specifically mentioned in the NIC report. When useful, information is provided from research conducted by the Commission on the Status of Women for the present report.
### Chart. Programs, services, and conditions of confinement for female inmates under state custody

|------------------------|------------------------------------------------------------------------------|-------|
| **Classification & Intake**
During proceedings, testimony reveals the huge disparities in the intake processing of female and male inmates. Male offenders upon arrival are tested extensively during a three-week period, including physical exams, psychological tests, psychiatric evaluations, and skills, training, and classifications tests. In contrast, Judge Loughlin found, female offenders were subject to an abbreviated intake process that was sometimes completed within an hour and lasted no more than two hours. | “There has been no focus on the unique situation stemming from the fact that all levels of classification co-exist in the women’s facility in Goffstown. This degree of a mixed classification of inmates is unique to the women’s facility” (11). The NIC consultants conclude, “the staff is not prepared to meet the demands of a mixed custody population housed in an inadequate space” (25). Key staff members cite as a major concern in their meeting with NIC that the current classification system is “geared for the male population and is inappropriate to evaluate the issues of women offenders,” including “women’s mental and medical health issues, the relationships between women offenders and their children, and the absence of services both inside the prison and in the community” (13). | According to the NHDOC 2003 Annual Report: “The [male] offender is placed in quarantine during the first 30-60 days of incarceration. During this time, the offender goes through an extensive intake process and interview. The offender is photographed, fingerprinted, and evaluated for program needs and housing as part of the intake process. A thorough medical and mental health screening is conducted on each individual as well as numerous other assessments. Phone and visiting privileges are set up and any special needs are addressed” (30). In personal conversation with Dick Gerry, Warden, NHSP/W, all female inmates to the prison, both state and county offenders, receive 8 hours of intake processing. |
| **Recreation**
In providing evidence of female inmate’s lack of access to recreational facilities, an inmate testifies she had been confined to her cell and the indoor common area 24-hours a day for six months. | “Because of staffing shortages, [inmates at NHSP/W] indicated that they were confined to the buildings with little access to outdoors. Given the relatively small size of the facility and cramped quarters, this is viewed as a serious concern by both inmates and staff” (15). | Due to staffing shortages we were told at listening sessions, female inmates at NHSP/W are not able to get out each day for physical recreation or exercise, as is mandated by federal law. Many days, inmates shared with us, sewing, crocheting, and knitting constitute the recreational program at the women’s facility. |
| **Compensatory Pay/ Work Assignments**
In his final order, Judge Loughlin notes inequitable access to work detail and lack of equal compensation between male and female | Female inmates reported to NIC consultants “the male inmates have hobby craft opportunities such as woodworking and ceramics and can earn an income by the sale of these items. This | |


inmates. At the time, male inmates received 85 cents per day whether they worked or not, with an average pay of $1.50 and a maximum of $2.50 per day. One female inmate testifies that, while confined in a county institution while under state custody, she was forced to work from 7:00 a.m. to 7:00 p.m., 7 days a week doing the laundry for the facility. Judge Loughlin writes, “Compensation! The munificent sum of 3 packs of cigarettes a day!”

Privilege is not available to the women due to lack of staffing and space” (15).

- “Inmates told consultants that regardless of their work assignments, all inmates get paid a small wage, so no inmate is considered indigent. From that small salary, they must pay for even basic supplies like personal hygiene items (tampons, toilet tissue, etc.) and that they are issued only three pairs of underwear (these are sometimes recycled items)” (15).

### Programs & Services

- **During the proceedings**, the court heard expert testimony about the specific and unique characteristics of female offenders, especially “mothers with young children in their formative years.” Testimony addressed the prevalence of childhood and adult sexual assault and domestic violence among female offenders, contributing to the final assessment by Judge Loughlin of the lack of parity in the programs and services provided to female inmates in state custody.

- Key staff members cited as a major concern in their meeting with NIC “the absence of programs and meaningful activities for women housed at the facility”: “There are no standardized programs for female inmates at the facility comparable to those provided for male inmates in the system,” including “drug and alcohol programs, mental health services, hobby craft, chaplaincy services, vocational programs, etc.” (13).

- Staff and inmates reported to NIC that “other self-help programs are provided by volunteers, and thus are not ongoing. There are often long periods when these types of programs are not offered” (16).

- NHSP/W reported to NIC that “many women coming into the prison had mental health issues, but these issues were not being properly addressed. As evidence, they cited the fact that there were two suicides at the [Goffstown] facility in the last six months [prior to August 2003], a fact confirmed by NIC consultants” (15).

- After visiting Concord State Prison, Secure

- According to the NHDOC 2003 Annual Report, no major federal grants were received by NHSP/W; work continued on applying for a VOI/TAS grant for a substance abuse treatment program for incarcerated women.

- According to the NH DOC 2003 Annual Report, NHSP/W lost its Industries Supervisor position and the work done under this program was sent elsewhere.

- As of June of 2003, the single social worker position at the NHSP/W was unfilled. With no professional supervision, the social services intern program was also suspended.

- One nurse staffed the second shift at the NHSP/W, according to the NHDOC 2003 annual report. No nursing or medical staff is assigned to the third shift. No medical staff, therefore, is available at the NHSP/W after 11 p.m.
Psychiatric Unit, NIC consultants query in their report, “Are the activities for women unreasonably limited by sharing a housing unit with the men? Women reported that they were. This again, raises a parity issue” (22).

- In meeting with NIC, long-term inmates addressed the “inequity in programs and services provided for women inmates when compared with male inmates,” giving as a recent example the loss of a vocational program [EMS Data Entry] and the transfer of that program to a male facility. “[Inmates] were told they would get another program to replace it but it has not happened” (16).

- Inmates at NHSP/W “cited an absence of programs [in the prison] designed to teach inmates job skills and life skills” (15).

<table>
<thead>
<tr>
<th>Pre-Release Services &amp; Facilities</th>
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<tbody>
<tr>
<td>Because female inmates were housed in out-of-state facilities, they were subject to the rules of the host state, including disallowing out-of-state inmates from participation in work release programs. Additionally, geographical distance prevented inmates from meaningfully accessing pre-release services and facilities for successful return to New Hampshire.</td>
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- “While many staff work effectively with the women, few have the training to manage the many facets of working with women offenders. The result is a caring environment, but one with limited services and staff training to impact a women’s chances to return successfully to the community. Staff work diligently to meet the many needs of women who are separated from children, detoxing from intake status, doing long term sentences, threatened with loss of custody of their children, and managing various degrees of mental health complications. The lack of program and clinical staff puts undue responsibility on the current staff who may or may not have the skills to address serious clinical issues. It appears to the consultants that limited services for the women contribute to the cycle of incarceration” (emphasis added, 25).

- In 2004, NHDOC converted Shea Farm in Concord to a female-only minimum security and work-release facility. The 40 beds at the facility are presently full. Women are no longer housed a Calumet Halfway House or the Laconia facility, where they had occupied a small minority among a much larger male population.
Current NHSP/W inmates previously assigned to Calumet House, a co-ed halfway-house facility, “painted a very dismal picture of the halfway house experience.” Many of the observations and impressions about their experience were shared by staff and later confirmed by NIC consultants in their own visit to the halfway-house facility. Observations included “receiving little help or transitional services,” “little or no medical attention,” and “no gate money when released from prison.” With little to no support in job searching, “unless [halfway house residents] can find jobs within a reasonable timeframe, they are considered a program failure and can be returned to prison” (15). Staff at the half-way house reported that “many of the women do not have viable skills upon release from prison and thus return to ‘what they know,’ e.g. prostitution, etc.” (17). Female residents reported that, with few skills and no support from family or friends, “many of the women resort to taking money from prior associates, and thus have returned to the same environment that led to their incarceration” (18).

In its conclusions, NIC notes: “Women particularly experience a ‘double jeopardy’ of losing their children and being returned to prison when housing and work opportunities do not materialize. Most men are not the primary caretakers of their children and are not seeking housing to accommodate them” (29). NIC consultants include in their recommendations to the state: “Assess financial demands on women in halfway house and determine if policy decisions are hindering success. Women’s economic realities are often different than men’s
### Commensurate treatment

In hearing expert testimony on the gender-specific characteristics of female offenders, Judge Loughlin wrote: “The gist of her testimony was that women prisoners have been neglected and considered to be second-class citizens. The court, after hearing and reviewing the evidence, whole heartedly agrees with the conclusion.”

- In noting the lack of systemic planning at the state level regarding women in the criminal justice system, NIC consultants conclude the state “has fallen prey to the predictable pitfall of responding to the women as an afterthought” (22).
- In focus groups, staff and personnel at NHSP/W report they are “treated as ‘step children’ in the system” (13). In particular, staff at NHSP/W point out they were not consulted for their expertise in the management of women offenders as to the appropriateness of the proposed move to Laconia. Additionally, staff was informed, of the 108 jobs slated for elimination under the plan, 46 were staff positions held at NHSP/W, including the lone provider in NHDOC specially trained and nationally certified in women’s health care.
- In focus groups, NHSP/W inmates “cite that they are governed by and expected to follow the same rules as male inmates, but are not given the same privileges” (15).
- NIC consultants report on the conditions of confinement for female inmates at the Concord State Prison, Secure Psychiatric Unit: “The physical environment, particularly several of the cells on the women’s wing, were in serious disrepair with water leaking down the walls. . . . While on the unit, the consultants observed a woman being moved from one room to another to avoid the current problem of water leaking down the wall of her cell” (22-23). In addition, NIC notes, “The lack of observed activity and the isolation to a small day room placed the women
with each other for many hours. The idleness appeared excessive” (23).

- In addressing the unique situation of counties in contracting with the state to send county inmates to NHSP/W, NIC notes that decisions are based on “economics, space availability, staffing and location,” rather than on consistent or sound correctional policy. As a result, “the services and operational realities for women involved in the criminal justice system in New Hampshire vary widely based on each county’s policy and local resources” (26). In touring one county facility, NIC notes: “At the time of the visit, there were three women prisoners at the jail facility. There did not appear to be any designated housing area for these women, and they were being managed in two locations, both inadequate. Two of the women prisoners were locked in the visiting room and were resting on mattresses on the floor. . . . At least one of the women had been at the facility for four days” (21).
APPENDIX B. A Composite Profile of New Hampshire Female Inmates

The first aspect of gender-responsive planning involves understanding the profile of women offenders in terms of their specific demographic characteristics and the patterns of experience and personal history that shape their behavior as offenders, inmates, and parolees.

Only limited demographic statistics of female inmates are maintained by NHDOC. Intake assessment, for example, does not include the number, ages, or custody status of children of incarcerated women. The information below does not presume to be statistically valid or sound sociological research. It is included for informational purposes only.

Narrative Composite Profile of the Average Female Inmate in State custody.

The typical inmate at the NHSP/W is a white divorced woman in her mid-30s with a high school diploma and some professional training. She lives in the southern tier of the state. She is a mother and the sole provider of at least two children in their teenage years.

In prison, she will face significant barriers to maintaining contact with her children, the most pronounced being lack of transportation for visits and conflicts with current caregivers. She plans to reunite with her children after release, and she estimates it will take a year before the family is completely reunified. Because of the length of her sentence, she is in jeopardy of having her parental rights terminated by the state under the 1997 Adoption and Safe Families Act.

She is poor, with few job skills and a sporadic work history. This is her first time in prison. She was represented by a public defender and plea bargained her sentence. Convicted on a non-violent drug-related offense, she'll serve two years in prison and then another 14 months on parole. As a non-violent, low-risk offender, she'll be classified as a C-3 inmate, among the general population eligible for programs and rehabilitative services.

She needs these services. She was using drugs at the time of her arrest, and used drugs daily on the “outside.” She is a survivor of childhood and/or adult sexual and/or physical violence. She has complicated physical health issues and a history of mental illness. Without appropriate treatment, she will return to prison a second time.

Composite Population Profile of Female Offenders in State Custody.

Growth:
1976: 3 women
1983: 23 women
1998: 59 women
2003: 182 women

Race:¹
Less than 5% of the population is black or Hispanic by race.

Jurisdiction:
Approximately 75% of the Goffstown population is state sentenced offenders. The remaining 25% are either county or federal inmates.²

66% of NHSP/W inmates lived in Hillsborough County before their incarceration, with the remainder living in areas throughout the state.³
Age:
- 50% plus 31 to 50 years of age
- 15% 51 years of age or older
- 17% 25 years of age or younger

Education:
- 6.7% Some High School
- 33% G.E.D.
- 60% High school diploma
- 20% Some college
- 46.7% Professional training
- 20% College degree

Marital Status:
- 27% Single
- 14% Married or in a committed relationship
- 63.6% Divorced
- 7% Separated

Parenthood:
“In the state of New Hampshire it is estimated that between 85-90% of the women incarcerated at the New Hampshire State Prison for Women (NHSP/W) are mothers. On July 14, 1998, 50 of the 59 women incarcerated in the NHSPW were mothers.”

In a 1998 study based on interviews with 15 of the 43 women on parole in the state with children under the age of 21:

- 38 Number of children to whom participants were mothers
- 2.5 The average number of children born to participants
- 14.32 Mean age of children

When asked about custody, participants responded:

- 80% Had custody prior to incarceration
- 27% Had reunited with children
- 47% Intend to reunite

Of the participants, all were aware of the children’s placements during incarceration, illustrating that mothers had an active role in their children’s parenting prior to their entering prison.

When asked about visitation, participants responded:

- 33% Had regular weekly visits
- 25% Had sporadic visits
- 42% Had no visits
- 77% Paternal caretaker weekly phone or mail contact with mothers
- 28% Paternal caretaker regular weekly or biweekly visits

80% of participants reported barriers to maintaining contact with their children. When asked about specific barriers, participants responded:

- 46.7% Collect calls
60%  Transportation
26.7%  Emotional reactions
40%  Conflict with caregivers

Crime
In February of 2004, approximately 20% (24) of the female population were serving theft related offenses. Violations of the Controlled Drug Act constituted approximately 18% (22) of the population. There were 19 individuals serving either murder or negligent homicide offenses. Other offenses included: weapons offenses, habitual offender, assault, burglary, robbery, sexual assault, forgery, shoplifting, and escape.

<table>
<thead>
<tr>
<th></th>
<th>Men</th>
<th>Women</th>
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<tbody>
<tr>
<td>Total</td>
<td>2310</td>
<td>116</td>
</tr>
<tr>
<td>Controlled Drug Act</td>
<td>288</td>
<td>20</td>
</tr>
<tr>
<td>Habitual Offenders</td>
<td>139</td>
<td>4</td>
</tr>
<tr>
<td>Sexual Offenders</td>
<td>600</td>
<td>7</td>
</tr>
</tbody>
</table>

Sentencing
71% of women inmates had plea bargained
96.9% had used public defenders in their defense

In a 1998 study based on interviews with 15 of the 43 women on parole in the state with children under the age of 21, participants reported:

- 28  Average number of months participants had been incarcerated
- 14  Average number of months participants had been on parole
- 60  Percent of participants for whom this was their first incarceration
- 40  Percent of participants incarcerated for property felony offenses, including theft, forgery, and larceny
- 53  Percent of participants who were incarcerated for substance abuse related felony offenses, including sales distribution or possession of narcotics

<table>
<thead>
<tr>
<th>Classification level</th>
<th>Description</th>
<th>Percentage</th>
</tr>
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<tbody>
<tr>
<td>C-5</td>
<td>Violent, assaultive inmates, danger to self or others</td>
<td>Less than 1%</td>
</tr>
<tr>
<td>C-4</td>
<td>Long disciplinary history, close custody</td>
<td>Less than 4%</td>
</tr>
<tr>
<td>C-3</td>
<td>General population inmates, programming inmates</td>
<td>Approx. 80%</td>
</tr>
<tr>
<td>C-2</td>
<td>Minimum custody inmates, housed on the inside but assigned to community work crews</td>
<td>Less than 20%</td>
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</table>

Substance and Drug Abuse
NHDOC officials estimate that as many as 85% of all inmates in the state’s correctional system need treatment for drug and alcohol abuse.

In a 2003 Community Needs Assessment survey of NHSP/W inmates, participants reported:

- 50%  Using drugs at time of arrest

Double Jeopardy
60% Using drugs one month prior to arrest
74% Using drugs daily

Requested Services
In a 1998 study based on interviews with 15 of the 43 women on parole in the state with children under the age of 21, participants made the following observations.\(^{15}\)

Services requested while incarcerated: educational and vocational training; parenting classes for older (teenage) children; transition program designed to help facilitate jump from prisoner to parent; advocacy hotline or service that would help women who are experiencing court custody battles with ex-spouses.

Services requested on parole: financial assistance programs that would enable them to manage their finances and help them set up a home for themselves and their children; counseling, both individual and family, especially for those intending to reunite with children and to parents of older children.

Access to Services: “Would you feel comfortable receiving services from?”
89% Church or other religiously affiliated group
66% Department of Corrections
22% Department of Health and Human Services
100% Private community service organization

In a 2003 Community Needs Assessment survey of NHSP/W inmates, participants made the following observations.\(^{16}\)

86% of participants found the following support groups to be effective: Alcoholics Anonymous, Narcotics Anonymous, Bible study, anger management, eating disorder group, and houses of healing (domestic violence). “The participants in the community assessment . . . feel that these programs are absolutely necessary to help them succeed in staying out of prison upon release.”

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1 Correspondence from Richard M. Gerry, NHSP/W Warden, 2.27.04.
2 Correspondence from Richard M. Gerry, NHSP/W Warden, 2.27.04.
4 Correspondence from Richard M. Gerry Warden, 2.27.04.

Correspondence from Richard M. Gerry, NHSP/W Warden, 2.27.04.

Elaine Rizzo, Ph.D. with Margaret Hayes, R.N., of Saint Anselm College. Preliminary findings of a community needs assessment conducted at the NHSP/W in the spring semester of 2003. Information provided during listening sessions by NHCSW with the Citizens Advisory Committee to NHSP/W.

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NIC Report, page 25.

“Budget Cuts Mean less substance abuse help.” Concord Monitor, 04.05.04.

Elaine Rizzo, Ph.D. with Margaret Hayes, R.N., of Saint Anselm College. Preliminary findings of a community needs assessment conducted at the NHSP/W in the spring semester of 2003. Information provided during listening sessions by NHCSW with the Citizens Advisory Committee to NHSP/W.


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