PSYCHIATRIC CLINICS OF NORTH AMERICA

Treating Incarcerated Women: Gender Matters

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omen represent a small fraction of those under the supervision of the criminal justice system and are disproportionately underrepresented within the correctional system. For example, in 2002 over 2 million people were incarcerated in jails and prisons in the United States but less than 5% of these were women [1]. In contrast, women comprise more than half of the general population. It is therefore not surprising that the bulk of existing policy, treatment, and programming within the correctional system has been derived from research and experience with male offenders.

Although women are a small fraction of those supervised by the correctional system, they are gaining the attention of researchers, clinicians, advocates, and policy makers for several reasons. First, the rate of incarceration for women has risen more rapidly than that of men over the past decade; for example, in 2002 the rate of incarceration for women rose 4.9%, whereas that of men rose 2.9% [1–3]. Second, there is concern about the potential implications of maternal incarceration on children, families, and future generations. Third, there is evidence that female offenders have a higher prevalence of a number of psychiatric disorders than male offenders [4-8]. Finally, there is increasing awareness of the potential importance of gender in determining many aspects of disease, including presentation, course, prognosis, and response to treatment. This awareness has spread to the correctional system, where there is appreciation of the challenges inherent in applying policies, programs, and procedures developed for male inmates to female inmates [9]. An increasingly important question is whether the widely accepted standard of providing separate but equal services to male and female inmates is appropriate. Specifically, a concern has emerged that equivalence of services does not equate with true parity if the populations being compared have significant defining differences. The objective of this review is to discuss epidemiologic and psychiatric characteristics of incarcerated women and to explore potential roles and limitations of gender specific programming in the correctional system.

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774 LEWIS

PATTERNS OF FEMALE OFFENDING

In 2003, there were over 10 million arrests in the United States; only one in five were arrests of women [10]. Men are arrested more frequently than women for every offense category except for prostitution, running away, and embezzlement. Most arrests for both genders are for nonviolent crimes. Nonviolent offenses include property crimes (eg, burglary, larceny, motor vehicle theft), drug-related crimes, and crimes related to public order. Women account for about one in three property related arrests and one in five drug-related arrests. Arrests for violent crime (defined as murder/manslaughter, rape, robbery, and aggravated assault) account occur in only 1 in 20 arrests for men and women [10].

Arrest for violent crime is predominantly a male phenomenon; nearly 85% of all violent crime is committed by men [2]. Women are a small fraction of violent offenders and account for 1 in 20 assaults, 1 in 10 aggravated assaults and murders, and 1 in 50 sexual assaults [2]. Violent crime for men and women is most commonly perpetrated against members of the same gender with the exception of homicide, where both genders are more likely to kill men [2,11]. The crime patterns of violent women differ from that of violent men. When women commit violent offenses they commit simple assault three fourths of the time; men, in contrast commit more serious violent offenses close to half of the time [2]. Though men and women both are most likely to commit violent offenses alone, women are eight times as likely as men to have an opposite-gender accomplice. Violent female offenders are about twice as likely as violent male offenders to have victimized people they know; in two of three violent offenses by women the victim is an intimate, relative, or acquaintance. Nearly half of violent offenses with female offenders occur at the victim's home or school in contrast to one third of violent crime by male offenders. Men are more likely than women to use a weapon in their violent offense and slightly more likely to seriously injure their victims [2].

Rates for murder by men and women both have decreased progressively since a peak of 24,523 homicides in 1993 [11]. Men are 10 times more likely to commit murder than women [11]. The relationship of homicide perpetrator to victim differs significantly based on gender of perpetrator. Men are most likely to kill an acquaintance or stranger, whereas women are most likely to kill an acquaintance, spouse, boyfriend/girlfriend, or child [2]. In other terms, nearly two thirds of the homicides committed by women involve a family member/significant other, whereas three quarters of murders by men are of an acquaintance or stranger. Maternal filicide, the killing of a child by its mother, has received considerable public attention and research interest in the past decade [12,13]. Approximately 500 children are killed each year by a parent [10]. Mothers account for half of these homicides, and they are more likely to kill younger children, particularly in the first year of life [13,14]. Though the methods and motivations of filicidal women are diverse, the postpartum period appears to be a time of particular vulnerability.

It is evident that women are far less likely to offend than men. Gender is one of the best predictors of violent and criminal behavior. When women do

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