# Rehabilitating Gang Members Into Suitable Citizens

With the female inmate population increasing at an alarming rate, the United States government has intended to create strategies limiting female offenses. Recently the female inmate population has risen from 26,378 in 1980 to 215,332 in 2014 (McConnell 2017). Women just like men, have begun to engage in every form of criminal activity such as assault, robbery, and homicide. However, most offending done by females is made up of nonviolent crimes and are even victimless at times. The main forms of crimes women commit are drug, property and sexual based offenses. Demographic studies have even shown that women in jails and prisons come from low economic communities. Females have historically suffered brutal treatments in correctional establishments. Moreover, in terms of female incarceration, the issues surrounding housing of females has not been a rare phenomenon. Historically, female inmates have dealt with unsuitable housing conditions and inadequate reintegration treatments, and unfortunately, continue to deal with these issues today.

Since the establishment of the American criminal justice system, women's experiences have not been taken seriously. Whether it was being victimized or being offenders, women were given injustice treatment. Specifically, in terms of female incarceration, the conditions for women in the first correctional institutions were horrific. Female inmates were housed in male prisons in a separate unit before the development of all-women correctional institutions (Mallicoat 2019). The conditions for women were frightful since they experienced excessive amounts of time in solitary confinement and violent forms abuse by both male inmates and male guards. It was not until the beating death of a pregnant women named Rachel Welch in 1825 that led to tremendous changes for the lives of female inmates (Mallicoat 2019). In 1839, the Mount Pleasant Prison Annex, the first facility for female inmates, was developed in New York. This institution had a female warden, but males still over watched the incarcerated women which still was a horrific experience. Nevertheless, the poor conditions and high levels of abuse led to England and the United States working together in order to better the housing conditions for the women offenders (Mallicoat 2019).

Elizabeth Fry was a key figure to the evolution of prisons and jails in the United Kingdom based on her work with the Newgate Prison during the early 19th century. Hence, her worked also served as the evolution for the American women’s prison reform movement (Mallicoat 2019). Specifically, Fry’s work helped establish separate institutions for women as she argued that reforming women offenders is accomplishable based on the assistance of other women. Her statements influenced liberal religious American reformers to develop the change the female incarceration system (Freeman 1981). For instance, in 1873, the first women institution was established and is known as the Indiana Women’s Prison. It is identified as the first stand-alone female prison and the first maximum security prison for women in the United States.

Moreover, with Elizabeth Fry’s efforts, the United States had created two different models of institutions by the 20th century known as custodial institutions and reformatory institutions. Custodial institutions are like male institutions based on the design and philosophy. Women were merely contained and given little to no assistance or treatment. They were usually just held incarcerated for their wrong behavior until they did their time (Mallicoat 2019). Also, the prison conditions for women at these custodial institutions were characterized by unsanitary living

conditions and corporal punishment. On the other hand, reformatory institutions were designed with the intent to rehabilitate women despite the type of crime committed. Here women did not receive fixed sentences instead they were solely sent to the reformatory until they were conformed reformed (Mallicoat 2019). The reformatories even staffed with the establishments with female guards. However, the distribution of inmates was made along racial lines. The women of color were ultimately sent to custodial institutions and working-class Caucasian women were sent to reformatory institutions (Mallicoat 2019). As the women correctional facilities modernized, they were given better treatment and support. They attained several programs that addressed their health care needs, increase their self-esteem, gain an education, and develop a positive quality of life during their sentence. These were movements prior to the dramatic multiplying rate of women incarcerated in the United States from 1980 to 2014 and now has shifted back to punishment as a punitive and retributive ideal.

The growth of the women incarceration rate began in the 1980s specifically due to the sentencing policies and the war on drugs. Drug users were at the greatest risk for imprisonment rather than the traffickers when President Nixon called for a national drug policy. Hence, sentencing orders changed dramatically whereby drug users were treated the same as mid-level dealers (Mallicoat 2019). As sentencing practices began to shift, so did the punishments for women involved in drug-related offenses. The entry to drug use by women primary commenced with early exposure to drugs and alcohol in their homes done by male family members. On the other hand, the next tragically common pathway to addiction for women was related to strained family relationships, victimization, and trauma. This always set the stage for one of the most common pathways to addiction, as drugs are a primary mechanism to escape untreated mental issues (Mallicoat 2019). As a result, women shifted towards criminal activity to support their drug habit and cope with their lives. Women developed as the main offenders of property crimes, and prostitution crimes but were also becoming involved in gang activities and violent crimes.

As of today, with the incarceration rate increasing dramatically, they are continuing to be harassed by guards and inmates in women jails prisons. This issue is still remaining because not all jails or prisons contain all-female staffs and female inmates assault one another. However, the most neglect issue female inmates face currently is the overcrowding of prison facilities. This is the main issue because less resources have become available. Women are affected by this the most because these inmates are recommitting offences based on the lack of reintegration programs. Hence, with the female imprisonment rates rising at a higher rate than men, based on the last two decades due to drug addiction, they are being punished redundantly (Fedock, Fries, and Kubiak 2013). Female inmates need to be regarded more effectively by the U.S correctional system because they have ignored these illnesses fare to long.

Female prisoners have been ignored based on the impact of the male incarcerated population. Men have always been granted with better treatment programs based on the research by Merry Morash, Robin N. Haarr, and Lila Rucker (1994). In their research they tried to draw on indications of prison programing derived from national data collection efforts to compare the programing in men’s and women’s prisons in the 1980’s due to the increase of incarcerated women. This comparison was used to find persisting inequities that will allow them to determine if the amount of programing for inmates were based on security level and size of the population. They gathered data form the 1980’s for both genders from The Survey of inmates in State and Federal Prisons and The Census of State Adult Correctional Facilities. These two forms of methodology were used since they can used to derive important social indicators of the level

and type of programing (Morash, Robin N. Haarr, and Lila Rucker 1994). The Census is an instrument answered by correctional administrators (includes all prisoners) and the survey of inmates is a face-to-face interview directed by U.S. Census Bureau employees (only a representative sample of inmates). They both are repeated at five to six-year intervals. This test included all states. The findings indicated that women receive less rehabilitation sources since they are less of them and due to their housing. For instance, since there are less females they are housed in smaller and lower security faculties there is less budget and time to form assistances. In terms of substance abuse there was no substantial counterbalance. When it comes to medical issues for both genders, they are only provided with limited controlling medications. The researchers as a result indicated that alternates need to be provided in the communities if treatment is not available in jails and prisons. Furthermore, the assistance that was provided for the inmates were gender based. For instance, the women received programs assisting them in cleaning, cooking, raising children, and other forms of educational programs while men's training was mostly on different types of work or training (Morash, Haarr, and Lila Rucker 1994). There is almost no emphasis on parenting skills for males. Researchers even specified that women only receive psychotropic drugs for their mental health issues. Nevertheless, this article displays that the fact that women's prisons have fewer and less varied programs compared to male prisons they continue to reenter the system.

In terms of gender differences on incarceration populations, females have dealt with more reentry inamtes due to the lack of tactics provided by less programs. Based on Solveig Spjeldnes's, Hyunzee Jung's, Hide Yamatani's (2014) research, they concluded that more responsive programs are necessary for jailed women. Specially, they determine this due to the reduction of the overall jailed population since 2009. The population decreased was a result of policy and practice altering toward offender rehabilitation, but the female jail population continues to increase. They examined the reentry strategies for both genders in order to decrease recidivism. To test the amount of reentry inmates, the researchers examined gender differences in social, medical and human needs of an inner-city jail population. Their sample was equipped from the evaluation project of the Allegheny County Jail Collaborative. The sample was attained from the Allegheny County Jail. ACJ is an inner-city detention and imprisonment facility in Pittsburgh. The sample consists of 2,386 men and 542 women. They examined their hypothesis by applying their health services to ex-inmates in a nonduplicative integrative way to reduce recidivism (Spjeldnes, Jung, Yamatani 2014). Hence, this study examined the differences in social, medical and human needs based on gender.

## References


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