



**THE EFFECTIVE UTILIZATION OF
CBT WITH FEMALE OFFENDERS
LEGALLY MANDATED TO
TREATMENT**

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PRESENTATION THEMES

- Snapshot of Female Offenders
- Gender Responsiveness Concepts
- Basic Concepts of Cognitive Behavioral Therapy
- CBT and Legal Mandates
- Engaging Female Offenders into a Therapeutic Alliance





SNAPSHOT OF WOMEN OFFENDERS

Providing Context

SNAPSHOT OF WOMEN OFFENDERS

- Women offenders commit a variety of crimes including larceny, property crimes and violent crimes.
- Criminal Justice trends indicate that their criminal behavior is highly correlated with substance abuse and/or use.
- Research suggests women have different pathways into crime than their male counterparts (Daly1992,Reising Holtfreter&Morach,2006).
- Women offenders when entering the system are more entrenched in their substance abuse than their male counterparts.



WOMEN OFFENDERS

- Higher prevalence of mental health issues including trauma and depression.
- Higher rate of vulnerability to physical maladies such as HIV and AIDS.
- Serve as the primary caregivers of their family and many are single parents.
- African American and Latino women are incarcerated at a higher rate than women from other groups.





GENDER RESPONSIVENESS

What is it?

GENDER RESPONSIVENESS GUIDING PRINCIPLES

- **Gender-** Acknowledge that Gender makes a difference.
- **Environment-** Create an environment based upon Safety, Respect and Dignity.
- **Relationships-** Develop Policies ,Practices and Programs that are relational and Promote Healthy Connections to Children, Family ,Significant others and the Community.
- **Address** Substance Abuse ,Trauma and Mental Health Issues through Comprehensive , Integrated and Culturally Relevant Services and Appropriate Supervision.
- **Socioeconomic** - Promote Women and Opportunities to Improve their Socioeconomic conditions.
- **Community-** Establish a system of Community Supervision and Reentry with Comprehensive Collaborative Services.

Bloom, B., Owen, B., & Covington, S., (2003). Gender-responsive strategies: research, practice and guiding principles for Women offenders. Washington D.C :US Dept of Justice





COGNITIVE BEHAVIORAL THERAPY

Basic Concepts Review

WHAT IS CBT

- Cognitive Behavioral Therapy is an evidence based practice which indicates that the way a person thinks directly impacts the way that they behave, feel and interact within the world.
- There is evidence that CBT based interventions can be utilized with women who are criminally justice involved.

(Blanchette, K & Brown, S.L 2006, Covington, S, 2008)



OVERALL CBT GOALS FOR ALL OFFENDERS

- Define the problems that led them into conflict with authorities
- Select Goals
- Generate new alternative pro social solutions and to implement these solutions
- (Cullen & Gendreau, 2000)



COGNITIVE BEHAVIOR THERAPY AND FEMALE OFFENDERS

CBT provides female offenders with the tools to identify thinking errors, make connections between how they conceptualize the world and how it impacts their reaction to it.

Gender Responsive CBT takes it a step further and addresses the specific needs of female offenders. It provides the additional context that is needed to work with women including minority status, poverty, the significance of relationships and other factors that directly impact women offenders.



COGNITIVE BEHAVIORAL THERAPY

Introduction of CBT

Making the Thought Feeling Connection

Utilization of the ABC Model

Identification of Core Beliefs that lead to
behavioral consequences

The identification of alternative behaviors and the
successful implementation of these alternatives





CBT PRACTICE APPLICATION

The case of Jane

CBT APPLICATION CASE STUDY

Jane is a 22 year old African American female who is currently mandated to outpatient treatment. Jane is a recent college graduate with a degree in psychology. She was arrested and charged with intoxication and assaulting a police officer and resisting arrest. She is involved in a diversion court and comes to treatment with the idea that her engagement in treatment will reduce her charges. Her main goal is to get out of trouble.



KEY TREATMENT AREAS

- 10+ years of daily THC use, and ETOH social use
- Significant Trauma history
- History of Rage episodes where she has assaulted others, but has avoided CJ involvement until now
- Few prosocial friends and peers prior to her college years and then peers who engaged in significant alcohol and substance use.
- Social Anxiety
- Limited financial resources
- Relational issues including conflicts within family system.



COGNITIVE BEHAVIORAL THERAPY TECHNIQUES/INTERVENTIONS

- Identification of Thinking Errors/Cognitive Distortions around daily THC use, if I am disrespected by others I must address it aggressively
- Socratic Questions surrounding drug and alcohol use
- Cognitive Evidence Building is there evidence that daily use of THC really helps you to do with your emotions long term
- Cognitive Restructuring does she really need alcohol to feel comfortable around others and have a good time ?
- Psychoeducation around the long term impact of trauma
- Desensitization/Exposure through journaling and positive pro social interactions.
- Anger Management identification of the beliefs behind rage triggers engaging in reframing and disputation and relaxation techniques
- Assertiveness training
- Testing Instruments (BDI,BAI, PTSD Checklist, WRNA)





LEGAL MANDATES FOR TREATMENT

How to start the Discussion?

GENERALIZATIONS REGARDING MANDATED CLIENTS

- The literature suggests that there are counselors and therapists who are firmly convinced that successful treatment outcomes are more difficult with involuntary clients.
- It has also been thought that some form of coercion is useful in motivating change in clients engaged in substance abuse.
- (Rosenberg & Liftik, 1976, Flores, 1986)



THE MOTIVATION FOR TREATMENT

- There is some evidence in the literature that motivation for treatment is low when an offender is first mandated, but over time increases as the offender participates in treatment. However, the better informed the offender is at the beginning of treatment about what will occur, what their role is in the treatment process, the role of the practitioner, the courts and other legal entities the more likely the client is to benefit from the experience.



FEMALE OFFENDERS PERCEPTIONS OF MANDATED TREATMENT

- An offenders perception of the Mandated Treatment is subjective. CBT can be effective in assisting to identify offender relevant thinking patterns.

Key Issues to Consider

- Referral Source
- Length of Time
- Sanctions
- Consequences of Non Compliance(Incarceration, Loss of Children etc)
- The Importance of Context



THE THERAPEUTIC ALLIANCE

- The offender and the practitioner must openly discuss the offenders interpretation of the mandated treatment. This is especially important around the concept of mandatory reporting.
- The practitioner should create a therapeutic environment where the goals are created from a strengths based perspective where offenders can have some choices in the development of treatment goals.



THE THERAPEUTIC ALLIANCE

- The offender and the practitioner should come to an understanding that they are working collaboratively to assist the offender to not only meet their treatment mandates but to also hopefully provide them with the tools to improve their overall quality of life.



FEEDBACK OPPORTUNITY

Do you as a practitioner address the topic of legal mandation in the different phases of therapeutic alliance? If so, how does it look different in the beginning , middle and termination of treatment?





CBT AND GENDER RESPONSIVENESS

What can happen?

AREAS ADDRESSED BY GENDER RESPONSIVE CBT

- Relationship Dysfunction
- Family Conflict
- Adult Victimization
- Trauma
- Substance Use
- Mental Health



COOPERATION OF COMMUNITY PROGRAMS

- Mental health/Alcohol and drug programs
- Programs for survivors of physical and/or sexual abuse
- Comprehensive family service agencies
- Vocational and employment services
- Health care
- Self Help groups
- Housing programs

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ELEMENTS FOR SUCCESS

- Gender Responsive CBT programming
- Cooperation of Community programs

All the pieces need to come together to provide female offenders legally mandated treatment the tools and the aid to be successful in their communities and reduce the likelihood that they will reoffend.





QUESTIONS

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