



INSTITUTE ON WOMEN
& CRIMINAL JUSTICE

Mothers, Infants and Imprisonment

**A National Look at Prison Nurseries
and Community-Based Alternatives**

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ABOUT WPA

The Women's Prison Association is a service and advocacy organization committed to helping women with criminal justice histories realize new possibilities for themselves and their families. Our services make it possible for women to obtain work, housing, and health care; to rebuild their families; and to participate fully in civic life. Through the Institute on Women & Criminal Justice, WPA pursues a rigorous policy, advocacy, and research agenda to bring new perspectives to public debates on women and criminal justice.

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GENERAL NOTE

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TABLE OF CONTENTS

Executive Summary	4
Introduction	8
Characteristics of Prison Nursery Programs	9
Program Spotlight – Washington Correctional Center for Women	11
Characteristics of Community-Based Residential Parenting Programs	12
Program Spotlight – Lovelady Center, Birmingham, AL	13
Program Spotlight – Federal Bureau of Prisons MINT Program	14
Standards and Accreditation	15
Research	15
Recommendations	24
Appendix I - Prison Facilities with Nursery Programs	27
Appendix II - Community Based Residential Parenting Programs	30
Appendix III - Jails with Nursery Programs	33
Appendix IV – Federal Bureau of Prisons	34
Appendix V – An International Look at Mothers & Children in Prison	35
Endnotes	38

EXECUTIVE SUMMARY

“Are there really *babies in prison?*”

At the Women’s Prison Association (WPA), hardly a week passes without us receiving an inquiry to this effect. Not surprisingly, the image of babies – cute, joyful, innocent – residing in our popular culture’s image of prisons – harsh, scary, full of “offenders” – arouses a great deal of curiosity. People who contact us want to know: What happens when a woman has a baby in prison? Which states have prison nursery programs? And are they a good thing?

In this report, WPA highlights two different responses to women who give birth while under criminal justice supervision: prison nurseries and community-based residential parenting programs. We provide an overview of both types of programs¹, review the literature on the subject, and offer recommendations for policymakers, practitioners, and researchers.

Between 1977 and 2007, the number of women in prison in the United States increased by 832 percent.² According to data released by the Bureau of Justice Statistics (BJS), in 2004 four percent of women in state prisons and three percent of women in federal prisons were pregnant at the time of admittance.³ In 1999, BJS reported that six percent of women in local jails were pregnant at the time of admittance.⁴ As the number of women in prison has skyrocketed over the past 30 years, states have had to consider what it means to lock up women, many of whom are pregnant or parenting.

Child development experts, academics and policy makers debate what is best for mothers and children when a mother gives birth while under criminal justice supervision. There is no national policy that dictates what happens to children born to mothers who are under correctional supervision. The overwhelming majority of children born to incarcerated mothers are separated from their mothers immediately after birth and placed with relatives or into foster care. In a handful of states, women have other options: prison nurseries and community-based residential parenting programs.

Prison nursery programs allow a mother to parent her infant for a finite period of time within a special housing unit at the prison. Community-based residential parenting programs allow mothers to keep their infants with them while they fulfill their sentences in residential programs in the community.

The profile of women accepted into these two types of programs is nearly identical. They have committed low-level non-violent offenses, face relatively short sentences and will continue as their child(ren)'s primary caregiver upon release.

WPA interviewed officials at existing or soon-to-open prison nursery programs in nine states: **California, Illinois, Indiana, Ohio, Nebraska, New York, South Dakota, Washington, and West Virginia.**

We also spoke with representatives from community-based residential parenting programs in **Alabama, California, Connecticut, Illinois, North Carolina, Massachusetts, and Vermont.** In addition, we interviewed Federal Bureau of Prisons officials at their residential parenting programs in Connecticut, Florida, Illinois, Texas, and West Virginia.

Findings

The number of prison-based nursery programs is growing, but such programs are still rare.

- Though every state has seen a dramatic rise in its women's prison population over the past three decades, only nine states have prison nursery programs in operation or under development.
- All of the current prison nursery programs, with the exception of the program at Bedford Hills Correctional Facility in New York, have opened within the last 20 years.
- Of the nine prison nursery programs existing or in development, four were created within the last five years.

Research shows that these programs benefit mothers and children.

- When adequate resources are available for prison nursery programs, women who participate show lower rates of recidivism, and their children show no adverse affects as a result of their participation.
- By keeping mothers and infants together, these programs prevent foster care placement and allow for the formation of maternal/child bonds during a critical period of infant development.

Many women parenting their infants in prison nurseries could be doing so in the community instead.

- The profile of women in prison nurseries is nearly identical to that of participants in community-based programs. Women in both types of programs are serving relatively short sentences for non-violent offenses, and will continue primary caretaking responsibility for their child(ren) upon release.
- Most women in prison nursery programs present little risk to public safety. The issues that bring most women in contact with the criminal justice system – drug addiction, lack of education, poverty – are better addressed in a community setting than in prison.

Recommendations

Informed by interviews with 25 experts across the country and our review of available research on the topic, we offer the following recommendations:

Increase use of community corrections and reduce reliance on incarceration.

- Whenever possible, custodial parents and pregnant women under criminal justice supervision should be housed in community-based, non-incarcerative settings.
- Community corrections programs have been shown to protect public safety and reduce recidivism at a fraction of the human and economic costs of prison.

Enhance program features that promote overall family wellbeing in prison nurseries and community-based residential parenting programs.

- On the whole, prison nurseries and community-based residential parenting programs could better reflect the range of women’s family needs, which often include children born prior to the mothers’ current sentence.
- Programs should operate according to prevailing community child health and development standards.
- Mothers should be able to access educational and vocational services while participating in a mother-child program, as they will be expected to serve as both mothers and employees after their release.

Fund scientific research, participatory action research, and program evaluations of prison nurseries and community-based residential parenting programs to reveal best practices and the potential benefits of system reforms.

- There have been very few evaluations and scientific research studies conducted of prison nursery programs and even fewer of community-based mother-child programs.
- Through research, best practices and needed reforms can be identified and implemented.

INTRODUCTION

Between 1977 and 2007, the number of women in prison in the United States increased by 832 percent.⁵ According to data released by the Bureau of Justice Statistics (BJS), in 2004 four percent of women in state prisons and three percent of women in federal prisons were pregnant at the time of admittance.⁶ In 1999, BJS reported that six percent of women in local jails were pregnant at the time of admittance.⁷ As the number of women incarcerated each year increases, it stands to reason that the number of women who enter pregnant and deliver a child while in custody will increase as well.

Child development experts, academics and policy makers debate what is best for mothers and children when a mother is under criminal justice supervision. There is no national policy that dictates what happens to children born to mothers who are under correctional supervision. The overwhelming majority of children born to incarcerated mothers are separated from their mother immediately after birth and placed with relatives or into foster care.

Up to the 1950s, prison based nursery programs for children born in custody were common in correctional facilities across the country. By the early 1970s every state, except New York, had closed their nursery programs. Costs and lack of need, along with the fact that most babies could be placed with family members, were cited as reasons for the closures.⁸ Now, with more women being incarcerated than ever before – and a growing recognition of the importance of the family bond to both maternal and child success – several states are taking steps to keep mothers and infants together.

For this brief, the term, prison nursery is defined as a program that allows a child born to an incarcerated woman to remain in the care of its mother for a finite amount of time within a correctional facility. The term, community-based residential parenting program, is used to describe a program where a child is allowed to reside with its mother in a community-based residence where the mother is serving her sentence.

The rationale for investing in prison nurseries and community-based residential parenting programs rests upon evidence that early mother-child bonding results in positive future outcomes for both mother and child. Research published by the American Psychological Society found that infants who bond securely with their mothers become more self-reliant and have

higher self-esteem as toddlers. Later in life, this translates into successful peer relationships and the ability to better cope with life stressors.⁹ Allowing infants and young children to stay with their incarcerated mothers may also improve outcomes for the mothers. According to a report by New York State Department of Correctional Services, when a person has strong ties to their family during incarceration they have a much lower risk of recidivism than those who lack those strong ties.¹⁰

Critics of these parenting programs argue that prison is not an appropriate environment for children and that living in prison may have harmful effects on the child later in life. Others have expressed the view that women who have broken the law are unable or unwilling to be mothers to their children and therefore should not have the privilege of parenting.¹¹

CHARACTERISTICS OF PRISON NURSERY PROGRAMS

Prison nurseries are a reemerging trend within correctional facilities. Most of the programs identified in this brief were developed within the last ten to fifteen years, during a time when the female prison population has increased sharply. The exception is the nursery at Bedford Hills Correctional Facility of New York, originally opened in 1901, making it the oldest in the country. This program has served as a model for many of the other prison nursery programs.

There are currently seven states that allow women who are pregnant at the time of sentencing to keep their infants with them inside a correctional facility after the baby's birth: Illinois, Indiana, Ohio, Nebraska, New York, South Dakota, and Washington. Two other states, California and West Virginia, are in the process of creating prison nursery programs. Our research found only one jail in the nation that has a prison nursery, Rikers Island in New York City (Appendix III).

Many similarities exist among programs. All states with prison nursery programs consider applications only when the child is born in state custody. As a general rule, the mother must not have been convicted of a violent crime or have a past history of child abuse or neglect. Often, mothers are required to sign waivers releasing the facility from any responsibility if their children become sick or injured. The stated purpose of these nursery programs is to facilitate bonding between mothers and their children. As a result, in most facilities, the duration of the child's stay and participation in the program is dependent upon the length of the mother's sentence.

The maximum allowable duration of a child's stay varies between the different facilities. At the South Dakota Women's Prison, infants are only permitted to stay for 30 days. In contrast, the Washington Correctional Center for Women allows children to stay with their incarcerated mothers for up to three years. The average maximum allowable length of stay for a child at most facilities is between 12 to 18 months.

The capacities of prison nursery programs differ considerably. The Decatur Correctional Center in Illinois, started in 2007, has space for five mother/child pairs. Bedford Hills Correctional Facility in New York, on the other hand, has the largest program in the nation with the capacity for 29 mother/child pairs. The manner in which mothers and children are housed is determined by each individual facility. In most facilities, the nursery program is in a wing or unit of the prison separated from the general population.

All of the prison-based programs provide educational programming in child development and parenting skills. Several facilities have structured their programs modeled on the prison nursery at Bedford Hills Correctional Facility in New York. In addition to the nursery, the Children's Center at Bedford Hills offers a parenting center, prenatal center, infant day care center, and a child advocacy office.¹² Through these programs, incarcerated mothers are able to participate in support groups, gain support and information about breastfeeding and learn about infant growth and development. Bedford Hills is also dedicated to supporting the mother-child bonds for women who do not participate in the nursery program. The visiting room at Bedford Hills has a special children's area where mothers can read to their children and play games. During the summer, a camp is held where children with incarcerated mothers stay with local host families at night and spend the day at the prison participating in activities with their mothers.

In addition to parenting and child development classes, the Nebraska Correctional Center for Women requires all women in the nursery who do not have a high school diploma to attend GED courses.¹³ The Washington Correctional Center for Women, due to the extended period (up to three years) a child is allowed to stay at the facility, offers Early HeadStart to all of the children who reside with their incarcerated mothers.

Program descriptions of current prison nursery programs can be found in Appendix I (Rikers Island jail program is located in Appendix III).

Residential Parenting Program at Washington Correctional Center for Women Gig Harbor, WA

In 1999, the Washington Correctional Center for Women opened the Residential Parenting Program (RPP) for pregnant women incarcerated within the facility. To qualify for this nursery program, pregnant women must be classified as minimum security, convicted of non-violent offenses and eligible for release within three years of giving birth. The RPP allows children, born in the facility, to stay with their mothers for up to 36 months, longer than any other facility in the country.

RPP participants live in “J Unit,” a housing area that is separate from the general population. Each mother has her own room with an adult bed and an infant crib or toddler bed. In the mother-child wing, a playroom, bathing and diaper changing room, and kitchenette are provided for the residents. There is also a large outside play area. A pediatrician visits the facility once a month to monitor the children’s growth and to administer check-ups and vaccines.

To meet the developmental and educational needs of the toddlers who reside at the RPP, the Washington Correctional Center for Women has implemented an Early Head Start program through a partnership with the Puget Sound Educational Service District. The Child Development Center, located on the Correctional Center’s grounds, is staffed by Early Head Start Educators, including one position designated for an incarcerated woman.

Through Early Head Start, incarcerated mothers and their children receive developmental screenings and assessments, infant/toddler care and activities, nutritious meals and family support. Services such as prenatal education, information about infant health and development, screening for maternal depression are provided to the pregnant women and newborns living on J Unit. This is the only correctional facility in the country that provides Early Head Start services on-site for its residing mothers and children.

Also unique to the Washington Correctional Center for Women is the use of doula services for pregnant women. A doula is a woman who is knowledgeable about childbirth and assists a woman throughout the duration of labor, childbirth and directly post-partum. Doula services are provided by the Birth Attendants’ Prison Doula Project, a community-based organization located in Olympia, Washington. In addition to providing assistance during labor, doulas hold parenting classes within the facility and help pregnant women to create an individualized childbirth plan.

For more information: www.residentialparenting.com and www.birthattendants.org

CHARACTERISTICS OF COMMUNITY-BASED RESIDENTIAL PARENTING PROGRAMS

Community-based residential parenting (CBRP) programs divert pregnant women (and in some cases, mothers of young children) from prison, offering an opportunity to serve out court-imposed sentences in the community. Many of the programs are designed for women who have histories of substance abuse and provide drug treatment alongside parenting support. These programs are utilized at varying stages of criminal justice involvement, from pre-trial through the duration of a sentence, as a condition of parole or as a requirement for probation.

CBRP programs are different from prison nurseries in several key respects. CBRP programs are not located inside correctional facilities. Often, these programs are operated by non-profit organizations that partner, or are in contract, with local departments of corrections to provide supervision, housing and social services in a community setting. Women sentenced to CBRP programs are usually allowed to gain approval to leave the facilities to attend doctors' appointments, social service appointments or other programs in the community. The facility settings are often home-like with mother and child sharing a private bedroom.

Like prison nursery programs, the purpose of community-based programs is to promote bonding between mother and child. Unlike prison nurseries, the children who participate in CBRP programs are not necessarily born in custody; mothers are often allowed to bring their small children with them into the program. Most CBRP programs allow children to stay with their mothers until they reach school age. The duration of the child's stay is often tied to the length of the mother's sentence.

Examples of Community-Based Residential Parenting Programs can be found in Appendix II.

Lovelady Center – Birmingham, AL

Located in an old hospital, the Lovelady Center opened in 2005 to address the needs of women coming home from prison and to create an alternative to incarceration for the women of Alabama. The Lovelady Center is the only residential program in the state of Alabama where criminal justice-involved women can live with their children. Women at the Center participate in a comprehensive 9 to 12 month faith-based program that aims to prepare them to succeed in the community.

Women may be sentenced to reside at the Lovelady Center by a judge as an alternative to incarceration. Other women are required to reside there as a condition of their probation or parole, or as the result of parole/probation violation. In 2007, the Lovelady Center implemented a Supervised Reentry Program where women from Tutwiler Prison who are 12 to 18 months from release can be transferred to the Center to receive education and job training services. Spaces are also available for women who volunteer themselves for substance abuse treatment.

The Lovelady Center is a state-certified substance abuse treatment center and a certified co-secondary educational center, making it possible for the Center to provide a wide-range of services in-house. The Center also provides job-readiness and training services and through relationships with local employers has been able to successfully place its graduates in a variety of stable jobs. Twenty-four hour transportation is provided to the women who are working while residing at the Center.

Those working towards reunification with their children or who already have custody of their children must participate in parenting classes. The Center has the capacity to accommodate approximately 150 children at a time. Services for the children at the Center include summer camps, bible school and day care. For the older children a “Teen Scene” center was recently created. Staff members’ children are also allowed to participate in these programs. There is no age limit for children residing at the Center, though boys over 14 years of age are only allowed under certain circumstances and have restricted access to the grounds.

For more information: www.loveladycenter.org

Federal Bureau of Prisons' Mothers and Infants Nurturing Together Program

In the mid-1980s, the Bureau of Prisons established Mother and Infant Nurturing Together (MINT), a residential program for women who are pregnant when they enter the federal prison system. Like other prison-based nursery programs, the purpose of the MINT program is to promote bonding and provide parenting skills to women who will have custody of their children after they are released. In order to participate in this program the mother must make prior arrangements for the custody of her child while she serves out the remainder of her sentence. If the mother is planning to put the child up for adoption or into foster care, she is not eligible to participate. Women who become pregnant while on furlough are also ineligible for the MINT program.

Participation eligibility is determined by a number of factors including the mother's public safety risk level, her mental and physical health, and her behavior at the federal facility prior to being awarded the transfer. The program was originally designed for women who had five years or less left of their sentence after participating in the program, though several facilities reported women with longer sentences participating.

A couple of months prior to giving birth, a participating woman is transferred to a community-based facility that contracts with the Federal Bureau of Prisons to operate a MINT program. Currently there are seven facilities that hold MINT contracts. Generally, women stay with their infants at the MINT facility for three months, however a couple of the facilities allow a longer stay. Once a mother and infant finish the program, the child is released to the agreed-upon caretaker in the community and the mother is returned to her original federal facility. If she is towards the end of her sentence, she may be transferred to a halfway house closer to where she and the child will ultimately live.

A directory of MINT program facilities can be found in Appendix IV.

STANDARDS AND ACCREDITATION

Regulatory agencies, such as the American Correctional Association (ACA) and the National Commission on Correctional Health Care (NCCHC), publish standards and offer accreditation for correctional institutions.

NCCHC standards state that women should receive pregnancy-related counseling and appropriate prenatal care.¹⁴ ACA's mandatory pregnancy management standards include pregnancy testing, routine and high-risk prenatal care, management of chemically addicted pregnant women, comprehensive counseling and assistance, appropriate nutrition and postpartum follow-up.¹⁵ Neither agency has accredited or issued standards in relation to the health care or housing needs for infants residing in correctional institutions.

There are no national standards for the treatment of pregnant women under criminal justice supervision. The need for such standards is often cited in policy debates over the shackling pregnant women during labor and delivery. Only three states, California, Illinois and Vermont, restrict the use of shackles on pregnant women during transportation, labor and delivery. The Federal Bureau of Prisons has also banned the use of shackles on pregnant women under federal custody, with exceptions for extreme circumstances.¹⁶

RESEARCH

The primary goal of most prison nursery programs is to promote bonding between mothers and children while giving mothers tools to become better parents. A secondary goal is to reduce recidivism among incarcerated mothers by encouraging them to make lifestyle changes following release. Though the number of prison nursery and community-based residential parenting programs has increased steadily over the last ten years, little research has been conducted on the impact of these programs. The following is a summary of relevant reports, studies, and evaluations that have been conducted on the topic of prison or community-based residential programs.

Program Evaluations

Nebraska Correctional Center for Women¹⁷

The Nebraska Correctional Center for Women opened its nursery program in 1994 and has released a two-year and five-year program evaluation; a third study is to be released in the summer of 2009. These evaluations, performed with the assistance of Ryan Associates and the University of Nebraska, provide the most extensive data currently available on the outcomes of a prison nursery program. At the time of the five-year evaluation, 44 infants by 43 mothers had participated in the nursery program. Of the 43 mothers, seven women were involuntarily removed from the program and six women voluntarily sent their infants home. The main reason women gave for voluntarily leaving the programs was a desire to participate in work release, as infants are not accommodated at the work release unit.

Positive outcomes for mothers were seen in both behavioral conduct during incarceration and in recidivism rates. The two-year evaluation reported a 13% reduction in the number of misconduct reports for the women after they were moved into the nursery program from the general population. In subsequent years, due to prison crowding, women who enter the facility pregnant and are eligible for the nursery program are placed immediately in the nursery and do not live in general population, making it impossible to track their misconduct reports prior to entering the nursery. Women in the nursery program are randomly urine tested for drugs. No women have ever tested positive for drug use while participating in the nursery program.

In Nebraska, recidivism is defined as returning to confinement for a new crime within three years of being released. The recidivism rate was 33.3 percent for women who gave birth in custody and were immediately separated from their child in the five-year period prior to the opening of the nursery. The recidivism rate for women who have gone through the nursery program was at nine percent at the five-year evaluation. (It stands to reason that these numbers may increase since some women had not been released for a full three years at the time of the study.)

A voluntary survey of women's experiences was conducted with 86 percent of participants responding.¹⁸ The survey results show that the nursery program was viewed as a very positive experience by an overwhelming number of mothers. In summary:

- Ninety-five percent of respondents felt they had a stronger bond with their children as a result of the nursery program;
- Forty-nine percent felt they had higher self-confidence and esteem due to the program;

- Ninety-five percent felt that the parenting classes helped and should be required and said if given the option would participate again;
- All respondents thought other states should have similar nursery programs;
- When the five-year evaluation was conducted 57 percent of the mothers had retained custody of their children and 27 percent had not. (The remainder could not be located.)

Ohio Reformatory for Women¹⁹

The Ohio Reformatory for Women, which opened its nursery program in 2001, had 118 mothers and infants participate in its first five years. Ohio officials report that only about three percent of women who participated in the nursery program recidivated within three years. The overall recidivism rate in Ohio, for men and women, is 38 percent. No statistics are available for the recidivism rate of women who gave birth in state custody and were separated from their children prior to the implementation of the nursery program. The program does not track the outcomes of mothers or children after release.

New York State Department of Correctional Services²⁰

In 2002, the New York State Department of Correctional Services (DOCS) released a three year follow-up study of women who participated in the nursery programs at Bedford Hills Correctional Facility and Taconic Correctional Facility in 1997 and 1998. One hundred and seventy-nine mothers, (118 at Bedford and 61 at Taconic) participated in the nursery programs during this time period. Sixty-six percent of all participants were incarcerated for drug offenses and of those 52 percent of the offenses were drug sales.

At the time of the DOCS report, 162 of the mother/child pairs had been released. Of those a random sample of 45 mother/child pairs were selected to determine the current living situation of the child born in custody; information on the child's living placement was found for 37 of those selected. The majority of the children, 62 percent, were living with their mothers. Another 30 percent were living with a relative, usually a grandmother. Two children were reported as being placed in foster care and two children were residing with their fathers. No data is available on the living situations of children born to mothers who did not participate in the nursery program, or on the other children a nursery program participant may have had prior to incarceration.

The DOCS report showed a lower recidivism rate for women who participated in the nursery program as compared to the general female prison population in New York State. At the time of

the report, 82 mothers had been released from custody for at least three years. Of those 13.4 percent returned to custody (11 women), compared to 25.9 percent of all women under DOCS custody who returned. Parole violations were the primary reason for women to be readmitted (73 percent). Three women, or 27 percent, were readmitted for new crimes, two of which were drug related.

A Needs Assessment of Children's Access to Quality Health Care while Living with their Incarcerated Mothers at Mother-Child Prison Programs in California²¹

In response to concerns about children's access to health care in community-based residential parenting programs, the Legal Services for Prisoners with Children in conjunction with Masters of Public Health students from San Francisco State University performed a needs assessment of children residing with their incarcerated mothers at the California Community Mother Prison Program (CMPP) and at the Family Foundation Program (FFP). The research team looked specifically at the CMPP in Oakland and the FFP in San Diego.

The needs assessment documented women's experiences accessing health care for their children, barriers to accessing health care and the policies and practices regarding how children accessed health care. The research team used key informant interviews, surveys and one-on-one in depth interviews to assess children's access to quality health care while residing at these mother-child programs.

The findings indicated that children's overall health and access to health care was negatively impacted by residing in at these programs. The factors leading to this conclusion include:

- Staff with no medical training were making decisions regarding children's health care; no nurses or other designated person were on staff for mothers to speak with regarding their child's health.
- Mothers' concerns were not always taken seriously when they sought medical attention for their children, resulting in significant delays in receiving health care.
- The programs lacked a uniform policy-making body to set minimum standards and, thus have no set standards or guidelines for access to routine medical care.

The study's authors address possible biases and limitations of their findings. In particular the authors note that a *New York Times* article on reports of abuse and neglect at a California mother-child program may have influenced the women's responses and reflections of the

programs. Further, program participants self-selected to be involved with the assessment. Not all mothers had negative reactions to the programs and most felt fortunate to have the opportunity to maintain custody and guardianship of their children. The assessment concludes with a number of recommendations to improve children's access to quality health care in residential mother-child programs.

Serving Incarcerated Mothers and their Infants in Community-Based Residences²²

Researchers from the University of Illinois at Chicago conducted an evaluation of The House, a residential program for criminal justice-involved pregnant and parenting women operated by a community social service agency in contract with the state Corrections Department. The researchers conducted one-on-one interviews with staff members and program participants, observed House operations and examined participant case records in order to assess the impact the program had on residents.

The House has a capacity to house up to 10 mothers and their infants. To be eligible for placement in this program a woman must be pregnant at the time of her incarceration and give birth while in prison, have the consent of a stand-by guardian for her child, meet the work release requirements of the Corrections Department, be within two years of mandatory supervised release, and have not been convicted of a violent offense. The House uses a four-phase rites-of-passage model where responsibilities and privileges increase based on meeting pre-determined benchmarks.

Researchers found that most staff and residents viewed The House programs and services favorably, though some residents felt the parenting and life skills classes were unneeded (many of the residents were mothers prior to being in the program and expressed being familiar with the concepts presented). House residents also expressed frustration that while the program helped them to bond with their infants there was little to no support in building or maintaining relationships with their other children.

Residents and staff alike viewed The House environment as restrictive and punitive. The site had frequent visits from corrections officials, which reinforced the program's relationship to the prison for many of the residents. Restrictions placed on visits and phone calls were stricter than at the actual prison.

Twelve of the 35 women who had resided at the House during the research period did not complete the program. Of those 12, ten were sent back to prison for reasons such as a family member not bringing the woman's child to the program, unauthorized computer use by the resident and other rule violations. Of ten women tracked who had completed the program, only one was re-incarcerated.

The University of Illinois researchers concluded that overall it is possible to provide a safe community-based environment for criminal justice involved women and their infants and that the women in these programs are able to care for their own well-being as well as that of their children. The researchers recommend that community-based alternatives for criminal justice involved pregnant and parenting women should be implemented and continually evaluated.

Scientific Research

American Medical Association Scientific Session Report²³

The American Medical Association (AMA) released a scientific session report in 1997 that summarizes the research and literature available, at that time, on the feasibility of a bonding program for incarcerated mothers and their newborn children. Primarily, the AMA examined two pieces of research. The first is a 1992 study by researcher Dr. L. Catan of mother and child dyads with an experimental group of infants who resided in the prison nursery and a control group of infants who were placed with a social service agency or with extended relatives. The other study, conducted in 1990 by Busch-Rossnagel and colleagues, researched the cognitive and social-emotional attachment of 12 infants at the Bedford Hills Nursery Program in New York.

The Catan study found that the infants who resided in the prison nursery showed a strong and healthy attachment to their mothers. The Busch-Rossnagel study failed to show the same level of attachment, reporting that 50 percent of the infants seemed insecurely attached to their mothers. The Catan study followed the mother-child pairs three months after release from prison, while the Busch-Rossnagel contained no longitudinal evaluation.

Catan's study used the Griffith Mental Development Scale and found short-term detrimental development in infants who stayed in the nursery for four months or more. The deficits exhibited in motor, social and cognitive development disappeared soon after leaving the prison

environment. Busch-Rossenagel, which used the Bayley scale, reported that 33 percent of the infants in the nursery program were below the mean in overall development. Both studies cited these developmental delays were most likely due to a lack of education toys and stimulus for older children and not due the nursery itself.

Maternal and Child Outcomes of a Prison Nursery Program²⁴

A forthcoming study of mother-child dyads, conducted by principle investigator Mary W. Byrne, Ph.D. of Columbia University, is the first prospective and longitudinal study using established and standardized research methods to describe and measure the outcomes of prison nursery participants. This study is set at the Bedford Hills and Taconic Correctional Facilities from 2000 to 2008 and is comprised of three phases: a cross-sectional and exploratory sample of the Children's Center and the nursery program participants; a longitudinal sample of mothers and infants co-residing in the nursery program and community follow-up during reentry; and a comparison of mother-infant pairs who participated in the nursery program with similar mother-infant pairs who have not experienced incarceration (initiated in 2008).

The cross-sectional sample phase was conducted from 2000 to 2002 and included 58 mothers and their 60 infants (includes two sets of twins). Nursery participants and staff completed questionnaires and the incarcerated mothers were videotaped to observe both structured and unstructured interactions with their infants. Questionnaire results were compared against scores for low-risk community populations to establish both strengths and areas of concern for prison nursery participants.

The mothers reported themselves to be in good general health,²⁵ though they also reported higher than average prevalence of depression and emotional problems.²⁶ The observations showed that a high value was placed on the maternal role and strengths in sensitivity to infant cues.²⁷ Development screenings revealed the infants to be within normal ranges by age for physical growth and to be reaching milestones in gross and fine motor, social and language skills.²⁸

The principal investigator notes that forming bonds with other mothers is often difficult for mothers in the prison nursery program. Because the program is inside a correctional facility, the mothers are involuntarily together and are subjected to an atmosphere of observation, suspicion and discipline. Often these mothers face post-release conditions where contact between each

other is prohibited. These circumstances can foster negative isolation rather than positive socialization. The principle investigator highlighted this is an issue of concern as the women build their identities as mothers.

Findings from this phase of the research conclude that when needed resources are available, a prison nursery program can provide a positive environment that supports parenting and child development. These mostly positive findings contrast with the Catan study in the United Kingdom, detailed above, which reported that infants in mother-child units (prison nursery programs) were developmentally delayed compared to infants in the community.

The longitudinal phase of the study ran from 2003 to 2008 and included 97 mothers and their 100 children (this includes three sets of twins). The purpose of this phase of the study was to assess the long-term impacts of participating in a prison nursery program. The mother-infant pairs were also eligible to participate in the community follow-up phase to be implemented one year after release from the nursery. Focus was placed on measuring attachment, mother-child interaction and child development while continuing to collect measurements on depressive symptomatology, parent competency, and social supports. This phase included an intervention component as well, by having a nurse practitioner visit the participating mothers on a weekly basis.

An Adult Attachment Interview conducted with the mothers validated that, as a group, the women were at high-risk to not form secure attachment to their children due to their own childhood experiences. The findings from this phase of study have established, through use of the Stranger Situation Procedure and the Bayley Scale of Infant Development, that attachment between and mother and child can be achieved by participating in a prison nursery program. These findings are significant since promoting maternal attachment is a primary argument for the creation of prison nurseries. It is also of interest that mothers who participated in the prison nursery were likely to maintain custody of these children after release. At the one-year follow-up, the women also appear to have a lower recidivism rates than similar women in the community. A long-term study of reentry is also underway and all findings will be reported in peer-reviewed journal.²⁹

Jailed Pregnant Women and Birth Outcomes³⁰

In an article published in *American Jails* magazine, Marilyn Moses and Robert Potter summarize the results of four jail-based and two-prison based studies that examined the birth outcomes, measured by birth weight, of incarcerated pregnant women. While the studies reviewed do not look at residential programs and their impact on parental bonding, this article does give insight into some of the broader issues concerning the incarceration of pregnant women.

The arguments for and against detaining pregnant women are identified and discussed throughout the article. The authors point out that some argue that incarceration can be detrimental to an expectant mother, mainly due to the stress of incarceration and uncertainty about the mother and child's future. Others assert that detention or containment is in the best interest for the child since it will ensure that the mother is not being exposed to circumstances that can harm the child such as drug use, smoking or exposure to sexually transmitted infections (though these factors are indeed present in jail).

Although the six studies examined differed considerably on sample size and study design, the findings all suggest that there is correlation between criminal justice system involvement for the mother with healthy birth weights for the infant. The authors conclude "these finding should not be used to support the incarceration of criminally involved pregnant women for the sake of the unborn child" and that "justice system supervised community-based residential treatment is likely to be in the best interest of both mother and child."³¹

The collection of research presented illustrates that prison nurseries and community-based residential parenting programs are producing positive results in terms of mother/child bonding and lower recidivism rates among the mothers who participate. They also demonstrate the challenges of operating these types of programs, and the need for adequate funding of these programs. Researchers agree that additional longitudinal studies are needed to gauge the impact these programs have on the future development of the children and their relationships with their mothers.

RECOMMENDATIONS

Increase use of community corrections and reduce reliance on incarceration.

Whenever possible, custodial parents and pregnant women under criminal justice supervision should be housed in community-based, non-incarcerative settings. Community corrections programs have been shown to protect public safety and reduce recidivism at a fraction of the human and economic costs of prison.

Incarceration, especially the incarceration of mothers, breaks up families. In 2007, over 65,000 women in state and federal custody reported being mothers to minor children. Of those mothers 64 percent were the primary caregiver for their child(ren) prior to their incarceration.³² When these women are released they often resume the role of primary caregiver.

Community-based residential parenting programs can prevent mother-child separation while allowing mothers to address the issues that contributed to their criminal justice involvement in a real-world setting. These programs allow mothers to practice positive responses to the challenges of parenting and the challenges of everyday life. These programs also keep children out of foster care and provide children the stability of a consistent primary caregiver.

Enhance program features that promote overall family wellbeing in prison nurseries and community-based residential parenting programs.

On the whole, prison nurseries and community-based residential parenting programs could better reflect the range of women's family needs, which often include children born prior to the mothers' current sentence. Programs should operate according to prevailing community child health and development standards. Mothers should be able to access educational and vocational services while participating in a mother-child program, as they will be expected to serve as both mothers and employees after their release.

Many women who give birth under criminal justice supervision already have existing children. There is a need for residential mother-child programs that can accommodate children born prior to the mothers' criminal justice involvement. Children in both prison and community-based residential programs should be allowed visits with family members, so that they may get to know

the siblings, aunts, grandparents and other caretakers who will be in their lives when they go home.

Community and in-prison programs should include staff who are certified in early child development. Both prison nurseries and community-based residential parenting programs should adhere to widely accepted child health standards and guidelines, such as those set forth in the American Academy of Pediatrics and American Public Health Association's manual *Caring for our Children: National Health and Safety Performance Standards, Guidelines for Out-of-Home Childcare Programs*.³³

Family reunification should be a priority in women's discharge planning, and women should be educated about their rights and responsibilities as parents from the time they enter the facility. Participation in a mother-child program should not impede upon a mother's ability to take advantage of educational programming, vocational training, work release and other opportunities and services.

Fund scientific research, participatory action research, and program evaluations of prison nurseries and community-based residential parenting programs to reveal best practices and the potential benefits of system reforms.

There have been very few evaluations and scientific research studies conducted of prison nursery programs and even fewer of community-based mother-child programs. Through research best practices and potentially beneficial system reforms can be identified and implemented.

Participatory action research is needed to highlight the experiences of women who have been through mother-child programs in prison and in the community. Women who have given birth and parented while under criminal justice supervision should be involved in designing research, determining appropriate measures, gathering data, and analyzing the results.

Programs should be evaluated or reviewed regularly by outside independent sources and academic research should be encouraged. Programs should be formally evaluated on their methods and outcomes, with an emphasis on mother and child health conditions, mother's recidivism rate, and child custody post-incarceration.

Cross systems studies should be conducted that look at infants born in prison and their outcomes in key areas such as health and mental and physical development. Special care should be taken to ensure that such studies do not stigmatize the children who participate.

APPENDIX I

Prison Nursery Programs

California				
Facility	Started	Capacity	Duration of Child's Stay	Policy for Participation
California Institution for Women Corona	Scheduled to open September 2009	16 women – 10 with infants and 6 who are pregnant	Up to 18 months	The California Institute for Women is the only female facility in the state that has a Mother-Child Reunification Program . The final policies for participation in the nursery are still being drafted. After women spend up to 18 months in the nursery they will be transitioned onto parole or into a community-based program such as the Community Prison Mothers Program. In addition to the planned nursery, the facility runs a child-visiting program and mother-father mediation program. All pregnant women are placed in this institution and other women can request to be sentenced or transferred there.
Additional Information: http://www.cdcr.ca.gov/Visitors/Facilities/CIW.html				

Illinois				
Facility	Started	Capacity	Duration of Child's Stay	Policy for Participation
Decatur Correctional Center Decatur	2007	5 mother/infant pairs	Up to 24 months	To qualify for the Moms & Babies Program a woman must have committed a non-violent offense and be within two years of release after giving birth.
Additional Information: http://www.idoc.state.il.us/subsections/facilities/information.asp?instchoice=dct				

Indiana				
Facility	Started	Capacity	Duration of Child's Stay	Policy for Participation
Indiana Women's Prison Indianapolis	2008	10 mother/infant pairs and 4 nannies	Up to 18 months	To participate in the Wee Ones Nursery Program the child must be born in custody and the mother must be eligible for release by the time the child is 18 months old. Mothers and nannies who have been convicted of child abuse or a violent crime are not eligible to participate in the nursery.
Additional Information: http://www.in.gov/indcorrection/facility/iwp/general.htm				

Ohio				
Facility	Started	Capacity	Duration of Child's Stay	Policy for Participation
Ohio Reformatory for Women Marysville	2001	20 mothers and up to 21 infants	Up to 18 months	To qualify for the Achieving Baby Care Success Program women must give birth while in state custody and can not have a violent criminal record. Women must attend family training courses, adhere to rules and be in good mental and physical condition. Only women who are serving a sentence of 18 months or less at the time of delivery are eligible.
Additional Information: http://www.drc.state.oh.us/Public/orw.htm				

Nebraska				
Facility	Started	Capacity	Duration of Child's Stay	Policy for Participation
Nebraska Correctional Center for Women York	1994	15 mother/infant pairs	18 months; can be extended at staff discretion	To participate in the nursery the mother must give birth while in state custody and not have a violent criminal record. She also should not have any serious mental health concerns. A screening committee reviews each case before women are placed in the nursery. The mother must be able to complete her sentence by the time the child is 18 months old to be eligible.
Additional Information: http://www.corrections.state.ne.us/institutions/nccw.html				

New York				
Facility	Started	Capacity	Duration of Child's Stay	Policy for Participation
Bedford Hills Correctional Facility Bedford Hills	1901	29 mother/infant pairs	The child can stay for up to 18 months if the mother will be paroled by then, otherwise the child must leave the facility at 12 months of age.	Several aspects of a woman's past are examined before she can participate in the nursery. This includes determining who is going to have custody of the child, if the mother has a history of involvement with the child-welfare system, the length of her sentence, past episodes of incarceration, and the nature of her crime. Women who have committed arson or who have a history of child abuse are not eligible for the nursery. A woman must give birth while in custody to qualify for the program.
Taconic Correctional Facility Bedford Hills	1990	15 mother/infant pairs	12 - 18 months depending on the mothers program.	
Additional Information: http://www.docs.state.ny.us/docs.html				

South Dakota				
Facility	Started	Capacity	Duration of Child's Stay	Policy for Participation
South Dakota Women's Prison Pierre	1998	No limit	30 Days	Women who give birth while in custody are allowed to participate in the program as long as the mother's crime was non-violent in nature. All expenses related to the baby's care are the responsibility of the mother, including health care expenses. Mothers keep their infants in their cells. Other women at the facility are able to take classes to become babysitters and the mothers are able to choose who they would like to act as their babysitter.
Additional Information: http://www.state.sd.us/corrections/womens.htm				

Washington				
Facility	Started	Capacity	Duration of Child's Stay	Policy for Participation
Washington Correctional Center for Women Gig Harbor	1999	20 mother/infant pairs	Up to 36 months	To qualify for the Residential Parenting Program* the mother's sentence must be completed within three years of giving birth. The women must also be classified as minimum custody and be convicted of a non-violent offense.
Additional Information: http://www.residentialparenting.com/index.htm				

* The Washington State Correctional Center for Women refers to their program as a Residential Parenting Program – for the purpose of this brief it is considered a Prison Nursery Program

West Virginia				
Facility	Started	Capacity	Duration of Child's Stay	Policy for Participation
Lakin Correctional Center for Women* West Columbia	Opening July 1, 2009	5 mother/infant pairs	Up to 18 months	The KIDS (Keeping Infant Development Successful) Unit will be available to pregnant women who are within 18 months of release or parole. The nursery is made up of modular homes located outside the prison's perimeter fence. To participate in the nursery the mother must not have been convicted of a sex crime or a crime against a child and must be free of disciplinary write-ups.
Additional Information: http://www.wvdoc.com/wvdoc/PrisonsandFacilities/LakinCorrectionalCenter/tabid/50/Default.aspx				

*This program is still in the planning stages. The timeline for implementation may change as well as other program elements.

APPENDIX II

Community-Based Residential Parenting Programs

Alabama				
Facility/ Location	Started	Capacity	Duration of Child's Stay	Policy for Participation
Lovelady Center Birmingham	Originally started in 1997 and expanded greatly in 2005	Currently 300 women and 100 children in the residential program	No limit on the child's age; women participate in a 6 – 12 month program	The Lovelady Center is a community-based program that serves as an alternative to incarceration, as a residence for those on parole or probation and as a pre-release program. The policies for participation vary based on each woman's circumstance.
Additional Information: www.loveladycenter.org				

California				
Facility/ Location	Started	Capacity	Duration of Child's Stay	Policy for Participation
Community Prison Mother Program				A woman must first be housed in a state prison, from which she is able to apply for the program. Women must be pregnant or parenting a child under age six, convicted of a non-violent drug offense and have at least 90 days left on her sentence. Each woman is allowed to have up to two children reside with her.
Project Pride Oakland	Program started in 1980	24 total beds	Up to 6 years of age	
Turning Point Bakersfield		24 total beds		
Pomona Los Angeles		23 total beds		
Family Foundations Program				The Family Foundations Program is an alternative sentencing program administered by California Department of Corrections for women who are convicted of non-violent offenses and who have histories of drug abuse. Women must be pregnant or parenting a child under the age of six and be sentenced no longer than 36 months. As an alternative to incarceration, the women must be sentenced directly to a Family Foundation Program; they can not transfer from a state prison. The mother spends 12 months in this highly structured residential treatment program followed by a 12-month aftercare/transition period to help her successfully reenter society.
Santa Fe Springs	1999	35 women and 40 children	Up to 6 years of age	
San Diego	2000			
Fresno	2007			
Additional Information: http://www.leginfo.ca.gov/cgi-bin/waisgate?WAIStdocID=98397927644+1+0+0&WAIStaction=retrieve				

Connecticut				
Facility/ Location	Started	Capacity	Duration of Child's Stay	Policy for Participation
NEON* Women's and Children's Halfway House Waterbury	1988	19 women and up to 12 children	Up to 10 years of age	Women who have served part of their sentence in prison and are interested in reunifying with their children, and women who are pregnant and meet other program requirements are transferred from the York Correctional Institution to this program. Women are allowed to leave the facility to attend parenting programs and work. Some women are allowed to stay at the house past their sentences if they are not ready to reenter the community.
Additional Information: www.neoncaa.org				

* Norwalk Economic Opportunity Now

Illinois				
Facility/ Location	Started	Capacity	Duration of Child's Stay	Policy for Participation
MOM's Program Chicago	1999	16 beds	Up to pre- school age	The Sheriff's MOM's Program is a therapeutic community drug treatment program for pregnant female pre-trial substance abuse/mental health detainees. Women can either be sentenced to the program by a judge or admitted if they meet criteria such as being convicted of a non-violent offense, having no history of absconding from previous programs and having a bond that is not over \$300,000.
Additional Information: www.cookcountysheriff.org/womensjustice/moms.html				

North Carolina				
Facility/ Location	Started	Capacity	Duration of Child's Stay	Policy for Participation
Our Children's Place* Chapel Hill	Will open in mid- 2010	Start with 10 women and up to 20 children; then increase capacity to 20 women and up to 40 children	The child can stay until he/she is ready to start kindergarten	To participate in this residential program the mothers must be classified as minimum security and be convicted of a non-violent offense. The woman's sentence must also end by the time the child is ready to start kindergarten. The mother must have custody of her child; the child does not have to be born while in custody.
Additional Information: http://ourchildrensplace.com/ * This program is still in the planning stages. The timeline for implementation may change.				

North Carolina, cont.

Summit House Greensboro, Charlotte, Raleigh	1987	26 Families through their 3 facilities	Up to 7 years of age	Summit House is an alternative to incarceration program to which pregnant women or women with small children may be sentenced to instead of as an alternative to prison. To qualify for Summit House a woman must be 17 years of age or older, convicted of a non-violent offense and be pregnant or have custody of her children. Women are usually sentenced to this program for 12 - 24 months.
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Additional Information: www.summithouse.org

Massachusetts

Facility/ Location	Started	Capacity	Duration of Child's Stay	Policy for Participation
Spectrum Women and Children Program Westborough	1989	13 women and up to 11 or 12 children	Up to 2 years of age	Formerly the Neil J. Houston House, this residential substance abuse program is open to women who are either on parole, probation or are incarcerated. To qualify, a woman must have a substance abuse problem, have not been convicted of a violent offense and not have any serious mental health issues. The child does not have to be born in custody to participate in this program. Based on a community corrections model, women are able to leave the facility only with approval from the Department of Corrections.

Additional Information: www.spectrumhealthsystems.org

Vermont

Facility/ Location	Started	Capacity	Duration of Child's Stay	Policy for Participation
Lund Family Center Burlington	The Lund Family Center started about 115 years ago but their relationship with the DOC is only six to seven years old.	21 mother/child pairs	Up to 5 years of age	The Lund Family Center's residential program is open to pregnant or parenting women in need of residential drug or mental health services who are between the ages of 12 and 28 and who have children under five years of age. Although the program does not focus entirely on women with criminal justice involvement, some women are sentenced to this program as an alternative to incarceration. Women from the criminal justice system can be accepted to participate if they were convicted of non-violent offenses, are pregnant or have custody of their child/ren. A woman's sentence should be completed by the time the child turns five years old.

Additional Information: www.lundfamilycenter.org/treatment/residential_services.shtml

APPENDIX III

Jails with Nursery Programs

New York				
Facility	Started	Capacity	Duration of Child's Stay	Policy for Participation
Rikers Island - Rose M Singer Center, New York City	1989	15 mothers/ 16 infants	Up to 12 months	Women sentenced to Rikers Island and women who are awaiting transfer to Bedford Hills or Taconic state facilities may apply for the nursery six months into their pregnancies. A medical and mental health evaluation is conducted as well as an Administration for Children Services investigation. The nature of the mother's crime is taken into consideration when she is evaluated for the nursery program.
Additional Information: http://www.nyc.gov/html/doc/html/home/home.shtml				

APPENDIX IV

Federal Bureau of Prisons Residential Parenting Programs

MINT Facilities*				
Facility/ Location	Started	Capacity	Duration of Child's Stay	Policy for Participation
Hartford House Hartford, CT	Unknown	5 mother/infant pairs	3 months	Women are moved to this facility from the federal prison FCI Danbury in CT. Most women admitted to this site have two years or less remaining on their sentence.
Tallahassee MINT Program Tallahassee, FL	1998	10 mother/infant pairs	12months	Women can be moved to this facility from any federal prison in the country. No restriction on the length of the women's sentence for participation was reported.
Triangle Center MINT Program Springfield, IL	Mid-Late 1990s	4 mother/infant pairs	3 months	Women arrive at this program from any federal facility in the country. The mothers receive three months prenatal care and then three months of mother-child bonding. The Triangle Center has relationships with several community-based services and the women are allowed to leave the facility with an escort to take advantage of these services.
Volunteers of America Fort Worth, TX	early 1980s	20 mother/infant pairs	3 months	Women may be transferred from any federal facility in the country towards the end of their pregnancy, however most come from FMC Carswell. There is no restriction on the length of the women's sentence for participation. This is the original MINT program location.
Greenbrier Birthing Center Hillsboro, WV	1994	20 mother/infant pairs	18 months	Women are transferred to this facility from any federal facility in the country. The mother's sentence can not be longer than 15 years to participate. This site offers the most extensive programming and has the longest time allotment.

Additional Information: www.bop.gov/inmate_programs/female.jsp

*Unable to contact BSSW-CSC (Pregnant Offender) in Phoenix, AZ and CCI Mother with Infant Program in San Francisco, CA for interviews.

APPENDIX V

An International Look at Mothers and Children in Prison

In 1987, the Alliance of Non-Governmental Organizations on Crime Prevention and Criminal Justice, a United Nations workgroup, called for greater use of community based sanctions for pregnant and parenting women in lieu of prison.³⁴ This recommendation was echoed in 2000 when the Council of Europe Parliamentary Assembly called for the development and use of community based programs for mothers who have committed low-level crimes and do not pose a danger to the community.³⁵

It is common in both industrialized³⁶ and developing³⁷ countries to allow incarcerated pregnant and parenting women to reside with their children in a correctional facility. The reasons for allowing children to stay with their mothers and the level of programming offered vary considerably from country to country, and often within a country as well. The differences in policies often reflect individual countries' views on rehabilitation within the criminal justice system and the roles that women and mothers play in society. Similarly to the United States, individual programs for pregnant and parenting women are often located in a specific prison and are not representative of the nation's prison system as a whole.

International Practices

Industrialized and developing countries have taken innovative approaches within their criminal justice systems to address the issue of pregnant and parenting women. While there are long-documented human rights abuses in justice and prison systems around the globe, programs and services for pregnant and parenting women have been developed in both industrialized and developing countries that are worth mentioning.

In Canada, a child's wishes are taken into consideration when deciding if the child should stay with its mother and the child may decide at any time to stop living in the prison.³⁸ Judges in Kyrgyzstan are required to consider the effect on the child when sentencing the mother. It is common for a woman in Kyrgyzstan with children under 14 years of age to have her sentence suspended if it is her first offense.³⁹

As in the U.S., most prison nursery programs arrange for the mother and child to leave the correctional facility at the same time. However, the maximum allowable stay varies greatly across the globe. In the United States, at the few facilities that have prison nursery programs, the child is generally only allowed to stay until it reaches 12 to 18 months of age.⁴⁰ In Germany children are allowed to stay with their incarcerated mother until the age of four or six, depending on the facility.⁴¹ Countries such as Iceland and Ghana only allow infants to stay with their mothers until the child is weaned.⁴² In developing countries this strategy is sometimes used to decrease rates of infant mortality.

Nations also differ on their rules around bringing young children into the prison once the mother is sentenced. Prison-based programs in the U.S. do not allow mothers to bring children in with them; the child must be born in custody. Many developing countries lack child welfare and foster care systems. Without the infrastructure in place to care for children of incarcerated parents, these children often end up residing in prison with their mothers because there is no place else for them to go. As a result countries such as India and Egypt allow children to accompany their mothers in pre-trial detention as well.⁴³ The women's prison in Punjab, India allows women to bring a child under five-years of age into the facility.⁴⁴ It is mandatory for children born in prison in Mexico to stay with their mother until they reach age six.⁴⁵

Similar to the United States, programs found in industrialized nations, and occasionally in developing countries, only allow children to live in correctional facilities that have specialized housing and programming that can accommodate infants and children. These prison nursery programs (often referred to as Mother and Baby Units internationally) are usually kept separate from the general prison population. It is also standard practice in industrialized countries for women to give birth in a hospital or medical facility outside of the prison and then return to the prison with her child.

Allowing children to reside in prison with their incarcerated parents has necessitated the development of education and socialization programs to meet the needs of these children. Prisons across India are obligated to provide nurseries and day care for the children; these facilities are also open to prison staff and sometimes the outside community. In Chile children start attending a *Sala Cuna*, which is responsible for socio-educational programs, at six-months of age. If a *Sala Cuna* is not available at the prison children are permitted to attend one in the community.⁴⁶

Even if the best option is to not allow the child to reside in prison with its mother, efforts can be taken to maintain the mother-child bond. Some women in Germany have had mothering approved as a legitimate work-release assignment. These mothers leave the prison each morning to get their children ready for school, during the day they do housework and prepare for the children to return for school. At the end of each day they put their children to bed and then return to the prison.⁴⁷ This approach recognizes the importance a mother plays in her child's life while at the same time supporting normalcy for the child while its mother is incarcerated.

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- ¹ The program descriptions included in this brief are based largely on interviews conducted with facility and program staff in 2008 and 2009. It is acknowledged that the list of programs may not be all-inclusive.
- ² National Prisoner Statistical Data Series conducted by the Bureau of Justice Statistics and West, Heather C. and William J. Sabol. *Prisoners in 2007*. Bureau of Justice Statistics: December 2008.
- ³ Maruschak, Laura M. *Medical Problems of Prisoners*. Bureau of Justice Statistics; April 2008.
- ⁴ Greenfeld, Lawrence A. and Tracy L. Snell. *Women Offenders*. Bureau of Justice Statistics; Dec, 1999.
- ⁵ National Prisoner Statistical Data Series conducted by the Bureau of Justice Statistics and West, Heather C. and William J. Sabol. *Prisoners in 2007*. Bureau of Justice Statistics: December 2008.
- ⁶ Maruschak, Laura M. *Medical Problems of Prisoners*. Bureau of Justice Statistics; April 2008.
- ⁷ Greenfeld, Lawrence A. and Tracy L. Snell. *Women Offenders*. Bureau of Justice Statistics; Dec, 1999.
- ⁸ Kauffman, Kelsey. *Mothers in Prison*. *Corrections Today*; February 2001. Vol. 63, Iss. 1; pg 62, 4pgs.
- ⁹ Azar, Beth. *The Bond Between Mother and Child*. American Psychological Society; September 1995.
- ¹⁰ State of New York Department of Correctional Services. *The Prison Nursery Programs at Bedford Hills Correctional Facility and Taconic Correctional Facility*. New York; 1992.
- ¹¹ Many news articles state that the general criticism around prison nurseries is that prisons are no place for a child and that if a mother is being punished she should not be allowed to keep her infant with her in prison. The following article is an example of the discourse that occurs during debates around prison nurseries: Porterfield, Mannix. *West Virginia's Prison Nursery Program Receives Worldwide Attention*. *The Register-Herald*; March 16, 2007.
- ¹² Johnston, Lauren. *Bedford Hills Correctional Facilities Blazes Trail*. *Voices Unabridged*; May 19, 2005.
- ¹³ Carlson, Joseph R. *Evaluating the Effectiveness of a Live-in Nursery within a Women's Prison*. *Journal of Offender Rehabilitation*; 1998.
- ¹⁴ Phone conversation with Scott Chavez, Vice President NCCHC; February 13, 2009.
- ¹⁵ American Correctional Association. *Standards for Adult Correctional Institutions, 4th Edition*; Jan, 2003.
- ¹⁶ ACLU. *Bureau of Prisons Revises Policy on Shackling of Pregnant Inmates*; October 20, 2008. <http://blog.aclu.org/2008/10/20/bureau-of-prisons-revises-policy-on-shackling-of-pregnant-inmates/>
- ¹⁷ Carlson, Joseph R. *Evaluating the Effectiveness of a Live-in Nursery within a Women's Prison*. *Journal of Offender Rehabilitation*; 1998 and *Prison Nursery 2000: A Five-year Review of the Prison Nursery at the Nebraska Correctional Center for Women*. *Journal of Offender Rehabilitation*; 2001.
- ¹⁸ Mothers who have completed the nursery program in Nebraska have shown a loyalty to the program and have formed friendships with the other mothers. These relationships have created some ease for conducting follow-up with the mothers, though the program is considering asking the mothers to sign a waiver authorization form for the Department of Health and Human Services to allow access to her records after release in order to track if they maintains custody of their children or if they have any future charges of child neglect or abuse.
- ¹⁹ Zachariah, Holly. *Nurseries' Success Hard to Measure*. *Knight Ridder Tribune Business News*; October, 14 2006.
- ²⁰ State of New York Department of Correctional Services. *Profile and Three Year Follow-up on Bedford Hills and Taconic Nursery Program Participants: 1997 & 1998*. Division of Program Planning, Research and Evaluation; 2002.
- ²¹ San Francisco State University Department of Public Health & Legal Services for Prisoners with Children. *A Needs Assessment of Children's Access to Quality Health Care while Living with their Incarcerated Mother at Mother-child Prison Programs in California*; 2007.
- ²² Hairston, Creasie Finney, et al. *Serving Incarcerated Mothers and their Babies in Community-Based Residences*. Research Brief: Children, Families and the Criminal Justice System; University of Illinois at Chicago; Summer 2003.
- ²³ American Medical Association. Report 3 of the Council on Scientific Affairs. *Bonding Programs for Women Prisoners and Their Newborn Children*; December 1997.
- ²⁴ Byrne, Mary. *Maternal and Child outcome of a Prison Nursery Program*, funded by National Institute of Health, NR RO1-007782, 2003 – 2008, Principal Investigator, M. Byrne; 2008.
- ²⁵ SF-36 health status inventory
- ²⁶ Radloff Center for Epidemiologic Studies Depression scale
- ²⁷ NCAST Teaching Scale and Mother Infant Communication Screening
- ²⁸ Denver Development Screening Test II, Early Language Milestones and Clinical Adaptive Test/ Clinical Linguistic Auditory Milestones

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- ²⁹ The Byrne study was funded through grants from Columbia University, the New York State Department of Health and the National Institute of Health. No funding was provided by the New York State Department of Correctional Services.
- ³⁰ Moses, Marilyn C. and Roberto Hugh Potter, PH.D. *Jailed and Pregnant Women and Birth Outcomes*. American Jails; March/April 2008.
- ³¹ Ibid. - Page 90.
- ³² Glaze, Lauren. and Laura M. Maruschak. *Parents in Prison and Their Minor Children*. Bureau of Justice Statistics Special Report; August 2008.
- ³³ American Academy of Pediatrics and American Public Health Association. *Caring for our Children: National Health and Safety Performance Standards, Guidelines for Out-of-Home Childcare programs*; Available at: <http://nrc.uchsc.edu/CFOC/>
- ³⁴ Alliance of Non-Governmental Organizations on Crime Prevention and Criminal Justice. *Children in Prison with their Mothers. A Report of the Working Party of the Alliance of Non-Governmental Organization on Crime Prevention and Criminal Justice*; September 1987.
- ³⁵ The Quaker Council for European Affairs. *Mothers in Prison: A Review of the Conditions in Member States of the Council of Europe*; February 2007.
- ³⁶ Industrialized or developed nations are countries with strong economies that translate into higher overall standards of living and human rights. In addition to the United States, countries such as Canada, Australia and most of Western Europe fall into this category.
- ³⁷ Developing Countries vary extensively in their levels of government infrastructure and usually experience a quality of life that is lower than in industrialized nations.
- ³⁸ Robertson, Oliver. *Children Imprisoned by Circumstance*. Quaker United Nations Office. Human Rights and Refugee Publications; April 2008.
- ³⁹ Ibid.
- ⁴⁰ Twelve to 18 months is an average maximum allowable stay at U.S. prison nursery programs. Washington State allows children to stay up to three years of age while South Dakota only allows infants to stay for 30 days.
- ⁴¹ The Quaker Council for European Affairs. *Mothers in Prison: A Review of the Conditions in Member States of the Council of Europe, Part Two Country Report: Germany*; February 2007.
- ⁴² Bastick, Megan. *Women in Prison: A Commentary on the Standard Minimum Rules for the Treatment of Prisoners*. Quaker United Nations Office; July 2005.
- ⁴³ Robertson, Oliver. *Children Imprisoned by Circumstance*. Quaker United Nations Office. Human Rights and Refugee Publications; April 2008.
- ⁴⁴ Robertson, Oliver. *Children Imprisoned by Circumstance*. Quaker United Nations Office. Human Rights and Refugee Publications; April 2008.
- ⁴⁵ McKinley Jr., James C. *In Prison, Toddlers Serve Time with Mom*. The New York Times; Dec 2007.
- ⁴⁶ Ibid.
- ⁴⁷ The Quaker Council for European Affairs. *Mothers in Prison: A Review of the Conditions in Member States of the Council of Europe, Part Two Country Report: Germany*; February 2007.