

GENDER, RELIGION, AND PRISON ADJUSTMENT OF OFFENDERS

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INTRODUCTION

Thanks to fundamental Constitutional protections, Supreme Court decisions, and federal legislation, prison inmates in the U.S. today enjoy unprecedented religious rights. Balancing those rights with society's need for safe and secure prisons is an ongoing challenge for prison officials, religious leaders, and public policy makers. Compounding that challenge is the rapidly increasing religious diversity among prison inmates. The primary research question for this study is: Does religion have an impact on the lives of prison male and female inmates? An underlying question in all of this is whether religion in prisons makes a difference and can those differences be gender based? This study lends support to the argument that religiosity impacts male and female inmates both positively and negatively.

On December 31, 2000 a total of 1,316,333 people were incarcerated in U.S. prisons. By December 2009 the number of prison inmates was 1,524,513. When the 760,400 inmates in U.S. jails are added for 2009, the total is 2,284,900 (Glaze, 2010). In response to this growth in the jail and prison population, many corrections experts are arguing for a move back to rehabilitation, including an increased emphasis on religion and faith-based programming (Confronting Confinement, 2006, p.15).

The primary source for legal protection of inmates' religious rights is the U.S. Constitution. The First Amendment states that "Congress shall make no law respecting an establishment of religion, or prohibiting the free exercise thereof..." The Supreme Court has held that this language applies to the states as well as to Congress. In *Cruz v. Beto*, 405 U.S.319 (1972), the Supreme Court held that prison inmates retain the religious rights provided by the First Amendment, notwithstanding their incarceration.

Federal legislation is another source of law protecting inmates' religious rights. In 2000, Congress passed the Religious Land Use and Institutionalized Persons Act (RLUIPA), Section 3 of which states that "No government shall impose a substantial burden on the religious exercise of a person residing in or confined to an institution...unless the government demonstrates that imposition of the burden of that person, (1) is in furtherance of a compelling governmental interest; and (2) is the least restrictive means of furthering that compelling governmental interest." Section 7(A) of RLUIPA states that "the term 'religious exercise' includes any exercise of religion, whether or not compelled by, or central to, a system of religious belief." In enacting RLUIPA, Congress enhanced religious rights of inmates by making it more difficult for prison officials to burden their religious practices.

Religious Diversity in Tennessee Prisons

Compounding the immensity of the U.S. jail and prison populations, and the expanding legal protection of inmate's religious rights, prison officials and policy makers face the challenge of increasing religious diversity among inmates. For example, according to data provided by the Tennessee Department of Correction, as of April 9, 2011, the religious preferences selected by Tennessee's 20,259 inmates were as shown in Table 1:

Table 1. Religious Preferences of Tennessee Inmates

Christian---various denominations	Protestant	65.33%
No Preference/atheist/agnostic		25.80
Islamic, Muslim, Mohammedan		3.60
Christian ---Catholic		2.61
Native American		.53
Wicca		.34
Buddhist		.18
Jewish (Orthodox, Conservative, Reformed)		.17
Christian Israel/Identity		.15
Mormon		.15
Rastafarian		.15
Christian Scientists		.07
Spiritualists		.05
Satanist		.03
Odinists/Asatru		.03
Unitarian		.03
Eastern and Greek Orthodox		.03
Hebrew Israelites		.02
Bahai		.02
Hindu		.01
12 others		.62

Although located in the midst of the Bible Belt, Tennessee incarcerates inmates representing 32 separate faith groups and a substantial proportion who profess no preferential religion. While non-Christian groups represent very few Tennessee inmates in absolute numbers, the rights of inmates of all faiths to exercise their religion are protected by the First Amendment and RLUIPA.

PRIOR STUDIES

Extensive literature has developed over the past twenty years showing that religion and religious participation encourage positive behavior in non-prison settings. The literature shows that a reduction in the likelihood of criminal activity and drug use; increased interpersonal congeniality or “niceness;” improved personal well-being, both psychological and physical; comfort for persons facing crises such as divorce and unemployment; participation in the political process; and increased volunteerism, are all associated with religion and religious participation (Kerley et al., 2005). However, articles on the impact of religion on prison inmates, particularly on gender, inmate behavior, or health and well-being, are scant and many of the studies contain methodological limitations.

An early study found no relationship between religiosity and deviant behavior in prison inmates. Between 1978 and 1982, Johnson studied a group of 782 inmates in Florida. He found that inmates designated as *religious* were just as likely as other inmates to spend time in solitary confinement. Johnson acknowledged problems with his study, including questionable validity and the difficulty of defining and measuring religiosity (Johnson, 1984).

Other more recent studies have found a link between religion and prison inmate behavior. For example, in 2000 Clear, et al. conducted a qualitative study based on 70 interviews and ethnographies involving prison inmates in five states over a ten month period. They concluded that religion plays a role in helping inmates prevent feelings of devaluation and fostering survival in the prison environment (Clear et al., 2000).

In 2003, Clear and Sumpter found a statistically significant relationship between inmate religiosity and inmate adjustment to prison. They administered a self-reporting questionnaire to 769 non-random inmates in 20 prisons from 12 states in 1992, and they conducted interviews of select inmates, correctional officers, and prisons chaplains. They found that depression was a significant controlling variable; less depressed inmates showed higher adjustment scores (Clear & Sumpter, 2003).

In their 2005 study, Kerley, et al. surveyed 875 inmates randomly chosen from a population of 4,313 males housed at the Mississippi State Penitentiary. They concluded that religiosity directly reduces the likelihood of inmate arguing and indirectly reduces the likelihood of inmate fighting (Kerley et al., 2005).

O'Connor and Perryclear (2003) studied religious practices in a prison in South Carolina during 1996. They found an inverse relationship between the intensity of religious involvement by inmates and disciplinary infractions. Of the 1,579 men incarcerated in the prison, 779 attended at least one religious service or program. A total of 21,316 hours of religious-related work was provided in the prison by two chaplains, four inmate clerks, and 232 volunteers. The authors concluded that religion can be an important factor in the rehabilitation of inmates. However, they noted that mere attendance at religious services is not enough; inmates must be actively involved and participate in the services (O'Connor & Perryclear, 2003).

Clear and Myhre surveyed 769 male inmates in 20 prisons in 12 states and interviewed dozens of prison chaplains and correctional staff. The authors noted that inmates claiming a higher degree of religiousness showed less depression and aimlessness, and concluded that inmates turn to religion for the same reason as people in the free world --- to find something to make life more livable and meaningful (Clear et al., 1992). Koenig found that inmates with high or moderate levels of religious coping tended to have fewer disciplinary charges against them (Keonig, 1995).

Since 2000, faith-based programs have expanded in prisons across the country (Johnson, 2002). The evidence on whether these programs have improved inmate behavior and reduced recidivism is mixed. In 2002, Johnson et al., concluded that while these programs appear to be associated with reduced recidivism and drug abuse by inmates, "the studies to date are so few, and their research designs and methods are so problematic, that at this stage it is really impossible to know" (p. 5). Their conclusion was that the literature to date provides "objective hope" for the effectiveness of religion on prison inmates (Johnson, 2002).

In 2004, Johnson published a follow-up to a study conducted in the mid 1990's. The original study found inmates who were more active in Bible study were significantly less likely to be rearrested within one year of release (Johnson et al., 1997). In the follow up study, the recidivism period was increased to eight years. Statistically significant differences between the groups were again found at years two and three, but the differences diminished over time (Johnson, 2004).

In 2006, Aos et al. published a systematic meta-analysis of 291 studies of evidence-based adult corrections programs spanning 40 years. They noted that "rigorous evaluations of faith-based programs are still relatively rare," and that additional research is needed to conclude such programs reduce adult recidivism rates (Aos, et al., 2006).

In 2006, O'Connor, et al. cited the need for better research on the impact of faith-based prison programs, and cautioned researchers against the passion often found on both sides of the argument (O'Connor, 2006).

In their 1998 article, Johnson et al. discussed how religion or the 'faith factor,' as they call it, improved the mental and physical health of prison inmates. They cite research positively linking religion with an improved feeling of well-being and satisfaction as well as reduced suicide rates. Since inmates are known to be at-risk for suicide, they argue for the benefits of religious activities in prison to address this problem.

They also note the link between religion and physical health, including longer life expectancy and reduced hypertension. They cite the research linking religious activities with positive prison adjustment and call for more public support of faith-based programs in prison (Johnson, 1998).

The researcher's review of the literature revealed few studies which focused on the impact of religiousness on prison inmate behavior, health, and well-being. There are virtually no studies of female inmates (See Young, 1995 and Lonczak et al., 2006). Moreover, many studies which were found suffer from methodological constraints, such as nonrandom selection (Clear & Sumpter, 2002) and questionable validity (Johnson, 1984). Kerley et al noted limitations in prior studies such as samples that are too small and not representative, use of anecdotal evidence, absence of a theoretical context, limited statistical analysis, and self-evaluation by those providing prison ministry (Kerley, et al. 2005, p.445). The present study will address some of these gaps by surveying the entire population of both a men's prison and a women's prison, and applying statistical analysis to the data to measure the impact of gender differences on inmate medical visits, prescription drug use, disciplinary write ups, and well-being.

This paper will report the findings of a study examining if an inmate's gender and level of religiosity will influence three general health measures and one measure of prison adjustment – compliance with prison rules and regulations. The findings of these analyses can be useful for correctional practitioners in that health care is an expensive service to provide. Any method that may have a positive impact on inmates' health should be explored to curtail this necessary but costly service. Similarly, practitioners need to be aware of any factors that may have a positive impact on inmate discipline. Rule violations are disruptive to the general operations of a prison and require time consuming procedures for administrative hearings and subsequent reclassifications. If religiosity can result in a more compliant inmate population, then faith-based programming and other offerings that can increase an inmate's religiosity should be initiated.

Hypotheses

The primary hypothesis is that there will be a statistically significant difference between males and females and their degree of religiosity with the number of medical visits, number of disciplinary reports, number of prescription drugs taken, and positive feelings of well being. The eight secondary hypotheses examined in the null form were:

Gender (H₁ – H₄)

- H₁ Females will report more medical visits than males
- H₂ Females will report more prescription drug use than males.
- H₃ Females will report fewer disciplinary write-ups than males.
- H₄ Females will report higher levels of well being than males.

Religiosity (H₅ – H₈)

- H₅ Inmates with higher scores of religiosity will report fewer medical visits than inmates with lower scores of religiosity.
- H₆ Inmates with higher scores of religiosity will report less prescription drug use than inmates with lower scores of religiosity.
- H₇ Inmates with higher scores of religiosity will report fewer disciplinary write-ups than inmates with lower scores of religiosity.
- H₈ Inmates with higher scores of religiosity will report higher levels of well being than inmates with lower scores of religiosity.

METHODS

Measuring Religiousness

Defining and measuring religiosity has been the subject of debate for many years. In 1995 the Fetzer Institute in collaboration with The National Institute on Aging, brought scholars together from across the

U.S. to develop an instrument to measure the impact of religiousness/spirituality on mental and physical health. In 1999 they published their report, *Multidimensional Measurement of Religiousness/Spirituality for Use in Health Research*(Fetzer, 1999).

These authors also developed a short form of a survey instrument known as the Brief Multidimensional Measure of Religiousness/ Spirituality (BMMRS) with a total of 38 questions. The authors concluded that “The results to date support the theoretical basis of the measure (the BMMRS) and indicate it has the appropriate reliability and validity to facilitate further research that will help us better understand the complex relationship of religion, spirituality and health” (Fetzer, 1999, p. 89).

Note that this article uses the term ‘religiosity’ to describe a quality of being religious instead of the term ‘religiousness’ or ‘spirituality’. Religiosity has become an acceptable term for piety or devoutness and many measurement instruments have been designed to measure one’s level of religiosity (Hill & Hood, 1999). Specifically for this paper, religiosity was operationalized by the use of 26 items of the BMMRS as a scale. Therefore, religiosity forms one of the independent variables of this study to exam its impact on three health measures (number of visits to medical services, number of prescriptions taken, and general feelings of well being) and the number of disciplinary reports, viewed as a prison adjustment measure. Health measures have been previously studied (Johnson, et al., 1998) and disciplinary actions have been examined by O’Connor and Perryclear (2003).

The unit of analysis in this study was individual male and female inmates in two southern-state prisons. Data were collected by the use of a survey. The survey contained 33 items. Items one and two were the independent variables of gender and degree of religiousness measured at the nominal and interval levels. Items three through six were the dependent variables of number of medical visits, number of prescription drug taken, number of disciplinary write-ups, and feelings of well being each measured at either the nominal or ordinal level. Items seven through 32 related to religiosity, and were selectively taken from the BMMRS, a copy of which may be found at p. 85 at www.fetzer.org/pdf/total_fetzer_book.pdf.

The statistical reliability and validity of the BMMRS had previously been established (Fetzer, 1999). The religiosity scale for this study was developed by establishing a mean of the 26 religious items and the mean became the 33rd variable. Inmates scoring high on the scale were more religious than inmates scoring low. The scale was subjected to a Cronbach’s alpha statistic to establish its reliability and rendered a value of .901 which indicates a highly reliable scale to measure an inmate’s degree of religiosity.

The survey was administered in November and December 2007 to the entire population at a male maximum security institution (704 inmates) and at a female prison (723 inmates). These prisons were selected because each state prison housed inmates of varying degrees of security classification, including death row; and both prisons are located in the same city expediting administration of the survey. Of the 1,427 surveys administered, 945 were returned. Thirty-two surveys were discarded as unusable so the data base constructed was comprised of a total of 913 surveys for a 64% response rate. This response rate exceeded the acceptable limits for statistical analysis in this type of study (Babbie, 2007, p.261). Males who responded to the survey totaled 419, while 494 females responded.

RESULTS

The data collected from the male and female prisoners from the surveys were analyzed by the use of Spearman’s rho, a hypothesis testing statistic used for variables measured at the nominal or ordinal level. An initial analysis was made to examine the correlation between gender and degree of religiosity. The results indicate a weak (-.287), negative correlation with a significance level of .000. This is interpreted as male prisoners express more religiosity than females and the difference between genders is highly statistically significant.

Table 2. Correlation Coefficients and Significance Levels of Variables - N = 913

VARIABLE		Medical Visits	Prescriptions	Write Ups	Well Being
Gender	Corr. Coefficient	0.164	0.201	0.037	0.184
	Sig.	0.000	0.000	0.132	0.000
Religiosity	Corr. Coefficient	-0.088	-0.050	- 0.186	-0.069
	Sig.	0.004	0.067	0.000	0.018

Table 2 reveals the strength of the relationship of the two independent variables of gender and religiosity and the four dependent variables and the level of statistical significance associated with the variables.

Gender has a weak relationship with each of the four dependent variables. All of the correlations are positive meaning that females report more medical visits than males and females take more prescription medications than males. Also, females report more disciplinary write ups than males and females have higher feelings of well being than males. Further, there exists a statistically significant relationship between gender and medical visits, number of prescriptions taken, and with feelings of well being.

The variable of religiosity also shows a weak relationship with the four dependent variables. All of the correlations are negative interpreted as 1) The higher the degree of religiosity, the lower the number of medical visits; 2) The higher the degree of religiosity, the lower the number of prescriptions taken; 3) The higher the degree of religiosity, the lower the feeling of well being, and 4) the higher the degree of religiosity the lower the number of disciplinary write ups. Also, religiosity has a statistically significant association with the number of medical visits, the number of disciplinary write ups and feelings of well being, but not with the number of prescriptions taken.

Summary of Hypotheses

The results of the analysis of the hypotheses are as follows:

Gender (H₁ – H₄)

- H₁ Females will report more medical visits than males – accepted.
- H₂ Females will report more prescription drug use than males – accepted.
- H₃ Females will report fewer disciplinary write-ups than males – rejected.
- H₄ Females will report higher levels of well being than males – accepted.

Religiosity (H₅ – H₈)

- H₅ Inmates with higher scores of religiosity will report fewer medical visits than inmates with lower scores of religiosity – accepted.
- H₆ Inmates with higher scores of religiosity will report less prescription drug use than inmates with lower scores of religiosity – accepted.
- H₇ Inmates with higher scores of religiosity will report fewer disciplinary write-ups than inmates with lower scores of religiosity – accepted.
- H₈ Inmates with higher scores of religiosity will report higher levels of well being than inmates with lower scores of religiosity – rejected.

These findings were expected with the analysis of the variables of gender and generally support prior research findings and correctional practitioner's views, but with religiosity there was an unexpected result. Most of the results for religiosity support the prevailing literature in similar kinds of studies while other studies indicate that religiosity may not be a major factor for either prison adjustment or health measures.

DISCUSSION AND CONCLUSION

The findings of this study generally support previous research in this area in terms of gender differences. That is, knowledgeable correctional practitioners accept the view that females have more medical problems than males and consequently report more medical service visits, use more prescription drug, but have elevated feelings of wellbeing than male inmates. This and other studies indicate that these beliefs are valid, but they need to be monitored. Community health care providers and prison administrators of female institutions should examine the health disparity between males and females and attempt to design solutions to this important issue. More research needs to be done on why the gender difference of feelings of well being as more content inmates could have great benefits for general prison operations.

Analyzing the variable of religiosity reveals that an inmate's level of religiosity may have a positive impact on the number of medical visits, prescription drug use and feelings of well being. Also, religiosity is not statistically significant with the number of disciplinary reports. These findings suggest that an inmate's level of religiosity may be influential on these health and adjustment variables. Some previous research has found similar results, yet others have discovered contradictory findings. This research dissonance indicates that more research is necessary to reach better conclusions. Classic experimental designs with random selection and assignment of groups needs to be conducted to gain a better understanding of religiosity and its true impact on jail and prison inmates. Faith-based programs remain an important addition to prison rehabilitation efforts as evidenced in this and other studies. If they are effective in elevating inmate's medical status and/or reducing the number of disciplinary infractions, these programs need more implementation and scrutiny.

Limitations of the Study and Future Research

First, all data were generated by a self-reported survey. This methodology was chosen to expedite the collection of a large amount of quantifiable data, and to protect the anonymity of the inmates. While survey data is acceptable in studies of this kind, it is recommended that future research utilize a mixed methods approach using both quantitative and qualitative techniques and independent sources to verify the survey data. Joseph (2010) comments that while secondary data can be useful, more research needs to be conducted using quantitative data and with qualitative methodologies, especially looking at recidivism and faith-based programs.

The sampling method to obtain responses for the surveys was not random. This reduces the validity of the findings somewhat and the results may not be generalized to the entire population of the offenders in the southern state in which the survey was administered. This article was generated from a data set which contains many more variable which the researchers intend to explore in a subsequent article. One purpose of this brief article was to provoke interest in this area of research and to continue the discussion of faith based efforts in prison rehabilitative efforts.

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