

Monroe County Women's Commission Gender Equity and Justice Response Subcommittee: Summary Recommendations

September 24, 2023

Introduction

The Monroe County Women's Commission formed the Gender Equity and Justice Response subcommittee in May 2023 to gather information and better understand the issues for incarcerated women and those marginalized on the gender spectrum in Monroe County, Indiana. We attended the Monroe County Council's Justice Fiscal Advisory Committee meetings through the summer of 2023 and researched the topics of focus at each of those meetings. We also met with Sheriff Marté and Jail Commander Gibbons and toured the current Monroe County Jail in August 2023. The following summarizes our recommendations for immediate changes (right now without delay), short term changes (before any new jail is occupied), and long term changes (as part of any new jail being occupied) needed for our justice system. These recommendations focus on gender equity and are for current staff and the transitional team that can focus on developing programs for any new jail facility. They are also available at the end of the document formatted to align with the JFAC recommendations (Table 1). The Monroe County Women's Commission, with limited knowledge of the county budget, recommends that the budget presented by the Sheriff is passed by the County Council to allow for necessary changes to the jail. We respectfully submit these to the Monroe County Council and the Monroe County Board of Commissioners for consideration.

Summary of Recommendations

Immediate Changes (right now without delay)

1. Data - Provide regularly updated and publicly available data via the Justice Dashboard that includes the following [3][7][11]:
 - a. Total number of inmates
 - b. Total number of female inmates
 - c. Types of offenses of female inmates
 - d. Total number of female inmates over 50
 - e. Total number of inmates from marginalized genders (transgender, multi gender, non-binary)
2. Policies - Make all written policies and procedures publicly available including the following [3]:
 - a. Intake protocols including identification of gender and mental health assessment (referring to inmate, supplying hygiene items and clothing, providing safest housing option)
 - b. Supplying medication including psychiatric medication

- c. Supporting individuals needing reproductive health care and services
 - i. Supporting pregnant inmates and inmates who miscarry a pregnancy
- 3. Personnel - Hire an additional female correctional officer
- 4. Personnel - Hire a substance use case worker
- 5. Personnel - Hire an outreach programmer
- 6. Personnel - Hire a jail program director
- 7. Diversion - Make sure records are expunged in a timely manner (or diversion is pointless) [6]
- 8. DEI - Implement in-depth medical screening to identify gender-based needs that are gender-affirming (varying from STI testing to Pap smears to continuing ongoing hormone-based therapies) [2]
- 9. Treatment - Connect inmates to aftercare upon release (fund programs that already exist in the community)

Short Term Changes (before any new jail is occupied)

- 10. Personnel - Ensure that employees are trained, equipped with the resources, and held accountable to carry out all policies concerned with gender equity
- 11. Personnel - Hire additional licensed therapists with dedicated availability to offer evidence-based treatment
- 12. Personnel - Hire case managers to work with inmates toward release and follow up after release
- 13. Diversion - Provide child care and transportation to any programming [6]
- 14. Reentry and Diversion - Ensure that having children in the home is not a barrier to making appointments (hopefully this clarifies questions from September 18 JFAC meeting)
 - a. Provide options up front about ways to schedule and attend appointments
 - b. Provide child care on site for pretrial and court appointments [6]
 - c. Allow video calls as an option when there are children in the home [10]
- 15. DEI - Intake/risk assessment needs to be non-binary, go beyond male/female classification and use tools that consider each person's trauma histories to measure their unique circumstances and mental health needs (such as WRNA or SPIN-W) [5][9]
- 16. Treatment - Structure treatment options and programs based on length of stay [1]
 - a. Brief treatment modalities - supply information and make referrals/connections
 - b. Short-term treatment modalities - brief treatment + focus on coping skills
 - c. Long-term treatment modalities - brief and short-term treatment + programs more similar to residential treatment (looking at personal values, belief systems, and issues related to cultural and family background that have supported a substance abuse lifestyle)

Long Term Changes (as part of any new jail being occupied)

17. Diversion - Ensure programs are gender and trauma responsive [4][6][8][12]
18. Reentry and Diversion - Expand peer navigator programs to include pretrial and court process (hopefully this clarifies questions from September 18 JFAC meeting) [10]
19. DEI and Jail - Add lactation room
20. DEI and Jail - Add library space
21. Treatment - Provide screening, assessment, and treatment services and promote a sense of safety, calm, and de-escalation for inmates and staff [12]
 - a. Individual interview space
 - b. Individual treatment space
 - c. Group treatment space
 - d. Consider more soundproofed activity space
 - e. Family-friendly visiting space
 - f. Spaces for staff and inmates to engage in self-care
22. Treatment - Consider funding options available through Violence Against Women Act (VAWA) or Victims of Crime Act for jail/victim service collaborations [9]
23. Treatment - Develop the new jail and services and offices based on the proactive assumption that all incarcerated women have experienced past trauma [4][12]
24. Treatment and Reentry - Provide peer support for paroled folks needing to live with strict rules
25. Jail - Co-locate, with jail, services for diversion, treatment, courts, and probation with access to public transportation
26. Jail - Provide adequate separate spaces by gender in the new facility for all aspects of healthcare, programming, and family visitation, which has been shown to improve post-release outcomes for women [12]
27. Jail - Provide substantial increase over the current jail in individual cells to support the safety needs of inmates, with camera-enabled monitoring of all such cells

References

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- [11] Ray, Dr. Kenneth A. and Dr. Alan R. Beck. (2021). "Monroe County, Indiana 2020 Criminal Justice & Incarceration Study." RJS Justice Services: Ashland, KY and Justice Concepts, Inc.: Kansas City, MO, https://www.co.monroe.in.us/egov/documents/1644610443_05163.pdf
- [12] SAMHSA's Trauma and Justice Strategic Initiative. (2014). "SAMHSA's Concept of Trauma and Guidance for a Trauma-Informed Approach." U.S. Department of Health and Human Services; Substance Abuse and Mental Health Services Administration; Office of Policy, Planning and Innovation, <https://store.samhsa.gov/sites/default/files/d7/priv/sma14-4884.pdf>

Table 1: Summary of Recommendations Aligned with JFAC Format

Number	Description	Recommendation Category	Time Allocation
1.	Provide regularly updated and publicly available data via the Justice Dashboard that includes the following [3][7][11]: <ul style="list-style-type: none"> a. Total number of inmates b. Total number of female inmates c. Types of offenses of female inmates d. Total number of female inmates over 50 e. Total number of inmates from marginalized genders (transgender, multi gender, non-binary) 	Data	Immediate
2.	Make all written policies and procedures publicly available including the following [3]: <ul style="list-style-type: none"> a. Intake protocols including identification of gender and mental health assessment (referring to inmate, supplying hygiene items and clothing, providing safest housing option) b. Supplying medication including psychiatric medication c. Supporting individuals needing reproductive health care and services <ul style="list-style-type: none"> i. Supporting pregnant inmates and inmates who miscarry a pregnancy 	Policies	Immediate
3.	Hire an additional female correctional officer	Personnel	Immediate
4.	Hire a substance use case worker	Personnel	Immediate
5.	Hire an outreach programmer	Personnel	Immediate
6.	Hire a jail program director	Personnel	Immediate

Number	Description	Recommendation Category	Time Allocation
7.	Make sure records are expunged in a timely manner (or diversion is pointless) [6]	Diversion	Immediate
8.	Implement in-depth medical screening to identify gender-based needs that are gender-affirming (varying from STI testing to Pap smears to continuing ongoing hormone-based therapies) [2]	DEI	Immediate
9.	Connect inmates to aftercare upon release (fund programs that already exist in the community)	Treatment	Immediate
10.	Ensure that employees are trained, equipped with the resources, and held accountable to carry out all policies concerned with gender equity	Personnel	Short Term
11.	Hire additional licensed therapists with dedicated availability to offer evidence-based treatment	Personnel	Short Term
12.	Hire case managers to work with inmates toward release and follow up after release	Personnel	Short Term
13.	Provide child care and transportation to any programming [6]	Diversion	Short Term
14.	<p>Ensure that having children in the home is not a barrier to making appointments (hopefully this clarifies questions from September 18 JFAC meeting)</p> <ul style="list-style-type: none"> a. Provide options up front about ways to schedule and attend appointments b. Provide child care on site for pretrial and court appointments [6] c. Allow video calls as an option when there are children in the home [10] 	Reentry and Diversion	Short Term

Number	Description	Recommendation Category	Time Allocation
15.	Intake/risk assessment needs to be non-binary, go beyond male/female classification and use tools that consider each person's trauma histories to measure their unique circumstances and mental health needs (such as WRNA or SPIN-W) [5][9]	DEI	Short Term
16.	Structure treatment options and programs based on length of stay [1] <ul style="list-style-type: none"> a. Brief treatment modalities - supply information and make referrals/connections b. Short-term treatment modalities - brief treatment + focus on coping skills c. Long-term treatment modalities - brief and short-term treatment + programs more similar to residential treatment (looking at personal values, belief systems, and issues related to cultural and family background that have supported a substance abuse lifestyle) 	Treatment	Short Term
17.	Ensure programs are gender and trauma responsive [4][6][8][12]	Diversion	Long Term
18.	Expand peer navigator programs to include pretrial and court process (hopefully this clarifies questions from September 18 JFAC meeting) [10]	Reentry and Diversion	Long Term
19.	Add lactation room	DEI and Jail	Long Term
20.	Add actual library space	DEI and Jail	Long Term
21.	Provide screening, assessment, and treatment services and promote a sense of safety, calm, and de-escalation for inmates and staff [12] <ul style="list-style-type: none"> a. Individual interview space b. Individual treatment space c. Group treatment space 	Treatment	Long Term

Number	Description	Recommendation Category	Time Allocation
	<ul style="list-style-type: none"> d. Consider more soundproofed activity space e. Family-friendly visiting space f. Spaces for staff and inmates to engage in self-care 		
22.	Consider funding options available through Violence Against Women Act (VAWA) or Victims of Crime Act for jail/victim service collaborations [9]	Treatment	Long Term
23.	Develop the new jail and services and offices based on the proactive assumption that all incarcerated women have experienced past trauma [4][12]	Treatment	Long Term
24.	Provide peer support for paroled folks needing to live with strict rules	Treatment and Reentry	Long Term
25.	Co-locate, with jail, services for diversion, treatment, courts, and probation with access to public transportation	Jail	Long Term
26.	Provide adequate separate spaces by gender in the new facility for all aspects of healthcare, programming, and family visitation, which has been shown to improve post-release outcomes for women [12]	Jail	Long Term
27.	Provide substantial increase over the current jail in individual cells to support the safety needs of inmates, with camera-enabled monitoring of all such cells	Jail	Long Term