

WOMEN'S COMMISSION

Provision of Correctional Services for Female Offenders by the Correctional Services Department

PURPOSE

This paper briefs Members on the correctional services provided by the Correctional Services Department (CSD) for female offenders under its custody.

BACKGROUND

2. The Correctional Services Department (CSD) is committed to providing a secure, safe, humane, decent and healthy environment for the detention of persons under its custody, and to facilitating the return of these persons to the community as law-abiding citizens through the provision of suitable rehabilitative services. The Prison Rules (Cap. 234A) reflect the correctional policies in the treatment of male and female persons in custody. Under these rules, male and female persons in custody shall be separately held and provided with equal standard of care in prison.

3. In light that academic research and correctional administrators of most developed countries both support that gender makes a difference, the CSD has continued to stretch the available resources to develop good practices in the rehabilitation of the female persons in custody. Besides provision of basic care, it is necessary to create an environment based on safety, respect, and dignity for female persons in custody to rehabilitate. Moreover, the development of policies, practices, and programmes promoting healthy connections to children, family, and community are also important for female persons in custody. In other words, a gender-responsive programme addressing the distinct needs of female persons in custody, in particular efforts focusing on improving these females' relationship, roles, responsibilities, self-esteem

and problem-solving skills has been developed and implemented in correctional institutions.

RECENT TREND OF THE FEMALE PENAL POPULATION

4. Like prison populations everywhere, the Hong Kong prison population is largely male. Over the last three years, the female penal population has maintained a steady trend at 19%-20% of the total penal population. As at 30.6.2011, female persons in custody make up almost 18% of the prison population (i.e. 1 784 out of a total of 9 698).

5. In 2010, the number of female offenders admitted into correctional institutions was 5 244, representing 32.3% of the total admissions (16 231). 277 (5.3%) were sentenced to detention in a Drug Addiction Treatment Centre, 11 (0.2%) to Training Centre, 64 (1.2%) to Rehabilitation Centre and 4 892 (93.3%) to a fixed term of imprisonment. The majority of the female offenders are Mainlanders (54.9%) and inmates of other nationalities (20%) who were convicted of immigration violations and pending deportation from Hong Kong after serving their term of imprisonment. Local female offenders comprise only 25.1% of the female prison population. Other useful statistics are tabulated below –

	2008	2009	2010	2011 (Jun)
No. of Admission	5 883	5 451	5 244	2 125
No. of Drug Abuser	631	942	942	468
No. of Non-drug Abuser	5 252	4 509	4 302	1 657
Married	3 214	2 805	2 589	1 071
Divorced	578	541	574	225

6. During the years 2008 – 2010, the number of drug abusers admitted increased from 631 to 942, representing an increase in the proportion of 10.7% to 17.9% of the yearly admissions. As regards the marital status of the female admissions, the number of married females declined from 54.6% in 2008 to 49.3% in 2010. Among them, 9.8% were divorcees in 2008 and the figure increased to 10.9% in 2010.

7. The above statistical analysis reflects the situation that the healing process for females with regard to substance abuse trauma; emotive behavioural therapy in respect of their marital relationship; the awareness of parenting skills as being a single-parent, etc., are equally

important in developing rehabilitative services for this particular group of offenders.

POLICIES AND PENAL SYSTEMS FOR FEMALE OFFENDERS

8. As a general principle, female persons in custody are provided with facilities and treatment of equal standard of the male counterparts despite that they are separately imprisoned as required under the Prison Rules. The policies of treatment for female persons in custody aim at granting equality of treatment and access to equal opportunities for work, medical care, education, market-oriented vocational training, psychological services and programmes related to their rehabilitation. However, issues arising from gender differences are widely recognised among female persons in custody who may have specific needs with regard to family responsibilities, employment, medical, psychological and mental care, in particular some of the females are victims of violence or physical abuse.

Assessment and classification

9. Understanding the background and criminal thinking of a female offender is important in devising an individual sentence plan to address her needs. In some cases, CSD will be required by the court to provide an assessment report on a female offender with respect to her background, rehabilitative needs and suitability for a specific sentence type. For a female offender between the age of 14 and 20, the court may also require the Young Offender Assessment Panel, comprising representatives of CSD and SWD, to make recommendations on the most appropriate rehabilitative programmes for this particular group of young offenders.

10. Young female offenders (aged between 14 and 20) will be assigned to young offender penal institutions while offenders aged 21 and above will be assigned to adult penal institutions of different security levels with respect to their length of sentence and security categories. Female offenders requiring psychiatric treatment will be accommodated in a separate female ward of the Siu Lam Psychiatric Centre.

Current penal facilities for female persons in custody

11. There are seven penal facilities for accommodating female persons in custody. The Tai Lam Centre for Women is a remand centre

and a maximum security prison for adult females. The Lo Wu Correctional Institution is the newest and the largest female prison inaugurated in July 2010 having both medium and minimum facilities for adult females. The Lai King Correctional Institution is a minimum security institution with multiple functions of a remand centre, training centre and a prison for young females. Female drug dependants are accommodated in Nei Kwu Correctional Institution where adults and young persons are separately located. Chi Lan and Wai Lan Rehabilitation Centres accommodate young female persons in custody and offer programmes in different phases under the Rehabilitation Centres Ordinance. Female offenders sentenced under the Mental Health Ordinance and those requiring psychiatric assessment or treatment are detained in a separate ward in Siu Lam Psychiatric Centre. For those discharged from a Training Centre or Drug Addiction Treatment Centre and released under the Pre-release employment Scheme or the Release under Supervision Scheme, they are accommodated in the Bauhinia House.

PROGRAMMES ADDRESSING THE NEEDS OF FEMALE OFFENDERS

12. While we acknowledge gender differences in the general treatment of offenders, the focus and programme objectives also vary for female adult and young offenders for the purpose of addressing their respective rehabilitative needs.

Young offenders and drug abusers

13. Character reformation emphasising on discipline and positive attitudinal change is the feature in a Training Centre. Apart from half-day compulsory education and half-day vocational training, young girls are encouraged to take part in a wide range of activities such as band marching, foot drill, girl guide and outward bound training, coupled with counselling programmes with a view to rebuilding their confidence and helping them develop a sense of social responsibility after release. The Rehabilitation Centre Programme provides a short-term residential training programme with built-in community-based training as an additional sentencing option which aims at enhancing their law-abiding mentality, helping them develop socially acceptable behaviour and equipping them with the necessary social skills for re-integration into society. Drug addicts will undergo a programme with three-fold objectives, namely, detoxification and restoration of physical health through medical

care; uprooting of psychological and emotional dependence on drugs through the Substance Abuse Rehabilitation Programme and the Relapse Prevention Programme; and development of a set of socially acceptable behaviour for enhancement of their interpersonal skills and employability after release.

Adult females

14. As nearly half of the female population are married adults, CSD recognises their needs to maintain a family bond with her child and develop their awareness of their innate responsibility of being a mother. The Prison Rules (Cap. 234A) permit an incarcerated mother to keep her baby in prison until the baby reaches the age of nine months, or until the age of three with the approval of the Commissioner of Correctional Services. The mother will assume full responsibility of caring her child in the baby ward and be exempted from normal work during the period of child rearing. For those having a child below the age of six, they can receive a half-day visit with their child in the Parent-Child Centre where the mothers can feed and play with their child under least supervision. Such a visit aims at encouraging incarcerated mothers to perform and fulfill their family role, enabling them to re-establish parent-child relationship to pave the way for their future reintegration into society.

15. In partnership with the Society of Rehabilitation and Crime Prevention, Hong Kong (SRACP), CSD runs the “Blue Bus” project which aims at rendering emotional and social support to children of incarcerated parents. Children can be accompanied by the trained volunteers of SRACP to visit their incarcerated mothers and attend the parent-child visit programme in prisons. To enhance family connection and mutual support, the incarcerated mothers may also join the “Birthday Gift and Wish Express” programme through SRACP to help them send birthday cakes, gifts and wishes to their children on their birthday.

Psychological and medical care

16. In giving psychological support to the female adult offenders who are having weaker ability in emotion management and resolving personal problems, the clinical psychologists of CSD provide the Violence Prevention Programme to female adults to facilitate their institutional adjustment and behavioural change. A counselling programme focusing on high-risk behaviour with life education on self-care and law abiding concepts will be provided to help female adults to re-assess their value of

life and motivate their intention in reducing risk behaviour. To further address their specific psychological needs, CSD set up the “PSY GYM” in the Lo Wu Correctional Institution in March 2011. The facility is the first personal growth and emotion treatment centre for female adults and provides specialised treatment programme tailor-made for female offenders. Details of the “PSY GYM” are provided in paragraphs 23 to 30 below.

17. Apart from healing the emotional problem of the female adults, other support services conducive to their physical health are equally important. Basic medical services are provided in each institution and referral to the medical specialist of public hospitals for follow-up treatment will be arranged for the female persons in custody on the advice of the residential Medical Officer.

Vocational training

18. Securing employment after release is one of the important factors in determining the success in female offender rehabilitation. Vocational training not only provides female persons in custody with work skills in multi-facets, but also enhances their employability and facilitates their reintegration into society. In keeping with the gender mainstreaming concept, CSD has secured the support of a number of non-government organisations (NGOs) and agencies¹ in providing full-time and part-time vocational training and work with them in devising suitable and market-oriented vocational training courses for persons in custody. Examples of suitable and market-oriented vocational training which address the vocational needs of female persons in custody include computer applications, multi-office skills, hair-cutting, beauty care and manicure training, commercial and retail training, food and beverage services training, and cleaning and pest control, etc. More female persons in custody now receive vocational training and attain external accreditation and recognised qualifications in the course of their work. The training courses have proved to be productive and practical in enhancing the employability of female rehabilitated persons.

¹ The non-government organisations and related agencies include the Employees Retraining Board, Vocational Training Council, The Society of Rehabilitation and Crime Prevention, Hong Kong, Christian Action, etc.

Community involvement

19. Community acceptance and support for the female offenders is also vital for the success and sustainability of gender-specific rehabilitative services in prisons. Since 1999, CSD has launched a series of publicity campaign to appeal for community support for rehabilitated persons. CSD has been in partnership with many community organisations, merchants and trade associations² to work for the benefit of persons in custody and rehabilitated persons. For female offenders, the various initiatives include the running of a professional beautician certificate course and a hairdressing course, setting up of Parent-Child Centres in female adult institutions; sponsoring female ex-drug abusers on Outward Bound training; sponsoring female young persons in custody to attend handicraft class, providing educational talks on women's health and job interview techniques for both young and adult female persons in custody, and purchasing computers and audio-visual equipment for establishing a Resource Centre. All these assistance provided by the community organisations signifies public acceptance which is crucial for offenders' reintegration.

LO WU CORRECTIONAL INSTITUTION: A PURPOSE-BUILT CORRECTIONAL FACILITY FOR FEMALE PERSONS IN CUSTODY

20. Apart from the programmes and services provided to the female persons in custody, CSD has been exploring the redevelopment of outdated facilities and in situ re-provision of correctional premises to alleviate the overcrowding situation in the female institutions. The Lo Wu Correctional Institution (LWCI), the newest female institution inaugurated in July 2010 with a maximum capacity of 1 400, is the first correctional facility in Hong Kong adopting in its design a new management model and the blueprint for the future development of CSD, namely, the Correctional Services Integrated Management (CSIM). The management philosophy of planning, developing and managing correctional facilities under the CSIM panorama originates from the initiative of 'Caring for People, Caring for Environment and Caring for the Community', which is intertwined with CSD's 'Vision, Mission and Values' statement and service motto.

² These organisations include, among others, the Care of Rehabilitated Offenders Association, Lok Sin Tong Benevolent Society, Kowloon, Merchants Support for Rehabilitated Offenders Committee, Rotary Clubs, International CICA Association of Esthetics, Zonta Clubs, Lions Clubs, etc.

21. The LWCI is purpose-designed, built and operated to meet the unique needs of women. The aerial view of the institution is heart-shaped, reflecting the uniqueness of this gender-specific correctional facility where our staff members serve with heart and commitment. With emphasis on people orientation, the design of LWCI with a large capacity of 1 400 is a huge improvement in living environment for female persons in custody when compared with the formerly overcrowded female correctional institutions in Chi Ma Wan and Lai Chi Kok. It includes a hospital capable of providing maternity care services and located next door a baby ward, and a Parent-Child Centre where newborns can stay onsite until they reach the age of three. The LWCI also provides female trade workshops and vocational training facilities for rehabilitation, where female persons in custody are assigned to production jobs that include graphic media, making filter masks, garments and shoes, and they can take vocational training courses in beauty care and manicure training, commercial and retail training, food and beverage services training. Moreover, the LWCI is set up with the first “PSY GYM”, which is characterised with comfortable furniture, pleasant furnishings and warm lights for treatment and counselling of female persons in custody.

22. On the other hand, the institution consists of 3 wings among which centralised facilities including Hospital, Kitchen, Laundry, Visitor Registration Centre, Rehabilitation Facilities, Transport Pool, Dog Kennel, and Administration Unit are shared to ensure economy of scale and operational efficiency. The purpose-built prison design has widely taken into account preservation of the natural habitat, vegetation, as well as being harmonious with the local environment. There are link bridges, underpass and point-to-point connection to facilitate the secure movement of persons in custody and rapid deployment of staff during emergency. Coupled with the adoption of an integrated approach in achieving economy of scale and operational efficiency, CSD aims at delivering quality custodial and rehabilitative services for the female persons in custody in a people-oriented, environment-conscious, cost-effective and innovative manner to meet the ever rising public expectations.

NEW DEVELOPMENT: “PSY GYM” (PERSONAL GROWTH AND EMOTION TREATMENT CENTRE FOR WOMEN)

Gender-specific Rehabilitation

23. Traditional rehabilitation of offenders used to focus on male offenders without considering gender-specific needs of female offenders. Advanced jurisdictions in North America, UK and Australia have, in recent years, paid more attention to the differences in the rehabilitation needs between female offenders and their male counterparts by addressing their gender-specific needs. They emphasize on specialised, holistic, and gender-responsive strategies in devising female-oriented treatment programmes.

24. Female offenders differ from male offenders in terms of the nature of their problems, the role-to-play in crime, the causes and pathway to criminal behaviours. Factors related to their risk of recidivism are also different. The gender-specific problems and treatment needs commonly found among female offenders are summarised as below:

(a). Victim of abuses

Female offenders are more likely to have experiences of abuse than male offenders or women in the general population. Overseas researches showed that 60 – 80 % of adult female offenders had experienced different forms of abuse (including physical, sexual or psychological) in their lives.

(b). Self-regulation problem

Clinical observation shows that female offenders’ weakness in self-regulation is reflected in their frequent emotional outbursts. Their emotional problems are usually more severe and chronic than male offenders. A local study found that more than 50% of the female persons in custody had symptoms of depression, anxiety and stress problems. Their mood problem is usually part of the causes of their offending behaviour.

(c). Self-harm behaviour

Female offenders display much more suicidal or self-injurious behaviour than male offenders. Overseas researches show that more than half of the female offenders engage in at least

one incident of self-harm at some point in their lives. Female offenders with self-harm history were found to have a higher chance of having criminal convictions and violent behaviour.

(d). Dysfunctional relationship

Compared to male offenders, female offenders tend to suffer more from interpersonal problems. They yearn for care and affection. At the same time, their trust in others can be fragile as they are sensitive to exclusion and rejection. Relationship problems with their intimate partners and family often lead to psychological problems and offending behaviour. It also affects their adjustment in prison.

(e). Mental health problem

Partly related to the high frequency of victimisation experiences and their self-regulation problems, various clinical disorders, such as Major Depressive Disorder, Anxiety Disorders, Posttraumatic Stress Disorder, Borderline Personality Disorder, are commonly found among female offenders. Their rates of mental health problems are higher than their male counterparts.

(f). Parenting stress

Female offenders who have children usually experience additional stress and adjustment problems after incarceration. Apart from separation with children, they usually lack effective parenting skills and have limited resources for raising their children. Some of them have criminal convictions related to child abuse. It is therefore important to equip them with adequate parenting skills for looking after their children and to prevent further abuses.

Objective of “PSY GYM”

25. Unless the above-mentioned problems are properly dealt with, female offenders may bring further harm to the community, especially to their offspring and families in the long run, after release. In line with the international practice, CSD set up a specialised psychological treatment unit for female offenders named as “PSY GYM” – Personal Growth and Emotion Treatment Centre for Women’ at the LWCI on 8 March 2011.

This specialised psychological treatment unit aims at providing gender-responsive psychological service to female persons in custody with moderate to high re-offending risk and with specific treatment needs. The programmes consist of thorough psychological assessment and a range of gender-specific systematic treatment programmes for needy female persons in custody through the creation of a therapeutic community inside the LWCI.

Psychological Treatment Programmes in “PSY GYM”

26. With a maximum capacity of 13 places at the moment, the “PSY GYM” offers two programmes, namely the Women Offender Orientation Programme and the Moderate Intensity Programme in the one-year trial run commencing March 2011.

(a). Women Offender Orientation Programme (WOOP)

The WOOP lasts for 2 to 4 weeks and targets female persons in custody having personal or emotional problems and a risk of re-offending. With the use of specialised assessment tools, the participants’ gender-specific re-offending risk and treatment needs are carefully evaluated. Participants are classified according to their risks and needs for programme matching. A programme introducing the treatment programmes in “PSY GYM” and enhancing participants’ motivation for change is provided. Those identified with treatment needs by the clinical psychologist will be referred to take the moderate intensity programme.

(b). Moderate Intensity Programme (MIP)

This 6-8 month programme is designed for female offenders with moderate risk / needs in the personal/emotional need domain. It helps the participants to resolve their personal and emotional problems by using effective coping strategies. Treatment is given in the form of group therapy and in-depth psychological coaching. Musical instruments and drawing facilities are used as treatment tools. During the therapy, participants practise mood management, develop interpersonal skills and enhance their problem-solving ability in face of difficulties. It enhances participants’ understanding of how their gender-specific risk / needs factors are related to their offending behaviours and facilitates them to change.

Both group and individual ;psychological treatments are provided to the participants of the MIP programme. In the trial run period, the treatment modules include:

- (i) Positive Cognition (Building positive thinking and developing positive problem solving)
- (ii) Positive Emotion (Handling negative emotion and enhancing positive emotion)
- (iii) Positive Behaviour (Handling dysfunctional relationship and developing social intelligence)

Characteristics of Treatment in “PSY GYM”

27. Treatment in “PSY GYM” has the following characteristics:

(a). Therapeutic environment

Both western and local experiences show the importance of therapeutic environment for successful rehabilitation of offenders. A treatment unit with therapeutic environment helps to enhance participants’ motivation for treatment and behavioural change. In “PSY GYM”, we provide therapeutic environment within a discrete unit, which promotes mutual care and support among the participants so as to motivate them for psychological change and to develop a positive and constructive lifestyle.

(b). Positive Psychology

Positive Psychology, a new branch of psychology that emerged in the West, has become very popular all over the world. Accumulative evidences in recent years have shown that positive psychotherapy techniques, especially when combined with conventional models, have great potential to improve the efficacy of treatment. “PSY GYM” is currently adopting positive psychology therapy to help participants build strengths and cultivate positive characters. The therapists integrate positive psychology with a cognitive-behavioural model to help participants in cultivating positive cognition, emotion and behaviour; regulating their mood problems; healing dysfunctional relationships; handling parental stress and dealing with various mental health issues.

(c). Coaching

Coaching is a powerful treatment technique used in “PSY GYM”. In a physical gymnasium, a coach will guide us in physical training until we acquire the skills and achieve the goal of improving physical health. With a similar notion, “PSY GYM” is a psychological gymnasium where clinical psychologist acts as a coach with the aim of improving psychological health. Coaching in “PSY GYM” is a new guide to help participants put psychological skills into practice and integrate them into parts of their lives. As each participant receives individual coaching, it helps them to develop and utilise their individual character strengths as well as to set and meet their personal goals. This approach also helps participants to deal with their personal issues, such as traumatic and abusive experience, in a safe and therapeutic context. By taking away the negatives and inducing the positives, we hope that participants can ultimately lead more fulfilling lives.

(d). Use of art

In “PSY GYM”, we conduct psychotherapy through art to bring suppressed feelings to the surface, vent negative emotion and help clients cope with their emotional problems. It also generates insight, empowers their personal growth and improves interpersonal relationships. There are scholar reports that use of art has several benefits for offender rehabilitation and institutional management. Extensive research has shown that use of art is an effective way to treat incarcerated females with histories of sexual, physical, and emotional abuse. Art therapeutic groups significantly reduce depressive symptoms and improve mood. It is helpful in treating persons in custody with vulnerabilities due to mental illness. Besides, it is a potential way to identify those with high risk of committing self-harm so as to facilitate prompt intervention.

Use of Gender Mainstreaming checklist in developing the “PSY GYM”

28. CSD has adopted and found the Gender Mainstreaming Checklist a simple and useful analytical tool in developing the “PSY GYM”.

With gender sensitivity in mind, CSD has analysed sex-disaggregated data (e.g. clinical profile of the offenders) in designing the programme. The statistics indicate that female offender group has higher prevalence of psychopathology in comparison with the male counterparts and their risk and needs profile are also greatly different from the male group. It supports the notion that gender-specific programmes should be adopted to cater for this specialised clientele group. Accordingly, programme content and the delivery mode have been designed to match with the unique learning / response style of women.

29. Actions taken/being taken so far are:

- (a) sex-disaggregated data were collected and considered in designing the programme, the results of which informs the department of the proper programme design that caters the need of female offenders.
- (b) Relevant experts' views were gauged during the design process³. The gender perspectives of the programme have since been enriched.
- (c) The promotional content and delivery mode of this programme have been presented in a gender-sensitive manner. The medium of promotion (including printed booklets, talk/seminar/workshop and motivational enhancement group) is also effective in reaching the target group.
- (d) Specific working groups have been set up at the working level as well as headquarter level to monitor the programme.
- (e) External and internal training workshops on gender-specific issues and treatment have been arranged for relevant staff.

Way Forward of "PSY GYM"

30. "PSY GYM" is now on trial run for one year and its programmes are being developed according to the latest research with the help of local academic Dr Samuel HO. CSD will carefully evaluate the responses of the participants and conduct a review of the trial run in

³ These experts include Dr Samuel HO of The University of Hong Kong and overseas experts in the field such as Dr Kelly Blancelette and Dr Shelly Brown from Correctional Service of Canada.

March 2012. CSD also plans to conduct a full evaluation of the programme at least three years after formal implementation. CSD will continue to adhere to the Gender Mainstreaming Checklist in the implementation, monitoring and evaluation, and review of “PSY GYM”.

CONCLUSION

31. CSD believes that gender-specific treatment and programmes for female offenders can address the distinctive needs of female offenders. The objectives are set to help this particular group understand anti-social thoughts and criminal motives, re-evaluate consequences of criminal behaviour, identify improvements in their decision-making capabilities and provide work empowerment. However, the effectiveness of CSD’s work in rehabilitation is not only affected by the quality of the custodial regime and rehabilitative programmes, but also the motivation and responsiveness of offenders towards such programmes, as well as community acceptance of rehabilitated persons. To promote sustainability of these programmes and make the programmes a success, CSD will continue to work with NGOs and community organisations in enhancing rehabilitative services for persons in custody and to organise education and publicity campaigns to appeal for community’s support to give rehabilitated offenders a chance.

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