

# Gender Informed Practices Assessment

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Director Michael Reese

Deputy Director Heidi Steward



# Our Mission



# Incarcerated Women are Unique

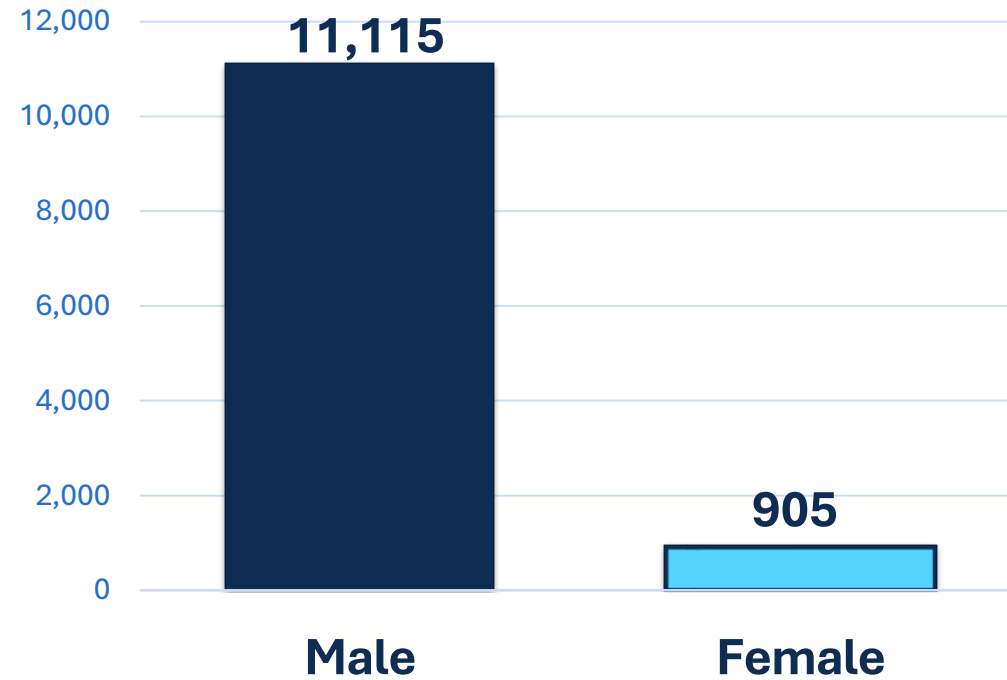


**70%** of women incarcerated in prisons and jails report experiences of intimate partner violence and victimization.

**90%** of women with criminal justice system involvement have experienced some form of trauma.



# DOC Population by Gender



\*as of December 2024.

# GIPA Report Summary



## GENDER INFORMED PRACTICES ASSESSMENT (GIPA) Report of Findings & Opportunities Coffee Creek Correctional Facility (CCCF) 2023



**Submitted by:**  
Women's Justice Institute  
Center for Effective Public Policy

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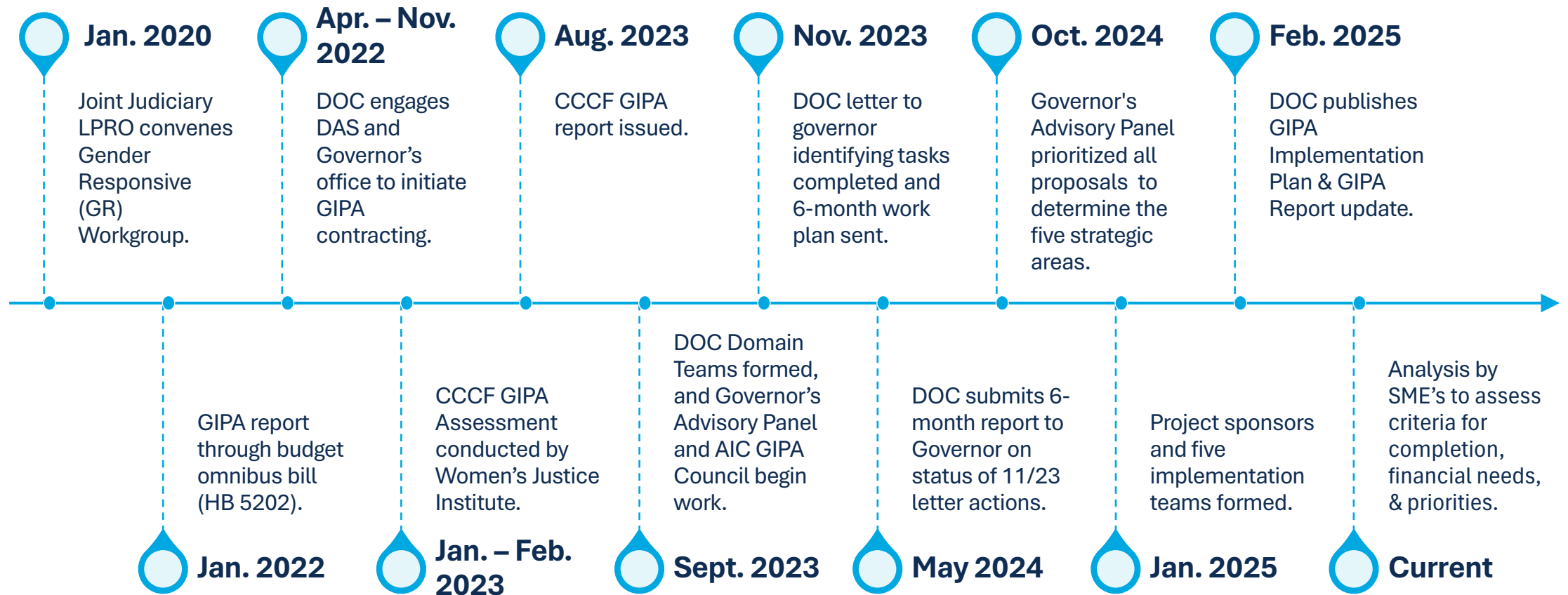
Marilyn Van Dieten, PhD  
*Senior Advisor, Center for Effective Public Policy*



**C E P P**  
Center for  
Effective  
Public Policy

“To move forward, DOC must create dedicated leadership roles for women’s services, stabilize staffing, revamp training and culture, prioritize investment in women-centered services, and partner more intentionally with community organizations. Immediate and sustained efforts are needed to improve outcomes for incarcerated women and their families.”

# GIPA Timeline



# The Process of Prioritizing Proposals



Governor's GIPA  
Panel & CCCF  
Domain Team



DOC Steering  
Committee



DOC Assistant  
Directors



Implementation  
Teams



The Governor's Advisory Panel and DOC's workgroups recommend key proposals from the GIPA Report and AIC input.

This smaller panel of two current CCCF AICs, Governor's staff, CCCF leadership, and DOC leadership evaluate proposals and pass on to DOC Assistant Directors.

DOC Assistant Directors lead Implementation Teams to review proposals and evaluate operational requirements.

Implementation Teams meet regularly to review projects, monitor progress, and communicate updates.



# Governor's GIPA Panel



1. Nichole Brown, Gender Responsive Practices Superintendent
2. Mandy Davis, PhD, Trauma Informed Oregon
3. Paige Frye-Holcomb, PhD, Criminal Justice Commission
4. Julia Yoshimoto, Oregon Justice Resource Center
5. Jessica Katz, Family Preservation Project
6. Brittany Wake, OHA Behavioral Health
7. Anna Stiefvater, OHA Maternal and Child Health
8. Chelsea Cappadona, ODHS Child Welfare
9. Leticia Longoria Navarro, The Pathfinder Network
10. Rima Green, Growing Gardens
11. Seth Johnstone, Basic Rights Oregon
12. Biff Chaplow, Beyond These Walls
13. Mariana Garcia Medina, ACLU
14. Kacie Hollinger, Parent Mentor & Co-chair of Incarcerated Parent Workgroup
15. Meghan Apshaga, Disability Rights Oregon
16. Alicia Roach, The Ostara Initiative
17. Ray Mooney, local AFSCME VP & CCCF Staff
18. Kendra Stidhem, Peer Wellness Specialist & former CCCF AIC
19. Kristina Rice, Corrections Ombuds

**\*Many others are included in this work through participation in panel workgroups and Implementation Teams - thank you!**



# Implementation Teams



GIPA Staff Training & Facility Culture Implementation Team

# GIPA Implementation Team: PREA



- **Charge:** Improve PREA policies and procedures.
- **Goal:** Ensure physical safety and psychological well-being for all AICs and staff, including protection from sexual assault and retaliation.

## Progress highlights to date:

- Established a full-time PREA Compliance Manager who reports directly to the OIG in the Director's office.
- Established a full-time Sexual Abuse Liaison to lead the Sexual Abuse Response Team at CCCF.
- Now advancing 28 recommendations.



## Team members:

- **Gary Ninman**, DOC Inspector General (Lead)
- **Ericka Sage**, PREA Administrator
- **Amanda van Arcken**, PREA Captain
- **Chris Arnoux**, PREA Coordinator
- **Laura Hinkle**, CCCF PREA Compliance Mgr
- **Amanda Mooney**, CCCF Sexual Abuse Liaison
- **(Pending)** Director, Center for Hope and Safety
- **Kendra Stidhem**, Lane County Behavioral Health

# GIPA Implementation Team: Staff Training & Facility Culture



- **Charge:** Developing and maintaining a well-trained professional staff and positive facility culture.
- **Goal:** Utilize gender responsive recruitment, retention, training, promotion, and accountability improvements to ensure a facility culture that promotes well-being for staff, AICs, and the facility.



## Progress highlights to date:

- Delivered the “Creating Regulation and Resilience” (CR2) training to hundreds of staff members, instructor development courses being scheduled.
- Implementation of Expectations and Accountability plan for CCCF Leadership, including specific GIPA training modules for CCCF Managers.
- Now advancing 47 other recommendations.

## Team members:

- **Gail Levario**, Asst. Dir. Employee Services (Lead)
- **John Taber**, Professional Development Administrator
- **Emily Bowen**, Training & Development Specialist
- **Zach Erdman**, Safety & Wellness Administrator
- **Christine Popoff**, CCCF Asst. Superintendent
- **Chelsea Cappadona**, ODHS-Child Welfare
- **Michelle Ehlers**, Opportunity Oregon



# GIPA Implementation Team: Re-entry and Release



- **Charge:** Establishing comprehensive supports for successful release and reentry.
- **Goal:** Implement gender responsive practices and expand access to resources that address the unique needs of women and support their successful return to their communities.

## Progress highlights to date:

- Launched a Transitional Unit known as “Hope House.”
- Established a WorkSource center at Coffee Creek, including linkages to community-based resources through the Inside Out Network.
- Now advancing 32 recommendations.



## Team members:

- |   |   |
|---|---|
| • <b>Larry Bennett</b> , Asst. Dir. of Correctional Services (Lead) | • <b>Polly Rowland</b> , CCCF Assistant Superintendent  |
| • <b>Amy Bertrand</b> , Re-entry and Release Services Administrator | • <b>Paula Fata</b> , Community Corrections Coordinator |
| • <b>Brooke Vice</b> , Deputy Director, Community Corrections       | • <b>Paige Frye-Holcomb</b> , CJC                       |
| • <b>Promise Parker</b> , Release Services Manager                  | • <b>Kyle Black</b> , OJRC                              |



# GIPA Implementation Team: Gender Responsive Operations



- Charge: Infuse gender responsive and trauma informed practices into all aspects of facility operations.
- Goal: Maintain a custodial setting that furthers the goals of safety and security while providing opportunities for personal growth and rehabilitation.



## Progress highlights to date:

- Improve identified issues in the Special Housing Unit.
- AICs on intake status have access to canteen purchases.
- Now advancing 54 recommendations.

## Team members:

- **Josh Highberger**, Assistant Director Operations (Lead)
- **Nichole Brown**, Supt. of Gender Informed Practices
- **Tom McLay**, Westside Institutions Administrator
- **Chris Randall**, Acting CCCF Superintendent
- **Veva Campeau**, DEI Manager
- **Mandy Davis**, Trauma Informed Oregon
- **Angela Kim**, OJRC

# GIPA Implementation Team: Medical Services



- Charge: Provide timely and appropriate medical care to all AICs.
- Goal: Promote AIC wellness through the effective delivery of quality medical care and resources.



## Progress highlights to date:

- Coffee Creek's Doula Program.
- Substance Use Disorder (SUD) treatment now available to all AICs at all stages of their sentence.
- Now advancing 44 recommendations.

## Team members:

- **Heidi Steward**, Deputy Director - Acting Assistant Director Health Services
- **Aimee Hughes**, Medical Services Administrator
- **Buffy Ross**, Assistant Health Services Administrator
- **Mira Nicolas**, Medical Services Manager CCCF
- **Jodi Hansen**, Former Healthcare Administrator, ED Remnant Initiatives
- **Alicia Roach**, Doula, Ostara Initiative

# Two Phase Approach to Implementation



## Implementation – Phase Two

As phase one work progresses, work in the following areas will commence, with the order of implementation to be determined based on available resources, stakeholder input, and evolving needs.

### Parenting and Family Connections

Building on the foundation laid in phase one, DOC will strengthen programs that promote family reunification, parenting skills, and maintaining family connections during incarceration. This will include expanding parenting education programs, facilitating family visits, and offering mentorship opportunities for women with children to help them prepare for reintegration into family life post-release.

### Community Engagement

In phase two, DOC will expand its outreach and collaboration with community organizations and support networks. Partnerships with local agencies, service providers, and advocacy groups will be integral in ensuring incarcerated women have the resources and guidance they need upon release. These efforts will include strengthening pre-release coordination with community resources to provide stable housing, employment, and mental health services upon return to the community.

### Data/Monitoring/Oversight

DOC will continue to enhance its data systems to improve monitoring and oversight of reentry outcomes, program effectiveness, and gender-responsive care. This will include updating tracking systems to evaluate AIC progress, identify areas for improvement, and inform future programming. Enhanced reporting mechanisms will be implemented to ensure transparency, accountability, and ongoing evaluation of reentry-related efforts.

### Access to Justice

DOC will work to increase access to justice for incarcerated women by ensuring they have the resources and support they need to engage with the legal system. This will include offering legal assistance for women navigating parole hearings, sentence modifications, and other legal processes, as well as expanding access to legal representation for those who need it. The goal is to ensure fair treatment and equitable outcomes for women involved in the justice system.

### Behavioral Health Services

Expanding behavioral health services will be a key component of phase two. DOC will focus on providing comprehensive mental health care, substance abuse treatment, and trauma-informed therapy to incarcerated women. These services will address the unique needs of women, including the impacts of childhood trauma, intimate partner violence, and substance use disorders, ensuring they are better equipped to heal and succeed post-release.

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### Physical Facility

To support the implementation of these initiatives, DOC will also assess and address the physical needs of the facility. This includes creating dedicated spaces for reentry-focused programming, such as peer support, family visits, and educational opportunities, as well as ensuring the facility is safe, accessible, and equipped to support women's unique needs. Considerations will also include improvements to food and security protocols that allow for greater autonomy and safety for incarcerated women.

### Work Related to GIPA

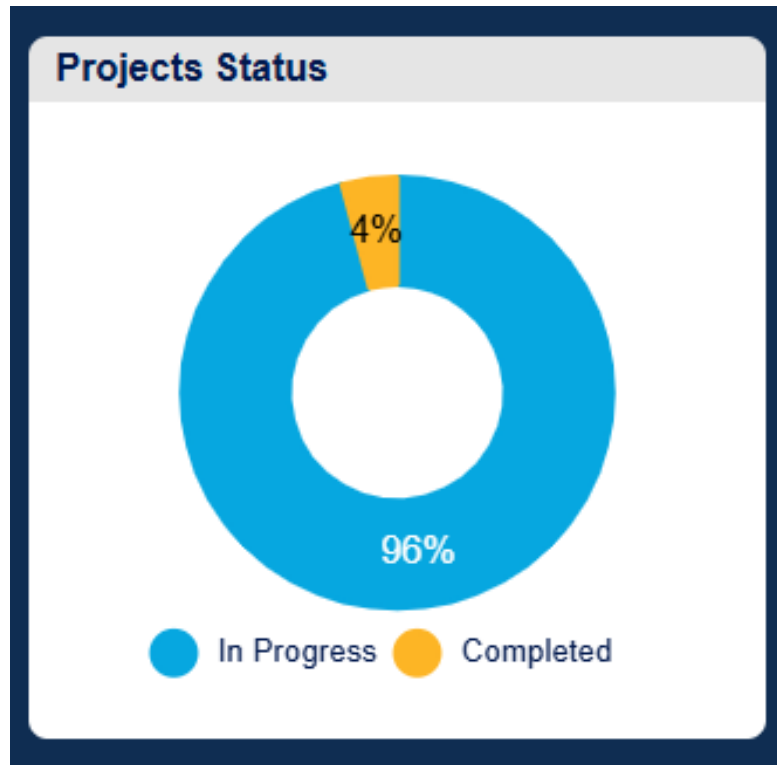
DOC has a long-standing commitment to gender-responsive and trauma-informed practices, positive programming, and community-based services. The following initiatives are currently being implemented that cross multiple initiative areas. Key priorities include:

- Access to Incarceration:** Increasing access to community-based programs that support reentry.
- Divergent AICs:** Improving accommodations, services, and resources for women with diverse needs.
- Communication Systems:** Strengthening AIC connections with community-based organizations.
- PRAS:** Review and suggest changes to ensure AICs are better equipped to meet health, cultural, and other needs.

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- **Behavioral Health Services:**
  - Goal: Effectively deliver high-quality behavioral health services, including evidence-based substance disorder treatment.
- **Community Engagement:**
  - Goal: Promote engagement and collaboration with citizens, communities, and leaders to advance improvements for the benefit of AICs and staff.
- **Data, Monitoring, and Oversight:**
  - Goal: Establish oversight and accountability protocols to ensure transparency and continuous quality improvement.
- **Access to Justice:**
  - Goal: Increase access to justice for incarcerated women by ensuring they have the resources and support they need to engage with the legal system.
- **Parenting and Family Connections:**
  - Goal: Leverage intrinsic motivational factors through support for connections with family and other important supports.
- **Indoor/Outdoor Facilities:**
  - Goal: Provide a physical environment that supports AIC growth, wellness, and transformation.

# Accountability and Transparency



A detailed report of all GIPA-related projects and their status lives on the DOC website, with a link on the home page:

[www.Oregon.gov/DOC](http://www.Oregon.gov/DOC)

We are committed to a system of accountability that includes providing quarterly updates to the legislature and stakeholders.



# Our Challenges

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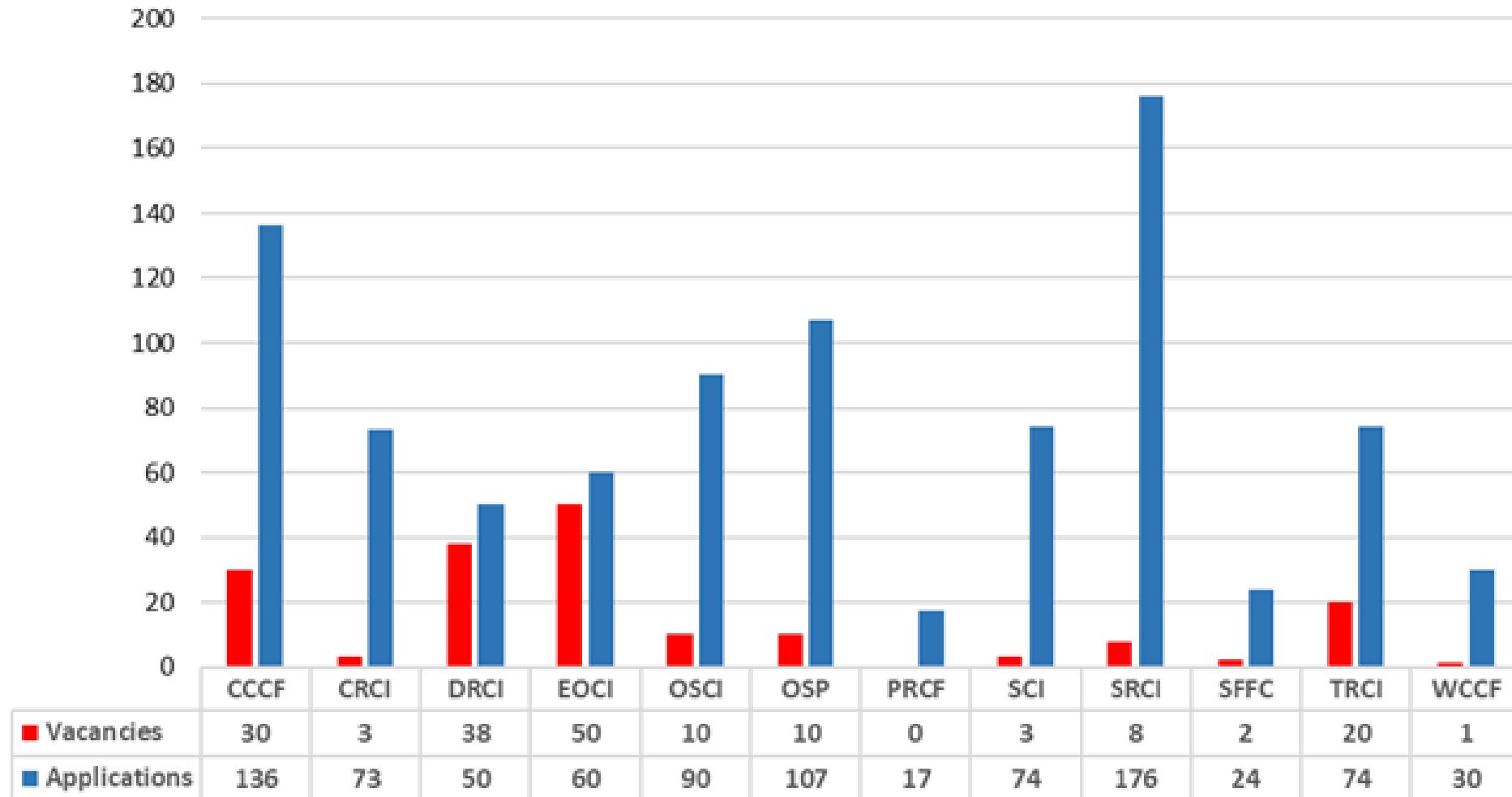


- Staffing
- Culture
- PREA
- Healthcare
- Funding

# Staffing



## Correctional Officer Vacancies Vs Applicants



# Institution Culture



## HOW STAFF CAN SUPPORT GIPA



Recognize gender differences in experiences and needs.



Apply trauma-informed and equitable practices in daily interactions.



Encourage inclusivity by fostering safe spaces for rehabilitation.



Stay informed and engaged in gender-responsive initiatives and continuous improvement

- Zero tolerance for PREA violations.
- PREA-specific staffing.
- Addressing structural vulnerabilities.
- PREA dashboard.





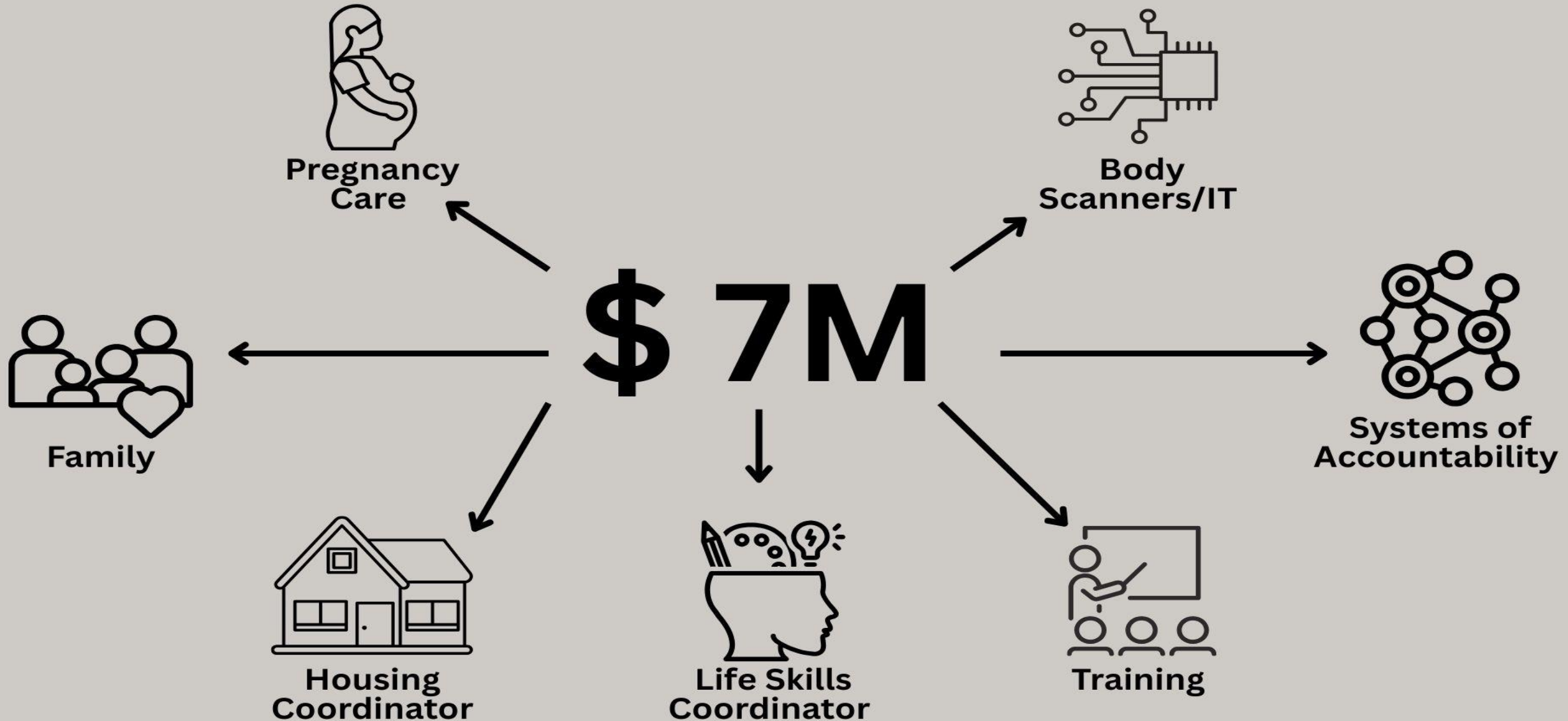
# Health Services



- Medical Services
- Behavioral Health Services
- SUD Treatment Services
- Dentistry
- Pharmacy and Pharmacy Stores



# Gender Informed Practices Assessment (POP)



# Our Successes

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- Reentry Housing Unit
- Doula Program
- Communication
- Partnerships
- New CCCF Superintendent

# Freedom House Reentry Housing Unit



“I now have been at the Freedom House for two weeks and wake up every day refreshed with a new mindset of getting out.

It’s allowing me to solely focus on me, my release, my recovery, and my potential success.

Thank you to all that have worked so hard to make this happen!!!”

- Former AIC Sharipof



# Doula Program



82nd OREGON LEGISLATIVE ASSEMBLY--2023 Regular Session

## Enrolled House Bill 2535

Sponsored by Representative REYNOLDS, Senator PATTERSON; Representatives BOSHART DAVIS, BOWMAN, BYNUM, CRAMER, DEXTER, FAHEY, GAMBA, GRAYBER, HARTMAN, HIEB, HUDSON, KROFF, LEVY B, LEVY E, LEWIS, MARSH, MORGAN, NELSON, NERON, NOSSE, PHAM K, RESCHKE, SCHARF, TRAN, VALDERRAMA, WALLAN, WALTERS, Senator GELSER BLOUIN (Presession filed.)

CHAPTER .....

AN ACT

Relating to pregnancy in correctional facilities; and prescribing an effective date.

Whereas, over the past several decades, the number of women incarcerated in the United States has increased nearly 650 percent, with over 200,000 women currently in a correctional facility; and

Whereas the United States Department of Justice estimates that between 5 and 10 percent of female adults in custody are pregnant at the time of incarceration; and

Whereas approximately 68,000 children in Oregon have or have had an incarcerated parent; and

Whereas, compared to women in the general population, pregnant incarcerated women have a higher risk of poor birth outcomes, including preterm birth (birth prior to 37 weeks of gestation) and small-for-gestational-age babies (below the 10th percentile for babies born at the same gestational age); and

Whereas incarceration impacts more than a mother's pregnancy in that the separation of incarceration causes a disruption in the parent-child bond, which can lead to insecure attachment and cause a variety of adverse outcomes; and

# Communication



## AIC Communication

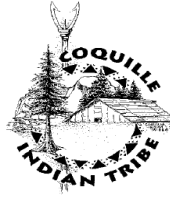
- One-on-one meetings with leadership
- Townhalls
- Newsletter articles on GIPA, PREA

## Employee Communication

- Clear expectations of Managers
- PAF Check ins
- Policy changes



# Success through Partnership



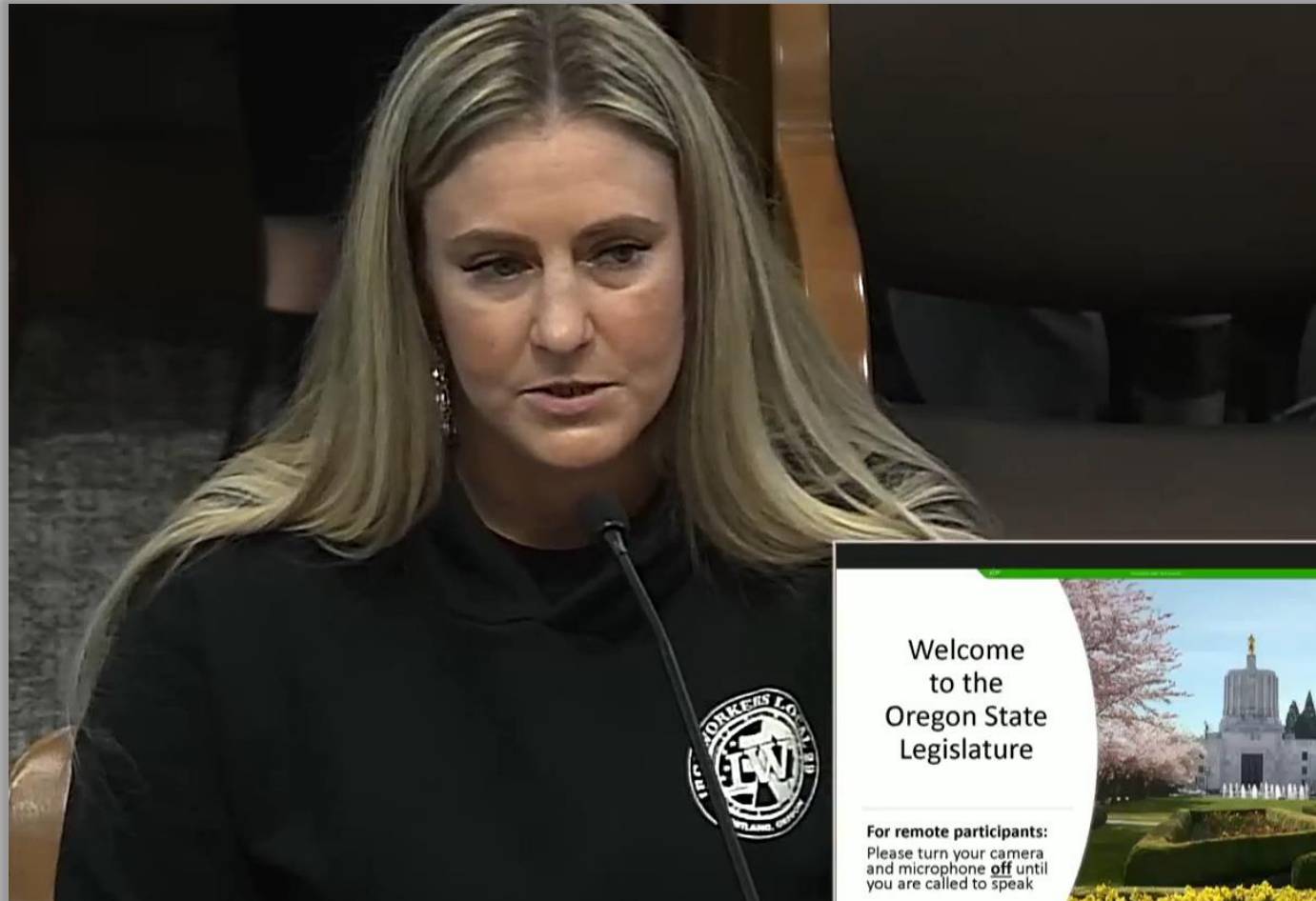
Family Preservation Project

# Charlotte Thrasher, new CCCF Superintendent



“I am honored to join the Oregon Department of Corrections and am thankful for the opportunity to continue my commitment to improving the lives of incarcerated women by leading enhancement of trauma and gender practices. I am excited to work side by side with the staff at CCCF as we build this initiative together.”

# Ways and Means Public Testimony



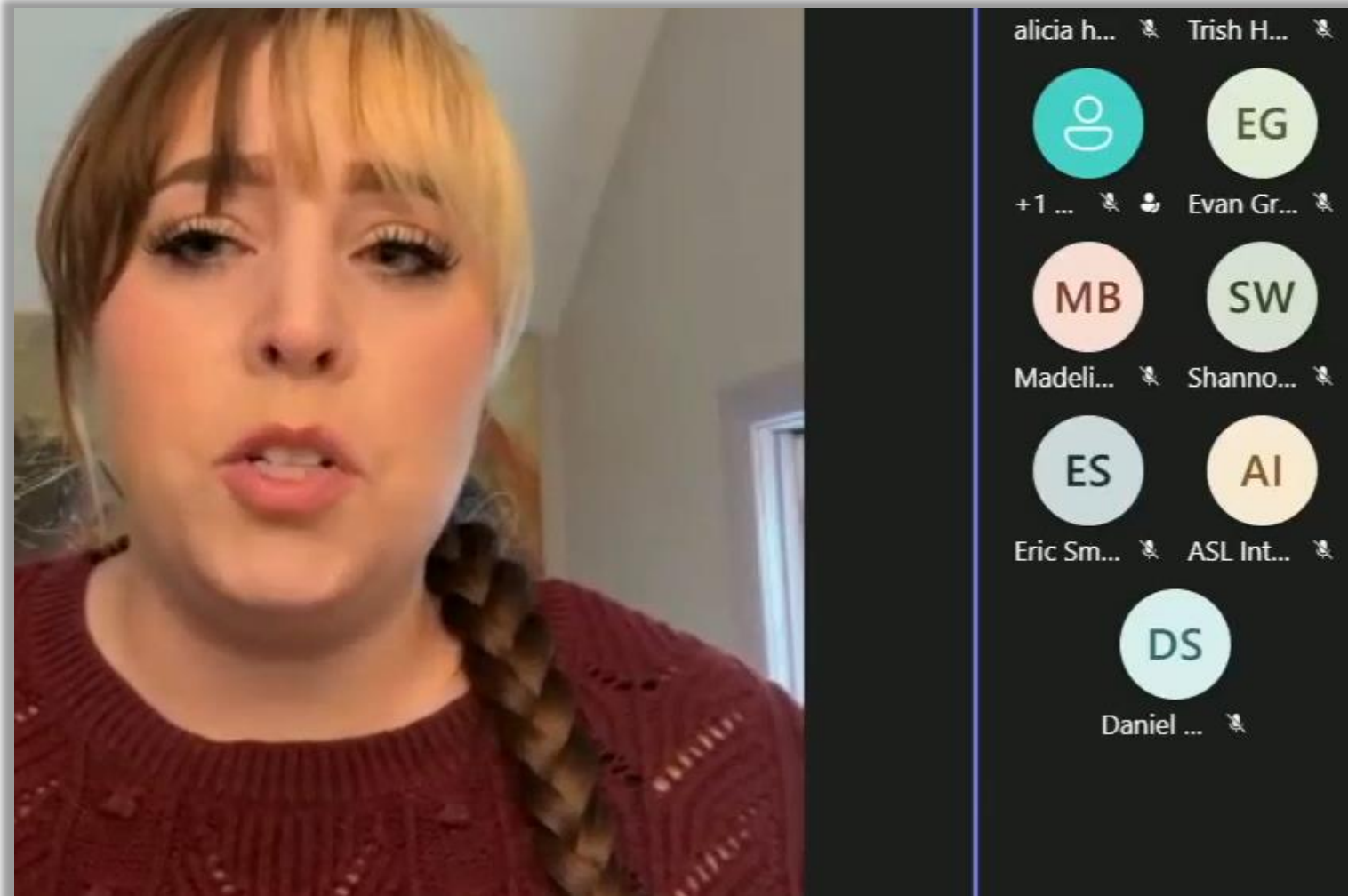
“I was incarcerated for 5 years at Coffee Creek. At first, I took my sentence as a punishment. **Then I realized that I could use that time as an opportunity to change my life for the better** if given the right opportunity.

U-PACT was that chance. Not only did they teach me the ways of the trades, but they set me up for success. I was released July 5, 2024, and went straight to work...**this program changed my life.**”

*-Ashley Lautenschlager*



# Ways and Means Public Testimony



“I was incarcerated at Coffee Creek for 30 months and released in November 2023. **I was able to leave incarceration with a career as a paralegal.**

Now that I’m on the other side of incarceration and able to assist adults in custody who are swimming in the tumultuous waters of reintegration, it is the **most fulfilling work I’ve ever found.”**

- Stephanie Davis

# Ways and Means Public Testimony



“There are tons of excellent programs – job training, coping skills, learning how to manage life on the outside once you’re released. There’s just not enough funding to expand these programs. We need the AICs to have the opportunity to enter those programs that will give them job skills and confidence to move forward.”

- Alicia Humbert

# Ways and Means Public Testimony



“While I was incarcerated, I was able to become a certified recovery mentor, peer wellness specialist and I was also the first woman to achieve their bachelor’s degree through [PSU] while incarcerated ... Everything that I did in there gave me the foundation to be successful and that’s why I sit here today and speak to you on behalf of the DOC.”

- Michelle Ehlers