



Girl Connection

For those who serve adolescent females

October 2009

Written by: Kathy Nesteby

Iowa Gender-Specific Services Task Force

11 Components of Female Responsive Practice

Provide emotional and physical safety.

Girls need space that is emotionally safe, removed from family and friends who depend on them, and removed from the demands for the attention of adolescent males. Further, programs are obligated to provide an environment that is safe from any verbal, physical, sexual, and emotional abuse that may be committed by staff.

Be culturally appropriate.

Service providers must acknowledge and approach the cultural differences of program participants in ways that support each individual's cultural identity. Too often program staff and administrators provide services in a culturally neutral way, particularly when issues of race are involved. Programs must be shaped by the unique developmental issues facing both minority and majority girls while building in cultural resources accessible in all communities.

Be relationship-based.

Girls must learn skills of assertiveness, appropriate expression of anger, and selection of healthy relationships. Programs must shift the discussion off of girls' relationships with males. While those relationship issues are important, girls often lose themselves in those relationships and/or create false selves that focus on the needs of others. Staff must also be able to build non-exploitive and meaningful relationships with young women.

Provide positive female role models and mentors.

Programs must potentiate girls' relationships of trust and interdependence with women already present in their lives. Friends, relatives, neighbors and social group members can be critical providers of insight, strategy and strength.

Address the abuse in girls lives.

Many researchers suggest that the pervasiveness of abuse in the lives of adolescent girls could be the most significant underlying cause of high-risk behaviors that lead to delinquency. Recognizing this can help professionals to reinterpret girls' offenses as complex survival strategies rather than simply as unacceptable behaviors. This does not require a sacrifice of accountability as is often the misconception. Also, crisis (physical) intervention policies should also be examined for their potential to retraumatize young women.

Be strength-based, not deficit-based.

Programs must help girls move from just coping to survive to utilizing their experience, support, intelligence, and inner wisdom to develop strategies that lead to their personal success and growth. This means that programs must employ staff who are able and willing to address girls' behaviors from this position, leaving behind the diminishing and shameful labels that so often limit adults' abilities to see girls' resiliency and strengths.

Address sexuality, including pregnancy and parenting.

Girls need information that goes beyond the possible consequences of sexual acts. They need comprehensive science-based information about reproductive anatomy and physiology as well as pregnancy and motherhood. They also need opportunities to identify their personal sexual limits and to rehearse communicating those limits to a potential partner.

Provide equitable educational and vocational opportunities.

Education must address the academic, social, and life-skill needs of girls. It will need to offer alternatives to traditional classroom instruction to deal with learning disabilities, learning deficits, or negative attitudes about learning and the value of education.

Address the unique health needs of females, including nutritional concerns and regular physical exercise.

Mental health services must avoid the traditionally negative relationship between mental health treatment and females, often characterized by over-medication. Also, in light of the high rates of sexual abuse among this population, gynecological service providers must be especially sensitive to the emotional responses of girls to standard gynecological procedures. Finally, health staff should communicate regularly with program staff, while maintaining confidentiality, and be included in the overall treatment team.

Nurture the spiritual lives of participants.

Girls with religious backgrounds must be provided opportunities to participate in their personal worship and religious practice. However, spirituality may also be expressed in other ways through daily time for relaxation, journaling, poetry, or quiet time. Young women's choice to have no spiritual practice must also be respected. This component should be driven by each young woman and staff must avoid imposing their personal religious beliefs in any way.

Involve individual member of girls families.

Efforts must be made to include families in girls' programs and services. Specifically, the mother-daughter relationship should be addressed. Of course, this component can be challenging as many families are closed to outside help and/or lack adequate skills or resources to participate actively. Similarly, staff should support multigenerational and extended family placements for girls who cannot return to their families of origin.

For more on how to implement the 11 components, visit our website: www.women.iowa.gov/girls

Also, look for our upcoming publication, "Female Responsive Protocol for Adolescent Offenders".

October 2009 ~ Components of Female Responsive Practice
The Girl Connection

newsletter is provided as a service of the Iowa Gender-Specific Services Task Force.
For back issues of *The Girl Connection*, more information about the Gender-Specific Services Task Force,
or if you are willing to receive future issues via e-mail to save mailing costs, please contact us:

Kathy Nesteby, Coordinator
Iowa Commission on the Status of Women
1-800-558-4427 or (515) 281-6915
Kathy.Nesteby@iowa.gov
www.women.iowa.gov/girls

PLEASE
COPY
AND
DISTRIBUTE
WIDELY

Iowa Gender-Specific Services Task Force
Iowa Commission on the Status of Women
Lucas State Office Building
Des Moines, IA 50319