

**EFFECTIVENESS OF OFFENDER REHABILITATION PROGRAMMES IN
ADDRESSING THE PSYCHOLOGICAL NEEDS OF WOMEN OFFENDERS
WITHIN THE PRISONS IN KENYA**

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C82/10027/2008

**A THESIS SUBMITTED TO THE SCHOOL OF HUMANITIES AND SOCIAL
SCIENCES IN PARTIAL FULFILMENT OF THE REQUIREMENT FOR THE
AWARD OF THE DEGREE OF DOCTOR OF PHILOSOPHY (COUNSELING
PSYCHOLOGY) OF KENYATTA UNIVERSITY**

AUGUST 2018

DECLARATION

This thesis is my original work and has not been presented for a degree in any other University or for any other award.

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DEDICATION

To my late beloved sister and friend Irene Rita Ondeng whose sudden illness and death taught me a new meaning of life! Rita, your strength, courage and hope to the very end remains my source of resilience. Rest in peace nyarjapuonj- till we meet again!

ACKNOWLEDGEMENT

This has been a tedious academic journey to which I owe my gratitude to many. First, I am grateful to God for granting me the grace I needed to work on this dissertation to its completion. Secondly, I wish to appreciate several people whose support made it possible for me to get this work to completion.

I wish to sincerely express my profound gratitude to my two supervisors Dr. Anne Merecia Sirera and Dr. Beatrice Kathungu of the Department of Psychology, Kenyatta University. My supervisors tirelessly accorded me support by way of professional guidance, encouragement and total self-giving throughout this journey. I also wish to thank Dr. Peter Shangilwa of United States International University - Africa (USIU) and Mr. Denis Oluoch of Maseno University for giving me valuable guidance in the initial proposal writing stages.

My sincere gratitude to Bauman Ashley of the Criminal Justice Research Center at the University of Cincinnati (USA) and Professor Emily Wright of University of Nebraska, Omaha (USA) for providing me with the Gender Responsive Tools that guided me in developing my research objectives and tools. My gratitude equally goes to Professor Ralf Schwarzer of Freie Univeritat, Berlin, co-author of the General Self-Efficacy Scale for their online permission to use the scale.

I acknowledge with deep gratitude The Catholic Scholarship Program (Kenya), Fr. Peter Meienberg OSB and the Provincial Council of the School Sisters of Notre Dame-Africa, for the immeasurable financial and moral support that they gave me throughout this study. My appreciation also goes to my classmates at Kenyatta University for their ideas and inspiration during this study. I am very grateful to my SSND family and in a special

way the Nairobi community for their understanding, prayerful support and encouragement during this journey. My gratitude equally goes to my beloved family, my late sister Irene and friends, Frs. Jacob Oyugi CP, Stephen Okello IMC for sharing in the excitement and difficulties I experienced throughout the writing of this thesis. Many thanks to the Discalced Carmelite Order, Langata Community, Nairobi for providing a serene and conducive environment to work whenever there was need.

I acknowledge with deep gratitude the National Council for Science, Technology and Innovation (NACOSTI) for granting me the research permit to collect data in the Women's Prisons across the country. Special gratitude to the Kenya Prisons Department and in particular the director of Rehabilitation and Social Welfare - Madam Mary Khaemba, Mr. Michael Ngugi, the chief librarian at the Prison's Headquarters and the Officers In-charge of all the Women's Correctional Facilities in Kenya without whose cooperation, data collection would not have been possible.

Finally, I thank my colleagues and students at Tangaza University College and my many friends whom I have not mentioned their names for your prayers, love and support in this laborious academic journey.

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OPERATIONAL DEFINITION OF TERMS

- Abuse:** Any pattern of coercive tactics including psychological, emotional, physical, sexual and/or economic used by a man on a woman either in or outside a spousal relationship to gain and/or maintain power over her.
- Assessment:** A process of examining an offender's life in more detail so that diagnoses for psychological needs is done and appropriate intervention programs/strategies are offered.
- Correctional Facility:** Any gazetted prison in Kenya that is heavily guarded for the purposes of rehabilitating/reforming criminal offenders.
- Effectiveness:** The extent to which the objectives of rehabilitation practice in the Kenyan women prisons addresses the psychological needs of the women offenders.
- Gender Needs:** Strategic requirements specific to women or men to improve their position or status by placing them in greater control of themselves instead of limiting them to the restrictions imposed by their socially defined roles.
- Gender Mainstreaming:** A process of assessing and integrating the implications for men and women, of any planned action, including legislation, policies or programs, in any area and at all levels. It is a strategy for making the concerns and

experiences of both women and men an integral dimension in the design, implementation, monitoring, evaluation of policies and programs in all political, economic and social spheres so that inequality is not perpetuated.

Gender-Responsive Treatment: Rehabilitation approach that takes into account the larger psychological and individual factors specific to genders that impact offenders in the criminal justice system.

Gender-Sensitive Programing: Programs that recognize gender roles as important and thus gender dimension is systematically integrated into every step in the criminal justice system; from arrest to defining the problem into actual rehabilitation process.

Needs: Risks or psychological issues that guide program referrals.

Need Principle: Treatment tailored into targeting factors about the offender that are functionally related to (“causes”) their offending.

Recidivism: Habitual offending by offenders.

Offender Rehabilitation/

Treatment: All actions and processes intended to assist the correction of women prisoners by addressing offending behavior and encourages access of evidence-based intervention programs.

Psychological Needs: A condition required for an offender’s well-being and proper functioning to desist from criminal behavior.

Responsivity Principle: Matching treatment intervention to an individual's learning style, motivation and ability.

Risk Principle: Matching treatment to an offender's likelihood of committing crime i.e. high-risk offenders receive more resources targeting risk-needs than a person who is at low risk.

Screening: Evaluation of offenders with characteristics in question for treatment (e.g., mental health problem, substance abuse problem) at intake time. It requires training to administer.

ABBREVIATIONS AND ACRONYMS

AA:	Alcoholics Anonymous
ACROG:	Association for the Care and Rehabilitation of Offenders in Ghana
BPD:	Borderline Personality Disorder
CEO:	Chief Executive Officer
COD:	Co-current Disorder
CSC:	Correctional Services of Canada
GOK:	Government of Kenya
ICPR:	Institute of Criminal Policy Research
ILO:	International Labour Organization
KPS:	Kenya Prisons Services
KPSTC:	Kenya Prisons Staff Training College
KU:	Kenyatta University
LAO	Legislative Analyst's Office
LSI-R:	The Level of Service Inventory- Revised
NCOSTI:	National Commission for Science, Technology and Innovation
NIC:	National Institute of Corrections
NIDA:	National Institute on Drug Abuse
NIJ:	National Institute of Justice
OCD:	Order of Discalced Carmelites
PTSD:	Posttraumatic Stress Disorder

RNR:	Risk Needs Responsivity
RODI:	Resource Oriented Development Initiative
UNAFEI:	United Nations: Asia and Far East Institute for the Orientation of Crime and the Treatment of Offenders
SA:	South Africa
SPSS:	Statistical Packages for Social Sciences
STDs:	Sexually Transmitted Diseases
STIs:	Sexually Transmitted Infections
SSND:	School Sisters of Notre Dame
UC:	University of Cincinnati
USA:	United States of America
USIU:	United States International University
WHO:	World Health Organization
WWR:	World Work Report
YCTC:	Youth Correctional and Training Centre

ABSTRACT

Globally, for the past decade there has been continuous growth of body of research on women in prisons with USA setting the pace. The studies have gained insights on female pathways to prison (see Collica-Cox, 2018; Bloom, Owen & Covington, 2005) necessitating the development and implementation of programs that are gender responsive to specific needs of women offenders. Such programs are those that address issues that may hinder rehabilitative success and eventually the reintegration of the women back to the society. Ineffective rehabilitation of women offenders remains one of society's concerns all over the world today, Kenya included. However, few studies had examined women offenders in Kenya and a little extent the rehabilitation programs that address their psychological needs. The study sought to determine the effectiveness of rehabilitation programs in addressing the psychological needs of the women prisoners in Kenya. The relational theory of women's psychological development and the Risk-Needs-Responsivity (RNR) model for offender rehabilitation were used to inform the study. The study adopted a cross-sectional descriptive research design, employing a mixed concurrent triangulation method of data collection. The target population included all convicted women prisoners within the 17 correctional facilities of women prisoners in Kenya with a minimum of class 8 education level. Purposive and simple random sampling techniques were used to select 350 study participants. Quantitative data was gathered through use of questionnaire while qualitative data were collected from focus group discussions (FGD) guide and interview schedules. Quantitative data collected was analyzed using descriptive statistics and presented in form of frequencies, means and standard deviations. Textual thematic analysis was done for qualitative data from FGDs and interview schedules. The study revealed that majority of women offenders in Kenya associated their criminal behaviors with psychological needs such as: histories of physical abuse- 46.8% in childhood and 51.3% in adulthood; 78.95% scored on posttraumatic stress disorder while parental distress was highly indicated with 62.6% having financial constraints to provide basic needs for their children, and 87% were constantly worried of their children's future. The study established that there are few underdeveloped rehabilitation programs targeting psychological needs, with most programs focused on economic empowerment of offenders. The study finding led to a conclusion that the rehabilitation programs within the Kenyan women prison are not effectively addressing women offenders' unique psychological needs contributing to their criminal behaviors. This is due to lack of gender responsive programming, lack of in-depth research on women and crime in Kenya, lack of curriculum training on gender responsive treatment to the wardresses and lack of proper planning and management of available funds both from the government and income generating from the prisons' projects. The study notes as important the introduction of alternative rehabilitative practices for less risky and petty offenders to decongest the prisons. The study further recommends contextual researches on women and crime that would lead to the development and implementation of gender-responsive programs in women's correctional facilities in Kenya. The study contributes to knowledge gap by providing useful information that the prisons department and stakeholders may use to improve policy and rehabilitation practices for rehabilitation of women prisoners in Kenya.

CHAPTER ONE: INTRODUCTION

1.1 Background to the Study

Empirical evidence shows that over the past two decades there has been a lot of global public policy debate on rehabilitation of offenders and its effectiveness (Cullen & Gendreau, 2002). Some scholars believe that for offenders to reform and be effectively re-integrated into the society they must be rehabilitated through meaningful programs that addresses their needs (Morita, 2013). Such programs must provide the person necessary conditions to lead better lives than simply teach them how to minimize their chances of being incarcerated (Ward & Stewart, 2003).

The need for effective rehabilitation emanates from global concerns over the growing numbers of prison population. Moreover, the current indications are that female prison population levels have not only grown sharply; they have grown much faster than male prison population levels. The world prison population is estimated to have increased by over 20 percent since 2000, compared to over 50 percent increase in the overall number of imprisoned women (Institute for Criminal Policy Research, 2018) (ICPR). The report further note that increases have been greater than the growth in national population levels in all continents except in Africa where the rise in the female prison population was only half as the increase in the population of the continent. This is attributed not only to the high rates of new crime but also to the high rates of recidivism (ICPR, 2018; National Institute on Drug Abuse, 2014) (NIDA).

Similarly, female imprisonment has caused more worry particularly at the faster growth rate surpassing that of male prison population (ICPR, 2015). The ICPR, (2018)

shows that there were over 700,000 women held in penal institutions throughout the world, either as remand prisoners or having been convicted or sentenced in 2017. Reporting for the Prisons Policy Initiative 2019, Sawyer and Wagner (2019) noted that of all the women incarcerated globally, the United States of America had the highest number of female inmates under correctional supervision in 2017 totaling to 219,000. These were both convicted and non-convicted women prisoners held in local jails, federal prisons and state prisons. According to the above report, 103, 766 plus unknown number in pre-trial or administrative detention were in China. The next highest were in Russian Federation (53,304), Thailand (44,751), Brazil (37,380), Vietnam (20,553), India (18, 188) and Mexico (13, 400). The report gave a considerable variation in the proportion of the national population. Americas' median level being more than four times as high and Asia three times as high. The report indicated that the total prison population is lowest in African countries where the median level is 2.5 percent per 100, 000 of the national population.

However, the report indicates that although the statistics of offenders are low in Africa, the trend on the steady increase in men and women being incarcerated within the region remains a concern for governments and the society as a whole. A situation perhaps as explained in (Msath, 2013) may be blamed on erosion or decay of African moral values especially among the youth. Moreover, moral deterioration and values are further blamed on factors such as, genetic inheritance of a difficult temperament; ineffective parenting; and living in a neighborhood where violence is a norm (Santrock, 2005); poverty, lack of education, family background, and drug abuse (Miriti & Kimani, 2017); media, culture and technology (Kumar, 2010; Rwechungura, Olotu, Mathias, Minja &

Goodluck, 2010). It is therefore important that society addresses the concern on moral decay and effective ways be sought by the criminal justice system during rehabilitation of offenders in addressing factors associated with an individual's criminal behavior.

According to (NIDA, 2018), although female offenders total prisons population in Africa is lower, there are concerns particularly on the continuously increasing numbers being incarcerated. While acknowledging that the numbers of female offenders fluctuates and therefore figures in records only give an indication of the trend but inevitably an incomplete picture, the (ICPR, 2018) showed an increase of number of convicted female prisoners in Kenya from 2,081 in 2009 to 3,762 in 2016. This reflected an almost 3 percent increase in the total number female prison population in Kenya. The report further confirms the reason for an in-depth focus on studies on women and crime and the importance for corrections to determine and address the unique needs of women that contribute to their criminality.

Pioneer scholars in the field of modern correctional policy (Andrews & Bonta, 2003) believed that offending behaviors were caused by social factors, specifically illiteracy, poverty and unemployment. However, contemporary feminist psychologists working in correctional facilities include factors such as dysfunctional relationships, trauma and victimization, parental distress, low self- esteem and efficacy as major contributing factors in offending behaviors in women.

Arguing that male and female offenders have different pathways to criminality, Holtfreter and Morash (2008) observed that unless appropriate gender-specific programs, acknowledging the psychological development of women are incorporated in their rehabilitation, female offenders will remain prone to re-offending and re-incarceration.

This means that rehabilitation of women offenders must focus beyond issues of pro-criminal attitudes and values, criminal associates, antisocial personality, antisocial behaviors as has been the case (Van Voorhis, 2013; Hollin & Palmer, 2006). Holistic rehabilitation is, therefore, considered a viable solution in addressing the above factors (Jespersen, 2006; Ward & Stewart, 2003). This entails combining rehabilitation with correction of offending behaviors while promoting social responsibility, social justice and empowering offenders with life skills thus enabling them contribute to making society a better place to live in (United Nations, 2010). However, there is a dearth of empirical information that factors associated to psychological development of women are taken into account when planning programs for rehabilitation of women offenders.

At the inception of prisons facilities in Kenya in the '50's, the traditional approach to rehabilitation and correction of offenders focused mainly on the confinement of prisoners and ensuring that convicted prisoners fulfilled conditions of confinement as laid out in the Kenya Prisons Act (GOK, 1977). Although newer practices of rehabilitation have been introduced in the recent years, punishment in form of hard labor remains an important component of "rehabilitation" in correctional facilities in Kenya. It is, therefore, not uncommon to find male prisoners working in prisons farms or providing "free" labor in terms of maintenance in buildings, slashing grass, and trimming flower beds in government offices and hospitals. Similarly, in women's correctional facilities in Kenya, women offenders are often engaged in all kinds of activities ranging from tiding and beautifying the prisons environment and maintaining cleanliness at wardens' quarters.

The global Human Rights wave on reformation in prisons of the 80's, led to a drastic shift towards reformation of offenders in Kenya, with emphasis on integration of punishment and rehabilitation (Wekesa, 2013). Today still, human rights groups, Faith Based Organizations (FBO) and Non-Profit Organizations (NGOs) continue to drum up calls on the introduction of relevant rehabilitation programs for offenders (Omboto, 2013; Onyango-Israel, 2013). Documentation on rehabilitation of women offenders in Kenya, however, remains scanty. Literature on this topic seem to focus more on human rights issues such as improvements in sanitation, diet and legal representations in courts. In one study by Juma (2005), the author addresses the economic and human rights issues of offenders as reforms practiced within the Kenyan prisons. The study focused more on economic and human rights issues but did not address rehabilitation programs as suggested in the title. While acknowledging the establishment of gender specific facilities in Kenya, it is not clear whether or not there are programs within the Kenyan women prisons that addresses women's psychological needs of trauma and victimization, dysfunctional relationships, parental distress, low self- esteem and self-efficacy, perceived crucial to rehabilitation of women offenders (see for example Sorbello, Ward, & Jones, 2002; Van Voorhis, 2012, 2013).

In another study by Ogeto (2009), the author focuses on prisons reforms such as humane treatment of offenders, decongestions, and improvement of infrastructure, but the study does not show a clear address to rehabilitation practices in prisons although the study topic reflects the component of rehabilitation. Moreover, in addressing rehabilitation of offenders in general terms, the study made general conclusions without considering gender differences and pathways to criminality. Programs with a feminine

outlook such as beauty shows, pottery, knitting, cookery and baking including remote parenting are some of the programs currently administered in women's correctional facilities in Kenya (Omboto, 2013; Murugi, 2012). Although these rehabilitation practices have gained support by the general public, it is not clear if they are geared towards addressing the psychological needs of women offenders. Such an objective is lacking significantly in reviewed literature.

Histories of victimization; physical or sexual, are major traumatic psychological experiences for women prisoners. Physical, emotional or sexual abuse affects parts of the human brain that controls one's reasoning capacity (Brown, Melchior & Huba, 1999). This may explain women offenders' involvement into criminal activities such as drug use, self-injury and suicidal tendencies; acted out as a means of numbing the pains related to their traumatic experiences (Covington & Bloom, 2006; Brown, Miller & Maguin 2009). This study sought to establish how rehabilitation programs within the Kenyan women prisons take into account issues of victimization and traumatic experiences in the lives of women as factors contributing to their criminal behaviors.

Parental distress as a psychological need in women offenders is linked to lack of preparedness in parenting roles and failure to handle parental responsibilities (Byrne & Howells 2002). Conceptually, parental distress refers to the combination of negative emotional distress such as depression, anxiety and stress (Hollin & Palmer, 2006). Parental distress could be precursor for female offending such as child molestation, child neglect, drug addiction and fraud for survival purposes, suggesting the need to equip women with parental skills. Wright et al. (2008) suggests training parenting skills and supporting women to heal through their guilt and shame of failures as parents.

Considering the roles society assigns to women as home makers, mothers, nurturers and the backbones of many families the call towards the development of rehabilitation programs that not only addresses women's psychological needs but equally celebrates their uniqueness as women is timely information for the Kenya government, correctional department and the society at large. It is not clear to what extent the Kenyan prisons take into consideration parental distress as a precursor for female offending and the extent to which they help to improve their parenting skills. Empowering women offenders towards embracing and managing their uniqueness is an affirmation that contributes to strength and power in women. This then acts as a means towards reduction of recidivism in women offenders (Salisbury, Van Voorhis, & Wright, 2006).

Dysfunctional relationships in women is articulated by the relational theory as a psychological need that was used to inform this study. According to relational theory, women whose lives are mirrored by healthy, undisturbed, caring and warm relationships exhibit stability and success in life. For most female offenders, however, these relationships present in the form of abuse or neglect. Women's distress associated to dysfunctional relationships often results into criminal behaviors such as assault and murder or substance abuse as a survival strategy in numbing the pains of such disturbed relationships. In some cases, substance abuse is used to maintain the relationships (Sorbell et al., 2002; Van Voorhis, 2013; Blanchette & Tylor, 2009). For example, when asked to commit criminal acts to secure a partner's needs, in the face of abandonment or abuse, these women turn to criminal activity. Reports on rehabilitation of offenders in Africa and Kenya in general by Oketch (2006), Luyt (2008), and Othieno et al. (2011), confirm that substance abuse amongst offenders is a common phenomenon. However,

like many other gender specific factors, more studies must be done to understand the effects of dysfunctional relationships.

Closely related to empowerment, low self-esteem in women is associated to their low status in society, social stigma, histories riddled with abuse, addiction and negative relationships (Salisbury, Van Voorhis, & Wright, 2006). These scholars equate self-esteem and self-efficacy to financial empowerment thus creating a sense of control in one's life to complete certain goals. Although studies done mostly in male population show that incorporating self-esteem has little effect particularly in predicting recidivism (Andrews & Bonta, 2003), women may have a different story. Salisbury (2007) contends that a ruined self-esteem based on life circumstances such as de-empowerment, dysfunctional abusive relationships and oppression by a society unable to meet their needs, explains behaviors such as drug use, fraud and rage in women offenders. Literature is sparse on connecting self-efficacy to lower recidivism rates; however, literature does support the connection between successful treatment and gaining a sense of self control (Task Force on Federally Sentenced Women, 1990). Studies on economic empowerment of women offenders globally, Africa included, is in plenty. Nonetheless, studies on economic empowerment of offenders as related to self-esteem and self-efficacy is new in literature and as such calls for further investigations. This study, therefore, sought to establish if self-esteem and self-efficacy had any connection to criminality in women prisoners in Kenya, and if so, the study also examined how these are addressed through the rehabilitation programs.

Scholars (Covington & Bloom, 2006; Salisbury, 2007; Van Voorhis, 2013) stipulate that risk/needs assessment of offenders is a major step towards effective

rehabilitation of women offenders. The Risk, Needs and Responsivity theory used in this study, explains the importance of risk/needs assessment of offenders. However, it is not clear if such assessments are undertaken for women offenders in Kenya. This study, therefore, sought to establish what strategies are employed in identifying offender risk/needs within the Kenyan women prisons before assigning them to particular rehabilitation programs. In addition to addressing the psychological needs of women offenders for effective rehabilitation, Covington and Bloom (2003) expounds that such programs must equally be administered in warm, friendly environment whereby desired behaviors are modeled by those responsible for administering the rehabilitation programs. Concerns on the effectiveness of the rehabilitation programs in addressing the needs of women offenders within the Kenyan prisons was a major concern of this study. This study is therefore an endeavor by the researcher to investigate this pertinent concern.

1.2 Statement of the Problem

The Kenya Prisons Service department is charged with the responsibility of rehabilitation of offenders as they serve their sentences in the prisons. The majority of incarcerated offenders are male but the growing numbers of women being imprisoned within the Kenya women prisons is a worrying trend and concern for the government and society. Notably men and women have different paths to criminality however it is not clear whether the programs offered in the prisons to rehabilitate women offenders take into consideration the psychological issues such as, as trauma, dysfunctional relationships, parental distress and low-self-esteem largely contribute to their offending behaviors. The studies that exist on prisons in Kenya tend to focus more on human rights issues related to overcrowding in the prisons, poor diet, poor infrastructures and legal

issues. Few studies that have addressed rehabilitation focused majorly on vocational and technical training programs aimed at economically empowering offenders but lacking a focus on unique pathways to criminality by women and therefore how these can be addressed.

Therefore, the central problem of this study was that although psychological issues have a significant influence on women criminality, there was limited empirical evidence that demonstrate the efficacy of the current rehabilitation programs in correctional facilities in Kenya in addressing the psychological needs that make women prone to offending for effective rehabilitation. This study therefore sought to assess the effectiveness of the current programs in prison in addressing the psychological needs of women offenders in Kenya.

1.3 Purpose of the Study

The purpose of this study was to examine the effectiveness of offender rehabilitation programs in addressing the psychological needs of women offenders in Kenya and to suggest ways towards effective rehabilitation of women offenders.

1.4 Objectives of the Study

The study was guided by the following objectives:

1. To explore the unique psychological needs contributing to criminality in women offenders in Kenya.
2. To investigate the rehabilitation programs currently available to women offenders in prisons in Kenya.
3. To assess the effectiveness of the current rehabilitation programs in addressing the psychological needs of women offenders within the prisons in Kenya.

4. To determine the challenges faced in addressing the psychological needs of women offenders for effective rehabilitation within the Kenyan prisons.
5. To explore possible ways of improving the current rehabilitation programs for women offenders in Kenya in addressing their psychological needs.

1.5 Research Questions

The following were the questions that emerged from the objectives given above:

1. What are the unique psychological needs contributing to criminality by women offenders?
2. What are the current rehabilitation programs available to women offenders in Kenyan prisons?
3. To what extent are the current rehabilitation programs addressing the unique psychological needs of women offenders within the prisons in Kenya?
4. What are the challenges faced in addressing the psychological needs of women offenders for effective rehabilitation within the Kenyan prisons?
5. What possible ways can be employed to improve the current rehabilitation programs for women offenders in Kenya in addressing their psychological needs?

1.6 Justification of the Study

Psychological needs of women offenders have significant influence in their criminal behaviors. This knowledge is important in rehabilitation as it guides the development of gender-responsive programs. This study established that rehabilitation practices within the Kenyan women prisons are not yielding enough positive outcomes in helping women offenders desist from recidivism, re-incarceration and therefore become better members of the society. Unless their psychological needs are equally addressed, no

effective rehabilitation of women offenders can be realized. The importance of addressing women's psychological needs towards effective rehabilitation is a timely concern. It is for this reason that I found this study justified.

1.7 Significance of the Study

The study has generated necessary information that can be useful to service providers within the Kenya Prisons Services Department (that is, the prisons headquarters, officers in charge of the women's correctional facilities and wardens) on the issues underlying the current rehabilitation programs of women offenders in the country. This knowledge could therefore contribute to the improvement of the existing rehabilitation programs and subsequently the development and implementation of newer rehabilitation programs. Counselors, psychologists, FBO's, NGO's, the judicial services, families and the community at large can also benefit from the study by getting information on the current rehabilitation practices and new ideas on effective practices in the rehabilitation of women offenders in Kenya. Future researchers, academicians and groups and individuals interested in exploring issues of rehabilitation of various categories of offenders will benefit from this study as it lays a foundation for their own research.

1.8 Scope of the Study

In terms of scope, this study focused on the effectiveness of rehabilitation programs within the Kenya women prisons in addressing the psychological needs of women offenders. Psychological needs of women offenders have links to criminality in women. Although male offenders have been mentioned from time to time in the study, the focus was mainly on women offenders. In terms of the geographical scope, the study

was conducted within the 17 major correctional facilities catering for the 47 counties of Kenya. Because it was not possible to cover all the women prisons in the entire country due to time limitation, a representative sample was systematically selected to participate in the study. To avoid delays and ensure easy access to sites, the officers' in-charge of the selected prisons facilities were contacted prior to the commencement of data collection process to facilitate prior arrangements with those who took part in the study.

1.9 Assumptions of the Study

This study was based on the following assumptions:

1. There were unique psychological needs of women offenders that would be established.
2. There were rehabilitation programs currently running in the women prisons in Kenya.
3. There were measures to determine the effectiveness of rehabilitation programs in addressing the psychological needs of women prisoners in Kenya.
4. There were challenges faced in addressing the psychological needs of women offenders in Kenya.
5. There were possible ways that could be explored to improve the current rehabilitation programs for women prisoners in Kenya.

1.10 Limitations of the Study

1. A major challenge was lack of favorable environment to carry out the exercise in some facilities. These included lack of enough space or rooms and furniture to facilitate the smooth process of data collection. It was necessary to design creative ways in ensuring that the sitting arrangement was convenient for the respondents in order for them to be able to fill out the questionnaires.

2. Although basic reading and writing ability were considered for the respondents, some could not interact with the tools. This necessitated the addition of one more respondent at each of the sites to be sure of getting the sample frame. Interpretation of the items in local languages was considered in some cases.
3. Some of the officers in-charge meant to be key respondents were absent from their work stations despite having been informed prior to the date of the visit of their role in the research. Their deputies were instead interviewed.

CHAPTER TWO: LITERATURE REVIEW

2.1 Introduction

The purpose of this study was to determine the effectiveness of rehabilitation programs within the Kenyan women prisons in addressing the psychological needs of women offenders. This chapter discusses two theoretical frameworks and empirical reviews related to rehabilitation of women offenders. Literature reviewed was based on the variables of the study, that is, unique psychological needs of women offenders associated with their criminal tendencies, the available gender-responsive programs and factors that contribute to the effectiveness of the rehabilitation programs. The chapter concludes with a summary of the literature review and a conceptual framework, which is an illustration of how variables in the study were inter-related.

2.2 Theoretical Framework

The study was guided by the Relational Theory of Women's Psychological Development and the Risk-Need-Responsivity (RNR) Model. This was important because the psychological needs of women are covert, hence, although the theory may illuminate on them, there is still the need to assess the inmates to be able to identify the risks posed for effective rehabilitation. RNR model was therefore necessary for the effective conceptualization of psychological needs of women. The details of the theory are discussed below followed by RNR model.

2.2.1 The Relational Theory of Women's Psychological Development

The relational theory of women's psychological development was coined by Miller (1976) and colleagues (Gilligan, 1982; Jordan, 1984; Kaplan, 1984; and Surrey,

1985). This theory explains the differences in psychological and moral development of men and women. Relational theory has been adapted by feminist criminologists in the understanding of women, their pathways to criminality and in guiding on rehabilitation programs for women offenders. Relational theory denotes that “connections” is a critical developmental need in human beings, but more importantly to women. Thus, according to Miller (1976), a woman’s growth is manifested through the types of relationships she has, and her sense of self-worth is defined by interconnections with others. Therefore, without healthy connections in their relationships, women’s positive growth and self-worth are eroded leading to their criminal behaviors (Miller, 1976, Gilligan, 1982; Jordan, 1984; Kaplan, 1984; and Surrey, 1985).

Victimization and dysfunctional relationships in women’s lives are issues addressed within the framework of relational theory. According to scholars (Covington, 2007; Salisbury, 2007; Trotter et al., 2012; Van Voorhis, 2013), such disturbed relationships and abuses in women’s lives contribute to lack of empathy, distress and low self-esteem attributed to criminal behaviors such as fraud, substance use and abuse, among others. Therefore, according to relational theory, successful rehabilitation and the power to desist from crime can only be realized if women offenders are provided with skills to reconnect and begin working through their disturbed relationships. Relational theory is therefore important to this study in articulating women’s distinct pathways to criminality.

In summary, the task of identifying psychological needs of women offenders and determining ways towards their effective rehabilitation necessitates the use of relational

theory to complement the RNR theory. Collectively, the two theories inform the study on the unique needs of women offenders and a model in which these needs can be addressed.

2.2.2 The Risk-Need-Responsivity (RNR) Model of Offender Rehabilitation

The Risk-Need-Responsivity (RNR) Principles model of offender rehabilitation is the first empirically based framework used in correctional facilities around the world. Coined by two Canadian psychologists, Donald Arthur Andrews and James Bonta, it was implemented in 1990. The inspiration to conceptualize “effective rehabilitation practices” was motivated by the scholars’ belief that correctional systems around the world needed to use science as a basis for offender rehabilitation.

The model is founded on three core principles of offender classification- *risk, need, and responsivity* (RNR). The rehabilitation perspective of RNR model rests on a number of assumptions about crime and the characteristics of offenders. The first assumption is that crime is caused by distinct patterns of social and psychological factors. Simply explained, crime in offenders is instigated, and therefore, there are increased chances that an individual will break the law due to her interactions with the environment. The second assumption is that targeting these factors will decrease reoffending rates and therefore rehabilitation is important as it can influence change in an individual to avoid criminal offenses. Hence the environment can be manipulated to yield positive change.

The third assumption, states that the only way to effectively intervene is through compassionate, collaborative and dignified human service (Blanchette & Brown, 2006), thus the need for rehabilitators to possess the essential qualities of a helper. These assumptions are essential guides for this study. According to the RNR model, the first

step in rehabilitation is the identification of the risk/needs factors of offenders using validated instruments such as the Level of Service Inventory Revised (LSIR-R) considered to be gender neutral (Holtfreter & Morash, 2008). The RNR model identifies two types of risks a) those that are static in nature, for example, gender, age at onset of offending and history of prior offending, b) those that are dynamic in nature, for example, substance abuse, pro-criminal attitudes and values, criminal associates, antisocial personality, lack of problem solving and self-control skills, hostility, anger, lack of empathy, and employment status. The RNR model's principle of risk/needs identification is an important measure for this study. Important to this study is the understanding that individuals differ in their risks of offending, and therefore, it is important to provide treatment that matches an individual's risk factors conclusively. This can only be realized through the identification of an individual's risk and needs of the offender.

The second principle, that is, the Needs principle suggests that individuals vary in their predisposition to committing deviant acts, and therefore, treatment of women offenders should be tailored to meet each offender's unique needs that may be varied (Kruttschnitt & Gartner, 2003; Covington, 2007). For example, assessment of an offender with sexual offending behaviors may include but are not limited to issues of intimacy, loneliness, or problems with emotional regulation. This principle is relevant to this study as it emphasizes the necessity of assessment beyond the presented need of the offender but more so those underlying issues that may not be obvious. The identification of women's psychological needs using validated assessment tools will ensure placement of individuals to treatment programs that target all the needs including those that may not be obvious.

The third principle of the RNR model is the responsivity principle. It explains the importance of matching treatment to the learning styles and abilities of the offenders (Bonta, 1995). This principle informs that not always will all offenders be receptive to treatment. For example, offenders who lack the morale to change may simply reject rehabilitation and become resistant to treatment. Several factors such as: mental deficiencies, learning disabilities, deep seated attitudinal and behavioral dispositions, long histories of institutional confinement, lack of readiness and capacity to alter behavior may contribute to demotivation in offenders (Miceli, 2009). The importance of this principle is to encourage rehabilitators to seek ways of motivating such offenders rather than ignoring or punishing them for their reluctant or resistant attitude to treatment.

A major limitation of this model is that although regarded as “gender neutral”, its ineffectiveness in addressing female offenders’ specific psychological needs such as low self-esteem, reduced self-efficacy, disturbed relationships, trauma and parental distress limits its exclusive use in women offenders’ rehabilitation (Ogloff, 2002; Salisbury, 2007; Van Voorhis, 2013). In summary, this study acknowledges the RNR model of rehabilitation in developing effective rehabilitation programs for female offenders in Kenya, particularly in the risk/needs assessment, matching rehabilitation/treatment to an individual’s needs and the motivation of reluctant offenders in rehabilitation. However, the study finds it necessary to use another theory which is gender specific, and therefore, addresses the specific psychological needs of women offenders associated to their criminal behaviors. As noted above, these factors are not captured by the RNR model.

2.2.3 Triangulation of the Theoretical Framework

This study was guided by a theory and a model. The Relational Theory of Women's Psychological Development by Miller (1976) and colleagues (Gilligan, 1982; Jordan, 1985; Kaplan, 1984; and Surrey, 1985) presents specific issues related to women that rehabilitation should address. The Risk Need Responsivity (RNR) model of offender rehabilitation (Andrews & Bonta, 1998) presents an application of how needs can be assessed and the procedures for interventions. Figure 2.1 below shows how the relational theory of women's psychological development and the RNR model of offender rehabilitation would be applied in the rehabilitation and treatment of women offenders in Kenya.

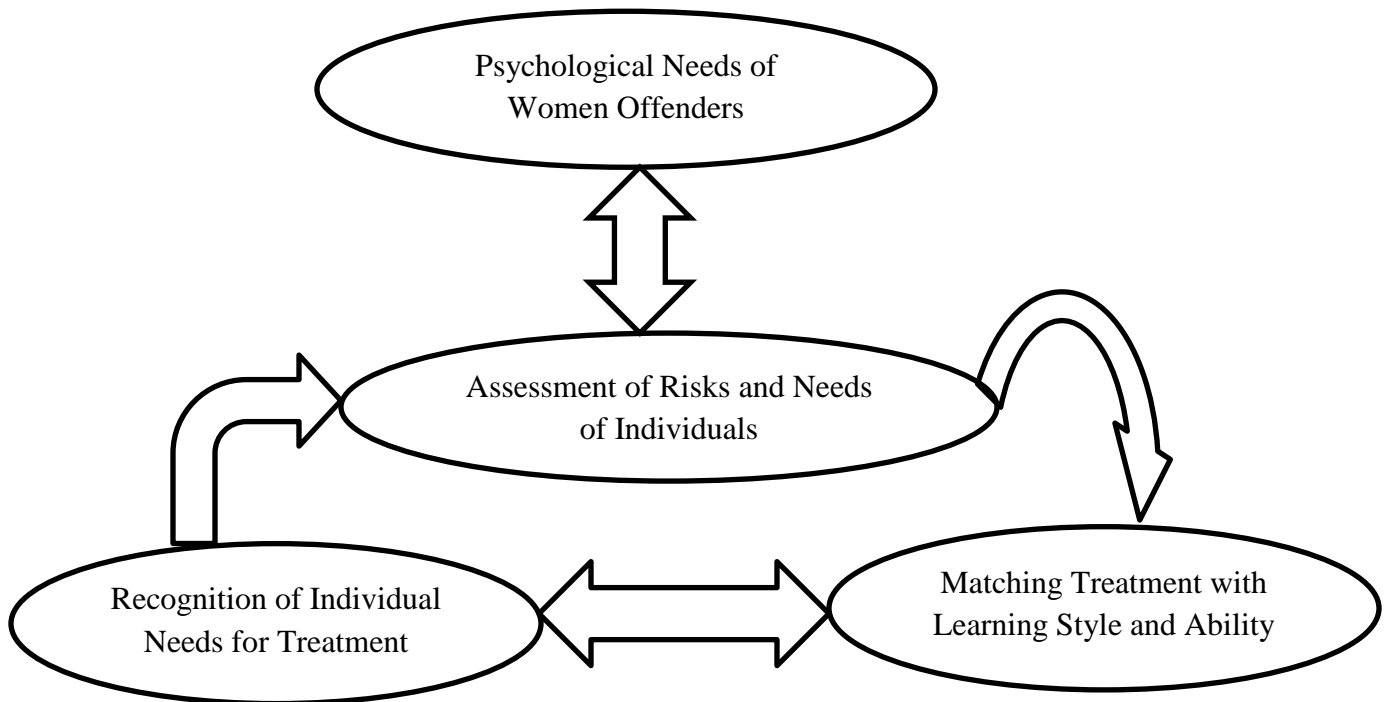


Figure 2.1 Illustration of interaction of the Relational Theory of Women's Psychological Development and the Risk-Needs-Responsivity Model in operation.

2.3 Review of Related Studies

This section presents review of related literature. It begins by exploring the concept of “rehabilitation” in addressing the psychological needs of women offenders. Reviewed studies will present such needs as trauma and victimization, parental distress, dysfunctional relationships, low self-esteem and reduced self-efficacy. Finally, the review will present a general view on effective gender-responsive programs.

2.3.1 Psychological Needs of Women Offenders

Research on women in prison has a longstanding tradition in the USA as noted (see Nuytiens & Chistiaens, 2012) with some of the most recent studies (Salisbury 2017; Van Voorhis, 2012). Other studies from Europe, for example, Australia (Byrne & Howells, 2012), the UK (Carlen & Worrall, 2004; McIvor & Burman, 2011), Belgium (Nuytiens, 2011; Nuytiens & Chistiaens, 2012) and the Netherlands (Slotboom, Kruttschnitt, Bijleveld & Menting, 2011) replicate the findings from the USA studies that have supported unique pathways to criminality by women offenders. In support for gender responsive programming in treatment of women offenders towards effective rehabilitation, these studies have deplored the tendency of corrections across the globe in ignoring the unique needs of women offenders in rehabilitation over the years. The current study reviewed literature on psychological needs of women offenders, notably; trauma, physical and sexual abuses, dysfunctional relationships, parental distress, low self-esteem and reduced self-efficacy.

2.3.1.1 Trauma Related to Physical and Sexual Abuse

Research shows that prevalence rate for physical and sexual abuse is reported greater in women offenders than women in the general population and males in

correctional populations. For example, Brown et al. (1999) found that 70 percent of women (N= 150) from a New York maximum security prison had been physically abused as children and 75 percent as adults. Additionally, 59 percent reported being sexually abused. These abuses took place at home. An Australian study (Fletcher, Rolison, & Moon, 2003) observed that 69 percent of their sample of incarcerated mothers (N= 150) reported having been physically or sexually abused as adults by either their boyfriends or spouses. Victimization or “cycle of violence” in women tends to have long lasting negative effects and are highly attributed to offending behaviors in women offenders. Emotionally abused women are prone to depression, moodiness and extreme or dulled emotional responsiveness. The effect of such abuse damages a victim’s trust in herself, perception and sanity. This explains women offenders’ difficulties in self-reflection and irrationality in dealing with their emotions (Chesney-Lind, 1997; Agnew, 2002). In some cases, the abused women may become abusers themselves, however, this is not always the case (Agnew, 2002).

Brown et al. (2009) show a close association between victimization and drug abuse in women offenders. The emotional turmoil of abuses in women offenders is a major cursor to drug or alcohol use as a way of managing their emotional distress or numbing their pains of trauma (Messina, Burdon, & Prendergast, 2003). To such women, the use of drugs to numb their emotional pains may be justified, but in many countries, this method of treatment is considered a criminal offense. Such knowledge is important in women’s correctional facilities to ensure that women’s use of drugs is addressed accordingly. Other studies have equally related trauma and victimization to PTSD and borderline personality disorder. Scanty literature from Africa e.g. Murugi (2012) and

Marisel consultancy (2010) on behalf of the Association for the Care and Rehabilitation of Offenders Ghana (ACROG), confirms reports of victimization and drug use in women offenders. However, the studies do not address the connection between victimization in women offenders and drugs, nor do they explain the relationship between victimization, PTSD and borderline personality disorder reported in women offenders (Byrne & Howells, 2002).

Although women prisoners in Kenya report victimization in their lives, there is need for studies to be carried out to confirm the relationship between these victimization, trauma, drug use, PTSD and borderline personality disorder. With the limited data on this topic, it is not clear if treatment for trauma related to victimization is factored into the Kenyan women's prisons rehabilitation programs in the amelioration of offending behaviors. Elliott, Bjelajac, Fallot, Markoff, & Reed (2005) emphasize the importance of understanding the process of trauma in women offenders and the implementation of trauma and addiction related services towards effective rehabilitation of women offenders.

2.3.1.2 Dysfunctional Relationships

Studies have shown that female offenders more than men are highly influenced by the relationship in their life. A woman's psychological makeup, particularly her identity, self-worth, and sense of empowerment are said to be defined by the quality of relationships she has with others (Gilligan, 1982; Kaplan, 1984; Miller-Warke, 1999). However, for women offenders, these relationships mostly present in the form of abuse or neglect (Wright et al., 2008; Belknap & Holsinger, 2006). Whereas most women offenders report abusive relationships, often criminal behavior is derived to maintain

these dysfunctional relationships. When asked to commit criminal acts to secure a partner's needs, in the face of abandonment or abuse, these women turn to criminal activity (Salisbury et al., 2009). Unlike men, women often turn to crime to protect relationships in their lives. Benda (2005) in an Australian study on the differences in male and female recidivism, found that living with a criminal partner is a statistically strong predictor of recidivism. Women who forged positive relationships, especially with a partner and children, were far less likely to reoffend (Benda, 2005). Although cases of dysfunctional relationship viewed in terms of wife battering are high amongst women offenders in Africa, Kenya included, scanty information is available on their relationship to crime in women.

Relational theory used to inform this study shows that dysfunctional relationships in women leads to psychological effects of hopelessness, intense feelings of shame, self-blame and guilt particularly when the relational situations cannot be improved. The negative emotions then result in prostitution, property crime, child neglect and drug use as a way of life in female offenders. Alcohol or drug use often becomes the object of fulfilment or a love relationship to the lost relationship in women's lives (Covington, 2007; Blanchette & Brown, 2006; Benda, 2005). In their survey with women offenders' in three focus group discussions in different correctional facilities, the National Institute of Corrections (NIC) reported by Wright et al., (2008), concluded that disturbed relationships in women offenders contributed to serious prisons misconducts in women offenders. Researching on the topic, Koons et al. (1997) and Salisbury (2007) suggest that a focus on dysfunctional relationships cannot be ignored in the correctional treatment programs for women offenders. Issues of disconnections particularly with spouses seem

to characterize experiences of many women in the criminal justice system in Kenya, but there seems to be lack of clarity on how they are dealt with in the women's correctional facilities. This study acknowledges that like many other gender specific factors, more studies need to be done to understand the effects of dysfunctional relationships in women offenders.

2.3.1.3 Low Self-Esteem and Reduced Self-Efficacy

Although pioneer scholars in the field of criminology (Andrews & Bonta, 2003) do not link self-esteem or self-efficacy to crime, contemporary psychologists in the field of criminology suggest that self-esteem and self-efficacy are major criminogenic needs in female offenders (Salisbury, 2007). Acknowledging that these concepts are understudied, one meta-analysis (12 effect sizes) reported by Larivière (1999) showed an association between female offenders' low self-esteem and antisocial behavior. These scholars relate self-esteem and self-efficacy to the notion of "empowerment" (Salisbury, 2007) already targeted by a number of correctional facilities.

Empowerment denotes the process of increasing women's self-esteem and internal locus of control (that is, the belief that their lives are under their own power and control) (Task Force on Federally Sentenced Women, 1990). Low self-esteem is linked to crimes such as; fraud, manslaughter, prostitution and drug use. It suggests lack of empowerment in women offenders resulting into weak internal locus. In the context of criminality in women, one with a balanced internal locus for control will have the ability to judge between criminal activities and vice versa. Similarly, the concept of self-efficacy or a person's belief in their ability to accomplish their goals is reported in literature as a common issue in women offenders. Reduced self-efficacy in women offenders is also

attributed to dysfunctionality and victimization in women offenders (Salisbury, 2007). Consistent with the above observations, Rungay (2004); and Bloom, Owen & Covington (2005) suggest the need for empowerment of women offenders in boosting their self-esteem and self-efficacy. Although empowerment through formal education or skills-training is addressed in rehabilitation practices in Kenya (Murugi, 2012; Nordahl, 2013) it is not clear whether these programs relate empowerment to building needs of self-esteem and efficacy in women offenders.

Notably however, a liberated woman who has power might also be vulnerable to criminal behavior. Arguing from the opportunity theory of crime, Islam, Bunarjee and Khatun (2014), observe that liberating and increasing opportunities in social participation, reduces women's involvement in violent crime, but increase the rate of their involvement in property crime especially larceny/theft, embezzlement, and fraud. Accordingly, women commit lesser crimes because they lack opportunity to do so, hence given opportunity they would commit crimes similar to men (see for example, Chelik, 2008). Similar views are advanced by Hussein (2018) who argues that as women get to become more proficient in areas of employment, their independence increases thus challenging traditional roles leading some to high level crimes. In line with this view, in the World of Work Report 2014 presented by International Labour Organization (ILO, 2014) in the analysis of US arrest data over 1980 to 2011 for two large categories of crimes—property crimes and violent crimes—observe that in USA women commit twice as many property crimes as violent crimes.

In Africa women have been found to be increasingly involved in property crime. Hussein (2018) observes that Nigeria has been ravaged with cases of spousal murder by

the women. Although cases of men killing their wives are also reported, the trend of women getting involved in violent crimes is worrying. In Kenya, a similar story could be replicated. The media in Kenya for example is fraught with news on women committing murder of their significant others. For example, Gastone Valusi (1st March 2019) reported on Daily Nation of a 35-year old woman - Agnes Kalukeye - who was being held by police for stabbing her husband Anthony Mutinda to death with a kitchen knife during a 5.00 am brawl at their home in Koma village, Matungulu, Machakos County. In another report, almost similar to the above, Macharia Mwangi (Monday February, 18th 2019), also reporting in the Daily Nation wrote of a 35-year old woman who was being held by police in Gilgil town for having stabbed to death her 39-year old husband on the chest after a fight from a history of marital strife. The names of the couple reported to have had a history of marital strife were withheld. In yet another report by Richard Munguti (Friday, October 2018), on the Daily Nation, a 50-year old woman, Mary Njoki was found guilty of brutally and cruelly executing her 60-year old husband, James Ng'ang'a Ritho, in cold blood at Kangemi estate, Nairobi. Her conviction came three years after the incident. These are just but few examples of the ever-increasing cases of violent crimes committed by women, causing a worry on the narrowing gap between the proportion of such crimes committed by women and those committed by men.

Reflecting on Alfred Adler's theory of inferiority and superiority complex, Islam et al., (2014) argues that women appear to be revolting against their subordinate position to man which signifies masculinity. This could be a maladjusted way of females who have gained power that may need appropriate program for rehabilitation. Whether the prison rehabilitation programs took this into account was a concern of this study.

Moreover, studies on criminality show that today women have an increased role in organized crimes. A criminal organization is composed of three or more persons which one of its main purposes or main activities is the facilitation of one or more serious offences, that if committed, would likely result in the direct or indirect receipt of a material benefit, including a financial benefit, by the group or by any of the persons who constitute the group (Beare, 2015). Traditionally women were less involved in organized crime, but studies show that they are on the increase. For example, Allum & Marchi (2018) observe that in Italy, only one woman was indicted in “mafia association” in 1990, however, five years later the number had arisen to 89.

In Africa the number of women involved in organized crime has also been reported. Ndungu & Salifu (2017) remark that there have been highly publicized reports of Kenyan women involvement in violent extremism. The reported incidents have involved women travelling to join al-Shabaab, recruiting for al-Shabaab, masterminding terrorist attacks in Mombasa, forming terror cells, and channeling information and finances for terrorist organizations. In the Daily Nation, Nyaboga Kiage and Mohamed Ahmed (April 18, 2019) reported as headline on Halima Adan Ali, a 33 -year old Kenyan woman financing Iraqi terrorist group (Isis militants) as joining the US list of most wanted terror facilitators globally. According to the report, the suspect has been in and out of prison on various terror-related charges. These are worrying trends of women involvement in criminal behavior that requires to be arrested.

In general women are involved in crime due to many factors that are hinged on their self-esteem and self-efficacy. Low self-esteem and self-efficacy seem to push women to crimes, in the same way an elevated self-esteem and self-efficacy also poses

problems. Programs within the criminal justice system that would help moderate the effects would be important. Given that women imprisoned commit various crimes, it was important to check if such factors are addressed in the process of their rehabilitation

2.3.1.4 Parental Distress

Conceptually, parental distress is a psychological need that refers to the combination of negative emotional symptoms such as depression, anxiety and stress (Barlow, Smailagic, Huband, Roloff, & Bennet, 2014). Literature presents parental distress in women offenders as influenced by their roles and responsibilities as parents. The parental responsibilities for men and women are apparent and this explains the connection between parental distress in women and crime. Townhead (2006) reported that in Sao Paulo, 87% of the women in prisons were mothers who had children below 18 years of age and almost all of them were the primary caretakers of their children. Covington & Bloom (2006), noted that 80% of all the women in the US prisons are mothers with dependent children, with only 25% having fathers to take care of their children. In the United Kingdom (U.K.), 65% of female prisoners have a child under the age of 16 (Townhead, 2006). In contrast, 90% of fathers in prison have mothers at home to take care of their children.

Berman (2005), and Ross, Khasshu, and Wamsley, (2004), attribute parental distress and crime in women to lack of preparedness into their parental roles and responsibilities. This is further complicated by factors such as dysfunctional spousal relationships and financial constraint. Women in this category are often convicted for crimes related to child neglect or harm. It is important to note that at times some mothers are forced to raise their young children in prison, a situation that in itself can be

antagonizing particularly when the environment does not favor the developmental needs of children, as is often the case. In their state of distress, women who report parental distress as a problem are most likely to report substance abuse as a co-problem (Salisbury, 2007).

With such reality, scholars (Ferraro & Moe, 2003; Salisbury, Van Voorhis, & Wright, 2006) note the necessity of empowering mothers in correctional facilities as a step forward in helping them improve their parenting roles and skills in reducing their level of parental distress. The knowledge can be beneficial to them upon release from prisons. The large numbers of mothers in prison in Africa is not disputed either. Luyt (2008) notes that 70% of women prisoners in South Africa are single, uneducated mothers compelled to bring up their babies in prisons. The scholar indicates that a majority of these women express their lack of preparedness as parents when they first become pregnant. Nordahl (2013) reports a case of a mother convicted for murdering her baby of nine months at Langata Women's Prisons, Kenya's largest maximum-security prison for women offenders. Asked why she committed the offense, her simple explanation was "distress", which was as a result of her inability to cope with her responsibilities as a mother. Despite the significant numbers of mothers in the Kenyan prisons, it is not clear whether or not there are programs that empower young mothers with knowledge on parenting skills and responsibilities.

2.3.2 Effective Rehabilitation Programs for Women Offenders

Gender-based treatment of women offenders has gained popularity in developed countries such as the U.S.A, Canada, Australia, and U.K. in the past two decades. However, Sharp (2003); Goodheart, Kazdin, & Sternberg (2006), and Van Voorhis

(2013) recommend urgent creation and implementation of gender-responsive programs to supplement those in existence. Examples of such programs include, *Helping Women Recover*, *Beyond Trauma*, *Voices*, *Prochaska DiClemente model of change (1996)* and *The Sanctuary Model* currently noted as promising programs. These programs not only put emphasis on the psychological development and realities of women but are designed to adapt a therapeutic community model (Joiner, 2011; Jespersen, 2006; Morita, 2013; Greene et al., 2000). That is, while addressing the psychological needs of women offenders, the programs are also staffed with trained personnel, preferably women who can serve as role models to the offenders.

Although these programs are specific, they share some commonalities (Jespersen, 2006; Messina, Burdon, & Prendergast, 2003; Foderaro & Ryan, 2000). A characteristic of all the programs is that they are holistic in nature and address the co-occurring disorders of women offenders simultaneously and in a sequential order. Specifically, the programs address violence and traumatic events in women's lives, substance abuse problems, and offers training in childcare and mentorship. The programs equally provide a process for self-discovery and empowerment (Radosh, 2002; Covington & Bloom, 2006). Above all, they help offenders learn skills in decision making process, fostering relationships and identifying support systems (Gendreau et al., 2001; Bloom, 2006; Trotter et al., 2012).

Leung-ming (2007) acknowledges some positive results in rehabilitation of women offenders in Asia over the past two decades. The scholar attributes this to research based on needs and risk assessment of offenders. However, the report does not identify the psychological needs of women offenders. Documentation on rehabilitation

programs in Kenya suggests improvement in the development of programs over the past two decades, however, these studies do not clearly indicate the guidelines used in developing programs administered within the women's prisons. In a study by Wekesa (2013), the author established that vocational training, formal education, counseling and spiritual rehabilitation were the major rehabilitation programs that positively changed both male and female offenders' lifestyles through behavior change. Although the author recommends that these programs be replicated across other prisons in Kenya, the study is not clear on psychological differences of male and female offenders, risk needs assessment and how the programs address specifically issues such as victimization, dysfunctional relationships, low self-esteem and parental distress associated with female offenders.

The proposed Kenya Prisons Policy (GOK, 2015) recommends that 2/3 of the staff in women's prisons be women wardens but remains silent on identification of women offenders' needs. Although the same policy suggests the need for assessment of risk-needs of women offenders, it does not spell out how this should be done. Gorsuch (1998); Bloom (2006) and Van Voorhis (2013) recommend assessment of individual risk factors by use of a gender validated tool such as the *Women's Risk/Needs Assessment (Trailer or standalone tool)*.

Rehabilitation of offenders and in particular women offenders remains a concern in Kenya (Wekesa, 2013). Human rights activists, psychologists and religious groups have since the '80s challenged governments and correctional departments on the improvement of correctional facilities and rehabilitation practices. In Kenya, such concerns have led to the introduction of programs such as: farming, computer studies,

numeracy, cookery, bakery, pottery, beading, art, hair dressing and tailoring within the Kenyan women prisons (Nordahl, 2013; Murugi, 2012; Njeru; 2012; GOK, 2008). In addition, spiritual guidance and counseling are emphasized (Wekesa, 2013). Although introduction of the programs is commended by the general public, it is not always clear whether the programs took into consideration the psychological needs of the women offenders, a gap that this study addresses.

2.3.3 Challenges Surrounding Rehabilitation Programs for Women Offenders

Although gender-responsive treatment has been acknowledged as effective, this style of treatment remains to be the exception rather than the rule in treating female offenders. Barriers to provision of gender-responsive treatment are multilayered. According to Katz (2000) and Renzetti & Goodstein (2009), such barriers are created due to a combination of factors ranging from theoretical, administrative and structural issues. A major challenge in the rehabilitation of women offenders is the continued focus on traditional approaches of therapy that tends to fit male offenders but ignores the unique needs of female offenders (Joiner, 2011; Zaplin, 2008). This relates to the challenge of lack of empirically validated and culturally sensitive rehabilitation programs for women offenders. Where these exist, another challenge is explained by non-existence of evaluation procedures for such programs (Covington & Bloom, 2006). Onyango-Israel (2013) and Oketch (2006) confirm challenges experienced by women's correctional facilities in Kenya, however, the scholars do not explore the issues around rehabilitation programs for women offenders but rather limit their discussions to issues of infrastructure and human rights concerns of women offenders.

Deficient budgetary allocation by governments towards the development and implementation of gender-responsive programs remains yet another big challenge for correctional facilities. Joiner (2011) attributes this to the difficulty posed in changing society's response to women's crime from punishment and retribution into rehabilitation. The issue of staffing is another major issue in women's correctional settings. Explained by Jespersen (2006), lack of training and use of less qualified staff contributes to the unattainability of rehabilitation programs. On the same note, understaffing of women's prisons create challenges in the running of programs (Van Voorhis, 2013). Although the Kenya government is continuously working towards prisons reforms in areas of infrastructure, food, uniforms, wardens' welfare, among others, the budgetary allocation put in financing the development and implementation of rehabilitation programs remains scanty.

2.4 Summary of Literature Review

This chapter has reviewed the theoretical framework and related studies on rehabilitation of women offenders. Although studies have shown that the current objectives of correctional facilities throughout the world focus on rehabilitation, little has been done to establish if the programs are gender sensitive. Reviewed literature suggests that concerns on women offenders can best be addressed by ensuring that rehabilitation programs are fully informed by research findings based on women's pathways to criminality. These include but are not limited to psychological needs such as victimization and trauma, dysfunctional relationships, parental distress, reduced self-esteem and self-efficacy (Van Voorhis, 2013).

However, the studies are limited on demonstrating how these needs are addressed in the rehabilitation of women offenders despite the understanding that they explain pathways to criminality in women. Contemporary feminist psychologists suggest that rehabilitation of women offenders must focus on unique psychological needs of women mentioned above for rehabilitation to be successful. Relational theory of psychological development of women (Miller, 1976) examines women's unique psychological needs as arising from the circumstances that most women go through both in their childhood and adult lives. For example, disturbed relationship in the lives of women offenders is closely linked to other psychological needs such as victimization and trauma, low self-image and efficacy and parental distress. Literature explains extensively how these needs are linked to criminality in women. It has emerged that rehabilitation of women offenders is a better option as a source of empowerment for women offenders and making them more useful to the society, than a punitive approach and simply teaching them how to minimize their chances of incarceration (Ward & Steward, 2003). It is not clear whether or not rehabilitation programs within the Kenyan women prisons address the psychological needs of women offenders.

Research interest in women offender rehabilitation has not only led to the development of Women's Risk/Needs Assessment tools (Trailer and standalone tools) in the USA but have guided research (Van Voorhis et al., 2012) in the development of comprehensive rehabilitation programs that target the multiple and co-occurring disorders of the female offenders. Reviewed literature shows that this is an important consideration in the rehabilitation of women offenders. The above tools have been used to help develop research tools for this study but not in totality since this study is focusing on selected

variables. Finally, it has emerged that more than assessment of risk needs, matching treatment to one's ability and targeting co-occurring issues in an offender, effective rehabilitation can only be realized through staff training, provision of women friendly environment in rehabilitation and an ongoing evaluation of the existing programs. However, this does not seem to inform rehabilitation practices in Kenya.

2.5 Conceptual Framework

The conceptual framework of this study was based on two variables: Independent Variables and Dependent Variables. The Dependent Variables are the outcomes of the treatment after the Independent Variable (treatment or rehabilitation) is administered to the women offenders. Positive outcomes are realized if effective treatment is administered. On the other hand, negative outcomes result if non-effective rehabilitation practices are employed. Figure 2.2 diagrammatically summarizes how the Independent Variables influence the Dependent Variables in this study.

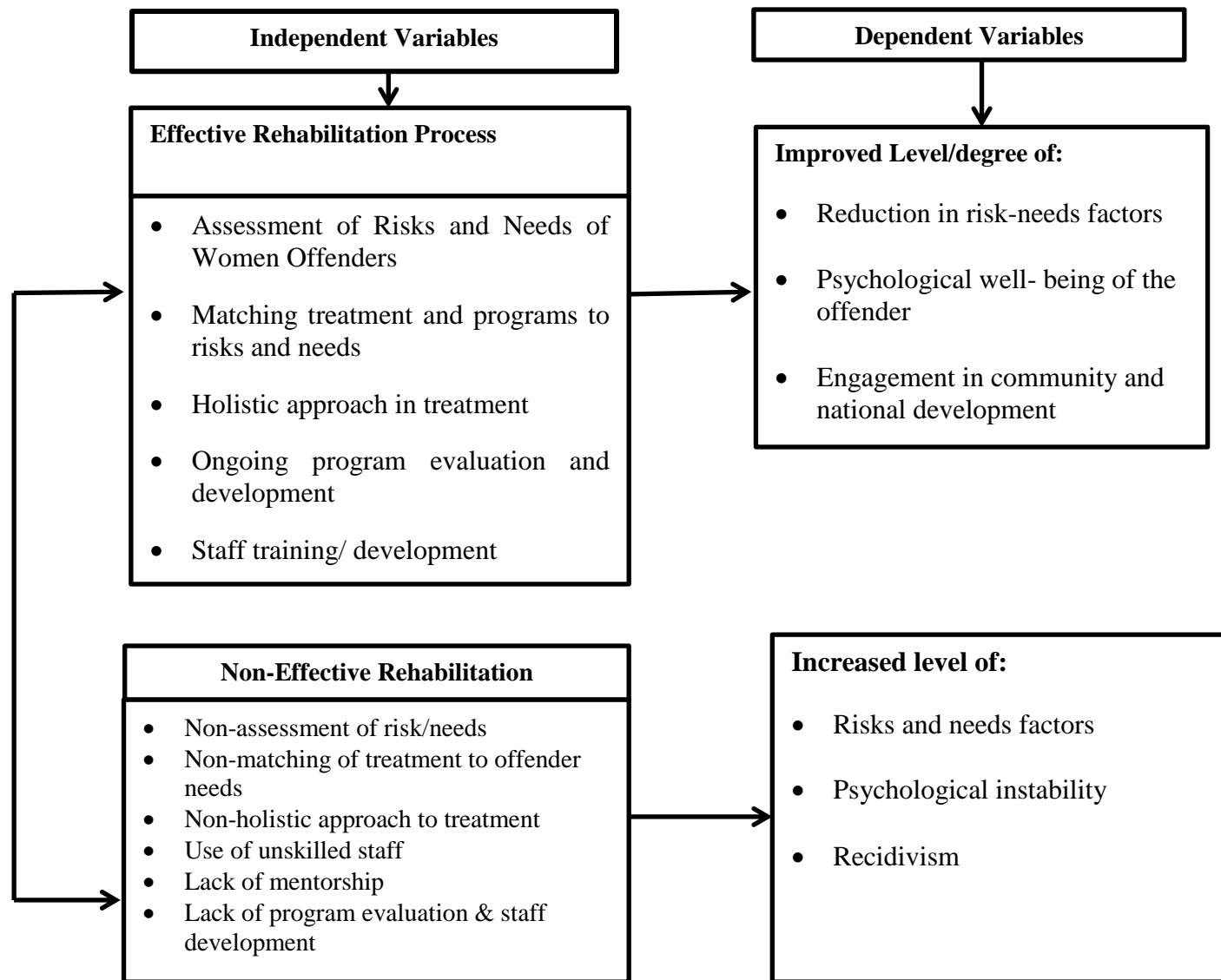


Figure 2.2 Conceptual Framework on Rehabilitation Programs in Addressing Psychological Needs of Women Offenders in Kenya

CHAPTER THREE: RESEARCH METHODOLOGY

3.1 Introduction

The purpose of this study was to examine the effectiveness of rehabilitation programs in addressing the psychological needs of women offenders in Kenya. This chapter discusses a set of methods that were adopted in this study. These include: research design; study variables; study locale; target population; sample techniques and size; research instruments; validity and reliability; pilot study; data collection procedures; data analysis and presentation; and finally, data management and ethical considerations.

3.2 Research Design

The study adopted a cross-sectional descriptive research design employing a concurrent mixed (triangulation) method of data collection. A cross-sectional design was preferred for this study because the researcher was interested in describing the existing realities of the rehabilitation programs in addressing the psychological needs of women offenders in the Kenyan women prisons without any manipulation. According to Kothari (2004), a cross-sectional design allows a researcher to gather data at one point in time.

This design was suitable as it allowed the researcher to gather data from subjects in different correctional facilities at one point in time. Mixed methods for data collection allowed the researcher to combine both elements of qualitative and quantitative approaches (Creswell, 2014). This approach was advantageous for this study because the methods used compensated for the weaknesses of one single approach with the strengths of the other in achieving the best results. This study enjoyed the associated advantages because the focus group discussions and interviews allowed the researcher to gather more

in-depth information about rehabilitation practices in addressing the psychological needs of women prisoners. These complimented the information gathered through questionnaires.

3.3 Study Variables

The independent variable for this study was “effectiveness of rehabilitation processes” (e.g. risk/needs assessments, treatment programs, counseling, life skills training and mentorship), while the dependent variable was the “outcome of rehabilitation” (e.g. reduction in risks needs factors, improved mental health status and reduction of recidivism). These were operationalized in terms of levels or degree e.g. level of improvement in relationships, level of individual empowerment, level of enhanced self- image and level of reduction in recidivism.

3.4 Site of the Study

The study was conducted within the women’s correctional facilities across the 47 counties in Kenya. These were the actual correctional facilities for women offenders documented by the Kenya Prisons Headquarters in 2015. Each of these facilities is under a female officer in-charge who is answerable to the prisons commandant who is the chief executive officer (CEO) of the Kenya Prisons Services. The rather common facilities in the prison are a block for administration, dormitories, kitchen and a building/or room referred to as industry where the inmates learn specific skills like tailoring, knitting and embroidery. The prisons’ farms are however located outside the main compound. The selected facilities were those considered as major women correctional facilities as opposed to the “wings” which hold less than ten women offenders at any given time. The major correctional facilities hold convicted offenders charged with all kinds of crimes

and serving jail terms of between a few days to several years. Three out of the seventeen major facilities are maximum security prisons. This means that they host mostly women convicted of violent crimes, like murder, assault and robbery with a weapon, from all around the country. The jail terms for this category of offender may range from several months to life imprisonment. The selected facilities ensured the provision of the required sample for the study.

3.5 Target Population

The target population for this study constituted all the women prisoners in the 17 major women prisons in Kenya with a minimum of class eight education level. These were the primary recipients of the rehabilitation practices, and therefore, had the first-hand information on the effectiveness of the rehabilitation programs. The choice of class eight as the minimum education for respondents was based on the assumption that persons with basic class eight education would be able to respond to the questionnaire items and participate in the FGDs with minimal need for assistance in interpretation of the items presented in the tool. Additional information was gathered from prisons personnel, notably the director of rehabilitation and social welfare, officers' in-charge of the prisons, and the NGOs and FBOs involved in the rehabilitation of women offenders in Kenya. Table 3.1 shows the target population of the study.

Table 3.1

Target population of the study

Population	Women Offenders (Convicted/Sentenced)
Total No.	1409

From the Kenya Prisons Headquarters (September 2015)

3.6 Sample Techniques and Size

According to Kothari (2004), an optimum sample is the one that fulfills the requirements of efficiency, representativeness, reliability and flexibility. This sample should be in a range of 10% to 30%. Yamane's formula (Yamane, 1967) was used to select the sample for women offenders and purposive sampling was used for the women prisons. Thus, the percentage selected for women offenders was 24.8%.

$$n = \frac{N}{1 + N e^2}$$

Where

n = X (the sample size)

N = (population size), and

e = 0.05 level of confidence.

Out of 17 major women correctional facilities, 16 women correctional facilities were sampled. The sample size comprised 350 women offenders (314 for questionnaires and 36 for FGDs), 16 women prisons, 3 prison officers-in-charge, 3 officers of NGOs, 3 officers of FBOs and the director of rehabilitation and social welfare.

Purposive sampling was used for the women's prisons while simple random sampling technique was employed in sampling the women offenders. To use the random sampling technique, every women offender in the sampling frame was assigned a random number which was written on pieces of paper in every sampled prison. The numbers were sampled randomly. This technique ensured that each women prisoner in the population had an equal chance of being selected for the sample.

Table 3.2 shows the matrix of the number of women offenders that participated in the quantitative data from the different correctional facilities. A pseudonym was used for the selected prisons to ensure anonymity.

Table 3.2

Sampling Matrix for women offenders

Correctional Facility	No of Convicts	
A	105	23
B	69	15
C	76	17
D	137	30
E	100	22
F	160	35
G	277	61
H	63	14
I	63	14
J	65	14
K	23	5
L	16	4
M	23	5
N	85	19
O	35	8
P	18	4
Q	94 Pilot facility	21
	Extra sample	2
TOTAL	1409	314

Source: Kenya Prison's Headquarters (Returns as per 2015)

Purposive sampling was used to select the convicted women offenders to participate in the FGDs. Using this technique, three women correctional facilities were selected from the records of the Kenya Prisons Headquarters (September 2015) as having high incidences of convicted women offenders. From each selected correctional facility, 6 women offenders were selected to participate in the FGD. Only convicted women offenders with at least six months' continuous stay at the facility were sampled since they were believed to have enough experience and therefore could give in-depth information.

For a typical representative sample of women offenders, women offenders in each of these correctional facilities were placed into two categories (fresh convicts, that is, those who had served less than one year in prison; and experienced offenders, that is, those who had served more than one year in prison). Six women offenders from each of the categories of each correctional facility were purposively selected, bringing the total number of women offenders involved in the three FGDs to 36.

Finally, the officers-in-charge of prisons, representatives of FBOs and NGOs involved in the prison rehabilitation programs were purposively sampled to participate in the interviews. This gave a total of nine interviews; three officers-in charge, three representatives of FBOs (prison chaplains) and three NGO officers. In addition, the Director of Rehabilitation and Social Welfare was purposively sampled, giving a total of ten interviews for the study. A summary of the sample sizes and sampling techniques is shown in Table 3.3.

Table 3.3*Sample Size and Sampling Techniques*

Target Group	Population	Sample Size	Sampling Technique
Quantitative Paradigm			
Women Correctional Facilities	17	16	Purposive sampling
Women Offenders	1409	314	Simple random sampling
Qualitative Paradigm			
Women Correctional Facilities	17	3	Purposive sampling
Women Offenders	1409	36	Purposive sampling
Officers in Charge	17	3	Purposive sampling
FBO Representatives	17	3	Purposive sampling
Director, Welfare and SS	1	1	Purposive sampling
NGOs Representatives		3	Purposive sampling

3.7 Research Instruments

Data was collected using a researcher-generated questionnaire, three focus group discussion (FGDs) and interview guides. The questionnaires obtained quantitative data for analysis, which was corroborated with analysis results from the FGDs and interview guides.

3.7.1 Questionnaires

The questionnaire (see appendix 2) was divided into five parts. Section one of the questionnaire captured the demographic information of the women offenders such as age, period of imprisonment, marital status, nature of offence committed and level of education. Section two gathered information on distinct psychological needs of the women offenders. Construction of this section was guided by the *Women's Risk/Needs Assessment (Trailer)* tool that was developed by the National Institute of Corrections (NIC) in cooperation with the University of Cincinnati (2014). To gather information on the level of self-esteem and self-efficacy of women offenders, Rosenberg's Self-Esteem Scale (Rosenberg, 1965) and the Generalized Self-Efficacy Scale (Schwarzer & Jerusalem, 1995) were adapted and respectively used.

Section 3 of the questionnaire gathered information on available rehabilitation programs and treatment offered to women offenders towards their effective rehabilitation during incarceration. Construction of this section was guided by tools previously used by other researchers in Kenya, notably Wekesa (2013); Ogeto (2009); and Juma (2005) on rehabilitation of offenders. Specific questions in the questionnaire were also adapted from the Gender-Responsive Program Assessment tool developed by Covington and Bloom (2008). Section 4 of the questionnaire gathered views on whether the current programs within the Kenyan women prisons are addressing the psychological needs of women offenders reflected in empirical studies as issues contributing to offending behaviors in women. The *Trailer* was once again used to guide on the construction of the items in this section. Finally, section 5 of the questionnaire gathered views that respondents felt could help improve current rehabilitation programs.

3.7.2 Focus Group Discussion Guide

Focus Group Discussion guide (see Appendix 3) was administered to groups of women offenders in three women's prisons. Question items were adapted from the *Women Risk Assessment tool* (UC & NIC, 2014) and the *Gender-Responsive Assessment Tool* (Covington & Bloom, 2008).

The use of questionnaires and FGDs helped the researcher get in-depth qualitative information on the various themes under study that included the psychological needs and views regarding the effectiveness of the rehabilitation programs in addressing their psychological needs. The two instruments concurrently informed each other and helped the researcher compare perspectives.

3.7.3 Interview Guides

An in-depth interview guide (see Appendix 4) was used to collect information from the officers' in-charge, representatives of FBOs and NGOs in the sampled women correctional facilities and; the director of rehabilitation and social welfare at the Kenya Prisons Headquarters, to examine the psychological needs of women prisoners and the rehabilitation practices in addressing the women offender's needs. The interview guide also qualitatively suggested challenges of rehabilitation and ways of improving the programs.

3.8 Validity and Reliability

3.8.1 Validity

A research instrument is said to be valid if it measures what it purports to measure (Orodho, 2008). Face validity, content validity and construct validity were assured in the study. Face validity of the instruments was enhanced through subjecting the instruments

to a thorough scrutiny by counseling psychology experts with enormous experience in instrument design and validation emanating from their research supervision work at postgraduate level. Content validity seeks to find out if the data collection instrument is a good representation of the content that needs to be measured (Mugenda & Mugenda, 2012). The researcher ensured that all the key domains in the objectives were captured adequately in the questionnaire. As regards the construct validity, the researcher ensured that the key variables were accurately operationalized and further validated by the experts in counseling psychology. Each of the experts separately judged the objectivity, clarity, and relevance of the instruments' items to the research questions. The constructive feedback and responses received from these experts were then used to improve on the content of the instruments before they were piloted and finally administered to the participants.

3.8.2 Reliability

Since the instruments used were adapted from those that had been evaluated and validated with populations in the West, a pilot study was done to check, not only the validity but also the reliability of the instruments. A research instrument is said to be reliable if it yields consistent results or data after repeated trials (Mugenda & Mugenda, 2003). Internal consistency technique, using the Cronbach's Alpha statistic was used to assess how well the set of items measured a particular behavior or characteristics of the variables within the tests used (Cronbach & Shavelson, 2004). The statistic was used to determine the reliability of the rating scales and binary response items in section B and C of the questionnaire. Section B of the questionnaire presented items in five sub-sections that respondents were expected to give views on whether they were affected by the

distinct psychological needs of women offenders. The grouped items presented in the five sub-sections identified the psychological needs of women prisoners which included: i) victimization with regards to sexual and physical abuse that contributed to PTSD ii) parental distress iii) relationship with significant other iv) relationship with family of origin v) low self-esteem and vi) reduced self- efficacy. To measure self-esteem and self-efficacy of the respondents, the Rosenberg's Self-Esteem Scale (Rosenberg, 1965) and the Generalized Self-Efficacy Scale (Schwarzer & Jerusalem, 1995) were adapted. After the pilot study, the tool demonstrated a high Cronbach alpha of 0.750. The results implied that the instrument used (questionnaire) was internally consistent and therefore reliable. To enhance the reliability of findings from the FGD and interview guides, data was transcribed by two different people and the results were duly compared.

3.9 Pilot Study

The researcher carried out a pilot study at Kisii Women Prisons of Kisii County. This facility ensured the sample size required and similar characteristics (for example, goals, respondents) to those sampled for the actual data collection across the country. The questionnaire was administered to 10% of the sample (n=314) as recommended by Cooper & Schindler (2011) and Mugenda & Mugenda (2008); hence 30 respondents (n=30) participated in the pilot study. Demographic variables on the levels of education and the length of incarceration were considered when choosing the respondents of the pilot study. A focus group discussion comprising 6 respondents was used to pilot the FGD guide. The Interview was administered to the officer in-charge for validation purposes. The pilot study assisted the researcher to identify and modify the items in the research instruments that were difficult, ambiguous and unclear ensuring the generation

of relevant and consistent data. It also allowed for a pre-run of the descriptive and qualitative analytical procedures that helped the researcher to determine whether the tools would generate the expected data from the actual study. The researcher used the findings of the pilot study to make the necessary adjustments that enhanced the validity and reliability of the instruments. The pilot study further helped the researcher to determine the average amount of time that was required in the administration of the items during the actual data collection.

3.10 Data Collection Procedures

Data was collected through questionnaires, FGDs and interview schedule guides. Mobilization of the respondents, specifically for the questionnaires and the FGDs was done systematically using a pre-prepared sampling criterion, which took into consideration the various variables under study and which the officers' in-charge, wardens (prisons officers) and research assistants were helped to understand in advance. The researcher self-administered a total of 314 questionnaires with the help of six duly trained research assistants. Self-administration of the questionnaires enabled the researcher to achieve 100% return rate, which was a key advantage of the study (Lynn, 2008). Approval to distribute the questionnaires and interview the inmates and prisons personnel was obtained from the officer in-charge of a given correctional facility. This enabled prior preparation of a space or room where the tests were administered.

The researcher personally moderated the interviews and FGD's. In each interview or FGD session, one research assistant wrote down the responses emerging from the discussions while the other assistant recorded the discussions on tape/recorder. With

direct guidance from the researcher, the research assistants transcribed the interviews and submitted them to the researcher together with the field notes for analysis.

3.11 Data Analysis and Presentation

The study generated two types of data: quantitative data from the questionnaires and qualitative data from the FGDs and interview schedules. Quantitative data from the closed-ended items in the questionnaires were analyzed using descriptive statistics such as frequencies, percentages, means and standard deviations. Means and standard deviations were used to address degrees of centralization and the variation of participants' opinions on rating scales. The analyzed data were presented in form of tables and graphs/charts.

Analysis of qualitative data involved transcribing the recorded data and editing to remove ambiguities. The data was then organized into themes to form the coding categories for the data. Thereafter, the sorted data was analyzed by identifying excerpts that either supported or challenged the interpretation the researcher made. The analyzed data was then presented textually (concurrently with the quantitative data) in line with the research objectives.

3.12 Data Management and Ethical Considerations

Permission to conduct the present research was granted by the Kenyatta University graduate school and the National Commission for Science, Technology and Innovation (NACOSTI) (see Appendix 6) to carry out the research. The permit was then presented to the Kenya Prisons Headquarters for authorization to carry out the research within the women prisons in Kenya. A cover letter was attached to each questionnaire to provide information necessary for informed consent, including the voluntary nature of

participation and assurance of anonymity. Informed consent was also sought from respondents participating in the FGDs and interview schedules. This was after informing them about the nature and purpose of FGDs and interview schedules as research tools; the necessity to record data and the confidentiality measures to be observed with the recorded data. Data collected through the questionnaires, FGDs and the Interview Schedule was treated confidentially by the researcher and was used only for the purpose of this study.

CHAPTER FOUR:

DATA PRESENTATION, ANALYSIS AND DISCUSSION

4.1 Introduction

The purpose of this study was to examine the effectiveness of offender rehabilitation programs in addressing the psychological needs of women offenders in Kenya. The study was guided by five objectives that were:

1. To explore the unique psychological needs contributing to criminality in women offenders.
2. To establish the rehabilitation programs currently available to women offenders in prisons in Kenya.
3. To assess the effectiveness of the current rehabilitation programs in addressing the psychological needs of women offenders within the prisons in Kenya.
4. To establish the challenges faced in addressing the psychological needs of women offenders for effective rehabilitation within the Kenyan prisons.
5. To explore possible ways of improving the current rehabilitation programs for women offenders in Kenya in addressing their psychological needs.

Both quantitative and qualitative data were collected for this study. In this chapter, the findings of the study are presented and discussed beginning with demographic results followed by the presentation of the findings based on the objectives of the study.

4.2 Demographic Characteristics of Respondents

The sample size comprised of 350 women offenders (314 women for questionnaires and 36 for the FGDs) from 16 women prisons, 3 prison officers-in-charge, 3 officers of NGOs, 3 officers of FBOs, and the director of rehabilitation and social

services. The response rate was (100%) as explained below. A total of 314 respondents participated in this study by completing questionnaires, while 36 respondents (women offenders) participated in Focus Group Discussions; and a total of 9 representatives drawn from: the prisons officers (wardens), NGO's and FBOs in correctional facilities participated in the Interviews. In addition, a participant based at the Kenya Prisons Headquarters participated in the Interview. Data was gathered on the following socio-demographic variables: age, level of education, marital status, occupation, reason for imprisonment and number of times of imprisonment. Presented below is the analysis of the findings beginning with socio-demographic data of the respondents followed by the findings of the main research objectives.

4.2.1 Age of the Respondents

Participants in this study ranged from age 15 to 65 years. The following table summarizes the distribution of the study respondents by age.

Table 4.1

Distribution of Respondents by Age

Age Category	Frequency	Percentage
15-24	70	22.4%
25-34	148	47.2%
35-44	56	17.8%
45-54	28	8.9%
55-64	11	3.3%
65-74	1	0.3%
Total	314	100%

Results of Table 4.1 above shows that the majority of the respondents (47.2%) who participated in this study were aged 25-34 years; followed by those aged 15-24 years (22.4%). Two participants in this category were below 18 years old (2.9%). Although

relatively small in number, placement of juvenile offenders in such facilities raises more questions and concerns on their effective rehabilitation. The argument of them being incarcerated with adult offenders was that they had committed capital offenses, mostly passion crimes. There were 56 respondents (17.8%) aged 35-44 years; and 28 respondents (8.9%) aged 45-54 years. Therefore, the majority of the participants in this study were age 35 and below. This indicates that majority of women in the prisons are young and at a developmental stage described as “young adulthood” in the psychosocial developmental theory by Erik Erikson (1964; 1968). The findings above resonate with other studies that have established that majority of women prisoners across the globe are young women and often in less affirming and unloving relationships (Social Exclusion Task Force, 2009; Van Voorhis et al., 2010). According to Erikson (1964, 1968), success in this step of development results into the development of satisfactory mutual relationships characterized by love, friendship, marriage and starting a family, but including productivity in work. While on the other hand, lack of success often associated with a poor sense of personal identity development results into unsuccessful intimate relationships, isolation and sometimes loneliness. Salisbury (2007) and Covington and Bloom (2006) note that most women offenders in unstable and dysfunctional relationships tend to isolate and distance themselves from their friends, families, colleagues and other relationships due to their struggle with shame and guilt for the failed relationships.

Similarly, relational theory of psychological development attributes criminality in women to mental illnesses such as depression and self-destructive behaviors resulting from unsatisfying and disturbed relationships in women’s lives. Majority of such women eventually drift into heavy substance use that closely explains some of their criminal

behaviors (Salisbury, 2007). Substance use then fills up the relational need of such women. This is because although incarcerated, the developmental demands for young adult women in realizing healthy intimate relationships is a basic need which may serve as a shield against criminal behavior. Abuse of substance in women offenders is highly linked to murder, child abuse, and theft in Kenya (Murugi, 2012; Oketch, 2006). The current study found that incarcerated women in Kenya with substance abuse problems are disadvantaged since none of the correctional facilities seem to apply any clinical treatment modality to help them work out this problem in their lives.

4.2.2 Level of Education of the Respondents

Respondents for the study were drawn from different levels of education ranging from class 8 to university level. The table below summarizes the distribution of respondents by level of education.

Table 4.2

Distribution of Respondents by Level of Education

Education Level	Frequency	Percentage
Class 8	210	66.9%
Form 4	70	22.3%
College Level	24	7.6%
University Level	10	3.2%
Total	314	100%

The results in Table 4.2 above indicate that majority of the respondents (66.9%) who participated in this study had only basic primary education followed by those with Form Four level education (22.3%). Only 24 respondents (7.6%) and 10 respondents (3.2%) had college and university level education respectively. These findings indicate that the majority of women offenders within the Kenyan prisons have primary and

secondary education (89.2%). This may be indicative that education is an important variable that mediates offending behavior. This finding resonates with the argument posed by Salisbury (2007) suggesting that lower educational levels and therefore lack of economic empowerment contribute significantly to women’s problems such as parental distress, victimization and reduced self-efficacy in women offenders. Lack of skills and qualifications amongst women prisoners is one of the challenges reported in offenders in Kenya (Oketch, 2006). This affirms the importance of education. From a psychological perspective, education could be associated with cognitive development that is important in one’s overall development. Accordingly, people with higher education develop a dialectic approach in reasoning that helps to integrate competing positions that may act as a protective factor against criminal behavior.

4.2.3 Marital Status of the Respondents

The study sought to find out the marital status of women prisoners in order to establish whether single parenthood is a factor in criminality in women prisoners. The table below summarizes the distribution of respondents by marital status.

Table 4.3

Distribution of Respondents by Marital Status

Marital Status	Frequency	Percentage
Single	119	37.9%
Married	97	30.9%
Divorced	61	19.4%
Widowed	37	11.8%
Total	314	100%

The results in Table 4.3 above indicate that majority of the respondents (37.9%) were single women who had not been married, while 19.4% were divorced and 11.8% had been widowed. The remaining 30.9% were in marital relationships. This finding

resonates with studies of Van Voorhis et al. (2010) and Covington and Bloom (2006) who found that majority of women prisoners across the world are single parents. The above scholars observed that the single mothers in prison were either divorced or widowed, with a small percentage that had not been married at the time of their incarceration. The scholars further noted that the high numbers of single parenthood amongst women prisoners was blamed on spiral experiences of painful, unsatisfying and unsupportive relationships; often traumatic in nature.

4.2.4 Occupation of the Respondents

The study participants came from different occupations. Table 4.4 below summarizes the distribution of the participants by occupation.

Table 4.4

Distribution of Respondents by Occupation

Occupation	Frequency	Percentage
Informal Employment/ <i>Juakali</i>	180	57.3%
Farmers	50	15.9%
Student	30	9.6%
House wives	36	11.5%
Formal Employment	18	5.7%
Total	314	100%

The results of table 4.4 above indicates that the majority of respondents (57.3%) were in informal (Jua-Kali) business; 5.9% were subsistence farmers; while 11.5% were either housewives/homemakers or had no employment. Other respondents indicated that they were students (9.6%); and only 5.6% were in formal employment. The findings of the study reflect other studies (Wright et al., 2008; Van Voorhis et al., 2010) that linked economic empowerment and poverty to criminality of women across the globe.

4.2.5 Reasons for Imprisonment of Respondents

The researcher investigated the types of criminal offenses that led to imprisonment of women in Kenya. The information on the types of crimes committed by the respondents would help determine the psychological needs of women that drive them into criminality. This information may guide in the development of rehabilitation programs necessary for their effective rehabilitation. The table below summarizes the distribution of criminal offenses that led to imprisonment of the respondents.

Table 4.5

Distribution of Respondents by Reason for Imprisonment

Occupation	Frequency	Percentage
Alcohol related reasons	26	8.3%
Abortion	11	3.5%
Drug peddling	19	6.1%
Theft/Robbery	106	33.7%
Murder/Manslaughter	102	32.5%
Child Neglect	16	5.1%
Assault	34	10.9%
Total	314	100%

The results in Table 4.5 above indicate that the majority of the respondents (33.7%) were incarcerated for crimes related to theft and robbery; while 32.5 % were convicted for murder and manslaughter. Other major reasons for incarceration of the respondents are; conviction for assault (10.9%) and conviction for alcohol related issues (8.3%). This finding of the study resonates with related studies (Guerino, Harrison, & Sabol, 2011, Van Vooris et al., 2010) that noted a broad range of criminal offenses, often economic in nature, reported in women offenders across the globe. However, the above scholars share as a concern the seemingly increasing concern on the rising numbers of women offenders involved in violent crimes previously perceived as male offenders’

issues. Guerino et al. (2011) associates the increasing cases of violent crimes such as assault, manslaughter and murder in women to unfortunate happenings resulting from self-defense to what they term as social and cultural treatment that often are demeaning such as wife-battering, demanding and absent non-providing spouses.

Farr (2000) and Hardyman and Van Voorhis (2004) on the other hand argue, as has already been noted, that women offenders report cases such as alcohol related crimes, child neglect and theft, that are influenced by their poor economic status. Majority of the women involve themselves in crime out of a necessity to provide for their own personal needs and those of their children. According to the Kenya Police Crime Statistics (GOK, 2012) women engaging in violent crimes rated at 4%, reflecting a 2% increase in women's engagement in crime from the previous years. According to Onyango-Israel (2013) and Omboto (2013), criminal activities such as murder and manslaughter, theft, drug use, illicit alcohol brewing and sales, prostitution and child neglect, recorded high amongst women prisoners in Kenya. The behavioral factors identified point to some underlying psychological factors that needs to be integrated in women offenders' programs for effective rehabilitation to be realized.

4.2.6 Number of Times the Respondent had been in Jail

The study sought to establish the number of times the respondents had committed criminal offenses that led to their imprisonment. This was important in establishing whether respondents reported cases of recidivism or habitual offending. Table 4.6 shows the distribution of the number of times the respondents had been in jail.

Table 4.6

Distribution of Respondents by number of times jailed

No. of Times	Frequency	Percentage
Once	296	94.3%
Twice	16	5.1%
More than Twice	2	0.6%
Total	314	100%

Table 4.6 above shows that majority of the respondents in this study (94.3%) were first time offenders, while 5.1% had been in prison before. The findings of this study however did not resonate with other studies that suggest an emerging trend and concerns across the globe on the increasing numbers of recidivism amongst women offenders. Deschenes, Owen, & Crow (2007) for example, noted findings of a study in the US women correctional facilities that found that 58% of the incarcerated women had previously been in jail prior to their current incarceration. The findings of this current study showing a majority of respondents (94.3%) being first time offenders, while 5.1% and 0.6% being in prison for the second time and more than twice respectively, suggest that if prisons rehabilitation programs were effective, recidivism amongst the offenders could be controlled. Similarly, current offenders would be able to desist from crime upon release from prison and likely to resume a more productive lifestyle.

The demographic finds above, revealed that while there are some similarities in demographic variables on women in correctional facilities across the globe, some differences in these variables were observed among women offenders in Kenya. Similar to other studies (see Van Voorhis, 2013; Nuytiens & Christiaens, 2012; Bloom et al., 2003), the current study revealed that most women offenders in Kenya are young mothers unmarried and often lacking financial and moral support from the fathers of their

children. Like in the above studies, most of the women are less educated with less empowerment and therefore with less opportunities for employment or better paying jobs. These factors contribute significantly to their offending behaviors particularly in their efforts to provide basic needs to their families as revealed in the findings as per the objectives of the study. Lack of good education often explains inability to find employment and thus lack of finances for the women to meet their financial obligations. Moreover, education is a means through which one is empowered to rational and critical thinking thus reduction to chances of involvement in criminal behaviors.

In contrast to other studies, the findings of this study suggest that women offenders in Kenya are more involved in violent offenses previously seen as male only crimes or masculine in nature. This warrants investigation and need for proper rehabilitation. On a positive note, this study revealed that most women offenders in Kenya are first time offenders unlike in other studies that revealed high cases of recidivism in women offenders. Thus, with positive rehabilitation, it is likely that habitual offending in women may be controlled in Kenya.

4.3 Findings of the Study Objectives

In this section, findings of the study objectives are presented. The quantitative findings from 16 correctional facilities were corroborated with the qualitative findings from six focus group discussions. The interviews were administered to the officer's in-charge, representatives of NGOs and FBOs and the director of rehabilitation and social welfare based at the prison headquarters. The six FGDs and interviews with the representatives of the NGOs and FBOs were conducted in three correctional facilities. It will be recalled from the introduction of this chapter that the study had five main

objectives. The first objective of the study was on establishing psychological needs of women offenders. This is addressed below.

4.3.1 Psychological Needs of Women Offenders in Kenya

This was an important objective to guide in addressing the concerns of this study, which was to examine the effectiveness of the rehabilitation programs in addressing the psychological needs of the offenders. To be able to scrutinize the effectiveness of the rehabilitation programs in addressing the psychological needs, it was first necessary to establish the psychological needs of women inmates. This was addressed through a questionnaire developed from specific standardized tools notably: Women's Risk/Needs Assessment tool-the trailer (NIC & UC, 2014), Rosenberg's scale (Rosenberg, 1965), The Generalized Self-efficacy tool (Schwarzer & Jerusalem, 1995) and the Confusion, Hubbub and Order Scale (CHAOS) (Matheny, Wachs, Ludwig & Philips, 1995) was modified to fit the research context. The results are presented and discussed as per item tested. The first item was victimization and trauma followed by parental distress, relationship with significant other (spousal), relationship with family of origin, self-esteem and lastly self-efficacy. These were the major specific psychological needs associated with criminality in women offenders (Belknap, 2007; Covington & Bloom, 2014; Van Voorhis & Salisbury, 2014).

4.3.1.1 Victimization (Physical and Sexual Abuse) and Trauma

The study aimed at finding out if the respondents had undergone victimization in form of physical or sexual abuse in childhood or adulthood. It also aimed at establishing whether the form of victimization, if any, influenced their current emotional state. Victimization in the form of sexual and physical abuses affects women's psychological wellbeing in negative ways. Victimization was assessed at two levels, that is, physical

and sexual abuses both in childhood and adulthood. Physical abuse was assessed based on the DSM IV-TR-2000, that defines physical abuse as the use of physical force, such as hitting, kicking, shaking, burning, or other acts of physical aggression against the victim that is intentional and perpetuated with malice. On the other hand, sexual abuse in childhood was assessed by the criterion definition of the World Health Organization (WHO, 2016) as involvement of a child in sexual activity that the child does not comprehend or is unable to give consent to; often in the form of rape or indecent exposure of the child’s genitals and/or female breasts or child grooming. In adulthood, sexual abuse was reflected in form of the women being forced into sexual activity by their spouses without consent or male spouses having excessive “appetite” for sex leading to too much demand for sexual activity that the women could not cope with. To test whether women offenders were victims of abuses, the respondents were asked to respond to whether or not they had been victimized by giving a ‘yes’ or ‘no’ vote.

Table 4.7 shows the summary of response on victimization among the respondents.

Table 4.7

Victimization (Physical and Sexual Abuse) and Trauma

Victimization	Yes	No
Physical abuse as a child	46.8%	53.2%
Physical abuse as an adult	51.3%	48.7%
Sexual abuse as a child	6.7%	93.3%
Sexual abuse as an adult	18.2%	81.8%

As shown in Table 4.7, the study found that an average number of the respondents were victims of physical abuse either as children (46.8%) or adults (51.3%); while 6.7% and 18.2% of the respondents had been sexually abused as children and adults

respectively. The findings of this study resonates with findings of a USA Bureau of Justice Statistics (Greenfield & Snell, 1999), which found that nearly eight of every ten mentally ill female offenders reported having been physical or sexual abused either in childhood or adulthood. Similarly, in another sample of women in a Massachusetts (USA) prison, 70% of women reported experiences of verbal, physical, and/or sexual abuse as adults (Coll & Duff, 1996). Though the literature is dated, it appears that the problem of victimization on women persists in families and women victims at times end up being victimizers themselves leading them to prison. The above findings on victimization among incarcerated women in Kenya were corroborated with the views of participants in the FGDs as exemplified in a quote below:

He is a devil! (referring to husband). He comes home drunk and late in the night shouting and threatening to kill me. He demands for food when he does not leave behind money to buy the food. If he does not get the food he wants he will just start fighting and beating me up. It was one of this night's, he came after midnight and started demanding that I serve him meat and no vegetables. Since I did not provide him the plate of meat, he started fighting me. He then removed a knife from his pocket wanting to kill me. In the process of our fight, I overpowered him and I took the knife from him. I stabbed him in self-defense and unfortunately, he died. That is why I am here.” (FGD 1)”

As cited in the above case, it appears that some of the women offenders usually do not intentionally kill their spouses at the time of the incident. Often when attacked by their spouses and in the process of self-defense, they find themselves committing crimes as murder or serious harm to the attacker that leads to arrest and subsequently being incarcerated. This changes their lives completely as many of such cases culminate in life imprisonment and after a long and stressful court process. The quote above is an example of self-defeatist behaviors, a result of emotional distress. As noted in Onyango-Israel (2013) and Muthoni (2007), the women often overpower their spouses who in such

attacks may be intoxicated. However, many end up committing the crime because their self-regulatory power is undermined as reflected in the voices of women in the above FGDs regarding relationships with their spouses. It is, therefore, possible to argue that, it is the psychological problems such as distress, some levels of depression and distorted cognition that are at the core of offending behavior in women.

Victimization is associated with emotional distress that affects patterns of thinking leading to criminal behaviors (Wright & Fagan, 2012). Drapeau, Marchand, & Beaulieu-Prévost (2012) citing Wheaton (2007), observe that emotional distress impacts on the social functioning and day to day living of individuals. Similarly, Baumeister (1997) had argued that emotional distress threatens self-esteem and undermines self-regulation process leading to self-defeatist behaviors.

On childhood abuses, 46.8 % of the women were victims of physical abuse while 6.7% were victims of sexual abuse as children. The reality of childhood abuses was evident not only in the quantitative finding but also in the FGDs as seen in the two quotes below:

“My father often returned home late and drunk. He would be shouting and as soon as he got into the house, he would demand for food from my mother. If mom did not serve the food he wanted, he would beat up everybody. Knowing what was coming, my mother would advise us to run outside to hide, but he would persist on seeing his children. On several occasions we heeded to his demands for mom not to be beaten up. Unfortunately, if we came he would beat us up and tell us how stupid we were like our mother. I was always afraid of him.” (FGD5)

An inmate who suffered sexual molestation by a stepfather and eventually ended up in an abusive marriage had this to say:

“My parents separated.... I was only twelve years old and my brother was seven. My mother relocated to her ancestral home, taking the two of us along. After two years, mum remarried and so we relocated to Nairobi to join our stepfather who was working as a casual laborer at a construction site. Life was difficult since my

stepfather did not earn enough to sustain the family. Lucky enough, a Church organization supported mum to start a second-hand clothing business. Unfortunately, my stepfather usually timed when my mother had travelled to purchase goods for her business and would sexually abuse me. I complained to my mother but she could not believe me. She accused me of wanting to destroy her marriage by creating stories to make her husband appear bad. I had no defense. I lived in fear and longed for a place to move to but all in vain. This led to my running away from home for protection only to end up in an abusive, chaotic marriage that led to my imprisonment.” (FGD 2)

As seen from the quotes above, cases whereby children and young girls experience violation and sexual molestation by family members are among the common forms of abuses reported by women in prison. Victims of such abuses often not only develop emotional instability, but these are associated to unhealthy levels of fear, shame and mistrust for these family members. This kind of abuse is a devastating life experience. It is betrayal to these children or/and young women by those supposed to protect and provide a positive nurturing environment. Sexual abuse by a “father figure” is even a more devastating state of affair in a child’s life. As noted previously, sexual abuse contributing to emotional abuse in children marks the victims’ brains in distinct patterns affecting among others, regions involved in self-awareness that is linked to psychopathological behaviors (Young and Wisdom, 2014). Its long-term effects can lead to permanent psychological damage on the victim, who in most cases suffers silently from the abuse due to shame and guilt or cover up by adults meant to protect the youngster. Such abuse not only disrupts the victim’s life, but it may equally contribute to distrust and affect relationships in adolescence and adulthood.

In the quote above, the victim not only has to deal with the painful and shameful experience of abuse by a father figure but also the rejection and betrayal by her mother who chooses to “protect her marriage” by not confronting the abuser. Such persons may

end up with difficulties in establishing meaningful and healthy relationships in their adult lives as spelled out in psychodynamic theories in explaining pathways to crime and delinquency (see Megan 2011). Additionally, different authors from the psychodynamic perspectives have argued that childhood history affects behaviors of children as they develop through the subsequent developmental stages. According to Gonzalez et al., (2007), sexual abuse in childhood correlates with higher levels of depression, guilt, shame, self-blame, poor self-esteem, among others. On the same note, scholars (Hardyman & Van Voorhis, 2004; Joiner, 2011) argue that childhood psychological problems in most cases explain delinquent behaviors such as, alcohol abuse, self-harm or harming commonly reported in women offenders. Similarly, McGrath, Nilsen, & Kerley (2011) argue that childhood sexual abuse is a precursor of criminal behavior particularly for those who do not have an avenue to deal with the psychological effects of the vice. These as noted previously results from effects on the brain and the untreated traumatic experiences in the victims' lives (Young & Wisdom, 2014). Accordingly, trauma linked to childhood abuse is associated with a wide range of negative behaviors. Other scholars (see for example, Bassuck, Dawson, & Huntington, 2006) noted the relationships between child victimization and offending, specifically as pointing out that already many trauma victims end up re-victimized or turning to be victimizers themselves.

From a general perspective, childhood abuse or neglect can lead to a variety of overwhelming emotions, such as anger, sadness, guilt, and shame (Commonwealth of Australia, 2010). Anger resulting from childhood abuses can lead to many offences. Poor anger management, for example, has been associated with violent crimes (Byrne & Howells, 2002). Childhood abuses also lead to insecurity and most children who have grown up in abusive families lack social skills to solve problems that could be a recipe

for criminal behavior. Therefore, it is not surprising that a higher percentage of the offenders had experienced some form of abuse as children, that is, 46.8 % were victims of physical abuse, while 6.7% were victims of sexual abuse.

From the behavioral perspective, children modeled into abuse learn to solve problems in the same way or adapt aggressive ways of self-defense. Studies also reveal that adult survivors of childhood abuse may turn out to be abusive parents (see for example, Mouzos & Makkai, 2004; Pears & Capaldi, 2001). This may perhaps explain why the women who grew up in abusive homes find themselves in similar criminal activities that lead them to prison. The findings on childhood abuse resonate with previous studies (Chesney-Lind & Shelden, 2004; Belknap & Holsinger, 2006) that showed abuses in childhood, whether physical or sexual, corresponded to the development of delinquency and a distal source for continued criminal conduct. Most of the affected children often have difficulties in school and record high levels of truancy (Rodriguez & Conchas, 2009). The effects of childhood victimization points to the necessity of rehabilitation programs that address these internalized painful experiences and their effects, often unspoken, as a means towards the achievement of effective rehabilitation for women prisoners.

In adulthood, respondents in this study also reported both physical (51.3%) and sexual (18.2%) abuses in their adult lives. Some of the women offenders narrated their fears for contracting sexually transmitted diseases, worse so HIV/Aids from their spouses whom they accused of having multiple sexual partners outside marriage. These were exemplified in the vignettes below:

He would come home late and insist in having sex with me. I felt treated as an object because even when I was not in the mood....even in my periods, I would be forced into it....Anytime I said no, I would be beaten up..... I was constantly

worried that he would infect me with HIV since I was aware of the other women in his life. I just could not take it! Unfortunately it did not end well.” (FGD 4)

Another inmate had the following to say:

“My husband wanted sex all the time. There was a time he screamed before our kids that he wanted sex. Then another night he beat me up and poured cold water on me while I was in bed.....I had actually run away from my matrimonial home four times. What even took me back there? My life would have been different today if I had heeded my parents’ words.” (FGD 1)

The finding of this current study corresponds to one study done in a Minnesota (USA) women’s prison in 1999 to 2004 through the collaboration of NIC and University of Cincinnati. The study found that 60% of the women had experienced domestic violence in their adult lives and sexual abuse by their spouses (Hardyman & Van Voorhis, 2004).

As, noted above physical and sexual abuses on women offenders are common stories related to criminality in women offenders. By the time they find themselves on the wrong side of the law in the process of self-defense from their abusive partners, they are often emotionally broken down and unable to reason out any action they plan that mostly translate to criminal acts. Moreover, as noted in Trickett, Noll and Putnam (2011), victimization of adult women leads to powerlessness, shame and guilt. The above authors further argue that some of the sexually abused women end up contracting sexually transmitted diseases (STDs) and sexually transmitted infections (STIs) while some become suicidal when their coping strategies are completely eroded. The above authors suggest the importance of treatment for the victims of such abuses to provide an avenue for mental healing and allowing victims a chance of normality in their lives.

The study by Hardyman & Van Voorhis, (2004) noted that the women in the sample population manifested an array of psychosomatic illnesses, insomnia, generalized chronic pain and devastating mental health problems like PTSD. As explained in relational theory of women's psychological development, victimization in women is often a precursor to bolted anger, depression, anxiety and abuse of substance seen as major pathways to criminality in women. While elaborating on the same topic, Deissner & Tiegs (2001) indicate that the long-term emotional and psychological effects often occur in multiple forms and may become overwhelming before causing knock-on effects, some being criminal in nature. This may explain why women offenders who abuse drugs often suffer both depression and/or anxiety usually linked to their criminal conducts such as murder and subsequent imprisonment (Belknap and Hosinger, 2006; Deissner & Tiegs, 2001).

The many cases of abuse in women offenders prior to their incarceration either in childhood or adulthood suggests a critical need for rehabilitation and treatment programs that focus on addressing the complex nature of such abuses. Thus, there is a need for programs that are multifaceted in nature in order to address the co-occurring issues of the women offenders while providing support towards regaining their lost identity through the erosion of their self-image and self-worth.

Sexual or physical abuses in women are notably examples of traumatic events in women offenders' lives. Through the FGDs, the study assessed whether the description of mental health problems of trauma and PTSD (see Appendix 5) were among issues for the women offenders in the current study. The finding is demonstrated in the quote that follows below:

“My parents divorced when I was 2 years old. I blame my current woes and miseries on my father and stepmother....That woman always denied me food and beat me up. My father on the other hand blamed me for disrespecting his wife. I was forced to leave home... I eloped with an elderly man, older than my own father. After some time into the marriage, the man became very abusive. When I gave birth to our first child, he became more hostile and accused me of giving him a girl instead of a boy.... By God’s grace, I bore our second and third born sons. He started coming back home drunk and late in the night. He would beat me up and accuse me of sleeping with other men. I always cried and asked God- “why me?” One night he picked up a fight with me. I could not take it anymore...I took a knife. I did not think it would end like that.” (FGD 2)

The quote above further depicts victimization and the experiences that affect the psychological wellbeing of women offenders. In this case, the multiple traumatic experiences by the respondents continued from childhood into her adult life. At the point of murdering her husband, she could have been emotionally disturbed from the spiral traumatic events in her life that led to her actions. Van Voorhis (2013), Salisbury (2007), and Covington & Bloom (2006) acknowledge that majority of women offenders’ report at least one experience if not multiple traumatic life events. In advocating for gender responsive programming in correctional facilities, the above scholars support a need for trauma-informed approaches in rehabilitation considering that almost every single woman offender reports a traumatic event in her life. Similarly, the finding of this current study necessitates the development and implementation of gender responsive treatment and rehabilitation programs that addresses the same within the Kenyan women prison. Unaddressed multiple traumatic experiences in women offenders are likely to translate into PTSD and depression. Such mental illnesses are highly linked to increased risk of substance abuse, other devastating mental illnesses and family breakdowns compounded by minor to serious criminal issues (Williams, Williams, Stein, Seedat, Jackson & Moomal, 2007).

4.3.1.2 Posttraumatic Stress Disorder

Since trauma and PTSD are closely associated, the current study sought to find out if PTSD was a mental illness that may be a factor to relate to criminality in women offenders in Kenya. The study found it necessary to assess PTSD as a complication of untreated trauma. The need to assess PTSD was also necessary as it may be recalled that Muthoni (2007), while examining the undiagnosed Psychiatric Morbidity among Remand Prisoners in Kenya, recommended an assessment and treatment of PTSD among other mental illnesses in inmates. The result on PTSD in the current study is shown in Table 4.8 below.

Table 4.8

PTSD (Reflection on a horrible/Frightening experience that has lasted more than a month)

PTSD Indicator	Yes	No
Trauma or actual harm outside normal range	87.6%	12.4%
Recurrent disturbing dreams, recollections	82.1%	17.9%
Avoidance of troubling memories	61.0%	39.0%
Marked diminished interest	73.5%	26.5%
Unwanted images, “flashbacks”	87.0%	13.0%
Automatic over-reactivity	82.5%	17.5%
Average score	78.95%	21.05%

The items above in Table 4.8, representing trauma acronym PTSD summarizes the key features (Zukerman, 2005). It shows that on average 78.95% of the respondents scored ‘yes’ to questions that were measuring PTSD while 21.05% of the respondents said ‘no.’ The study, therefore, found that majority of the respondents’ exhibited PTSD symptoms that may qualify the DSM-5 (2013) diagnostic criteria (See Appendix 5). PTSD in women offenders may relate to their victimization, particularly those of sexual and physical abuses. The above findings support other studies (Muthoni, 2007; James &

Glaze, 2006; Elliott et al., 2005) that addressed the direct link between PTSD and delinquent behaviors amongst women prisoners, particularly those that had run away from home because of the chaotic and non-receptive home environment.

In yet another study examining the prevalence of PTSD among incarcerated women, Powell, Holt, & Fondacaro (1997) reported that 21% of their sample met 6-month criteria for PTSD and 33% met lifetime PTSD criteria. Ardino (2012), while investigating PTSD rates in co-morbidity with substance abuse, demonstrated that incarcerated women with substance misuse problems and PTSD (a common phenomenon), are often at a higher risk for remaining entrenched in the criminal justice system if these psychological needs are not addressed effectively. The outlook of offenders' contextual variables mirrored in the high rates of PTSD suggests a great necessity for the development of screening tools and comprehensive trauma informed services that address the complexity of PTSD and other mental health issues in women (Elliott et al., 2005).

4.3.1.3 Parental Distress

To establish whether parental distress related to parental role was a psychological need that contributed to criminality amongst women offenders, the respondents were presented with various items ($n = 6$), against which they were supposed to indicate their status in providing for the needs of their children in responding to their parenting role. The quantitative and qualitative findings on this variable are concurrently presented, discussed and analyzed. Table 4.9 shows the results of the study.

Table 4.9

Parental Distress in Women Prisoners

Parental Distress Indicator	Yes	No
Respondents with children of age 18 and below	83.4%	16.6%
Financial ability to provide basic needs (food, clothing and shelter)	37.4%	62.6%
Financial ability to provide good education and health care	40.5%	59.5%
Constant worry on children’s future due to inability to provide basic needs	87%	13%
Constant worry due to inability to provide children’s educational needs	85.1%	14.9%
Receiving support from father of child/children in meeting needs	31.7%	68.3%

Table 4.9 above represents a summary of six items that indicated high level of distress in respondents in their roles as parents. The first item reflected the number of children dependent on the respondent. The findings show that 83.4% of the respondents had children of age 18 and below who were dependent mainly on the respondents for their basic needs and thus survival. On financial ability, 62.6% were unable to provide basic needs of their children, while 59.5% did not have the ability to provide good education and health care for their children. Majority of the respondents (87%) were worried about their children’s future due to their inability to provide their basic needs, while 85.1% constantly worried on their inability to provide their children with education. On support, 68.3% reported lack of support from their spouses in meeting the needs of their children. Constant worries from majority of the offenders could suggest that the women were anxious about the future of their children most of the times with minimal chances of securing a source of income when released from prison.

From a cognitive theory perspective, constant anxiety/worry can lead to social anxiety disorder associated with low capacity in coping with life challenges or an increase of vulnerability to depressogenic thoughts and situations, highly characterized in mothers incarcerated for crimes associated with parental distress (Gurman & Messer, 2003). Further, Elster cited by Gurman & Messer (2003) observes that such factors associated to social anxiety disorder limit rational decision-making. From criminal psychology, the strain theory postulates that crime is a result of conflict between people's goals and the means they can use to obtain it (Sikand & Reddy, 2017). The women appear to lack the ability of providing a good future for their children. This coupled with poor social support especially from the significant others seems to push them into criminal behavior. This observation was corroborated by experiences of some inmates as described in the excerpt below:

“I dropped out of school in Form Three after getting pregnant from a relationship with a married man.....The following year his wife died and this gave me an opportunity to move into his house with our baby who was now eight months old. He had a son of six years from his 1st marriage.....A year later I gave birth to our daughter. Soon after, the man changed so much...I learned that my husband was having extra marital affairs....he would come home late and drunk. On some nights, he just didn't come back home. He did not provide for the needs of the children. Every time we met we were fighting....Life became unbearable... many at times I was seeking for support from my neighbors or parents who always blamed me for my woes. I started drinking heavily to keep my mind off my problems. I would spend my nights in the bar with any man who could give me money and food...[pause]....I disappeared for one week leaving the children unattended to.....I was charged of child neglect, drunkenness and for being abusive.” (FGD6)

The vignette above portrays a life of a young confused mother who out of frustration with her inability to provide the needs of her children got into a drinking habit with no sense of moral decision on abandoning her children for the drink. While her

behavior of neglecting her innocent children to a drinking spree is not justified, her shattered emotional state was a natural response to her abandonment by the father of her three young children who was supposed to share in the responsibility of providing for the family but chose otherwise. It appears like she had exhausted all avenues to provide for the basic needs of her family. Not only did her husband abandon her but also her friends and own parents who blamed her for her woes. As has already been discussed, parental distress in women particularly associated to the inability to provide basic needs for their children is highly linked to depression, which could result to self- destructive behavior in terms of one committing suicide or maternal filicide/infanticide, defined as child/infant murder by the mother (Friedman & Resnick, 2007). Scholars (see Young & Wisdom, 2014) associate such distress to the slowing down of brain's rate of growth, creating vulnerability to anxiety, depression and less resilience to stress. The quote below exemplifies maternal filicide associated with too much distress in a mother.

“Together with my two best friends we were expelled from school on several warnings on breaking the school rules. We moved in with our boyfriends to have fun. My parents who had known of my fate pleaded with me to return home.... but I could not listen to any of their pleas. Sooner, I became pregnant ...[pause]... this was the time I began to know this man's true colors. He was always away from home....[pause]... most nights he spent with his other girlfriends in the bar.....Any time I complained of his other relationships, he would start beating me up.....[pause].....my parents who were in the picture pleaded yet another time with me to return home and this time round I gave in.....Soon I gave birth to a baby boy but my former boyfriend refused to support me. I was angry at him. I needed my freedom. Here I was struggling alone to care for a child whose father was only having fun with other women. So...[pause].. I planned how to kill the baby. [pause] while they were away (referring to her parents), I drowned the eight month baby in a bucket of water....I made sure I covered her mouth as I pushed and pushed her helpless body into the water [pause]...She was dead! I then wrapped the body in a khanga and threw the body into a pit latrine.” (FGD5).

The expression of the participants in the vignettes above suggests low education, limited rational decision making and lack of social support that could make the individual vulnerable to criminal activities. Sikand & Reddy (2017) observe that criminal behavior is an outcome of interaction of psychosocial factors and the ongoing social process. As expressed in the quote above, poor educational background, irrational decision-making and lack of social support interacted to make individuals vulnerable to criminal behavior. For effective rehabilitation of the women offenders, all the risk factors need to be addressed, including parental distress.

Challenges posed by a parenting role contribute significantly to alcohol or drug abuse in women. Perhaps unaware of the dangers of dependency on drugs or alcohol abuse, these women use the substances to numb the pains coming with their distress. As reflected in the quote above, dependency on substances in Kenya is more linked to involvement in criminal activities such as child neglect, spousal and child murders, prostitution, forgery and alcohol related crimes (Njeru, 2012; Nordahl, 2013). The implication of this is for correctional facilities to consider parental distress in women prisoners as an issue that rehabilitation practices cannot ignore for effective rehabilitation to be realized among the offenders. Other than the social problems that led women to criminal behavior, the inmates who were parents continue to worry about their families and misuse of family property by their spouses. Another respondent serving a five-year jail term had this to say about her current distress:

“I am currently confused and more stressed. I just learned that my husband has married another woman....[pause]....a mother of six. I am very worried about my children and to make matters worse, he has divided and sold a piece of the family land without my knowledge....[tears rolling down her cheeks]...what am I supposed to do and what will happen to my children in future?” (FGD3)

The quote above expresses the description that most respondents in a spousal relationship used in portraying their spouses. The partners are described as uncaring, absent fathers, alcoholics and womanizers. The respondents lamented their engagement into criminal activities as prompted by the need to provide for their families. While a criminal action may not be justified, lack of spousal support and the choice of committing crimes in women appears to be a 'needs must', that is, a necessity compels reality. The above reports by women offenders suggest that inability to deal with parental distress is a facet to criminal behaviors in a majority of them. As explained earlier, poverty, lack of spousal support and limited parenting skills heightens their distress level. Moreover, while in prison, the concerns and struggle in coming to terms with separation from their children escalates their distress level. The tension is often expressed through behaviors such as negativism, manipulation, rule breaking and fighting among the incarcerated women (Douglas, Plugge & Fitzpatrick, 2009).

In view of the relational theory of women's psychological development used to inform this study, it is not surprising that women are distressed with the inability to carry out their parental roles effectively. Miller (1976) advances in relational theory that woman's growth is manifest through the types of relationships she has, and her sense of self-worth is defined by interconnections with others. Without these healthy connections in their relationships, women's positive growth and self-worth are eroded; leading to their criminal behaviors (Jespersen, 2006; Trotter et al., 2012). As can be seen from the quotes, most respondents lamented their engagement into criminal activities as prompted by lack of support from their spouses in providing for the needs of their children.

It is arguable that perhaps the highly valued concern for most women is connection to their children. Globally and Africa in particular, children are considered as blessings and assets. Therefore, motherhood (Akujobi, 2011) and thus nurturing of children is a sacred responsibility and highly regarded. Thus, inability to provide food and other basic necessities to their children leads to a depressing situation that some mothers would rather steal or break into a food store in order to place food on the table for their children. Although parenting may be burdening, studies also show that parenting is rewarding (see Nomaguchi & Brown, 2011). On the contrary, failure in parenting has negative psychological effects on both mother and the child. Psychological effects notably, stress, depression or anxiety resulting from “parental failures” may make it difficult for incarcerated mothers to benefit from programs offered for rehabilitation. While criminal actions may not be justified by lack of spousal support, the choice to committing crimes in women appears broadly to be a need-based reality. This implies that a step towards effective rehabilitation of women prisoners is for correctional departments to provide opportunities for women offenders to work on their sources of parental distress prior to incarceration but including current distress associated to incarceration. However, this should particularly incorporate parental training programs for mothers with young children who upon release from prison will resume their parenting roles. Supporting such programs, Barlow et al. (2014) suggests that the scope for a parenting program must go beyond training in parental skills to include strategies that strengthen families affected by maternal incarceration. On the same note, Bloom et al. (2005) points out the emotional detachment between mothers and their children resulting from isolation of prisons and absence of relationships during incarceration, as a factor that correctional facilities must deal with. Parental distress in women offenders is

broad in nature and calls for a critical assessment for it to be effectively addressed in rehabilitation.

4.3.1.4 Dysfunctional Relationships

The study sought to find out if women in prison had dysfunctional relationships either from family of origin or spousal relationships. Gender related studies (e.g. Van Voorhis, Wright, Salisbury, & Bauman, 2010; Salisbury & Van Voorhis, 2009) argue that disturbed relationships in women’s lives contribute significantly to their offending behaviors. There was, therefore, need to establish relational status of women offenders. To test the relationship status of women offenders, the respondents were first asked questions in relation to their spouses. Table 4.10 summarizes the distribution of responses on how the respondents viewed their relationship with their spouses.

Table 4.10

Relationship with Significant Other (Spouse or Boyfriend)

Relationship with significant other Indicator	Yes	No
No (138) In a spousal relationship	43.9%	56.1%
I would be happier and not in prison today if I was not in a spousal relationship	55%	45%
Spouse contributed to imprisonment	50%	50%

Findings in Table 4.10 above shows that 43.9% respondents were in a spousal relationship, while 56.1% were not. The study did not establish the reasons as to why the respondents were not in any spousal relationship. This may have been out of choice; or due to separation, divorce or widowhood. However, 55% reported that they would be happy and not in prison at the time if they were not in relationship with their spouses. This has the implication that they blame their woes on their relationship.

When asked whether their coming to prison was because of their spousal relationships, 50% of the respondents attributed their imprisonment/predicaments to spouses. This was corroborated in the FGDs as can be seen from the two quotes below.

One respondent serving a 15 years' jail term had this to say:

“I regret what I did but it was out of provocation.....[pause].... I was so distressed about my husband's relationship with this other woman whom he met at his work place. This “mpango wa kando” destroyed our marriage. I could not understand why all of a sudden my husband was drinking heavily and coming back home late in the night. We were always arguing about this other woman. My life could not move on! I too began to take a bit of whisky to help me forget which I later on had to stop after reading an article in the newspaper about addiction and its effects.

One Saturday I gathered courage to face the woman and to bring to her attention that she was destroying my marriage, but instead she rubbished my concerns telling me that I should ask myself why my husband was having an extra marital affair. My husband went to the extent of bragging to me that as a man he had a right to be ‘polygamous’ and this was quite acceptable by the society.

I planned to teach these people a lesson.....I had bought some sulfuric acid from a chemical store. One night when my husband returned in the wee hours of the morning, I demanded that we go to this other woman's house so that we could all talk about how their relationship had affected my family. And it was at this meeting, that I got so worked upthis woman abused me, telling me that I should learn to keep my vagina clean for my husband not to go out searching for her.I could not take it any more...that was when I took the bottle of acid and splashed on the woman's face.....This was what landed me into this prison.”
(FGD2)

Another respondent on a life sentence had this to say:

“I have now accepted my fate. I have been in this prison for 18 years falsely accused of conspiring with a gang to kill my ex-husband.... When he was car jacked, robbed and murdered, we had been married for three years.....I suffered in an abusive marriage. His mother would tell me to be submissive because all men cheat. At times' she blamed me for stressing his son. I tried to persevere for the sake of the children. I was so lonely that I began using alcohol to help me forget my problems. The marriage could not workout....Our communication about the children was always through note writingThe relationship became sour to the extent that I had to move out from my bedroom to sleep with my daughters in their bedroom. Finally, I moved out, leaving my three children

behind....[Oh!]... I had hoped I would live a happy life, but this was not to be. It all ended up like this.I now leave all in God's hands." (FGD5).

As seen from the excerpts above, a number of incarcerated women reported living in difficult spousal relationships prior to incarceration. The common issues range from infidelity, violence, irresponsibility and non-commitment to family responsibilities. Most of the women in prison seemed to lack clear avenues to cope with the marital issues. Sometimes an accusation is leveled on the victim by the parents of the man for stressing their son or not being submissive to their son as expected of the "African" woman. In some cases, these issues accelerate to fights and end up in serious harm or become fatal when weapons are used. As noted in the quotes above, the women often try to persevere in the abusive marriages for the sake of their young children. However, others eventually choose to quit and move on with their lives regardless of what awaits them in the future.

As highlighted in the objective one and the excerpts above, one of the ways in which women deal with their emotional pains in difficult spousal relationships is by use of alcohol or drugs as a means of consolation. However, over use of drugs or alcohol interacts with the brain and body to alter moods, emotions, and behaviors by changing the brain chemistry and a person's perceptions (Van Voorhis & Salisbury, 2014) and therefore negatively affecting one's rationality, often culminating in criminal behaviors. Several studies (Bhati & Roman, 2010; Gizzi & Gerkin, 2010) explain the effects of long-term abuse of substances to the brain. Notably, substance abuse alters the optimal concentration of glutamate (a neurotransmitter that influences the reward circuit and the ability to learn); leading to impairment of cognitive functioning. The alterations in the brain of a substance user explain irrationality in reasoning and judgment; decision-making and behavior control in offenders.

The finding of the current study, therefore, signals the importance of rehabilitation programs constituting a curriculum that would help women offenders with opportunities to regain their diminished zest or vitality, self-worth and disempowerment. Since dysfunctional spousal relationships involve a range of issues that affects perceived desirable behaviors in women, it is important that rehabilitation programs be broad-based to incorporate components such as: life skills, depression and therapy, drugs and addiction treatment. Dysfunctional spousal relationships involve painful emotional experiences and anger that unless dealt with during rehabilitation could be later triggered and result to yet another criminal engagement and re-incarceration.

The current study sought to find out whether disturbed relationships within the respondent’s family of origin, in childhood/adolescence, contributed to their criminal behaviors as adults. To assess the variable, an adapted version of the Confusion, Hubbub and Order Scale (CHAOS) by Matheny, Wachs, Ludwig, & Philips (1995) was employed. Table 4.11 depicts responses to various questions (n = 6), which were statements to indicate relationships and upbringing experiences in the respondents’ families of origin.

Table 4.11

Relationships in Family of Origin

Indicator of Relationship with family of origin	Yes	No
My parents always quarreled or fought	87.9%	12.1%
Our home environment was calm and peaceful	40.8%	59.2%
Dad always beat us for mistakes that we made	70.7%	29.3%
Mum always shouted at us for mistakes that we made	59.7%	40.3%
As siblings we at times fought whenever we disagreed	76.1%	23.9%

The findings in Table 4.11 reflect 5-items describing what may have been the situation in the family environment of the respondents as they were growing up.

According to the responses on the adapted CHAOS scale, a majority of respondents did not experience a harmonious family living environment; that is, 87.9% lived in homes where their parents fought most of the time, while 59.2% of the respondents grew up in homes that were not peaceful. On the same note, family dynamics revealed a less harmonious family living amongst the family members. The findings show that 70.7% of the respondents were shouted at or beaten by their fathers for any mistakes that they made, while 59.7% of the respondents experienced their mothers shouting or beating them for the same; 76.1% of the respondents noted that as children/siblings they fought whenever they disagreed. Only 40.8% of the respondents indicated that they could rely on their family for support upon release from prison. It is important to recognize that due to individual differences in coping with life's challenges as spelled out in personality theories, some people may go through difficult life events and still maneuver successfully in life while others may get stuck along the way if not provided the necessary professional support. The objects relations theory suggests that individuals with difficult early childhood experiences associated with parents or the primary caregiver, who is an 'object' in the life of a child, are likely to end up with unpleasant personalities, worse so criminal in nature (Mills, 2010), which may explain the findings above. Strong social support systems and one's inner strength and resilience level can thus contribute to the difference (Southwick & Charney, 2012) in whether a person whose 'object' was unpleasant becomes an acceptable personality in adulthood.

According to the CHAOS scale (Matheny et al., 1995; Mersky & Topitzes, 2010), childhood and adolescent home environment have an adverse effect in an individual's adult life. Specifically, unstable and abusive or chaotic homes contribute to greater risk of illegal offenses. In view of the CHAOS scale, Bartol & Bartol, (2014) explains how

faulty or inadequate parenting, sibling influences, and child maltreatment or abuse denotes familial risk factors to criminality. According to the scholars, children who witness violence in the home may suffer cognitive deficits, anxiety, or even development of the aggressive behavior witnessed or experienced. This creates a cycle of violence that may pass through the future ties of the family. As the child witnesses or experiences the violence, he or she may exhibit the same behavior in an effort to inflict power and control over a situation or circumstance or as a coping strategy to deal with stress. The coping in life through aggression and / or violence may lead to future offenses that may be explained by the results of this current study in view of the CHAOS scale.

Since connections are important to women in their psychological development, the study also sought to determine the respondents' views on their current relationships with other family members. The respondents were asked to describe their current relationships with members of their families of origin in terms of 'good', 'fair' and 'poor'. Figure 4.1 below shows the responses to the descriptions. These were corroborated with findings from the FGDs.

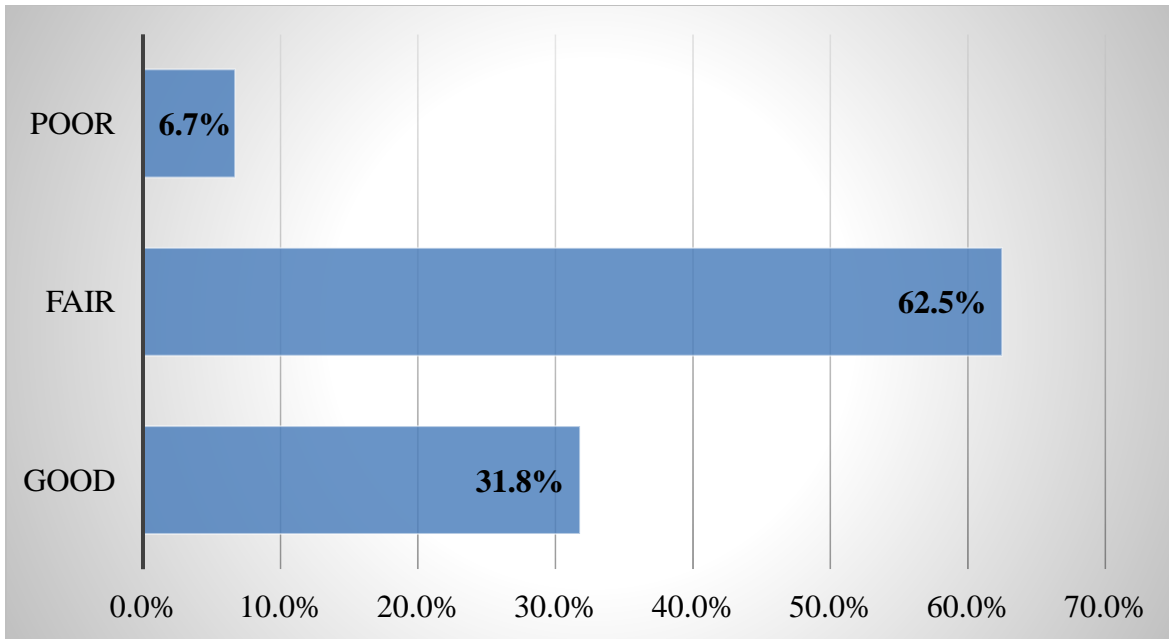


Figure 4.1 Respondents' Description of relationship with Family of Origin

The findings in Figure 4.1 above show that a majority of respondents (62.5%) described their relationship with their family of origin as 'fair', while 31.8% described their relationships as being "good". The remaining 6.7% described their relationships with their families of origin as being "poor". In describing their relationships as 'fair', it could imply that although the relationships may have occasionally been marked with some difficulties in general, the family relationships were on average functional unlike the case of the respondents who described their relationships as poor. The 6.7% whose relationships were poor may imply that the respondents viewed their family of origin's relationships as being unstable or maladjusted. The finding above was corroborated with the qualitative finding from the FGDs presented in the two excerpts below.

One of the inmates had the following to say about her family members:

"I will never return home.....I'd better live in the streets and be arrested again!...(tears running down her cheeks).....I have suffered all my life because of

my father, mother and sibling....They hate me.....I do not understand why?..... I would not be here if it was not for them..... I would not have got myself into trouble if it were not for them....I just consider myself having no family.....(broke down to tears).” (FGD3)

Another inmate had the following to say:

“This is my second time in this prison.....And always because of my mother...My brother has since left home because of our fights with mum and her men.....She brings home different men and has never told us who our father is..... She is always abusing me and asking me to vacate her house but I have no source of income.....And she does not realize that I did not apply to be born....I am here because I fought with this man whom my mother brought home at night.....I will kill her when I leave this prison...” (FGD6)

Although the two vignettes above suggest rather a poor relationship between the respondents and some of their family of origins, the findings do not exactly correspond to the quantitative findings of the study. The quantitative findings suggest that majority of the respondents viewed such relationships as being within a considerably normal range in human relationships. In view of arguments posed by humanistic principles, notably: issues of personal responsibility and personal growth (Schneider & Krug, 2010; Wilkins, 2010), the verbatim above portray images of maladjusted growth in the respondents. This perhaps explains their lack of taking personal responsibility and lack of aspiration for personal growth. In addition, the lamentation and blame suggest that the respondents had an inability to living in the here-and-now, hence doing nothing constructive to change their past into a more meaningful life.

Although the respondents are persons of age, they seem not to realize the importance of taking personal responsibility in changing the perceived difficult situations in their lives. Moreover, in both situations the respondents relate their being in prison as instigated by their parents; a defensive way of dealing with problems and blocking themselves from noticing their contribution to their current situations. Wright and Fagan

(2012) further argue from the humanistic approaches that inability in taking responsibility for one's life, putting blame on others and focusing much on the past can only impede one's growth and development. Although women offenders struggle with difficult life circumstances meted on them by society, majority could perhaps translate their suffering into triumph and desist from crime if only they can learn to view life in a positive way. Challenges, though diverse in nature, are part of life as posited in positive psychology. However, as noted in Seligman (2002) and Seligman and Csikszentmihalyi (2000), individuals can thrive even with the most difficult situation if only they can learn to focus on positive aspects of their lives instead of dwelling on their past failures and difficulties.

Moreover, in the second excerpt, the respondent indicates a maladjusted way of dealing with problems through use of thoughtless language suggested in her sentiment of claiming not to have applied to be born. She does not realize that no one ever applies to be born and as stated by existential philosophers notably, Medard Boss (1903- 1990) and Viktor Frankl (1905- 1997), suffering is part and parcel of human existence and nature through developmental processes demands individual's growth into independence regardless of circumstances that one goes through in life. According to Frankl (1959) and Boss, (1977) reflection on one's life events or sufferings and making meaning to them is a means of turning the suffering into triumph. Whereas there may be accumulation of failure across the stages of development, a positive outlook in life as suggested by existentialists leads to success despite the challenges one has gone through. Such lamentation from the respondent is therefore a sign of lack of positive growth. The same respondent equally portrays a lack of social competency in dealing with anger, thus resorting to fighting. Such behaviors explain lack of life skills critical to successful

relational living (Meyers, 2011) and thus a buffer to unacceptable self-regulatory behaviors that may translate into criminality as seen in the quote above.

According to quantitative findings, since a majority of the respondents had a close to normal functioning relationship with members of their families of origin, whereby 31.8% indicated the relationships as good and 62.5% as fair, it may imply that more emphasis in rehabilitation needs to address strategies for strengthening the relationships that exist as a motivation for behavior change. However, based on the respondents who indicated maladjusted relationships with their families of origin (6.7%), there is need for the correctional department to develop treatment programs that would facilitate the amendment of such broken, dysfunctional relationships between the inmates and their families. Scholars such as Van Voorhis (2013) and Wright et al. (2007) have argued on the importance of incorporating the component of “restorative justice” in rehabilitation as a means of restoring disturbed relationships in women offender’s lives. Restorative justice defines an approach to justice that focuses on the needs of the victims and the offenders, as well as the involved community. It therefore contrasts to punitive approaches where the main aim is to punish the offender, or satisfy abstract legal principles (Barton, 2000).

Similarly, relational theory (Miller, 1976; 1978) emphasizes that emotional support, warmth, and contacts are essential ingredients that promote growth in women offenders whereas, limited support or high conflict with family members make adjustment and change more difficult, thus placing emphasis on addressing connections and building relationships between women offenders and members of their families of origin. The importance of such a component may not be emphasized enough.

4.3.1.5 Self-Esteem and Self-Efficacy in Women Prisoners

Contemporary psychologists working in the criminal justice system suggest a relationship between low self-esteem and reduced self-efficacy in criminality in women offenders. Self-esteem and self-efficacy in women offenders are concepts that are couched within the discourse of “empowerment”. The current study thus aimed at establishing whether reduced self-esteem and self-efficacy contributed to offending behaviors in women. Table 4.12 shows the questions and results obtained in measuring the levels of self-esteem of the respondents, while Table 4.13 shows the questions and results from the generalized self-efficacy scale that determined the respondents’ levels of self-efficacy.

According to Table 4.12, respondents were asked questions with an aim to establish their level of self-esteem. The study employed the Rosenberg (1965) scale to measure the level of self-esteem of the respondents. According to the Rosenberg tool, self-esteem is measured by 10 positively structured questions on a scale of 1 to 4, where 1 is strongly disagree and 4 strongly agree. A higher score indicates more self-esteem. The highest average possible score is 40-points. The actual average score is converted into percentage of the maximum average score and rated as follows; 0-49% is rated as low self-esteem; 50%-83% is rated as normal self-esteem. Persons with healthy self-esteem generally have positive relationships with others and feel confident about their abilities as opposed to those with low or negative self-esteem, and therefore more prone to criminal activities in relation to the current study. The table below shows the study findings.

Table 4.12

The Level of Self-esteem in Women Prisoners

Indicator of Relationship with family of origin	Mean	Std. Dev.
I am a person of worth and equal to others	1.50	0.77
I feel that I have many good qualities	1.51	0.52
I feel that I am not a failure in life	2.89	1.17
I can do things well just like many other people	1.47	0.82
I have much success to be happy about	2.32	1.11
I think positively about myself	1.91	1.09
I am satisfied with myself	2.30	1.18
I do not do things that I later regret	2.24	1.12
I don't feel useless at all	2.56	2.10
Score on Rosenberg Self-esteem	18.70 (52%)	

From the table above, the study found a Rosenberg score of 52%, meaning that on average, women in Kenyan prisons have a normal self-esteem. The finding of this current study contradicts the findings of a study (Koons et al., 1997; Morash et al., 1998) that revealed poor self-esteem amongst the women offenders. The finding of the current study reflects an argument posed about the dark side of self-esteem by several scholars. Baumeister (1997) suggested that people with high self-esteem are more likely to be conceited, arrogant, or occasionally narcissistic. They often expect to receive positive evaluations from others; if they are provided with negative feedback, a threatened ego motivates them to spend personal resources on coping with the negative evaluations.

Similar to the above view, Neff (2011) pointed out that high score on self-esteem scales can result from narcissism – a highly inflated, grandiose view of oneself and one's positive traits and competence, conjoined with a sense of entitlement. The views posited above by the two scholars on self-esteem and crime could explain the findings in the current study. The elevated self-esteem in the respondents may have been associated with some degree of narcissism that contributed to their criminal actions at the time the crimes

were committed. Pervan & Hunter (2007) found that elevated self-esteem among inmates was highly associated with aggressive behavior, particularly when the heightened egoism is threatened. Similarly, according to Kaplan's theory on enhancement model (Kaplan, 1978; 1980), delinquency among the youth is associated with enhanced self-esteem. Further, Shine, McCloskey & Newton (2008) found that inmates with high self-esteem had high levels of physical active aggression than inmates with low self-esteem. The arguments above may imply that enhanced self-esteem is not always a protective factor, but it can make people vulnerable to criminal behavior. These views posed above may thus explain the reasons of criminality amongst respondents with high self-esteem in the current study. The vignette below may perhaps illustrate how an elevated self-esteem can lead one to criminality in an attempt to protect a threatened ego.

“.....I could not take it any more.....I insisted we go and talk with the “other” woman who was destroying our marriage.....She went on to brag by asking me to ask myself why my husband was not satisfied with me....The provocation was too much.....! She reckoned that my husband was not interested in me because I did not wash my smelly vagina...I poured the sulfuric acid on her face..” (FGD1)

The above quote does not portray a picture of a person with low but rather an enhanced self-esteem, and possibly a heightened “ego.” The respondent could have not made her husband to take her to the “other” woman's house and planned a serious attack on her enemy if she had low self-esteem. Perhaps it could have been a helpless situation with a focus towards self-harm rather than the other woman.

Although the current study suggests a relatively average score on self-esteem in women offenders, the researcher is of the opinion that the need to address the issue of self-esteem is important in the rehabilitation of women offenders. While incarceration

may eventually lower the women's self-esteem (see Bloom et al., 2005; Barlow et al., 2014), the same is highly associated to post-prison adjustment and recidivism if not assessed and treated during imprisonment (Gendreau et al., 2001). Offenders with heightened self-esteem would learn to moderate and appropriately use this positive resource within them while those with poor esteem would be empowered to boost their low self-esteem. As has already been discussed, "empowerment" is a booster to self-esteem in women, thus a buffer in criminal engagement. According to Hardesty, Hardwick, & Thompson (1993), Stino & Palmer (1998) and Palmer, Hafner, & Sharp (1994), programs that incorporate literacy in reading and writing are some of the creative ways that may strengthen self-image in women offenders while at the same time act as an intervention on stress management associated to criminal activities.

This study employed the Generalized Self-Efficacy scale by Schwarzer and Jerusalem (1995) to measure the level of self-efficacy among women prisoners in Kenya. According to this tool, self-efficacy is assessed using a psychometric scale comprising of 14 positively structured items measuring the construct on a 3-point Likert scale ranging between 'Always', 'Sometimes' and 'Never', whereby 1 is 'Never', 2 is 'Sometimes' and 3 is 'Always'. The highest average possible score is 42 points. The actual score is then converted into percentage and interpreted as follows; a score of 0 to 49% indicates low self-efficacy, and a score of 50 to 83% indicates normal self-efficacy. The table below shows the findings of the study.

Table 4.13

Generalized Self-Efficacy

Testing statements	Average Maximum Possible Score	Average Actual Score	Std. Dev.
When I make plans, I am always sure I will do it	3.0	1.68	0.51
I normally don't have problems beginning to do my work	3.0	2.14	2.20
I always try doing the things I find difficult without giving up	3.0	1.84	2.54
I always set goals for myself and achieve them	3.0	1.82	0.56
I never give up on doing things before completing	3.0	2.10	0.64
I don't avoid trying to do work that is difficult	3.0	1.91	0.77
When I decide to do something, I do begin immediately	3.0	1.50	0.64
When I try to learn something new, I don't give up till I succeed	3.0	2.15	1.90
When an unexpected problem occurs, I do try to solve it	3.0	1.44	0.60
I don't avoid learning new things when they look difficult	3.0	1.95	0.77
Failure at 1st attempt in doing something, makes me try more	3.0	1.47	0.61
I feel capable of doing most things by myself	3.0	1.97	0.75
I don't always need to be helped by others to complete tasks	3.0	2.18	0.68
I always feel capable of dealing with most problems that I face in life	3.0	2.02	0.63
Average Cumulative Score	42.0	26.17	
Average Percentage Score	100%	47%	

Table 4.13 above shows the results for self-efficacy of the respondents using the generalized self-efficacy tool. In this study, the respondents scored an average of 47%, which was a below average score for a normal self-efficacy. This may imply that majority of the respondents had poor beliefs in their capabilities to achieve goals or outcomes in whatever tasks they engaged in and would be less likely to make concerted effort where need be. For instance, planning is an important aspect of working towards achievement of goals in life. Accordingly, planning is a life management strategy which allows individuals to structure and to manifest control in their lives (Prenda & Lachman,

2001). This skill is crucial not only for achievement of life goals but also for life satisfaction which could be a buffer against criminality. Through proper planning, individuals are able to achieve the tasks thereby boosting their self-efficacy. However, as noted the women in prison score very low on planning which may be suggestive that they are poor at goal accomplishment.

Goal setting is another important activity that demonstrates self-efficacy. Goal setting has been found to strengthen self-regulation which has an impact on behavior (see Davids, 2015). Individuals who believe in themselves are able to set goals that are meaningful to their lives that divert their attention from criminal activity. According to Locke & Latham (1990), goals direct attention and action. The implication is that if individuals have high self-efficacy, they are able to align their actions with more beneficial activities that may act as a buffer towards criminality. Goal setting also enhances self-evaluation (Locke & Latham, 2006). Individuals who set goals are able to self-monitor and make judgments about their performance. Their ability to perform well motivates them to set even higher goals which they pursue to the end. To the contrary, low self-efficacy is associated with anxiety that may make individuals vulnerable to criminal behavior. It is therefore not surprising that they scored low on goal setting.

Poor problem-solving skills is not only associated with low self-efficacy but also a recipe of criminality. Parto & Besharat (2011) observe that problem solving is positively associated with self-efficacy and is an important ingredient for healthy behavior and behavior regulations. Citing Bandura, the authors argue that individuals with low self-efficacy avoid tasks that they perceive to be higher than their ability. Failure in life goals erodes self-efficacy of individuals. Luszczynska, Cao, Mallach, Mazurkiewicz and Schwarzer, (2010) observe that people do not tackle challenging tasks

if they harbor self-doubts. This may explain why the inmates end up committing crimes since they do not address the life challenges before they build up. On failure, people with high level of self-efficacy are not only likely to succeed in life but also more likely to bounce back and recover from failure (Southwick & Charney, 2012). Similarly, persons with high self-efficacy will recognize that failure at first attempt in doing something will make them to try even harder. However, people with low self-efficacy tend to give up easily when setbacks creep into their lives. Moreover, these people consider challenging tasks as threats to be avoided. Since they do not have confidence in their ability to achieve, their feelings of failure could result into depressive moods associated with low self-efficacy that could explain involvement in criminality from adolescence through to adulthood (Bandura, Barbaranelli, Vittorio & Concetta, 2001).

Reduced self-efficacy is thus a major psychological issue associated with criminality in women offenders. Studies (Covington and Bloom, 2007; Salisbury, 2007; Van Voorhis, 2013) show that most women offenders' low belief in their ability to succeed in life is mostly influenced by those experiences of painful, dysfunctional relationships including the traumatic events that they face as they navigate through their developmental stages of life. Further, scholars (Salisbury, 2007; Van Voorhis, 2013) exhort that reduced self-efficacy in women leads to criminal engagement through the use and abuse of substance as a means of numbing their emotional pains. Women with low self-efficacy have low aspirations and are unlikely to make concrete efforts in dealing with challenges that come their way (Rumgay, 2004). This may explain the high cases among women offenders reporting their inability to deal effectively with conflicts or engaging in criminal activities in meeting the needs of their families. As noted in Covington and Bloom (2006), Salisbury (2007), and Van Voorhis (2013), lack of self-

efficacy may promote crimes such as forgery, murder, assault, among others. Rehabilitation programs aimed at empowerment rather than controlling are proposed by Bloom, Owen, & Covington (2005), and Rungay (2004), not only as ideal in boosting self-efficacy but equally important in the enhancement of self-esteem and encouragement of self-responsibility and autonomy in women prisoners.

In summary, the preceding discussion presents the demographic information and psychological needs associated with criminality in women offenders in Kenya. The study found that most women offenders were young mothers of age 35 and had a myriad of psychological needs that need to be taken into consideration. These include but not limited to, relational issues, trauma, low self-efficacy, substance abuse, anger management, among others. Whether these psychological needs of women prisoners are addressed depends on the type of rehabilitation programs offered. The next section examines the rehabilitation programs offered.

4.3.2 Current Available Rehabilitation Programs for Women Prisoners in Kenya

Objective two of the study guides the findings of this section. This research objective sought to find out the current available rehabilitation and treatment programs within the women prisons in Kenya. Table 4.14 below shows an overview of the current available rehabilitation and treatment programs within the women prisons in Kenya.

Table 4.14

Current Available Rehabilitation/ Treatment Programs

Available Program	No. of facility offering the program	%
Computer training	1	6.3%
Primary and Secondary Education	8	50.0 %
Training in Agriculture	9	56.3 %
Hair dressing	7	43.8%
Catering	2	12.5 %
Pottery	2	12.5 %
Tailoring/Dress making	15	93.8 %
Knitting	14	87.5 %
Spiritual Care	14	87.5 %
Individual counseling	14	87.5 %
Group counseling	9	56.3%

The findings in Table 4.14 above show the distribution of the current available rehabilitation programs although not uniformly provided in the women correctional facilities in the country. The sampled prisons were 16 in total. Multiple choices from the facility determined the exact programs available in the given facility. The most common programs included; dressmaking, offered at 15 facilities represented at 93.8%; spiritual care, individual counseling, and knitting each offered by 14 facilities (87.5%). Others included group counseling and agriculture represented each at 56.3% and offered by 9 facilities. Formal literacy (i.e. primary and secondary levels of education) was offered at 8 facilities represented at 50%; while hairdressing was offered at 7 facilities represented at 43.8%. The least offered programs were computer training program that was represented at 1 facility (6.3%); followed by catering and pottery training, each represented at 2 facilities (12.5%).

As reflected in the findings above, most programs offered within the women's prisons in Kenya are vocational or skill oriented. Such programs are popular in the

women correctional facilities for the purposes of impacting skills geared towards economic empowerment. Gender responsive programming identifies the outcome of empowerment gained in vocational and technical training programs as critical in the boosting of self-esteem (Covington and Bloom, 2006; Salisbury, 2007; Van Voorhis, 2013) and enhancement of self-efficacy (Rumgay, 2004) in women offenders. This implies that provision of vocational and technical programs is relevant in gender responsive programming underpinned by psychological needs of women.

The study also established that in some correctional facilities, formal education towards completion of primary and secondary education (50%) is provided as a foundation for better economic possibilities for the inmates in future. As mentioned above, the focus tends though to be on the provision of skill-based programs as was noted by a key informant in the quote below:

“Rehabilitation is one of our key mandate, however we are still in the process of developing a policy to guide the practices....All along we have engaged the inmates in skills that help them to grow. We have technical courses that include cookery, hairdressing dressmaking, knitting and beadwork. Apart from the practical skills, we also have programs that focus on the minds and hearts of inmates...” (PHQ)

Another officer in-charge of a facility noted the following during an interview session:

“Most prisoners are economically disadvantaged...the rehabilitation programs are based on the philosophy of preparing prisoners for community integration in line with the Kenya prison reform agenda and various provisions contained in international covenants. This implies that prisoners are given opportunity to learn a skill that would help them initiate their own businesses or projects and provide for an income when they leave prison...” (OICs)

The vignettes above reflects the quantitative findings that reveals a major focus on vocational/technical training as a means of rehabilitation in comparison to other programs

in the women prisons in Kenya. These are considered need-based programs in rehabilitation since a large number of women offenders are economically disadvantaged. The quote above seems to suggest that the vocational and training programs within the Kenya women prisons are more popular for the offenders because they are aimed at equipping them with skills that might facilitate improvement of their economic status upon release from prison. The argument is perhaps based on the fact that majority of the women offenders are unemployed and thus economically disadvantaged as shown in the demographic findings. As noted already, vocational training programs and formal education are equally important in the enhancement of the psychological concerns of women offenders' self-esteem and self-efficacy.

Van Voorhis & Salisbury (2014); Sorbello et al., (2002) and Van Voorhis et al. (2012) contend that such programs are necessary in boosting both the self-esteem and self-efficacy of women offenders often eroded due to their lack of economic empowerment and psychological factors that negatively impact on them. Although the provision of vocational and technical training programs in the women's prisons in Kenya may suggest a move in the right direction towards addressing some of the psychological concerns in women offenders, the challenge though is on balancing of such programs with other needs-based programs to address the broad range of psychological issues of the incarcerated women. Furthermore, the findings of the current study established that documentations on rehabilitation of offenders (GOK, 1977; GOK, 2010; & GOK, 1979) identifies vocational and technical programs in rehabilitation of offenders, however, the study notes a concern due to lack of specific information on the programs. The Prisons

Act (1977), The Kenya Standing Prisons Order (1979) and the Constitution of Kenya-Prisons Act CAP 90, (2010) clearly states the motto of prisons in Kenya as noted below:

“The core mandate of the Kenya Prisons Service is “Rehabilitation and reformation of offenders through training, counseling, educational and professional Programs” (GOK, 1977; GOK, 1079; GOK, 2010).

The documents however do not explicitly explain “what” programs, the structuring of the programs and implementation of the programs noted. In fact in addressing the concept of rehabilitation and reforms in the Kenyan prisons as stated in its motto, Kinyanjui (2013) in the document titled “*Actualizing Penal Reforms: Best Practices in Prisons in Kenya*” acknowledges that there are many pitfalls undermining the achievement of the rehabilitation mandate in Kenya. Moreover, the documents (GOK, 1977; GOK, 2010) remain silent on other programs directly targeting psychological needs of women offenders. Specifically, the documents do not mention issues related to assessment of issues of dysfunctional relationships, substance abuse victimization, trauma, among others, that are critical in the effective rehabilitation of women prisoners.

The findings of the current study resonate with findings of the USA 2005 Census of State and Federal Correctional Facilities. In the study, 85% of all reporting facilities offered formal educational programs to inmates, while slightly more than half of the facilities, that is 52%, offered vocational training (Stephan, 2008). Although the two studies show similar findings, the levels and standards under which the programs operate may differ significantly.

From the findings of this current study, it appears that there is also no clear policy on the implementation of rehabilitation programs to support the mandate of rehabilitation

of offenders as provided for in the Kenya Constitution- Prisons Act CAP 90 (GOK, 2010). Rather, the prisons department through the correctional facilities seems to respond to the requirement on training of inmates according to its means. This may explain the disparity of the programs in the various correctional facilities as shown in Table 4.14. However, more importantly in this study, lack of clear policy on implementation of rehabilitation programs could be limiting in their effectiveness. This may lead to poor rehabilitation outcomes that may lead to recidivism or poor integration in the society once the prison sentence is over. Moreover, according to Prisons Act, Cap 90 (GOK, 2010) and Kenya Prisons Service Standing Order (GOK, 1979), the programs offered in any facility is a prerogative of the officer in-charge. Notably however, without suggesting an underestimation of the ability of the prison officers' in-charge, it may be possible to argue that lack of clear implementation policy leads to different interpretations of what an effective rehabilitation should look like resulting to disparities in service delivered.

According to WHO disability/world report (2011), rehabilitation services are often incomplete and fragmented due to differences in definition, classification of measures and personnel among other things. This often leads to unmet rehabilitation needs that not only limit rehabilitative activities and participation but also compromise rehabilitation outcomes. Towards this end, WHO (2011) has lamented that good legislation and related policies on rehabilitation, without implementation of these policies, and the development and delivery of regional and local rehabilitation services, have lagged in many countries leading to various systemic barriers in the rehabilitation process that limits the achievement of rehabilitation goals.

Other than economically based programs, the current study showed that individual counseling and worship/religion or (spirituality) were both represented at 14

facilities (87.5%), while group counseling was represented by 9 number of facilities (56.3%). The study established though that counseling and worship/religion and/or spirituality fall under the social welfare department within the correctional facilities. However, worship/religion and/or spirituality, viewed as powerful tools in guiding offenders to reform their lives and deal with personal issues, are independently facilitated by different chaplaincies and religious groups permitted by the correctional department to supplement the government efforts in rehabilitation of the offenders. Although it may be argued that religion on its own may not cure psychological problems, the current emphasis on positive psychology identifies religion as a source of resilience (Southwick & Charney, 2015), which seem to be true with the women offender population as it appears to help them deal with incarceration. Some of the respondents viewed their encounters with the chaplains or pastors or faith community as a form of counseling experience which may have been the reason for the high number of facilities reporting on the availability of individual counseling (87.5%) and group counseling (56.3%).

Akunesiobike (2016) citing American correctional association, observes that religious programs facilitate the social integration. Further, the author argues that religion helps to instill the feeling of guilt on inmates and revealing to them the wrong act they have committed and how it negates moral principle, especially as set by the supernatural. This could be a powerful way of making the inmates reflect on the crimes committed against the society making them reform. However, it is important to take cognizant that religion may not provide practical ways in which the inmates may address their psychological needs. The findings of a study by Akunesiobike (2016) for example, in Nigeria, showed that while religion helped 65.7% of participants to cope with prison life, only 9.3% said that religion helps them to address their psychological needs. This has the

implication that religion may be limited in enhancing psychological well-being of many prisoners.

Similarly, reflecting on the role of religion on psychological wellbeing, Joshi, Kumari & Jain (2008) observe that individuals display religiosity in two main different orientations: intrinsic and extrinsic. Accordingly, those with intrinsic religious orientation live according to the religion they ascribe to, achieve positive outcomes such as better health, decreased anger, hostility and apathy along with increased self-esteem. On the other hand, those with extrinsic orientation use religion for participation in group activities, protection, consolation or social identity. Extrinsic orientation of religion is associated with negative health indices such as depression and anxiety, identity diffusion and irrational thoughts. The implication is that the role of religion in addressing psychological needs, has not been equivocally established and there is need to be more critical in employing religion in addressing the psychological needs of the offenders. It was not clear whether the women offenders had intrinsic or extrinsic orientation of religion as it was beyond the scope of this study. However, it should be recalled that in objective one that tested on the psychological needs of women offenders, majority scored low on psychological health or well-being showing that they might be applying religion extrinsically, which may be a barrier towards the realization of their effective rehabilitation.

With regards to counseling, although the quantitative data showed that most facilities offered individual and group counseling, the actual planning and administration of these programs was reflected in the views of the informants charged with the same as seen below:

“Since we do not have enough trained counselors to help the inmates cope with their issues, most of these women do not have an opportunity to experience counseling. Instead they (inmates) turn to prayer as a way of seeking solutions to their psychological issues.” (OICn)

And from one FGD, participants had the following to say:

“I was transferred to this prison facility from “X” women prison. In “X” prison we had full time counselors and those coming from training colleges and universities to counsel us (inmates)...but in this particular prison, there is not even a single counselor.....in fact most women here do not know anything about counseling.” (FGD3)

Other participants shared their experiences in yet another FGD as follows:

“We do not have any counselor among the officers working in the social welfare office. At the moment though, we have a trainee counselor from one of the university in this region doing her practice/internship...she is the only counselor I have seen in this prison.” (OICn)

At yet another correctional facility, an informant elaborated on the situation of her experience of the three correctional facilities that she has served as the person in-charge:

“This is the third station I am serving as an officer in-charge. In all the prisons that I have worked, I have never had more than one trained counselor. In all the facilities’ there were no designated counseling rooms.....even in the current station. We do not have chairs and when we get trainees coming from colleges/university for internship we try to improvise a healing environment....during the sessions, the women either have to sit on the floor or we improvise water containers for them to sit on.” (OICs)

Although psychological counseling is an important component of gender-responsive programming (VanVoorhis et.al., 2010; Byrne & Howells, 2002; Sorbello et al., 2002), the vignettes above suggest that the counseling services in the Kenyan women prisons are below professional standards. Notably, not all the correctional facilities

provide counseling services to inmates. This seems to be either due to lack of/or limited number of trained personnel and lack of facilities including lack of counseling rooms or healing environments that facilitates healing. While the Kenya prisons department has in the recent years trained some of the officers in basic counseling skills, the quantitative findings of the current study confirmed that 15% did not have a single trained counselor as seen in the first two quotes above. Moreover, in an interview with a respondent in the prisons department, the study established that generally, the numbers of the trained counselors are very few in comparison to the numbers of inmates in the Kenyan prisons as expressed in the excerpt below:

“Our prisons are so crowded while we have very few officers trained in counseling skills. In fact even with the helpthose stakeholders who come with counseling knowledge.....the ratio of counselors to the inmates in Kenya is 1: 500... Moreover our counselors, double up as social workers since counseling is one of the activities that falls under the social welfare department.....we do not distinct between the two roles.” (PHQ)

The quote above shows that within the women prisons’ setup the counselors double up in their responsibilities to include social work that is automatically considered a dual relationship in a counseling practice. Professional dual relationships involve the concept that clients may understand as “conflicts of interest;” a term discussing the potential problems of counselors’ engagement in dual roles with clients (Corey, Corey & Callanan, 2007; Lazarus & Zur, 2002). Whereas the different forms of dual relationships (e.g. counselor versus social worker, therapist versus gym instructor, therapist versus business partner) may imply different negative side effects in clients (Doverspike, 2008), the APA (2002) Ethical Standard 3.06 (conflict of interest), discourages any form of dual

relationships that may impair the therapist's objectivity, competence or effectiveness in performing their functions as psychologists/counselors.

As argued by psychologist Abraham Maslow (1943), the psychosocial worker in the Kenyan prison setup may find it difficult to engage in counseling of clients before addressing the provision of basic needs of the inmates for optimal functioning before any other needs are addressed. This leaves the counseling services in jeopardy and mostly in the hands of the few stakeholders seconded by the NGOs, FBOs and interns from colleges who may not be able to undertake fully the tasks required of them as some may lack skills in counseling and also due to bureaucracy that governs such facilities. These limitations were voiced by representatives of an NGO and FBO as seen in the two quotes below:

“Our role as the Catholic chaplaincy is to journey with inmates, staff and their families through spiritual support and counseling. We provide spiritual materials for their use, come up with programs to help in their spiritual growth and also assist with their reintegration to the society. We are trained as catechist which gives as a general formation....there is however lack of ongoing formation by the church because of limited funds; our programs are not funded by the government.Our big challenge is that we are not security officers....we are not allowed to walk into the facilities without security and we are not allowed to work directly with high risk offenders.....There are days that our programs are affected since they are considered second to the government programs.”(FBOc)

On their work as major stakeholders in prisons, the respondents from an NGO had the following to say:

“We come in as main stakeholders to enhance the on-going reform agenda in the Kenya prisons-that is, rehabilitation and reintegration. We focus on skill transfer and counseling of inmates. Most of us are trained in social work and other fields however like me I have a certificate in counseling.....As regards our challenges, we would like to work closely with partners but, everyone wants to do

their own things.It is not always easy to penetrate/enter any time to work with prisoners- we must strictly follow the rules of prisons.” (NGOf).

The two vignettes above affirm the important role played by stakeholders in supplementing the government’s efforts in rehabilitating offenders and reintegrating them back to the society. While the FBOs and NGOs offer a lot in their broad approach in rehabilitation, the vignettes suggest challenges that affect their involvement. For example, while everyone has a natural ability to carry out some form of counseling, there are some technical aspects of therapy that calls for a broad training in psychology going beyond a certificate level of training. These may include amongst others assessment of risks using psychological tools and employment of treatment modes based on relevant theories. A minimal training in counseling skills as suggested by the informants may not be sufficient for such engagement. The vignettes also suggest the challenges for the stakeholders in their roles since they are not uniformed personnel in the prisons. On group therapy, the study established that groups that exist are ideally “support groups” for people living with HIV/AIDs as expressed in the quote below:

“We do not have any arrangement for group counseling except for the HIV therapy groups managed by the Ministry of Health.....these have however been very helpful for inmates living with the HIV/AIDS.” (OIC-1)

As seen from the quote above, the current study established that the existing groups in the women’s prisons in Kenya are mainly support groups for persons living with HIV/AIDS. Other therapeutic groups designed to use cognitive-behavioral approach such as psycho-educational and counseling/therapy groups seem not to be a consideration in treatment within the women correctional facilities, although proven effective in corrections (see Yalom, 1995; Corey, Corey, & Corey, 2010; Van Voorhis & Salisbury,

2014). The findings in the current study imply that this form of therapeutic approach is not emphasized in treatment of women offenders in Kenya. Ineffective use of group therapy may probably be due to lack of expertise on group work or knowledge on the importance of group work as a mode of intervention and healing in psychotherapy. Arguing in support for group therapy, Salisbury (2007) and Bloom et al. (2005) identify the power of group in women offenders working through addiction, specifically drugs, anger and conflict management among other life-skills associated with criminality in their lives. Through the support of group members, women offenders equally gain confidence in working through their issues more so as they realize that they are not alone, but others go through the similar struggles (Bloom et al., 2005).

Further to limitations in resource personnel and facilities for counseling services, this study did not establish availability of any specific specialized counseling programs such as anger management, cognitive training skills, drugs and alcohol programs, violent offender programs, parenting skills among others in the prisons' facilities. A key informant from the prisons explained the state of specialized counseling services as seen in the quote below:

“While we do acknowledge the need for specialized programs and treatment for offenders, we are not yet there....we have learnt a lot from Norway and Sweden through our visits....We are slowly getting there!” (PHQ)

In view of the above quote, the counseling services offered seem to be general with none designed to address unique psychological needs of women offenders. This negates the principle of effective rehabilitation that dictates identification of the risks, needs and reponsivity of the offenders before instituting treatment. It is therefore possible to argue that the role of prisons in empowering women inmates to be law abiding and

productive members of the society upon release from prison may still be far from realization.

Since the study established that there existed some rehabilitation programs in the women prisons in Kenya, the study sought to understand the participation level in the current available programs. This was because perceived benefit of the program is an important motivator to participation. To test this, a dichotomous approach, whereby the respondents gave a ‘yes’ or ‘no’ to the program or programs that they had participated in or were currently undertaking at the facility where they were incarcerated was employed. The responses are presented in Figure 4.2 below. These findings were corroborated with the FGDs.

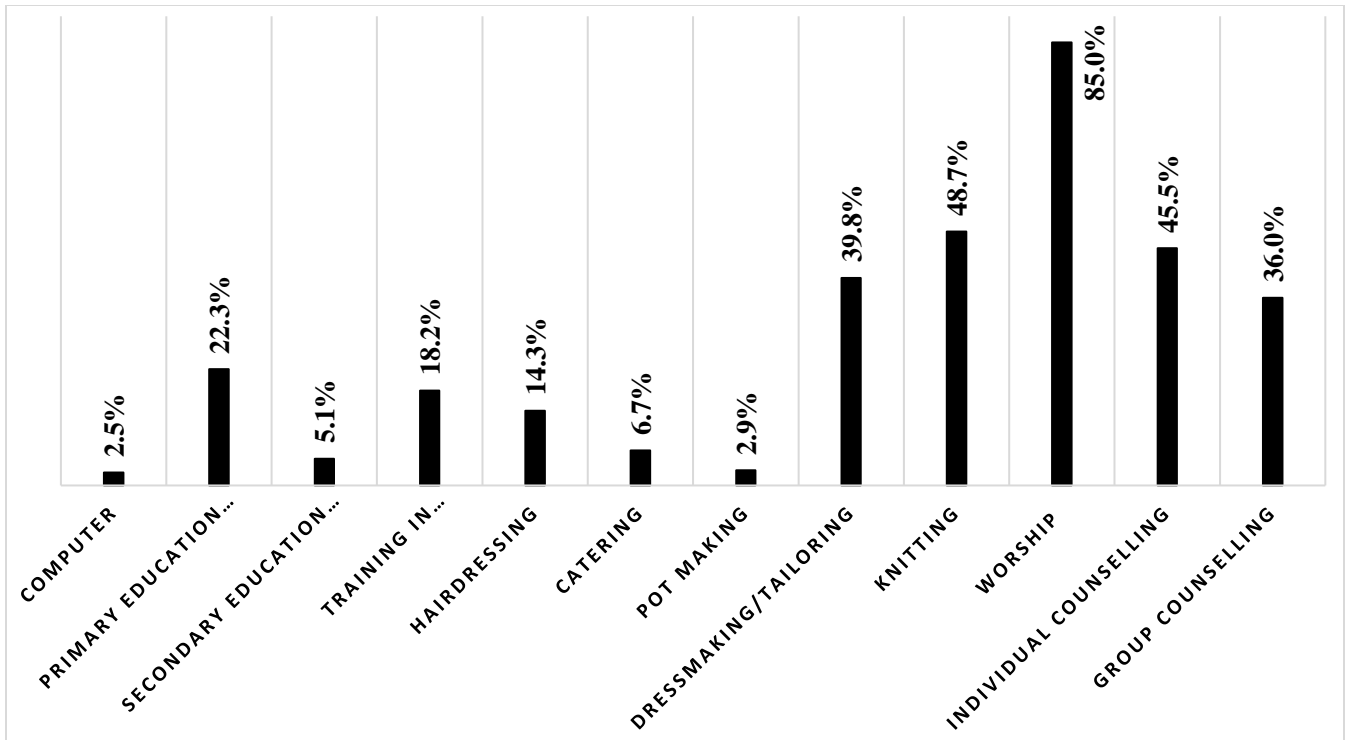


Figure 4.2 Participation to the Available Rehabilitation Programs

Figure 4.2 above shows the percentages of offenders participating in each of the currently available rehabilitation programs in the women prisons in Kenya. These findings reflect the findings and discussion on the available programs in the women's prisons in the forerunning discussion. According to the findings, majority of the respondents (85%) participate in religion (worship and praise) followed by specific vocational training programs namely, 48.7% in knitting and 45.5% participating in individual counseling. Programs recording very low participation included, for example, computer training (2.5%), pot making (2%), catering (6.7%) and hair dressing (14.3%).

The above findings on the participation in the programs available are not unique to this current study. Other studies, for example, the previously noted 2005 Census of State and Federal Correctional Facilities (USA) study quoted by (Crayton and Neusteter,

2008) reverberated similar findings. The scholars in the above US study observed a decline in the participation level by women offenders in the vocational and formal educational programs, which had dropped from 31% in 1991 down to 27% by 2004. The waning participation in the vocational and educational programs in the study may have been due to several reasons that could be similar to those reported in the California Legislative Analyst's Office (LAO, 2017) report on improvement of in-prison rehabilitation programs. The report identified various factors that contributed to low utilization of rehabilitation program slots that included, first a lack of teachers or some programs were closed up for security concerns. Second, there were cases of inmates enrolled in multiple slots at the same time, implying that the number of inmates served could be less than the number of slots. In addition, the report noted cases where the number of inmates served in a year was greater than the number of slots on programs available, explaining why some inmates were released from prison without receiving rehabilitation programs for which they had an assessed need. While previous discussions on available rehabilitation programs show existences of a broad range of programs for women offenders in Kenya, the current study established that there was generally low level of participation in the rehabilitation programs. Several factors including limited and non-existence of programs, inadequate facilities and lack of teachers or personnel to facilitate the programs were some of the concerns noted by both the offenders and prisons officers as shown in the quotes below.

One of the inmates expressed her experience as follows:

I have been pleading with the madams for an opportunity to train in dressmaking but every time I make a request I am told to wait until there will be a chance.... but again I stopped asking because the opportunity to learning a skill is only given to those perceived as well behaved...I don't know! It is not good!" (FGD1)

Another inmate had the following to say:

“I will never go to the industry to learn anything..... why must a fellow woman treat me like a child..... I hate the shouting.....I am over 30 years of age. Does “marekebisho” (rehabilitation) mean that the officers shout and treat us with disrespect...? The other challenge is about ourselves- where a lot of times inmates fight one another, shouting, abusing... I feel bad for my child and other children growing up in this kind of an environment.’ (FGD2)

On formal schooling, another inmate had the following to say:

“There is only one teacher handling the prisoners undertaking the primary and secondary levels of education. The classes are not offered on a consistent basis nor do we have textbooks to help us follow on the subjects being taught....”
WPEm

The quotes above represent the voices of the participants who are supposed to be the recipients of specific rehabilitation programs. The issues noted by these respondents included, lack of facilities, few or no teachers in some facilities and inconsistency in the administration of the programs. Some of the respondents attribute their lack of interest in the programs to harsh and abusive treatment by the wardens. Some of the inmates felt that some officers discriminated on selection of who participate in available programs, therefore, participation was not automatic to anyone who was interested. Similarly, some of the respondents felt that the officers did not allow them to participate in the rehabilitation programs as a way of punishment and discipline, particularly for those perceived not well behaved.

While most of the quotes suggested blame on the corrections department for low participation, one of the excerpts suggested a possibility of some of the inmates avoiding sharing programs with their colleagues due to misunderstandings and possible conflicts amongst themselves. The painted prison’s environment in itself may be a major contributory factor to ineffectiveness in rehabilitation. It may be recalled from previous

discussion that there was need for a safe, respectful and dignified environment as fundamental for behavioral change in women offenders. As noted in their profile, women in the criminal justice system indicates that many have grown up in less than optimal family and community environment. Thus, according to Bloom, Owen, & Covington (2005), and Gehring, Van Voorhis, & Bell (2010), the reality of the demographic information on women offenders demands every precaution be taken by criminal justice professionals to ensure that the criminal justice does not recreate the abusive environment that many of the women offenders have experienced in their lives. An environment characterized by abusive language, beatings and fights as expressed by the respondents may only lead to re-traumatization, bitterness and negative influence through the modeled behaviors and therefore defeating the goals of rehabilitation.

During the interviews with the prisons' wardens and stakeholders, the low participation by the offenders in the programs were attributed to factors as seen in the quote below.

An informant had this to say:

As you can see, we do not have enough equipment and materials to engage all the inmates in learning a skill that can help them upon release from prison..... We have only one sewing machine that is working and two knitting machines provided by one NGO.... Moreover, the industry can only accommodate about 20 inmates at one given time out of the 270 inmates currently held in this prison....[pause]...We have many challenges in helping these women reform..." (OICs)

In the interview with the prison's officer in the above excerpt, the low participation in the programs by the offenders were attributed to lack of or limitation workspace commonly referred to as industry, equipment and machines for use. To be specific, some of the industries not only lacked enough machines, furniture and necessary

materials for use but the facilities were in deplorable conditions and small in size, to comfortably accommodate the numbers that were enrolled for the programs that involved mainly the acquisition of skills, for example, dressmaking, knitting and embroidery work. To address the concern on few teachers for the formal schooling, the study established that some facilities assigned other inmates with teaching background to help teach or tutor their fellow inmates and to prepare them for the national examinations as noted in the quote below:

“There are many challenges experienced in our prisons in the provision of formal education to the inmates.....most facilities have inadequate books, desks chairs....a given prison may have one trained teacher to handle all subjects including those she did not train in.... the primary section often has one to three teachers who are expected to help the secondary school teacher in subjects like English and Agriculture. We do often identify convicted offenders and remandees who have been teachers before to help.....However we cannot always count on them. They are not inconsistent and some will drop out from teaching at will. We cannot then force them to teach.” (OIC-1; OICs)

The problems associated to formal schooling in prisons was extensively observed during the data collection exercise. All the facilities lacked classrooms, laboratories for teaching science subjects, had inadequate number of teachers, books and materials for the programs. Whether trained or not, a move in having inmates teach their colleagues may have some serious consequential implications. Unreformed inmates with questionable behaviors and distorted thinking may negatively influence their fellow inmates as noted in previous studies (Covington, 2014; Nordahl, 2013). The studies pointed to cases of bad influence by inmates to their colleagues during incarceration with some inmates leaving prison worse than they came. The low numbers of inmates enrolled in the current programs together with the concerns raised with regards to rehabilitation suggest a lack

of clear guidelines in admission of the inmates into the available programs. It is therefore deduced that the high numbers of uneducated inmates recorded in the demographic variable on education (see page 56) transit back to the society on release from prison less empowered to deal with issues associated to their criminal behaviors. The findings further suggest an urgent need in policy review on rehabilitation of women offenders if incarceration is to have any transformative effects.

4.3.3 Assessment of the Availability of Specific Gender Responsive Programs

Although there is acknowledgement that gender matters in the rehabilitation of women offenders in Kenya, the study established that the concept of gender responsive programming in rehabilitation of offenders is rather silent, and not systematically integrated in the various rehabilitation processes. Although some of the facilities showed that both individual and group counseling were components of rehabilitation practices, it was not clear whether a broad range of needs associated with the women offenders were addressed within the framework of the currently available programs. To this end, the current study found it necessary to explore how the available programs addressed issues identified with women offenders such as, parenting and parental skills, drugs and alcohol use/abuse, victimization and whether the programs provided a framework for empowering offenders with life skills training and means of reconciliation and family bonding. As has already been noted in the review of literature, in the last two decades, psychologists (see Zaplin, 2008; Salisbury et.al., 2012; Van Voorhis & Salisbury 2014) working in women corrections have advocated not only for gender assessment tools but equally programs that are gender responsive that address specific unique issues, which may hinder rehabilitative and reintegrative success of women offenders to the society. Such programs are those that target gender specific issues, such as trauma,

dysfunctionality in women’s lives, parental distress, reduced self-efficacy and poor self-esteem often responsible for paving a woman’s path toward incarceration (Clark, 2009). Moreover, advocates of gender programming caution corrections administrators on programs marketed as “gender-neutral” that are normed on male population and therefore captures mostly male offenders’ pathways to criminality. Gender responsive or treatment programs are therefore noted as those that acknowledge the unique pathways to criminality in women offenders. In view of this, the respondents were asked to identify by ticking [✓] in the boxes that were provided the gender programs/treatments that were offered within their respective correctional facilities.

Since individual and group counseling had been part of the current rehabilitation programs, these were not included in the presented list. The results of the gender-responsive programs/treatment focuses are shown below in table 4.15.

Table 4.15

Gender-responsive (Need Based) Programs and Treatments Offered within the Women’s Prisons in Kenya

Gender Responsive Program/Treatment	No. of facilities offering program	Percentage
Parental skills training	0	0.0%
Screening, Detoxification and alcohol and drug use and treatment	0	0.0%
Treatment program on Victimization (Sexual and Physical) Abuses	0	0.0%
Life Skills Training (conflict, anger, stress, time management	2	12.5%
Prison Open Day	7	43.8%
Skills on improvement of interpersonal/ improvement of relationships between prisoners and their spouses, significant others	1	6.3%

The findings in Table 4.15 show the current situation of the available gender responsive (need-based) rehabilitation and treatment programs within the women's prisons in Kenya. According to the findings there are no programs on parental training and treatment for drug and alcohol users, neither is there a program for inmates with histories of sexual and physical abuse. The findings show that 12.5% of the correctional facilities offer life-skills training; while 6.3% of the correctional facilities offered a program on helping women work through their dysfunctional relationships with their significant others; a total of 43.8% of the correctional facilities had an "open day" program, commonly referred to as "remote parenting. The remote parenting program having been introduced in the Kenya prisons in 2011 was not only to provide an opportunity for prisoners to address their children's issues requiring their attention as parents, but was also to provide an opportunity for inmates and families to address other relational issues for bonding purposes (Onyango-Israel, 2013).

Although the findings above gave an indication of a problem in the process of development and implementation of gender-sensitive programming, it was also important to address the question of whether a noted program was effectively addressing the needs of the offenders. The study further sought to find out the participation level in the gender responsive programs that were available. The extent of participation for those programs that did not exist were not included. Table 4.16 below shows the findings on the participation level in the gender-responsive programs.

Table 4.16

Extent of participation in Gender-responsive programs

Program	% of inmates participating
Life skills training	18.8%
Open days for family reunion/bonding	35.0%
Training on Skills in interpersonal relationships with spouse/ family	19%

The study finding in Table 4.16 above on participation by the respondents in the gender-responsive programs corresponds to the findings on Table 4.15. The programs that were in none existence that is, training in parenting and parenting skills, screening for specialized treatment for alcohol and drug use/abuse and specialized treatment for sexual and physical abuse or histories of abuse (healing from trauma) are not reflected in Table 4.16 since the participation level in the programs was obviously not there. The study found that 35.0% of the respondents were actively involved in the open day program; while 19% participated in training on skills on interpersonal relationships with spouses or family members. These findings may imply that despite research on women and crime, rehabilitation programs and services available to women offenders in Kenya are yet to address the psychological needs of women offenders. The perceived goals of the open day's program are a positive move towards addressing issues of dysfunctional/strained relationships, reconciliation and building stronger ties between inmates and their spouses and other family members.

In view of the argument posed by relational theory of psychological development of women (see Van Voorhis, 2012; Zaplin, 2008), remote parenting, if implemented well, can offer family support and thus provide an avenue for building stronger relationships,

particularly those that are strained. Moreover, visits by family members and friends can demonstrate acceptance of the offender despite her behaviors, leading to inner peace thus fostering transformation and a total change in one's way of viewing life. As noted in humanistic approaches and philosophy, a feeling of belonging and affection are among other essential human needs that promotes psychological wellbeing (Wilkins, 2010; Maslow, 1943) likely to contribute to the desired changes in offenders. Similarly, remote parenting can demonstrate forgiveness again, positively impacting on the women offenders as they undergo rehabilitation.

The study, however, established that there are no concrete policy guidelines or clear plans on how the open days are organized to ensure their effectiveness. This has led to variations on how the different facilities are implementing the program with some having components not clearly defined to match the program's intended purpose. Moreover, the study noted that not all the correctional facilities have implemented the open day program. In one of the correctional facilities, an inmate had the following to say:

“This is usually one of my best days in prison and I could say the same for most inmates whose family members: spouse, children and friends get to come. The prisons usually cook for the inmates and their families. It usually feels like one BIG Party of about 800 people! We work ourselves to the bone but it is worth every bit! A part from the eating, we entertain our guests...on this day all our worries vanish away.....I love to see inmates bond with their families especially their children...” (FGD1)

While the quote above suggests that some of the inmates feel that the open day program is an avenue for them to bond with their family members, the quote also suggests that a big part of the day entails planning for and actual feasting and

entertainment. However, there seem to be no curriculum or content in place to guide a systematic process for the offenders and families to have quality time for relational concerns nor is there a guide for a reconciliatory process through restorative justice. The study further showed that not all the inmates received visitors on the remote parenting (open) days. According to the quantitative findings (see Table 4.16), only 35% of the respondents indicated that their families or friends visited on open days. The rest, that is, 65% of the respondents did not receive any visitor on such days. The study did not however establish how the families and friends of the inmates received invitation to the open day program. However, based on the general findings on lack of clarity on the development and implementation of rehabilitation programs, it may be possible that no distinct plans are in place to ensure that every inmate's family or relations are invited for the occasion.

It is therefore possible that amongst many other factors, many of the families and friends do not participate due to lack of information about open days as noted in the quote below:

“Most inmates are never in touch with their families....we do not have a system in place yet on how to contact families for the open days.....those who have contacts may request the welfare office to contact relative through the phone at a cost.....such days are not officially dated for a specific time that could allow relative to plan..”(OIC-1)

The quote above confirms lack of clear information to inmates' family members for whom the day is meant to relate openly with their kin and prisons authority. To that end, it is arguable that the idea behind remote parenting is a noble one, however, the program is yet to meet its goals. This implies that offenders with relational issues from either spousal or with other family members eventually return home having not addressed

or learned ways of addressing these concerns and therefore may find themselves in similar situations that may have contributed to their current imprisonment. They are therefore likely to return to prison if they do not learn skills to refrain from previous crimes.

As has already been noted and presented in Table 4.15 and Table 4.16, the current study found that none of the women's correctional facilities in Kenya offered a definite training program in parenting and parenting skills and therefore none of the offenders learned skills related to parenting. It may be recalled that a majority of the respondents in the current study had recorded criminal behaviors such as child neglect, forgery, and fraud as motivated by their lack of pre- and post-natal skills amongst other factors. However, the study findings reveal that currently there is no rehabilitation program to address parental distress in women offenders. Parental distress, often associated with lack of preparedness in parental roles in women offenders indicates a need for programs geared towards the empowerment of young mothers with necessary parental skills (Salisbury, 2007; Berman, 2005; Ross et al., 2004).

Considering that the young mothers would eventually return home to resume their parental roles and responsibilities, such programs would perhaps provide them with hands on skills in childcare and other skills thus reduce their chances of re-incarceration. Arguing on the importance of gender sensitive programs, Ferraro & Moe (2003) and Salisbury et al. (2006) note the necessity of empowering mothers in correctional facilities with parenting skills in reducing their level of parental distress and therefore crimes related to the same as substance abuse, forgery, child neglect and murder of their own children (Nordahl, 2013). Due to the findings on lack of programs that directly help mothers acquire coping strategies in their parental roles and responsibilities it may imply

that those incarcerated mothers with the need for parental skills return home less prepared to deal with similar issues that may have led to their incarceration. The finding suggests the ineffectiveness of rehabilitation programs in addressing the need for parental training of women offenders in Kenya.

Accordingly, as noted in Table 4.15 and Table 4.16, the current study established a none focus in substance abuse and addiction treatment for women offenders in Kenya despite the study having found that alcohol and other related substance use was a contributory factor to incarceration of women in the correctional facilities. It will be recalled from previous excerpts on how some of the offenders noted the difficulties they went through as they tried to cope with the serious withdrawal symptoms of alcohol and drug use at the beginning of their imprisonment. Not only do the facilities lack a specified drug recovery program such as alcoholic anonymous (AA), the study found that none of the correctional facilities provided assessment or clinical detoxification as a first step towards treatment and recovery.

While there may be an assumption that through incarceration the addicted woman may desist from substance use or abuse, corrections need to provide a comprehensive care for the ‘sick woman’ to learn more about the addiction as a disease for complete recovery. It is likely that if the problem of substance abuse is not considered and treated during rehabilitation, chances are that women who enter the facilities with the problem are likely to “relapse” from the forced mode of quitting the use of substance on release from prison. The available data and the findings of the current study seem to be convincing and suggests an urgent need for women’s corrections in Kenya to incorporate a comprehensive rehabilitation program and treatment focus for women who enter prison with alcohol and drug use and addiction problems. Such a program might help many of

the women to learn about the negative effects of substance use including ways of dealing with issues in a constructive way rather than use of substance to numb their pains.

The current study further showed that although 18.8% of the participants indicated that they had participated in life-skills training, none of the correctional facility had a life-skills program nor was there an indication that it was incorporated into other programs related to rehabilitation. While acknowledging that traumatic life experiences are critical factors and may highly be associated with criminality in women offenders, several studies (Covington, 2014; Belknap, 2007) show that most women offenders lack basic life-skills to negotiate through life challenges which explain their tendencies to criminal behaviors. On the same note, scholars (Lindsay & Michelle, 2013; Gerber & Fritdsch, 1995) argue that majority of inmates pose serious handicaps including little or no experience in life skills related to job hunting, uncontrolled anger, inability to establish healthy personal relationships, and failure to establish realistic—or any—goals; making it hard for them to reintegrate into society. The scholars attribute the inability or unwillingness among most women offenders to choose ethical behavior over unethical behavior to their lack of life skills.

Some of the successful gender responsive programs such as, Helping Women Recover, Beyond Trauma: A Healing Journey for Women (Covington & Bloom, 2006) are comprehensive in design, incorporating content and activities that match the needs and risks commonly found among women offenders. In an extensive outline on program strategy for women offenders, Correctional Services of Canada (2004) suggests a need for living skills in rehabilitation in response to tackling its deficit common among women in conflict with the law. To enhance the living skills in women offenders, CSC developed the “Reasoning and Rehabilitation Program” also referred to as “Cognitive skills training

program” and the Anger and Emotional Management Program. Such programs if embedded in rehabilitation programs could help women prisoners correct their behaviors and learn to survive in a socially desired way. According to Red Cross (2013), life skills are essential elements in empowering people to cope with life and its challenges and changes. Life skills support psychosocial well-being, by promoting good communication, positive thinking, analytical skills and goal setting, cooperation and coping. Strengthening life skills helps individuals and communities to manage challenges and risks, maximize opportunities and solve problems in cooperative, non-violent ways.

To elucidate the currently available programs within the women correctional facilities in Kenya, the officers’ in-charge of the correctional facilities through interview schedules were asked to comment on whether or not the rehabilitation programs were informed by any model or theory. One of the officers in-charge commented as quoted below:

“Yes, the programs offered are guided by the “risk-need” model of rehabilitation....when the women are brought to us we train them so that when they go back home they have skills to use that can enable them earn a living and also be able to feed their children without engaging in criminal activities again.. ”
(OICs)

Another officer in-charge had the following to add:

“The programs offered are guided by the ‘needs’ principle. We provide the vocational training or education to the women because we realize that they need skills that can boost their economic empowerment.....We keep learning from corrections in other parts of the world through visits and conferences.” (OIC-1)

The vignettes above imply that there is awareness that effective rehabilitation program works within a framework and model. However, the respondents did not suggest any specific model guiding the current development and implementation of rehabilitation programs in Kenya. Moreover, due to lack of documentation on the same, the researchers had no clarity on what guided the programs. It may be assumed that the respondents in the above excerpts may have been referring to the R-N-R model of offender rehabilitation (Andrews & Bonta 1998); currently dominating rehabilitation practices across the world as being applied in the correctional facilities. However, the above excerpts did not qualify the use of the R-N-R model. For example, in both quotes, there was no indication of assessment, screening and placement of the offenders to programs according to individual's needs deemed necessary by the R-N-R model of rehabilitation.

The second quote may imply that there is an assumption within the corrections department in Kenya that almost all women offenders' lack the skills needed for economic empowerment qualifying them automatically for assignment to a skill-based program. The above assumption is considerably biased since such an assumption does not take into consideration assessment for risk-needs that is critical in offender rehabilitation (Andrews & Bonta, 1998). Although vocational training may be a need for majority of the offenders considering that most of them lack skills and education for formal employment as indicated in the demographic findings, the current study also showed a critical need for treatment of other psychological needs of victimization, trauma, parental distress and drug use/abuse. If treatment focuses only on empowerment of the offenders with skills geared towards economic empowerment, this would mean that a range of psychological needs of women offenders remain unaddressed in rehabilitation. However, with gender responsive programming not currently in place this may only be a noble

practice but with no much effect since what is learned is unimplemented fully. Overall, from the forerunning discussion, there seem to be an urgent need for the government and policy makers to move the new knowledge on rehabilitation of women offenders to an actual action plan if rehabilitation is to be effective and meaningful in the lives of women offenders.

4.3.4. Effectiveness of the Rehabilitation Programs in the Women Prisons in Kenya

The third objective of the study was to assess the effectiveness of the rehabilitation programs in addressing the psychological needs of women offenders in Kenya. As argued in the introductory chapter and in section 2.3.1, women have different psychological needs that are crucial for effective rehabilitation. The study, therefore, sought to establish whether gender was a key variable that informed prison practices and more importantly rehabilitation of women offenders. In this study, the effectiveness of the rehabilitation programs is therefore, measured by the availability of gender-responsive programs and participation level by the offenders in the programs.

Previous studies (Van Voorhis et al., 2010; 2012) define gender-responsive programs for women as those whose content, delivery, and cultural orientation addresses the unique needs and characteristics of women that influence their patterns of offending. Similarly, Lanctôt (2017) quotes the Center for Gender and Justice as defining gender responsive services as those that “create an environment through site selection, staff selection, program development, content, and material that reflects an understanding of the realities of the lives of women and girls and that addresses and responds to their strengths and challenges.” Viewed as a step towards effective rehabilitation of women offenders and a means of reducing recidivism, gender-responsive services arose from

research showing that pathways into, experiences of, and outcomes of court involvement differ by gender (Lanctôt, 2017).

In acknowledging that gender is a consideration in rehabilitation, the Kenya Prisons Services, like other global correctional services, considers the accommodation and treatment of female offenders from their male counterparts a step towards effective rehabilitation as reflected in the Prisons Act, Cap 90 (GOK, 1977):

“Male and female prisoners shall be confined in separate prisons, or in separate parts of the same prison in such a manner as to prevent, as far as practicable, their seeing or conversing or holding any communication with each other” (Section 36)

The above statement shows that the corrections department deems as necessary the confinement of male and female offenders in separate facilities. While the move may be a reflection that the corrections department acknowledges that gender matters in rehabilitation, the quote above does not explicitly explain the reasons for the separation in so far as rehabilitation due to needs. Several assumptions could be made in an attempt to interpret the above quote of which one may be that such separation is done to avoid relational issues that may arise between male and female offenders if confined in the same facilities. Comparably, it appears that the first step in rehabilitation that involves screening of offenders before assigning them to a program is not a mandatory practice in rehabilitation in the correctional facilities. One of the respondents noted as follows:

“When the police bring prisoners to us after they have been convicted by the courts, they are received by the admissions board....however admissions usually focuses more on details of the offender’s crime; and any recommendation by the courts. The offenders assigned to their sleeping wards and duties. Some are lucky, depending on space available to learn a form of trade in the industry” (OIC-1)

Responding to the question as to whether assessment and screening tools are available in determining needs and placement of offenders in a program or treatment, the same officer quoted above had the following to say:

“The admission board is responsible for interviewing/screening the inmates on their needsbut I must admit that this does not always happen....we do not assess for drug use in any of the prisons in Kenya because we do not have the capacity”...(OICn)

The responses above do not complement the findings of the introductory chapters of this study that account screening of offenders as a critical step in rehabilitation. Screening is necessary as it facilitates the aligning of rehabilitation programs to identified needs for effective rehabilitation. Similarly, it may imply that the Prisons Act (GOK, 1977), confirms the lack of screening of the inmates before placement into rehabilitation programs as noted below:

“At every prison, there shall be a Reception Board consisting of the officer in charge and other persons as the Commissioner may determine, who shall interview every long sentence prisoner as soon as possible after reception in prison and consider what arrangements are to be made for his training.” Cap 90

While the above statement confirms that every correctional facility may have an established reception board, the above statement provides a rather narrow scope of its mandate. The statement does not indicate any form of screening of offenders and placement into programs that addresses their needs. Besides, the statement suggests that no treatment programs other than training programs are available in the correctional facilities. This implies that other gender responsive needs associated with criminality in

women such as victimization, dysfunctional relationships, trauma, substance use and its related issues among others, remain unaddressed in rehabilitation. Moreover, the statement implies that only a category of offenders is provided with training while at the same time the provision does not clearly state who the long-sentenced offenders are.

Consistent in rehabilitation literature and in support of the R-N-R Model by Andrews and Bonta (1998), the first model in offender rehabilitation, needs assessment is a vital process to successful rehabilitation of the offenders. Therefore, whether in argument for gender-neutral or gender-specific programs, needs assessment is an essential and first step in rehabilitation as it facilitates aligning of rehabilitation programs to the identified needs. Van Voorhis et al. (2010), Van Voorhis (2013) and Bryne and Howells (2002) argue that effective assessment is crucial as it illuminates targets for interventions and its value extends beyond decision-making as it guides interventions and supervision conditions that promote the rehabilitation of women offenders.

As noted in the preceding discussion of the current study, both qualitative and quantitative findings identified victimization, dysfunctional relationships, parental distress, and reduced self-efficacy as major psychological needs of women offenders in Kenya. Other psychological needs reflected in the current study included trauma, PTSD and substance abuse (drugs and alcohol) that were influenced by the major psychological needs. For example, cases of trauma and PTSD, substance abuse and its related problems were consequences of victimization and parental distress. However, as noted in the forerunning discussion, despite the above findings, the current study established that most of these psychological needs were unaddressed in rehabilitation due to lack of gender responsive program and services.

Although a necessary component in gender responsive treatment, the current study established there is no treatment in the correctional system that addresses issues of childhood or adulthood victimization. Similarly, the study established that there was no focus on alcohol and drug use/abuse treatment across the different facilities. One respondent narrated her experience of coping with withdrawal symptoms due to the lack of treatment focus for alcohol/drug addiction as seen in the quote below.

“I have not had an access to heroine since I was jailed.....I was used to taking the drug that I began using over 7 years.....I became very sick when I could not get it here in prison, but I am getting better now.... I had bad diarrhea and abdominal pains. ...I still sweating badly and at times I vomited so much...I thought I would die, but God saved my life..... I still cannot get my sleep easily and my eyes are very painful.” (FGD4)

An almost similar experience by another respondent was as follows:

“I’m suffering for not taking the alcohol that I was so used to. “My sleep pattern is so bad.... are not OK., I feel emotionally down; Sometimes I feel fine and at times I feel like I am dying.” (FGD5)

The above quotes depict cases of two substance users who struggled to cope with “protracted withdrawal symptoms (PAWS)” days into weeks in their imprisonment. Heilig, Egli, Crabbe, & Becker (2010) define PAWS as a condition that leaves recovering addicts and alcoholics feeling worse from the withdrawal symptoms. The above scholars argue that PAWS must be handled professionally otherwise it can be fatal. At incarceration, alcohol and drug abusers are without choice compelled to quit the use of the drug or alcohol that they were accustomed. Like in any case of sudden withdrawal of a substance of abuse of addiction, the affected persons go through a range of emotional, behavioral, and cognitive impairments. The reactions that the respondents in the above vignettes expressed were signs of PAWS. Carty (2016), and Heilig et al. (2010) explain that these symptoms are signs of damages to pathways of reward, pain relief, stress

maintenance, sleep and arousal, learning, and memory and may last long beyond quitting their specific substance of choice.

Although the consequences of withdrawal from dependency of drugs or alcohol are severe and may result into death, the study found that currently there are no clinical interventions in place to support inmates with addiction or abuse of drugs and alcohol at incarceration time. As noted in the above vignettes, majority of inmates with drug dependency syndromes go through the painful withdrawal symptoms without medical support in all the women's correctional facilities in Kenya. The current study did not establish whether the same applies to the male correctional facilities. Moreover, this exposes them to threats of losing their lives. The findings of this current study and arguments posed on issues of victimization and substance use among women offenders in view of lack of treatment programs implies that women offenders with similar issues transit back to the community on release ineffectively prepared to deal with the issues and their outcomes. Chances remain high for those who had alcohol or drug problems to relapse to substance use when released from prison. The result is for them to recommit crimes and return to prison.

This current study established that dysfunctional relationship was another psychological issue that led to criminality in women offenders. As was earlier noted, 50% of the respondents associated their imprisonment with dysfunctional spousal relationships. Characterizing these relationships was majorly abusive, neglectful and absent spouses. These contributed to criminal activities related to fights, substance use and to serious crimes such as murder. This finding necessitates provision of programs within the corrections that may help women deal with the emotional turmoil. The current study however established that only 7.7% of the women's correctional facilities in Kenya

had a program that provided skills in dealing with issues associated with dysfunctional relationships. The quantitative finding was corroborated with the finding from the FGDs that showed that currently less attention is given in rehabilitation on issues of dysfunctional relationships in the lives of women offenders. The vignette below represents the finding.

“All these women do have issues from either family or spouses. Many of the them are used to a life of fighting and are always bitter from the experiences.....this is what they bring to us. It is up to them to seek for counseling if they need help to deal with their own issues and to learn to survive. We do not have a program that clearly identifies those with family and spousal issues.....trying to reconcile them with their families may not be possible due to time and the large numbers of the women prisoners...” (OIC-1)

The quote above suggests that the corrections department in Kenya acknowledges that most women offenders end up in prison because of issues related to dysfunctional relationships in their lives. However, it does not seem like rehabilitation focuses on being deliberate to help women offenders perhaps struggling to amend their disconnected relationships. The vignette suggests that most of the corrections do not have programs to help the women offenders to address broad psychological issues steaming from such poor relationships.

Van Voorhis and Salisbury (2014) identify dysfunctional relationships and its subsequent consequences as one of the most common pathways to incarceration of women offenders. Such relationships contribute to depression, anxiety and substance use that propagate their offending behaviors. Recognizing the need for treatment for women in dysfunctional relationships, Fagan & Ax (2015); and Salisbury & Van Voorhis (2009) suggest a broad consideration of any abuses that they have incurred as well as any concurring mental illnesses arising from the relationships including their use of

substance. Thus, there is need for a holistic and comprehensive treatment plan that addresses all of the underlying issues connected to their criminal behaviors and incarceration.

Arguing on the same, Salisbury and Van Voorhis (2009) point out that for women to heal through experiences of either spousal or family dysfunctional relationships, corrections have to strive to provide a system in which relational theory provides the underlying philosophy, shapes the dynamic of staff and offender relationships and affects the decisions within the prison setup. Van Voorhis (2013) and Covington (2007) further argue that programs while addressing inmates' previous abusive relationships and disconnections must operate in an environment that mirrors warm and caring relationships contrary to what the offenders have previously experienced. However, the current environment within the women's correctional facilities seems to be contrary to what the above scholars present. Asked on how they experienced the prisons environment, the quote below summarizes the views of majority of the respondents.

“Life in prison is so ugly..... many at times I just cannot stomach how some of the officers shout at us....They humiliated us!.....I hate in particular when they come to do the contraband searches.....it is painful to imagine a fellow woman stripping you naked.....what is that?” (FGD2)

The quote above suggests that women prisoners in Kenya live in fear, suspicion, and mistrust due to their experiences and perceived unwelcoming, unwarm, prisons environment. In general, prison culture across the globe tend to conflict with treatment culture, similar to the above vignette. The difference in these two cultures is due to the reality that corrections culture is formed on control and security, while treatment is based on the concern for safety and change (Covington, 1999). While corrections may apply

tough principles, particularly to restrain offenders with difficult personality traits, relational theory suggests that for effective rehabilitation of women, the prison environment must be warm and caring.

Other scholars (Joiner, 2011; Van Voorhis, 2013) posit that if women in the system are to change, grow, and recover, it is critical that they be in programs and environments in which relationships and mutuality are core elements. Covington (1999) further argues that there is need for the provision of a setting that makes it possible for women to experience healthy relationships both with staff and with one another as opposed to discouraging women from coming together, trusting, speaking about personal issues, or forming bonds of relationship, currently the reflection in the criminal justice system. This often discourages women offenders from associating with other women upon release from prison.

The current study equally established that parental distress was a factor in criminality in women offenders, while at the same time, the study found that there are no programs designed to support the large numbers of young women who would return back to their parenting roles and responsibilities on release from prison. Approximately 65% of the respondents in this study reported parental distress that they attributed to lack of parenting skills. Most of the mothers noted their lack of preparation to parenthood as a factor that led them to crimes and subsequently into prison. Parental distress in this current study was associated with psychological factors namely, depression, self-harm and sometimes harm to their young children or at worse, murder. Through the FGDs, the respondents confirmed their lack of parenting skills as a contributory factor to their engagement in crime as can be seen from the quote below:

“Today I look back to that day and deeply regret.....At age 15 I did not feel ready to becoming a mother. I could not imagine being tied down to care for a child while my friends were enjoying life...My mother refused to help me take care of the baby. I did not know how to feed the baby or what to do when she was crying.....It was too much for me and so I killed her. I was in police custody for two years before I was condemned to life imprisonment.” (FGD3)

Another respondent had the following to say in yet another FGD:

“I am haunted today when I think of my baby. I keep asking myself, why did I do it? if I had known what to do, I could have not done killed my innocent baby; just because I was feeling not ready to be a mother..... I feel terrible about this...” (FGD1)

The quotes above represent the voices of many other young mothers who end up in the Kenyan prisons due to crimes instigated by distress of motherhood. Majority of such mothers often times lack adequate empowerment on parenting and its responsibilities. However, the findings revealed that none of the correctional facilities provided training in parenting and childcare skills. This implies that many of these young mothers on reentry to the community do not yet possess the necessary skills in parenting practices and developmental needs of children that would help them cope with their parenting roles suggesting that they remain at risk of reoffending.

Furthermore, considering the adverse effects that incarceration has on children and their mother child-relationship, successful reunification and management of children may be difficult without the skills in parenting. Van Voorhis (2013) alludes that lack of empowerment on parental skills may prevent these mothers from dealing with shame and guilt compounded by those arising from their children’s struggles in coping with the effects of their mother’s incarceration; thus, a spiral of reoffending. According to Gonzalez et al. (2007), parenting programs seek to improve women’s psychological well-being by increasing their confidence, self- esteem, and motivation to abstain from crime.

Radosh (2002) identifies the Bedford Hills' parenting child and childcare program offered by the New York women's prison as an example of a successful parenting program. The program's broad content includes amongst other focus topics as prenatal care, parenting classes, counseling skills and visitation policies on visits by children to ensure bonding, critical in the psychological development of the children.

On general life-skills program and training, the study revealed that 12.5% of the correctional facilities offered life-skills education to the inmates, while on overall, 18% of the respondents indicated that they had participated in such programs. The above findings were authenticated with findings from the FGDs and interview schedules. Two respondents highlighted the nature of the life-skills program in the correctional facilities as seen below:

A stakeholder at one of the facilities commented as follows:

“Apart from supporting prisons by improving facilities, our organization is engaged in rehabilitation of prisoners. When time allows we put those interested into small groups where we give talks on issues such as anger management, time management etc.....we work only with those who are interested.....therefore we deal with only a few of the inmates.” (NGOf)

On the same note, an officer in-charge of a correctional facility responded as quoted below:

“We rely on our stakeholders in teaching the inmates on life-skills as they meet them for counseling or prayers.....these are interns from colleges, chaplaincies and other permit holders working with us.... I don't think that there is any program to follow.....I have not seen one, but we try our best.” (OICn)

The two quotes above put into perspective the quantitative findings on the availability and participation in the life-skills programs. The two vignettes above show

that some of the NGOs, FBOs and interns from counseling training colleges substituting the government's efforts in providing rehabilitation for the women offenders provide forums to educate the offenders with life-skills such as anger and time management, though these are only for those interested. However, according to the second vignette, currently there is no life-skills program offered on its own or incorporated into other core rehabilitation programs for women offenders in Kenya. The respondents who noted having participated in the life-skills training may have been amongst the few inmates who had the opportunity to take part in the training offered by the stakeholders. The lack of curriculum on life-skills in Kenya women prisons may imply that most of the women return to the community ill prepared in handling everyday life challenges, for example, anger or conflict, financial management, thus, the high chances of them returning to prison.

While life-skills are innumerable, Schram and Morash (2002) suggest that there are core set of skills that are at the heart of skills-based initiatives in the promotion of psychosocial needs in the rehabilitation of women offenders. Broadly speaking, life-skills training enhances the offenders coping resources, personal and social competences. Life-skills comprises but is not limited to topics such as, decision-making, problem-solving, creative and critical thinking, effective communication, interpersonal relationship skills, self-awareness, coping with emotions and coping with stress. Covington (2007) suggests that life-skills training should be a core unit of rehabilitation to all women offenders rather than made an option since most women offenders need empowerment in dealing effectively with the demands and challenges of everyday life, covered in the study. While life-skills training can be a core component of rehabilitation, Covington (2007) further suggests that topics on life-skills could be part of other rehabilitation programs such as

trauma and addiction to provide comprehensive models of treatment in rehabilitation. Life skill training could focus on aspects such as; interpersonal and problem-solving skills, personal goal setting, interpersonal communication, relationships and taking personal responsibility, cognitive skills training, parenting skills program, the leisure education program and the community integration program (Bryne & Howells, 2002). The overall goal for life skills training is therefore to train offenders in the skills necessary to function effectively in society, not to merely train offenders to be well-behaved prisoners. This can therefore help produce adjusted citizens, not merely adjusted prisoners.

The findings and presentation on effectiveness of rehabilitation programs and treatment for women offenders in Kenya suggests that currently, rehabilitation of female offenders is not effectively addressing the psychological needs of women offenders. The study found that the focus on gender responsive programming is minimal although there is acknowledgement within the criminal justice system that women's offending behaviors are highly influenced by specific psychological needs unique to women. While there are women with healthy internal locus and therefore may naturally bounce back and succeed in life with minimal rehabilitation less focused on their psychological issues, a majority may not maneuver through life successfully thus finding themselves' re-offending and returning to prisons.

4.3.5 Challenges Faced in Addressing Psychological Needs of Women Offenders for Effective Rehabilitation

The fourth objective of the study was to find out the challenges faced in addressing the psychological needs of women offenders in Kenya. The collection of data in this area was through use of Interview Schedules with the officers' in-charge of the

correctional facilities, the director of welfare and rehabilitation services (Kenya Prison's Headquarters) and representatives of both the NGOs and FBOs working within the Kenyan women prisons.

4.3.5.1 Lack of Policy Guidelines on Rehabilitation

The qualitative findings of this current study revealed that there is less focus on gender responsive programming and treatment for women offenders in Kenya. This is attributed to lack of policy guidelines and practices on rehabilitation. However, to some extent, it may be that the correctional department considers rehabilitation of offenders in Kenya to mirror the "Needs" principle of the R-N-R model of rehabilitation (Andrews & Bonta, 1998). In view of this, the study found that the current rehabilitation practices are heavily based on vocational and technical training. Although a practice adopted at inception of the prison system in the 50s, the current focus on vocational and technical training in prisons seem to be influenced by the demographic variables on low education levels and poverty amongst women offenders. In this regard, emphasis is more on empowering women with skills that can later influence their economic status. A senior officer in-charge of rehabilitation in Kenya was quoted as follows:

"Currently we do not have an approved policy document on rehabilitation of offenders. We began working on a policy some years back but after the document was presented to the relevant government offices to be tabled for discussion and approval by law makers, nothing much has ever happened..... On the vocational programs and counseling, each prisons facility makes its own arrangement on what to initiate.....a lot of support is however given to us by our partners- these are (NGOs and FBOs)." (PHQ)

Through the above quote and observation made of prisoners engaged in rehabilitation practices during the data collection exercise, the study established that the

Kenya Prisons Services department does not have an approved policy document guiding rehabilitation practices of offenders. Notably, there was no documented policy on the rehabilitation of women offenders. The study gathered that an attempt to develop a policy document on rehabilitation of offenders as noted in the quote above did not come to fruition. The highly publicized 2001 prisons reforms by the Kenya government seem to have largely focused on human rights issues addressing issues of immense overcrowding in prison, lack of quality food, deprivation of due process and inability to access legal aid, poor medical attention amongst other concerns (Miriti & Kimani, 2017; Omboto, 2013). Similarly, the findings do not reflect the 2006 gender mainstreaming policy by the Kenya government to ensure increase in equality and elimination of gender-based discrimination in the design, implementation, monitoring and evaluation of policies and programs in both government and private sectors at all levels (Nyachieng, 2011). Not unique to women correctional facilities, the realization of gender mainstreaming process remains a challenge related to factors not limited to; lack of political goodwill by government, lack of sensitization of staff on gender related issues, lack of adequate budget and technical staff and lack of proper training on gender related issues (Gatimu, 2015). Overall, as already stated in the forerunning discussion, there seem to be less attention given to development and implementation of gender responsive programming.

Bloom, Owen, & Covington (2004) observe that like in any agency or system, policies and procedures in correction must be a primary consideration for internal control. Accordingly, Trochim (2009) observes that policies are important in guiding decision making and actions within an organization. Implicit lack of policy suggests ad hoc approaches that may not be effective in rehabilitation. Thus, without policies and procedures, the correctional department cannot meet its vision and goals towards

effective rehabilitation of women offenders. As may be recalled from the preceding chapters of this current study, the various correctional facilities in Kenya do not seem to offer same programs. One reason for this may be due to lack of documentation or policy on rehabilitation that has led to discrepancy in rehabilitation of women offenders in different correctional facilities as was observed during the data collection exercise. The study established that correctional facilities tended to interpret the expectation of rehabilitation as stated in the Prisons Act (GOK, 1977) within their means rather than efficiency. The study further observed that due to lack of policy guidelines in rehabilitation, the “open door” policy that allows entry of stakeholders into the correctional facilities to supplement the government’s efforts in rehabilitation has yielded minimal results in rehabilitation of women offenders and other offenders in general than it would have been due to coordination of the activities of various stakeholders and openness to partnership. The verbatim below suggests the reality as viewed by key informants representing the FBO and NGO:

“We have been working in the prisons department for over ten years since the open door policy was initiated in 2000. Since then, many groups have come in to support the reform agenda by the government. Although the different groups have done some good work in the prisons there are bigger challenges due to lack of consistency and policy guidance. There is lack of collaboration among the stakeholders that has led to replication of programs and lack of commitment on what is agreed on at the few collaborative meetings, conferences or workshops....Sad to say, some older groups in realizing that things don’t work as per their expectation have vanished.....Currently the prisons are crowded with petty offenders cannot come together as a group to lobby so that the judiciary can make these people do community service. In fact one other challenge with our inability to work together is that different key groups sometimes give conflicting reports on issues around rehabilitation to the government which makes our work complex.” (NGOf)

The elaborate quote suggests a big problem with regards to stakeholders' responsibilities within the women's correctional facilities. Instead, with many different groups - both the NGOs and FBOs, the open-door policy has led to variety of programs in the correctional facilities, most of which lack research evidence bases and thus minimal successful outcomes. The vignette above equally suggests unhealthy competition and lack of good will among the stakeholders in the realization of their goals. In a nut shell, although the organizations may have good ideas and good will in rehabilitating female offenders, lack of policy guideline is an impediment to the process.

4.3.5.2 Lack of Training of Staff on Gender-Responsive Services

The secondary data findings from the Kenya Prisons Staff Training College shows that the initial 9 months recruit training and development courses meant to refresh serving officers entails curriculum devoid of comprehensive focus on development and implementation of gender responsive programming for offenders as suggested in various studies (see Ferraro, 2007; Bloom 2006; Sharp, 2003; Schram & Morash, 2002). The quote from a KPSTC website information and unpublished certificate course outline provided to the researcher by KPSTC confirms the same.

“.....the 9 months initial recruit training entails prison administration and management, Laws related to prisons work, Human Rights, HIV/AIDS awareness, service ethics, weapon training, arms and foot drills.....Development courses are meant to refresh serving officers and equip them with up to date skills to deal with emerging trends in penal issues and management and also prepare newly promoted officers or those about to be promoted to execute their new responsibilities effectively...” (KPSTC website, 2019; KU, 2018).

The quote above suggests the focus in training for those charged with the responsibility of rehabilitating offenders within the Kenya prisons. The contemporary understanding of rehabilitation of women offenders focusing on gender responsive

programming however seem to be lacking in the curriculum. Following a needs assessment in 2002 towards improvement of services within the KPS department (KPS, 2005), the development of a curriculum for training officers was given a high priority among other reform programs. Most recently in 2018, in response to a 2008 report by “The Task Force on Workload Analysis for the Prisons Department,” also referred to as the *Madoka* Report (GOK, 2008), KPS sought collaboration with KU to develop and implement a nine month “Certificate in Security and Correctional Science” program for new recruits and serving prisons officers. The Madoka committee had noted inadequate training and low morale as some of the key areas that needed to be addressed in the prisons’ officers training program. The new program is therefore an attempt to address the gaps that were identified by the committee. The unpublished manual of the program (KPS, 2018) is divided into two distinct sections, namely professional units and academic units. A staff member at the KPSTC had the following to say:

“The professional courses are taught by the staff at the Kenya Prison Staff Training College while the academic courses are taught by KU...” (T- KPSTC)

The program structure of the two main units of the certificate program is as follows:

“Professional Units include: CSC 001 Drills and Physical Training, CSC 002 Weaponry Training and Management, CSC 003 Security Management, CSC 004 Sentence Computation and Records Management, CSC 005 Prisons Administration, Management and Practices, CSC 006 Rehabilitation, Treatment and Reintegration of Offenders.

Academic Units comprise: CSC 007 Law, Criminal Justice and Human Rights, CSC 008 Introduction to Information, Communication and Technology, CSC 009 Introduction to Sociology and Criminology, CSC 010 Gender Issues and Correctional Institutions CSC 011 Introduction to Disaster Management CSC 012 Introduction to Psychology. “

The above are the courses taught to the wardens and wardresses charged with the rehabilitation of offenders in the Kenya prison. Some of the courses suggest concept areas that may be topics in a gender responsive programming, notably, Rehabilitation, Treatment and Reintegration of Offenders, Gender Issues in Correctional Institutions, Introduction to Psychology (KU, 2018). A distinct feature of the course descriptions however show that the content of the courses does not include content for an understanding of gender responsive programming. Noted, for example are topics under Rehabilitation, Treatment and Reintegration of Offenders; Introduction to Psychology and Gender Issues; and Correctional Institutions as presented below:

Rehabilitation, Treatment and Reintegration of Offenders:- Definition of terms, the reception board (composition and functions), economic empowerment; vocational training and academic education; psychological interventions: anger management, drug and substance abuse, behavior modification, victim awareness, cognitive skills, problem solving, self-control, communication and interpersonal skills, peer support; Borstal Institutions and Youth Correctional Training Center (YCTC): functions, programs and their effectiveness, counseling the adolescents, mentorship; recidivism and challenges of rehabilitation, pre-lease programs; Discharge Board.

Introduction to Psychology: - Definition; branches of psychology; basic concepts in psychology; attitude; behavior, motives, emotions; interpersonal relationships

Gender Issues and Correctional Institutions: - Definition; gender and sex in society, diversity of offenders; biological, social, economic and disabilities; gender issues in crime and handling of inmates; gender issues in policy and practice in the correctional institution: recruitment, promotion, posting, deployment; affirmative action; gender issues in rehabilitation programs and vocational training; gender based violence in correctional institutions; gender and health: sexuality and HIV/AIDS.

Source (KU, 2018)

While the new curriculum (KU, 2018) provides knowledge of topics, for example, emotions, interpersonal relationships, psychological interventions etc. that could form part of gender responsive programming, the curriculum lacks a guideline on how the knowledge is incorporated into a gender responsive programming. Moreover, the training curriculum does not provide a theoretical framework, for example, R-N-R model and relational theory for reference in assessment and classification of women's specific issues, placement of offenders into programs that addresses their needs and matching treatment according to an individual's style of learning. It is not clear whether topic on gender issues in crime and handling of inmate is designed to critically spell out women's pathways to criminality and therefore applied in rehabilitation. Providing a gender responsive training to staff is a basic fundamental to appropriate and better management of women offenders (Covington, 2016); not only in ensuring effective communication but more importantly, addressing their gender specific needs.

The treatment protocol and specific curricula of women-focused program, (*"Helping Women Recover,"* Covington 2008; *Beyond Trauma: a healing Journey for Women,* 2016) are examples of treatment models based on clinical model and relational theory. The *Helping Women Recover* program is for example organized into four modules that addresses the areas that researchers have identified as necessary for women offenders to work on in order to facilitate recovery and to avoid relapse: self, relationships, sexuality and spirituality. In *Beyond Trauma* curriculum, women work through their past (that is, sexual or physical abuse, or other victimization) that had been traumatizing. The women are helped to explore how the abuse had impacted their lives and learn coping mechanisms, while focusing on personal safety, using strengths-based

approach. Other elements include groups or parenting techniques and child custody issues, perinatal services, health and hygiene, grief and loss, and decision-making skills.

In addition, Covington (2008) further explains the importance of the women focused program elements being delivered within the safety and comfort of a same-gender environment, encompassing non-confrontational and nonhierarchical learning experience. Unfocused training on who women in the criminal justice system are means that the custodians of rehabilitation practices cannot effectively realize their mandate. An officer in-charge of one correctional facility, but with minimal information on the new training curriculum for the new recruits noted the form of training that over the years was provided to the prison's officers as seen in the quote below:

“Traditionally, the work of the prisons wardens is basically surveillance; to prevent escapes from custody and meting of physical punishment to inflict pain on the inmates who did not tore the line.....the primary training for a prisons officer is thus “security” (OICe)

Reflecting the forerunning discussion on the current training curriculum of wardens and wardresses and the quote above, there seem to be no provision in gender responsive programming by KPS. This therefore implies that those to guide rehabilitation are less prepared to fulfill their role effectively.

While psychological counseling is one among other programs and services towards the realization of effective rehabilitation, the current study established that in some of the correctional facilities there is not a single trained counselor or psychologist to cater for the needs of the offenders. The quote below further confirms the situation advanced in the preceding discussion.

“There are a few officers who have been sponsored for training in psychology or counseling after completing their basic training in security.....And not every prison has a trained counselor... Previous, I was in a prison where there was not a single trained psychologist or counselor among our officers.....We did not have other counselors or trainees coming from outside to support the women.” (OICs)

While most correctional facilities in the current study may view counseling as a treatment focus already in existence, the above quote implies that the counseling services may not be available for all the offenders. The study established that on-going personal development for prison staff is encouraged. However, specifics on areas of study focus are not clear giving leeway for the officers to study in any area/field of their interest. Some of the studies may not directly reflect improvement towards their current job responsibilities as was expressed by another officer in the quote below:

“Most of the officers acquiring higher education opt for programs such as project planning and business administration perceived as better job opportunities rather than improvement of their skills and knowledge in rehabilitation, for example, counseling or psychology”...These other training gives them...(officers) opportunity to seek better opportunities outside the service.” (PHQ)

The quote above may suggest that the officers working in the correctional facilities are not keen in advancing themselves on their current job career. Although the scope of this study did not establish why the prison’s officers opted to deviate in their career advancement, perhaps one reason may be due to their job dissatisfaction and less fulfilling thus the complete deviation in their upward mobility in career advancement. In their study on job-related stress, Misis, Kim, Cheeseman, Hogan, & Lambert (2013) reflect on how job dissatisfaction can affect an individual’s attitude toward their work environment, coworkers and supervisors eventually leading to a complete change in

career path. Perhaps a review and implantation of a training curriculum that reflects knowledge on gender responsive programming in corrections; rather than general topics on gender factors or issues could create meaning and offer job satisfaction to the wardens, but particularly if gender responsive programs are designed and implemented. Inadequate knowledge and skills on gender responsive programming, particularly on women's unique pathways to criminality, assessment of risks, placement of offenders to relevant treatment programs, and lack of training on specialized therapeutic approaches are only indications of ineffective rehabilitation because the wardresses cannot give what they do not have. The researcher recognizes the efforts in collaboration between KPS and KU in the development of correctional training curriculum and is optimistic that the concerns on gender responsive programming will in the near future be considered in training and subsequently implemented in the women's prisons as a step towards effective rehabilitation of the offenders.

4.3.5.3 Inadequate Funding versus Overcrowded Correctional Facilities

The qualitative findings showed that the budgetary allocation to the Kenya Prisons Services by the government was inadequate to address all the functions of the department including the development of rehabilitation programs. The large numbers of offenders incarcerated seem to be one major reason among others that makes the budgetary allocation small thus making the realization of meaningful and effective rehabilitation difficult and almost unattainable. Responding to concerns in the budgetary allocation for prisons department, for example, in the 2004 budget speech²⁸, the then Finance Minister was quoted:

“With regards to prisons, the government will reduce overcrowding in cells, by improving institutional coordination between the judiciary, the office of the

attorney general, prisons, the police, the children's probation departments...in addition, petty offenders will be punished through community service with enhanced corrective supervision." (KNCHR, 2005)

One informant had the following to say:

"Overcrowding of prisons stretches the meager resources in the prison institution making it difficult for effective planning and provision of materials needed for the available programs including development of new strategies." (PHQ)

The quotes above indicate that Kenya prison financing is majorly complicated by large numbers of incarcerated women offenders making it difficult for meaningful rehabilitation to be realized. For example, limited funding may explain the limited research on effective practices in rehabilitation, training of personnel and development of new relevant programs and treatment strategies that corresponds to women's pathways to criminality. Although the government encourages internal resource mobilization of funds through prisons farms and industries, lack of transparency on revenue collection from the different correctional facilities remain a concern (KHCHR, 2005). A stretched budget may necessitate that priority be given to provision of basic needs such as food, uniforms and medicines, affecting other essential activities as rehabilitation. The researcher is however of the opinion that strategic planning and management of prison industries, farms and other income generating projects is one way of ensuring additional funds for tackling and managing comprehensive budgetary needs of the prisons. The finding on limited budgetary allocation resonates with findings of other studies (Fletcher, Rolison, & Moon, 2003; GOK, 2001), which noted that limited budgetary allocations by governments to correctional facilities is a contributory factor to the deplorable living conditions found in prisons including the inability to provide meaningful services for effective rehabilitation of the offenders.

4.3.6 Ways of Improving Rehabilitation Programs for Women Offenders

The finding of this section was guided by objective five of the study that sought to find out ways of improving the rehabilitation programs within the correctional facilities. Both quantitative and qualitative data were used to find the information as presented. Following the pilot study findings that revealed a lack of ability for most of the respondents to freely express their ideas in answering items on ways of improving the rehabilitation programs, the researcher found it necessary to provide optional items to the respondents that were developed based on an interview with some of the respondents. To that end, the respondents were given three options to prioritize as ways of improving the current rehabilitation programs for women offenders. The presentation of the options was due to the finding of the pilot study that revealed a need for presenting the ideas on improvement of the rehabilitation programs for the respondents to focus. The findings are as shown on Table 4.17. These were corroborated with the findings from the interviews conducted with both the officers' in-charge of the correctional facilities and the stakeholders working within the facilities.

Table 4.17

Improvement of Rehabilitation Programs

Suggested Improvement	N=314	%
Training prison staff on how to manage/conduct rehabilitation programs		18.2%
Asses needs and rehabilitate all women prisoners based on issues that lead them to crime		34.8%
Allow more collaboration/ partnership with different NGO's and FBO's		47.0%

The findings in Table 4.17 above show how the respondents reacted to questions on possibilities of improving the rehabilitation programs and practices within the

women's correctional facilities in Kenya. According to the findings, 47% of the respondents thought that this could be realized by enhancing collaboration or partnership with the different stakeholders (for example, NGOs and FBOs); while 34.8% felt that this could be achieved through assessment of needs and ascertaining the women prisoners were placed in programs that corresponds with their problems. Finally, 18.2% of the respondents felt that rehabilitation practices may be improved by ensuring staff training on management of the rehabilitation programs. The findings are discussed as shown below.

4.3.6.1 Collaboration with Stakeholders

According to the findings, majority of the respondents, that is 47% of the respondents thought that this could be realized by enhancing collaboration or partnership with the different stakeholders (for example, NGOs and FBOs). Majority of the respondents thought that the best way to improve the programs was through collaboration with partners based on their experiences with groups such as Faraja Trust, RODI program, Fr. Grol's Welfare Trust and different religious groups (notably Catholics, Protestants and Muslims) that heavily supplements government's efforts in rehabilitation, reintegration and improvement of living conditions of inmates in Kenya. Other respondents supported the need for collaboration during the interviews as quoted below:

“I have worked in the prisons department for over 20 years. I have also seen many changes and improvement in the prisons since the early 2001 when the government introduced the open-door policy and some of our partners took this opportunity as a way of improving conditions in the prisons. I do think that the best way to improve service delivery in the prisons is by strengthen partnerships and cooperation between agencies, both local and international as well as various stakeholders in the improvement of rehabilitation of female offenders.” (OIC-1)

A senior officer in-charge of prisons had the following to say:

“I believe that gains towards the realization of effective rehabilitation can be enhanced through sharing information, research findings and practices, internally between stakeholders and externally between countries...” (OICs)

From the quotes above, the respondents noted the need for collaboration and partnership in the development and implementation of evidence-based practices in rehabilitation. That is, the respondents were of the opinion that the corrections department should work hand in hand with stakeholders to supplement the government’s efforts in rehabilitation. The finding on the call for collaboration between the corrections department and stakeholders corresponds with other previous calls. Nordahl (2013) for example, clarified that the current improvements on human rights-based approaches, governance and democracy “celebrated” as success outcomes of the Kenya Prisons Reforms of 2001 have been realized through the collaboration between the prisons department and the different stakeholders drawn from NGOs and FBOs. The observation correlates with the comments in the vignettes presented earlier in this section. Partnership among different actors is not only paramount but also one major way to successful outcomes in offender rehabilitation, particularly in the realization that scarcity of financial and human resources seems to be a major challenge for governments in the realization of effective rehabilitation of offenders in correctional facilities.

While such partnership may appear as a breakthrough in the realization of effective rehabilitation of women offenders, this may not be possible without lack of policy guidelines in rehabilitation as noted in the preceding discussion. Partnership as noted already may not yield much result in rehabilitation without clear policies and procedures. Therefore, the need for the corrections department to employ a structural plan

in the development, implementation and evaluation of the programs and activities seems to be an urgent priority not to delay.

4.3.6.2 Assessment and Provision of Individualized Treatment/Rehabilitation

Accordingly, in Table 4.17, as a way of improving rehabilitation programs for women offenders, 34.8% of respondents noted that rehabilitation could produce successful outcomes through the identification of and addressing individual needs. The respondents' suggestion was in view of their experience of current participation in the programs provided for rehabilitation. In the preceding discussion, the study found that not all the offenders participated in programs offered currently in rehabilitation. However, those that participated did so without much consideration as to whether or not the program was matching their need or issues related to their criminal nature. While the reasons for not participating in the available programs by the women offenders could largely be attributed to issues of policy on development and implementation of such programs, the study found that some of the offenders had negative attitudes towards their involvement in such programs. Some of the respondents expressed their involvement in the programs as previously noted in a quote:

“I do not participate in any of the activities in this prison.....I have chosen not to! I find solace in basking in the sun rather than going to the industry. I cannot work for the government to benefit from my hard labour...NO!! I cannot work hard to benefit *serikali* (the government).” (FGD 4)

The above quote demonstrates a distortion in attitude on the reasons for rehabilitation by the inmate. While it is true that the respondent does not realize the importance of engagement on a program and only sees her involvement as a form of exploitation by the government, such a negative attitude may be influenced by lack of

clearly defined process rehabilitation as noted in the RNR model of offender rehabilitation. Engaging a process of individual assessment for risks and needs, placement to relevant treatment program (which may not be available) and matching treatment to one's style of learning may positively influence inmates to think rationally on rehabilitation rather than view it as a form of punishment and exploitation by the government. Perhaps the corrections department needs to consider a possibility of inmates earning a small percentage of income from their individual produce as a form of motivation in rehabilitation.

The current study established that no procedural methods of assessment are in place to determine individual offenders' needs for categorization to a program, reflecting one's needs for rehabilitation. Assessment of offender risk/needs is a theme strongly voiced in both traditional models of rehabilitation and the gender responsive programming to ensure that rehabilitation reflects an individual's needs. Scholars (Morita, 2013; Van Voorhis, 2013; Ferraro, 2007; & Farr, 2000) contend that without gender responsive classification systems or use of gender-specific actuarial assessment tools, women inmate's life circumstances will continue to be neglected leading to inaccurate classification for and placement in unsuitable treatment programs. Lack of assessment of individual offenders' needs may perhaps explain why the slow pace in the development of gender responsive programs in the current study. Similarly, it may imply that contextualized and substantive researches on women and criminality is lacking leading to less attention given to the development of gender-responsive programming by policy makers. While more studies may be necessary to give clarity on women offenders' in Kenya, their pathways to crime in relation to psychological needs and programs that address their needs in rehabilitation, such studies may only have impact if disseminated,

received by goodwill and acted upon by policy makers. This necessitates more education to policy makers, implementers of rehabilitation programs and the general public on gender and crime.

4.3.6.3 Training Prison Staff on How to Manage/Conduct Rehabilitation Programs

Lastly, in Table 4.17, 18.2% of the respondents suggested that rehabilitation practices could improve by training prison staff on how to manage or conduct rehabilitation programs. Although the offenders may lack understanding of evidence-based programs or gender responsive programming, their daily interactions and experience of the wardens could have given them the impression that the wardens needed further empowerment in their work. The above response is in line with the current study finding which established that whereas incarceration of offenders has three main roles, that is; rehabilitation, retribution and preventing crimes (GOK, 2010; GOK, 1977), the prison department at times seems to focus more on retribution and the prevention of crimes by inflicting pain on the offenders as implied in an article in the Daily Nation (2001, 24th March) and by Nyaura and Ngugi (2014). More often than, the interaction between the wardens and inmates does create tension, and therefore, an environment less conducive for the realization of rehabilitation.

As previously noted, prioritization on training of prisons officers also seem to be on “security” and surveillance with less focus on rehabilitation geared towards supporting women offenders to work through their psychological needs. Van Voorhis et al. (2012) suggests that since women offenders are not categorized as high-risk offenders, their realities and how to manage their specific needs should be paramount in the training for those to rehabilitate them rather than focus given on security. Joiner (2011) and Jespersen (2006), in support of the scholars above, argue that unless the training of prisons wardens

for women's corrections focuses on competency towards addressing their needs, anything less than this will only lead to ineffective rehabilitation. Effective training of the prisons officers on appropriate ways of rehabilitating the offenders may equally lead to respectful ways of handling the offenders as opposed to the unpleasant demeaning ways cited by some of the offenders. This may perhaps motivate those offenders who seem to lack interest in rehabilitation to begin getting involved. Overall, there is need for policy guidelines and training of the officers to make the rehabilitation of women successful. Also noted in this study is that the Prisons Act Cap 90 (GOK, 1977) still remains the main legal framework that is in operation even with the promulgation of the new Kenya Constitution in 2010. The alignment of this Prison Act with the new Kenya Constitution of 2010 is not clear. Perhaps it is high time that this Act was reviewed to align it with the new Constitution and best practices in the contemporary international corrections system.

CHAPTER FIVE:

SUMMARY, CONCLUSION AND RECOMMENDATIONS

5.1 Introduction

The purpose of this study was to examine the effectiveness of offender rehabilitation programs in addressing the psychological needs of women offenders in Kenya. This chapter presents the summary of the major findings, conclusion, recommendations and suggestions for further research. The discussion is dependent on research questions that guided the study. The following were the research questions:

1. What are the unique psychological needs contributing to criminality by women offenders?
2. What are the current rehabilitation programs available to women offenders in Kenya prisons?
3. To what extent are the current rehabilitation programs addressing the unique psychological needs of women offenders within the prisons in Kenya?
4. What are the challenges faced in addressing the psychological needs of women offenders for effective rehabilitation within the Kenyan prisons?
5. What possible ways maybe employed to improve the current rehabilitation programs for women offenders in Kenya in addressing their psychological needs?

5.2 Summary of the Findings

The study established that women offenders have unique psychological needs that contribute to their involvement in crimes leading to incarceration. While in prison, the offenders are supposed to undergo rehabilitation alongside retribution, deterrence, incapacitation and keeping them safe within the prison environment. Separation of women offenders from their male counterparts may imply that the criminal justice system

acknowledges that gender matters, and therefore, a step towards effective rehabilitation of the women offenders. The study noted that most women offenders reported experiences of some difficult life circumstances that explain their delinquent behaviors. A significant number of the women offenders reported histories of victimization, dysfunctional relationships, parental distress and reduced self-efficacy. Some of the women reported complications of other problems of psychological and psychiatric morbidity, including mental illnesses of trauma and PTSD; substance use and abuse, personality disorders and self-harm mostly influenced by the life circumstances noted above.

Histories of childhood abuses and adult victimization are major links to trauma and PTSD in women offenders. Crimes commonly noted in women offenders include child neglect, child and spousal murders, self-harm, among others. Dysfunctional relationships in the women's lives associated with spousal or family of origins was a major factor that contributed to direct or distal source of criminal conduct in the women. Many of the women found themselves in cases of spousal murder in an attempt to protect themselves in domestic violence while many ended up engaging in criminal behaviors related to substance use and abuse, often used as a form of medication to numb the psychological pains that they go through. Lack of parenting skills and financial strain due to lack of spousal support and steady income contributed to parental distress in a significant number of women offenders. In an attempt to address challenges related to parental distress, many of the women reported criminal behaviors of child neglect and abuse while some resorted to heavy alcohol or other substances as a means of coping. The study found that many of the women offenders had low self-efficacy while an almost average number scored normal in their self-esteem.

5.2.1 Current Rehabilitation Programs Available to Women Offenders

The study established that currently rehabilitation of women offenders within the correctional facilities in Kenya are mostly vocational and technical training oriented thus aimed at empowering the women with skills towards economic stability. Several programs including; computer training, formal primary and secondary education, agricultural training, hairdressing, catering, pottery, dressmaking, knitting, counseling, are among the common focus in the correctional facilities. The methodology used in offering these programs, however, differ from one correctional facility to another. Vocational and technical programs are an important part of gender responsive programming as a primary means of empowerment and thus the enhancement of self-esteem and self-efficacy in women offenders. However, on their own, the programs are deficit in addressing other psychological needs associated with criminality. Thus, used exclusively in rehabilitation, it is not possible to attain effective rehabilitation of women offenders.

5.2.2 Current Rehabilitation Programs Addressing the Unique Psychological Needs of Women Offenders

On specific gender responsive programming, the study established that currently, there is very little focus on the development and implementation of gender responsive programs within the women's correctional facilities in Kenya. Therefore, the critical psychological needs of women offenders such as histories of abuse, trauma and PTSD; parenting and parental distress; substance abuse; dysfunctional relationships, and other related mental health issues remain unaddressed in rehabilitation. The chances for recidivism upon release from prison remain high in the women offenders. Although there was an indication from the responses that most facilities offered psychological

counseling, the study gathered that most of the facilities do not have qualified psychologists or counselors to attend to the offenders. Moreover, the study found that there was no clear process followed for one to receive counseling services nor were there counseling rooms in most of the correctional facilities. Lack of gender responsive programming meant that there are no actuarial tools for assessment of individual offender needs for appropriate placement into a program or treatment.

5.2.3 Challenges Faced in Addressing the Psychological Needs of Women Offenders

The study noted lack of policy guidelines and procedures as a major challenge in the realization of effective rehabilitation of women offenders. Lack of development and implementation of programs guided by the characteristics of women offenders was yet another major challenge. There was also discrepancy or variations on how the different prison facilities carried out the process of rehabilitation. Similarly, the study found that lack of a guiding policy in rehabilitation meant that those stakeholders supplementing the works of rehabilitation do not have a clear framework that targets the specific psychological needs of the women offenders.

Other issues contributing to ineffective rehabilitation of the offenders included none training of prison staff on pathways to criminality and gender responsive programming for women prisoners. Whereas the corrections department lacks most gender responsive programs, the study found that some of the inmates were less motivated to participate in any of the available programs viewing their participation as a form of exploitation and punishment by the government. The study also found that there was inadequate funding by the government to ensure development and implementation of gender-programming, availability of materials and procedural running of the programs.

5.2.4 Possible Ways to Improve the Current Rehabilitation

Overall, in addressing the challenges inhibiting the effective realization of rehabilitation of women offenders, the study noted that there is need for a focused research on women and crime, development of a policy document on rehabilitation, assessment tools and programs. There is also the need to train prison's personnel working with women on gender responsive treatment. Most of the challenges faced in rehabilitation of women offenders seem to be issues requiring the government's support and goodwill through the allocation of sufficient budget to the department of corrections. The study also established that to support the efforts of the government in the realization of the objectives and goals of rehabilitation of women offenders, the existing collaboration between the government and stakeholders (the NGOs and FBOs) through the open-door policy of 2001 should continue. However, there is need to develop policy guidelines on rehabilitation and to ensure a better understanding by the stakeholders on their role in rehabilitation and use of effective programs that are research based.

5.3 Conclusions of the Study

The study has established that most women offenders in Kenya have unique psychological needs such as, histories of abuse (physical or sexual abuse in childhood or adulthood), dysfunctional relationships, parental distress and reduced self-efficacy. The programs currently offered in rehabilitation programs appear limited in addressing these needs. In view of the theories that informed this study, that is, the relational theory and RNR model, rehabilitation of women offenders appears to be limited from the reception board where the assessment is more focused on the sentence rather than the psychological needs of women offenders. This appears to have contributed to over dependence on

economic empowerment to the detriment of addressing the psychological needs of women.

The study found that most of the rehabilitation programs are economic skills oriented, with focus on areas such as hairdressing, cookery, dressmaking, knitting pottery, and agriculture. However, these programs are not uniform in all the women's correctional facilities. Most of the programs are not set to standards and very few inmates participate in them. While these programs are necessary for the "empowerment" and therefore boosting the offenders' levels of self-esteem and self-efficacy, the study established that these programs equally lack a process in determining who gets enrolled in them and how programs are improved.

On the other hand, the study established that the development and implementation of gender responsive programming is almost in none existence. Coupled with this, there seem to be lack of procedural assessment of the offenders for placement into programs based on an individual's needs.

The general findings on gender responsive programming implies that the women's unique psychological needs of victimization, dysfunctional relationships, parental distress, low self-efficacy and other mental health problems, and substance use and abuse, are unattended to during rehabilitation. The study concludes that with this reality, majority of the inmates' transit back to the community upon release unprepared to address the issues that previously led them to incarceration and therefore high chances of them re-offending and returning to prison, since the programs offered appear not to address the psychological needs of the offenders.

5.4 Recommendations of the Study

The following recommendations are in view of the findings of the study:

- i) The findings established that women offenders in the Kenyan prisons exhibit co-occurring unique psychological issues/problems that are linked to their offending behaviors. The study recommends that women involved in the criminal justice system particularly those that end up in jail be screened and/or assessed to establish their psychological needs associated with their offenses. This will ensure that women's issues associated with criminality are identified and subsequently they are placed into correct rehabilitation and treatment programs towards effective rehabilitation during incarceration.
- ii) The study established that there are a range of rehabilitation programs offered in the women prisons in Kenya. These programs are mostly vocational and technical oriented which the study commends in enhancing self-esteem and self-efficacy in women offenders. The study recommends development and implementation of programs that addresses the unique psychological needs of women offenders notably, clinical treatment for alcohol and drug use and abuse, trauma focused treatment for histories of abuse, the broad range of mental disorders associated with the life circumstances women offenders have gone through. On the same note, the study recommends training on parenting and parenting skills programs and other life skills training that would improve relational issues in the offenders.
- iii) The study established that the current available assessment tools are not effectively addressing the psychological needs of women offenders in Kenya. The researcher further recommends that while addressing the urgent need of the development and implementation of gender-responsive programs, the correctional

department should equally work towards the development of culturally sensitive actuarial assessment tools to help determine women offenders' psychological needs and/or multiple problems that contribute to their criminal behaviors for appropriate placement in treatment or rehabilitation. This will ensure that psychological needs such as victimization, parental distress, mental health problems, and substance abuse are identified and treated accordingly during incarceration.

- iv) The study established that there are a number of challenges faced in addressing the psychological needs of women prisoners contributing to ineffective rehabilitation of the offenders. A major setback is the lack of policy guideline on rehabilitation of offenders in Kenya. The study recommends that the Kenya Prisons Services under the Ministry of Interior and Coordination of National Government embark on an immediate development of policy guidelines on rehabilitation of all categories of offenders, while paying special attention to the specific needs of each group. The guidelines should be research based if the practices and programs are to be effective.
- v) The study found that most correctional facilities are overcrowded; mostly with petty offenders, making it difficult to realize the goals of effective rehabilitation for the offenders needing correctional rehabilitation/treatment due to limited resources. The researcher recommends that the government through the judiciary department to decongest the prisons through placement of petty offenders on other alternative ways of correction such as community service or grant parole for less risky offenders. On the same note, the researcher recommends that the Power of Mercy Advisory Committee (GOK, 2010) diligently carries out its mandate to

ensure that deserving long term serving offenders, qualifying for pardon as per the constitution are released as a means of decongesting the facilities.

5.5 Suggestions for Further Research

- i) This study focused on the effectiveness of rehabilitation programs in addressing the unique psychological needs of women offenders in Kenya. A comparative study may be necessary to investigate other unique needs that contribute to offending behaviors in women and how these could be addressed.
- ii) The researcher proposes a follow-up study on post incarcerated women offenders to investigate their performance in the community. This may establish whether the rehabilitation and treatment received while in prison impacts on the women by reducing their chances of recidivism and encouraging them to be productive and useful citizens of the nation.
- iii) The study recommends research on contextualized models of rehabilitation that can successfully address the unique psychological needs of women prisoners in Kenya. This should include community-based programs guided by scientific knowledge and principles for less risk offenders so as to decongest prisons.
- iv) The study recommends as critical training needs assessment to establish the training gaps for the personnel/ prison staff that could aide in the effective management and treatment of women prisoners during incarceration. This may ensure the development of a training curriculum that focuses on women and crime rehabilitation models for women offenders.

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APPENDICES

APPENDIX 1: CONSENT FORM

Dear Respondent,

My name is Mary Jacinta Achieng Ondeng; a Ph. D Student in Kenyatta University. I am currently undertaking a study on “Effectiveness of rehabilitation programs in addressing the psychological needs of women prisoners in Kenya.” The information gathered will be used by the Kenya Prisons Department and stakeholders in ensuring effective rehabilitative practices for women offenders in Kenya.

Procedures to be followed

Participation in this study will require you to fill in a questionnaire containing statements or questions regarding demographic information, psychological issues associated with criminality in women prisoners, as well as practices in rehabilitation of women prisoners in Kenya. This will take you about 30 minutes.

You have the right to refuse to participate. In this study participation is voluntary. You may withdraw from participation at any point without any penalty or choose not to respond to any item(s). The information you will provide will be used strictly for the purpose of this study.

Discomfort and Risks

Despite the fact that there are no physical risks involved in this study, some questions may require you to disclose personal information that may be potentially sensitive. The questions are simple and straightforward. The questions on your personal experiences and reasons for committing crime could cause you to recall difficult events which could cause you to feel uneasy. If there is anything you feel uncomfortable answering, you are not obliged to do so.

Benefits

Although the research is for education purposes, your participation will greatly contribute in the understanding of effective rehabilitation of women prisoners in Kenya. The results of the study may guide in developing of rehabilitation programs treatment to ensure effective rehabilitation of women prisoners in Kenya.

Confidentiality

Filling of the questionnaires will be done in an established conducive environment within this correctional facility. All data collected in this study will be confidential and anonymous. No identifying information will be collected. Your name will not be recorded on the questionnaire. All questionnaires will be coded and secured under key and lock in a cabinet in my office at Tangaza University College.

Contact Information

In case you have any questions, you may contact me on cell: 0721 239219 or Dr. Ann Mercia Sirera on 0715 457 407 or Dr. Beatrice Kathungu on 0727 893955 or Kenyatta University Ethics Review Committee Secretariat on chairman.kuerc@ku.ac.ke

Participant's Statement

All the above information regarding my participation in the study is clear to me. I have understood that the survey is entirely voluntary and that I can withdraw my participation at any time without any consequences. By participating in the study, I understand that the main risk for me is the discomfort that information required may cause. I also understand that my records will be confidential.

I do hereby accept to participate in the study.

Name of participant: _____

Signature: _____ Date: _____

Investigators Statement:

I the undersigned have adequately explained to the participant the study procedures to be followed, possible risks and benefits that are likely to result from the study as issues related to confidentiality.

Researcher's Name: _____

Researcher's Signature

Date

APPENDIX 2: QUESTIONNAIRE FOR WOMEN PRISONER

Questionnaire Serial No.....

Name of Correctional Facility.....

SECTION ONE: BIOGRAPHIC INFORMATION

(Please indicate the following details by either ticking [✓] inside the brackets or by writing down the response on the space provided).

1. Age:_____
2. Level of education: **Class 8 level** [] **Form four level** [] **College Level** []
University level []
3. Marital status: **Single** [] **Married** [] **Separated or Divorced** [] **Widowed** []
4. What was your occupation at the time of your imprisonment? **Business (Jua Kali)** []
Farmer [] **Student** [] **House wife** [] **Other** (specify) _____
5. Reason for being in prison: (kindly specify)_____
6. How long have you been in this prison?: **0-3 years** [] **4- 6 years** []
7-9 years [] **10-12 years** [] **13- 15 years** [] **16 or more years** []
7. How many times have you been jailed: Once [] Twice [] More than twice []

SECTION TWO: PSYCHOLOGICAL NEEDS OF WOMEN PRISONERS

Psychological needs of women prisoners include: Trauma associated to victimization, Dysfunctional relationships, Parental distress, Low self-esteem and efficacy. Please [✓] the correct box for you.

No	VICTIMIZATION (ABUSE AND TRAUMA)	Yes	No
8.	Were you ever physical abused (beaten) as a child by either your parents or relatives?		
9.	Have you ever been physical abused (beaten) as an (adult) by your husband/spouse?		
10.	Were you ever sexually abused (raped) as child? Uli najisiwa ukiwa mtoto?		
11.	Have you ever been sexual abused (or raped/forced to have sex) as an adult?		
12.	Are you currently feeling stressed (emotionally disturbed) because of someone close		

	to you e.g. family member?		
	PTSD (Reflection of abuse and trauma). Please tick { ✓ } what apply to you		
	In your life has something so frightening or horrible or upsetting (e.g. rape, physical attack, accident, sudden death etc.) happened to you THAT IN THE PAST MONTH:		
13.	You have thought about it when you did not want to?		
14.	You tried hard not to think about it /or avoided situations that could remind you about it?		
15.	Has made you do something worrying or surprising e.g. fighting or shouting at others etc.?		
16.	Has made you feel uninterested in activities (e.g. your work) or feel detached from others?		
Sub- Section -Parental Distress (Ask those with children of age 18 and below)		Yes	No
17.	Do you have children who are age 18 or below that are under your care? If yes, please complete the section below: (If NOT- skip QUESTION 17-25)		
18.	Do you feel prepared in your role as a parent/or mother?		
19.	Are you financially able to provide the basic needs (food, clothing and shelter) to your children without difficulties?		
20.	Are you able to provide good education and health care to your children?		
21.	Do you at times regret having given birth to your child or children?		
22.	Have you ever thought about causing harm to your child/children (e.g. neglecting/abandoning or selling or even killing) due to difficulties in providing for their needs?		
23.	Do you constantly worry about your children's future because of your inability to educate them well or provide their other needs?		
24.	Do you worry about whether you will be able to provide for your children's needs once you are released from prison?		
25.	Do you feel supported by the father of your child/children in meeting his/her (their) needs?		
Sub- section RELATIONSHIPS WITH SIGNIFICANT OTHER (husband/ boyfriend)			
26.	Do you have a husband/or boyfriend that you still keep a relationship? (If yes answer questions no. 27 by ticking [✓] the correct box for you).	Yes	No

	If you answer “NO” please indicate N/A in Nos. 27, 28 and 29			
27.	In general, can you describe your relationship with him as being good, loving and supportive? Very much [] To some extent [] Not at all []			
28.	Would you feel better if you were not in a relationship with your husband/or boyfriend?		Yes	No
29.	Did your husband/or boyfriend contribute to your being in prison now?			
Sub-section RELATIONSHIPS IN FAMILY OF ORIGIN (father, mother and siblings) Adapted from Confussion, Hubbub and Order Scale (CHAOS, 1995)				
30.	i. How is your relationship with your family (father, mother and siblings) Please tick [✓] the correct box for you. i. Good (just minor quarrels) [] ii. Fair (sometimes we quarrel) [] iii. Poor (we quarrel always) []			
31.	My parents always quarreled or fought in our presence as we were growing up		Yes	No
32.	Our home environment was always calm and peaceful			
33.	Dad beat us for mistakes that we made			
34.	Mum shouted or beat us for mistakes that we made			
35.	As siblings we often fought when we disagreed over issues			
36.	How often are you visited in prison? i. Always [] ii. Occasionally [] iii. Never []			
37.	Can you rely on your family for support to get started after release from prison?			

Sub- Section -Self- Esteem= How you measure yourself to others and OR how think that other people see you or judge you. Please **tick (✓)** the response that best describes you.

	STATEMENT	Strongly Agree	Agree	Disagree	Strongly Disagree
38.	I am a person of worth and equal to others (sawa)				
39.	I feel that I have many good qualities (vipaji).				
40.	I feel that I am a failure in life.				
41.	I can to do things well just like many other people.				
42.	I do not have much success to be happy about. (Sijafaulu maishani kunifanya niwe na raha)				
43.	I think positively about myself. (Najisikia uzuri vile)				

	niko				
44.	I am satisfied with myself. (Najisikia niko sawa)				
45.	I tend to do things that I later regret.				
46.	I feel useless at times. (Jisikia mjinga)				
47.	I do think that I am good at times				

Sub Section: Self- Efficacy= How you see yourself perform/do things in different situations e.g. when you make a plan, at work, setting your goals, dealing with unexpected happenings etc. **Please tick (✓) the response that best describes you.**

Question Item		Always	Sometimes	Never
48.	When I make plans, I am always sure I will do it			
49.	I normally have problems beginning to do my work when I am to do it			
50.	I always try doing the things I find difficult or hard without giving up			
51.	I always set important goals (ishara ya kile ninataka kupata) for myself, but I find difficulties achieving them			
52.	I always give up on doing things before completing			
53.	I do avoid trying to do work that looks complicated			
54.	When I decide to do something, I do begin immediately			
55.	When I try to learn something new, I normally give up if I am not successful the first time			
56.	When unexpected problem occurs, I try to solve it			
57.	I do avoid learning to do new things when they look difficult			
58.	Failure at 1 st attempt in doing something, makes me try more			
59.	I do not feel capable of doing most things by myself			
60.	I always need to be helped by others to complete tasks			
61.	I always don't feel capable of dealing with most problems that come up in life			

SECTION THREE: Current Available Rehabilitation Programs for Women Prisoners in Kenya. Please respond by ticking (✓) the correct box for you.

62.	Which of the programmes listed below are offered in this prison? Please tick (✓) ONLY the programs offered in this prison. Mark (X) on those that are not offered.	Tick (✓) or (X)
i.	Computer training	
ii.	Preparation for KCPE (Standard 8 examinations)- Primary Education	
iii.	Preparation for KSCE (Form 4 examinations)- Secondary Education	
iv.	Farming (Training in Agriculture) e.g.by Resource Oriented Development Initiatives	
v.	Hair dressing/Saloon training	
vi.	Catering Skills e.g. baking cakes, making madazi's	
vii.	Pottery – (making pots)	
viii.	Tailoring	
ix.	Knitting (Sweater making)	
x.	Worship/prayer/spiritual guidance	
xi.	Individual counseling	
xii.	Group counseling e.g. prisoners with H.I.V, anger problems	

63. Please tick (✓) the programme(s) from **No. 61** that you are doing/taking in this prison.

- i). Computer [] ii). Primary Education [] iii). Secondary Education []
 iv). Farming [] v). Saloon [] vi). Catering [] vii). Pots making [] viii). Tailoring []
 ix). Knitting [] x). Worship/prayer [] xi). Individual counseling [] xii). Group Counseling [] xiii). Any other..... (Please specify).

Sub- Section Gender-responsive Programs (Treatment focus for women prisoners).
 These reflect the psychological needs of women prisoners.

64.	Which of these PROGRAMS BELOW are offered in this prison? Please tick (✓) the correct box. If the program is NOT offered please put (X) in the box.	Tick (✓) or (X)

		(X)
i.	Classes given to mothers on care of their babies/children e.g. feeding, bathing, correcting wrong behaviors, planning play and play things etc.	
ii.	Screening and detoxification i.e. 1 st level and treatment for substance use	
iii.	Treatment /Individual or group counseling for women prisoners who have been sexually or physically abused.	
iv.	Life skills training such as: Conflict resolution, anger management, stress management, time management, problem solving skills etc.	
v.	Open Day for family members, relatives and friends to visit with prisoners/ Bonding with family	
vi.	Skills on improvement of interpersonal relationships between prisoners and their husband/boyfriend and family members.	

65. Please **TICK** (✓) the program (s) from **No. 63** that you are doing/taking in this prison.

- i). Classes on child care []. **ii).** Screening and detoxification for Alcohol/drugs []
iii). Counseling for sexual or physical abused [] **iv).** Life skills training []. **v).**
Open days/ visiting by relatives and well- wishers [] **vi).** Training on interpersonal
relationships e.g. family members and husbands []

66. **Only for those who are taking part in the rehabilitation programs.** How did you get to participate in the program that you are undertaking in this prison? **Please tick [✓] ONLY ONE correct box that applies to you.**

- i). I was helped to choose a program that could help address my needs/problem (s) []
ii). I chose it to keep myself busy and to pass time []
iii). I was forced to do it []
iv.). I am doing it because I want to be in the company of my friend []

SECTION FOUR: Extent to Which the Current Rehabilitation Programs Addresses the Psychological Needs of Women Prisoners

67. When I first came to this prison, I was given information (orientation) within the 1st week about the rehabilitation programs that are available. **Yes** [] **No** []

68. I was helped to choose a program that could help address my need(s) e.g. anger management, alcoholism, skill towards employment etc.? **Yes** [] **No** []

69. In your view, why do some convicted women prisoners **NOT take part** in the rehabilitation programs offered in this prison? Please tick [] **ONE option**.

i). The equipment e.g. computers and sewing machine are not enough []

ii). They have been refused/denied the chance to participate []

iii). They are not interested in participating in any of the programs []

SECTION FIVE: Ways of Improving the Current Rehabilitation Programs for Women Prisoners

70. What in your opinion is the **MOST** important way to ensure effective rehabilitation of women prisoners in Kenya? **Please tick (✓) ONLY ONE option below that you see as very important.**

i). Train prisons staff on how to manage/conduct rehabilitation programs []

ii). Assesses needs and rehabilitate **ALL** women prisoners based on issues that lead them to crime []

iii). Allow more collaboration/partnership with different Chaplaincies (Churches), NGO's like Faraja Trust, Fr. Grol's Welfare Trust (Br. Linus group), and Resources' Oriented Development Initiatives (RODI) etc. []

71. Please suggest **ANY** other way (s) for improving the current rehabilitation programs and practices within this prison?

THANK YOU FOR YOUR HONEST RESPONSES

APPENDIX 3: FOCUS GROUP DISCUSSION FOR WOMEN PRISONERS

Name of Correctional Facility: _____

Dear Respondent,

My name is Jacinta Ondeng, a Doctor of Philosophy (PhD) student from the department of psychology of Kenyatta University. I am currently undertaking a study on effectiveness of rehabilitation programs in addressing the psychological needs of women prisoners (**The purpose of this study is to learn about how SPECIFIC psychological needs of women offenders are addressed by rehabilitation programs in this prison**).

I humbly request for your participation in this study.

Our discussion will be written down on a notebook and recorded on a tape. All the information written down and recorded will be treated with utmost confidentiality and will only be used for the purpose of this study.

Thank you for agreeing to participate in this discussion.

Sincerely,

Jacinta A. Ondeng

CONSENT

I have been given the information about this study and understand that this study is voluntary and that the information given will be treated with utmost confidentiality. I accept to be a participant in this study.

Signature _____ Date _____

SECTION A: BIOGRAPHIC INFORMATION

(Please indicate the following details by either ticking [✓] inside the brackets or by writing down the response on the space provided).

1. Age: _____
2. Level of education: **Class 8 level** [] **Form four level** [] **College Level** []
University level []
3. Marital status: **Single** [] **Married** [] **Separated or Divorced** [] **Widowed** []
4. What was your occupation at the time of your imprisonment? **Business (Jua Kali)** []
Farmer [] **Student** [] **House wife** [] **Other** (specify) _____
5. Reason for being in prison: (kindly specify) _____
6. How long have you been in this prison?: **0-3 years** [] **4- 6 years** []
7-9 years [] **10-12 years** [] **13- 15 years** [] **16 or more years** []
7. How many times have you been jailed: **Once** [] **Twice** [] **More than twice** []

SECTION B: FGD GUIDE

8. Which of the following psychological needs are noted amongst women prisoners
 - a. *Trauma associated with physical and sexual abuse (who are responsible; look at both childhood and adult life?)*
 - b. *Parenting distress- (focus on lack of preparedness in parenting roles plus any other issue e.g. lack of spousal support in providing needs of children)*
 - c. *Dysfunctional relationships e.g. from families of origin or spousal*
 - d. *Low self- esteem/Low self- efficacy – (Probe in relation to lack of empowerment)*
 - **Self- Esteem- What I think about myself in terms of others and the world/or how I value myself**
 - **Self- efficacy:- an individual’s perception of their ability to perform across a variety of different situations**

9. How do these psychological needs contribute to offending in women? Probe: **(Is there any relationship between the two?)**

10. Are there programs in this prison that address the problems above? If yes what is taught/done in the program? **Probes:** Is the program an individual or a group program? How often is it offered- weekly or monthly?

N/B Purposefully determine if the following comes out in the treatment/rehabilitation:

- a. Parenting skills for mothers on how to care for their young children
- b. Addiction treatment to women prisoners with alcohol and other drug problems
- c. Counseling and treatment for prisoners who have histories of sexually and/or physical molestation
- d. Child visiting days planned by the Kenya Prisons Department
- e. Life skills training such as: conflict negotiation and resolution, anger management, stress management etc.
- f. Prisoners helped to identify and develop their talents e.g. cookery, pottery, hair dressing etc. This is a source of empowerment towards boosting ones' self-esteem/image
- g. Visiting days allowed for family members, relatives and friends to connect with the offender to help build relationships
- h. Group and individual counseling to address relationship issues with spouses (husband, boyfriend) and family members (father, mother, siblings)
- i. Counseling and teaching on how to improve relationships (with husband/boyfriend/other family members)
- j. Role models (women with success stories) allowed to visit and talk to prisoners

11. How do inmates get to participate in this the program?

Probe: Are any tools or assessment criteria used in selecting participants? *Is there a Needs/Risk assessment?*

12. What do you think could improve the current rehabilitation practices in women prisons in Kenya?

APPENDIX 4: INTERVIEW SCHEDULE FOR OFFICERS’S IN-CHARGE OF THE PRISONS; DIRECTOR OF REHABILITATION AND SOCIAL WELFARE AND REPRESENTATIVES OF FBOs and NGOs

Name of the Correctional Facility/Prison.....

Thank you for agreeing to participate in this discussion. The purpose of this study is to learn about how the psychological needs of women offenders are addressed in this prison’s facility. The information you give us is completely confidential and we will not associate your name with anything you say unless you request us to do so. We would like to record part of our discussion so that we can make sure we capture all the thoughts, opinions and ideas we hear from you. You may refuse to answer any question or withdraw from the study at any time.

Please respond to the issues under discussion as honestly as you can. Note that there is no **wrong** answer. ALL answers are correct.

Being a participant in this study is voluntary. Please confirm that you have read the above information and accepted to participate in this study voluntarily by putting your signature on the consent below.

Thank you for agreeing to participate in this discussion

Yours Sincerely,

Jacinta Ondeng

CONSENT

I have read the above information and understood that this study is voluntary and that the information given will be treated with utmost confidentiality. I accept to be a participant in this study.

Signature _____ Date_____

Part A. Background Information

1. a). What position to you hold in this prison? _____

Part B: Theoretical/Philosophical basis- (Program Features)

2. What are some of the rehabilitation programs for women offenders in this prison?
3. What guides the development of these programs /how are they determined? *Probe: What are some of the ideas about rehabilitation that inform the programs offered in this institution e.g. Theory?*
4. Are these programs uniformly offered in all the correctional facilities in Kenya? If yes/no, Why?

Part C: Extent that Current Rehabilitation Address Psychological Needs of Women Offenders

5. Are there specific programs that addresses the following needs/issues of women offenders in this prison (trauma, dysfunctional relationships, substance use/abuse, Low self- esteem and self-efficacy and parental distress)?

Probes: EXPLAIN HOW THESE THE FOLLOWING ARE HANDLED-

- i. Parenting skills for mothers on how to care for their young children
- ii. Addiction treatment to women prisoners with alcohol and other drug problems
- iii. Counseling and treatment for prisoners who have histories of sexually and/or physical molestation
- iv. Child visiting days/ policy on open days planned by the Kenya Prisons Department
- v. Life skills training such as: conflict negotiation and resolution, anger management, stress management etc.
- vi. Prisoners helped to in identify and develop their talents e.g. cookery, pottery, hair dressing etc. This is a source of empowerment towards boosting ones self-esteem/image
- vii. How are issues of dysfunctional relationships with spouses (husband, boyfriend) and family members (father, mother, siblings) handled?

- viii. Training on interpersonal relationships (e.g. to improve ruined relationships with husband/boyfriend/other family members)
6. What criteria if any, are used to admit woman offenders into given program (s)? Are there assessments/ screening done?
7. How many trained counselors are there in this prison? And what level of training do they have?
8. How is counseling planned/organized in this facility?
- How do the women get to see a counselor?
-Where are the sessions held?
-How many days are given to counseling?

Part D: Program Delivery and staff

9. a.) Who delivers the programs?
- b). What qualifications do they have/training?
- c. What provisions are there for staff support in form of further relevant training? Conferences, workshops, provision of literature, in-house staff development?

Part E: Program Monitoring and Evaluation

10. How are the program(s) evaluated? *Probes: i. Documentations/Record Kept; ii Programs audits, reviews; iii. In-house or and External evaluations*

Part G: Challenges and Recommendations

- 17 a). What can you identify as some challenges in realizing effective rehabilitation programs for women offenders in this prison
- b). In your view, what can be done to strengthen rehabilitation programs for women offenders in Kenyan prisons?

APPENDIX 5: DSM-5 (2013) DIAGNOSTIC CRITERIA FOR PTSD

In 2013, the American Psychiatric Association revised the PTSD diagnostic criteria in the fifth edition of its *Diagnostic and Statistical Manual of Mental Disorders (DSM-5; 1)*. PTSD is included in a new category in *DSM-5*, Trauma and Stressor-Related Disorders. All of the conditions included in this classification require exposure to a traumatic or stressful event as a diagnostic criterion. For a review of the *DSM-5* changes to the criteria for PTSD, see the American Psychiatric Association website on [Posttraumatic Stress Disorder](#).

DSM-5 Criteria for PTSD

Full copyrighted criteria are available from the American Psychiatric Association (1). All of the criteria are required for the diagnosis of PTSD. The following text summarizes the diagnostic criteria:

Criterion A (one required): The person was exposed to: death, threatened death, actual or threatened serious injury, or actual or threatened sexual violence, in the following way(s):

- Direct exposure
- Witnessing the trauma
- Learning that a relative or close friend was exposed to a trauma
- Indirect exposure to aversive details of the trauma, usually in the course of professional duties (e.g., first responders, medics)

Criterion B (one required): The traumatic event is persistently re-experienced, in the following way(s):

- Unwanted upsetting memories
- Nightmares

- Flashbacks
- Emotional distress after exposure to traumatic reminders
- Physical reactivity after exposure to traumatic reminders

Criterion C (one required): Avoidance of trauma-related stimuli after the trauma, in the following way(s):

- Trauma-related thoughts or feelings
- Trauma-related reminders

Criterion D (two required): Negative thoughts or feelings that began or worsened after the trauma, in the following way(s):

- Inability to recall key features of the trauma
- Overly negative thoughts and assumptions about oneself or the world
- Exaggerated blame of self or others for causing the trauma
- Negative affect
- Decreased interest in activities
- Feeling isolated
- Difficulty experiencing positive affect

Criterion E (two required): Trauma-related arousal and reactivity that began or worsened after the trauma, in the following way(s):

- Irritability or aggression
- Risky or destructive behavior
- Hypervigilance
- Heightened startle reaction
- Difficulty concentrating
- Difficulty sleeping

Criterion F (required): Symptoms last for more than 1 month.

Criterion G (required): Symptoms create distress or functional impairment (e.g., social, occupational).

Criterion H (required): Symptoms are not due to medication, substance use, or other illness.

Two specifications:

1. **Dissociative Specification.** In addition to meeting criteria for diagnosis, an individual experiences high levels of either of the following in reaction to trauma-related stimuli:
 - Depersonalization. Experience of being an outside observer of or detached from oneself (e.g., feeling as if "this is not happening to me" or one were in a dream).
 - Derealization. Experience of unreality, distance, or distortion (e.g., "things are not real").
2. **Delayed Specification.** Full diagnostic criteria are not met until at least six months after the trauma(s), although onset of symptoms may occur immediately.

Note: *DSM-5* introduced a preschool subtype of PTSD for children ages six years and younger.

Courtesy of APA, 2013

**APPENDIX 6: PERMIT FROM THE NATIONAL COMMISSION FOR
SCIENCE, TECHNOLOGY AND INNOVATION (NACOSTI)**



**NATIONAL COMMISSION FOR SCIENCE,
TECHNOLOGY AND INNOVATION**

Telephone: +254-20-2213471,
2241349, 3310571, 2219420
Fax: +254-20-318245, 318249
Email: dg@nacosti.go.ke
Website: www.nacosti.go.ke
When replying Please quote

9th Floor, Utalii House
Uhuru Highway
P. O. Box 30623-00100
NAIROBI-KENYA

Ref: No.
NACOSTI/P/16/33474/13542

Date:

8th September, 2016

Jacinta Achieng' Ondeng
Kenyatta University
P.O. Box 43844-00100
NAIROBI.

RE: RESEARCH AUTHORIZATION

Following your application for authority to carry out research on "*Effectiveness of offender rehabilitation programmes in addressing the psychological needs of women offenders in Kenya,*" I am pleased to inform you that you have been authorized to undertake research in **all Counties** for the period ending **7th September, 2017.**

You are advised to report to **the County Commissioners and the County Directors of Education, all Counties** before embarking on the research project.

On completion of the research, you are expected to submit **two hard copies and one soft copy in pdf** of the research report/thesis to our office.

**DR. STEPHEN K. KIBIRU, PhD.
FOR: DIRECTOR-GENERAL/CEO**

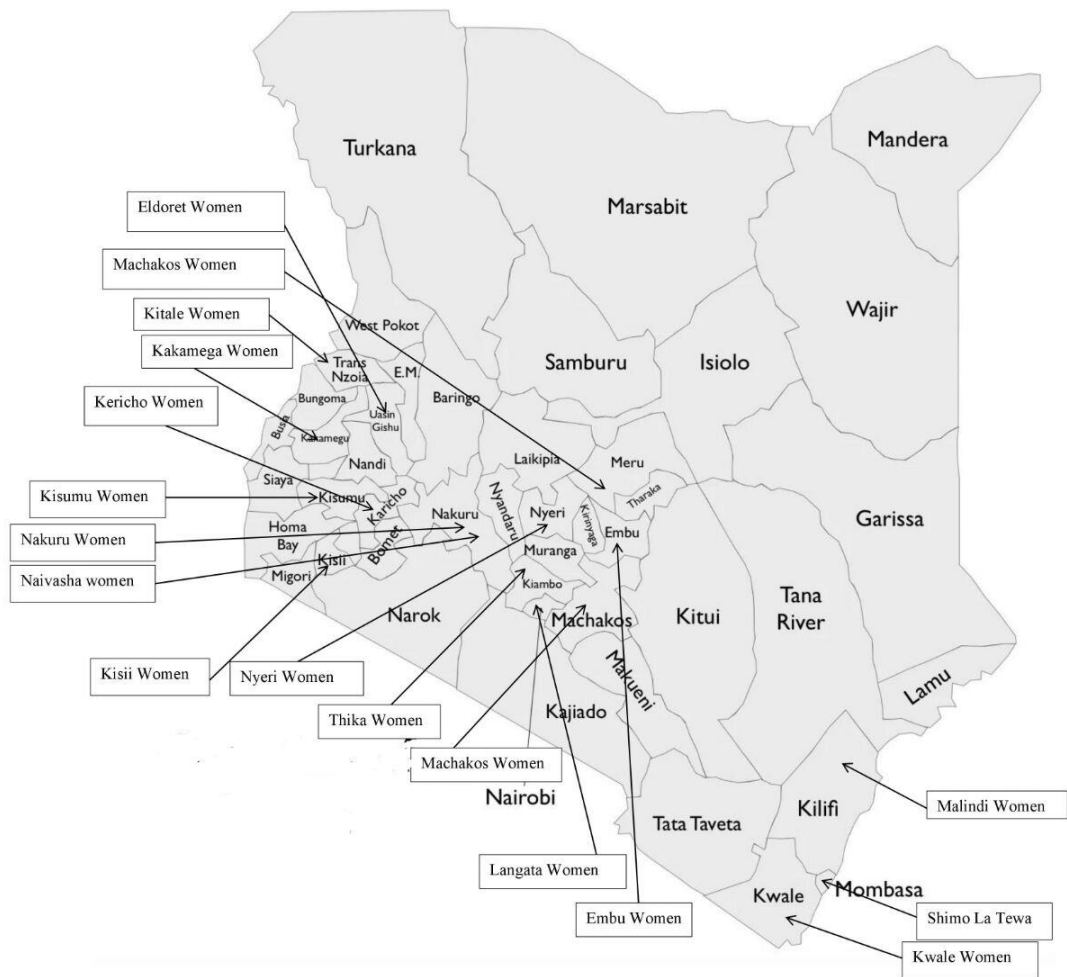
Copy to:

The County Commissioners
All Counties.

The County Directors of Education
All Counties.

National Commission for Science, Technology And Innovation Is ISO 9001:2008 Certified

APPENDIX 7: MAP OF WOMEN'S CORRECTIONAL FACILITIES IN KENYA



N/B These are the main correctional facilities for women in Kenya (They have more than 10 women inmates at any given time).