

Chapter 12

Department of Corrections Gender-Responsive and Trauma-Informed Policies, Practices, and Programs

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I. Summary

Historically, prisons and jails have confined mainly men. As a result, prisons and jails use approaches that are based on research conducted with men. The Washington State Department of Corrections (DOC) is no exception. Its programs, policies, and even its commissary items and clothing tend to serve the needs of the typical male population.

But not all incarcerated individuals are men. Women, transgender, and gender-nonconforming individuals often have different backgrounds, experiences, traumas, physical needs and social interactions than men; so approaches designed for cisgender men don't necessarily work for these other individuals. But there is evidence that certain correctional programs, when administered with fidelity, generally reduce recidivism for women, and that gender-responsive programs may be more effective than gender neutral programs in achieving this goal. In order to achieve positive outcomes, more gender-responsive and trauma-informed policies, procedures, and programs are needed within DOC.

DOC has taken intermittent strides in recent years toward becoming more gender-responsive. For example, in 2014, DOC instituted its first gender-responsive policy (DOC Policy 590.370), and in 2020, DOC implemented a Transgender, Intersex, and/or Gender Non-Conforming Housing and Supervision Policy (DOC Policy 490.700). In addition, DOC provides (or collaborates to provide) three gender-responsive and trauma-informed programs to incarcerated and formerly incarcerated women: Moving On, Beyond Violence, and the Seattle Women's Reentry initiative. The research shows that these programs are effective when implemented as designed—so it is important to monitor and evaluate existing DOC programs to ensure they are implemented with fidelity.

In addition, there are women who are incarcerated in Washington who have been very active in starting and running programs and in building communities that are relevant and responsive to the needs of incarcerated women. For example, the Women's Village at Washington State Corrections Center for Women (WCCW), was founded and is led by incarcerated women who develop programs, activities, and events that are responsive to their needs.

While DOC has made some progress in implementing gender-responsive policies and programs, a 2019 survey by the Washington State Office of Corrections Ombuds, and anecdotal evidence from incarcerated and formerly incarcerated people, highlights that many areas still need improvement. There is a pressing need for more research in Washington to determine if policies and programs are meeting the needs of, and improving outcomes for, women, transgender, and gender-nonconforming individuals—particularly for Black, Indigenous, and people of color who are disproportionately incarcerated and doubly harmed by sexism and racism.

II. Introduction

Gender-responsiveness within the justice system is a complex topic that spans many areas such as: Programming, dedicated court calendars, risk classification systems, policies on how to house and meet the needs of transgender and gender-nonconforming individuals, availability of clothing and hygiene items, the daily interactions and treatment of individuals who are incarcerated, and more. Applying an equity lens to each aspect of the justice system is the comprehensive and systematic work that is needed to make significant progress. This chapter provides a high-level overview of some aspects of the system, and highlights progress in DOC policies and programs and areas where continued improvements are needed. A more expansive analysis was outside the scope of this chapter, and we recommend future research to provide a better understanding of the effectiveness of existing gender-responsive programs and policies, and of the gender-responsiveness of jails and court ordered programs.¹

III. Gendered Pathways to Prison Require Gender-Responsive Interventions

Since the 1990s, a growing body of research in the United States and abroad has highlighted the need for gender-responsive and trauma-informed policies, procedures, and programs to address the needs of justice-involved women in both custodial and non-custodial settings. Women often

¹ See *Chapter 9: Juvenile Justice and Race Disparities* for an analysis of gender-responsiveness of the juvenile justice system in Washington.

take different pathways to prison than men. Women’s pathways may include the impact of abusive intimate relationships, gendered vulnerabilities, and sexual trauma.²

It is well established that many incarcerated women experience higher than average physical and sexual trauma in early life.³ Although early trauma is common to prisoners generally, research shows that female prisoners are more likely to have histories of multiple types of victimization, co-occurring mental health disorders, and substance abuse issues, and are likely to be incarcerated for different types of offenses than male prisoners.⁴ This research supports the inference that many incarcerated women take a gendered pathway to prison, based on the early life trauma they have experienced.⁵

The same is true of the pathways to incarceration for transgender, gender non-binary, and gender-nonconforming individuals who also experience disproportionate rates of sexual and physical abuse.⁶ Research shows that these pathways are further complicated for Black, Indigenous, and people of color as well as gay, lesbian, and bisexual individuals who often experience compounding traumas, as well as discrimination that creates barriers to gainful employment and other resources.⁷ The justice system needs policies, procedures, and programs that respond to these unique pathways.

² Angela Browne, Brenda Miller & Eugene Maguin, *Prevalence and Severity of Lifetime Physical and Sexual Victimization Among Incarcerated Women*, 22 INT’L J. L. & PSYCHIATRY 301 (1999); ANGELA BROWN ET AL., KEEPING VULNERABLE POPULATIONS SAFE UNDER PREA: ALTERNATIVE STRATEGIES TO THE USE OF SEGREGATION IN PRISONS AND JAILS (2015); Thanos Karatzias et al., *Multiple Traumatic Experiences, Post-Traumatic Stress Disorder and Offending Behaviour in Female Prisoners*, 28 CRIM. BEHAV. MENTAL HEALTH 72 (2018); Christy K. Scott et al., *Trauma and Morbidities Among Female Detainees in a Large Urban Jail*, 96 PRISON J. 102 (2016); Bonnie Green et al., TRAUMA EXPERIENCES AND MENTAL HEALTH AMONG INCARCERATED WOMEN (2016); ANDREA JAMES, ENDING THE INCARCERATION OF WOMEN AND GIRLS 19 (2019). See also *Chapter 11: Incarcerated Women in Washington*, for more information on the trauma-to-prison pipeline, *Chapter 8: Consequences of Gender-Based Violence: Domestic Violence and Sexual Assault* for information on gender-based violence in prisons, and *Chapter 9: Juvenile Justice and Race Disparities* for information on pathways into the juvenile justice system based on gender, sexual orientation, and disability status.

³ Browne, Miller & Maguin, *supra* note 2; BROWNE ET AL., *supra* note 2.

⁴ JOANNE BELKNAP, THE INVISIBLE WOMAN: GENDER, CRIME, AND JUSTICE (2007); see also TATIANA MASTERS ET AL., INCARCERATION OF WOMEN IN WASHINGTON STATE: MULTI-YEAR ANALYSIS OF FELONY DATA (2020) for more information on types of offense types by gender among people incarcerated for felonies in Washington State.

⁵ Renée Gobeil et al., *A Meta-Analytic Review of Correctional Interventions for Women Offenders*, 43 CRIM. JUST. & BEHAV. 301 (2016).

⁶ Jinhee Yun et al., *Examining Trauma and Crime by Gender and Sexual Orientation among Youth: Findings from the Add Health National Longitudinal Study*, CRIME & DELINQUENCY (2021).

⁷ *Id.*

Gendered pathways to prison require a gendered response. For policies and procedures, prisons and jails should make every effort to account for the traumatic pathways that led to incarceration for many women, transgender, and gender-nonconforming individuals. For programs, there is evidence that correctional interventions, when administered with fidelity, generally reduce recidivism for women, and that gender-responsive programs may be more effective than gender neutral programs.⁸ A 2016 meta-analysis which analyzed the existing body of research on the effectiveness of gender-neutral programs for women compared to gender-informed programs did not find a significant difference in effectiveness when looking at the entire body of research combined.⁹ However, when the authors only included the highest quality research, they found the “...effect size for gender-informed interventions was significantly and considerably greater than that for gender-neutral programs.”¹⁰ Gender-responsive programs appear to be particularly effective for women who have experienced prior abuse.¹¹

IV. The Washington State Department of Corrections has Implemented Several Gender-Responsive Policies, Procedures and Programs.

DOC began its commitment to gender-responsiveness in 2008 with the draft Master Plan for Women Offenders.¹² The 2008 Master Plan assessed the gender-responsive organizational needs of DOC, with a goal of improving outcomes for women incarcerated in both the WCCW and the Mission Creek Corrections Center for Women (MCCCW). The Master Plan focused on three key areas: (1) Assessment, Classification, and Case Management, (2) Evidence Based Programs, and (3) Capacity and Facility Development.¹³ The draft plan has not yet been finalized.

In 2013 DOC, working with the National Resource Center on Justice Involved Women, created a “Gender Responsiveness Action Plan” to address rising female incarceration rates and the lack of

⁸ Gobeil et al., *supra* note 5, at 313.

⁹ *Id.*

¹⁰ *Id.*

¹¹ Preeta Saxena et al., *Who Benefits from Gender-Responsive Treatment? Accounting for Abuse History on Longitudinal Outcomes for Women in Prison*, 41 CRIM. JUST. & BEHAV. 417 (2014).

¹² PATRICIA VAN VOORHIS ET AL., WASH. STATE DEP’T OF CORR., MASTER PLAN FOR FEMALE OFFENDERS: FINAL REVIEW DRAFT (2008) (draft on file with the Gender and Justice Commission).

¹³ *Id.* at 2-3.

an organized response.¹⁴ In 2014, DOC instituted its first gender-responsive policy.¹⁵ Policy 590.370 “recognizes the impact of gender differences on offender pathways into the criminal justice system and will allow gender-responsive principles to direct classification, supervision, and programming for all offenders.”¹⁶ The policy further states that “[t]he Department [of Corrections] will align and prioritize its resources to provide evidence based, gender-responsive interventions” to incarcerated females.¹⁷

Policy 590.370 was a substantial step towards a gender-responsive incarceration framework, encompassing many aspects of DOC’s operations and treatment of incarcerated women. The policy includes employee training in trauma and gender-responsiveness, programming for incarcerated people, health services, reentry, and future building projects. The policy reinforced some existing provisions. For instance, for years prior to this policy, DOC had required staff, contractors, and volunteers to take gender-responsive training before facilitating programming.¹⁸ The “Gender Responsiveness” policy expanded this, now requiring gender-responsive training for all staff, contractors, and volunteers.¹⁹ It also requires all staff, contractors, and volunteers who interact with incarcerated people to take trauma-informed training.²⁰

Finally, in 2019, DOC contracted with CORE Associates to conduct a Gender-Informed Practice Assessment (GIPA). The GIPA is an “assessment protocol to help women’s prisons better understand the degree to which their policies and practices align with trauma-informed, gender-responsive, and evidence-based practices that, according to research, lead to improved outcomes for women in custody.”²¹ The assessment in Washington will conclude with a comprehensive report including areas in compliance with best practices and suggested areas for

¹⁴ Jennifer Sullivan, *Women Behind Bars: State Takes a New Approach*, SEATTLE TIMES (Nov. 4, 2013), <https://www.seattletimes.com/seattle-news/women-behind-bars-state-takes-a-new-approach>.

¹⁵ WASH. DEP’T OF CORR., DOC 590.370, GENDER RESPONSIVENESS (2014), <https://www.doc.wa.gov/information/policies/files/590370.pdf>.

¹⁶ *Id.*

¹⁷ *Id.*

¹⁸ WASH. DEP’T OF CORR., DOC 590.350 (IV)(B), Offender Change Programs (Jan. 13, 2009).

¹⁹ WASH. DEP’T OF CORR., DOC 590.370(VII)(A).

²⁰ WASH. DEP’T OF CORR., DOC 590.370(VII)(B).

²¹ THE CTR. FOR EFFECTIVE PUB. POLICY, JUSTICE INVOLVED WOMEN PROJECTS (2020), <https://cepp.com/expertise/women-offenders/projects/#1489606028683-e37068df-aead>.

improvement, resulting in recommendations for how to best move forward in terms of increasing gender-responsiveness within DOC. Like many other plans that have been impacted by COVID-19, the GIPA was put on hold until it is safe for in-person interactions.²²

V. Programs Started and Led by Women Who are Incarcerated

In addition, women who are incarcerated in Washington have been very active in starting and running programs and building communities that are relevant and responsive to the needs of incarcerated women. For example, a group of women incarcerated at WCCW, along with Psychology Associate Robert Walker and then-Associate Superintendent Margaret Gilbert, started the Women's Village at WCCW in 2009.²³ The Women's Village Handbook states, "We are a collection of women who support a set of common values and are committed to change ourselves and our environment."²⁴

In 2011 members of the Women's Village invited professors to WCCW to talk about building a higher education program. Since this invitation, the Freedom Education Project Puget Sound (FEPPS) has offered "129 classes taught by over 102 professors to 252 women."²⁵ The Women's Village members provide mentoring, facilitate programs, and work to bring programming into WCCW:

The Women's Village will strive to bring in services and programs to address the present and experienced needs of women housed at WCCW. These services include, but are not limited to: education, self-empowerment, life skills, health and wellness, self-care and disease prevention and interest groups.²⁶

²² Personal communication with DOC staff, July 28, 2021.

²³ Rowland Cawthon, *The Women's Village: A Source of Change for Incarcerated Women*, THE EVERGREEN STATE COLLEGE AND WASHINGTON STATE DEPARTMENT OF CORRECTIONS SUSTAINABILITY IN PRISONS PROJECT (2011), <http://sustainabilityinprisons.org/blog/2011/09/01/the-womens-village-a-source-of-change-for-incarcerated-women>; *History & Women's Village*, FREEDOM EDUCATION PROJECT PUGET SOUND, <http://fepps.org/about-us/history-womens-village>.; personal communication with DOC staff August 4, 2021.

²⁴ WCCW, THE WOMEN'S VILLAGE HANDBOOK 16 (2014) (on file with the Gender and Justice Commission).

²⁵ FREEDOM EDUCATION PROJECT PUGET SOUND, *supra* note 23.

²⁶ WCCW, *supra* note 24, at 16.

The programs, activities, and events listed in the Women’s Village Handbook are extensive and include education courses (including GED classes, AutoCAD, Cosmetology, Business Math, AA College Courses, and more); financial planning; toastmasters; exercise classes; support groups such as alcoholics anonymous and “Grief & Loss;” parenting programs such as “Inside Out Moms/Moms Involving Dads;” self-help programming such as “Peace Talks,” the “IF Project,” “Mindfulness Meditation;” and mental health programming such as “Stress & Anger Management,” and “Life After Trauma.”²⁷

The extent to which the Women’s Village has flourished, growing from five members at its start to over 200 members,²⁸ is a strong indicator of how incarcerated women can inform and lead programming that is responsive to their needs. “Responsive” programming, by definition, addresses the needs of individuals who are incarcerated. The large variety of programs shaped by the Women’s Village shows that this may mean programs specific to trauma, but it can also mean education, parenting, wellness, and many other types of programming.

Other examples of community-based programs include the Prison Pet Partnership Program,²⁹ and the Rotary Women’s Prison Program.³⁰

VI. Implementation of Gender-Responsive Programs in Washington State

DOC currently offers three gender-responsive programs to incarcerated women (Moving On, Beyond Violence, and Beyond Trauma), and participates in a gender-responsive reentry program for women transitioning out of custody (The Seattle Women’s Reentry Initiative).³¹ Each of these programs is an evidence-based and gender-responsive intervention with documented success at reducing recidivism.³² The challenges moving forward, described in more detail below, are to

²⁷ *Id.* at 12-14.

²⁸ FREEDOM EDUCATION PROJECT PUGET SOUND, *supra* note 23.

²⁹ PRISON PET PARTNERSHIP, <http://www.prisonpetpartnership.org/>.

³⁰ ROTARY WOMEN’S PRISON PROGRAM, <https://rotarywomensprison.com/>.

³¹ Personal communication with DOC staff on May 4, 2021 and August 4, 2021.

³² Krista Gehring et al., *What Works for Female Probationers?: An Evaluation of the Moving On Program*, 11 WOMEN, GIRLS, & CRIM. JUST. 6 (2010); DUWE ET AL., MINNESOTA DEP’T OF CORRECTIONS, MOVING ON: AN OUTCOME EVALUATION OF A GENDER-RESPONSIVE, COGNITIVE-BEHAVIORAL PROGRAM FOR FEMALE OFFENDERS (2015); Sheryl Kubiak et al.,

ensure that the programs are being implemented with fidelity, that the impact on recidivism is studied in Washington, and that the types and locations of the programs are expanded to all justice-involved women.

A. Moving On

1. Description

Moving On is a gender-responsive, cognitive-behavioral therapy-based program that “focuses on improving communication skills, building healthy relationships, and expressing emotions in a healthy and constructive manner.”³³ The program is designed for women and “delivered in 26 sessions via group and one-on-one discussions, self-assessments, writing exercises, and role-playing and modeling activities.”³⁴ Participating women are encouraged to set goals and assess their strengths and weaknesses. Each session lasts one and a half to two hours.³⁵

2. Implementation in Washington

According to DOC’s internal data, 1,146 incarcerated women have enrolled in the Moving On program since April of 2014, with 967 graduating. This data includes those currently enrolled who have yet to graduate.³⁶ In Washington, DOC offers Moving On at both WCCW and MCCCW.³⁷ The course includes six modules—the first consisting of individual sessions, the remainder consisting of group sessions. According to the program overview developed by DOC, sessions should be held twice a week, with each session scheduled for two hours, spread across 13 weeks.³⁸ Once a participant is enrolled, participation is mandatory, and an unexcused absence is “the equivalent

Assessing Short-Term Outcomes Of An Intervention For Women Convicted Of Violent Crimes, J. SOC’Y SOC. WORK & RSCH. 197 (2012); Nena P. Messina et al., *Examination of a Violence Prevention Program for Female Offenders*, 3 VIOLENCE & GENDER 143 (2016); Jacqueline B. Helfgott & Elaine Gunnison, *Gender-Responsive Reentry Services for Women Leaving Prison: The IF Project’s Seattle Women’s Reentry Initiative*, Corrections (2020). The findings by Helfgott and Gunnison on recidivism for the Seattle Women’s Reentry initiative are nuanced; see the subsection below titled “Seattle Women’s Reentry Initiative” for more details on the evaluation findings.

³³ DUWE ET AL., *supra* note 32.

³⁴ *Id.* at 6.

³⁵ *Id.* at 6.

³⁶ Personal communication with DOC staff on May 4, 2021.

³⁷ Personal communication with DOC staff on July 28, 2021.

³⁸ WASH. STATE DEP’T OF CORR., COGNITIVE BEHAV. INTERVENTIONS UNIT, REENTRY DIV., MOVING ON PROGRAM OVERVIEW 1 (2018) (on file with the Gender and Justice Commission).

of missing a mandatory callout.”³⁹ Only incarcerated individuals who meet certain criteria, including more than a year but less than five years to release, can participate. Of note, the enrollment criteria also include having at least a 6th grade reading level (or having a plan in place for assistance), and being able to communicate in English (or have a plan in place for translation).⁴⁰ DOC also uses a risk assessment tool as part of the program eligibility screening process.⁴¹ Program lead facilitators can be either male or female,⁴² and must be full-time Correctional Specialists or Program Specialists.⁴³ Cognitive Behavioral Intervention Quality Assurance specialists (these are Program Specialist 4 positions) attend the class on at least a monthly basis to witness the class facilitation, observe interactions, identify strengths and deficiencies, and provide feedback to the facilitator(s). Those providing the quality assurance assessment have been trained in the specific program delivery.⁴⁴

3. Effectiveness

Multiple studies have found that Moving On is effective at reducing recidivism in justice-involved women. One study found that Moving On participants had significantly lower rates of rearrest and new convictions than the comparison group of probationers at both the 12-month and 30-month post-release markers.⁴⁵

Other studies have found that the program is effective, but only when implemented with fidelity. For instance, in 2015, the Minnesota Department of Corrections examined the impact of Moving On in two distinct periods.⁴⁶ In the first period, the program was offered to participants on a voluntary basis, towards the end of an inmate’s sentence, and for the full course as then designed, consisting of 48 hours spread across twelve weeks. Class sizes were small, between five

³⁹ WASH. STATE DEP’T OF CORR., CBI FACILITATOR GUIDE: MOVING ON FACILITATOR HANDBOOK WCCW AND MCCCW 8 (2018) (on file with the Gender and Justice Commission).

⁴⁰ MOVING ON PROGRAM OVERVIEW, *supra* note 38, at 2.

⁴¹ *Id.*; WAONE is the risk/needs assessment tool currently being used per personal communication with DOC staff on August 4, 2021.

⁴² CBI FACILITATOR GUIDE: MOVING ON FACILITATOR HANDBOOK WCCW AND MCCCW, *supra* note 39.

⁴³ MOVING ON PROGRAM OVERVIEW, *supra* note 38, at 1.

⁴⁴ Personal communication with DOC staff, August 4, 2021.

⁴⁵ Gehring et al., *supra* note 32, at 8.

⁴⁶ DUWE ET AL., *supra* note 32.

and ten people.⁴⁷ In the second period, the program was offered at intake, and due to scheduling constraints, was cut to three weeks and 30 hours, eliminating certain types of exercises and homework. Class sizes ballooned to between 40 and 50 people.⁴⁸ Minnesota found that when the operation of Moving On was largely consistent with how it was designed, the program significantly lowered the risk of rearrest and reconviction. Perhaps unsurprisingly, when the program was shorted, with fewer interpersonal exercises and larger class sizes, it stopped having any significant impact on recidivism.⁴⁹

None of the identified evaluations included analyses that looked at the efficacy of these programs for subpopulations of women such as Black, Indigenous, and women of color.

4. Need for further study

To date, Washington has not undertaken a systematic evaluation of the way in which Moving On is implemented, or its effectiveness as administered generally or for subpopulations of women. This is a critical need. The data gathered to date in other jurisdictions indicates that the program works—but only when administered with fidelity.

B. Beyond Violence

1. Description

Beyond Violence: A Prevention Program for Women is a gender-responsive, cognitive-behavioral therapy program intended for incarcerated women convicted of a violent offense.⁵⁰ The intervention incorporates attention to “women’s victimization history, the likelihood of substance use and/or mental health disorders and gender socialization.”⁵¹ Similar to Moving On, the program uses a variety of therapeutic strategies with participants (including psycho-education, role playing, mindfulness activities, cognitive behavioral restructuring and grounding

⁴⁷ *Id.* at 6.

⁴⁸ *Id.* at 7.

⁴⁹ *Id.* at 31.

⁵⁰ STEPHANIE COVINGTON, *BEYOND VIOLENCE: A PREVENTION PROGRAM FOR CRIMINAL JUSTICE-INVOLVED WOMEN* (2013).

⁵¹ Sheryl P. Kubiak et al., *Assessing the Feasibility and Fidelity of an Intervention for Women with Violent offenses*, 42 *EVALUATION & PROGRAM PLANNING* 1, 2 (2014).

skills for trauma triggers) to address factors commonly present in the lives of women involved in the criminal justice system.⁵²

2. Implementation in Washington

According to DOC's internal data, 263 incarcerated women have enrolled in the Beyond Violence program since December of 2017, with 223 graduating. This data is inclusive of those currently enrolled who have yet to graduate.⁵³ The program is administered in groups of ten participants, meeting twice weekly, for two hours each session, for a period of ten weeks.⁵⁴ As with Moving On, participation is considered mandatory for enrolled individuals.⁵⁵ Only those who meet certain criteria, including more than a year but less than five years to release, can participate.⁵⁶ The same reading and English language skills as outlined above for Moving On are also required for participation in Beyond Violence.⁵⁷ DOC also uses a risk assessment tool as part of the program eligibility screening process.⁵⁸ Program facilitators are full-time female, Correctional Specialists or Program Specialists.⁵⁹ DOC's internal Cognitive Behavioral Interventions Unit applies a fidelity instrument to "ensure that sessions are delivered as designed, and when they are not, [the fidelity instrument] can be used to guide training activities."⁶⁰

3. Effectiveness

Beyond Violence, when administered properly, has been shown to be effective at reducing recidivism and increasing treatment follow-through among incarcerated women.⁶¹ One study

⁵² *Id.*

⁵³ Personal communication with DOC staff on May 4, 2021.

⁵⁴ WASH. STATE DEP'T OF CORR., COGNITIVE BEHAV. INTERVENTIONS UNIT, REENTRY DIV., BEYOND VIOLENCE PROGRAM OVERVIEW 1 (2018).

⁵⁵ WASH. STATE DEP'T OF CORR., PARTICIPANT HANDBOOK: BEYOND VIOLENCE, WCCW AND MCCCW 3 (on file with the Gender and Justice Commission).

⁵⁶ WASH. STATE DEP'T OF CORR., CBI FACILITATOR GUIDE, BEYOND VIOLENCE FACILITATOR HANDBOOK: WCCW AND MCCCW 3 (on file with the Gender and Justice Commission).

⁵⁷ *Id.* at 4.

⁵⁸ BEYOND VIOLENCE PROGRAM OVERVIEW, *supra* note 54, at 2; WAONE is the risk/needs assessment tool currently being used per personal communication with DOC staff on August 4, 2021.

⁵⁹ BEYOND VIOLENCE FACILITATOR HANDBOOK: WCCW AND MCCCW, *supra* note 56, at 2.

⁶⁰ BEYOND VIOLENCE: A PREVENTION PROGRAM FOR CRIMINAL JUSTICE-INVOLVED WOMEN: FIDELITY INSTRUMENT 1 (on file with the Gender and Justice Commission).

⁶¹ Sheryl Kubiak, Gina Fedock, Woo Jong Kim, and Deborah Bybee, *Long-Term Outcomes of a RCT Intervention Study for Women with Violent Crimes*, *Journal of the Society for Social Work and Research* 2016 7:4, 661-679

found that women involved in Beyond Violence were more likely to participate in community-based substance-abuse treatment after release and to complete treatment, compared to women who had committed violent offenses who did not attend Beyond Violence.⁶² Two studies of women with long or life sentences found that Beyond Violence produced significantly positive outcomes, with moderate to large effect sizes, on reductions in PTSD, anxiety, depression, anger and aggression, and symptoms of serious mental illness.⁶³ In addition, this study demonstrated the feasibility of using incarcerated peer educators to facilitate programs delivered to other incarcerated women.⁶⁴ However, as noted above, multiple studies have also shown that the effectiveness of any cognitive-behavioral therapy can vary widely, likely due in part to the implementation fidelity of the programs.⁶⁵ None of the identified evaluations included analyses that looked at the efficacy of these programs for different subpopulations of women, such as Black, Indigenous, and women of color.

4. Need for further study

To date, Washington has not undertaken a systematic evaluation of the way in which Beyond Violence is implemented or its effectiveness as administered generally and for subpopulations of women. As with Moving On, this is a critical need. The program works, but only when administered with fidelity.

C. Seattle Women's Reentry Initiative

1. Description

The Seattle Women's Reentry (SWR) Initiative is a collaboration between the Seattle Police Department's IF Project, DOC, and community social service agencies to support women leaving the WCCW.⁶⁶ This program is designed to address the needs of formerly incarcerated women who are reentering communities after serving jail or prison sentences, who are faced with

⁶² *Id.*

⁶³ Kubiak et al., *supra* note 32, at 202; Messina et al., *supra* note 32.

⁶⁴ Messina et al., *supra* note 32.

⁶⁵ See, e.g., Mark W. Lipsey et al., *The Effectiveness of Correctional Rehabilitation: A Review of Systematic Reviews*, 3 ANN. REV. L. & SOC. SCI. 297 (2007).

⁶⁶ Jacqueline B. Helfgott & Elaine Gunnison, *Gender-Responsive Reentry Services for Women Leaving Prison: The IF Project's Seattle Women's Reentry Initiative*, CORRECTIONS POL'Y, PRAC. & RSCH. 1 (2020).

challenges in obtaining housing and employment, mental health and substance abuse treatment, legal help, lack of social support, and stigmatization.⁶⁷ The SWR is itself an outgrowth of the IF Project, which was established in 2008 as a partnership between the Seattle Police Department, the DOC, and “other local government agencies and nonprofits to assist women, men, and youth in prisons, youth detention facilities, and in the community [to] succeed upon release.”⁶⁸

2. Implementation

SWR services are offered to women incarcerated at the WCCW in Gig Harbor who are going to be released to King County. Reentry programming begins 12 weeks before release. The prerelease program consists of classes in ten content areas, includes personal participant goal-setting and planning, and culminates in individual presentations. SWR services continue for twelve weeks after release, with a one-year post-release follow-up.⁶⁹

3. Effectiveness

Dr. Helfgott and Dr. Gunnison studied the outcomes for 85 women who were released from the WCCW during 2017 and 2018. Sixty of the women were released to King County, and were thus eligible for SWR services. The comparison group consisted of 25 women who were released to Skagit, Whatcom, and Snohomish counties, and thus were not eligible for SWR services.⁷⁰ Participants were an average of 40 years old, had served an average of ten years in prison.⁷¹ Researchers interviewed and assessed each of the women before release and conducted monthly interviews for a year post-release.⁷² The study tracked new arrests, new citations and violations, and readmissions to DOC custody for three years after release.⁷³ The study found that SWR participants had much lower rates of arrests and citations (18%) than the general released population (33%).⁷⁴ The study also found that rates of recidivism were negatively correlated with the number of prerelease classes completed (that is, the more classes completed, the lower the

⁶⁷ *Id.*

⁶⁸ *Id.* at 3.

⁶⁹ *Id.* at 4.

⁷⁰ *Id.* at 5.

⁷¹ *Id.* at 5-6.

⁷² *Id.* at 21.

⁷³ *Id.* at 10.

⁷⁴ *Id.*

rate of recidivism).⁷⁵ On the other hand, the study found no significant difference between the SWR participants and the control group in readmission to DOC custody.⁷⁶ The qualitative findings (participants' self-reported experiences) were strongly positive regarding the SWR.⁷⁷

One SWR Program Member noted, "It's a nice sense to have that community support – people actually care and want to see me do good. I have incentive already but now even have that support too."⁷⁸ Another member shared, "They're just really supportive. They're just there. They show up and call and follow through."⁷⁹

4. Need for further study

The 2020 Helfgott and Gunnison study demonstrated some positive effects of the SWR (lower rearrest and citation rates), and some puzzling non-effects (no change in DOC readmission rates). The study itself noted that more research is required to better understand the reasons for these mixed results, and to explore ways of making the reentry interventions more successful. It would also be meaningful to evaluate the efficacy of this program for subpopulations of women.

VII. Implementation of Gender-Responsive Policies and Procedures in Washington

The DOC has implemented some changes to its policies and procedures, consistent with Gender-responsiveness Policy 590.370, but significant challenges remain, described in more detail below.

A. Health and wellness

DOC's Gender-responsiveness Policy requires services "to address gender specific medical and mental health issues."⁸⁰ The DOC's Outpatient Services Policy contains various gender-responsive provisions. It requires that "incarcerated individuals, including community supervision

⁷⁵ *Id.*

⁷⁶ *Id.*

⁷⁷ *Id.*

⁷⁸ *Id.* at 12.

⁷⁹ *Id.* at 17.

⁸⁰ DOC 590.370(IV).

violators”⁸¹ currently serving community custody violation time in a prison rather than a jail, have access to pregnancy management, pap smears, mammograms, and hormone treatment for gender dysphoria.⁸² Of note, a 2019 survey of incarcerated women conducted by the Washington State Office of Corrections Ombuds found that about half of survey respondents reported that their medical health care needs were not met.⁸³ Several respondents expressed concerns over the \$4 copay to access dental and medical care. Indigent individuals had, at the time of the survey, a \$10 indigent spendable account cap which may be all they have to purchase hygiene items and commissary food, so the \$4 copay is a significant amount for these individuals.⁸⁴ In 2020 the indigent spendable account cap was increased to \$25.⁸⁵

B. Commissary offerings

After launching the gender-responsive initiative in 2014, the DOC introduced gender-specific items into its commissary offerings.⁸⁶ The DOC began offering makeup and Midol, and it provided other options for sale beyond its standard issued products.⁸⁷ For instance, DOC provided different bras and feminine hygiene products to purchase so incarcerated women had other options.⁸⁸ Supporting the new additions to the commissary lineup, Felicia Dixon, a woman incarcerated at WCCW, stated “a woman who has already probably been abused...already feels down and out about herself in one way and then [the prison] continues to take more and more things away from her just hinders her self-esteem”⁸⁹ and talked about how having more options in the commissary provided a welcome shift from that feeling.

⁸¹ WASH. DEP’T OF CORR., DOC 610.650(I)(A), Outpatient Services, Directive (June 12, 2018).

⁸² WASH. DEP’T OF CORR., DOC 610.650(II)(E)(12) and (14), Outpatient Services, Directive (June 12, 2018). This DOC policy also references access to “Medical contraceptive treatment, which may be started during the month before release or an approved Extended Family Visit,” however DOC staff have indicated that contraception is not currently being offered. Personal communication with DOC staff July 9, 2021.

⁸³ JOANNA CARNS, WASH. STATE OFF. OF THE CORR. OMBUDS, SURVEY OF INCARCERATED WOMEN 30 (2019), https://oco.wa.gov/sites/default/files/Women%20Survey%20with%20DOC%20Response%20Final_0.pdf.

⁸⁴ *Id.* at 27.

⁸⁵ See RCW 72.09.015(15).

⁸⁶ *Why Offer Gender-Specific Items in the Commissary?*, WASH. DEP’T OF CORR. (Oct. 9, 2014), <https://www.youtube.com/watch?v=s0ZG8VTJuF8>.

⁸⁷ *Id.*

⁸⁸ *Id.*

⁸⁹ *Id.*

However, increasing the availability of items for purchase does not ensure that **all** women, particularly indigent women, are having their basic hygiene needs met. The 2019 Office of Corrections Ombuds survey mentioned above found that while a large proportion of individuals at MCCCW (about 30%) and WCCW (about 40%), and individuals under DOC jurisdiction at Yakima County Jail (over 60%) indicated that their hygiene needs were **not** being met by the institution.⁹⁰ The Ombuds report notes that products in indigent hygiene packs such as lotions, soaps, and shampoos are designed for males of European ancestry, “leaving female, African American, and transgender prisoners with inadequate hygiene items” that reportedly cause “dryness, irritation, acne, rashes, destruction of hair, and hair loss.”⁹¹ Respondents also noted insufficient quantities of tampons and pads.⁹² Of note, according to staff, DOC now provides tampons and pads that are available in an area where women can access them without going to an Officer.⁹³ The Ombuds report notes that this creates an issue where indigent individuals and those who lose commissary privileges are dependent on the reportedly insufficient indigent hygiene packs. Individuals who do have limited spending money from family or employment must choose between purchasing “food, postal supplies, or hygiene items from the Commissary” or will accrue “hygiene debt.”⁹⁴ Individuals also reported difficulty accessing denture cleaning and adhesive pads.⁹⁵ Many survey respondents noted that they “would like access to decent hygiene products to be a right rather than a revocable privilege.”⁹⁶

Respondents also reported a large variety of issues with clothing needs being unmet, including being cold with insufficient warm layers and blankets, having to wear jackets wet from the day before, having torn and stained underwear and other clothing, and shoes that don’t fit properly. Respondents noted that the provided number of underwear were also insufficient, particularly during menstruation, and reported feeling “humiliated when DOC staff require them to show

⁹⁰ CARNs, *supra* note 83, at 21.

⁹¹ *Id.* at 22.

⁹² *Id.* at 23.

⁹³ Personal communication with DOC staff, July 28, 2021.

⁹⁴ CARNs, *supra* note 83, at 23. For incarcerated parents, another competing priority with limited funds would be phone calls or video visits to contact their children. See *Chapter 16: Consequences of Incarceration and Criminal Convictions for Parents, Their Children, and Families* for more information on the impacts of incarceration for parents and the barriers they face to staying connected with their children.

⁹⁵ CARNs, *supra* note 83, at 23.

⁹⁶ *Id.*

evidence of soiling from menstruation or incontinence before a request for new underwear will be granted.”⁹⁷ According to DOC staff, DOC women are now issued seven pairs of underwear and they do not have to show their soiled underwear to get a new pair.⁹⁸ DOC policy has also increased the number of blankets and now provides an additional sweatshirt.⁹⁹

Transgender prisoners also reported difficulty getting sufficient quantities of chest binders and boxers.¹⁰⁰ Respondents reported: 1) that clothing is cut for men, allows their bras to show through, and does not fit comfortably; 2) that bras fit poorly, particularly for large-busted women; and 3) that there was limited access to bras needed after mastectomy.¹⁰¹ In April 2021, DOC reduced the number of bras a woman can have from seven to four, despite the fact that women can have seven pairs of underwear.¹⁰² The DOC Chief of Security Operations stated that, “Four bras is an appropriate number, especially when laundered onsite, and this is also the same for transwomen at men’s facilities.”¹⁰³

The 2019 Office of the Corrections Ombuds report included several recommendations to address these issues. DOC responded on February 18, 2020 indicating which issues identified by the survey it did not plan to address and why, and which issues it was working to address.¹⁰⁴ A follow-up survey or audit would be needed to track if progress has been made.

C. Policies regarding pregnancy

DOC policy requires comprehensive pregnancy management, which includes prenatal and postpartum care, high-risk care, addiction treatment, testing, and counseling.¹⁰⁵ In addition, DOC

⁹⁷ *Id.* at 25.

⁹⁸ *Id.* at page 8; Personal communication with DOC staff on July 9, 2021.

⁹⁹ Personal communication with DOC staff, August 4, 2021.

¹⁰⁰ CARNS, *supra* note 83, at 25.

¹⁰¹ *Id.* at 26-27.

¹⁰² WASH. DEP’T OF CORR., STATE-ISSUED ITEMS (2021), <https://doc.wa.gov/information/policies/showFile.aspx?name=440050a1>.

¹⁰³ From email sent by the DOC Chief of Security Operations to WCCW Local Family Council members on June 9, 2021 (on file with author).

¹⁰⁴ *Id.* at 6.

¹⁰⁵ DOC 610.650(II)(E)(12)(b).

allocates extra personal property allowances for pregnant, pumping, and nursing people.¹⁰⁶ In 2010 Washington passed legislation banning the use of restraints on nearly all incarcerated women during labor and during transportation to medical providers or court proceedings during their third trimesters or during postpartum recovery.¹⁰⁷ The Gender and Justice Commission, Open Arms Perinatal Services, and Legal Voice, among others, testified in support of this bill.¹⁰⁸ This legislation expanded previous DOC policies which addressed shackling for pregnant individuals, and addressed the lack of restraint policies in Juvenile Rehabilitation and in many county and city jails and juvenile detention facilities.¹⁰⁹ The statute also prohibits correctional personnel from being in the room during childbirth, unless requested by the medical provider.¹¹⁰ DOC policy 590.320 and RCW 72.09.588 allow incarcerated mothers to have a doula present during and after childbirth. More research is needed to understand the extent to which these services are available to, or accessed by, incarcerated individuals who are pregnant and what impacts they have on child and maternal health.

WCCW also runs a Residential Parenting Program (RPP) that began in 1999.¹¹¹ This program allows pregnant, minimum-security women (Minimum 2 [MI2] or Minimum 1 [MI1]) custody levels, but not Minimum 3 [MI3]) with an earned release date before the child will be 30 months old, an opportunity to keep their babies with them in the prison after giving birth.¹¹² The RPP, DOC policy 590.320 was established in 2006 and updated most recently in July of 2020. It states

¹⁰⁶ WASH. DEP'T OF CORR., MAXIMUM ALLOWABLE PERSONAL PROPERTY MATRIX: WOMEN'S FACILITIES (2013), <https://www.doc.wa.gov/information/policies/files/440000a2.pdf> (citing Wash. Dep't of Corr., DOC 440.000, Personal Property for Offenders (2013)).

¹⁰⁷ RCW 72.09.651. RCW 72.09.651(2) prohibits non-medical restraints from being used for any reason during labor. RCW 72.09.651(1) only allows for the use of restraints during transportation during the third trimester or postpartum in "extraordinary circumstances" which "exist where a corrections officer makes an individualized determination that restraints are necessary to prevent an incarcerated pregnant woman or youth from escaping, or from injuring herself, medical or correctional personnel, or others."

¹⁰⁸ SENATE COMM. ON HUM. SERVS. & CORR., S.B. REP. ON ENGROSSED SUBSTITUTE H.B. 2747, 61st Leg., Reg. Sess., at 4 (Wash. 2010).

¹⁰⁹ *Id.* at 2.

¹¹⁰ RCW 72.09.651(5). If the medical provider requests that correctional personnel be in the room during childbirth, the "employee should be female, if practicable." RCW 72.09.015(2) defines "postpartum recovery" as: (a) the entire period a woman or youth is in the hospital, birthing center, or clinic after giving birth and (b) an additional time period, if any, a treating physician determines is necessary for healing after the woman or youth leaves the hospital, birthing center, or clinic."

¹¹¹ *Residential Parenting Program*, NAT'L INST. OF CORR.: JUST. INVOLVED WOMEN PROGRAMS (2021), <https://info.nicic.gov/jiwp/node/227>; DOC Policy 590.320 - Residential Parenting Program.

¹¹² DOC policy 590.320(l)(A), July 17, 2020.

that “The Department has established procedures in partnership with local agencies and providers, including the Department of Children, Youth, and Families (DCYF), Early Head Start (EHS), to allow pregnant individuals at Washington Corrections Center for Women (WCCW) to establish a healthy mother/child attachment, promote positive parenting skills, and provide services for transition to the community.”¹¹³ The program also requires that Child Protective Services (CPS) approve placement in the program, and that the participant does not have any of the following: a current no contact order with minor children, a conviction for a crime against children per RCW 28A.400.322, or a conviction for a sex offender and/or sexual motivation behavior.¹¹⁴

The 2017 DOC RPP Fact Sheet states that “The DOC has made the RPP part of its strategy to reduce recidivism and break the intergenerational cycle of incarceration. As a group, children of incarcerated parents experience lack of quality care and support, thus putting them at higher risk for emotional and relationship problems, academic difficulties and incarceration later in life.”¹¹⁵

Formerly incarcerated women report the historical practice of shackling during childbirth, having correctional personnel in the room during childbirth, and other significant issues.¹¹⁶ At the 2021 Washington State Supreme Court Symposium, Kimberly Mays shared a compelling description of her childbirth experience in 2000 while incarcerated at WCCW. Her experience involved being shackled, having her nose and mouth forcibly covered by a nurse, and having a male Correctional Officer in the ambulance and delivery room in full view of her exposed private parts. Kimberly Mays described how this mistreatment made her feel:

I felt violated, humiliated, dehumanized, and worthless—like an animal giving birth in front of his human masters. I was so traumatized by that experience that to this very day I still cannot remember the experience of giving birth to my son,

¹¹³ DOC policy 590.320(I), July 17, 2020.

¹¹⁴ Personal communication with DOC staff, August 4, 2021.

¹¹⁵ WASH. STATE DEP’T OF CORR., RESIDENTIAL PARENTING PROGRAM FACT SHEET 1(2017), <https://www.doc.wa.gov/docs/publications/fact-sheets/400-FS003.pdf>.

¹¹⁶ SENATE COMM. ON HUM. SERVS. & CORR., S.B. REP. ON S.B. 6500, 61st Leg., Reg. Sess. (Wash. 2010); 2021 WASHINGTON STATE SUPREME COURT SYMPOSIUM, BEHIND BARS: THE INCREASED INCARCERATION OF WOMEN AND GIRLS OF COLOR. The TVW recording of the Symposium is available at: <https://www.courts.wa.gov/?fa=home.sub&org=mjc&page=symposium&layout=2>.

nor the face of my beautiful baby boy, nor do I remember the 24 hours I was allowed to hold my baby before the state came to take him to foster care.¹¹⁷

More research is needed in Washington to understand if policy changes have impacted the experiences of those who are pregnant upon being incarcerated, and if their unique needs in DOC facilities are being met. Kimberly Mays applauded the passage of the 2010 legislation to limit the use of restraints, but stated that “there is still work to be done to help change the negative attitudes and behaviors of prison staff and hospital staff toward women who give birth while incarcerated.”¹¹⁸

D. Transgender-specific responsive policies

In January 2020, former DOC Secretary Stephen Sinclair issued a letter to all DOC employees regarding transgender, intersex, and gender-nonconforming staff and incarcerated people.¹¹⁹ In February 2020, DOC implemented its Transgender, Intersex, and/or Gender Non-Conforming Housing and Supervision Policy.¹²⁰ This policy provides direction on assigning transgender people to gender-appropriate housing and shower facilities as well as an appeal process for housing review decisions for incarcerated transgender people, intersex, and gender-nonconforming individuals.¹²¹ The appeal process includes writing to the Designated Deputy Director for decisions made based on facility recommendations, and writing to the appropriate Assistant Secretary/designee for decisions made by the Headquarters Multidisciplinary Team.¹²²

The Policy also provides for hormone and mental health treatment for incarcerated transgender people.¹²³ Transgender people may request different facility-issued undergarments to better match their gender.¹²⁴ Finally, the policy outlines protocols for name changes and respecting

¹¹⁷ WASHINGTON STATE SUPREME COURT SYMPOSIUM. Kimberly Hays description of her childbirth experience is at 2:20:47 in TVW recording.

¹¹⁸ *Id.*

¹¹⁹ Letter from Stephen Sinclair, Secretary of the Wash. Dep’t of Corr., to All DOC Employees (January 16, 2020).

¹²⁰ WASH. DEP’T OF CORR., DOC 490.700, Transgender, Intersex, and/or Gender Non-Conforming Housing and Supervision Policy (Feb. 13, 2020).

¹²¹ *Id.*

¹²² *Id.*

¹²³ *Id.*

¹²⁴ *Id.*

preferred pronouns.¹²⁵ Anecdotal stories from incarcerated and formerly incarcerated individuals, and preliminary findings from a survey conducted by Disability Rights Washington, detail many areas where improvements are still needed to fully address the needs and rights of transgender individuals in DOC facilities. Disability Rights Washington collected extensive data through interviews with transgender prisoners in Washington. The Gender and Justice Commission received a presentation of preliminary data in 2019. The preliminary data from interviews with over 30 incarcerated transgender women in Washington highlighted many issues: lack of proper undergarments for women housed in male facilities; difficulty accessing hormone replacement therapy (average wait time for access was over two years) and gender affirming surgery; self-harm associated with gender dysphoria; suicidality; barriers to name changes while incarcerated; lack of respect for names and pronouns; lack of privacy; insufficient medical and mental health care; dehumanization; sexual violence and harassment; disproportionate solitary confinement; and other issues.¹²⁶

At the 2021 Supreme Court Symposium, Renee Permenter described her experience as a transgender woman of color while incarcerated in a male facility. She shared her experience getting strip searched by male Correctional Officers and insufficient shower accommodations which were impractical, unreliable, and did not provide full privacy from men living on the tiers above the showers.¹²⁷ She described her experience of having access to only one doctor who had no knowledge of transgender health needs or medications, and long delays in accessing mental health providers and hormone replacement therapy. She stated, “I understand that there are policies in place currently that attempt to address some of these issues, but there is a difference between the policies existing on paper and the policies actually being implemented.”¹²⁸

¹²⁵ *Id.*

¹²⁶ The final report from Disability Rights Washington is forthcoming. GENDER AND JUSTICE COMMISSION FRIDAY, NOVEMBER 1, 2019 MEETING NOTES 6 (2019), https://www.courts.wa.gov/content/publicUpload/Gender%20and%20Justice%20Commission%20Meeting%20Materials/20191101_m.pdf; DISABILITY RTS. WASH.: TRANS IN PRISON JUST. PROJECT, TRANS JUSTICE WORK IN WASHINGTON STATE PRISONS (2019), https://www.courts.wa.gov/content/publicUpload/Gender%20and%20Justice%20Commission%20Meeting%20Materials/20191101_d.pdf.

¹²⁷ WASHINGTON STATE SUPREME COURT SYMPOSIUM. Renee Permenter’s description of her experiences cited here are at 53:30 and 2:30:20 in the TVW recording.

¹²⁸ *Id.*

VIII. Continuing Policy and Procedure Improvements Needed

While DOC has made progress in implementing gender-responsive policies, as described throughout this chapter, room for improvement remains and there is a need for additional evaluation and research in Washington to determine if policies and programs are having their intended impact. In addition, some policies have had mixed impacts on incarcerated women. For instance, in 2018, the Washington State Legislature appropriated funding to DOC to implement a body scanners at WCCW as an alternative to highly invasive and traumatic strip searches.¹²⁹ The Legislature instructed DOC to “review the use of full body scanners at state correctional facilities for women to reduce the frequency of strip and body cavity searches.”¹³⁰ It also required DOC to submit a report to the Legislature regarding the effectiveness of this alternative.¹³¹

Accordingly, WCCW introduced a body scanner for the visitation room in February 2019.¹³² In its report to the Legislature, DOC praised how the scanner increased the amount of contraband caught and reduced the time taken for the searches.¹³³

Despite its goal, DOC’s contraband search policy still negatively impacted women. Pregnant women were still subject to strip searches.¹³⁴ Second, as of August 2020, women continued to be strip-searched when they “move[] into a secure housing unit... [w]hen there is a fight within the facility... [when] entering or leaving a secure housing facility for work... [and when] going out on medical/dental trips.”¹³⁵

¹²⁹ LAWS OF 2018, 226.

¹³⁰ *Id.*

¹³¹ *Id.*

¹³² Alexandra Barton, *New Body Scanner at Women’s Facility*, WASH. DEP’T OF CORR. (Oct. 16, 2019), <https://www.doc.wa.gov/news/2019/10162019.htm>.

¹³³ WASH. DEP’T OF CORR., *BODY SCANNER PILOT: AN ALTERNATIVE TO STRIP SEARCHES OF INCARCERATED INDIVIDUALS 6-7* (2019).

¹³⁴ *Id.* at 8 (“In addition, individuals known to be pregnant would not be subject to a body scan and would continue to require a strip search.”).

¹³⁵ 8/05/2020 Local Family Council COVID-19 Informational Call Notes, at 1, <https://www.doc.wa.gov/family/council-wccw.htm>.

Third, the scanner is used for “incoming transports, outside work crews, return from programming areas, visiting, medical transports and all kitchen workers.”¹³⁶ Having an additional body scanner located in Receiving at WCCW may relieve overuse and limit interference to programming that occurs in the visit room.

Fourth, DOC policy 320.311 still requires a “dry cell watch” (after a positive body scan) for incarcerated women suspected of contraband who do not willingly surrender it.¹³⁷ Dry cells are prison cells without a toilet or other plumbing, allowing suspected contraband to be recovered following a bowel movement or other bodily process. DOC policy 420.311 indicates a dry cell watch “must be concluded within 84 hours or after the equivalent of 3 consecutive normal bowel movements, whichever occurs first.”¹³⁸ Incarcerated women in Washington have often been on dry cell watch for substantially longer – up to 19 days in extreme cases:

Because of differences between male and female anatomy, a typical dry cell watch for a male individual is within the policy stated 84 hours (the time it generally takes to produce three bowel movements and typically recover contraband through biological processes). During the pilot at WCCW, primarily due to females being able to conceal contraband in the vaginal area, the policy driven 84 hours or three bowel movements did not facilitate the body’s biological contraband recovery processes.¹³⁹

This is a concrete example of when policies made for the primarily male incarcerated population are not well adapted for the female population. With the increase of contraband accusations, the body scanners subjected even more women to the grueling dry cell requirement.¹⁴⁰ Therefore,

¹³⁶ WCCW Local Family Council 2/23/2020 Meeting Minutes, at 3, <https://www.doc.wa.gov/family/council-wccw.htm>.

¹³⁷ *Id.* at 9 (citing WASH. DEP’T OF CORR., DOC 420.311, Dry Cell Search/Watch (March 1, 2015)).

¹³⁸ *Id.* (“DOC Policy 420.311 Dry Cell Search/Watch requires the individual be placed on dry cell watch status for up to 84 hours or three bowel movements with 24-hour extensions granted and documented as needed.”).

¹³⁹ *Id.*

¹⁴⁰ See WASH. DEP’T OF CORR, *supra* note 133, at 6-7 (Table 5). See *id.* at 9, Dry Cell Watch Placement, for the figures showing increases in dry cell watch placement following installation of the body scanner at WCCW.

although body scans in lieu of strip searches moved policy in a gender-responsive way, extended dry cell periods while under surveillance are clearly a practice that needs revision.

IX. Recommendations

- To provide effective gender-responsive and trauma-informed programs, policies, and procedures to all justice-involved women and non-binary, transgender, and other gender nonconforming individuals, the Washington State Department of Corrections (DOC) should consider:
 - Expanding access to more types of programs with guidance from the incarcerated individuals who would be using the programs.
 - Expanding locations of program administration. DOC facilities appear to be the only location at which gender-responsive programming is available. County jail populations might be too transitory to benefit from these programs, but people subject to out of custody supervision might benefit from this valuable tool.
 - Providing training for staff who work with individuals on Community Supervision to increase their understanding of gender-responsive and trauma-informed principles.
 - Ensuring that DOC Policy 610.650-Outpatient Services and the “Washington DOC Health Plan” include complete women’s health care services for women incarcerated in DOC facilities, and that these policies are implemented as written.
 - Making all DOC policies, practices, and programs gender-sensitive, responsive, and trauma-informed.
 - Reducing trauma and enhancing safety through the preservation of human dignity by developing trauma-informed alternatives to strip search.
- Research from other states has shown that outcomes of gender-responsive programming depend heavily on the manner in which the programs are administered, which often varies widely. Conduct research, monitoring, and evaluation in Washington to assess the effectiveness of DOC’s gender-responsive programming generally, and for subpopulations such as Black, Indigenous, and women of color, in particular.