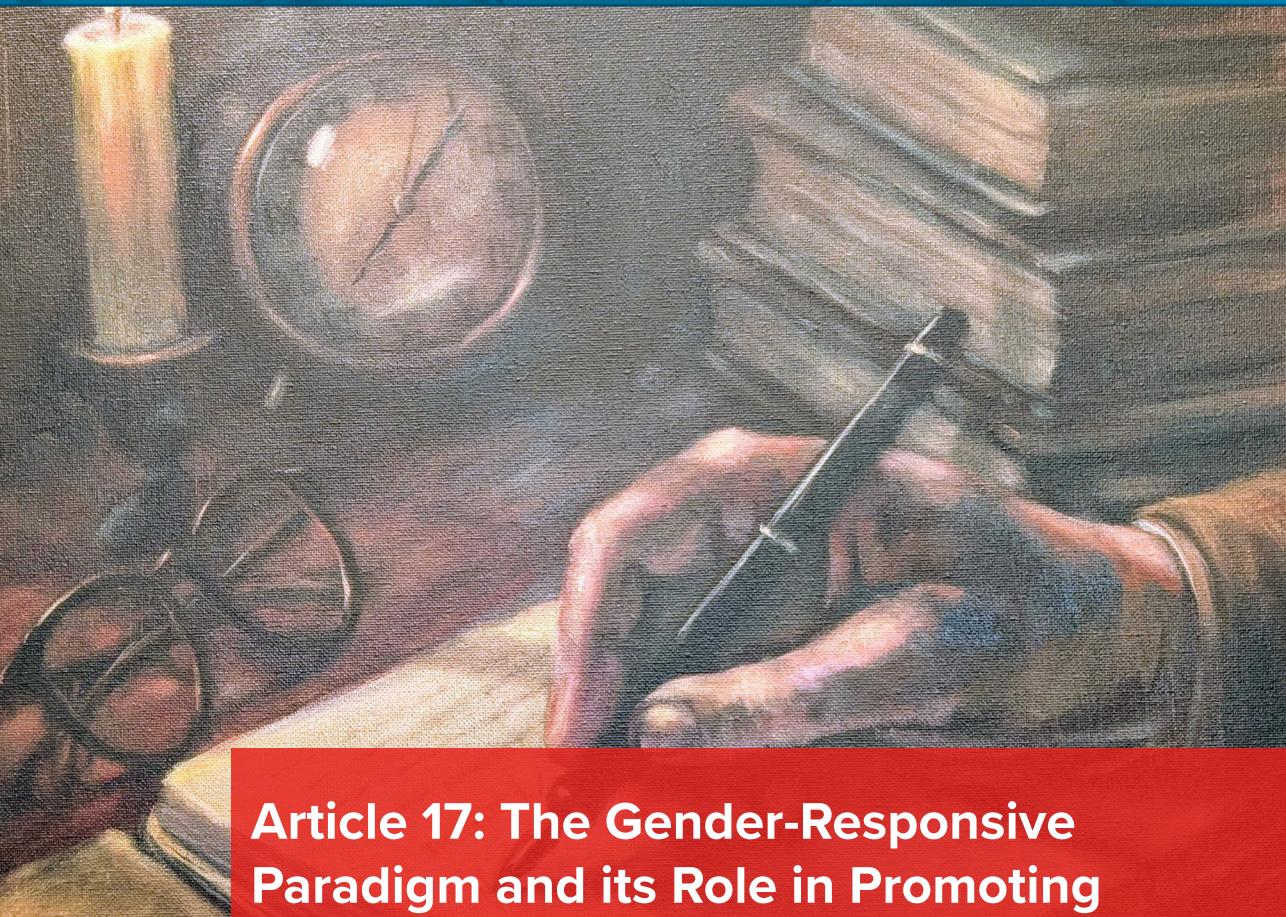


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THE GENDER-RESPONSIVE PARADIGM AND ITS ROLE IN PROMOTING TRAUMA-INFORMED PRACTICES

Emily J. Salisbury, University of Utah, US

Abstract

The gender-responsive paradigm has driven the evolution of trauma-informed practice in corrections in numerous ways. Over the past two decades, reforms first designed to improve the treatment of justice-involved women have reshaped global correctional policy, exemplified by the influence of the United Nations Bangkok Rules on the later Mandela Rules. Gender-responsive research and practice reframed trauma from an individual problem to a systemic concern, providing correctional agencies with the tools and confidence to assess and address its effects safely. The development of the Women's Risk Needs Assessment, the Women's Correctional Safety Scales, and treatment curricula designed for women advanced this agenda, embedding trauma awareness into assessment and daily operations. Early attention to women's trauma—particularly gender-based and childhood violence—was both strategic and ethical, yielding theoretical and practical insights that now inform work with men. Additionally, the field's historic focus on risk reduction arguably obscured the centrality of trauma in pathways to offending for both genders. The commentary concludes with reflections on the new development of the Men's Risk Needs Assessment (MRNA), which extends gender-responsive insights to male populations, emphasizing trauma, health, and desistance as essential to rehabilitation. The MRNA reflects a growing recognition that gender-responsive and trauma-informed frameworks are mutually reinforcing and capable of transforming correctional policy and practice for all justice-involved individuals.

Keywords: trauma-informed practices, gender-responsive

Introduction

I can still recall when Frank Porporino was in the early years of developing *Advancing Corrections* for the International Corrections and Prisons Association (ICPA). At the time, I was serving as Editor-in-Chief of *Criminal Justice and Behavior* and as a board member of the International Association for Correctional and Forensic Psychology (IACFP), an organization closely aligned with ICPA. Through IACFP, I attended my first ICPA conference in Melbourne, Australia, and in many ways, I “grew up” professionally alongside both ICPA and *Advancing Corrections*, having now spent over two decades in academic criminology.

As contributors to this special issue can attest, the corrections field has undergone profound positive change in policy, practice, and research. It has been inspiring to witness the inclusion of people with lived experience in policy discussions; the adoption of desistance frameworks to reduce crime and improve lives; greater attention to the health and well-being of all justice-involved individuals, including staff; and, within my own academic sphere, major advances in improving outcomes for women in the justice system.

I highlighted some of the developments in the United States (U.S.) in the eighteenth edition of *Advancing Corrections* (Salisbury & Foster, 2024), which marked the fifteenth anniversary of the United Nations (U.N.) Bangkok Rules (U.N., 2010). These Rules enhanced human-rights protections for women in custody and those serving non-custodial or pre-trial sentences (Huber, 2016). Although their implementation has not been fully realized (e.g., Van Hout et al., 2023a), global efforts to promote them continue. For an overview and critique, readers may consult Penal Reform International, Barberet and Jackson (2017), and Van Hout et al. (2023a, 2023b).

What few may realize is that the Bangkok Rules helped pave the way for the Mandela Rules, adopted five years later in 2015 (United Nations, 2015). According to Dr. Barbara Owen (personal communication, November 13, 2025), a key research consultant to the U.N., the Bangkok Rules “were a stalking horse to test the world’s appetite for revising the norms and standard document from the 1950s.” Indeed, provisions such as Rule 48(2)—which prohibits the use of restraints on women during labor and childbirth—did not exist in the 1955 Standards and exemplify how gender-responsive reforms influenced broader policy.

This historical progression demonstrates that reforms initially aimed at improving the treatment of women often yield systemic benefits. The prohibition of shackling during childbirth, for example, has prompted correctional agencies to reconsider restraint policies for all medically vulnerable individuals, including those with disabilities. Such ripple effects illustrate how gender-responsive innovation can drive broader humanitarian change across correctional systems.

Driving the Trauma Conversation through the Gender-Responsive Lens

As a junior scholar, it was not easy explaining to correctional executives twenty years ago why trauma-informed practices (Harris & Fallot, 2001) were essential, even for female populations. Line staff were even harder to persuade. The prevailing attitude was to avoid the subject entirely—better to keep trauma “out of sight and out of mind.” Even those sympathetic to the prevalence of victimization among justice-involved people feared that acknowledging it would induce harm both emotionally and operationally. This hesitation, though often well-intentioned, effectively silenced the

issue.

The gender-responsive movement helped dismantle that silence. We now recognize that if no one in the system safely invites clients to explore what happened to them and how those experiences may have shaped their behavior, such issues will never be addressed. Gender-responsive researchers and advocates provided correctional agencies with both the rationale and the skills to assess and address trauma safely and to help educate that trauma is a systemic concern, rather than an individual one. The Women's Risk Needs Assessment (WRNA; Van Voorhis et al., 2010) exemplifies this shift. As one of the only validated risk/needs assessment instruments that trains non-clinicians to conduct trauma-informed interviews, it empowered practitioners to ask difficult questions about trauma and post-traumatic stress disorder (PTSD) in a structured, compassionate way; and it has been doing so for over twenty years—a once unthinkable practice. Mainstream correctional authors now recognize the groundwork laid by gender-responsive scholars (Fretz & Bogue, 2023), though the WRNA is still often omitted from contemporary discussions despite its effectiveness and impact supported by twelve validation studies, including a recent validation in the United Kingdom (Pemberton et al., 2025).

Other innovations reinforced this transformation. The Women's Correctional Safety Scales (Owen et al., 2017) guided staff in cultivating emotional and physical safety within women's prisons, while curricula such as *Helping Women Recover*, *Healing Trauma*, and *Moving On* provided trauma-responsive programming grounded in empowerment and relational theory. These gender-specific tools—supported by funders and reform advocates—pushed trauma-informed practice into mainstream correctional discourse in the United States.

Importantly, the decision to begin with women was strategic as well as ethical. Justice-involved women's exceptionally high exposure to gender-based and childhood violence made their needs urgent, yet the ultimate aim was always inclusive. The architects of the gender-responsive paradigm in the U.S.—Patricia Van Voorhis, Barbara Owen, Barbara Bloom, Stephanie Covington, Marilyn Van Dieten, Phyllis Modley, Maureen Buell, Andie Moss, among others—envisioned that lessons learned from women's experiences would eventually inform practices for men. Although early efforts deliberately centered women to correct longstanding neglect, we knew that trauma shaped both male and female pathways to offending and that staff trauma also required attention. Women's trauma, particularly that experienced in childhood, is deeply intertwined with substance use, mental health, and unhealthy intimate relationships—all key predictors of criminal behavior (Van Voorhis et al., 2010). Recognizing these as criminogenic needs rather than mere responsivity factors represented a major theoretical advance. Moreover, we helped agencies understand that it would be unethical to drive up women's risk levels based on psychosocial and neurobiological needs beyond their control and that they were most crucial from a treatment perspective. This work continues because there is so much more to do, and it seems the issue is always on precarious ground especially for the women.

Risk and its Role in Keeping Childhood Trauma Out of the Conversation

In my view, the field's obsession with risk reduction is one of the main reasons the criminal justice field ignored or overlooked the large body of research showing that childhood maltreatment is a defining, though not deterministic, factor in both women's and men's pathways to crime (Saxena & Messina, 2021; van der Put & Ruiter, 2016). While childhood trauma manifests differently across gender, it plays an important role for both. Boys and girls experience different forms of violence:

girls are more likely to suffer violence within the home, whereas boys are more likely to experience it in public settings (Council on Criminal Justice, 2024; Salisbury & Crawford, 2025). Gender norms of masculinity and femininity, along with neurobiological differences, also contribute to these distinctions (Klabunde et al., 2017).

The field historically discounted trauma because dominant criminological and correctional theories either dismissed it outright (except perhaps for general strain theory; Agnew, 1992) or labeled it a static, historical factor irrelevant to “here and now” interventions (Andrews & Bonta, 1994; Fritzon et al., 2021). Others argued that trauma was not *directly* related to offending or recidivism and therefore was only relevant to how we should deliver services (general responsibility), not why people offend (Andrews & Bonta, 1994).

But what if we asked clients directly: *Do you think your early experiences contributed to why you are here today?* Many might answer yes. They might recognize how childhood experiences led them toward substance use, aggression, or unhealthy peer groups. People are inherently curious about themselves and it likely does not matter to a client whether his trauma was *causally related* or had an *indirect effect* on his offending behavior. Many may want to understand why their lives unfolded as they did. Whether or not trauma is statistically predictive of recidivism, for someone living with post-traumatic stress disorder (PTSD) or complex PTSD, it is a crucial therapeutic target. Most readers I suspect would agree. But the discipline has a way of always turning us back to the concept of risk, which continues to silence the needs of survivors.

From gender-responsive evidence, we know that safely addressing trauma and its relationship to substance use, emotional regulation, and relationships leads to improved outcomes and lower recidivism among women (Gobeil et al., 2016; Summers et al., 2025). There is no reason to think men would not benefit as well. Although masculinity norms may make disclosure more challenging, acknowledging trauma can improve men’s emotional and physical health—both of which are increasingly linked to reduced recidivism. Teaching clients that childhood trauma was not their fault, while holding them accountable for present behavior, is a reasonable and humane balance. Encouragingly, more correctional leaders now seem open to this perspective and understand that it is culturally and operationally wise to create safety in whatever ways we can, not just security.

Conclusions and Reflections

There now appears to be enough political will, professional curiosity, and openness for correctional agencies to address men’s trauma and victimization, even when these issues are not classified as “criminogenic needs” (Fretz & Bogue, 2023). Many of my recent professional discussions reflect this shift. Over a year ago, a U.S. state department of corrections that had implemented the WRNA with women for over a decade asked me to develop a comparable tool for men. Leadership wanted to understand the prevalence of trauma and PTSD among male populations in their system.

At first, I hesitated. But I quickly realized how much work remains to be done in understanding and responding to men’s trauma—and how progress in this area can also benefit the women in men’s lives. This prompted the development of the Men’s Risk Needs Assessment (MRNA), which is now being piloted and validated.

In creating the MRNA, I also incorporated measures long missing from traditional risk/needs assessments, such as physical pain, traumatic brain injury, and the ability to spend time alone without technological distractions. Additional scales explore key elements of desistance—generativity, identity change, meaning, purpose, and hope for the future.

My hope is that we continue to learn from gender-responsive innovations. By grounding trauma-informed practice in the lessons learned from justice-involved women, we can also enhance well-being and promote desistance among men. Ultimately, gender-responsive and trauma-informed approaches are mutually reinforcing frameworks that, when applied together, offer the best chance of improving lives and transforming correctional systems for all.

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About the Author

Emily Salisbury, Ph.D. is an Associate Professor and the Director of the Utah Criminal Justice Center at the University of Utah College of Social Work. She is trained as an applied criminologist and focuses her research on correctional policy, risk/needs assessment, and treatment intervention strategies, with a particular focus on system-involved women, gender-responsive practices, and trauma responsive care. As a result of her scholarship on behalf of women, she was awarded the Marguerite Q. Warren and Ted B. Palmer Differential Intervention Award from the American Society of Criminology Division on Corrections and Sentencing, as well as the University of Utah Presidential Societal Impact Scholar Award. In addition, she serves as a Commissioner on the Council of Criminal Justice Women's Justice Commission—a national policy and research group in the United States. Dr. Salisbury is a co-creator and Research Director of the Women's Risk Needs Assessment (WRNA) instruments that were specifically designed to focus on the risk, needs, and strengths of system-involved women. The WRNA has been implemented in over 100 international and domestic jurisdictions. For five years, she also served as Editor-in-Chief of *Criminal Justice and Behavior*, a top research and policy journal focused on correctional rehabilitation. Lastly, Dr. Salisbury is co-author of the book, *Correctional Counseling and Rehabilitation*, currently in its 10th edition.

