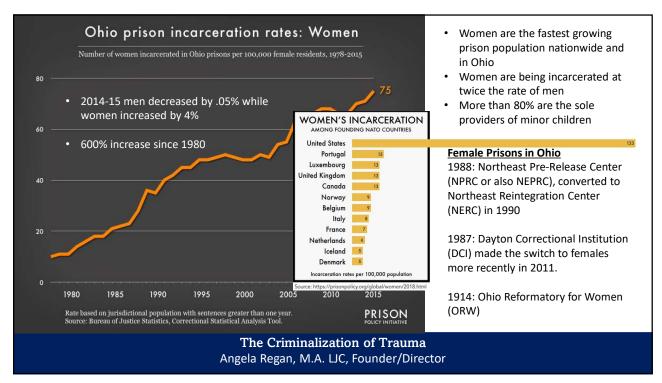


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The Criminalization of Trauma Angela Regan, M.A. LJC



The Criminalization of Trauma	Female Crimes Female crimes More than 80% are drug-related Drug offenses: Possession, trafficking, manufacturing Drug-related offenses: Theft, assault, DUI, public order, any crime committed due to an issue with illegal substances and/or alcohol	Criminalization of Addiction? Substance abuse? Substance use disorder? Mental illness/disorder? Labeled drug "offenders," because they are the ones that are offensive
Angela Regan M.A. LJC	 Diagnostic and Statistical Manual of Mental Disorders (DSM) DSM IV: Substance Abuse Disorder and Substance Dependency (two separate conditions) "Legal issues" was a determinate of the disorder DSM V: Substance Use Disorder and Addiction Disorder Combines the two from edition IV, drops the term abuse to create substance use disorder. Which is joined with the new addictive disorder to create new class. "Legal issues" is changed to cravings 	

Criminalization of Women

<u>History</u>

3,000 – 4,000 years ago Offense: Harlotry Punishment: Stoned or burned publicly

Early 1900s (WWI) Offense: Prostitution, "being a tramp" Punishment: Women needed to be reformed into moral ladies

1900-1935

17 reformatories are established

1916

Ohio Reformatory for Women (ORW)

Pathways to Prison

1. Sexual trauma

- 2014 Research in Ohio
- More than 70% of inmates
- More than 50% as minors
- 32% before 12
- 10% before 6

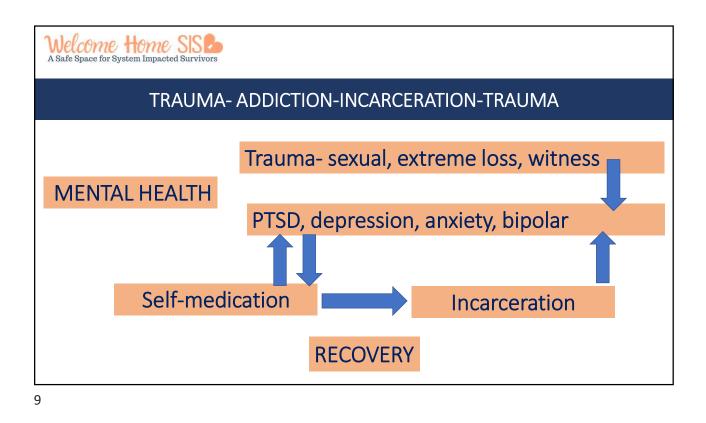
2. Accomplice

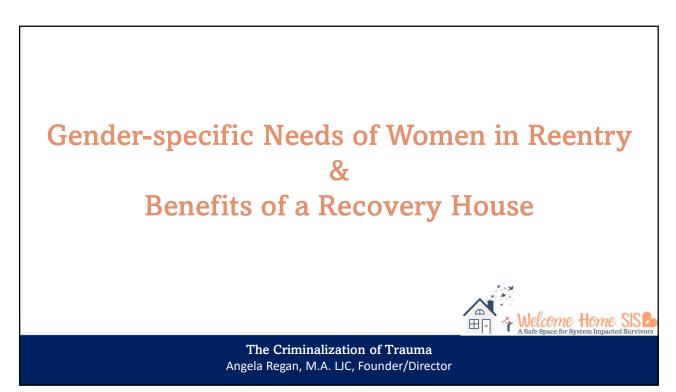
3. Crime riddled neighborhood/family



The Criminalization of Trauma Angela Regan, M.A. LJC







Welcome Home SIS Gender-Specific Needs of Females in Reentry PHYSICAL HEALTH RECOVERY · Women released from prison also have more physical • health issues (STDs HIV, Hep C) and are hospitalized more frequently than their male counterparts. **MENTAL HEALTH (trauma)** • More than half of female inmates in Ohio are on the • mental health caseload compared to 17% of males. Many women suffer from mental illness before ٠ incarceration which can be exacerbated by the prison • experience. Women with no prior diagnoses are often outcomes released with at least one, an average of three, most common are PTSD, depression and anxiety. • • Most of these illnesses are the result of trauma

Women who lack essential coping skills often selfmedicate

- More women are in recovery and complete substance misuse programs while incarcerated than their male counterparts
- Women are more likely than men to experience overdose and death after release
- Gender-specific barriers to accessing treatment (pregnancy, lack of childcare and sex harassment)
- Women are more receptive to treatment = better
- Higher rate of drug-related offenses
- Substance misuse is often co-occurring with other mental illnesses

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 Gender-Specific Needs of Females in Reentry/ Benefits of a Recovery Home HOUSING- A SAFE STABLE LIVING ENVIRONMENT The foundation of any successful reentry Persons in reentry are 12% more likely than the general public to be homeless Women in reentry are 35% more likely than men to face homelessness SUPPORT SYSTEM (FAMILY/COMMUNITY) Women thrive in an environment that is accepting Incarcerated women often lack family (parents who are present and a source of positive support) Women are hold each other accountable and are responsible for the safety of the house 	 **Only 2/30 women in the home had a parent who could be considered a source of support. The remaining 28 had mothers who were incarcerated, in active addiction, deceased or unknown. ***Children of incarcerated women are 5-6 times more likely to become incarcerated themselves
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