WHY PUNISH THE CHILDREN?

A Reappraisal of the Children of Incarcerated Mothers in America

Barbara Bloom and David Steinhart
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1992
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National Council on Crime and Delinquency, January 1993
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The National Council on Crime and Delinquency, founded in 1907, is a non-profit organization committed to promoting criminal justice strategies that are fair, humane, effective and economically sound.

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Cover art by Nancy Battles

Designed and produced at
San Rafael Design by Jon Goodchild and Robin Benjamin

First Printing

Printed at Thompson Shore, USA
Special thanks to Marci Brown who assisted in the research design and conducted most of the interviews for this book. Ms. Brown, who is the former Public Information Director for the National Council on Crime and Delinquency, is currently an independent public relations consultant in San Francisco.
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Introduction

In 1978, the National Council on Crime and Delinquency (NCCD) published a study entitled Why Punish the Children? The study offered a comprehensive and critical view of the nation's treatment of children whose mothers were incarcerated in the nation's jails and prisons. It documented a neglected and forgotten class of young people whose lives were disrupted and often damaged by the experience of isolation from their imprisoned mothers. Recommendations presented in the study were intended to focus attention on these children and their needs.

The present work is a reassessment of the study published in 1978. The need for a current appraisal is sharpened by the fact that the incarceration rate for female offenders has skyrocketed in recent years. This has spurred unwelcome growth of the invisible class of infants, children and teenagers who find themselves without a mother at home. While new legions of children are growing up separated from their mothers, government agencies appear more powerless than ever to attend to the needs of the children, their mothers and their caregivers. Now more than ever, we must renew our concern and define our commitment to these children. This report offers an appraisal of their needs and a current agenda for reform.

This effort was made possible by grants from the Florence V. Burden Foundation, the San Francisco Foundation, the Wallace A. Gerbode Foundation, the Van Loben Sels Charitable Trust, the AT&T Foundation and the National Institute of Corrections. The support of these organizations is gratefully acknowledged by the National Council on Crime and Delinquency.

The recommendations were developed by NCCD in cooperation with a project Advisory Committee. Members of the Advisory Committee include individuals with backgrounds in research, advocacy and ser-
vice delivery on behalf of incarcerated mothers and their children. Their names and affiliations are listed on a separate page. NCCD is indebted to these individuals for the time they have taken from busy schedules to review study findings and recommendations and to oversee various aspects of the project.

Additional thanks are offered to the incarcerated women and to the caregivers, public agency personnel and community-agency staffpersons who completed questionnaires and participated in interviews with the NCCD staff. Their concern and cooperation made it possible to produce the findings and recommendations of this report.
Profile of a Disturbing Trend:
More Women In Prison,
More Children Adrift

Police force their way into a suspected "crack house" in Los Angeles County. Inside they find Monica M., age 19. The only other occupants of the house are two children. One is an infant about nine months old; the other is a boy who appears to be about three. Monica, their mother, is arrested for possession of rock cocaine. She screams at the officers and begs them not to take her away from her children. She is handcuffed and removed in a patrol car. The police put in a call for a child protective services worker. An hour later, a CPS worker arrives. She tries to calm the children, who are frightened and in tears. She asks neighbors where relatives might be found but none can be contacted. The children are driven to a county shelter. The infant is immediately placed in the custody of a foster family. The small boy spends the night in the shelter and waits while social workers try to locate a grandmother. He does not know when he will see his mother again.

This account of a mother's arrest and separation from her children is an all too frequent reality in America today. The United States has experienced a ten-year surge in the population of incarcerated women. In the shadow of this trend has grown a generation of children who are dislocated from their mothers.

Since 1980, the number of women in the nation's jails and prisons has tripled. In 1991, there were approximately 87,000 women incarcerated in both types of facilities in the United States. Though women still account for only 6 percent of the national prison population and about 10 percent of those in jail, their rate of increase in secure facilities has far outpaced the rate of increase for males.
Most of these imprisoned women are mothers. The United States Department of Justice, Bureau of Justice Statistics (BJS) reported that 76 percent of women prisoners in America were mothers in 1986.\textsuperscript{1} Nine out of 10 of these mothers had children under the age of 18. Six out of ten had more than one child. Similar findings were reported in a national survey of 1,720 female inmates of prisons and jails, conducted by the American Correctional Association (ACA) in 1987.\textsuperscript{4}

Some women are pregnant when incarcerated. The ACA survey identified 6 percent of females in prison and 4 percent of those in jails who were pregnant when admitted. In NCCD’s 1992 survey of jailed and imprisoned mothers, 9 percent of respondents gave birth while incarcerated.

Most women in United States prisons and jails are women of color. The BJS survey placed Blacks at 46 percent and Hispanics at 12 percent of the total female prison population in 1986. The ACA survey showed that, beyond the factor of ethnicity, these incarcerated women were mostly young (25-29 years old) and were frequently unemployed with low rates of high school graduation. Many were victims of physical or sexual abuse. Most were unmarried (78 percent). According to the ACA, only 20 percent of all adult female offenders lived with a spouse and children prior to being incarcerated.

Various theories have been advanced to explain the recent surge in female prison and jail populations in the United States. The war on drugs has been implicated by some researchers as an enforcement effort leading to the selective over-incarceration of women. A 1990 study of offenders by the Massachusetts Division of Correction showed that 47 percent of sentenced women and only 19 percent of sentenced men were incarcerated for drug offenses in that state in 1990.\textsuperscript{3} In California, the percent of women incarcerated for drug offenses more than doubled between 1984 and 1989.\textsuperscript{4} BJS reported that one in three female inmates were in jail in 1989 for a drug offense, versus one in eight in 1983.

Most sources are in agreement that the rise in the rate of female incarceration is not due to any discernable increase in violent crime by women. BJS reported an 8 percent drop in the percent of women imprisoned in the United States for violent offenses between 1979 and 1986. Other state-level studies confirm this decline. The expansion of the women’s prison and jail populations has been fueled primarily by increased rates of incarceration for property and drug offenses and
by parole violations — not by commitments for crimes of violence.

Changes in criminal justice policy and procedure over the last decade may be largely responsible for the rapid growth of the women's prison population in the United States. Determinate sentencing laws have reduced the discretion of corrections agencies to allow some women to be reunited with their children after short periods of incarceration. Mandatory prison statutes and sentencing guidelines are gender-blind and have increased the flow of offenders of both sexes into state institutions. Factors which may formerly have discouraged imprisonment — e.g., a woman's need to remain home with her children — may no longer be valid considerations for judges briddled by new federal and state sentencing rules.

In the crusade to get tough on crime, criminal justice policymakers have gotten tough on women, drawing them into prisons and jails in rapidly increasing numbers. The system has become more rigid, sacrificing the flexibility to consider alternate outcomes for women with young children. Unfortunately, while policymakers have shown women that they will receive the same consequences as men for their offenses, they have also systematically punished their children.

There are now an estimated 1.5 million children of incarcerated parents in the United States. In California alone, the number is estimated to exceed 200,000 children.5

These estimates are for children of incarcerated parents of both sexes. No national survey has published a recent count of the number of children of incarcerated women. From older surveys we know that women prisoners had more than 37,000 children in 1986 and that women in jails had more than 52,000 minor children in 1989.6

NCCD estimates that on any given day in 1991 there were approximately 167,000 children of women in adult prisons and jails throughout the United States. We further estimate that at least three-fourths of all these children, or more than 125,000 individuals, were under the age of 18.7 This estimate of 125,000 minor children represents only those who, on a single census day in 1991, had mothers in jails or prisons. The turnover in the prison population, and the faster recycling of the jail population, guarantee that many more young lives are affected each year by the experience of their mother's incarceration.

The harm done to children by this experience can be sudden and
substantial. There are immediate and sometimes long lasting psychological effects. There may be declines in the quality of shelter and personal care, including onset of poor nutrition and inadequate medical attention. Peer relations and school performance may suffer. The mother-child relationship may be permanently damaged. The child may be placed at increased risk of future institutionalization by the criminal justice system.¹

In 1992, the Center for Children of Incarcerated Parents studied the effects of incarceration on a group of children living in South Central Los Angeles County. This is a predominately minority (African-American, Hispanic) community with high rates of poverty, gang activity and violent crime. Of 56 students who were evaluated at one school, more than one-fourth had a currently incarcerated mother or father. The study concluded:

Children of offenders are traumatized by events relating to parental crime and arrest. These children experience or witness prenatal drug exposure, substance abuse in the home, violent arrests [including] the forced removal of the parent from the home at arrest, gang activity in the family, criminal acts, and/or the violent deaths of family members, each of which has been documented to produce traumatic stress reactions in childhood.

Children of offenders are more vulnerable as a result of separation from their parents. One role of parents is to help children deal with stressful events and master trauma. When trauma involves parental loss, children also lose their helper, and their ability to address and master trauma is seriously impaired.

Children of offenders experience an inadequate quality of care due to extreme poverty. The children studied are among the poorest in the nation. In addition to contributing to multiple placements and caregiver stress, this extreme poverty precludes the stable, nurturing home environment that children need to survive early traumas without sequelae.⁹

Most children separated from their mothers after arrest go to live with relatives, and most of these relatives are maternal grandmothers. In the NCCD survey of women inmates conducted in 1991-92, only 17 percent of the children stayed with their father during the term of their mother’s incarceration. Children who were not cared for by a relative were likely to be placed in foster care or in the custody of friends.

In many cases, the caregivers of the children suffer significant
financial setbacks. Laws in some states disallow foster care payments to the relatives of incarcerated mothers. While public interest lawyers continue to challenge these payment restrictions, many relatives — especially grandparents who are poor and out of the job market — find that they cannot afford the cost of caring for the new children under their roof. In some cases, even where there is an entitlement to AFDC and foster care benefits, relative caregivers may be wary of the legal maze they must negotiate to qualify for financial aid.

Wherever the children go, the maternal relationship is jeopardized. In some instances, the state terminates the mother's right to legal custody of her children. Even where the mother retains legal custody, she will have reduced and sometimes no contact with her children while she is imprisoned. Some innovative correctional programs promote mother-child contact and facilitate reunification upon release. But no program can fully eliminate the sadness, anxiety and despair that children feel when they are forced to adjust to their mother's imprisonment. In the 1978 NCCD study, McGowan and Blumenthal recounted the case study of Angela, who was 12 when her mother was arrested for selling heroin. Interviewed at age 14, when her mother was about to be released from prison, Angela said:

_In the beginning I told some of the kids my mother died. Then later I changed my story. I told them she went away. "I thought you said she died," they said. "I never said that." "Yes, you did," they said. I was ashamed of her then. I hated her for being in prison. I hated me and everybody....

But I'm a lot older now, or at least I feel I am. It's only been two years. We'll be together and see how it goes. If it works out fine. If it doesn't, we'll split up. . . . Or maybe she'll end up back in jail. Or maybe I'll end up in jail. If she ends up in there again, though, I'm not going to visit her. I've done my time with her. . . . then she can go to hell for all I care._

This vignette was but one of several accounts documenting the reactions of very young children, school age children and adolescents to their mothers' incarceration. In all cases, the children suffered. Their resiliency and ability to adjust to the experience were as different as the circumstances and personalities of each child. As the 1978 NCCD study concluded,

*Why Punish the Children?*
It is impossible to describe how all children are affected by their mothers’ incarceration. The degree to which one child may be injured by his mother’s imprisonment will be determined by his age, his personality, his prior relationship with his mother, the type of care he receives while his mother is imprisoned, the length of time he is separated from his mother, and the opportunities he has for continuing contact with his mother or other significant persons in his life. Children who are treated sensitively may experience the incarceration as only a brief separation, not unlike that which might occur if their mothers went away on a trip or were hospitalized briefly. For others, this experience may be only one in a lifetime of rejection and neglect. And for still others, it may be a very traumatic experience with severe negative consequences in terms of their development and future well-being.”
Findings of this Study On the Incarcerated Women and Their Children

It's not only me who suffers, it's the kids too. My children and my family were sentenced along with me.

— ANTONIA A., INTERVIEWED IN A STATE CORRECTIONAL FACILITY WHERE SHE IS SERVING A SIX-YEAR TO LIFE TERM FOR SELLING DRUGS.

ONE OF NCCD'S GOALS was to examine the current circumstances of the children of incarcerated mothers. Accordingly, we conducted a survey of mothers in jails and prisons in 8 states and the District of Columbia. The survey form consisted of 64 questions about each mother and her children. It included separate sub-questionnaires for each child of the respondent (for as many as three children). The survey forms were distributed to prisons and jails in California, New York, Pennsylvania, Minnesota, Illinois, Oklahoma, Texas, Florida and Washington, DC.

Prison and jail administrators selected the respondents based on very broad criteria for participation. The main requirements were that women be informed of the purpose of the survey, that their participation be voluntary and that they have at least one child under the age of 18. Correctional administrators were also asked to provide ethnic balance among participating women. In every other respect, selection of respondents was left to the discretion of correctional staff.

The survey was initiated in October of 1991 and all surveys were returned to NCCD by May of 1992. We received 439 usable responses from the prisoner-mothers. Eighty percent of these women were in federal or state prisons while 20 percent were in local jails. The surveys were coded and keypunched for automated tabulation and analysis. The results of the analysis are discussed below.
Other survey forms were distributed to child welfare administrators, private caregivers and community-based programs serving children of incarcerated women. These other surveys are discussed in subsequent chapters.

There are obvious limitations to this research design. Based on the resources available, NCCD could not mount a comprehensive and statistically rigorous national data collection effort. The sample was not systematically randomized, and only 8 states and the District of Columbia are represented. Despite these limitations, the survey responses are remarkably consistent with the results of larger surveys of women prisoners conducted by the U.S. Department of Justice (1986, 1989) and the ACA (1987).

Profile of the incarcerated mothers

The average age of the 439 mothers participating in the NCCD survey was 30.9 years. Other characteristics of the jailed and imprisoned women in the survey are shown in Tables 2-1 through 2-5.

<table>
<thead>
<tr>
<th>Table 2-1</th>
<th>ETHNICITY OF INCARCERATED MOTHERS</th>
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<td></td>
<td>Number (434)</td>
</tr>
<tr>
<td>African-American</td>
<td>169</td>
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<tr>
<td>Hispanic</td>
<td>69</td>
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<tr>
<td>White</td>
<td>146</td>
</tr>
<tr>
<td>Asian</td>
<td>3</td>
</tr>
<tr>
<td>Native American</td>
<td>33</td>
</tr>
<tr>
<td>Other</td>
<td>14</td>
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<thead>
<tr>
<th>Table 2-2</th>
<th>MARITAL STATUS OF INCARCERATED MOTHERS</th>
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<tbody>
<tr>
<td></td>
<td>Number (432)</td>
</tr>
<tr>
<td>Never married</td>
<td>142</td>
</tr>
<tr>
<td>Married</td>
<td>80</td>
</tr>
<tr>
<td>Common-law</td>
<td>46</td>
</tr>
<tr>
<td>Divorced</td>
<td>78</td>
</tr>
<tr>
<td>Separated</td>
<td>58</td>
</tr>
<tr>
<td>Widowed</td>
<td>28</td>
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</table>
The results of this survey in regard to ethnicity and marital status are quite similar to those of the 1987 ACA survey of female offenders, even though this sample is limited to just those who are mothers. Most were women of color. Less than 20 percent of the inmate-mothers in this sample were married.

Table 2-3 shows education, employment, welfare and income status of the women in the survey at the time of their arrest.

<table>
<thead>
<tr>
<th>Table 2-3</th>
<th>EDUCATION, EMPLOYMENT, WELFARE AND INCOME STATUS OF INMATE MOTHERS</th>
</tr>
</thead>
<tbody>
<tr>
<td>EDUCATION (highest completed)</td>
<td>Number*</td>
</tr>
<tr>
<td>8th grade or less</td>
<td>48</td>
</tr>
<tr>
<td>Grades 9 - 11</td>
<td>85</td>
</tr>
<tr>
<td>High school graduate</td>
<td>146</td>
</tr>
<tr>
<td>College graduate</td>
<td>46</td>
</tr>
<tr>
<td>EMPLOYMENT STATUS</td>
<td></td>
</tr>
<tr>
<td>Employed</td>
<td>151</td>
</tr>
<tr>
<td>Not employed</td>
<td>278</td>
</tr>
<tr>
<td>WELFARE STATUS</td>
<td></td>
</tr>
<tr>
<td>On AFDC</td>
<td>147</td>
</tr>
<tr>
<td>Not on AFDC</td>
<td>201</td>
</tr>
<tr>
<td>ANNUAL INCOME</td>
<td></td>
</tr>
<tr>
<td>Under $10,000</td>
<td>175</td>
</tr>
<tr>
<td>$10,000 - 25,000</td>
<td>76</td>
</tr>
<tr>
<td>Over $25,000</td>
<td>24</td>
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</tbody>
</table>

* Number of responses to each question varies. Percentages shown are percentages of those responding to each question.

The majority of these women did not complete high school, were unemployed and had incomes below $10,000 per year. Nearly half were receiving Aid to Families with Dependent Children (AFDC) payments prior to their arrest. The low economic status of the women in this study is a finding that is consistent with the findings of other studies of incarcerated women in America, as referenced in the previous chapter.
Table 2-4 documents high rates of physical, sexual and substance abuse within the study population.

<table>
<thead>
<tr>
<th>Table 2-4</th>
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<tbody>
<tr>
<td>HISTORY OF PHYSICAL OR SEXUAL ABUSE AND SUBSTANCE ABUSE OF INCARCERATED MOTHERS</td>
</tr>
<tr>
<td>Number*</td>
</tr>
<tr>
<td>Physical abuse at some time</td>
</tr>
<tr>
<td>Sexual abuse at some time</td>
</tr>
<tr>
<td>Regular use of alcohol or drugs</td>
</tr>
</tbody>
</table>

* Numbers reflect multiple responses to questions regarding different types of abuse. Percentages represent those with affirmative responses for each type of abuse.

The offense profile of the women in the NCCD survey substantiates the observation that increasingly, American correctional facilities are being filled with female drug offenders. Table 2-5 shows that nearly 40 percent of all the mothers participating in this survey were incarcerated for a drug offense. The next most frequent reason for incarceration was a felony property offense. Fifteen percent were sentenced for a serious felony against the person, including homicide and manslaughter offenses.

<table>
<thead>
<tr>
<th>Table 2-5</th>
</tr>
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<tbody>
<tr>
<td>COMMITMENT OFFENSES OF INCARCERATED MOTHERS</td>
</tr>
<tr>
<td>Number(426)</td>
</tr>
<tr>
<td>Serious/violent felony</td>
</tr>
<tr>
<td>Felony property</td>
</tr>
<tr>
<td>Drug law violation</td>
</tr>
<tr>
<td>Child abuse</td>
</tr>
<tr>
<td>Other</td>
</tr>
</tbody>
</table>

By the time the women had completed our survey, they had spent an average of 1.9 years in custody (2.1 years for prisons, .4 year for jails). Their average length of assigned sentence overall was 7.8
years (9.3 years for prisons, .8 year for jails). The women in our sample had an average of four prior incarcerations each as an adult.

Profile of the children

*My 11 year old son is very angry. He doesn't open up. He felt betrayed when I was arrested again. He used to be a good student but his grades have dropped. He stopped writing me and he doesn't come to visit.* — Wilma R., imprisoned for a drug offense in New York.

*I don't want them to get hurt. They've gone through a lot of pain. I hope they can learn from everything they've had to go through.* — SueAnn P., serving time in a California women's prison, describing her 4 children.

The NCCD questionnaires completed by incarcerated mothers sought extensive information on their children. Each questionnaire had separate sub-sections seeking detail on each child (up to three children per respondent). Our 439 respondents completed sub-questionnaires for 870 children. The characteristics of these children are reported and discussed below.

Overall, respondents had an average of 2.6 children each. The average age of all children under 18 was 7.8 years. Gender of the children was 52 percent female and 48 percent male. A shift was noted between the ethnic distribution of the mothers (Table 2.1) and the ethnic distribution of their children (Table 2.6), due primarily to the fact that the Hispanic and African-American women represented in the survey had more children per inmate than women in the other ethnic groups.

<table>
<thead>
<tr>
<th>Ethnicity</th>
<th>Number (866 children)</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>African-American</td>
<td>374</td>
<td>43.2</td>
</tr>
<tr>
<td>Hispanic</td>
<td>182</td>
<td>20.2</td>
</tr>
<tr>
<td>White</td>
<td>210</td>
<td>24.2</td>
</tr>
<tr>
<td>Asian</td>
<td>3</td>
<td>0.3</td>
</tr>
<tr>
<td>Native American</td>
<td>58</td>
<td>6.7</td>
</tr>
<tr>
<td>Other</td>
<td>39</td>
<td>4.5</td>
</tr>
</tbody>
</table>

Why Punish the Children?
Most children were in the legal custody of their mothers when they were arrested (73 percent) and most also lived with their mothers at the time of arrest (67 percent). The number of children reported by their mothers as still being in their legal custody after arrest dropped substantially; 131 of the total 622 children who were in the legal custody of their mothers at the time of arrest were no longer in their mothers custody by the time of completing the NCCD questionnaire.

A primary concern of this study is the care which the child receives during the term of the mother’s incarceration. We asked respondents to identify the primary caretaker of each child, obtaining the results displayed in Table 2-7. Table 2-7 confirms the previously noted preference for placement of the child with the maternal grandmother. Sixty-five percent of the children were placed with a relative other than the child’s father, and most of these (37 percent of all placements) were with the maternal grandmother. The children’s fathers fulfilled a primary caretaker role for 17 percent of the children in the sample.

<table>
<thead>
<tr>
<th>Table 2-7</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>CHILD’S PRIMARY CARETAKER DURING MOTHER’S INCARCERATION</strong></td>
</tr>
<tr>
<td>Number (866 children)</td>
</tr>
<tr>
<td>Child’s father</td>
</tr>
<tr>
<td>Maternal grandmother</td>
</tr>
<tr>
<td>Maternal grandfather</td>
</tr>
<tr>
<td>Paternal grandmother</td>
</tr>
<tr>
<td>Paternal grandfather</td>
</tr>
<tr>
<td>Other relative</td>
</tr>
<tr>
<td>Friends</td>
</tr>
<tr>
<td>Foster home</td>
</tr>
<tr>
<td>Other</td>
</tr>
</tbody>
</table>

For each child, the incarcerated mothers were asked to identify types of problems they believed the child had experienced during her term of incarceration. Relatively few problems were identified by the mothers among their 870 children, as indicated in Table 2-8. The mothers identified 18 percent of their children as having learning or school-related problems and 16 percent with general “behavioral” problems;
rates of positive response for other types of problems were quite low. In general, NCCD found that incarcerated mothers tended to understate their children's problems compared to the caregivers. The same question, asked to a smaller sample of caregivers, yielded much higher rates of problem identification for the children, especially in the categories of school performance and general behavior. The caregiver responses can be found at Table 3-2.

<table>
<thead>
<tr>
<th>Type of problem:</th>
<th>Number (870 children)</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Learning/School</td>
<td>160</td>
<td>18.4</td>
</tr>
<tr>
<td>Health/Mental Health</td>
<td>59</td>
<td>6.8</td>
</tr>
<tr>
<td>Behavioral</td>
<td>139</td>
<td>16.0</td>
</tr>
<tr>
<td>Teen Pregnancy</td>
<td>10</td>
<td>1.1</td>
</tr>
<tr>
<td>Alcohol or Drug</td>
<td>11</td>
<td>1.3</td>
</tr>
<tr>
<td>Other</td>
<td>77</td>
<td>8.9</td>
</tr>
</tbody>
</table>

Despite their present circumstances, the vast majority of incarcerated mothers planned to re-establish a home with their children upon release (78 percent).

**Effect of incarceration on the mother-child relationship**

*I haven't seen my kids for 6 weeks. I write almost every day. But when I call, my mother-in-law won't let me talk to them. Sometimes she hangs up on me. I know my kids aren't happy. The oldest one (age 6) is acting up at day care and throwing fits. The youngest (age 4) cries at night because I'm not there.* — JOANNE B., AGE 30, SENTENCED TO PRISON FOR FRAUD RELATED TO A COMPULSIVE GAMBLING HABIT.

*I wonder will they forget me? Will they hate me? In their letters they tell me they love me, but I don't know how they really feel* — LUIZA N., AGE 28, WORRYING ABOUT HER CHILDREN AT A NEW YORK PENAL INSTITUTION.

Many of the NCCD survey questions explored the quality of the mother-child relationship during the term of incarceration. We focused...
on issues such as the type and frequency of contact with children, barriers to visitation and availability of in-custody programs to facilitate visits or other forms of contact.

Perhaps the most distressing result of the entire survey was the response to a simple question about how often the mother and child had visited each other since the mother was incarcerated. This question was answered by the mothers of 846 children. The mothers reported that 54 percent of their children had never visited them in jail or prison. The complete set of answers to this question is shown in Table 2-9.

| FREQUENCY OF MOTHER-CHILD VISITS DURING THE MOTHER'S TERM OF INCARCERATION |
|--------------------------|--------|
| Number (846 children)   | Percent|
| Once or more per week    | 84     | 9.9|
| Once per month           | 143    | 16.9|
| Every four to six months | 98     | 11.6|
| Once per year or less    | 62     | 7.3|
| Never                    | 459    | 54.3|

Some differences in frequency of visits were noted between children who lived with their mothers prior to arrest and those who did not. Children who lived with their mothers prior to arrest were nearly twice as likely to visit their mothers in jail or prison (54 percent) as children who did not live with their mother before she was arrested (28 percent). Even so, mothers and children living together before arrest had an overall no-visit rate that was uncomfortably high (46 percent); and mothers separated from their children before arrest had a disturbing no-visit rate of 72 percent.

The main reason cited by the mothers for infrequent or non-visititation of their children was the distance between the child and the correctional facility (43 percent of reasons cited). Reluctance of the child's caretaker to let the children visit was cited as another main reason (12 percent of reasons cited). No other single factor appeared to pose a major barrier to visitation according to the mothers answering the survey questions. NCCD asked the mothers how far their place of incarceration was from each child; the answers are shown in Table 2-10.
When children do visit their mothers in prison or jail, contact may be quite limited (e.g., through partitions) or extensive (overnight visits). When we asked mothers what type of contact was allowed at their particular institution, they responded as shown in Table 2-11.

<table>
<thead>
<tr>
<th>Types of Contact Allowed During Personal Visits Between Children and Incarcerated Mothers</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number (421 types)</td>
</tr>
<tr>
<td>Open area visiting</td>
</tr>
<tr>
<td>Visits through partition</td>
</tr>
<tr>
<td>Overnight family visits</td>
</tr>
<tr>
<td>Other</td>
</tr>
</tbody>
</table>

Contact between incarcerated mothers and their children can take other forms besides personal visits. Mothers identified letters as the "main form of contact" in most cases (51 percent of responses), followed by phone calls (35 percent) and visits (28 percent). Among those women who had phone contact with their children, most spoke with their children once or more per week. But more than a third of the children (36 percent) had no phone contact with their mothers during their terms of confinement.

For each child, we asked the incarcerated women how frequently they had contacts of any type (visits, phone, letters) with a child's caretaker. We received the responses shown in Table 2-12.

Finally, NCCCD asked the respondent-mothers to identify the types of programs they used most frequently while incarcerated. Two thirds of
the mothers indicated that their jail or prison offered some type of program for mothers and children. The most frequently used programs in order of use are shown in Table 2-13.

<table>
<thead>
<tr>
<th>Table 2-12</th>
</tr>
</thead>
<tbody>
<tr>
<td>FREQUENCY OF CONTACT OF ANY TYPE BETWEEN THE CARETAKER OF THE CHILD AND THE INCARCERATED MOTHER</td>
</tr>
<tr>
<td>Number (856 children)</td>
</tr>
<tr>
<td>Daily</td>
</tr>
<tr>
<td>Once or more per week</td>
</tr>
<tr>
<td>Monthly</td>
</tr>
<tr>
<td>Yearly</td>
</tr>
<tr>
<td>Never</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Table 2-13</th>
</tr>
</thead>
<tbody>
<tr>
<td>INSTITUTIONAL PROGRAMS FOR MOTHERS AND CHILDREN MOST FREQUENTLY USED BY INCARCERATED MOTHERS</td>
</tr>
<tr>
<td>Number</td>
</tr>
<tr>
<td>Parenting education</td>
</tr>
<tr>
<td>Children's center</td>
</tr>
<tr>
<td>Overnight family visits</td>
</tr>
<tr>
<td>None</td>
</tr>
</tbody>
</table>

Women who are pregnant when incarcerated

Roxanne W., age 30, is serving time in the Bedford Hills Correctional Facility in New York for assaulting a drug dealer. Roxanne has four children under 13 years of age. Now, in 1991, she is pregnant with her fifth child. She wants desperately to stay clean and to be a decent mother to her new baby. “Through the years,” she says, “the drugs were always there. I’m afraid if I don’t show my kids I can do something besides get high, they’ll do it too. All my other pregnancies were related to drugs. The right way to have children is drug-free.”
Special problems are presented by and for women who are pregnant when sentenced or who discover they are pregnant after they have been incarcerated.

Out of the 439 mothers responding to the NCCD survey, 38 gave birth while serving the present term of incarceration (9 percent). When asked where the baby lived, two thirds said that relatives had taken custody. Only three of the women had placed their child with adoptive or foster parents. Because 57 different outcomes were listed for 38 births, it is assumed that some of these infants moved from one disposition to another.

Pregnant prisoners require attention and care that is difficult to provide in a mainstream prison population. Their needs are discussed more thoroughly in Chapter 5 relating to the role and responsibility of corrections agencies.
The Caregivers of the Children of Incarcerated Mothers

Who cares for the children of incarcerated mothers?

The NCCD survey of incarcerated women indicates that most often, the children are cared for by their maternal grandmothers (37 percent of cases studied). Sometimes the children stay with their natural fathers, though only 17 percent of the 870 children studied by NCCD lived with their fathers while their mothers were in jail or prison. Other relatives—e.g., the mother’s sister or the father’s parents—may serve as primary caregivers during the period of incarceration. In some cases, the state may intervene to order placement of the child in non-relative foster care.

These caregivers face multiple problems when they accept responsibility for the children of women who have gone to jail or prison. They must deal with the trauma suffered by children whose mothers are arrested or imprisoned. They must define their relationship to the children as surrogate parents, and they must help the children cope with psychological and emotional problems. They must re-examine their relationship with the incarcerated mother and sometimes must reckon with personal disappointment or anger at the mother for her conduct and the resultant burden of care that has been thrust upon them. They must make time for visits with the incarcerated mother—visits which are often stressful for all involved. They must adjust their own households to accommodate children who are usually less than 10 years old. They must raise the financial resources to house, feed, clothe and care for young children, including some with special problems and needs.

From a research perspective, scant attention has been focused on this population of caregivers. To NCCD’s knowledge, no national survey of the caregivers of the children of incarcerated women has ever been
done. With the limited resources available for this study, NCCD was able to conduct a mini-survey of caregivers to identify some of their basic characteristics. For this purpose NCCD designed a caregiver survey consisting of a basic questionnaire about the caregiver and sub-questionnaires about each child of an incarcerated mother in his or her care.

NCCD received completed surveys from 35 caretakers with a total of 66 children of incarcerated mothers in their care. The sample is acknowledged to be small and the survey results do not purport to be a statistically reliable representation of national caregiver characteristics. The size of the caregiver sample was affected in part by correctional system confidentiality rules relating to studies of prisoner populations. The names of participating mothers were not revealed to NCCD. To maintain confidentiality, NCCD did not ask inmate-respondents to identify the caregivers of their children. Caregivers were found through a community-based agency survey which asked agencies to help identify caregivers that might be willing to participate in the study. This roundabout method produced only a limited number of caregiver contacts and survey responses.

The caregivers responding to the NCCD survey were, on average, 50 years old. Their ethnic distribution was 46 percent White, 34 percent African-American, 15 percent Hispanic, and 6 percent Native American. They had an average of 2.3 children in their care whose mothers were in jail or prison.

The average age of the 66 children in their care was 8.5 years. Forty-two percent of the children were African-American, 25 percent were Hispanic and 22 percent were White. The relationship of the caregivers to the children's mothers is shown in Table 3-1.

<table>
<thead>
<tr>
<th>Table 3-1</th>
<th>CAREGIVER’S RELATIONSHIP TO THE INCARCERATED MOTHER OF THE CHILDREN IN THEIR CARE</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Number (66 children)</td>
</tr>
<tr>
<td>Mother</td>
<td>39</td>
</tr>
<tr>
<td>Other relative</td>
<td>11</td>
</tr>
<tr>
<td>Non-relative</td>
<td>16</td>
</tr>
</tbody>
</table>

WHY PUNISH THE CHILDREN? 31
Caregivers were asked to identify their perceptions of the problems encountered by the children in their care. This question was the same one asked of incarcerated mothers (Table 2-8). As previously noted, the incarcerated mothers tended to understate the problems of their children when their perceptions were compared to those of the caregivers. The caregiver perceptions are shown below in Table 3-2:5

| Table 3-2 |
| CHILDREN’S PROBLEMS AS IDENTIFIED BY THEIR CAREGIVERS |
| Number (66 children) | Percent |
| Learning/school | 19 | 28.8 |
| Health/mental health | 2 | 3.0 |
| Behavioral | 18 | 27.3 |
| Teen pregnancy | 1 | 1.5 |
| Alcohol or drug | 2 | 3.0 |
| Other | 7 | 10.6 |

Several of the survey questions explored the caregiver role in facilitating contact between the children and their incarcerated mother. Caregivers overwhelmingly believed that contact with the incarcerated mother was helpful to the child, and nearly all caregivers in this small sample tried to promote such contact. See Table 3-3.

| Table 3-3 |
| CAREGIVER ROLE IN FACILITATION OF CONTACT BETWEEN CHILD AND INCARCERATED MOTHER |
| Number (66 children) | Percent |
| Believe contact with mother is helpful for child | 58 | 93.5 |
| Believe contact with mother is harmful for child | 4 | 6.5 |
| Help promote contact with mother | 63 | 96.9 |
| Do not help promote contact | 2 | 3.1 |
Most caregivers who promoted contact between the children and their mother did so by accompanying them on visits to the correctional facility (68 percent). Long distance phone calls were allowed by only 8 percent of the caregivers, and this is most likely a reflection of the cost involved. Fifteen percent of the caregivers encouraged the children to write letters to their mothers.

The ways in which the children were financially supported are shown in Table 3-4. In most cases, support came from combined personal and public sources, which is why the number of types of support shown in Table 3-4 exceeds the number of children supported.

| TYPES OF SUPPORT REPORTED BY CAREGIVERS OF CHILDREN OF INCARCERATED MOTHERS |
| Number (80 types of support for 66 children) | Percent |
| AFDC payments | 29 | 43.9 |
| Foster care payments | 7 | 10.6 |
| Child support payments | 3 | 4.5 |
| Caregiver’s own income | 28 | 42.4 |
| Other | 13 | 19.7 |

Two-thirds of the caregivers (65 percent) reported that the amount of support received was not enough to meet the necessary expenses of the child.

NCCD’s survey of caregivers was supplemented by interviews of caregivers in New York, California, Minnesota and Georgia. We asked them to describe how the children were doing, how they as caregivers had adjusted to their role and how they were meeting the increased financial burdens. The discussion below frames a number of current issues that emerge from our survey and interviews.

Personal adjustment to the caregiver role

It has been a total interruption in our lifestyle. We were ready to be grandparents, but not parents again.

This statement was made to an NCCD interviewer by the parents of an imprisoned California woman whose six-year-old boy was in their
care. The boy was born in prison and his mother had been incarcerated on and off for most of the boy’s young life. The boy’s father is also incarcerated. The grandparents struggle to adapt to their role and say that the boy “doesn’t know who he belongs to.” They receive AFDC payments and they must pay for treatment of the boy’s “attention deficit” disorder. They get some outside help from their adult son and from members of their church. They are afraid of what might happen when their daughter is released from prison, and they fear she will relapse into drug and alcohol abuse. Despite their troubles and worries, they are attached to the young boy. The grandmother says, “I feel he is my son now and there will be a real void if he goes back to live with his mother. I wonder if she will be able to care for him. I won’t give him back until there is some stability in her life.”

The abilities of caregivers to cope with their new parenting roles vary with the caregiver’s age, job and income status and other personal characteristics. In Black Grandparents as Parents, Dr. Lenora Poe discussed some of the difficulties faced by different kinds of caregivers:

\[\ldots\text{many younger grandparents still have jobs; they want to be with family and friends and have fun; and they tend to be active and have competing commitments. Older grandparents, on the other hand, tend to have been looking forward to retirement and leisure; they tend to have fewer outside commitments; and they tend to be significantly less family-oriented in their social network and lifestyle. \ldots}\]

\[\ldots\text{These grandparents usually do not have the patience, the energy, the stamina or the financial resources they had when they were younger and parenting their own children.}\]

For husbands who become primary caregivers, the conflicting demands of job and childrearing may be extremely difficult to resolve. “I found out how to become a mother real fast”, said Carl H., whose wife was arrested and imprisoned on drug charges, leaving him at home with three children aged 6, 12 and 16. Carl tried to keep his job but found that it just “became too much” to work and care for three kids at the same time. Now his family survives on AFDC payments, day-care help from a sister, and community programs that assist the children with counseling and recreational activities. Every month, Carl and his children take a bus from Manhattan’s Lower East Side to the prison where their mother is incarcerated. Carl is doing everything he can to bring the family back to-
gether when his wife is released from prison. But his job status remains uncertain; he thinks it might be necessary to move to another state "where the economy is better" to get a new start.

In short, each caregiver must reckon with the multiple facets of the new parenting role, and in most cases, the adjustment is a demanding one.

**Children’s adjustment to the caregiver**

Children have their own adjustments to make to the new caregiver situation. The adjustment may be easiest for children who, prior to their mother's incarceration, were already living in a three generation home which included their grandmother or some other relative. In these cases, the children may benefit because there is no relocation to a new home and they remain in the company and care of familiar, nurturing individuals.

Many children are separated from their siblings when their mothers are incarcerated. This can intensify each child's sense of isolation and can make it even more difficult for the child and the caregiver to adjust to the new living situation. Separation also compounds the mother's problem of maintaining contact with each of her children.

Everyone in the family must adjust to the confusion of young children about their identity in relation to both their mother and their caretaker. Poe noted that "as children attempt to deal with their ambivalent feelings about being parented by their grandparents, they seem anxious and confused about the absence of their biological parents in their lives." Young children may even begin to think of the caretaker as their real mother. This problem was illustrated by the account of a foster mother who brought a 3 year-old daughter to visit her mother in the Dwight Correctional Center in Illinois; the observer said, "It was pure agony for the mother to hear her daughter calling someone else Mommy."

In some cases, the caregiver may impose strict new rules of conduct which are stifling for the child. In the 1978 NCCD study, McGowan and Blumenthal described the experience of Cindy, who was six when she went to live with her aunt after her mother was imprisoned for killing her father. The aunt worried that Cindy would "go bad" like her mother, and she refused to let Cindy play with children her own age in the neighborhood. The interviewer described the atmosphere in the aunt's house as "stiff and formal."

Cindy's situation is probably atypical. One study which examined
African-American grandmothers caring for the children of their incarcerated daughters concluded that more than 80 percent of the caregivers provided a high quality of material and psychological care for their grandchildren.19 NCCD’s interviews with caregivers of all types suggest that most are primarily motivated by a desire to help the children and to normalize their development to the extent possible, in many cases at substantial personal sacrifice to the caregiver.

One prerequisite for a good outcome for the child seems to be a stable and nurturing caregiver environment. Children who are not provided with stable environments are placed at risk of additional emotional and psychological harm. One of the children described in the 1978 NCCD study was Bobby, a year-old infant whose mother was arrested for robbery. In the seven months following his mother’s arrest, Bobby was moved back and forth to nine different placements. These included an emergency shelter, the homes of a grandmother and two aunts, a couple of brief periods with his mother before she was imprisoned and two foster homes. This account underscores the obvious requirement that the child should be placed in a stable environment as soon as reasonably possible.

The incarcerated mother’s relationship with the caregiver

The preference of incarcerated mothers for their own mother or a close relative to act as caretaker of their children has been documented by a number of studies. Kiser, who interviewed a group of incarcerated women at the Dwight Correctional Center in Illinois, summarized the preference for relative caregivers as follows:

*Mothers much preferred placement with family members. That would keep the children from being thrust into a family of strangers, allow them to be with people who really cared for them and enable them to keep their family identity. Moreover, respondents thought family members would be more likely to encourage children to visit and maintain a close relationship with the mother. Finally, mothers thought they would be far more likely to get their children back if they were left with family members. . . . The most dreaded option was having the state take the children for adoption or placement in foster homes.*

The incarcerated mother is usually dependent on the caregiver for contact with her children. Some caregivers, including relatives, may dis-
approve of the mother’s conduct and criminal involvement and may seek to prevent contact between the incarcerated mother and her children. For example, Joanne B., serving time in a California prison, told our interviewer that her mother-in-law would not allow her two boys to visit with her in prison; when Joanne phoned from the prison, her mother-in-law would not allow the children to speak with her and on occasion would hang up on her.

Based on our caregiver survey, almost all caregivers believe that contact with the incarcerated mother is helpful for the child and almost all seek to promote such contact. NCCD interviewed a nonrelative foster mother in Minnesota who took two young children to visit their mother in Shakopee prison twice each month. The foster mother believed that the visits would help the children reunite with their mother when she is released. She said,

This is their mother. They have a right to know their mother. They were never really separated long enough to forget that she is their mother. For the kids, (visiting their mother in prison) is a way of life. For them it is fun, it’s a fun day out.

Prison visits are not always fun for the caregiver. How well they go depends on the attitudes of the mother, the children and the caregiver. It also depends on the prison staff and their attitudes and policies on contact between the mother and her children. In some cases, caregivers must travel long distances with young children, only to find upon arrival that the prisoner cannot be cleared and presented in the visiting area for another two or three hours. Many caregivers do not have their own automobile and must rely on public transportation. Taking two or three children on a hundred-mile bus ride to visit their imprisoned mother can be a grueling ordeal for even the most patient caregiver.

After the mother is released from prison she may return to live with her mother and her children, reviving the three-generation household which she left when she was incarcerated. This reunion may go well or badly, depending on many factors. Poe notes that return to the multigenerational structure “may revive the confusion around parenting boundaries for the grandchildren and precipitate another cycle of family disruptions.”

Financial problems of caregivers

I had been on medical disability for two years before I began parent-
ing my grandchildren. I was living alone and making it. Once I began parenting my grandchildren, it was six months before I received any financial assistance for them. I used all the money I had saved. I couldn't pay my bills, my house note, or anything. I lost all my credit and could not get anything. This was difficult and embarrassing for me. — Comment of a grandmother interviewed for a 1992 study of Black Grandparents as Parents in the San Francisco Bay Area.

Two-thirds of the caregiver-respondents to the NCCD survey said they did not have adequate financial support to meet the necessary expenses of the children in their care. In fact, most of the caregivers are poor to begin with. Dressel and Barnhill describe the population of caretakers in the Atlanta, Georgia “Aid to Imprisoned Mothers” program:

Our client records indicate that approximately 95 percent of caretakers are single females. Ninety percent of these women receive some form of public assistance, but the remaining 10 percent are also likely to be eligible and not accessing support. We estimate that about 70 percent of the women are over 50 years old and an uncounted number have older family members staying at the same residence.”

Federal and state funds are available to support the costs of food, shelter, medical care and related expenses for the children of incarcerated women. The primary sources are AFDC, state and federal foster care funds and Medicaid. While these sources of public funds are essential components of support for the children of incarcerated women, most caregivers find that the amount made available through these public programs is inadequate to pay for the full cost of care. In particular, AFDC payments may be substantially less than payments the caregiver would receive if eligible for state and federal foster care benefits. However, in some cases caregivers do not access foster care funds because they are uninformed about eligibility and application procedures; in other cases, state and federal regulations stand in the way.

A legal battle still rages over relatives' entitlement to foster care funds in some states. Some states restrict access to foster care benefits, allowing them to be paid only to non-relative foster parents after a child is placed in their home by order of the juvenile or family court. The United States Court of Appeals for the Ninth Circuit upheld this restriction in a 1989 Oregon case. In that case, a disabled teenager who lived with her aunt and uncle was denied access to foster care benefits, includ-
ing Medicaid, because the foster parents were related to the child. Two other child-plaintiffs in this case had to leave the home of their aunt and uncle because Oregon would not provide the benefits that the children could receive in non-relative foster care.24

Federal foster care (Title IV-E) funds are not subject to this restriction and may be provided to relative as well as non-relative foster parents. However, a prerequisite to eligibility for federal foster care funds is that the child be placed in the foster home pursuant to a court order. Federal regulations also require that the foster home, even if it is the home of a grandparent, be licensed or certified before support payments can begin. Moreover, if the relative caregiver is appointed legal guardian, the child is no longer considered a public agency responsibility and there is no entitlement to foster care benefits. These complex requirements may result in delay of much-needed support or in disqualification of the applicant from the program. They may also prove so discouraging to the prospective caregiver that he or she may refuse to care for the child.

Some states have established special programs to ensure that caregivers related to incarcerated mothers receive necessary public support. For example, under the “Kinship Care” program in New York City, relative caregivers are assisted in their efforts to provide homes for the children of incarcerated mothers and for other children who can no longer live with their parents. Under the program, relative caregivers receive the same foster care benefits as non-related caregivers. They also may meet foster care licensing requirements by complying with specialized and somewhat more forgiving standards. Kinship Care programs in some states have relaxed the barriers to placement of children with relatives and have re-balanced their foster care caseloads so that strong majorities of children are now placed in the homes of relatives.

Programs that help caregivers

It should be clear from the discussion that caregivers need help when they accept the responsibility of caring for the child or children of an incarcerated mother. The caregivers needs are integral to the welfare of the children. They need counseling to make the personal and psychological adjustment to caregiving and to understand the fundamental problems and needs of the children now in their care. They need advice on financial survival, including advocacy on their behalf as they face the

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maze of rules and procedures that may deter them from obtaining financial support. They can benefit from programs that facilitate contact between the children and their incarcerated mother, and from programs that lend a hand with some of the daily tasks of supervising and caring for new children in the household.

Only a few programs that meet these caregiver needs could be located by NCCD. One is the Grandparents as Parents program in Berkeley, California. This non-profit, community-based program holds group meetings for grandparents who have taken on the primary caregiver role for various reasons, including incarceration of the mother. At the meetings, grandmothers discuss and receive advice on child protective services, legal guardianship, drug-affected babies, AFDC and foster payments, and other issues. By networking with each other, the grandparents can provide mutual support — for example, as babysitters and helpers when needed. In Atlanta, Georgia, a similar caregiver support group convenes at Aid to Imprisoned Mothers, a community-based agency which offers a variety of support services to incarcerated women and their children. More caregiver support programs like these are needed.
The decade of the 1980s saw sweeping reforms of the child welfare system in America. A major milestone of this reform movement was the passage of the federal Adoption Assistance and Child Welfare Act in 1980 (PL 96-272). This law revamped the requirements for states receiving federal foster care funds. It established new priorities, procedures and services for children at risk of removal from the parental home. The overall emphasis of the federal reform was to encourage the maintenance and reunification of families where reasonably possible and to avoid the needless “drift” of children in foster care.

The admirable goals of this child welfare reform movement have been difficult to implement in many states. The principal problem is one of resources. Reports of child abuse or neglect have surged in the United States. Many child welfare agencies at local levels of government are overwhelmed with cases, and they lack the personnel and resources for a service response which complies fully with new state and federal laws.

In theory, the children of incarcerated women would seem to be candidates for the benign intervention of child welfare workers delivering the family reunification services prescribed by federal and state child welfare reform laws. In practice, the child welfare system, even as reformed, does not respond in any routine manner when a parent is incarcerated. Even when child welfare workers do intervene, their response may be unhelpful to the mother or to the children for a variety of reasons suggested below.

One reason child welfare workers may not respond when a parent is incarcerated is that this circumstance, standing alone, does not indi-
that the children have been abused or neglected. In the absence of a
report of abuse or neglect, child welfare workers lack a jurisdictional or
legal basis for intervention. This does not mean that these children of
incarcerated women are beyond the reach of the welfare system; they will
become part of the local child welfare caseload if abandonment or neglect
is reported — for example, if police officers notify the agency that shelter
is needed for the children of an arrested mother.

Would it be wise to require the routine notification of child welfare
workers when mothers of young children are jailed or imprisoned? Most
child welfare experts interviewed by NCCD cautioned against such a
requirement of notification. First of all, there may be little reason for
intervention when the incarcerated mother has made suitable arrange-
ments for the care of her children. Secondly, there is some question
about the amount of help child protective workers can provide with lim-
ited resources and bulging caseloads. Finally, the intervention of the
public child welfare agency may actually work to the detriment of the
incarcerated mother because she may lose legal custody of her children
in court proceedings triggered by an investigation.

When the child welfare agency does assume jurisdiction of children
whose mothers are incarcerated, it is required to make "reasonable efforts"
to provide services that will promote the reunification of the incarcerated
mother and her children. The need for reunification services may be
especially keen in situations where the children are placed in the custody
of non-related foster parents, because these caregivers lack family and
emotional ties to the mother.

Child welfare agencies have been criticized by some advocates and
service providers for failure to deliver mandated reunification services to
incarcerated mothers and their children. Ellen Barry, Director of Legal
Services for Prisoners with Children in San Francisco, says that "it is rarely
the case that the parent receives any services from the welfare or social
services agency." From the child welfare worker's perspective, reunifica-
tion services are notoriously difficult to provide in situations where the
children are in foster care and the mother is in prison at some distance
from her children. Social workers in these situations may find it difficult
to facilitate visits to the correctional facility. They may, in some cases,
believe that reunification services are unlikely to succeed, based on the
mother's past behavior; sometimes, the social worker may carry a bias
or negative stereotype, blaming the “convict mother” for the problems encountered by her children and refusing to implement a strong reunification plan. One chief administrator of a large public child welfare agency told NCCD that child welfare workers “traditionally view the parents as the source of the problem.”

Even where child welfare workers do provide reunification services to incarcerated mothers, these mothers may find it difficult or impossible to meet the legal requirements for reunification. For example, child welfare laws provide for termination of parental rights if the incarcerated mother, who lacks freedom to maintain contact, has failed to maintain an adequate relationship with a child who is in foster care. Also, child welfare laws require periodic court reviews of child’s progress in foster care, but an incarcerated mother may have no meaningful opportunity to provide input at review hearings that would improve her chances of regaining custody upon release.

For children outside the service mandates of the child welfare system, the system has almost no obligation. By law, the system cannot intervene until abuse or neglect has been discovered or reported or until a caregiver has applied for public funds. By custom, the system does not make a special effort to add these cases to its rolls. In fact, of 59 child welfare agencies surveyed by NCCD for this study, less than half reported that they had any specific policies for children whose mothers were in jails or prisons. At the same time, 85 percent of the child welfare agencies polled by NCCD believed that “a closer working relationship with the correctional system would assist in family reunification.”

Positive steps for child welfare agencies

Though legal and jurisdictional rules keep many children of incarcerated women out of the welfare system, there is still much that the child welfare system can do once the case falls within its official purview. If the agency is making an initial placement choice, it can exercise the legal preference for placement of the children with extended family members. This does not always happen; as Ellen Barry notes, “placement with the extended family [may be] denied because of racial or class-based stereotypes or because of the de facto association between the relatives and the parent, a convicted criminal.”

Another positive approach for child welfare agencies is to ensure
that, once involved in the case, they have adequate support services to deliver. For example, the New York City Child Welfare Administration has developed a special program for incarcerated mothers and their children. Their "family connectedness program" facilitates family visits in jail or prison on terms and on schedules that encourage maximum family participation. The child welfare worker gathers the children from foster homes, transports them to the correctional facility and participates in the visit. The agency may also defray some of the costs of children's visits to their mothers. Robert Little, New York City's Child Welfare Commissioner, says that the new visitation program represents progress in a world in which "child welfare agencies often have more restrictive visiting policies than the Federal Bureau of Prisons."

Child welfare agencies should take special care to ensure that the population of women incarcerated in jails, as distinct from prisons, is included in the scope of agency service delivery plans. Women in jails generally serve shorter sentences than women in prisons, and they are usually closer to home. Their prospects for rejoining their children and families are more immediate than those of women who are in prisons for longer terms and at greater distances from their children. The cost to the public agency of providing support or reunification services to mothers incarcerated for short terms in local institutions may be considerably less than the cost of providing the same services over greater distances for longer periods of time. This is not to suggest that women in prisons should be moved down the priority list for service delivery; it is simply to say that mothers in jails deserve considerable attention.

Another way in which child welfare agencies can help in these cases is to acknowledge the needs of the caregivers of the children of incarcerated women. These needs have been discussed in detail in Chapter 3, especially in relation to the financial burden on caregivers and the refusal of some states to permit foster care payments to be made to relatives who take custody of children while the mother is imprisoned. Kinship Care programs, which qualify relative caregivers for foster care payments, are especially helpful because they deliver higher levels of public support to caregivers who need it.

While public child welfare agencies may have only a narrowly defined role to play in cases involving incarcerated mothers, private and community-based agencies are not bound by the same constraints. Pri-
Private agencies can focus a number of important services and resources on incarcerated mothers, their children and the caregivers of the children. We have already made reference to some of the privately operated programs that assist caregivers; other community-based programs, including those that work directly with the correctional system, are described in the next chapter. Some of the most sensitive and innovative work in this nation on behalf of the children of incarcerated parents is being done by private, non-profit organizations dedicated specifically to services for this clientele. These agencies deserve the full support of public child welfare agencies, all the more so because the public agencies must depend on the private sector to fill multiple service gaps.

Cooperation is needed, not only between public and private sector programs but also between public agencies with overlapping areas of responsibility. This is especially true for the child welfare and correctional systems. There is ample evidence that the overall level of cooperation between these two systems, in cases involving incarcerated parents and their children, is poor. In particular, these agencies need to devise better mechanisms to coordinate prison visits and to establish in-house correctional programs on parenting and family reunification. The role of corrections is discussed separately in the next chapter.

Finally, it should be said that some important questions remain unanswered about the role of child welfare agencies when mothers are incarcerated. Should legal and jurisdictional boundaries be expanded to permit or require the intervention of child welfare agencies in these cases? What new controls are needed to ensure that, once the case is in the welfare system, the mother is not deterred from reunification by the unbending rules of the legal process? These and other questions should be addressed by policymakers, including representatives of juvenile courts, child welfare and corrections agencies. This can perhaps best be accomplished by state-level task forces commissioned to evaluate the mission of the child welfare system in these cases and to recommend statutory changes, state and federal, that may be necessary to produce the best outcomes for the children of incarcerated parents.
Role and Responsibility of Corrections

The tough new sentencing policies of the 1980s generated a boom in prison construction throughout the United States. Since women represent the fastest growing share of the new prison population, jails and prisons for female offenders have multiplied over the last decade. By 1991, these facilities held more than 87,000 women across the nation.

Federal, state and local corrections agencies that operate these prisons and jails are still coming to grips with the needs of prisoners who are mothers. While there are some penal institutions with model programs, many correctional agencies have failed to develop adequate policies and programs for incarcerated mothers and their children. To some extent, this results from decades of operating facilities for men, before the surge in the female offender population. Development of programs and policies for women offenders has also been hampered by new demands on correctional budgets in the states. Though many corrections agencies have survived budget cuts better than their counterparts in health and welfare agencies, corrections dollars have gone largely toward the operating costs associated with overcrowding and the operation of new or expanded facilities. Many correctional programs and services — including counseling, educational, vocational and parole services — have been eliminated.

While corrections administrators must deal with overcrowded facilities and budget crises, these factors do not excuse the lack of programs for incarcerated mothers in many states. One third of the incarcerated mothers responding to the 1991-92 NCCD jail and prison survey reported a total absence of programs for mothers and their children. McGowan and Blumenthal, in the 1978 NCCD study, found that
45 percent of women prisoners were receiving no services designed to help them plan for their children's future. Some of the inadequacies noted by the authors were: imprisonment at long distances from their children, restrictive visiting and communication policies, poor preparation for economic independence upon release and inadequate prenatal care for pregnant inmates. Pretrial facilities (jails and police lockups) were singled out for criticism as "especially injurious to women because they subject women to facilities planned for and supervised almost exclusively by men. . . . Visiting is sometimes prohibited and no jail personnel are available to help the mothers with problems concerning their children." 26

The ACA report on female offenders in 1987 presented survey findings from jail and prison administrators throughout the United States. Among 200 local government jails surveyed, only 47 percent allowed contact visits between incarcerated women and their children. The survey presented a much more positive picture of visitation policy for state Departments of Corrections; it reported that 98 percent of prison facilities in all 50 states permitted contact visits between incarcerated mothers and their children. The ACA survey did not thoroughly explore the nature or quality of these visits, except to identify the number of state correctional facilities that allowed "extended visits" (42 percent) and the number that offered on-site child-care during the visits (12 percent).

Issues that merit the attention of jail and prison administrators include the following: choice of placement for the inmate mother, programs for pregnant prisoners, the nature and quality of permitted contacts between mothers and their children, the development of services to enhance family unity upon release, and cooperation with child welfare and other agencies that share responsibility for the inmate mother and her children.

Community corrections options for incarcerated mothers and their children

Most state correctional agencies have the discretion to select the place of incarceration. Even where a defendant is sentenced by a judge to a state prison term, the state department of corrections usually makes the choice of institution where the prisoner is to be confined. Depending on the laws of this state, this administrative choice may

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include the option of placement in a community corrections program. Community corrections is a generic term describing non-institutional facilities for low-risk offenders in local or "community-based" locations. Usually these are small (6 to 20 person) residential centers with a specific program emphasis such as drug treatment or preparation for re-entry. Most are operated by private providers under contract with the state corrections agency. Increasingly, community corrections programs have become desirable as alternative-to-institution placements for incarcerated mothers and mothers-to-be.

One community corrections model for sentenced mothers is the Community Prisoner Mother Program established by legislation in seven California counties. The programs are located in San Francisco, San Jose, Oakland, Fresno, Salinas, Los Angeles and San Diego Counties. To qualify for the program, women must be classified as low security (sentenced to six years or less in state prison) and must be pregnant or have children under six years of age. Those fortunate enough to gain entry may participate in parenting classes, substance abuse counseling, and life skills and employment training. There is a pre-release phase which allows women to spend increasing amounts of time outside the facility as part of the step-by-step process of re-entry into the community. Perhaps surprisingly, not all the programs are filled to capacity; some of the advocates who promoted the programs have complained that they are under-utilized because corrections administrators have imposed overly restrictive rules of eligibility. Expansion of the California program to new sites has been opposed by some citizen groups who say they do not want prisoners of any sort, even mothers with children, in their neighborhoods.

NCCD gathered information on community-based residential programs for incarcerated mothers in the states of Minnesota, Wisconsin, Pennsylvania, Massachusetts, North Carolina and Texas in addition to the California program mentioned above. Some of these programs accept only pregnant women; others serve women with young children and are more broadly focused on the maintenance of family ties and on successful community re-entry. Some of these programs have recidivism data to substantiate their effectiveness as alternatives to institutional confinement. Brief profiles of these programs can be found in the Appendix.

While there are some excellent models of community-based alternatives to incarceration for pregnant women and mothers of young chil-
dren, these programs are too few and far between to meet the broader needs of children and their incarcerated mothers in America today. In California, for example, there were approximately 5,000 mothers each day in the state prison system in 1992 and only 100 community-based mother-infant care beds. Though no accurate national count of community-based residential programs for offender mothers has been made, NCCD estimates that community beds are available for less than one percent of their number.

Corrections administrators may believe that it is too difficult or too costly to make these programs more widely available. However, the alternative is to condone the continued deterioration of prisoner families and to keep children in foster care at state expense. From a public protection standpoint, most women prisoners in the United States are drug and property offenders who pose minimal public safety risks; the evidence suggests that many more could safely be supervised in community-based programs with their young children, while learning parenting and vocational skills. At the same time, the overall cost burden to the taxpayer could well be reduced by consolidating the costs of imprisonment and foster care into one, cost-effective alternative placement for the mother and her children.

Policies and programs for pregnant prisoners

According to the American Correctional Association national survey of female offenders in 1987, approximately 6 percent of women in prisons and 4 percent of women in jails were pregnant at intake. If these percentages are applied to the present population of incarcerated women, it would mean that more than 4,000 women now in jails and prisons were pregnant when admitted. NCCD’s own survey of 439 women prisoners participating in this study showed that 9 percent of the respondents gave birth while incarcerated.

Though the demand for perinatal services for women prisoners is strong, these services have been slow to develop. In the past, there were few services for pregnant women. Special diets and gynecological care were often not available, especially in jails. Counseling about options for the placement or adoption of the child was not always provided, and abortions were difficult to arrange. Once in labor, these prisoners were often taken to hospitals in shackles that were not removed until the
be was in the delivery room. After delivery, babies were swiftly separated from their mothers within 24 to 48 hours. If the baby was placed for adoption, the mother never saw the child again. If the baby went home with relatives, the mother's contact would be reduced to prison visits by the caretaker, and the child would be deprived of the opportunity to bond with his or her mother.

Litigation on behalf of these pregnant women has caused some improvement in the level of perinatal care. Some correctional administrators, including women running new facilities for female offenders, have promoted the needs of pregnant inmates and have made nutritional, gynecological and counseling services available to them.

Prison nurseries were popular at the turn of the century, but vanished over the years as lawmakers fashioned more punitive correctional sanctions for women. Now there are three prison nurseries in the nation, all in New York state. At the Bedford Hills Correctional facility, for example, women live in a nursery located in a converted psychiatric unit of the prison. After six months, the mother and child are moved to a single cell. The mothers are required to attend parenting classes, and they can remain in the nursery program until their child is about one year old.

New York has similar programs at the Rikers Island and Taconic correctional facilities.

Prison nurseries have been criticized by observers who claim that prisons, no matter how they are equipped or decorated, are no place for infants and young children. The superintendent of the Minnesota Correctional Facility at Shakopee, which dropped its prison nursery program, says “I have a real problem with raising kids in prison. It’s not a real good environment for the child.” Gail Smith, Executive Director of Chicago Legal Aid for Incarcerated Mothers, says of mothers and newborns: “We want them in community-based facilities where the orientation is on child development and family needs.”

Community corrections programs are ideally suited to the needs of pregnant offenders and inmate-mothers of newborns. In these programs, pregnant women can receive the prenatal care they need outside the routine of the mainstream prison population. Once the child is born, he or she can live with the mother in a homelike environment where parenting education can also be offered. Since these programs are operated primarily by private, community-based organizations, they are often in a good
position to link the mother to other community resources and to assist her in making the transition to home and family. Some of these programs are referenced in the Appendix. Unfortunately, these alternative-to-incarceration programs for pregnant offenders are too few in number and cannot meet more than a fraction of the nation’s total demand.

Visitation and support programs for incarcerated mothers

The day would begin at 9:00 a.m. and it would take hours to get to the prison and fill out all the papers. Sometimes we wouldn’t get into the visiting room until 2:00 p.m. Since we couldn’t take in any food, we’d have to eat from the vending machines in the prison.

Sometimes it cost forty or fifty dollars to visit. — Coralia G., sister of a woman in a Southern California prison and caretaker of her two children.

While it appears that about half of the nation’s jails and almost all prisons allow contact visits between incarcerated mothers and their children, this alone does not guarantee that the mother-child relationship will be preserved or strengthened.

Jail or prison visits can be stressful for the mother, the children and the caregiver who brings the children to the correctional facility. The stress may be compounded by rules that restrict contact. Plastic or glass partitions, required use of telephones to communicate or prohibitions against touching may intensify feelings of separation for both the mother and her children. Limits on visiting time may mean that there is no opportunity for a meaningful exchange.

Even social workers who take children to visit their mothers in correctional facilities may be frustrated by institutional procedures. A New York social worker described to an NCCD interviewer the day-long ordeal of transporting children from foster homes to a local jail operated by the New York City Department of Corrections. After a long wait for the bus, the social worker and the children often wait additional hours at the jail while the prisoner is found and taken to the visiting area. The children and the social worker are searched for security reasons; one social worker described having to remove her shirt and shoes and having her brassiere checked for contraband. The social worker and the children are sometimes exhausted by the time the visit is over, when they must begin the long trek back to the foster home on public transportation.

Some correctional administrators have established prison visitation...
policies and programs that acknowledge and accommodate the children's need for relaxed and comfortable contact with their mothers. One of the nation's most progressive visitation programs can be found at the Bedford Hills Correctional Facility for women in New York. Bedford Hills established a Children's Center in 1980 by dedicating a visiting area exclusively for children and their mothers. The Children's Center is designed to be a friendly setting for mother-child visits. NCCD interviewer Marci Brown made the following observations of visits between mothers and children at the Children's Center:

The children enter through a doorway above which a jaunty red, blue, yellow and pink rainbow has been painted. Next to the rainbow is inscribed: "Joy is unbreakable so it is perfectly safe in the hands of children." Inside the Center, bright blue and pink walls have been freshly painted by inmates and volunteers. Donated toys and games abound. Low, round tables with child-size chairs are placed throughout the room. The children play among themselves for a short while until their mothers are brought into the room. Then the mothers and their children play together or with other inmates and their families. Musical chairs is a favorite. They talk, celebrate birthdays with cakes arranged by volunteers and even disagree. For several hours, the prison cells seem a long way away.

While visiting programs help, they do not address all needs of these families. Many of the incarcerated mothers come from environments where poverty, unemployment, teenage pregnancy, domestic violence, child abuse and crime are predictable features of the local landscape. Some need fundamental parenting education. Bedford Hills operates a Parenting Center, which offers a variety of parent training programs. Participating women can receive basic education on childrearing topics such as nutrition and infant health. There is an eight-week class called "Choices/Changes" to help them improve decision making skills that are integral to parenting. Mothers can learn how to work with the child welfare system and how to improve the prospects of family reunification upon release.

The Parenting Center also helps mothers maintain contact with their children. Volunteers and staff help prisoners arrange visits. A Foster Care Committee of inmates and volunteers stands ready to help if there are problems with the caregiver — for example, to arrange substi-
tute care for the children if the caregiver becomes sick or injured. When a crisis arises with the inmates' children, the Bedford Hills program tries to help the mother address the situation. For example, a six year old girl whose mother was at Bedford was hit in the eye with a rock and was sent to a hospital. The doctor called the prison to discuss the treatment with the mother. The contact between the doctor and the mother was facilitated by the prison staff. Bedford Hills Superintendent Elaine Lord says,

When these things happen, someone in the program gets involved. We try to resolve the crisis if we can. When there are problems with the family on the outside, mothers get upset and frustrated. Sometimes the frustration leads to anger and to acting-out behavior, even violence. If we can prevent this frustration and anger by helping the mother take control of the situation, we can manage the crisis and the facility is easier to run.

Few state correctional systems can boast of mother-child programming that is as comprehensive and nurturing as the Bedford Hills program in New York. In California, which has the nation's largest prison system for women, visiting policies are less accommodating. Teresa Rocha is the former warden of the Northern California Women's Facility, an institution designed for 400 women that currently houses more than 600. She explains that while there are no special barriers to visits between incarcerated mothers and their children, no extraordinary steps are taken to facilitate these visits. Children visiting their mothers use the same general visiting area as other visitors. The institution does have an overnight family visitation program as well as access to a community-based, mother-infant program.

Community-based programs are working with correctional agencies in some states to facilitate prison visits and to provide family support services. For example, Aid to Imprisoned Mothers (AIM) is an Atlanta, Georgia, program that provides free transportation for family visits and recreational and educational activities for the children of incarcerated mothers; the AIM program also delivers advocacy and education services to imprisoned mothers to inform them of their parental rights and responsibilities and to assist them in obtaining necessary benefits and services. In another example, the Prison MATCH (Mothers and Their Children) program operates a Children's Center at the San Francisco County Jail. MATCH volunteers arrange special, four-hour visits
between detained women and their children (substantially longer than the 20-minute norm). The volunteers encourage inmate mothers to discuss childrearing problems and help link mothers with a range of outside community services. Other versions of the California Prison MATCH program have been established at the Chillicothe Correctional Facility in Missouri, at the Topeka Correctional Facility in Kansas and in Bexar County (San Antonio), Texas.

Corrections programs to facilitate the mother’s return to family and community

You just come out BAM! And you don’t know how to deal with it. You don’t have a family to go to half the time. You don’t have a home or a job. All this time you’ve been fantasizing about the way things are and the way things are going to be when you really have no way of knowing how they are. You can imagine the shock.

— Marian, a female offender describing her release from prison.

A critical juncture in the life of an incarcerated woman and her children is the moment of her release from prison. Unless special arrangements have been made, the prisoner leaves with a few dollars in her pocket and no job. In the worst-case scenario, she may not even know where her children are. Even if relatives are waiting to reunite her with her children, the sudden change in circumstances for mother and children may be trying and frustrating. The children, after a period of years in substitute care, may have developed school or behavior problems or may have grown emotionally distant from their mother; the mothers, coming from highly regulated prison environments, are now expected to manage their own lives while reasserting control over their children.

The NCCD survey of incarcerated mothers showed that the vast majority (78 percent) planned to re-establish a home with their children upon release from jail or prison. To be successful, most of these mothers will need help when they are reunited with their children, including financial assistance and personal and emotional support as they resume the role of primary caretaker. Yet, the mother may receive no services from public agencies, including corrections and child welfare agencies, as she enters this difficult period of adjustment.

The role of corrections in restoring a normal family life, is admittedly quite limited. Parole officers with high caseloads and few support
services are primarily concerned with managing and preventing recidivism, not with family reunification. Perhaps the most important role of corrections is the one performed prior to release, when corrections personnel have the opportunity to support the incarcerated mother with family visiting policies, parent education and personal skills development. After release, most support for the mother comes from her close or extended family, from local churches or from community-based agencies that specialize in services for incarcerated mothers and their children. For example, Prison Ministries with Women, located in Decatur, Georgia, specializes in helping women make the transition back to home and family. The program offers counseling, information and referral and material assistance to help women re-establish ties with their children and gain a foothold in the local community. In New York, Womencare, Inc. focuses its services on women released from New York State prisons, using volunteer-mentors to assist parolees with family reunification, referrals to housing, job training and other needs.

In general, correctional support programs for incarcerated mothers are scarce, falling far short of the overall need. Effective models for residential community corrections programs and incustody visiting programs can be found in some jurisdictions, but they have not been replicated as part of the general practice of corrections in the United States. The corrections community should acknowledge the needs of incarcerated mothers and their children at higher priority levels. In many cases, the adjustments required to facilitate mother-child visits or to establish linkages with community-based service programs are low-cost efforts that are unlikely to disrupt institutional routine.

The need for inter-agency coordination

There are limits to the corrections role in these cases. Similarly, child welfare agencies may lack a jurisdictional basis for intervention in these cases, thus placing incarcerated women and their children beyond the reach of support services which might underwrite successful reunification. It may be unrealistic, given state and local budget problems, to expect either system to increase costs by expanding its sphere of service delivery at the present time. Nevertheless, both systems can, at modest cost, improve their level of cooperation and coordination in certain key areas. For example, corrections agencies need to make jails and prisons

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accessible to child welfare workers who are providing reunification services to mothers whose children are in foster care; in particular, visitation policies should be coordinated in advance by representatives of both public agencies to ensure that mother-child visits occur as frequently and as smoothly as possible. In cases where the children have come under the jurisdiction of the child welfare system, welfare administrators need to work with corrections administrators to guarantee that the imprisoned mother remains informed of her rights, responsibilities and choices in relation to the future custody and care of her children. Both systems should work together to identify service gaps and to support the development of adjunctive, community-based services that can fill needs that public agencies are unable to meet.
We have already described what corrections and child welfare agencies can do to support the mother-child relationship and to meet the needs of children in out-of-home care. While many positive steps can be taken by these administrators, they cannot unilaterally raise the total level of care for these overlooked children. In fact, the ultimate responsibility for change lies at the highest legislative, executive and judicial branches of government. Some of the key policy changes needed are discussed in this chapter; others are addressed in the recommendations that follow.

The need for changes in sentencing policy

As previously described, new sentencing policies fashioned in the 1980s resulted in the rapid growth of the women's jail and prison populations in the United States. Mandatory sentencing laws and rigid sentencing guidelines have captured a growing share of female drug and property offenders, while diminishing judges’ discretion to select non-institutional outcomes for female offenders with young children.

These sentencing laws and guidelines need to be re-examined from the perspective of the children who are indirectly victimized by them. From this perspective, there is a need to amplify sentencing options for women with children.

This is not to suggest that women who commit crimes should receive lighter sentences than men with identical offenses. But it is to say that more sentencing options are needed to accommodate the state’s legitimate interest in the welfare of children.

To avoid patent statutory discrimination between women and men, sentencing reforms should establish specialized dispositions for qualified offenders who have young children. Statutes creating such alterna-
tive dispositions should probably make them available to offenders who are “primary caretakers” of young children, without regard to the gender of the caretaker. By making alternative dispositions available in this fashion, the state could implement a rational government interest in child protection while discouraging challenges based on equal protection and gender discrimination.

New sentencing laws making prisoner-mothers eligible for community corrections are meaningless if there are no community corrections facilities available. Thus, sentencing reform must begin with the establishment and expansion of community-based care facilities for women offenders with young children. Effective models for non-institutional residential care facilities have been described in the preceding text and are further referenced in the Appendix.

Procedurally, sentencing law adjustments can follow two paths. They can vest judges with discretion to order non-institutional placement after the defendant-candidate has met certain basic eligibility requirements. In the alternative, sentencing laws can bypass the judicial decision maker and delegate to the state corrections agency the authority to refer eligible prisoners to community-based care. The choice of approach will depend partly on which fits best with the statutory scheme of the state. Corrections administrators may be in the best position to make placement decisions because they can fully evaluate the offender upon commitment and make a placement choice based on examination of what is available; on the other hand, vesting the power in the administrative branch may destabilize community-corrections policy by exposing it to changing political currents as administrations come and go.

Role of judges, legislators and other policymakers in sentencing reform

For their part, judges must speak their minds on the subject. Lawmakers in particular will look to jurists for their opinions of proposals to modify criminal justice sentencing laws by establishing community care options for offenders with young children. The judges who make sentencing decisions have a substantial interest in proposals that seek to augment or diminish their zone of judicial discretion; depending on the proposals offered, judges in their wisdom may wish to assert a need for
greater judicial control over sentencing options for offenders who are mothers of young children.

The goals of alternative, community-based placement in these cases would be divided between accountability by the offender and rehabilitation of the family. These goals represent a consolidation of the corrections emphasis on sanctions and the child welfare interest in strengthening the mother’s ability to care for her children. This blend of goals may clash in the minds of policymakers considering proposals to expand community corrections options. Elected officials in particular are sensitive to public opinion about the effectiveness of the criminal justice system; many lawmakers are reluctant to endorse community corrections proposals for fear of appearing to be “soft on crime.” Legislators and other high level policymakers therefore must fully comprehend the problems of these children in order to justify the apparent novelty of blending corrections and child welfare goals in these cases.

All this would suggest the need for a public education effort, focused on law and policymakers at the highest levels of government. Unless policymakers understand the dimensions of the problem, they will be reluctant to support community care programs for offenders who are mothers, citing startup costs and the need to trim government budgets. The traditional compartmentalization of state budgets into corrections and child welfare agencies may also impede program development, with both agencies denying budget responsibility. In fact, the budgeting of community corrections programs for incarcerated mothers and their children should probably be a coordinated effort which effectively divides costs between these agencies, pro-rated for their areas of responsibility and for the cost-savings that may accrue to each from the alternative placements.

The federal government has in the past assumed a leadership role in the development of sentencing options. One example is the federal Juvenile Justice and Delinquency Prevention Act of 1974, which established a system of grants for states willing to invest in alternative-to-institution programs for juvenile offenders. In 1990 and 1991, legislation was introduced in the House of Representatives to establish “family unity demonstration projects” for incarcerated parents and their children in five states. Under the bill, states would be selected in a competitive grant process by the National Institute of Corrections. Funds would be used to
used to establish residential facilities where offenders who are primary caretakers could live with their children; in-prison visitation programs would also be supported by the legislation. Preference in the grant award process would be given to states making a commitment to “community placement as an alternative to traditional incarceration” and adopting a policy in favor of placing women in prisons located near their family homes. The bill further provides that the demonstration projects should be developed and operated with the cooperation of the state corrections agency and the state health and human services agency. Unfortunately, this legislation has floundered in the Congress and does not appear likely to succeed in the near term. The lack of broad Congressional backing for this measure underscores the need to educate high level policymakers on the subject as well as the need to generate greater grassroots sympathy and support.

The need to provide adequate levels of support for caregivers and children

A reform agenda must include plans to improve the level of support for the caregivers of children whose mothers have been incarcerated. In previous chapters we described the personal and financial burdens imposed on caregivers, as well as the special problems that grandparents and other relatives encounter when they open their homes to these children.

In particular, those few states which have stubbornly refused to provide foster care benefits to relative caregivers should take steps to adopt “Kinship Care” programs or to otherwise ensure that relative caregivers gain access to foster care funds. Caregivers have other needs, besides material support, which must also be addressed — for example, making backup care available in the event the caregiver is temporarily disabled.

Responsibility for the development of caregiver support policies and programs rests primarily with lawmakers and agency administrators in the states. In some sense, legislators bear special responsibility because they crafted the criminal justice reforms that drew so many mothers into prison while setting their children adrift. They must now acknowledge the impact of tough sentencing laws on the children of incarcerated parents, and they should take the initiative to repair some of the damage done by establishing adequate caregiver support programs in the states.

While we refer to caregiver support programs, it is the children we
seek to help. New laws and policies which assist caregivers in their role as parents must be carefully drawn to ensure that the children are the primary beneficiaries of the programs or services offered. Perhaps the best means of assuring the quality of caregiver programs is to involve, in the planning stages, the directors of community-based agencies that have pioneered the best models of caregiver support programs.

Public awareness as a foundation for policy reform

Any effort to reform public policy in this area must begin with strategies to increase public awareness of the problem. The plight of the children of incarcerated mothers is, by and large, an untold story. Few lawmakers are well-versed in this highly specialized subject. This study represents one effort to broaden national awareness and to establish an agenda for reform. While it can help, no single study can provide ongoing momentum for change.

One mechanism for assuring continued vigilance is to establish a policymaker group with future responsibility for implementation of the reform agenda. A task force of concerned and influential individuals is one such approach. The task force approach is especially suitable in this case because it would enlist the requisite cooperation of corrections and child welfare agencies within the states. NCCD would recommend that each state establish a Task Force on the Children of Incarcerated Parents, consisting of responsible administrators from corrections, child welfare and other relevant state agencies, with participation from the legislative and judicial branches of government and, all importantly, from the community-based agencies experienced in providing services to incarcerated parents and their children. These task force groups should evaluate current state laws and policies and should formulate specific legislative and programmatic proposals that will begin to meet the fundamental needs of the forgotten children of incarcerated mothers.
CHAPTER 7

Recommendations

This chapter presents NCCD's recommendations on behalf of the children of incarcerated mothers. All recommendations were developed in cooperation with members of the project Advisory Committee.

The recommendations are presented below as a list of proposals for action and reform. The rationale for each recommendation is presented in the text of the report, in separate sections dealing with the fundamental problems and needs of the children of incarcerated mothers (Chapter 2), the needs of the caregivers (Chapter 3), the roles of child welfare and corrections agencies (Chapters 4 and 5), and the responsibility of policymakers at the highest levels of government (Chapter 6). The reader is referred to the text for a full explanation and justification of the recommendations that follow.
A. Sentencing options in the criminal justice system must be expanded to meet the needs of children of incarcerated mothers. Lawmakers should change sentencing statutes as necessary to allow placement of qualified women offenders in non-institutional programs.

- The first priority for policymakers is to recognize the need to support the incarcerated mother's relationship with her children and the need to avoid unnecessary incarceration when safe and reasonable alternative dispositions can protect the mother-child relationship and meet the fundamental parenting needs of the child.

- Sentencing guidelines and mandatory imprisonment statutes should be reviewed to determine if they are unnecessarily rigid in relation to the needs of the children of female offenders. Where necessary, these guidelines and statutes should be adjusted to allow qualified women to be placed in alternative-to-incarceration programs where they can live with their children while serving their sentences.

- Where judges have discretion under present laws, they should take the mother's caretaker role into account with other factors and should consider various sentencing options — including non-institutional programs and sanctions — that will tend to preserve the family.

- Changes in sentencing laws are meaningless unless there is an adequate supply of community care programs for female offenders with young children. Legislators and correctional administrators should acknowledge the benefits of maintaining the mother's role as primary caretaker in appropriate cases, and they should act to establish alternative-to-incarceration programs for prisoner-mothers, such as the Community Prisoner Mother Program in California.
B. The caregivers of the children of incarcerated women — including grandparents, other relatives and non-related foster parents — must be empowered and equipped to care adequately for the children and to promote positive relationships with their incarcerated mothers.

- Caregivers face multiple problems when they accept the responsibility of caring for the children of incarcerated mothers. Public and private agencies must acknowledge the importance of the caregiver role as well as the caregivers’ needs for support. These needs include help in dealing with child welfare agencies, facilitation of visits and contacts with the incarcerated mother, access to good medical care for themselves and the children, and financial support.

- Community-based caregiver support programs, such as “Grandparents as Parents”, need to be more broadly developed so that caregivers can share information and obtain the support services they need.

- Many caregivers suffer financial hardship when they assume responsibility for the children of incarcerated mothers. These caregivers need full access to AFDC, foster care, Medicaid and related benefits. In many cases, relative caregivers can be assisted by rule waivers or specific procedures — such as special foster home licensing standards — which allow them to perform the caregiving role.

- States that persist in denying foster care benefits to caregivers who are related to the incarcerated mother should revise laws and procedures so that relative caregivers can receive the same foster care support as non-related foster parents. “Kinship Care” programs that encourage the placement of these children with relatives should be adopted in states which do not have them.

- Caregivers need to be fully educated about existing services and financial support to which they may be entitled to assist them in caring for the children of incarcerated mothers. Public agencies must assist caregivers in the often complex task of determining which benefits the caregiver may be entitled to receive.
C. The child welfare system must respond adequately when jurisdiction is established over the children of incarcerated women; to improve this response, child welfare agencies should establish better mechanisms to coordinate their reunification services with the correctional system.

- For various reasons, child welfare workers may fail to deliver appropriate reunification services to incarcerated mothers whose children are under their jurisdiction. Child welfare agencies should take steps to ensure that incarcerated women and their children receive adequate reunification plans and services when they are entitled to them.

- Child welfare workers making placement decisions for the children of incarcerated parents should make reasonable attempts to keep siblings together, to place the children with responsible relatives and to facilitate visits between the children and the incarcerated mother.

- Child welfare agencies should not recommend termination of the mother's parental rights solely on the basis that the mother has been incarcerated and is thereby unable to maintain frequent contact with her children.

- In those states which continue to deny foster care benefits to caregivers who are related to the children of incarcerated mothers, child welfare agencies should seek to reverse this policy, which is detrimental to the children, by making foster care benefits available to bona fide caregivers.

- Child welfare agencies should actively encourage the development of private-sector programs which can provide support services to the children of incarcerated women and their caregivers. As a first step, child welfare administrators should engage in departmental reviews of present levels of service and should identify service gaps which exist in these cases.

- State and federal policymakers should re-examine the role of the child welfare system in cases where it has no jurisdiction and is powerless to provide support services to the children of incarcerated mothers or their caregivers. These policymakers should explore the service needs of these families and should consider whether, from a public
policy and human service perspective, it makes sense to expand the jurisdiction of the child welfare system so that support services can be offered to mothers, children and caregivers without having to process the case as one involving abuse or neglect and potential termination of parental rights.

D. Correctional administrators and policymakers should adopt programs, policies and procedures which encourage mother-child contact and family reunification, both during the mother's incarceration and after she is released.

Whenever possible, every effort should be made to promote contact between incarcerated mothers and their children. This contact can be facilitated by policies and programs which include the following:

- Women should be placed in institutions closest to their children (when feasible).
- Visiting programs should accommodate work schedules and school schedules of visiting caregivers and children.
- Transportation and other support services should be provided to caregivers and children so they can visit frequently.

Correctional institutions should have child-centered visiting environments which facilitate a natural and caring communication between mother and child and which improve the quality of the relationship during the period of incarceration.

Pre-release programs should be instituted to assist mothers in preparation for return to their families, and to assist them with regaining custody, locating housing and employment and related needs.

Correctional administrators should help to establish non-institutional programs offering prenatal care to pregnant inmates, and they should establish programs which allow pregnant inmates to live with their babies in a non-institutional setting after birth. These programs can best be established under contract with private providers operating community-based programs for pregnant offenders and offender-mothers with young children.
In-prison nurseries and living programs — where children live with their mothers from birth to the age of one year — are viable options for some correctional systems even though they have declined in popularity and number in recent years. Where there is a choice, non-institutional residential programs for inmate-mothers and their children should be preferred over the placement of young children with their mothers inside correctional institutions.

Alternative places of commitment outside prisons should be made more widely available for prisoner-mothers and their children, and should be expanded nationwide. Corrections policymakers and administrators should support the development of these programs, at least on a demonstration basis, so that they can begin to serve a larger share of the national population of incarcerated mothers and their children.

E. The corrections and child welfare systems should coordinate efforts to serve incarcerated women, their children and the caregivers of the children.

Child welfare and corrections agencies should coordinate the delivery of mandated reunification and support services to incarcerated women, their children and the caregivers of the children. In particular, child welfare and corrections agencies should coordinate jail and prison visitation policies so that they can be as comfortable, natural and positive as possible under the circumstances.

Child welfare administrators, corrections administrators, judges, lawmakers and policymakers should work together to establish private-sector programs providing support services to incarcerated mothers, their children and the caregivers of the children. Such programs would include alternative-to-incarceration, residential facilities where qualified women offenders can live with their children; programs that facilitate institutional visits; programs that assist offender-mothers in the transition back to home and family; and programs specifically dedicated to caregivers and the children in their care. These programs are more likely to be established and to succeed if they have inter-agency and cross-disciplinary support.
Both the corrections and child welfare systems, in cooperation with the juvenile or family court, should take steps to ensure that incarcerated mothers have access to legal information and representation which may be necessary to assert rights or entitlements related to family reunification.

F. The responsibility for change must be acknowledged and accepted by policymakers, including lawmakers, judges and corrections and welfare administrators, at the federal, state and local levels.

- Lawmakers, whose tough sentencing laws have contributed to the sharp rise in the number of imprisoned mothers, should now acknowledge the needs of the children of incarcerated mothers. Lawmakers can do this by learning about the circumstances of the children, their mothers and their caretakers; by supporting community-based programs for qualified prisoner-mothers; and by compelling appropriate responses from corrections and child welfare systems.

- Executive branch leaders, including governors and agency chiefs at the state level, must take action to support the development of non-institutional programs for incarcerated mothers and their children.

- Judges and judicial organizations should evaluate state and federal sentencing laws and guidelines and should furnish law and policymakers with recommendations on sentencing reform and alternative programs for women offenders with young children.

- Federal grants programs should be established by the Congress to encourage the implementation of alternative-to-incarceration programs for mothers with children as well as programs and services for imprisoned mothers and their children. This could be started as a demonstration grant program of the National Institute of Corrections.
G. A focused and sustained public education effort is needed to ensure that the problems of the children of incarcerated mothers are more universally acknowledged and understood, especially by decisionmakers in correctional and welfare agencies, and by legislators and other policymakers who can change policy to meet the children’s needs.

- Private foundations and government agencies should be encouraged to learn more about the needs of children who are victimized by the experience of parental incarceration, so that they can be responsive to related funding and policy proposals.

- Commissions and Task Force groups should be established nationwide to ascertain the special needs of incarcerated women and their children, to draft state and local plans for reform and to implement those plans.

- Policymakers at the highest levels of government — including lawmakers, administrators and judges — need to be educated about the circumstances of incarcerated women and their children as a foundation for re-prioritizing programs and policies affecting these women and children.

- Advocacy and service organizations should consider and adopt position statements which recognize the needs of children of incarcerated mothers and which endorse suitable program and policy responses.

- Multiple public education strategies — including public hearings, conferences, panel discussions and editorials and op-ed pieces for broadcast and print media — should be employed to increase national public awareness about the children of incarcerated mothers.
Footnotes


2. AMERICAN CORRECTIONAL ASSOCIATION, The Female Offender: What Does the Future Hold? (1990). The ACA survey found that 79 percent of the adult women inmates surveyed were mothers; that 60 percent had more than one child; and that 72 percent still had legal custody of their children while imprisoned.


5. The estimate of 1.5 million is reported by the CENTER FOR THE CHILDREN OF INCARCERATED PARENTS, Report No. 6, "Children of Offenders," citing other research including BUREAU OF JUSTICE STATISTICS, "Correctional Populations in the United States," Washington, DC, 1989. The estimate of the California population of children of incarcerated parents is based on the Center's own research.


7. This estimate is based on percentages of incarcerated women with children under 18 and on other data from the BJS surveys of prisons and jails and from data developed in the NCCD survey of 439 women prisoners conducted in 1992 for this study.

8. There is a disturbing correlation between parental incarceration and subsequent incarceration of their children. The AMERICAN CORRECTIONAL ASSOCIATION survey of female offenders reported that 48 percent of adult female and 64 percent of juvenile female offenders had other family members who had been incarcerated. For female juvenile offenders in the ACA survey, 44 percent had mothers or fathers that had been incarcerated.


11. Ibid., pp. 52–53.

12. The institutions participating in the survey were the following: Federal Correctional Institution at Pleasanton (CA); Central California Women's Facility (CA); Sybil Brand Institute (Los Angeles, CA); Mira Loma Jail (CA); San Francisco County Jail (CA); Florida Correctional Institution (FL); Dwight Correctional Center (IL); Shakopee Correctional Facility (MN); Bedford Hills Correctional Facility (NY); Eddie Warrior Correctional Center (OK); State Correctional Institute at Waynesburg (PA); Gatesville Unit, Texas Department of Corrections (TX); Minimum Security Facility- Lorton (VA, serving Washington, DC).

13. These assigned sentence averages were calculated excluding 10 life sentences.
14. Each respondent was asked in a separate question how many children she had. Then each was instructed to complete sub-questionnaires for up to three minor children. Women with more than three minor children were asked to complete sub-questionnaires for the oldest, the youngest and one in-between.

15. Because the caregiver survey sample group was small, response percentages for the sub-groups of children's problems included in this table must be accepted with caution. Nevertheless, NCCD confirmed in interviews with women prisoners and caregivers that some prisoners offered more positive perceptions of their children's well-being than did caregivers of the same children.


17. Ibid., p. 82.


21. Poe, op. cit., p. 84.


23. A telephone survey of child welfare agencies in 50 states by the CALIFORNIA ASSEMBLY OFFICE OF RESEARCH in July, 1987 determined that 43 states had foster care payment programs that provided equal benefits to relative and non-relative caregivers while seven states did not. The seven states that failed to allow relative caregivers equal access to foster care benefits were California, Colorado, Hawaii, Oklahoma, Oregon, Maryland and Washington.


30. H.R. 5269 in the 101st Congress, which failed passage and was reintroduced as HR 2726 in the 102nd Congress, both by Representative Washington of Texas.
The following appendix contains descriptions of currently available programs for women offenders, their children and the caregivers of the children. While an effort was made to include some of the best-known programs, the list is not intended to serve as a complete and universal listing of all such programs in the United States. The reader is advised that there may be changes in program content, personnel or other program information occurring after the publication date of this book.

A. INSTITUTIONAL PROGRAMS
   Prison Nurseries
   Parent-Child Visitation and Support

B. COMMUNITY-BASED PROGRAMS
   Residential Programs
   Non-residential Programs
   Advocacy and Family Support
   Transitional Service Programs
   Long-Term Foster Care
   Legal Advocacy Organizations
Programs for Women Offenders And Their Children

A. INSTITUTIONAL PROGRAMS

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<td><strong>The Bedford Hills Nursery and Children’s Center</strong> (New York)</td>
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<td>Program Description:</td>
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The Bedford Hills Nursery is the first program of its kind in the country. Mothers and their infants share a room on a special floor of the Bedford Hills Correctional Facility hospital. Babies are born at a nearby hospital and may remain with their mothers at the prison nursery until they are one year old or longer if their mother's release is imminent. The Nursery program is closely tied to the parenting and children’s center. A focus of the parenting program is teaching mothers to parent themselves so they will lead healthier lifestyles, thus enabling them to better care for their children. Mothers also participate in parenting courses. The Children’s Center is available for weekday and weekend visiting and is staffed by prisoners who receive training in early childhood education.

*Clients Served:* Women at Bedford Hills Correctional Center who have babies while incarcerated, and other prisoner mothers and their children.

*Contact:* Sister Elaine Roulet, Director Bedford Hills Children Center 247 Harris Road Bedford Hills, New York 10507 (914) 241-3100, Ext. 352 |
| **Children’s Visitation Program (CVP)** (Michigan) |
| Program Description: |
The Children’s Visitation Program (CVP) is a project of the Michigan Council on Crime and Delinquency which provides mothers who are incarcerated at the Scott Correctional Facility in Plymouth, Michigan, an opportunity to visit with their children in a child-centered environment. The goal of the program is to intervene in the lives of the children by strengthening their relationships with their mothers. Services include weekly support groups and parenting classes.

*Clients Served:* Incarcerated mothers and their children.

*Contact:* Florida Andrews, Coordinator Children’s Visitation Program 3311 East Stadium Ann Arbor, Michigan 48104 (313) 662-6322 Marilyn Marshall, CVP Liaison Scott Correctional Facility 47500 Five Mile Road Plymouth, Michigan 48170 (313) 459-7400

**WHY PUNISH THE CHILDREN?** 73
M.A.T.C.H.  
(Mothers and Their Children)  
(Texas)  

Program Description  
M.A.T.C.H. is an educational contact visitation program for female prisoners incarcerated at the Bexar County Adult Detention Center. The program was modeled after the Prison MATCH Program at the Federal Correctional Institution at Pleasanton, California. It strives to maintain and strengthen parent-child relationships during incarceration of the mother.  
Program services for the mothers include advocacy, counseling, information and referral, support groups and educational workshops. Facilitators from the community teach parenting skills, self-esteem building, child development, drug abuse prevention, domestic violence prevention, healthcare, and GED.  
The core of the program revolves around contact visiting between the mothers and their children, and the utilization of parenting skills.  
Community M.A.T.C.H. provides ongoing services to women upon their release from jail. The program assists women in their transition back to their families and communities. Services include advocacy, counseling, networking, and referrals. Community M.A.T.C.H. also offers a support group for children.  
The M.A.T.C.H. programs are sponsored by Bexar County Detention Ministries, Inc.  

Clients Served:  
Incarcerated mothers and their children, and women who are released from jail and their children.  

Contact:  
Juliana A. Perez, Director  
M.A.T.C.H. 200 North Comal  
San Antonio, Texas 78207  
(512) 270-6330  

Rachel G. Cisneros, Program Assistant  
Community M.A.T.C.H.  
2926 South Presa  
San Antonio, Texas 78210  
(512) 532-2909  

M.I.L.K.  
(Mothers/Men Inside Loving Kids)  
(Virginia)  

Program Description:  
The M.I.L.K. Program is a unique venture among Virginians for Child Abuse Prevention, the community, Virginia Correctional Centers and the prisoners themselves. The program offers a multi-stage process including a four-part child development and a five-part parent education series, as well as quarterly extended visits for prisoners and their children. Upon release from prison, M.I.L.K. participants are connected to support systems in the community.  
Additional program components include classes in self-esteem, stress management and assertiveness training.  

Clients Served:  
Incarcerated mothers and their children.  

Contact:  
Johanna Schuchert  
Virginians for Child Abuse Prevention  
224 East Broad Street, Suite 302  
Richmond, Virginia 23219  
(804) 775-1777  

Mother Offspring Life Development (MOLD) Program  
(Nebraska)  

Program Description:  
The goal of the MOLD Program is to foster positive interaction between mothers incarcerated at the Nebraska Center for Women and their children. Children stay in prison with their mothers on a regular monthly basis for a five day period. The mother plans the activities that she and her child will engage in during the visit. The program has recently been expanded
to include incarcerated grandmothers and their grandchildren. Child development programs are offered to all women on a voluntary basis.

Clients Served:
Incarcerated mothers, grandmothers, and their children and grandchildren.

Contact:
Mary Alley, Coordinator
MOLD Program
Nebraska Center for Women
Route 1, Box 33
York, Nebraska 68467
(402) 362-3317

Prison MATCH (Mothers and Their Children)
(California)

Program Description:
Prison MATCH began as a program for mothers and their children at the Federal Correctional Institution at Pleasanton in 1978 and operated as a model program there for ten years. It also served as a model for the development of similar programs in other states.

In 1989, Prison MATCH left Pleasanton and has been operating a Children’s Center at the San Francisco County Jail in San Bruno. The Children’s Center provides a child-centered environment where incarcerated parents can spend quality time visiting with their children. The Center is staffed by volunteers and board members of Prison MATCH who have extensive expertise in the areas of early childhood education and family services.

Clients Served:
The program’s target group is an underserved population of primarily low-income prisoners and their children. The program is used by both males and females.

Contact:
Rose Weilerstein, President, Board of Directors Prison MATCH
1080 Miller Avenue

Berkeley, California 94708
(510) 524-3942

Project IMPACT (Inside Muncy Parents and Children Together)
(Pennsylvania)

Project Description:
Project IMPACT is a nonprofit organization that provides services to incarcerated mothers at the State Correctional Institution at Muncy, Pennsylvania. The purpose of the program is to strengthen the relationship between incarcerated mothers and their children through positive interaction.

There are three major components: 1) visitation, 2) transportation, and 3) social services. The Children's Center offers prisoner mothers and their children a place to visit in a comfortable home-like environment. Transportation to the prison is provided for the children and an adult companion. Prenatal education, individual and parent discussion groups, and assistance with family reunification, children's caretakers, and child welfare agencies are also provided.

Clients Served:
Incarcerated mothers and their children

Contact:
Yvonne Bowersox Social Service Coordinator
Project IMPACT
P.O. Box 493
Muncy, Pennsylvania 17756
(717) 546-3171, ext. 397

T.A.L.K. (Teaching and Loving Kids)
(California)

Program Description:
The T.A.L.K. program is a joint venture between the Correctional Education Division of the Hacienda La Puente Unified School District and the Los Angeles County Sheriff's Department. The program enables incarcerated parents to visit in a relaxed child-centered environment that encourages parent-child interaction.
The goal of the program is family reunification with an emphasis on effective parenting and enhanced communication between incarcerated parents and their children. The program serves as a state and national model.

Clients Served:
Incarcerated parents and their children at the following Southern California jails: Mira Loma Women’s Facility, Mira Loma Men’s Facility, Sybil Brand Institute, and Peter J. Pitchess Honor Ranch.

Contact:
Doris Meyer, Coordinator
Correctional Education Division
Hall of Justice
211 West Temple Street, Room 808
Los Angeles, California 90012
(213) 974-5096

The Women’s Activities and Learning Center (WALC)
(Kansas)

Program Description:
The Women’s Activities and Learning Center (WALC) is a program operated by the Kansas Department of Corrections at the Topeka Correctional Facility which helps maintain the mother-child bond by helping inmates increase parenting skills, enhance family relationships and increase self-esteem.

The WALC program originated from the Prison MATCH (Mothers and Their Children) program in California and the PATCH (Parents and Their Children) at the Chillicothe Correctional Facility in Missouri. The center’s visiting area provides a home-like setting for children to visit their incarcerated mothers separate from the institution’s main visiting area. During the visits inmates and their children are able to cook meals, and play in their rooms or in the recreation area.

Clients Served:
Incarcerated mothers and their children

Contact:
Gloria Logan, Coordinator
Women’s Activities and Learning Center
Topeka Correctional Facility
815 SE Rice Road
Topeka, Kansas 66607
(913) 296-7220

B. COMMUNITY-BASED PROGRAMS

Residential Programs

ARC House/ARC Community Services, Inc.
(Wisconsin)

Program Description:
ARC House is a residential treatment program for women offenders which also serves pregnant women and women with children up to age five. ARC House provides a women-specific program which addresses chemical dependency, past physical and sexual abuse, dependent and abusive relationships, criminality, health problems, employment and money management needs, alternative leisure time use, child abuse and parenting skills, and child custody and other mother/child reunification issues. As an alternative to prison, women work through a program of decreasing restrictiveness and increasing privileges for successful transition to the community.

Clients Served:
Women awaiting trial, women sentenced to the program, women released early from prison and parole violators.

Contact:
Karen Kinsey, Executive Director
ARC Community Services, Inc.
900 John Nolen Drive, Suite 130
Madison, Wisconsin 53713
(608) 257-3628
Community Alternatives for Mothers in Prison (C.A.M.P.)
(Minnesota)

*Program Description:*
Community Alternatives for Mothers in Prison is a state mandated program which seeks to address the needs of women prisoners at Shakopee prison who deliver babies while incarcerated. C.A.M.P. is a collaborative effort between three agencies: Minnesota Correctional Facility/Shakopee; Genesis II, an intensive day treatment program for women in conflict with the law; and Reentry Metro, a residential program for women offenders.

Women receive individual counseling and parenting education. Women who do not return to the institution receive employment assistance and help with identifying appropriate housing. Therapeutic day care is provided for the infants while the mothers are involved in classroom instruction.

*Clients Served:*
Pregnant prisoners and mothers and their infants.

*Contact:*
Michele Kopfmann, *Parenting Director*
Minnesota Correctional Facility/Shakopee
Box 7, Shakopee, Minnesota 55379
(612) 496-4480

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Community Prisoner Mother Program (Mother-Infant Care Program)
(California)

*Program Description:*
The Community Prisoner Mother Program is legislatively mandated and operated by seven private providers under contract with the California Department of Corrections. These programs are located in San Francisco, San Jose, Oakland, Fresno, Salinas, Los Angeles and San Diego. Mothers and their young children live together in small community-based facilities where mothers participate in parenting classes, educational and vocational training, substance abuse counseling, life skills training, and employment in the community. Child care is also provided.

The program is divided into three phases (Entry Phase, Program Phase, and Pre-Release Phase) allowing controlled but increased freedom outside the facility.

*Clients Served:*
Eligible pregnant and low security women prisoners (sentenced to six years or less in state prison) and their children under six years of age.

*Contact:*
Deborah Haffner, *Program Director*
Elizabeth Fry Center
1251 Second Avenue
San Francisco, California 94122
(415) 681-0430

Nola Gholson, *Program Director*
Turning Point Fresno Mother/Infant Program
3547 So. Golden State Blvd.
Fresno, California 93725
(209) 442-8331

Zale Neklason, *Program Director*
Volunteers of America Brandon House
1716 East San Antonio Street
San Jose, California 95116
(408) 258-3200

Harry Shim, *Program Director*
Volunteers of America Oakland East
2344 East 15th Street
Oakland, California 94601
(510) 534-3105

Joan Husby, *Executive Director*
Friends Outside in Monterey County Prisoner Mother-Infant Program
116 E. San Luis
Salinas, California 93901
(408) 758-9421
Neil J. Houston House/Social Justice for Women (Massachusetts)

Program Description:
Neil J. Houston House is one of the first community programs for pregnant prisoners in the United States. The program provides substance abuse services for pregnant women who have been incarcerated at the Massachusetts Correctional Institution-Framingham who are within 18 months of parole. Women are transferred to Houston House for intensive perinatal care and substance abuse treatment.

The program includes a 10 month residential and 12 month outpatient after-care component. Program participants learn parenting skills and prepare for successful transition to their home communities with their babies. Houston House continues to provide recovery services, assistance with family reunification, and medical care on an outpatient basis, after women leave the residential program.

Clients Served:
Pregnant prisoners who are within 18 months of parole, and mothers and their infants.

Contact:
Ruth Smith, Program Director
Social Justice for Women/
Neil J. Houston House
9 Notre Dame Street
Roxbury, Massachusetts 02119
(617) 445-3066

Mandela House (California)

Program Description:
Mandela House is a model residential program for pregnant, drug-dependent women in Oakland, California. The program offers continuous therapy in drug treatment and family counseling; child development and parenting skills training; nutritional and prenatal workshops. The program also provides perinatal services for the women and pediatric care for their babies.

Clients Served:
Drug-dependent women and their infants

Contact:
Minnie Thomas, Executive Director
Solid Foundation, Inc.
3723 Hillview
Oakland, California 94605
(510) 482-3217

The Program Center/The Program for Female Offenders (Pennsylvania)

Program Description:
The Program Center provides supervised residential services for women and their children, emphasizing parenting education, life skills training, GED preparation and vocational training. A case management approach brokers mental health, substance abuse treatment and children’s programs.

Clients Served:
Women awaiting trail, offenders sentenced to the program, and county and state parolees and their children.

Contact:
Marsha Hinton, Associate Director
The Program Center
3342 5th Avenue
Pittsburgh, Pennsylvania 15213
(412) 682-7380
Re-Entry Metro  
(Minnesota)  

*Program Description:*  
Re-entry Metro is a residential community corrections center for women with children referred by local, state, and federal courts and corrections agencies. Intensive client assessment, counseling, goal planning, and group work are designed to encourage women to make real life changes. Support groups focus on parenting education, domestic violence, sexual abuse, self esteem, money management, and the special issues of women of color.  
Re-Entry Metro utilizes an extensive network of community resources for offenders and brokers services such as healthcare, substance abuse treatment, job training and placement, and education (see also Community Alternatives for Mothers in Prison).  

*Clients Served:*  
Women awaiting trial, offenders sentenced to the program, and pregnant prisoners from Minnesota Correctional Facility/Shakopee  

*Contact:*  
Suzanne Koch, *Director*  
Re-Entry Metro  
444 Lynnhurst Avenue  
Saint Paul, Minnesota 55104  
(612) 644-1951  

**Summit House**  
(North Carolina)  

*Program Description:*  
Summit House is a community-based residential alternative to prison for pregnant women and mothers who have been convicted of non-violent offenses. A highly structured and closely supervised program of therapeutic intervention and services, including individual and group counseling, substance abuse counseling, and 12-step programs such as Narcotics Anonymous. Utilizing local agencies and educational institutions, the program addresses life issues such as parenting, health, addiction, family relationships, employment and social skills.  

*Clients Served:*  
Pregnant women and mothers convicted of nonviolent offenses and their children. Referrals are accepted from the courts, corrections, parole and attorneys for clients who need a structured program and who may not be eligible for other less restrictive options such as home confinement or intensive probation supervision.  

*Contact:*  
Karen V. Chapple, *Executive Director*  
Summit House  
608 Summit Avenue, Suite 103  
Greensboro, North Carolina 27405  
(919) 275-9366  

**Volunteers of America’s Mothers, Infants Together (MINT)**  
(Texas)  

*Program Description:*  
In cooperation with the Federal Bureau of Prisons and the court system, Volunteers of America operates this program for pregnant prisoners. The program teaches parenting and health awareness, and promotes mother/infant bonding.  
The program begins in the late stages of pregnancy and can continue through the third month after birth. Women who are pregnant when they begin their sentences are housed in a residential facility in Fort Worth, Texas. Mothers are given individual counseling, complete prenatal and postpartum care as well as exercise and information about nutrition.  

*Clients Served:*  
Pregnant prisoners and their newborn infants  

*Contact:*  
Dawna Bailey, *Director*  
Volunteers of America  
Northern Texas, Inc.  
2710 Avenue J  
Fort Worth, Texas 76105  
(817) 535-0853
Non-Residential Programs

ARC Center for Women and Children/
ARC Community Services
(Wisconsin)

Program Description:
ARC Center for Women and Children is a community-based, women's specific, alcohol and drug abuse day treatment program with services specifically for the children of the mothers served, including on-site child care for up to fifteen children 0-5 years of age, community child care placement, mother and child observation or "Mom and Me" sessions, parenting for the mothers, substance abuse prevention services for the children, and health education services for prenatal and postpartum care. The program is the state demonstration pilot for the development of a comprehensive, innovative substance abuse treatment program specifically for women.

Clients Served:
Pregnant women are given priority, but any woman with a substance abuse problem and her children may attend.

Contact:
Karen Kinsey, Executive Director
ARC Community Services, Inc.
900 John Nolen Drive, Suite 130
Madison, Wisconsin 53713
(608) 257-3628

Genesis II for Women, Inc.
(Minnesota)

Program Description:
Genesis II for Women, Inc. is a private, nonprofit agency which provides comprehensive services to women and their children in a community-based setting. Services include: counseling, individual and group therapy, childhood sexual abuse therapy, prostitution group, chemical health, African American and Native American Women's support groups; parenting education; adult education, GED preparation, career development, independent living skills; children's center, developmental daycare and school-age program for children (see also Community Alternatives for Mothers in Prison).

Clients Served:
Women offenders involved in the criminal justice system and referred by probation officers, attorneys and other professionals; women involved with the child welfare system and referred by child protection workers, attorneys and other professionals; infants, toddlers, pre-school and school-aged children of the women receiving services at Genesis II.

Contact:
Sheryl Hayward-Beagle,
Executive Director
Genesis II for Women, Inc.
3036 University Avenue S.E.
Minneapolis, Minnesota 55414
(612) 348-2762

Advocacy and Family Support

Aid to Imprisoned Mothers, Inc. (AIM)
(Georgia)

Program Description:
Aid to Imprisoned Mothers (AIM) is a community-based nonprofit organization which assists inmate mothers, their children and family members. The mission of the agency is to preserve and strengthen the family by diminishing the impact of incarceration on the mother-child bond. AIM's model of service is intergenerational. Often a mother's imprisonment puts three generations at risk; the mother herself, her children and the grandparents who so often become the children's caretakers.

AIM concentrates its efforts in two areas: (1) advocacy/education and (2)
The Center for Children of Incarcerated Parents
(Pacific Oaks College and Children's Programs) (California)

Program Description:
The Center for Children of Incarcerated Parents was created for purposes of improving documentation on and demonstrating model services for children of offenders. The mission of the center is the reduction and prevention of second generation incarceration.

The Center's program has four major components. The Information Component serves the community's need for information, program development and documentation. The Education Component serves the needs of incarcerated and ex-offender parents. The Family Reunification Services Component serves the needs of families in the criminal justice system, while the Therapeutic Component serves the needs of offenders' children.

Clients Served:
Incarcerated and ex-offender parents, children of offenders, offender family members, correctional agencies, and community-based programs.

Contact:
Denise Johnston, M.D., Director
Center for Children of Incarcerated Parents
714 West California Boulevard
Pasadena, California 91105
(818) 397-1396

Grandparents as Parents Support Group
(California)

Program Description:
Grandparents as Parents is a support group for grandparents who are full-time caregivers of their grandchildren. The group shares and explores concerns, experiences, and information. Topics of discussion include the reasons why grandchildren are placed with grandparents (i.e., social service placements, mother's incarceration, teen mothers who live with their parents, etc.).

In addition, issues such as the effects of drug abuse, sexual, physical, and emotional abuse, and medical problems are discussed. Guest speakers are invited to address the support group on a range of topics including drug affected babies, legal guardianship, child protective services, financial issues, and available support services.

Clients Served:
Most are maternal grandparents who are the primary caregivers for their grandchildren.
Transitional Service Programs

Helen B. Ratcliff House
(Washington)

Program Description
The Helen B. Ratcliff House is a combination work/Training Release and Pre-Release Facility for women co-sponsored by the Washington State Department of Corrections and Pioneer Human Services. The Ratcliff House program facilitates transition from the highly structured environment of an institution to independent living upon return to the community.

The program helps residents to foster skills and attitudes that will contribute to their personal growth. In addition to employment readiness and placement, ongoing groups deal with self-esteem building through life skills and anger management training. Substance abuse counseling and 12-Step programs are offered, as well as health care classes and recreational activities.

The Helen B. Ratcliff program also facilitates residents' reunion with their children, and offers parenting classes and overnight visits with their children.

Clients Served:
Women offenders who are eligible for work/training or pre-release, and their children up to 12 years of age.

Contact:
Tony Fuoco, Director
Helen B. Ratcliff House
1531-13th Avenue
South Seattle, Washington 98144
(206) 720-3005

Prison Ministries with Women, Inc.
(Georgia)

Program Description:
Prison Ministries with Women, Inc. was established as a bridge for women prisoners to ease their release from prison and their re-entry into the "free world." Prison Ministries for Women is the only organization in Georgia and one of the few in the nation that specializes transition services for ex-prisoner women and their children. Once released, women are offered individual counseling, information and referral services, and direct assistance with food, clothing, household items, rent, utilities, and transportation. Alcohol and drug treatment is also made available.

Prison Ministries for Women also operates two transitional residences; one which provides housing for homeless newly-released women, and the other which provides affordable housing for employed women and their children.

Clients Served:
Women ex-prisoners and their children

Contact:
Barbara Gifford, Director
Prison Ministries with Women, Inc.
P.O. Box 1911
Decatur, Georgia 30031-1911
(404) 622-4314

Womencare, Inc.
(New York)

Program Description:
Womencare, Inc. is an advocacy/mentoring program for mothers released from New York state prisons. Volunteer mentors develop a trusting relationship, provide encouragement and a support system for mothers and their children during the transition back to their communities. Services include family reunification, identification of community resources, referrals to housing, social services, job training and placement.
Clients Served:
Women prisoners who are within 90
days of release

Contact:
Eileen Hogan, Executive Director
Womencare, Inc.
236 W. 27th Street
New York, New York 10001
(212) 463-9500

Long-term Foster Care for the Children of
Incarcerated Mothers

My Mother's House
(New York)

Program Description:
My Mother's House is the only long-term foster care home in the country that caters specifically to the children of incarcerated mothers. It opened seven years ago as part of the Providence House network in New York, whose mission is to serve women and children in need. Operated by the Sisters of St. Joseph, My Mother's House is a licensed foster care home usually serving six children at any given time.

The goal of the program is to maintain the bond between incarcerated mothers and their children. Most of the mothers serve their sentences at Bedford Hills or Taconic Correctional Facilities in Bedford Hills, New York.

Clients Served:
The program is licensed to serve six children who had a previous relationship with their mothers prior to her incarceration. The age of the children ranges from 10 months to 19 years old.

Contact:
Sister Teresa Fitzgerald
My Mother's House
36-30 12th Street
Long Island City, New York 11106
(718) 392-7734

Legal Advocate Organizations

Chicago Legal Aid to Incarcerated Mothers, Inc. (CLAIM)
(Illinois)

Program Description:
Through public information and advocacy, CLAIM strives to promote programs and improve government practices to benefit the children and families of imprisoned mothers. CLAIM serves women in seven correctional centers throughout the state of Illinois. Classes are offered on parental rights and responsibilities and criminal law. CLAIM also provides legal representation to women with child custody problems and other family law issues. Services for released women are also provided through CLAIM's weekly support group, Visible Voices. A Handbook for Incarcerated Parents in Illinois offers useful information regarding parental rights, child custody, legal guardianship and relatives as caregivers, foster care, and visitation.

Clients Served:
Imprisoned mothers, their children and families

Contact:
Gail T. Smith, Executive Director
Chicago Legal Aid to Incarcerated Mothers
205 West Randolph, Suite 830
Chicago, Illinois 60606
(312) 332-5537

Legal Services for Prisoners with Children (LSPC)
(California)

Program Description:
Legal Services for Prisoners with Children is a statewide legal services support center focusing on the civil legal needs of prisoners, their children, and family members. Founded in 1978, LSPC provides advice and consultation, litigation assistance, training and technical
assistance, and extensive written materials to lawyers and legal advocates working with prisoners and their families.

**Clients Served:**
Incarcerated parents, their children, and family members, lawyers and legal advocates.

**Contact:**
Ellen M. Barry, Director
Legal Services for Prisoners with Children
1535 Mission Street
San Francisco, California 94103
(415) 255-7036

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**The National Women's Law Center**
**Women In Prison Project**
(Washington, D.C.)

**Program Description:**
The Women in Prison Project is an innovative program which confronts and redresses a range of issues facing incarcerated women. The Project focuses specifically on providing legal, technical and practical assistance to, and advocacy on behalf of, women incarcerated by the District of Columbia Department of Corrections. The Project provides needed assistance with family law issues, principally cases involving child custody. It also assists women in obtaining public benefits and housing upon their release. Additionally, the Project has been in the forefront in terms of advocacy regarding health care needs of pregnant and post-partum women and their children.

The Project has been involved in public education both on the local and national level on these issues.

**Clients Served:**
The Project provides legal services to approximately 800 women incarcerated at the Lorton Minimum Security Annex, the Correctional Treatment Facility, the District of Columbia Central Detention Facility (“D.C. Jail”) and in halfway houses. Eighty percent of these women are mothers.
Bibliography


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crowded and Overused.” San Francisco, CA: NCCD.

**ABOUT THE AUTHORS**

**BARBARA BLOOM, M.S.W.**
is a nationally recognized expert on women in the criminal justice system. She is a consultant and researcher specializing in the development of community-based programs for women offenders and their families. Ms. Bloom recently served as a member of the Blue Ribbon Commission on Inmate Population Management which produced a comprehensive community corrections plan for California.

**DAVID STEINHART, J.D.**
is a California attorney and consultant on child, youth and family issues. Previously he was the Director of Policy Development for the National Council on Crime and Delinquency. A respected advocate of alternative-to-institution programs for children and youth, Steinhart was the principal draftsman of landmark juvenile justice legislation in California removing children from adult jails and lockups.
In the last decade, the number of women in our nation’s jails and prisons has tripled. Three-fourths of these women are mothers — most with young children. A surprisingly large number are pregnant when jailed or imprisoned. What happens to the children of these incarcerated women? Some go into foster care. Some stay with relatives. Many suffer the consequences — psychological, emotional and economic. Some will never live with their natural mother again.

This work presents new research findings on the children of incarcerated mothers. It offers a current appraisal of the needs of the children, their mothers and their caregivers. It presents a national agenda for reform that should be of interest to every child advocate, corrections or welfare administrator, executive branch leader, lawmaker, jurist and concerned citizen.

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