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## Reconciling the Differences Between the “Gender-Responsive” and the “What Works” Literatures to Improve Services for Girls

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# RECONCILING THE DIFFERENCES BETWEEN THE “GENDER-RESPONSIVE” AND THE “WHAT WORKS” LITERATURES TO IMPROVE SERVICES FOR GIRLS

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# Reconciling the Differences Between the “Gender-Responsive” and the “What Works” Literatures to Improve Services for Girls

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Recent increases in the delinquency and incarceration of girls have prompted juvenile justice professionals to search for effective, gender-specific prevention and treatment strategies. Given the dearth of research on girls' programming, these professionals are often left to sort out discrepancies between two major bodies of literature that address the needs of delinquent girls—the “what works” literature and the “gender-responsive” literature. This article culls the best of what is available within both these bodies of literature and suggests programmatic elements deemed essential for working effectively with girls.

**Keywords:** *girls; gender-responsive; what works*

During the past 20 years, we have witnessed startling patterns in official rates of female delinquency. From 1980 to 2000, the female juvenile arrest rate increased 35% compared to a decline of 11% for males (Child Welfare League of America, 2003), and by 2003, girls accounted for 29% of all juvenile arrests (Bureau of Justice Statistics [BJS], 2006). What is particularly disconcerting is that the crimes that girls are being arrested for are becoming increasingly more violent. There was an almost 60% increase in girls' arrests for assault in the past decade (Chesney-Lind, 2003). Not surprisingly, the number of girls in custody increased 52% during the same period (BJS, 2006). Some researchers question the extent to which these statistics are reflective of true changes in girls' behaviors, suggesting that it is the official response to and perceptions of girls' behavior that has changed

(Chesney-Lind & Okamoto, 2001; Mahan, 2003; Steffensmeier, Schwartz, & Zhong, 2005). Nonetheless, concern over these recent statistics is making the development of effective girls' programming a priority with juvenile justice agencies that have traditionally neglected this population of offenders.

There are two main bodies of literature that help guide practitioners in the formation of correctional rehabilitation for girls. First, there is the "gender-specific" or "gender-responsive" literature, based primarily on a feminist perspective, that focuses on explaining the increase in the amount and seriousness of girls' delinquency (see Chesney-Lind & Brown, 1999; Mahan, 2003; Steffensmeier & Allan, 1998; Steffensmeier et al., 2005), identifying its underlying causes (See Belknap, 2001; Chesney-Lind, 1997; Gilligan, 1982; Howell, 2003; Steffensmeier & Allan, 1998), discussing the sexist and paternalistic response of the juvenile justice system (See Belknap, 2001; Chesney-Lind & Sheldon, 2004; Feinman, 1986; Fox, 1984; Freedman, 1974; Odem & Schlossman, 1991), and putting forth principles on how to best prevent female delinquency and support girls involved in the criminal justice system (See Acoca, 1999; Acoca & Dedel, 1998; Bloom & Covington, 2001; Bloom, Owen, & Covington, 2003; Chesney-Lind & Sheldon, 2004; Covington, 2002; Morgan & Patton, 2002; Peters, 1998). This literature emphasizes the unique experience of being a girl in the United States and asserts that girls need qualitatively different types of programs and services to adequately address their delinquent behavior (Belknap, 2001; Belknap & Holsinger, 1998; Bloom, 2000; Chesney-Lind, 1997). Second is the "what works" literature, emanating from the work of Canadian psychologists. This literature has emerged from quantitative reviews of studies on correctional programs and has identified certain principles of effective intervention that are associated with a reduction in recidivism (Andrews, Zinger, Bonta, Gendreau, & Cullen, 1990; Cullen & Gendreau, 2000; Gendreau, 1996; Latessa, Cullen, & Gendreau, 2002). These researchers assert that these core evidence-based principles are applicable to males and females alike.

These categories of literature and their respective scholars may not be as distinguishable from each other as portrayed here, that is, there are some researchers who have a foot in both camps. Furthermore, we do not mean to imply that all "gender-specific" researchers and all "what works" researchers are in full agreement with all that is written within these broad categories of literature. We do assert, however, that there is dissension between these two general groups of scholars that has been observed in several arenas. First, articles by the gender-responsive group demonstrate mistrust in the data and policy implications being promulgated by the what works group (see Bloom, 2000; Kendall, 1994). Second, conflicting viewpoints between the two groups

have been highlighted at professional conferences (e.g., the 2002 annual meeting of the American Society of Criminology; also see McMahon, 2000). Third, the authors of this article have witnessed firsthand, through focus groups and training, the uncertainty that the disagreements between these two bodies of literature create for juvenile justice practitioners. As these groups of scholars battle over differences in philosophy, practitioners are left confused, with little clarity as to what effective girls' programming should look like in practice.

The purpose of this article is to make sense of these seemingly irreconcilable differences within the literature. Through a thorough examination of the literature, we will demonstrate that these "camps" are more complementary than competitive, and that taken together, they provide a blueprint on how to effectively work with girls. In this article, we will present the main points of contention between these two bodies of research, make sense of these differences by providing our own synopsis of the evidence, and suggest ways to translate the current state of knowledge into practice. To do this however, it is important to begin with a discussion of the trends in female delinquency and to provide some explanations as to why we have seen an increase in crime for girls.

## **Girls, Crime, and Juvenile Justice**

Taken at face value, increases in the rates and severity of female delinquency have led to media portrayals of girls as "mean," as "behaving badly," or as "going wild." This spotlight on girls' delinquency has brought with it a much needed focus on girls' programming. It has also contributed to more formal controls being placed on girls, a trend of key concern to many feminist scholars who assert that the achievement of any real improvements in girls' programming rests on understanding the story behind the official statistics and putting them in their proper context (Chesney-Lind, 2003; Steffensmeier et al., 2005).

On closer examination of national delinquency trends, the Office of Juvenile Justice and Delinquency Prevention's Girls' Study Group concluded that the recent trends are more indicative of changes in juvenile justice processes than girls' behavior (Zahn, 2005). This conclusion was based on two key findings from comprehensive data analyses conducted by Steffensmeier et al. (2005). First, a comparison of data sources on trends in girls' delinquency reveals different patterns. Official data reported in the Uniform Crime Reports (UCR) show that girls accounted for 16% of violent

juvenile arrests in 1988 and 25% of violent juvenile arrests in 2003. However, data reported in the National Crime Victimization Survey and the Monitoring the Future study, which include self-reported data from victims and youth, respectively, revealed relative stability in the percentage of violent juvenile arrests attributable to girls during that same time period. Second, when assaults were omitted from the violent crime index, the female delinquency trends were fairly stable, and girls accounted for only 10% of violent juvenile crime. These findings suggest that the increases in girls' violent delinquency reported in the UCR stem more from changes in the laws and the actions of officials rather than from changes in the behavior of girls. Indeed, what were once considered normal fights between family members are now classified as assaults that attract formal police intervention and more frequently result in arrest (Chesney-Lind, 2003).

Even if these reported increases accurately reflected changes in behavior, it is important to remember that girls still account for a very small proportion of delinquency. According to the UCR, girls constitute only 1 in 4 of all juvenile arrests and less than 1 in 5 of juvenile arrests for violent crimes (BJS, 2006). For most categories of offenses, girls account for 15% or less of juvenile arrests (Steffensmeier & Allan, 1998). These percentages are largest for prostitution and minor property crimes and smallest for more serious crimes. Moreover, when girls are involved in violent crime, it is usually in the form of a simple assault against someone they know rather than unprovoked violence against a stranger (BJS, 2006).

Based on the reported statistics and the nature of girls' violence, it has been argued that girls present a very low risk to public safety and, as such, are not in need of the types of controls applied to boys (Belknap, 2001; Belknap, Holsinger, & Dunn, 1997). Comparisons of juvenile court dispositions for boys and girls, however, suggest that in recent years, girls have experienced harsher penalties for less serious crimes (Beger & Hoffman, 1998; MacDonald & Chesney-Lind, 2001). Beger and Hoffman (1998) attribute this differential treatment to a lack of alternatives for girls within a juvenile justice system that has adopted the "get tough" policies associated with adult courts.

Other inequities in the treatment of girls concern the greater likelihood of their being arrested and detained for running away (Potter, 1999). This more stringent response to running away, and other status offenses committed by girls, is believed to stem from the efforts of a patriarchal court to control girls' sexuality (MacDonald & Chesney-Lind, 2001; Mahan, 2003). Legislation providing for the deinstitutionalization of status offenders has curtailed the incarceration of girls for the status offense; but once in the system, girls find

it hard to get out (Belknap, 2001; Chesney-Lind, 1997). In their attempt to escape adverse circumstances at home, they run away again, violate their probation, and become eligible for institutionalization. Moreover, several studies have demonstrated that responses to girls' probation violations are more stringent than those experienced by boys (Beger & Hoffman, 1998; MacDonald & Chesney-Lind, 2001).

This focus on gender bias in the juvenile justice system highlights one of the key differences between the gender-responsive and what works scholars. The former insists that we cannot begin to address the needs of girls in the juvenile justice system until we understand the sociological and systemic forces that carry them to its doorstep. The latter emphasizes the individual differences that influence girls' responses to these sociological forces and determines whether they will choose an antisocial or prosocial pathway. The next section of this article explores additional differences in how each group views girls' delinquency and methods of intervention.

### **The “Gender-Responsive” and “What Works” Literature: Substantive Differences**

Both groups of researchers have promulgated a set of principles to guide program development (Table 1). A quick review of these two sets of principles highlights the major difference between the two agendas. The gender-responsive agenda starts with the belief that boys and girls are different and that the unique needs of girls should be central to the principles for developing gender-responsive programs. The what works agenda starts with an attempt to identify a common core of program characteristics that contribute to positive behavioral change for all offenders. The recognition that girls and other subgroups require a different approach is encompassed by the “responsivity principle.” This principle is based on the idea that certain “responsivity” factors (e.g., cultural background, gender, personality, learning styles) can lessen or enhance offenders' amenability to particular types of intervention (Bonta, 1995; Kennedy, 2000). As such, the responsivity principle directs agencies to match offenders to interventions and program staff that can best accommodate these factors.

One's strength is the other's weakness. The gender-responsive literature provides a stronger advocacy for girls, but because of the recency of the perspective and the high cost associated with drawing the large samples of girls that are needed for statistical analysis (Howell, 2003), longitudinal empirical support for many of the principles is limited to qualitative research based

**Table 1**  
**Guiding Principles for Program Development:**  
**Gender-Responsive Versus What Works**

Guiding Principles for Promising Female Programming (see Peters, 1998)	Principles of Effective Correctional Intervention (see Latessa, Cullen, & Gendreau, 2002)
<p>1. Organizational culture: Effective organizations are characterized by staff that are cohesive and cooperative and create an environment that enhances positive change. Programs should have a vision, mission, and goals and objectives.</p> <p>2. Program maintenance: The program should be based on adolescent female development, risk and resiliency issues with regards to problems typically faced by girls, and be sensitive to cultural differences.</p> <p>3. Management/staff characteristics: Staff need to model cooperation, respect, and good communication skills, thus representing a teamwork approach. Staff should be hired based on their charisma or “authenticity.” Staff who have “been there” are preferred. Staff should reflect the diversity of the population.</p> <p>4. Client risk/need practices: Intake assessment should be conducted to determine the characteristics of the girl and what has brought her into contact with the criminal justice system. Girls should be treated as individuals. Assessment should include both risk and resiliency factors to gain a picture of the “whole child.” These risk factors should be ranked in terms of seriousness.</p>	<p>1. Organizational culture: Effective organizations have well-defined goals, ethical principles, and a history of efficiently responding to issues that have an impact on the treatment facilities. Staff cohesion, support for service training, self-evaluation, and use of outside resources also characterize the organization.</p> <p>2. Program maintenance: Programs are based on empirically defined needs and are consistent with the organization’s values. The program is fiscally responsible and congruent with stakeholders’ values. Effective programs are also based on thorough reviews of the literature (i.e., meta-analyses), undergo pilot trials, and maintain the staff’s professional credentials.</p> <p>3. Management/staff characteristics: The program director and treatment staff are professionally trained and have previous experience working in offender treatment programs. Staff selection is based on their holding beliefs supportive of rehabilitation and relationship styles and therapeutic skill factors typical of effective therapies.</p> <p>4. Client risk/need practices: Offender risk is assessed by psychometric instruments of proven predictive validity. The risk instrument consists of a wide range of dynamic risk factors or criminogenic needs (e.g., antisocial attitudes and values). The assessment also takes into account the responsibility of offenders to different styles and modes of service. Changes in risk level over time (e.g., 3 to</p>

*(continued)*



**Table 1 (continued)**

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Guiding Principles for Promising-Female Programming (see Peters, 1998)	Principles of Effective Correctional Intervention (see Latessa, Cullen, & Gendreau, 2002)
<p>5. Program characteristics: Programs need to include education with career development, vocational training, high school/GED completion, women's history, life skills, women's issues, health, and sexual behavior. The program should also include skills training such as self-defense, assertiveness, self-esteem enhancement, empowerment, and physical training. In addition, such things as resiliency or positive growth development, relationship building, and art-based therapy should be included.</p> <p>6. Core correctional practice: Programs need to target the whole individual with activities such as recreation, mentoring, peers, family, community, and group processes.</p> <p>7. Interagency communication: The program should provide aftercare, links with the community, provision of social support, development of new resources, and monitoring in the community.</p> <p>8. Evaluation: An evaluation strategy should be built into the program. Evaluations should include an assessment of the goals, strategies, and components of the program; process and outcome evaluations; and feedback.</p>	<p>6 months) are routinely assessed to measure intermediate changes in risk/need levels that may occur as a result of planned interventions.</p> <p>5. Program characteristics: The program targets for change a wide variety of criminogenic needs/factors that predict recidivism, using empirically valid behavior/ social learning/cognitive-behavioral therapies that are directed to higher risk offenders. The ratio of rewards to punishers is at least 4:1. Relapse prevention strategies are available once offenders complete the formal treatment phase.</p> <p>6. Core correctional practice: Program therapists engage in the following therapeutic practices: anticriminal modeling, effective reinforcement and disapproval, problem-solving techniques, structured learning procedures for skill building, effective use of authority, cognitive self-change, relationship practices, and motivational interviewing.</p> <p>7. Interagency communication: The agency aggressively makes referrals and advocates for its offenders in order that they receive high-quality services in the community.</p> <p>8. Evaluation: The agency routinely conducts program audits, consumer satisfaction surveys, process evaluations of changes in criminogenic need, and follow-ups of recidivism rates. The effectiveness of the program is evaluated by comparing the respective recidivism rates of risk-control comparison groups of other treatments with those of a minimal treatment group.</p>

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on small samples of girls. The what works literature suffers from the opposite problem: A growing body of scientific literature attests to the validity of the principles of effective correctional intervention (see Andrews, Zinger, et al., 1990; Gendreau & Ross, 1987; Lipsey & Wilson, 1998; Sherman et al., 1997), but most of the research has not involved girls (Krisberg, 2005). These researchers are charged with the criticism that neither can their male-focused, quantitative methods of inquiry possibly uncover the complex nature of female offending nor can they demonstrate their utility within girls' programming (Belknap, 2001; Bloom & Covington, 2001; Chesney-Lind, 2000).

In addition to these overriding disparities between the two approaches for developing and researching girls' programs, there are several other differences worth noting. Table 2 organizes these points of contention on six substantive areas, and the literature on these areas is reviewed in detail below.

## **Theoretical Foundation**

As implied earlier, one of the differences between the what works and gender-responsive literature rests on the theoretical foundation or root of girls' problems. The gender-responsive literature supports a macro-level explanation that attributes girls' delinquency to societal issues such as sexism, racism, and classism that triply marginalize girls and create an environment where they are apt to get involved in destructive behaviors (Belknap, 2001; Covington & Bloom, 1999). These authors criticize traditional theories of delinquency for their focus on individual-level factors that blame and pathologize girls instead of recognizing the roles that society and the criminal justice system play in girls' crime.

In contrast, the what works literature is rooted in traditional micro-level theories of crime (Andrews & Bonta, 1999). The authors of this literature draw heavily on social learning, social bond, and general strain theories from sociology and on cognitive-behavioral theories from psychology. Their chosen theoretical framework focuses on individual-level factors such as antisocial attitudes and antisocial peers as the root of criminal behavior.

## **Program Goals**

The second difference lies in goal definition. The what works literature emphasizes the reduction of recidivism as the ultimate goal of correctional and juvenile justice interventions; other intermediate goals (e.g., improved

**Table 2**  
**Substantive Differences Between the Gender-Responsive and What Works Agendas**

Substantive Area	Gender-Responsive	What Works
Theoretical foundation Program goals	Societal, sexual abuse Empowerment Improved quality of life	Psychosocial Reduction in recidivism
Consideration of risk	The concept of risk is inappropriately applied to girls who are more high need than high risk. Data on girls' behaviors indicate that they are more of a "risk" to themselves than to the public; thus, the concept of risk should not be used as the basis for locking girls up.	Level of risk should be identified and used as the basis of assignment to programs/facilities.
Assessment techniques	Qualitative and thorough social histories that tap into the female experience and guide individualized treatment planning.	Quantitative and objective instruments that include known correlates of delinquency and classify offenders based on level of risk and needs.
"Criminogenic" needs	Programs should target all needs, regardless of the strength of their association with delinquency. Girls have different needs than boys.	Programs should prioritize criminogenic needs (dynamic risk factors) as targets for intervention. Although there are differences in the general needs of boys and girls, the criminogenic needs are similar for boys and girls.
Therapeutic approach	Relational and empowerment models Strength-based Group therapy—process oriented	Cognitive-behavioral models Problem-focused Group therapy—structured, psychoeducational groups

education, reduced drug and alcohol abuse, increased self-control) are only important as they relate to recidivism (Latessa et al., 2002). In contrast, the gender-responsive group argues that the focus should be more encompassing

and that programs should aim to empower girls and improve their overall quality of life (Peters, 1998). Although a reduction in recidivism or delinquency is important to advocates of gender-responsive programming, it is their view that it should not take primacy over other important goals.

## **Consideration of Risk**

The concept of “risk” dominates the delinquency literature. According to the what works literature, a youth’s level of risk indicates his or her likelihood of recidivism. Once determined through assessment, this information on a youth’s level of risk should be used to determine the intensity and duration of services that the youth needs. This “risk principle” is based on research that demonstrates that high-risk offenders require intensive levels of services to reduce recidivism and that low-risk offenders can be made “worse” by inappropriately assigning them to intensive services/sanctions (Andrews, Bonta, & Hoge, 1990; Lowenkamp & Latessa, 2004; Van Voorhis, 2004).

Advocates of the gender-responsive literature take issue with how the concept of risk is applied to girls on two accounts. First, they argue that although girls may be high “need” they are not high risk; the lower rate of delinquency among girls and the type of offenses committed by girls suggest that they are not a danger to society (Bloom, 2000; Covington & Bloom, 2003; Hannah-Moffat & Shaw, 2003). Furthermore, they argue that the types of behaviors in which girls commonly engage (runaway, drug abuse, prostitution or promiscuity) present more danger to themselves than to others. Second, they claim that as applied, the risk principle can hurt girls inappropriately categorized as high risk by locking them up and exacerbating some of the very problems that got them into trouble in the first place (e.g., depression, sexual abuse, disruptions in relationships) (see Holtfreter & Morash, 2003). What girls need, these advocates argue, are services in the community.

## **Assessment and Classification**

Major differences exist in the two bodies of literature on the most appropriate techniques for the assessment and classification of girls in the juvenile justice system. Increasingly, juvenile justice agencies are moving from more traditional social histories to the use of more actuarial, or objective, assessment instruments to identify youth’s risks and needs and guide program placement (Howell, 2003). Although this shift in practice has been driven largely by resource constraints, legal challenges, and a push for more equitable treatment (Jones, 1996), it is also a response to the principles of

effective intervention that view good assessment and classification as the engine that drives program development (Andrews, Bonta, et al., 1990; VanVoorhis, 2004). This view stems from research that has shown that actuarial assessment instruments are superior to clinical approaches for predicting the likelihood of recidivism (Gottfredson, 1987; Jones, 1996).

Despite the evidence regarding the superiority of actuarial approaches to risk assessment, the gender-responsive group argues that the current instruments were developed using White male samples and are therefore “gendered and racialized” and suffer from several specific limitations (Hannah-Moffat, 1999). First, these assessments often do not reflect factors that are gender specific and believed to be more commonly associated with females such as depression, low self-esteem, and sexual victimization. Second, these assessments put the sole responsibility of crime on the individual by ignoring macro-level sociological factors such as poverty, sexism, racism, and heterosexism that are believed to promote girls’ antisocial behaviors (Covington & Bloom, 2003). Third, the assessment protocols proposed by the what works group are perceived as deficiency based and as depicting girls as pathological beings that must be fixed (Hannah-Moffat & Shaw, 2003). The gender-responsive group asserts that it is more important to identify strengths that can be used to empower girls toward adaptive ways of coping with a sexist society (Hannah-Moffat & Shaw, 2003). Finally, the gender-responsive group asserts that quantitative methods of predicting risk cannot possibly capture the nuances of girls’ lives that lead to their problematic behavior (Bloom, 2000). In contrast to the standardized, actuarial instruments supported by the what works group, the gender-responsive group prefers qualitative, interview-based assessments that tap into the female experience.

### **“Criminogenic” Needs**

Another salient difference between the two bodies of literature revolves on the issue of service or treatment needs. The what works literature distinguishes between general needs and “criminogenic” needs (Andrews, Bonta, et al., 1990; Van Voorhis, 2004). General needs reflect areas that, although important for programs to consider and address, have not emerged in research as strong correlates of delinquency. These needs can range from the basics of food and shelter to problems with anxiety or depression. Criminogenic needs are dynamic factors that are proven correlates of delinquency (i.e., they are a subset of risk factors). They exist within five broad domains including individual, family, school, peers, and community domains (Howell, 2003). Given this distinction, the “needs principle,” as set forth in the principles of effective

intervention, suggests that targeting these criminogenic needs must be a priority for programs interested in reducing the risk of recidivism.

The gender-responsive group takes issue with the “needs principle” on two related accounts. First, they take issue with the very notion of “criminogenic,” suggesting that it places the problem of crime within the individual and ignores the role of societal factors (Covington & Bloom, 1999). Second, they assert that limiting the targets of intervention to a select number of criminogenic needs ignores the problems that underlie girls’ delinquent behavior and the realities of the social context in which they live (Covington & Bloom, 1999; McMahan, 2000).

Another point of contention in the area of treatment needs centers on the similarities and differences among the criminogenic needs (i.e., dynamic risk factors) of boys and girls. The what works researchers rest their laurels on studies showing that the major risk factors are similar for boys and girls. Simourd and Andrews (1994) conducted a meta-analysis, which found that the most important risk factors for crime were antisocial attitudes and associates, personality/temperament, problems with educational/vocational achievement, and poor parent/child relations and that they were equally correlated with delinquency for boys and girls. A more recent study by Farrington and Painter (2004) arrived at similar conclusions. This longitudinal study looked at brothers and sisters within 397 families and found that the important risk factors for each gender were similar in that convicted parents, poor parental supervision, parental conflict, and harsh or erratic discipline all predicted early and frequent offending.

The gender-responsive researchers remind us that aside from these few studies, the bulk of studies on risk factors have been conducted on boys. Also, they assert that despite a lack of empirical evidence identifying low self-esteem, sexual abuse, and mental health problems as predictors of delinquency, there is enough evidence to suggest that these needs are more prevalent among girls than boys involved in the juvenile justice system and among delinquent than nondelinquent girls. Studies of adjudicated delinquents and detainees have revealed that girls are more likely than boys to have mental health problems and a history of physical and sexual abuse (McCabe, Lansing, Garland, & Hough, 2002; Teplin, 2001). Another study found that girls in the juvenile justice system were 3 times more likely than girls in the general population to have clinical symptoms of depression or anxiety (Kataoka et al., 2001). Moreover, Obeidallah and Earls (1999) reported that compared to nondepressed girls, depressed girls were more likely to commit violent and property crimes, and Khoury (1998) found that

compared with girls who had higher self-esteem, early adolescent girls with low self-esteem were less likely to delay the use of substances. Covington and Bloom (1999) assert that combined, these and other similar studies provide enough evidence to suggest that these factors underlie girls' antisocial behaviors in some fashion.

## **Therapeutic Approach**

Given the aforementioned differences, it should come as no surprise that the two groups of researchers disagree on the most appropriate therapeutic approach for girls. The what works group has amassed a large body of literature suggesting that cognitive-behavioral models of treatment are most effective in addressing antisocial behaviors among offender populations (Andrews, Zinger, et al., 1990; Cullen & Gendreau, 2000; Gendreau, 1996; Lipsey & Wilson, 1998; McGuire, 2000; Wilson, Allen Bouffard, & Mackenzie, 2005). These models, it is argued, are effective because they target important cognitive characteristics that are prevalent among offender populations and strongly associated with criminality, that is, they target important criminogenic needs.

There are two types of cognitive-behavioral approaches. The first type, cognitive restructuring, is rooted in the idea that our beliefs, values, and attitudes prompt and maintain our behaviors (Lester & Van Voorhis, 2004). If youth believe that stealing is okay, and does no harm to victims who can cover their losses with insurance, they are likely to steal. Also, how youth interpret events or circumstances within their environments determines how they will respond to them (Ellis, 1991). For example, if a girl perceives a poor grade on a test as unfair, she may give up on her studying rather than use the feedback to improve her grade on the next test. The second type, cognitive skills training, recognizes poor critical thinking and problem-solving skills as sources of maladaptive behavior. Both approaches include a behavioral component in recognition of the fact that beliefs, values, attitudes, and cognitive skills are learned by observing the actions of significant others. Once observed, the behavior is imitated, and whether the behavior is repeated is dependent on whether the actor is rewarded or punished.

Cognitive-behavioral therapies are directive approaches that are more educational than therapeutic, that is, they are structured, goal-oriented approaches that focus on values enhancement and skill development through the use of modeling and reinforcement techniques. In practice, these approaches look and sound very different from the psychoanalytical approach that emphasizes expression of emotion and the resolution of past trauma.

The application of cognitive-behavioral approaches to female offenders is one of the most contentious areas in programming for female offenders. The what works group has amassed a significant number of studies attesting to the efficacy of cognitive-behavioral programming in treating a variety of offender populations and in a broad spectrum of problem areas (see Lipsey & Wilson, 1998; McGuire, 2000; Wilson et al., 2005). According to Cameron and Telfer (2004), this research has contributed to an almost unilateral adoption of cognitive-behavioral approaches for offenders within the United Kingdom, Canada, Australia, and the United States. They caution that this widespread application may be premature given a lack of available research that specifically examines the efficacy of cognitive-behavioral treatment with specific offender groups, including female offenders.

The gender-responsive group asserts that the antisocial attitudes targeted in much of the cognitive restructuring programs are more characteristic of male offenders and argue that the cognitive-behavioral models designed to challenge these antisocial attitudes have limited applicability to female offenders (Covington & Bloom, 1999). Kendall and Pollack (2003) assert that cognitive-behavioral approaches ignore the structural aspects of crime and pathologize females' "rational responses to unjust circumstances" (p. 75). Additionally, they argue that cognitive-behavioral approaches are oppressive in that they try to teach women what and how to think. In contrast to the deficit-based approach used in many cognitive-behavioral programs and other male-oriented treatment, they assert that the best approach for girls is a strengths-based approach that is designed to empower females and help them gain control over their lives (Covington, 2002; McClellan, Farabee, & Crouch, 1997; Wald, Harvey, & Hibbard, 1995). Finally, they argue that the structured, present-oriented, psychoeducational model of group therapy applied to contemporary cognitive-behavioral models of treatment for offenders does not accommodate girls' needs for establishing connections with others. Instead, they propose a therapeutic model that allows girls to explore common problems in their lives and develop a sense of self-worth through intimate communication with others (Covington, 2002; Wald et al., 1995).

The gender-responsive group suggests that more important than the therapeutic approach (e.g., cognitive-behavioral, psychoanalytic) or the targets of intervention (e.g., substance abuse, antisocial attitudes) is the manner in which it is delivered. They support therapeutic approaches that are (a) trauma informed and (b) based on the relational model. Being trauma informed requires service providers to be aware of consumers' history of past abuse, to understand the role that abuse plays in victims' lives, and to use this



understanding to create services that facilitate their participation in treatment (Harris & Fallot, 2001, p. 4). Trauma-informed services conduct universal screening on intake to identify consumers with a history of abuse, use a strengths-based approach to help consumers recognize the skills that have helped them survive their abuse, and help them transfer these skills to achieve important treatment goals (e.g., improved decision making, reduced substance abuse).

The relational model is based on the recognition that girls' healthy development is dependent on affiliation with others through positive interpersonal relationships (Gilligan, 1982; Miller, 1986). According to Covington (2000), many of the problems girls experience can "be traced to disconnections or violations within relationships" (p. 197), and thus, positive change for girls is dependent on developing mutually trusting and empathetic relationships that prevent them from undergoing the same experiences again. Both the trauma theory and the relational model emphasize the importance of a collaborative approach that gives girls a voice in all phases of service delivery.

As can be seen, there are significant differences between the what works and gender-responsive groups in their perspectives on the causes of girls' delinquency and on the appropriate interventions for addressing the needs of girls in the juvenile justice system. Although valuable knowledge has been generated by both academic camps, we believe that in their attempt to highlight their particular positions each group discounts, or remains silent, on the important contributions of the other, and as such, they amplify the areas of disagreement, downplay the areas of agreement, and leave practitioners confused. In the paragraphs that follow, we expand our discussion of the literature and provide our own synopsis of the evidence to demonstrate that the two perspectives are more complementary than competitive.

## **Irreconcilable Differences?**

The bulk of this discussion centers on a key question that we believe is the crux of the differences between the two groups: How different are the risks/needs of boys and girls in the juvenile justice system? Then, given the evidence, we will address two additional questions about girls' programming that are particularly contentious: Are current trends in risk assessment and classification appropriate for girls? and What is the most appropriate therapeutic approach for girls?

## **How Different Are the Risks/Needs of Boys and Girls in the Juvenile Justice System?**

Just the small glimpse into the literature on the risk factors or criminogenic needs of boys and girls makes it easy to see why juvenile justice professionals are left scratching their head and feeling that the more they learn the more elusive the truth is about similarities and differences between boys and girls. We assert that uncovering the truth lies in (a) conducting more longitudinal research on girls; (b) clarifying what exactly the studies cited by both camps tell us, or do not tell us, about the relationship between these factors and girls' delinquency; and (c) a closer examination of the specific factors embedded within these broad categories of risk factors. Given the significance of this issue to the ongoing debate about the best approach for system-involved girls, the last two points are addressed below in some depth.

*What is and is not known about the risks/needs of girls.* There are three interrelated methodological issues that limit our knowledge about the similarities and differences between the factors associated with boys' and girls' delinquency. First, the basis of the what works groups' assertion that the major risk factors, or predictors, of delinquency are similar for boys and girls are studies done to develop or validate risk assessment instruments. Because these studies are usually retrospective, they are limited to what information or measures are available. What is typically available has been driven by programming for and research on boys. This, and the fact that the regression models used in these studies explain very little of the variation in recidivism for boys or girls (see Gottfredson & Snyder, 2005), begs the question What other factors underlie delinquent behavior? Could it be that the variables more predictive of girls' delinquency (and boys' for that matter) have not yet been examined?

In their 2002 meta-analysis of studies on the factors associated with female delinquency, Hubbard and Pratt were particularly interested in examining factors thought to be associated with female delinquency (e.g., sexual abuse, low self-esteem) but not readily available in prediction studies. Similar to findings generated by the what works group, they found that factors such as antisocial peers and antisocial personality were the strongest predictors of delinquency. However, the findings also suggested that school and family relationships and a history of physical and/or sexual assault, although less powerful predictors, were still robust predictors of female offending. The results of this study, while adding to the growing body of

findings regarding the similarity of major risk factors among boys and girls, support the need for the continued study of these less examined factors.

Second, studies that have been conducted to examine the risks/needs of boys and girls are commonly cross-sectional studies; thus, the only conclusion that can be drawn is that there are statistically significant correlations, or associations between the major risk factors and delinquency. The exact nature of these relationships is unknown. How can we explain the findings regarding the higher prevalence rates of sexual abuse, low self-esteem, depression, and posttraumatic stress disorder among delinquent girls and yet, simultaneously, explain their weak correlations with delinquency? Are there unmeasured or mediating factors that mask the important role that these factors play in girls' delinquency?

A study by Horwitz, Spatz Widom, McLaughlin, and Raskin White (2001) speaks of this conundrum. Numerous studies have demonstrated that childhood sexual abuse contributes to poor mental health outcomes and crime in adulthood and that negative effects are even stronger for women (Bailey & McCloskey, 2005; Herrera & McCloskey, 2003; McClellan et al., 1997). In an effort to disentangle the relationship between sexual abuse and later mental health outcomes, Horwitz et al. (2001) conducted a prospective, longitudinal study that compared the mental health outcomes of participants with documented cases of childhood abuse and neglect and a matched control group of participants who did not have documented cases of abuse and neglect. They also examined the differential impact of victimization on males ( $n = 586$ ) and females ( $n = 562$ ). The results indicated that adult men and women who experienced early victimization had more symptoms of dysthymia and antisocial personality disorder than matched controls; adult women who experienced early victimization also had more symptoms of alcohol abuse than matched controls. The results also show, however, that when a measure of lifetime stressors (e.g., unemployment, unstable employment, financial problems, homelessness, divorce, family involvement in drug or alcohol abuse or arrest) and demographic variables (parents on welfare, age, race) were entered into the regression models, whether participants were a member of the abused or neglected group or the control group explained less than 2% of the variance in mental health outcomes. Based on these findings, the authors conclude that the impact of childhood victimization "is likely to stem from a matrix of disadvantage that abused and neglected children suffer from, only one part of which consists of the abuse and neglect itself" (p. 195) and that "childhood victimization has stronger indirect than direct effects on adult mental health" (p. 197). Horwitz et al. suggest that uncovering the mediating and protective factors

that help some victims of child abuse and neglect avoid problem outcomes is an important area for future research.

Studies on the role of depression in girls' problem behaviors also speak of this issue. Because depression is difficult to distinguish from typical adolescent behaviors (e.g., intensity of emotions, increased need for sleep, irritability), it is often left undiagnosed and untreated, opening the door for later problem behaviors. For example, there is some evidence to suggest that girls' entry into substance abuse often is preceded by depression (King, William, & McGue, 2004). Also, depression has been found to contribute to problems with academic functioning and interpersonal relationships (Obeidallah & Earls, 1999). Thus, it appears that depression leads to other negative outcomes known to increase a youth's risk of delinquency.

In many ways, the findings reported in these studies are consistent with the arguments of the what works group: Despite the fact that abuse and mental health disorders co-occur more often with girls' delinquency than with boys, they have not been found to be significant predictors of delinquency; thus, we should focus our interventions on changing the more proximal, and perhaps mediating, factors such as cognitive skills and learning environments.

Third, how generalizable are the results of these studies? Many of the studies conducted to examine the risks/needs of youth are conducted on system-involved youth, and thus, the findings may not be representative of differences among boys and girls in the general population. For example, a recent study of cognitive distortions among delinquent and nondelinquent youth revealed that although self-serving and self-debasing distortions were more prevalent among delinquent youth, there were no differences in the types of cognitive distortions invoked across genders (Barriga, Landau, Stinson, Liao, & Gibbs, 2000). However, other studies of youth in the general population have demonstrated important differences in the distortions and coping mechanisms enacted by boys and girls (Achenbach, Howell, Quay, & Connors, 1991). It may be that there are more gender differences in pre-delinquent risks/needs and that these differences diminish as youth move further along the continuum to chronic and serious delinquency.

*Specifying factors within broad risk/need domains that contribute to boys' and girls' delinquency.* A closer examination of research on specific factors within the broad categories of risk factors touted by the what works group reveals truths within both research camps. For example, in support of the what works group, a comprehensive review of the extant literature led Bennett, Farrington, and Huesmann (2005) to conclude that although more

prevalent among boys, problematic social cognitive processes resulted in similar maladaptive outcomes (i.e., crime, violence) for boys and girls. In support of the gender-responsive group, there is a sufficient amount of evidence to suggest that there are important gender differences in these problematic social cognitive processes and that these differences are believed to contribute to the gender differences in the rates of antisocial behavior. For example, girls have been found to have lower rates of hyperactivity and poor impulse control (Moffitt, Caspi, Rutter, & Silva, 2002), stronger moral evaluations of behavior that enhance their ability to counteract negative peer influences (Mears, Ploeger, & Warr, 1998), greater empathy and more guilt proneness (Mears et al., 1998), and a greater tendency to engage in self-debasing distortions (e.g., self-blame, negative thoughts about self) that lead to internalizing behaviors and self-harm, whereas boys are more likely to engage in self-serving distortions (e.g., externalization of blame, rationalizations) and externalizing behaviors that harm others (Achenbach et al., 1991). Also, girls have a stronger sociotropic cognitive style than boys, that is, they have a stronger desire for affiliation and acceptance. This desire and eagerness to please contributes to negative emotional (e.g., stress) and behavioral outcomes (e.g., risky sexual behavior) (Donabella Sauro & Teal Pedlow, 2005). Although these differences do not diminish the value of cognitive-behavioral treatment with girls as supported by the what works group, they do reiterate the importance of differentiated treatment for boys and girls, a point that is strongly advocated by the gender-responsive group.

When other domains of risk factors are examined, similar distinctions emerge. Although not incongruent with the findings of the what works group, most of these distinctions highlight points that are emphasized in the gender-responsive literature: the importance of relationships in girls' lives and the sociotropic cognitive style (i.e., the desire to be accepted) that is so prevalent among girls. For example, recent studies have revealed that many of the family factors long associated with delinquency have a stronger influence on the emotional and behavioral outcomes of girls: Kaker, Friedemann, and Peck (2002) found stronger correlations between a lack of emotional bonding with parents and substance abuse for girls, and Farrington and Painter's (2004) longitudinal analyses of brothers and sisters revealed that low praise by the parents, harsh or erratic discipline, poor parental supervision, parental conflict, low parental interest in education, and low paternal interest in the children were stronger predictors of sisters' later delinquency.

Although important in the etiology of offending for both boys and girls, schools provide another context in which relational factors appear to create

special challenges for girls. Studies by the American Association of University Women (AAUW, 1992, 1998) uncovered gender bias within schools in the form of girls receiving less attention in the classroom, lower scores in math and science, and curricula that ignore or stereotype women. Other studies have found that girls experience high rates of sexual harassment within the school setting (Fineran, 2002) and that girls' emotional safety is often threatened when participating or speaking in class (Schoenberg, Riggins, & Salmond, 2003). These negative experiences contribute to reduced self-esteem, increases in truancy, reductions in school achievement, and lower career aspirations (AAUW, 1992, 1998)—all factors that have been found to increase the likelihood of delinquency.

Consistent with the claims of the what works group, the peer group has a powerful influence on the behaviors of adolescent girls. But a closer examination of this relationship reveals that different dynamics may be at work beyond the presence of antisocial peers. In particular, there are two factors about girls' peer groups that seem to contribute to girls' problem behaviors. First, research has revealed that girls who report having a mixed-sex friendship group are significantly more likely to engage in delinquency than girls with a same-sex friendship group (Giordano, 1978). The reasons for this are unclear. Is it because, as the what works group would suggest, boys are more likely to be antisocial influences for girls? Is it because of the way boys make girls feel about themselves (e.g., anxious, uncertain, eager to please). Or, is it because girls with more male friends are missing out on the greater degree of social controls that are provided by female friendships (McCarthy, Felmlee, & Hagan, 2004)? Second, according to Brown (2003), girls undermine the development of the supportive friendships they so desperately need by engaging in "girlfighting," or the emotional and discreet bullying of other girls (e.g., gossip, manipulation, teasing, exclusion). Brown describes this as "horizontal aggression" that serves as a protective factor, as a safe avenue for girls to express their fears and gain power within a sexist culture. But this type of aggression among girls' friendship groups has been shown to interfere with the development of self-esteem and the ability to experience intimate relationships (Brown, 2003; Prinstein, Boergers, & Vernberg, 2001). It undermines the development of the cohesive friendship networks that are needed for girls' healthy development (Bearman & Moody, 2004; Hazler & Mellin, 2004). Also, because this girlfighting often occurs in the school setting, it can lead to increased truancy and interfere with student engagement in learning (Kochenderfer & Ladd, 1996; Olweus, 1978), both of which are known risk factors for delinquency.

In sum, our knowledge about the development of girls' antisocial behaviors is constrained by a lack of longitudinal research and by methodological issues associated with existing studies. There is enough evidence, however, to support both sides of the argument: Research reveals both similarities and differences in the factors that contribute to boys' and girls' delinquency. It may be that factors such as depression, that are more prevalent among delinquent girls, prompt or initiate delinquent behavior but that self-serving and other antisocial attitudes, that are more similar to boys, maintain and escalate the behavior. If this is the case, then the targets of intervention may need to change depending on whether services are being offered as primary, secondary, or tertiary prevention. The key point of the what works group, with which we agree, is that programs for delinquent girls that focus on the self-esteem and mental health problems at the exclusion of the major, more proximal, risk factors may empower girls and improve their overall quality of life but they are not likely to reduce recidivism. We also believe, however, that conclusions regarding the similarity of major risk factors for boys and girls are overly simplistic and impede the development of differentiated treatment that adequately addresses the needs of girls. What then, does this mean for girls' programming? In the following sections, we will discuss what we believe are the most appropriate methods of assessment and intervention for girls based on our synopsis of the evidence.

### **Are Current Trends in Risk Assessment and Classification Appropriate for Girls?**

Both groups agree that overclassifying and overtreating female offenders causes harm. There is sufficient evidence, both anecdotal and empirical, to support this concern (see Holtfreter & Morash, 2003; Lowenkamp & Latessa, 2004). Both groups also support the use of community-based services over incarceration. Despite this, and the fact that girls on average present a lower risk than boys, there are some high-risk girls who are engaging in serious and chronic delinquency and may need to be separated from society at large. The real issue lies in whether the current methods of risk assessment appropriately categorize girls.

It is difficult to refute the gender-responsive group's arguments against the use of actuarial risk assessment instruments with girls. The development of gender-specific actuarial assessment instruments is severely constrained by small samples of girls within the juvenile justice system. This statistical fact alone may account for the absence of the sociological and individual

risk factors believed to promote girls' delinquency. There is growing evidence, however, to suggest that these risk instruments predict the subsequent delinquency of males and females equally well (Flores, Travis, & Latessa, 2004; Ilacqua, Coulson, Lombardo, & Nutbrown, 1999; Schwalbe, Fraser, Day, & Arnold, 2004). A study of one of the more popular risk/need instruments in use today, the Youthful Level of Services/Case Management Inventory, found a statistically significant correlation between the youth's risk score and a variety of correctional outcomes (i.e., technical violations, rearrest, rearrest seriousness, and reincarceration) for both boys ( $n = 1,321$ ) and girls ( $n = 358$ ) (Flores et al., 2004).

It is our contention that current actuarial instruments reflect the state of knowledge about factors that increase the likelihood of recidivism for boys and girls and that, as such, they are congruent with an overriding goal of the juvenile justice system—to reduce the recidivism of youth under its care. We also believe that these objective instruments serve to minimize, rather than amplify, the gender bias that is of concern to the gender-responsive group and the overclassification that is of concern to both groups. We agree that there is a disconnect between the popular “strengths-based approach” and the risk and need factors that appear in actuarial risk assessment instruments. At this juncture, however, there is considerable debate as to whether strengths, or protective factors, are just the flip side of the risk factors already measured by these instruments, or whether they represent a completely different set of factors (Farrington, 2000; Rutter, 1985). Furthermore, we assert that the common factors within these instruments (i.e., individual, family, and school-based factors) reflect the domains in which juvenile justice programs and practices can make a difference. Although the broader sociological concerns of feminist scholars (e.g., sexism, intergenerational poverty) are important to acknowledge, changes in these factors are beyond the scope of what professionals in the juvenile justice system can realistically accomplish, that is, they are far more likely to be successful in changing the way girls interpret and respond to their environment than they are to change the environment itself. Whether this approach is perceived as “fixing” girls or “empowering” girls is left to the reader's interpretation.

Based on the sources of contention about assessment practices for girls, what is known about the correlates of crime, and what is known about girls' unique needs, we recommend that first, and foremost, agencies use a validated, actuarial risk assessment instrument to measure girls' risk of recidivism. These instruments should be normed on female offenders and appropriate cut-off levels should be established. In addition, it is recommended that agencies



(a) conduct other standardized, objective measures of problem areas known to be prevalent among girls (e.g., standardized mental health assessments), (b) measure girls' strengths and assets, and (c) conduct an in-depth interview with each girl on intake.

We believe that the proposed protocol reflects the best approach for discovering what girls need to reduce their likelihood of recidivism and improve their overall quality of life. It gives the empirical knowledge about actuarial assessment and risk factors its due credit while elevating the importance of assessing factors that appear to be more prevalent and influential in the lives of girls. The consistent use of other standardized instruments will allow us to conduct further research that enhances our understanding of how these factors affect girls' delinquency.

### **What Is the Most Appropriate Therapeutic Approach for Girls?**

At this juncture, this question cannot be answered with any degree of certainty because of a lack of outcome studies on girls' programming within the juvenile justice system. We assert that an integrated approach or one that recognizes the value of both perspectives is needed to work effectively with girls. Based on the evidence, it appears that the best approach would reflect both the relational model advocated by the gender-responsive group and the cognitive-behavioral model supported by the what works group.

In support of the relational model, an essential element of girls' programming is the promotion of healthy connections for girls with persons both internal and external to the program. Within the program, the focus should be on developing a therapeutic or helping alliance. The therapeutic alliance has been conceptualized as the collaborative relationship that develops within a helping relationship and provides the foundation for positive psychological change (Horvath & Luborsky, 1993). According to Bordin (1980), the working alliance is what "makes it possible for the patient to accept and follow treatment faithfully" (p. 2). In the counseling profession, the therapeutic alliance has long been viewed as an intermediate criterion of counseling effectiveness, that is, stronger alliances contribute to better outcomes (Frieswyk, Allen, Colson, & Coyne, 1986; Horvath & Symonds, 1991; Stiles, Agnew-Davies, Hardy, Barkham, & Shapiro, 1998). Although important when working with boys, we assert that in concert with the relational model, a strong helping alliance is particularly relevant when working with girls. The three primary characteristics of a high-quality therapeutic alliance include (a) agreement between the

change agent and the client on the goals of intervention, (b) collaboration on the development and completion of tasks devised to achieve the goals, and (c) a trusting and respectful relationship that provides a safe context for self-examination and personal growth (Florsheim, Shotorbani, & Guest-Warnick, 2000). In essence, a strong working alliance gives girls a voice in their treatment, a position strongly supported by the gender-responsive group.

Interventions also should be aimed at promoting healthy connections with persons and organizations external to the program. Programs for girls should build on the risk and protection framework and emphasize the importance of building positive connections in the domains of family, peers, school, and community. The goal is to surround girls with social support that insulates them from adverse circumstances that may lead to risky or antisocial behavior. Studies show that social support protects youth from adverse circumstances by providing them with a sense of felt security (Bretherton, 1985) and counteracting psychological and physical consequences of stress (Unger & Wandersman, 1985; van der Kolk, 1994).

Potential avenues for promoting these connections include family interventions that aim to decrease conflict, improve communication, and increase the monitoring and supervision of girls. School-based interventions for girls should focus primarily on helping girls feel safe by connecting them with caring adults within the school setting and by promoting academic self-efficacy. Promising peer interventions that promote healthy relationships among girls include social competency training and cognitive interventions that target negative beliefs about the self or others. Three other promising strategies for connecting girls with prosocial activities and others within the community include recreational programming, faith-based programming, and mentoring. It should be noted that in addition to recognizing the important role that relationships play in girls' lives, these types of interventions help to establish social bonds, expose girls to positive role models, and provide girls with a source of positive reinforcement for prosocial behaviors, all of which are elements supported in the principles of effective intervention proffered by the what works group.

Within the context of the helping alliance, we support the use of cognitive-behavioral approaches with girls. This support is based on the research suggesting that cognitive distortions and processing deficits contribute to a range of maladaptive behaviors among girls (see Bennett et al., 2005; Owens & Chard, 2001; Simourd & Andrews, 1994; Young, Martin, Young, & Ting, 2001). Additionally, there is a sufficient amount of research to suggest that these approaches are effective in treating depression and eating disorders among adolescent girls (Schapman-Williams, Lock, & Couturier, 2006; Wood, Harrington, & Moore, 1996).

In support of the responsivity principle and the evidence suggesting some differences in the general and problematic cognitive processes of boys and girls, we suggest that the cognitive-behavioral approaches be modified from those approaches typically used with male populations in two key ways. First, as noted by Cameron and Telfer (2004), cognitive-behavioral groups for girls should conform to their need for greater support, safety, and intimacy versus the confrontational tendencies of male-oriented groups. Second, cognitive-behavioral approaches for girls must target the types of cognitive distortions and processes that are more common among girls including the self-debasing distortions and internalizing behaviors referenced previously.

Finally, both the what works and gender-responsive groups recognize the importance of understanding differences that affect the way girls relate to others and the way they respond to interventions. Some of the most important of these differences include mental health disorders, sexual preference, and cultural backgrounds.

Although mental health disorders are not strong predictors of delinquency, they are responsivity factors that interfere with a person's amenability to treatment. Thus, prior to addressing girls' criminogenic needs, it may be necessary to treat disorders that undermine potential treatment gains. Another difference that must be clearly understood when working with girls is their sexual orientation. Studies show that lesbian, bisexual, and transgender girls are at greater risk for delinquency and other antisocial behaviors (see Anhalt & Morris, 1998). Juvenile justice agencies can enhance services for lesbian, bisexual, and transgender girls by avoiding language and assumptions that present alternative sexual orientations as pathological states, providing visible role models, being familiar with resources for girls with alternative sexual orientations, and matching them to staff that view their lifestyles as valid and are comfortable with their own sexuality. Finally, it is important to acknowledge race, ethnic, and class differences in girls' programming. The gender-responsive group emphasizes the need to understand how gender, race, and class intersect to create worldviews that influence girls' relationships with others (Belknap, 2001; Covington & Bloom, 1999). According to Sue and Sue (1999), a failure to understand and value cultural differences in counseling or psychotherapy can impede the development of rapport and strong alliances that are needed for effective helping relationships.

The proposed therapeutic approach integrates the key principles from each body of work. Although it recognizes the merit of cognitive-behavioral interventions, it emphasizes the relational aspect as the foundational, essential ingredient for working effectively with girls.

## **Future Research and Development**

Longitudinal, prospective research is needed to document the pathway to girls' delinquency from early childhood through late adolescence. This pathway is now just speculation and does not provide solid footing for program development. According to life course theory, the factors predictive of problem behaviors change over time (Sampson & Laub, 1993); knowing how these factors change for girls will ensure that programs are targeting the most relevant factors at each developmental stage. Practitioners can facilitate research on the risks and needs of girls in the juvenile justice system by following the assessment protocol outlined above. Given the focus on cognitive-behavioral interventions, instruments should be included that measure the cognitive processes that contribute to girls' problem behaviors. This area of inquiry would lend itself to the development of gender-responsive cognitive-behavioral programs.

The next step in the process of integrating these two bodies of literature is to translate this knowledge into concrete practices. According to Porporino and Fabiano (2005), the calls for gender-responsive approaches have been largely unanswered in practice. Part of our intention here was to set forth a framework from which these practices could be developed, implemented, and tested through program evaluation.

Despite the success of the what works group in translating their principles into practice, there is an ongoing struggle with getting into the "black box" of correctional interventions, that is, the "program" as a whole is tested, but little is known about the unique contributions of particular program elements to its overall success (or failure) or to its success among various subgroups (e.g., girls). Two specific elements that could be tested within the proposed framework are the therapeutic alliance and the gender-responsive cognitive-behavioral model. The more knowledge we gain about the importance of building strong relationships with youth, especially girls, the more likely we are to challenge the current culture of many modern-day juvenile justice agencies—a culture that appears to impede the development of helping alliances. Additionally, a greater investment must be made in developing and testing various models of cognitive-behavioral interventions for girls.

## **Conclusion**

Valuable knowledge has been generated by both academic camps (i.e., the what works and gender-responsive groups). Having sorted through

extensive amounts of both bodies of literature, we assert that the perspectives and findings therein are more complementary than competitive and that each makes valuable contributions to our understanding of girls' delinquency. In our opinion, the two major contributions of the gender-responsive group include their (a) explication of how the social context of being a girl in the United States facilitates girls' delinquency and (b) research and discussions on the need for gender-responsive treatment to reflect the differences in the socialization and development of boys and girls. The major contributions of the what works literature includes (a) their empirical basis for program development and (b) their success in translating this research into practical applications for correctional and juvenile justice agencies.

Despite their vastly different approaches to addressing the needs of girls, both these sources of knowledge have value for girls' programming. Ignoring the relevance of either body of literature to working effectively with girls involved in the juvenile justice system is tantamount to knowledge destruction. The gender-responsive group can no longer afford to ignore the mounting evidence for the efficacy of programs rooted in the principles of effective intervention. At the same time, the what works group could benefit from recognizing the important contributions of the gender-responsive group. Their knowledge about what it is like to grow up as a girl adds clarity to the responsivity principle as it applies to girls.

It is essential that staff working with girls have a basic understanding of both bodies of literature. In this article, we have attempted to integrate the two bodies of literature into essential elements to be included in prevention and/or treatment programs for girls by recognizing the value in each "camp" and reflecting that knowledge in specific program components. Taken separately, neither body of literature is very instructive as to what specific elements and approaches are needed to improve the lives of girls and reduce their propensity for delinquency. Together, however, they provide a blueprint for effective girls' programming.

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