Serving Incarcerated Mothers and their Babies in Community-Based Residences

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To decrease problems associated with separating newborn infants from their mothers, and to increase family stability and reduce recidivism, corrections departments in several states have implemented community-based correctional alternatives for women prisoners and their babies. Some alternatives allow mothers to serve their time in community residences and to keep their babies with them. This report presents major findings from a study of one such facility, the House.

The research team conducted individual, face-to-face interviews with six of the seven staff and all of the nine mothers who were residing at the House during three separate visits. Staff interviews covered formal and informal program norms and procedures, experiences with residents, program strengths, and areas for further development. Residents were asked how they perceived the program, whether the program met their needs, and their future plans. The research team also observed House operations during these visits and reviewed House policies and procedures. Agency records provided program participation and outcome information on all 35 women who had resided at the House during its first 30 months of operation. Individual case records detailing demographic characteristics were available, however, for only the 18 women whose files were still maintained at the House.

The Residence

The House was run by a community social services agency under a contract with a state Corrections Department. The agency was responsible for House operations and staff supervision, while the Corrections Department established security and safety rules and regulations and monitored the facility and programs to assure compliance. The House provided a twenty-four hour residence for up to ten mothers and their babies at a time. A comprehensive services program including case management, vocational training and employment assistance, drug treatment, parent education,
and health services was provided. A four-phase rites-of-passage model served as the conceptual framework for mothers' program involvement, with mothers transitioning through program phases based on their meeting certain benchmarks. Each phase carried more privileges, along with more leadership responsibilities in carrying out the work of the House. In the final stage, mothers held paid community jobs and participated in community activities outside the House.

Incarcerated women were eligible for the program if they:
< were pregnant upon entry to and gave birth while in prison
< obtained the consent of a stand by guardian for their babies
< met work release requirements of the Corrections Department
< were within two years of mandatory supervised release
< were a non-violent offender.

The Residents

House residents were similar to women prisoners nationally—primarily single, women of color, under the age of 30, and had dropped out of school before graduating. Only one woman among the eighteen was currently or had ever been married. Ages of the women ranged from 20 to 39 with a median age of 25. Only one woman had finished high school, though six (33%) reported having a GED. Eight women (44%) dropped out of school after completing the eleventh grade, indicating that they had only one year left to obtain a high school diploma. Thirteen (72%) were African American; five (28%) were white. All but one had a history of substance abuse.

Eleven (61%) of the women had drug related charges including possession, delivery, manufacturing, and conspiracy. Charges for the remaining women included theft, burglary, forgery, and aggravated robbery. Eight women (45%) had not been incarcerated previously, although seven of the eight had prior convictions. The reason for the current incarceration varied by race: None of the five white women had a drug charge, in contrast to all but one of the African American women.

Thirteen of the 18 women had more than one child. Three women had one other child; two had two other children; one had three other children; five had four other children; one had five other children and one woman had six other children. In addition to having an infant, two women had children eighteen years of age or older.

Only six of the 13 women with more than one child lived with at least one of their children prior to their incarceration. Excluding the children living with their mothers at the House, the women had 39 minor children among them. Only 18 of these children lived with their mothers prior to the mother's incarceration. Most lived with relatives, and several were in foster care.

The Program

Residents and staff viewed most of the House’s programs and services for mothers and their babies very positively. Many residents questioned, however, the need for parenting and life skills courses.

Some mothers thought that since they already had kids, they knew what to expect and how to be a responsible parent. This was the case, even when they had been on drugs for years and had not been taking care of their children prior to incarceration.

"I don't feel I need the parenting classes. I already have ---- kids."
"The parenting classes are not very helpful and I don't need them. I'm not learning anything from them. Our classes are videos, a staff member answering questions, and then we do a written assignment based on the videos."

"I've learned a few new things from the parenting classes; however, I have other children and know most of the content already."
“Although the life skills staff are good, the classes are not very useful – just day to day living stuff.”

In contrast were the women who acknowledged that drug use and other improper behavior may have altered their understanding of, and ability to function in, socially acceptable ways.

“I think all of the programs are helpful. I had been getting high for eight years and had not been living a normal life……so all of the programs help me because I need to go back over what I’ve forgotten.”

"All the programs and services have been a blessing to me."

The program promoted the development of strong bonds between mothers and their babies. Mothers received limited support, however, in maintaining relationships with their other children.

Mothers were exposed to many opportunities for learning how to better protect and provide care for their babies. In addition to formal parenting classes, staff also modeled appropriate parenting behavior. The House had expectations that each mother care for her own baby, and rules governing infant care and safety were strictly enforced. Both staff and residents agreed that the babies benefitted from being able to stay with their mothers and that the babies got lots of attention.

Some policies interfered, however, with mother-infant bonding. First, babies experienced several changes in their primary caregivers. They were separated from their mothers right after birth, when the mothers were returned to prison prior to a formal transfer to the House. Then they were reunited with their mothers. For the women who were returned to prison from the House—almost one-third of women in the study—a third change occurred in the infant’s primary caregiver.

Mothers experienced difficulties in maintaining ties with children not residing at the House. Mothers were not allowed to have any contact with their other children during the first several weeks at the House. Thereafter, most visits were essentially therapy sessions with counselors, and mothers and children were unable to interact naturally. Only limited contact with their other children via telephone or visits was allowed. Several restrictions, including length of visits, number of children allowed to visit, and purpose of visit, were placed on contacts.

Restrictions around family contact were problematic. The following comments are illustrative:

“There is a lack of understanding on the part of staff... you can't see your family although you can see them during therapy.”

“A visit lasts only one hour. My kids live in (town far away) with my mom and it is not worth it to come here and bring one child for one hour so the counselor can work with us.”

“I think that canceling planned events that includes your family because of staff shortages is wrong. And the process is too slow. The restrictions on contact with other children for 30 days for new people is enough.”

An underlying tension existed between social services and corrections objectives. Despite a services orientation, many residents and staff perceived the House environment as punitive.

Agency policies, staff selection and training, and the extensive service program demonstrated a commitment to running a strong service program that adhered to corrections safety and security regulations. The enforcement focus, however, was paramount. Several individuals indicated that some staff went overboard with the rules and were
inappropriately strict, which “set up” residents for failure. One resident volunteered that “tickets” were needed when residents did not carry out chores as required, but then added that often “tickets are given for silly things.”

Frequent visits from corrections staff made to assure compliance with different codes and reporting requirements, and tours by corrections leadership, reaffirmed the program’s connection to prisons. However, the visits also reinforced the “punishment” purpose of the setting. One staff member referred to a visit by corrections dignitaries as “very militaristic.” In contrast, the visibility of the parent social service agency was negligible. Those administrators seldom visited the House and did not sponsor other activities to underscore the House’s connections with a larger, social services purpose.

Residents, and some staff, saw the rites-of-passage model as one in which privileges were withheld as a form of punishment, although the model was designed to recognize achievement with more privileges at higher levels. In addition, sometimes the House did not provide certain services or privileges when there were not enough women at a given phase to make the activity feasible. These problems prevented mothers from advancing from one phase to another or prevented them from accessing or using a privilege they had earned. When these problems occurred, residents felt deceived, frustrated, and powerless.

Inadequate staffing and lack of sufficient coverage during different shifts led to the cancellation of events and activities and created the need to curtail or restrict movement of the residents. Although not the intent, these were perceived by the residents as punishment and viewed as one more instance where the residents met their end of the bargain, but the agency did not follow through.

Finally, the House was more restrictive and demanding than traditional prison facilities. Some residents spoke of the restrictions on family visits and use of the telephone. Others talked about program schedules and routines that they felt were too rigorous, too demanding, and somewhat unrealistic. Caring for an infant also presented demands that were not a typical part of prison routine. Unlike prison where a woman was responsible only for herself, at the House she had to also provide 24-hour care for her newborn infant. Unlike providing care for an infant in one’s own home, the demands of infant care had to be handled within the context of a routinized schedule that covered dining, cleaning, sleeping and house meetings, in addition to parenting classes and various support groups.

The Outcomes

One third of the women did not complete the program. Recidivism was low, however, among those who finished.

Twelve of the 35 women who had resided at the House did not complete the program. Corrections officials transferred two mothers to an electronic monitoring program, which allowed them to complete their sentences while residing in their own homes and sent ten mothers back to prison. Two women were returned to prison because their families did not bring their babies to the House and one individual was returned as she had an outstanding warrant and had been inappropriately sent to the House; one individual experienced mental health problems while in the program. Three individuals were returned for unauthorized use of the computer and three for other rule violations.

Ten women had successfully completed the program and were released from prison at the time of the study. Only one completer had been re-incarcerated.

Policy and Program Implications

The House’s experiences indicate that a safe community environment can be provided for incarcerated mothers and their babies. Many criminally-involved women can take responsibility for the well-being and care of their
babies while developing skills and knowledge that help them remain in the community once their prison terms are completed. Similar community-based alternatives to prison incarceration for mothers and their infants should continue to be implemented and, just as importantly, evaluated. Program elements that most contribute to successful community reintegration should be enhanced, while those that detract from program success should be altered or, when possible, eliminated.

Although the current evaluation was unable to isolate specific areas of programming and staffing that led to successful outcomes for participants, several factors appeared to contribute to dissatisfaction or negative outcomes for residents. First, programs that serve prisoners and their children must make good on promises in order to achieve credibility and generate trust. This is particularly crucial in a correctional setting wherein traditionally certain privileges are withheld as a form of punishment. A program model such as rites-of-passage, which is based on giving privileges and rewards, should be used only if there are adequate resources and training to support the model.

Transfer policies which result in numerous changes in caregivers for infants may be efficient and effective for correctional purposes, but child development research indicates that numerous changes in primary care givers can be detrimental to the childrens’ development. Similarly, programs that place unnecessary restrictions on contact with other family members may lead to the permanent severance of a mother’s relationship with her other children. Administrators responsible for designing the policies and procedures governing community alternatives for incarcerated women and their children must, therefore, consider both safety and security needs and the best interests of the mothers’ children.

Resources


