PRESENTATION

The Resilience of the Written Off: Women in Prison as Women of Change

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During the twenty-two years that I spent in prison and in the time following my release, I have reflected on the ways that individuals who are engaged in advocacy, research, teaching, or providing services for incarcerated women speak about women in prison. It is often acknowledged that the identity and role of a mother is key for women in prison, the majority of whom are mothers. Beyond this point, I usually hear two broad categories of description. First, with increasing awareness of the social crisis of mass incarceration, women in prison are described as “victims.” They are especially defined as victims of physical and sexual abuse — either in their childhood or adulthood. They are also described as victims of an unjust set of socio-economic conditions: race combined with class create conditions of poverty which lead to lack of education, lack of employment, lack of respect and lack of opportunity. Statistics certainly support this definition and framing. For example, women who end up incarcerated are often victims of abusive family members and/or battering relationships. According to some studies, as many as 80% of incarcerated women were abused either as children or adults. Estimates suggest that somewhere between 25% to 60% of the women in prison need mental health support.

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1. See generally PHYLLIS JO BAUNACH, MOTHERS IN PRISON (1985) (exploring imprisoned mothers’ perceptions of the separation from their children and its effect on them, their children, and the relationship). In my experience, the role of mother was equally important to women in prison who did not have children of their own.


54.6% of the women in prison are Black, 28.9% are Latina and 15.8% are white.²

The second broad definition identifies women in prison solely in negative terms, by their problems or by their crimes. An example of a common problem is that of drug addiction. Close to 75% of women in prison were using drugs regularly before their arrest, and 40% of women in the state prisons report being under the influence of drugs when they committed the crime for which they were last arrested.³ Another problem is lack of education. Less than 50% of the women in prison graduated from high school or have a General Educational Diploma.⁴ Economic survival has also been a major problem for most women in prison: 30% of incarcerated women were receiving welfare assistance before their arrest.⁵ Most women in prison have committed an act that violated a law, some more serious than others, and frequently women are reduced to labels such as "ho," "monster," "man-hater," or "mule."

A drawback to focusing on "woman as victim" or "woman as problem" is that both paradigms tend to render women passive; these views focus on a woman's weaknesses or limitations rather than on her strengths. From this perspective, an incarcerated woman is a victim who needs to be helped. She needs to be rehabilitated or habilitated. Yet, a greater truth exists about women in prison. Women in prison are filled with ideas, energy, dreams and possibilities. Women in prison can be critical agents of their own change. They can and must take initiative, develop self-reliance, or act collectively. Yet, within those constraints, I had the opportunity, in the years I spent at Bedford Hills Correctional Facility, to work with many other incarcerated women; we served our community and ourselves.⁶ Together, we faced responsibility for acts that led us to prison, and inspired others throughout the country, both in and out of prison, to tackle social issues. That is the focus of this presentation. It is very difficult for people on the outside to actually see beyond the construct of "women as victims" or "women with problems." By shifting the paradigm, women in prison, or even better, women in alternatives to incarceration⁷ can be seen as people who can make a difference.

When the AIDS epidemic rapidly expanded during the 1980s, the women in the New York State prison system were at the center of the crisis. In a blind study carried out in 1987, almost 20% of the women entering the correctional system tested positive for HIV.⁸ The scope of the crisis extended beyond the HIV-positive women in the system. The crisis included family members at home who were dying of AIDS: children, sisters, brothers, aunts, and uncles. Those who had used IV drugs were terrified. The prison population, where people live in such close contact, was enveloped with stigma, fear and ignorance. The HIV epidemic created a divided and silent cruel reality for women in prison.

In 1987, at the request of a group of inmates at Bedford Hills Correctional Facility, prison authorities brought doctors in to provide educational sessions about HIV/AIDS; one hundred and fifty women showed up to the first session. These educational sessions were a start. However, prison authorities were not adequately meeting women prisoners’ needs. For example, this type of outreach did not provide women the opportunity to have follow-up discussions because they did not want to ask sensitive questions in front of such a large group. This meant that some women remained uninformed about HIV/AIDS. Meanwhile other women were dying silently, without any community support. At the end of 1987, five women submitted a proposal to the superintendent, which essentially stated that we, as women living in prison, needed to be able to deal with the AIDS epidemic. Brief visits from professionals could not meet the demands and needs of almost 800 women. We needed to be educated. We needed permission to educate one another, to care for each other in sickness and death, to prevent our sisters from becoming infected, and to build support systems for women going home.

While the Superintendent considered the proposal, we received permission to carry out a quilt-making project honoring the fifteen women at Bedford who had already died of AIDS. Over President’s Day weekend in 1988, close to forty women made quilts for their friends who had died of AIDS. At that time, people were not talking openly about AIDS. AIDS was shameful, stigmatized, and as a result, no one wanted to draw attention to the problem. However, by making quilts, we honored the people we lost and acknowledged what had happened to them. With permission from the prison administration, we displayed the quilts in various parts of the facility. After making their way around the facility, the quilts remained on display in the gym. Over the course of several weeks, hundreds of women were able to view these quilts acknowledging their friends who had died in the previous two to three years. AIDS was no longer hidden or whispered about. It was suddenly something we could talk about.

Prison personnel around the country generally did not want people in prison to be educated or become educators about AIDS. First, an educated population is more likely to ask more from the medical departments. Second, AIDS requires talking about sex and drugs both of which are illegal in prison, and corrections personnel did not want to acknowledge that they both happen in prison. When the Superintendent finally agreed to allow HIV/AIDS educators into the facility, thirty-five of us signed up to attend eight afternoon sessions with volunteers from Montefiore hospital. We were a cross-section of the 800 women in the prison. Some of us were HIV positive, and others of us were not. We were Black, Latina, White, gay, straight, college educated, street smart. Some were former drug users, terrified that they were infected, and others were family members of infected people. Our ability to stand together to do something to help our community, transformed us into a symbol, a microcosm, for what we hoped could happen in the entire prison. We wanted to create a community within the prison; we wanted to take care of our sisters who were dying in front of our eyes, and prevent others from getting sick. We, women prisoners, drove this process.

Within months of the creation of our organization, AIDS Counseling and Education (“ACE”), the AIDS Institute of the New York Department of Health designated funds for the program. The AIDS Institute recognized that AIDS was creating a crisis inside prisons and saw that prisoners could make a difference. Nonetheless, it took more than two years before the funding actually became available. Our program and organization went through many ups and downs; ACE was shut down several times by the prison administration, but ultimately, we became a funded program with an office. Over the years, ACE trained hundreds

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of women to be counselors and peer educators. Every living unit in the prison had ACE members to ensure someone was available to care for those who became sick, which included making sure sick prisoners ate and were taken to the prison infirmary if necessary.

Four years after we created the program we started walk-a-thons in the prison yard. Family members, prison correction officers, and prison administrators contributed money, which was donated to the Incarnation Children’s Center, a children’s hospice. Hundreds of women, wearing red shirts, walked around the yard all afternoon. At night, after count time, we went back to the yard and stood together to form a human red ribbon. There under the stars, we called out the names of the women who had died. Holding onto one another, arms over each others’ shoulders, we sang our theme song “Sister:” “Lean on me, I am your sister. Believe in me, I am your friend.”

So, at the height of the AIDS epidemic the atmosphere in the prison changed, as we ourselves became educators, counselors, and caregivers to one another. An outsider could never have achieved what we achieved. We had to do it. It was our community.

Over the next 15 years, women left prison after serving their sentences, and they continued in their commitment to helping others. They were able to get jobs with programs and agencies that helped their communities cope with AIDS. Women, who had come to prison without a GED, went back to the street, with college degrees and work experience with ACE. They had not only grown themselves, but they had also made a difference in other peoples’ lives.

Just before leaving prison, Katrina Haslip, a leader of ACE and a person with AIDS, wrote about her experience and the role of women in the prison:

Somewhere behind a prison wall in Bedford Hills a movement or community was being built. It was a diverse group of women teaming together to meet the needs and fears that had developed with this new epidemic, AIDS. These women believed that none of their peers should be discriminated against, isolated, or treated cruelly merely because they were ill. They believed that it was necessary for this prison to build an environment of support, comfort, education, and trust. I was a part of this process. In the center of its establishment I stood, struggling with my own personal issues of HIV infection. While held in some sort of limbo, I felt as if the women of ACE had built a cocoon around me, for me. I felt warmed by them and so totally understood. These were the women who understood my silence and yet felt my need to be heard. They gave me comfort when I needed it and an ear when I needed a listener. They helped me to grow stronger with hopes that one day I would be able to stand alone and still feel as safe. Empowered! I took from them all that they were capable of putting out. I gave back to them what I was given. It was as if I mirrored back what they put out. I had never before noticed in my peers this ability to care so deeply. For I, too, had labeled them prisoners, cold and uncaring. Yet they had managed to build a community of women: black, white, Hispanic, learned, illiterate, robbers, murderers, forgers, rich, poor, Christian, Muslim, Jewish, bisexual, gay, heterosexual—all putting aside their differences and egos for a collective cause, to help themselves. I could not believe my eyes. Right before me lay a model of how we, as a whole, needed to combat all the issues AIDS brought, and we were building it from behind a wall, from prison. We were the community that no one thought would help itself. Social outcasts, because of our crimes against society, in spite of what society inflicted upon some of us.

We emerged from nothingness with a need to build consciousness and to save lives. We made a difference in our community behind the wall, and that difference has allowed me to sur-

15. Katrina died less than two years after leaving prison. However, in her short time home she was a leading advocate for women with HIV/AIDS; she demanded that particular women’s illnesses be included in the CDC’s definitions of opportunistic infections. See Katrina Haslip Dies; AIDS Worker was 33, N.Y. Times, Dec. 3, 1992, at D20.
vive and thrive as a person with AIDS. To my peers in Bedford Hills Correctional Facility, you have truly made a difference. I can now go anywhere, and stand openly, alone without the silence.16

The Children's Center at Bedford Hills is another powerful example of women in prison working together to solve their own problems. In 1981, Sister Elaine Roulet created The Children's Center; it included children and mothers programs centered on the guiding principle that the programs had to be “inmate centered.”17 Almost 75% of the women in prison are mothers, and most of them say that being separated from their children is the most painful part of being in prison.18 Being in prison is a crisis and an opportunity for women to grow as people, mothers, and individuals. In prison women struggle with the consequences of their acts, acts that led to imprisonment and separation from their families. Women work on their own issues of being a mother and trying to make visits with their children a positive experience. They take parenting classes and also focus energy on their relationships with their children's caregivers. Frequently, after getting help in these areas, those same women want to help other mothers. The Children's Center provides women with opportunities for truly meaningful prison jobs. Jobs include being an inmate caregiver in the children's center visiting area. Women with this job provide games and projects for visiting children and their mothers; they work in the nursery caring for babies while their mothers are in class; they learn to teach a parenting class; or they study foster care law from other women who already are knowledgeable about foster care law. Women learn that they are capable of being teachers and counselors, of developing programs, and the Children's Center has given them the opportunities to develop these skills.

The last example I would like to discuss is higher education for women in prison. Federal Pell Grant funds made higher education possible in prisons throughout the country from 1970 through 1994.19 In New York State, Tuition Assistance Program (“TAP”) grants supplemented the Pell Grants.20 Then, in 1994, under a provision of an omnibus crime bill, federal funding was no longer given to people in correctional facilities.21 Subsequently, New York State no longer provided TAP grants for those who were incarcerated.22 Higher education programs in prisons throughout the country were closed down.23 In June 1995, Mercy College ran the last graduation of a successful program at Bedford Hills. Nationally, all but eight of the 350 college programs in prison were discontinued.24 The day the college program closed at Bedford Hills, the tutors and administrators of the Learning Center packed all the books into boxes and carted them away, along with the word processors. There were no dry eyes on that day, and a feeling of hopelessness spread over the prison. College offered women a chance to redirect their lives, an opportunity to imagine a new life and a new person. For those working toward their GED, the possibility of college was an inspiration, a motivating factor. When the college program was eliminated, a blow to hope was dealt.

During the subsequent year, women throughout the prison asked each other what they could do. Once again, a group of women started talking about possibilities. Since Bedford Hills is in Westchester, New York, the women imagined that they could develop a privately funded college, one not dependent on government funds, but rather supported by private individuals in Westchester County and the

18. Id.
20. Id.
22. MICHELLE FINE ET AL., supra note 19, at 4-5.
23. Id.
24. Id.
state of New York. With the support of the prison administration, people from the community, academic institutions and the women in prison came together to brainstorm a solution. The drive came from the inmates, but the process was collaborative. The collaboration led to a new a privately funded structure, where each participating college would donate one professor to teach one course. Marymount College coordinated the effort that provided the associate and bachelor's degrees. There were several successful fundraising efforts, such as performances of works written by women who participated in a writing group lead by Eve Ensler. Donations from foundations and private individuals raised the money to pay for a college coordinator and a counselor. People from the Westchester community donated the first computers and helped to set up a library. By spring of 1997, a new program that granted a degree in sociology had begun. The college at Bedford Hills became a model; now throughout New York and other states, different prisons are figuring out ways to reestablish college programs without the help of the federal government.

The women at Bedford Hills felt the need for education and initiated the process of obtaining a college. Once the Learning Center was reestablished, women prisoners became tutors and an "each one teach one" ethos developed. As inmates we could not do many things, but we fueled the project with our dreams, hopes, and energy. We made it happened with the collaboration of community volunteers and prison staff. Women in prison are not just victims and they are not just problems. Understanding this is critical to a discussion about what is possible for women in prison.

The second topic I will discuss concerns women serving long sentences for violent crimes. Among the rising numbers of women in prison, approximately 20% were convicted of violent crimes in 1999. When I was incarcerated, we met with many guests who came into the prison to learn about the programs discussed in this presentation. The prison staff members introducing the programs often stated that most women are in prison for nonviolent crimes, yet most of the women meeting with the guests were actually in prison for violent crimes. When I came home I heard and continue to hear the same thing: most women are in prison for nonviolent crimes. While this may be true statistically, it should be noted that women in prison for violent crimes (with the more recent exception of battered women who killed their abusers) are not acknowledged in the conversation. Women who have been convicted for violent offenses and have the longest sentences are often the most demonized by the public. Ironically, in my experience, they are also the greatest contributors to helping other women get through their prison time.

The programs described in this presentation were primarily initiated by women who were serving long sentences, a large portion of whom had committed violent crimes. Perhaps, these women in particular have an interest in such programs because they are serving long sentences, and therefore they are committed to and invested in prison life. Maybe it is because they must serve long sentences in prison giving them the opportunity to undergo a maturation process involving self-reflection and access to education. Perhaps it is because have struggled to give their lives meaning in light of facing fifteen, twenty, forty, seventy-five years in prison. Frequently, the meaning that they find is expressed in their generosity and desire to help other women.

Women who finally get to the parole board after serving the minimum sentence of fifteen, twenty, or twenty-five years are usually denied parole because of the seriousness of the original crime. Some of these women serve two to ten years more than the minimum sentences originally ordered by a judge. Yet, the recidivism

25. Id. at 5.
26. This was a collaborative effort by the prison community, the academic community and the community at large. College Bound Task Force, College Bound Programs: Preserving Higher Education In Prison 12 (1997).
27. Michelle Fine et al., supra note 19, at 36-39.
29. Those serving long sentences for nonviolent crimes were usually those sentenced under the Rockefeller Drug Laws. Michelle Fine et al., supra note 19, at ii.
rate for women who have been convicted of murder is close to zero in New York State.\footnote{31} One study followed thirty-eight women who were convicted of murder and released from prison between 1986 and 2003.\footnote{32} None of the thirty-eight women returned to prison for a new commitment within a thirty-six month period. That is a zero return rate to prison on new crimes for women released for murder in a study that included 19-years of releases from New York State prisons.\footnote{33} In another study, we focused on the “length of sentence” rather than “original conviction.”\footnote{34} The study followed 128 women who served a minimum of eight years in prison and were followed over a 24-month period after their release: It found that after serving fifteen years or more, none of the women returned to prison within two years following their release.\footnote{35} And, none of the forty-two women who served ten to fifteen year sentences were recommitted to the Department of Corrections for a new offense;\footnote{36} only one woman (2.3\%) was returned to prison for a parole violation.\footnote{37} Out of the sixty-one women who served eight to ten years, one woman was returned to Department of Corrections after being convicted of a new offense (1.6\%) and four were returned for parole violations (6.6\%).\footnote{38}

Women serving long sentences for violent crimes are often role models for young women coming into prison. These women are respected because they figured out how to survive by building a life of meaning; it gives other incarcerated women a sense of possibility. Therefore, when the parole board repeatedly turns down these women it not only hurts the individual, her children and family, it hurts the morale of other prisoners. Unfortunately, in my experience, the fact that a woman has actually changed while in prison often does not seem to matter to the parole board because to the parole board she is forever frozen in her crime.

Only by telling the stories of the women who are in prison for violent crimes will it become possible to break through the fear and the dichotomy of the “us versus them paradigm, which allows long sentences and parole denials keeping women locked up for decades. Moreover, to understand the experience of a woman in prison one must go beyond the situation of women. More than 2.3 million United States citizens are currently in prison.\footnote{39} More than seven million or one in ten of our nation’s children has a parent under criminal justice supervision; this includes parents who are incarcerated on probation or on parole.\footnote{40} The expansion of the penal system over the past three decades has become what one researcher termed “mass imprisonment,” a social crisis affecting communities, families and our entire nation.\footnote{41}

Although overall, women represent about 6\% of state prisoners,\footnote{42} the incarceration rate for women has outpaced that of men since 1990.\footnote{43} Too many women are in prison. Women with convictions for nonviolent crimes are being imprisoned instead of finding alternatives to incarceration. Women in prison for violent crimes cannot get out, despite demonstrating change and a lack of public risk. I ask you to learn the stories of women in prison. These stories can alter the narratives of screaming newspaper headlines about women arrested, sent to prison, or trying to come home. I ask you to visit women in prison, get to know their potential, help create conditions that develop their
potential, and recognize women whose potential has been realized.