Spring 2005

Women in Prison in Massachusetts: Maintaining Family Connections

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WOMEN IN PRISON
IN MASSACHUSETTS:
MAINTAINING FAMILY
CONNECTIONS

SPRING 2005

Erika Kates
Paige Ransford
with
Carol Cardozo
About the Center for Women in Politics and Public Policy

Established in 1994, the Center is located at UMass Boston’s John W. McCormack Graduate School of Policy Studies. The Center’s mission is to promote women’s leadership in politics and public policy by providing quality education, conducting research that makes a difference in women’s lives, and serving as a resource for the empowerment of women from diverse communities—in Massachusetts and across New England.

The Center runs a Graduate Certificate Program for Women in Politics and Public Policy—a one-year, full-time graduate program combining rigorous academics and practical skill building in politics and policy making within an environment supportive of women, and offers a range of educational forums on issues of concern to women, which are open to the public.

The Center has a long track record of research that includes analysis of women’s political status in New England; the intersection of gender, race/ethnicity, and political representation; and a wide range of public policy issues, including women and workforce development, welfare reform, women in the criminal justice system, and reproductive rights. We also maintain a library and information resource center, with extensive holdings that are available in an online searchable database.

This report on Women in Prison and Family Connections in Massachusetts touches not only on issues that are relevant to Corrections Departments across the nation as they examine the need for gender-specific policies for women, but also on policy areas affecting family and child welfare, including Public Health, Social Services, Juvenile Justice, and Public Assistance.

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WOMEN IN PRISON IN MASSACHUSETTS:
MAINTAINING FAMILY CONNECTIONS

A RESEARCH REPORT

Erika Kates
Paige Ransford
with
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ACKNOWLEDGMENTS:

We extend special thanks to the following people who responded to our survey and other inquiries and provided us with valuable information:

Mia Alves Caseworker, Massachusetts Department of Social Services
Tracy Burton Family Services Specialist, Women’s Unit, Hampden County House of Correction
Maureen Clark Catholic Chaplain, MCI Framingham
Rhonda Coleman Director of Family Services, MCI Framingham
Nicholas Costello Executive Director, Link House, Essex County
Kate De Cou Deputy Superintendent, Director, Women’s Unit, Hampden County House of Correction
Edward Foley Acting Superintendent, MCI Framingham
Jean Fox Executive Director, Aid to Incarcerated Mothers, Boston
Helen Houle Case/House Manager, Maris Center for Women, Essex County
Rhiana Kohl Research Director, Massachusetts Department of Correction
Paul Lucas Captain, Records/Classification, Barnstable County House of Correction
Richard Manning Ombudsman, Massachusetts Department of Social Services
Mary Ellen Mastrorilli Superintendent of Community Correction, Suffolk County House of Correction
Kimberly Jo O’Hara Assistant Superintendent, Women in Transition, Essex County
Marilyn Paniccia Caseworker, Suffolk County House of Correction
Mary Pfister Lead Counselor, Women’s Unit, Hampden County House of Correction
Julia Sullivan Assistant Deputy Superintendent, Berkshire County House of Correction
Elizabeth White Former Caseworker, Massachusetts Department of Social Services
John Zewski Lieutenant, Franklin County House of Correction
Barbara Zimbel Attorney, Greater Boston Legal Services

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EXECUTIVE SUMMARY

“The family is probably this country’s most valuable weapon in fighting crime. Prisoners who receive visitors, maintain family ties, and are released to a stable home environment are more likely to succeed in leading productive, crime-free lives.”

The National Context

In 2003 101,000 women in the U.S. were incarcerated in federal and state prisons (exceeding 100,000 for the first time in history). Another 80,000 were held in local jails, making a total of 181,000 women in prison. Although this is a relatively small number compared to almost two million incarcerated men, it is nevertheless a significant number. Further, there has been a steady and rapid increase in the number of incarcerated women (in 1980, 11,000 women were held in state and federal prisons) and the annual rate of increase for women is now greater than it is for men (5 percent compared to 3.3 percent).

In the absence of accurate data, we applied the findings of studies showing that typically 70-80 percent of women in prison were mothers of 2.3 children. We estimated that 136,000 of the 181,000 incarcerated women were mothers of approximately 314,000 children under the age of 18 (20 percent of whom were under the age of 5).

Because 65 percent of women inmates were the primary caretakers of their children before being incarcerated (compared to 25 percent of male inmates), the children of mothers in prison experience far greater dislocation than the children of male prisoners. A national study in 1997 revealed that 53 percent of children of women inmates were placed with a grandparent, 28 percent were placed with their fathers, 25 percent were placed with other relatives, and 10 percent were placed in state custody.

Maintaining Family Connections

Child welfare experts argue that three critical components are necessary to maintain parent-child bonds between mothers in prison and their children: a.) supportive contact visiting between mother and child; b.) support for and monitoring of children separated from their mothers; and c.) assistance for parents in understanding how to interact with their children and to become better parents.

Yet most children have little if any regular contact with their incarcerated mothers. The 1997 national study also showed that half of the mothers in prison never received a visit from their children, one-third never received a phone call, and one-fifth never received mail. It revealed that the number of family contacts appeared to have declined over the previous two decades.

Most children are affected deeply by this separation. Even children who have experienced neglect may want information about and some communication with their mothers. In addition, many children are separated from their siblings.

Children’s responses to this separation vary according to many factors—including their ages and the information they have been given. Generally, children between the ages of 2 and 6 are more likely to experience separation anxiety, guilt, and shame, whereas older children may experience withdrawal and rage.

Caregivers may create a “conspiracy of silence” as they try to protect children from what they consider embarrassing information. Children sense this silence, often interpreting it to mean their parents are in danger, have rejected them, or they (the children) did something to drive the parent away.
Alternatively, caregivers may lie to the children, telling them that their mothers are in the hospital or away on a trip.

Without skilled intervention, children can develop serious behavioral problems and negative coping patterns, including poor school performance, sexual aggression, gang involvement, substance abuse, and juvenile delinquency (one study found that 29 percent of the 11- to 14-year-olds with mothers in prison subsequently were arrested and/or incarcerated).

Obstacles to Family Connections

The following factors, often in combination with one another, have been identified by researchers as creating obstacles to family connections:

- The isolated location of women’s state prisons, combined with poor or nonexistent public transportation, creates a significant barrier to maintaining family connections.

- Restrictive correction policies governing visits and phone contacts; the lack of timely legal advice on child-custody issues; inadequate substance-abuse and mental health treatment; insufficient parenting resources; lack of good-quality pre- and postpartum care; the removal of infants born to women in prison; and in general the lack of availability of gender-based programming and gender-sensitive classification.

- Policies of other state agencies also affect family connections. Although child-welfare agencies may require that children in their care or under their supervision maintain contact with their mothers, the availability of staff and the isolated locations of prisons may prevent regular contact. Adoption policies designed to prevent children languishing in foster care may lead to the speedier termination of custody of women in prison; lack of mental health and public health agencies’ involvement in prison programming may limit women’s treatment options; and welfare policies restricting benefits (cash, housing, and food) for women with criminal histories affect their chances of reunification with their children.

- Women’s personal histories often impede family connections. It is widely documented that women in prison have experienced widespread abuse (emotional, physical, and sexual) and have a high incidence of drug abuse and mental health problems.

- The length of women’s sentences affects family connections. However, it is not only the longer sentences that create problems for family members. Research shows that women who commit the types of offenses that typically receive short sentences are often recidivists and their chances of reuniﬁcation decline dramatically each time they are incarcerated.

- The dearth of data on women in prison and their children restricts the development of family connections policies and resources. The lack of information on the quality, quantity, and effectiveness of prison programs and resources is also problematic. In addition, difﬁculties arise when women in prison withhold data on their children for fear their children will be removed from their custody.

Creating a Family Connections Policy Framework

“Recognizing the centrality of women’s roles as mothers provides an opportunity for the criminal justice, medical, mental health, legal, and social service agencies to develop this role as an integral part of program and treatment interventions for women.”

Women in prison have traditionally been either ignored or marginalized, and not until the past decade has the language of gender-specific practices been widely discussed. The lack of a comprehensive family connections policy framework restricts both the development of family connections policies and the means by which to assess them. In the absence of such a policy framework, we created a Family Connections Policy Framework. It has four components intended to span all phases of involvement women may have with law enforcement, criminal justice, and correction systems.
• **PREVENTION** refers to policies designed to prevent the separation of family members in the first place by reducing the number of women who are incarcerated, especially for nonviolent offenses.

• **ANTICIPATION** refers to protocols to anticipate the separation of mothers and children at the points of arrest, arraignment, and sentencing.

• **ACCOMMODATION** refers to policies to facilitate family connections once women are incarcerated, and addresses contacts, therapeutic intervention, and parenting skills.

• **REUNIFICATION** refers to policies to ease women's transition from prison to the community, and to reunification with their children.

• **INFORMATION** is generic to all four components and addresses the availability of data to inform policy needs assessments, planning, implementation, and evaluation.

We apply our Family Connections Policy Framework to Massachusetts policies. Since we are concerned here with incarcerated women, we analyze the ACCOMMODATION, REUNIFICATION, and INFORMATION components.

Exploring Family Connections Policies in Massachusetts

Before we describe family connections policies, we provide a context for them by describing the current female prison population in Massachusetts and correction facilities available to them.

Mothers in Prison in Massachusetts

In order to determine how many children are affected by their mothers’ incarceration, we needed to learn how many mothers are incarcerated annually, how many children they have, and how much contact they have with their children. We were unable to obtain these data.

• We know that on January 1, 2003, there were 535 women in MCI Framingham (the only women’s prison in Massachusetts). This number represented 6 percent of the total inmate population, but indicated a 7 percent increase over 2002 (compared to a 2 percent decrease for the number of men during the same period). Our survey revealed that the average daily count in 2003 was over 660 women, but we know that the total number of women passing through the state prison during the year was closer to 4,000. We know, too, that approximately 80 new court commitments were made to MCI Framingham, another 900 new commitments were made to the houses of correction, and 114 pregnant and postpartum women were held in MCI Framingham.

• In the absence of more detailed data on mothers and children, we combined several data sources to estimate that a total of 9,000 women were held in MCI Framingham and the houses of correction in 2003. We believe that approximately 6,900 of these women in prison were mothers of about 16,000 children.

• Further, we identified the inmate characteristics that are likely to affect family connections. Women in MCI Framingham are somewhat older than women in the houses of correction; they are more likely to be women of color, to have lower levels of education, to have committed drug offenses, and to have longer sentences. Women held in the houses of correction are somewhat younger and are more likely to have been incarcerated for “other” offenses, including indecency, prostitution, and driving under the influence of alcohol or other substances.

• Clearly, women in both MCI Framingham and the houses of correction have a high level of drug- and alcohol-related offenses. In addition, a recent fact sheet revealed that over 60 percent of women in Department of Correction (DOC) custody have open mental health cases.

• Over half of the women in MCI Framingham have maximum sentences of over three years (with 15 percent having sentences longer than ten years), compared to almost 90 percent of the women held in county facilities being sentenced to twelve months or less.
Four Correctional Facilities

We made site visits to the following correctional facilities in 2003. They were selected to represent diversity of age, location, size, and purpose.

- **MCI Framingham** was established in the late nineteenth century and is one of the country’s oldest women’s prisons. The prison is located in the eastern part of the state, about forty miles from Boston, with no direct public transportation to the prison. It houses women with several sentencing statuses, including women awaiting trial, women serving “county time” (sentences up to two and a half years), women serving “state” sentences (two and a half years or longer), women incarcerated for civil offenses, and women serving “federal time.” The sentenced population is held at 125 percent of capacity, and the Awaiting Trial Unit is held at 288 percent of capacity.

- The **Hampden County House of Correction**, opened in 1992, is a maximum-security facility located in Ludlow, western Massachusetts, and lacks access to convenient public transportation. It is a coeducational facility, housing over 1,000 men and 150-160 women.

- The **Suffolk House of Correction** opened in 1991, replacing a prison on Deer Island. Located in central Boston, it has easy access to public transportation. It is a coeducational facility, housing approximately 1,300 men and 100-120 women.

- The **Essex County Women in Transition** (WIT) Program opened in 2000 and is located in Salisbury on the same site as an electronic monitoring unit and a drug and alcohol treatment program. WIT is a minimum prerelease facility, housing mostly women from Essex County who have served county time in Framingham. On any given day, WIT holds 20-24 women, the electronic monitoring unit holds 20 women, and the sobriety program holds another 12 women.

Statewide Policies

- The Massachusetts Department of Correction has a statewide phone policy allowing prisoners only to make collect calls. These calls can only be made to a list of people who have been approved by correction officials, and no more than fifteen names are allowed on the list.

Institutional Policies at the Four Sites

**ACCOMMODATION policies**

- The isolated setting and lack of transportation in several facilities place extra burdens on maintaining family connections and in communicating with attorneys and social workers. Additional burdens are experienced by the families of women who have not yet been sentenced and are held in the overcrowded Awaiting Trial Unit at MCI Framingham.

- Visiting policies are different in every institution, but only one county house of correction that responded to our survey does not permit contact visits between mothers and children. However, not one of the sites we visited has a visiting room that is both fully equipped for children and large enough to accommodate all the families who want to use it. Despite the long trips some children take to visit their mothers
and the extra time required waiting to enter the facilities, only one venue allows children to bring in snacks (clear fluids only).

- Phone call policies, which one might expect to be less problematic than visits, are in fact quite restrictive. Although one facility has no limits, in general there are restrictions on the number and length of calls inmates can make. Children cannot call in to their mothers and caregivers often refuse or block collect calls from incarcerated mothers.

- The presence of clearly written protocols between DSS and some institutions facilitates visits by children under DSS supervision. Caseworkers who bring children to visit their mothers are not searched and do not have to wait in line as long as other visitors.

- There appear to be wide variations among the facilities in terms of the availability of parenting resources and in terms of the presence of experienced personnel to work with women on family issues (legal, emotional, and educational).

- Volunteer groups, such as the Girl Scouts, ministers, religious groups, attorneys, and community-based groups, are a mainstay of support, but their presence is often tenuous because of their dependence on external funding and institutional authorization.

- Therapeutic treatment appears to be fragmented rather than holistic. Considering the high incidence of mental illness, substance abuse, and sexual trauma among women, often it is not effective to address one problem at a time. Yet few correctional facilities have adopted a gender-specific approach that recognizes that women's circumstances require special consideration.

### REUNIFICATION policies

- Small-scale community-based prerelease centers, like WIT and the South Middlesex Center, with connections to community-based programs appear to be highly conducive to maintaining family relationships.

- A sizable obstacle to a mother's successful transition from prison to community life is a decline in supportive resources for families outside prison – especially income, food stamps, and housing. Participation in work release is a critical resource, especially when security concerns can be addressed through the use of electronic bracelets. However, we do not know the extent to which these valuable work-release opportunities are parlayed into jobs after women are released.

### INFORMATION policies

- We have no accurate data on the number of mothers and children affected by mothers’ imprisonment. We do not know how many children visit or maintain contact in any way, or how well they are doing.

- WIT maintains data on inmates’ characteristics, children, activities, and programmatic options. However, in general the large amounts of data collected by state and county correctional facilities are not necessarily relevant for family connections, and they are often inconsistent with one another.

- Women’s reluctance to reveal they have children is an obstacle to family connections. It is an unfortunate irony that inmates who are reluctant to reveal they have children out of fear of losing custody are more likely to lose custody because they do not maintain contact with them, resulting in a “catch-22 situation.”
• We do not know the extent to which other state agencies generate data that address the family connections of women in prison. We think it unlikely that data necessary to facilitate family connections are analyzed and discussed within and between agencies.

• We do not know how many children receiving welfare benefits are unable to apply for cash, housing subsidies, health care, or food stamps, or how many women whose children are in DSS care lose custody of their children each year.

• Our study was limited by the fact that it did not include a review of data from the Department of Public Health. The Department has instituted important programs for women prisoners and has substantial data on HIV/AIDS; however, we did not examine the significant issue of HIV/AIDS among women prisoners and its special implications for family connections.

Recommendations

We concur with the following quote from the Harshbarger Report on the overall status of correction:

“Women [in Massachusetts] generally have many fewer options (especially relative to their greater needs) than men do. Even though there are fewer women in the system, the state must respond to their needs…. There should be a dedicated external review of the unique issues pertaining to female offenders.”

We recommend the following comprehensive long-term and short-term strategies.

Comprehensive Long-Term Strategies

• Acknowledge that female offenders in general and women in prison in particular have special needs that are largely overlooked within the criminal justice and correction systems, and it is unacceptable to marginalize women based on the rationale that they constitute only a relatively small proportion of the prison population. Delineate areas of responsibility for developing and maintaining gender-specific approaches.

• Apply the Family Connections Policy Framework we developed in this project to assess the current status of family connections policies. Commission a thorough review of current resources and policies throughout correction facilities and undertake a detailed inventory—quality and quantity—of existing resources in prisons serving women and of family connections.

• Develop system-wide, gender-specific, and holistic treatment approaches that not only address parenting programs but also address women’s histories of emotional, sexual, and physical abuse, as well as their drug and mental health problems.

• Assess the effectiveness of all resources and policies through timely and consistent evaluations of participation levels, quality, relevance, and satisfaction; enable follow-up studies to measure program/policy impacts. Acknowledge and reward innovative and successful programs.

• Encourage correctional personnel to share innovative approaches and to communicate with, and learn from, one another. Establish collaborative relationships among correction, state, and private agencies to prepare women to gain access to treatment, housing, jobs, education, childcare, and financial resources on their reentry to the community.

• Review state public assistance and housing policies regarding mothers’ eligibility for benefits and subsidies.

• Expand the focus of the Family Connections Policy Framework to include the PREVENTION and ANTICIPATION components.

Short-Term Strategies

ACCOMMODATION

• Expand transportation options to facilitate and increase prison visits.

• Establish contact visits for families at all facilities. Create family-friendly visiting rooms with sufficient space to accommodate all families.
• Allow children to bring snacks into correctional facilities or have food available for them.

• Encourage mothers to engage in age-appropriate reading and play with children.

• Facilitate phone contact between mothers and children.

• Establish consistency of services and visits by volunteer and outside organizations.

• Encourage mothers and children to exchange letters, drawings, photographs, and audiotapes.

• Supervise visits and provide support to families that have histories of difficult relationships with children and other family members.

REUNIFICATION

• Increase opportunities for weekend furloughs, overnight family visits, work release, and utilization of community services.

• Use visits as a teaching tool: create instructive, supportive preparations and debriefings around family visits.

• Permit women awaiting trial and serving nonviolent sentences on parole to be monitored with electronic bracelets, allowing them greater freedom of movement to visit family members.

INFORMATION

• Conduct confidential interviews with women in prison to determine how many have children, identify their concerns, and ascertain their children's circumstances.

• Provide accessible information to family members on regulations affecting family connections, e.g., phone and visiting policies, and transportation options.

A number of positive changes were introduced in 2004. With a new Correction Commissioner, an active Female Offender Specialist, and comprehensive reports from two distinguished Commissions—Criminal Justice and Correction—we are optimistic that the time is ripe for discussion and action to improve awareness of the special problems of women in prison and to highlight the importance of maintaining family connections both for these families and for society.
INTRODUCTION

“The family is probably this country’s most valuable weapon in fighting crime. Prisoners who receive visitors, maintain family ties, and are released to a stable home environment are more likely to succeed in leading productive, crime-free lives.”

In 2003 101,000 women were incarcerated in federal and state prisons in the U.S., with another 80,000 held in local jails. Although this is a small number when compared to the number of incarcerated men (1,370,000 in prisons and 600,000 in jails), it represents a significant number of women and a huge increase when compared to the 11,000 women held in federal and state prisons twenty-five years earlier.

Massachusetts experienced equally dramatic growth in prison populations. On January 1, 2003, there was a total of 8,659 men and 564 women (6 percent of the total population) in Massachusetts state prisons, with women’s commitments increasing 7 percent over 2002 compared to a 2 percent decrease for men.

Typically, over three-quarters of the women in prison are mothers, the majority of whom had been the primary caregivers of their children prior to their arrests. In this respect their situations differ significantly from their male counterparts and warrant special focus with regard to correctional policies and practices. Yet until recently—ostensibly because women constitute only a small proportion of inmates—such a focus has been largely absent. This is beginning to change for a number of reasons, including the increased number of women and the growing recognition of the negative effects on their innocent children. The following vignettes are based on real situations and illustrate the family concerns of incarcerated women.

**Beverly**

Lives in Boston. She has used drugs for most of her adult life. Until recently, she was able to care for her two young children with the help of her mother. Beverly was arrested for drug possession in front of her children and is being held in a municipal jail because she cannot make bail. She has never been away from her children and misses them terribly. The children are staying with her mother, but because her mother is angry, Beverly cannot convince her mother to bring the children for visits. Her children have trouble sleeping and are getting into fights with their friends.

**Denise**

Lives in Springfield. She was convicted of drunk driving for the fourth time and was given a twelve-month mandatory sentence to be served at the House of Correction in Ludlow. Because she is afraid that the Department of Social Services will take custody of her children, she does not confide in anyone at the House of Correction about her situation, or even that she has children. She does not know where to turn for advice.

**Maria**

Lives in New Bedford. She was five months pregnant with her first child when she was sentenced to a three-year prison term for embezzlement. She is serving time at the Massachusetts Correctional Institution (MCI) Framingham, one hundred miles from her home and family. She is being given conflicting advice about what to do when her baby is born. Maria does not want her boyfriend’s family to take care of the baby because she thinks their home environment is not suitable, but she does not know whether she has other options.

**Joan**

Lives in Lowell. She has been incarcerated twelve times in MCI Framingham for “engaging in sex for a fee.” Each time her children (ages 5 and 7) are left behind with her aunt who does not drive and cannot bring the children to visit. She wants to turn her life around and support her children through legitimate work.
Clearly, such women who have children, or who are pregnant when sentenced, have the following questions:

- Will they have access to medical care in prison while pregnant?
- What will happen to their newborns?
- Who will take care of their children?
- How will their incarceration affect their children?
- Will they lose custody of their children?
- To whom can they turn for advice on their legal rights?
- How will they be able to maintain contact with their children?
- Will they be reunited with their children when they are released?

Scope of the Report

This report first provides an overview of the statistical data on women in prisons in the U.S. over the past two decades. It pays particular attention to the literature on the effects of mothers’ incarceration on their children and the gradual recognition of the emotional, economic, and legal consequences for families when parents, especially mothers, are incarcerated. When viewed in this broad context it becomes clear that the concerns and challenges families face extend beyond the perimeters of a single agency or policy area. We then present the comprehensive Family Connections Policy Framework we created for assessing the status of family connections policies and practices in the absence of guidelines. Next, we examine data on the Massachusetts female inmate population, and apply the Family Connections Policy Framework to the policies, practices, and resources in Massachusetts correctional facilities. Finally, we summarize our findings and make recommendations for change that can be achieved in short- and longer-term timeframes.

Research Methodology

This report was prepared by researchers at the Center for Women in Politics and Public Policy (the Center) for the Working Group on Women in Prison, sponsored by Massachusetts state representative Kay Khan and convened for several years by Ginny Burns. In 2002 Representative Khan and other group members expressed concern for the welfare of children whose mothers are incarcerated, asking straightforward questions such as “How many women in prison have children?” “How are children affected by their mothers’ absences?” “To what extent do correctional policies and practices facilitate family relationships?” Researchers at the Center who were present at this discussion and who had experience in conducting research in criminal justice and correction volunteered to explore these questions. In 2003 this initial effort evolved into a survey of county and state correctional facilities holding women, four site visits, and an extensive review of national and state data.

In 2004 we presented our initial findings to the Working Group and discussed the difficulties we faced in collecting the necessary data. Group members responded by inviting experts from the Massachusetts Departments of Correction (DOC) and Social Services (DSS) to join the meetings, a move that provided valuable new insights and information.

Information for this report came from numerous sources. We conducted an extensive literature review of research conducted within the past fifteen years on women in prison and their children. We obtained numerous statistical reports from national and state correction agencies, including the U.S. Department of Justice and the Massachusetts Department of Correction. We analyzed data from the Department of Correction’ annual reports on the numbers and characteristics of commitments in all county courts (women housed in county houses of correction in 2003), as well as the statistical snapshot of all inmates held in state prisons on January 1, 2003. We reviewed sites on the Internet that provided information on support groups throughout the U.S. for caregivers of inmates’ children and for the children themselves.
Researchers at the Center also collected primary data through a short questionnaire and made site visits to four correctional facilities. The survey, sent out in Spring 2003, consisted of questions on the daily count of female inmates and their sentencing status; the facilities’ visiting policies and resources; and whether facilities collected data on mothers, children, and visits (see Appendix A). The survey was sent to correctional administrators at MCI Framingham and thirteen houses of correction. After two follow-up calls, we received responses from eleven county houses of correction and MCI Framingham—an 86 percent response rate overall. Furthermore, all houses of correction holding women (seven of the thirteen) responded. After analyzing data from the survey, we conducted site visits to four facilities selected for their diversity of location, size, security status, and focus on women, namely MCI Framingham, Hampden and Suffolk Houses of Correction, and the Essex County Women in Transition (WIT) prerelease program. These visits took place during the summer of 2003 and consisted of tours of facilities; conversations with correctional personnel who were most familiar with women inmates; and collection of written materials on programs. Follow-up calls were made to clarify or supplement the information we had gathered. Finally, we tapped into the expertise of current and former members of the Working Group on Women in Prison to obtain additional information.

Our research and recommendations are guided by four premises:

1. Maintaining family connections is critically important, not only for mothers and their children, but also for society at large. Almost all prisoners are eventually released and researchers have long recognized that maintaining family connections is the best predictor of subsequent success, i.e., reduced rates of recidivism.

2. We do not assume that all women inmates want to be reunited with their children or that all are capable of being nurturing mothers. However, we think it is important that they know their legal rights and are provided with opportunities to foster the kinds of relationships that are best for their children and provide motivation to turn their lives around.

3. Family connections cannot be accomplished entirely through correctional policies and practices. Other public and private organizations concerned with child welfare, economic assistance, health, legal services, and community support must become involved.

4. It is not our intention to conduct a comprehensive in-depth study. We regard our research as an exploratory step in a longer-term, strategic planning effort to develop and assess successful family connections policies.

**Intended Audience**

This report is intended for an audience of professionals who work with incarcerated women and their family members, former offenders, and others who recognize the need for serious consideration of the personal, family, and societal implications of maintaining family connections between incarcerated mothers and their children.

We think the research presented here is path breaking in its adoption of a systemic approach that not only looks at policies and practices affecting family connections once women are incarcerated, but also considers how family connections might be affected at each point from a woman’s arrest to the point she is released from prison—and beyond. Although this report focuses mainly on policies and practices affecting mothers, caregivers, and children while mothers are incarcerated and during their prerelease phase, the Family Connections Policy Framework provides a broader context that includes family connections during arrest and sentencing. We hope that this report will provide information, encourage further action, stimulate additional research, and contribute to the development of collaborative discussions within and among agencies to address the issue of family connections of female offenders and their children.
THE NATIONAL CONTEXT

“Families are more likely to be disrupted by women’s incarceration than by men’s because, in most cases, the mothers were the primary caregivers of their children prior to incarceration.”

Mothers in Prison: A Growing Trend

The number of women in prison is at an all-time high, and is growing rapidly. In 2003 there were 101,000 women in federal and state prisons, the first time the number exceeded 100,000. Another 80,000 were held in county and municipal jails (see Table 1). From 1985 to 1995 the number of women tripled, while the number of men doubled. The annual increase in the number of women now outpaces that of men; 5 percent a year for women since 1995, as compared to 3.3 percent for men. For decades the proportion of female to male inmates was held at 4-5 percent, but in 2004 it grew to almost 7 percent. One explanation for the rapid increase of the prison population as a whole, and of women in particular, is the imposition of long mandatory minimum sentences for drug offenses, a trend first noticed in the 1970s.

TABLE 1. INCARCERATED WOMEN BY TYPE OF CORRECTIONAL FACILITY, U.S., 2003

<table>
<thead>
<tr>
<th>Type of Institution</th>
<th>Number of Women</th>
</tr>
</thead>
<tbody>
<tr>
<td>Federal and state prisons</td>
<td>101,000</td>
</tr>
<tr>
<td>Jails &amp; county institutions</td>
<td>80,000</td>
</tr>
<tr>
<td>Total</td>
<td>181,000</td>
</tr>
</tbody>
</table>


The number of children affected by their mothers’ incarceration has also skyrocketed. Although data on children of prisoners are relatively scarce, studies conducted since the 1970s consistently show that 70-80 percent of women in prison are mothers. A survey conducted in 1998 showed that more than 99,000 out of 148,000 female inmates were mothers (see Table 2).

TABLE 2. INMATES WHO WERE MOTHERS BY TYPE OF CORRECTIONAL FACILITY, U.S., 1998

<table>
<thead>
<tr>
<th>Type of Institution</th>
<th>Number of Women</th>
<th>Number of Mothers</th>
</tr>
</thead>
<tbody>
<tr>
<td>Federal prison</td>
<td>9,200</td>
<td>5,400</td>
</tr>
<tr>
<td>State prison</td>
<td>75,200</td>
<td>49,200</td>
</tr>
<tr>
<td>Jail</td>
<td>63,800</td>
<td>44,700</td>
</tr>
<tr>
<td>Total</td>
<td>148,200</td>
<td>99,300</td>
</tr>
</tbody>
</table>

Source: Greenfield and Snell, Women Offenders, 1999.

The number of children affected appears to have almost doubled between 1990 and 1999. The 1998 survey referred to above revealed that over 233,600 children under the age of 18—20 percent of whom were under the age of 5—were affected by their mothers’ imprisonment (see Table 3).

Research reveals that typically mothers in prison have 2.3 children. By extrapolating these trends (i.e., the proportion of women who are mothers and the number of children they have) to the current population of incarcerated women, we estimate that in 2004 approximately 136,000 women held in prisons and jails were mothers of an estimated 314,000 children.

TABLE 3. CHILDREN AFFECTED BY MOTHERS’ INCARCERATION BY TYPE OF CORRECTIONAL FACILITY, U.S., 1998

<table>
<thead>
<tr>
<th>Type of Facility</th>
<th>Number of Children</th>
</tr>
</thead>
<tbody>
<tr>
<td>Federal prison</td>
<td>11,200</td>
</tr>
<tr>
<td>State prison</td>
<td>117,100</td>
</tr>
<tr>
<td>Jail</td>
<td>105,300</td>
</tr>
<tr>
<td>Total</td>
<td>233,600</td>
</tr>
</tbody>
</table>

Effects of Mothers’ Incarceration on Their Children

“The judge’s clerk asked [Elaine] several questions: ‘What is your name? What is your age? Where were you born? Where do you reside? What is your occupation? Are you married or single? What education have you received? What is your religion? Are your parents living or deceased?’ …One question nobody asked was whether [she] had any children or what would happen to the children now [she] was going to prison.” 17

Over 66 percent of mothers in state prisons and 80 percent of mothers in federal prisons had custody of their children prior to being incarcerated. Since about three-quarters are single parents, their incarcerations often have immediate and devastating effects on the children left behind. When men are incarcerated, their children seldom need to be moved because they are likely already living with their mothers or other family members. In contrast, when women are incarcerated, their children usually must move to new caregivers. Over 60 percent of the children of incarcerated men lived with the “other parent,” compared to 24 percent of the children of incarcerated women.18

“The criminal justice system fails to keep accurate records of the existence of offenders’ dependent children, let alone who they are and who is caring for them. Arrested mothers lose almost all control over the lives and well-being of their children.” 19

A mother’s arrest affects children immediately. Approximately 20 percent of children are present when their mothers are arrested.20 Although this situation is alarming for children, officials at least know of the existence of children and placements can be found for them. In many cases, however, police do not inquire about children and it is not uncommon for probation officers and even judges to be unaware of a woman’s family circumstances until after sentencing. Women sometimes conceal the fact they have children due to fear their children will be placed in state custody. Since women are more likely than men to be detained awaiting trial,21 someone must find homes for their children during this period. Once sentencing takes place and women are incarcerated, children may be moved again to more permanent placements. According to one survey, 53 percent of the children of women in state prisons were placed with a grandparent, 28 percent were placed with their fathers, 26 percent were placed with other relatives, and 10 percent were placed in state custody (see Figure 1).22 These placements exact a heavy toll on the children who may be moved not only from familiar neighborhoods, schools, and friends, but may also be separated from their siblings. Even children who have experienced neglect and abuse—and who welcome the move to a more stable environment—find such changes to be disruptive. Although an earlier study conducted by one of our researchers showed distinct differences in child placement patterns among ethnic and racial groups, this topic is not discussed in the current literature.23

FIGURE 1. PLACEMENT OF THE CHILDREN OF WOMEN INCARCERATED IN STATE AND FEDERAL PRISONS, U.S., 1997

Emotional Reactions

Studies of children who undergo a lengthy separation from their primary caregivers reveal a wide range of reactions that vary according to age and circumstance. For example, children between the ages of 2 and 6 are more likely to experience separation anxiety, guilt, and shame, whereas older children may experience withdrawal and rage. Sometimes caregivers lie to the children, telling them that their mothers are in the hospital or away on a trip. Such responses compound the “already isolating effects of their treatment by the criminal justice system and the social services system” and can have long-term effects on children’s mental health. A “conspiracy of silence” may develop as caregivers try to protect children from what they consider embarrassing information. Children sense this silence and often interpret it to mean their parents are in danger, have rejected them, or they (the children) did something to drive the parent away. Although they are worried, they also sense they should not talk about their feelings. Without skilled intervention, children can develop serious behavioral problems and negative coping patterns, including poor school performance, sexual aggression, gang involvement, substance abuse, and juvenile delinquency.

Some children exhibit symptoms similar to post-traumatic stress syndrome, experiencing flashbacks in which they hear their mothers’ voices. In addition, studies show they are six times more likely to be incarcerated than other children and that 29 percent of the 11- to 14-year-olds with mothers in prison subsequently were arrested and/or incarcerated.

Lack of Contact

Child welfare experts have identified three critical components of maintaining parent-child bonds while the mother is in prison: supportive contact visiting between mother and child; support for and monitoring of children separated from their mothers; and assistance for parents to understand how to interact with their children and to become better parents. Yet contact is hindered by many factors, and the anxiety children experience is compounded by the fact that contact between mothers and children is infrequent and visits may be out of the question (see Figure 2). According to one study, half of the mothers never received a visit from their children, one-third never received a phone call, and one-fifth never received mail. In addition, family contacts appear to have declined over the past two decades.

FIGURE 2. PERCENTAGE OF WOMEN RECEIVING VISITS FROM THEIR CHILDREN, U.S., 1997

Almost all women are released eventually. If they wish to retain or regain custody of their children upon release, state laws require that they demonstrate an interest in their children’s well-being. Mothers and children must maintain some form of contact for this requirement to be satisfied. Yet, as noted above, as many as one-half of the inmates have no contact with their children. Furthermore, a recent study in New York City of children in foster care showed that children whose mothers were incarcerated for over two years during their lifetimes were more likely to be adopted than children whose mothers had never been incarcerated.31 One study found that 12-18 percent of the caseloads of children who had been freed for adoption were African-American children with mothers in prison.32

Obstacles to Maintaining Family Connections

Obstacles to maintaining mother-child contacts result from many factors; some directly related to incarceration—such as distance from home community and length of sentence; some from the women’s personal experiences—such as addictions, physical and sexual abuse; some from correction policies—prohibiting contact visits and removing newborns; and some from other policy areas—adoption, housing, and public assistance.

Distance from Home Community

“An inmate’s ability to maintain personal contact with family members can be affected by how close the facility is to the inmate’s family and whether visitation assistance is available.” 33

The distance between women’s prisons and their home communities has long been recognized as a major obstacle to maintaining contact with children.34 According to a 2002 report, in most states there is only one women’s prison, and it is typically located in rural areas, perhaps several hundred miles from the women’s home communities and their children. In addition, there is likely poor or nonexistent public transportation. Thus visits can involve hours of travel at considerable expense.

Length of Sentence

The length of a mother’s sentence plays an important part in her ability to maintain family connections. Certainly women with longer sentences find it difficult to maintain contact with their children over the long term. However, women with shorter sentences, i.e., those committed for offenses such as larceny, drug use, and prostitution, are more likely to be recidivists. Their chances of mother-child reunification decline with each subsequent incarceration—from 80 percent for those with no prior conviction to 33 percent for those with three or more convictions.35 Thus there are serious ramifications for mother-child connections in both episodic and chronic patterns of imprisonment.

Pregnancy and Post-Partum Care

Women’s experiences of pregnancy and birth while incarcerated affect their capacity to build strong parent-child bonds. Approximately 6 percent of women are pregnant when they enter prison, but few states make special arrangements for pre- and post-natal care. Pregnant prisoners may be transported to local hospitals to give birth. Some—but not all—state laws prohibit the use of shackles during labor. Women are carefully guarded and visitors, if allowed at all, are strictly limited. Newborns are often separated from their mothers within hours after birth. Some prisons have interim nurseries where babies may stay for up to six weeks. Bedford Hills Correctional Facility in New York State (with the longest surviving prison nursery in the country) allows babies to stay with their mothers up to their first birthday. Other states, like Nebraska, have experimented by permitting pregnant women with relatively short sentences to keep their babies with them.36

Personal Histories

Another obstacle to contact is related to the women’s personal histories. Certainly not all inmates are good mothers; some have neglected their children because of their addictions and substance abuse, whereas others are unfamiliar with good parenting practices because they themselves have not experienced good parenting. Numerous studies document the fact that many women have endured some form of abuse—physical, verbal, or sexual—either as children or as adults, and they
bring these experiences to motherhood. The interplay of some or all of these factors profoundly affects women.

**Correction Policies**

Correction policies and administrative practices can also complicate family connections. For example, correctional administrators may not support the gender-specific approaches and management styles conducive to addressing the emotional and psychological concerns of female inmates.37 Furthermore, many facilities do not have adequate visiting areas with books and toys to allow mothers and children to interact in a relaxed and positive environment. Children who may have traveled for hours and waited in line to enter a facility may not be allowed to bring in food or may not be provided with any snacks. Caregivers who need to speak to mothers about family matters find it difficult to have private conversations. Phone policies only allow collect calls to family members who may not be able to accept the charges. Finally, correction programming may not provide adequate parenting skills or courses.

**Related Policy Areas**

"Women offenders appear to be particularly at risk for loss of their parental rights….This risk is the result of two factors: maternal substance abuse and lack of reunification services for women’s prisons.” 38

Policies in areas other than correction can also have a profound impact on family connections. The Federal Adoption and Safe Families Act, enacted in 1997 to expedite the permanent placement of children languishing in foster care, requires states to establish timetables for children’s permanent placement and shortens the timeframe for terminating parental rights. Many states have introduced similar legislation; in twenty-five states (including Massachusetts) parental rights may be terminated if children have been in foster care for fifteen of the preceding twenty-two months (even less for children under 4 years of age). As a result, the number of involuntary terminations of the parental rights of women prisoners has increased over the past three decades. It is not unusual for women to lose custody of their children without being aware of pending adoption proceedings. For decades women wishing to reunite with their children have been eligible for public assistance benefits (formerly, Aid to Families with Dependent Children, and now Temporary Aid to Needy Families). Recent changes in public welfare laws, however, limit their eligibility for cash benefits, and have a critical impact on the chances of family reunification; women with drug convictions (use or sale) can no longer count on assistance or food stamps.39 Also, women with criminal records are ineligible for subsidized housing and emergency cash assistance in many states.

**Lack of Information**

“Currently there is no standardized data collection system in the U.S. that accurately records the parental status of inmates or the number of children of incarcerated parents.”40

Finally, there is the problem of a lack of useful data. The national data cited here come from a handful of studies conducted within the past two decades. Such studies are scarce partly because of the logistical difficulties in collecting data on prisoners and their children, and partly because correctional goals do not drive such data collection. Few correctional facilities or departments produce aggregate numerical data other than on traditional characteristics: age, education, race, etc. Data on marital status are collected on a voluntary basis and are often considered to be inaccurate. Questions about children are not usually asked, e.g., the number of children, their ages, their locations, and whether they visit. Similarly, it is difficult to assess how many women are pregnant or postpartum when sentenced, where their babies are delivered, and what choices they have regarding their infants’ care or adoption. Obtaining information on what programs and resources exist to encourage family connections is also problematic. This problem may diminish with the growing interest in gender-based programming and gender-sensitive classification that is more attuned to the needs of women prisoners. But currently this piecemeal approach to collecting information hinders planning and results in hit-or-miss rather than planned and effective interventions.

Finally, with the exception of a few studies—including an assessment of the Girl Scouts Behind Bars program showing that mother-daughter rela-
tionships improve, girls develop greater self-esteem, and mothers have increased knowledge of child development—there is a shortage of data on the effectiveness of programs and resources.

Developing a Family Connections Policy Framework

“Providing parenting programs for incarcerated parents is not only an investment in their future but in the future of children and society at large.”

Each point of contact with law enforcement, criminal justice, and correction systems has important implications for women and their families. Yet, in spite of the harsh impact on prisoners, their children, and other family members, the high cost of recidivism, and the long-term human service costs to society, no comprehensive policy framework exists to address these concerns. Most important, there is no commonly accepted definition of family support and the kinds of resources necessary to sustain family connections.

We think it is impossible to ascertain the effectiveness of current policies and resources, or to determine how to move forward to implement effective family connections policies, without first identifying and defining the key components of a family connections policy. We have developed a Family Connections Policy Framework consisting of four distinct components, each reflecting a stage of women’s contacts with law enforcement, criminal justice, and correction. A fifth component — INFORMATION — is generic, i.e., it applies to all four components.

As Figure 3 shows, PREVENTION refers to policies that prevent the separation of family members in the first place by reducing the number of incarcerated women. Since the majority of women are incarcerated for nonviolent offenses and have a history of substance abuse, their incarceration could be avoided or minimized through effective treatment programs, adjustments to states’ minimum sentencing laws, and alternative sentencing options. Low-income mothers who resort to larceny and prostitution to support their families could benefit from effective training programs.

ANTICIPATION refers to policies that anticipate the likelihood of the separation of mothers and children by establishing protocols for arrest, bail, arraignment, and sentencing. These policies would ensure that family members are located, and/or children are referred to the appropriate agencies. ACCOMMODATION refers to policies that facilitate family connections once women are incarcerated. These policies address the importance of women maintaining some form of contact with children, obtaining treatment for substance abuse, and gaining parenting and employment skills. REUNIFICATION refers to policies to ease women’s transition from prison to the community. These policies address basic economic needs, continuing treatment, and support in assuming parental responsibilities. INFORMATION refers to the data necessary for planning and implementing policies. It is essential to have comprehensive information on women and their families within correction, as well as data on the quantity and quality of available programs and resources. It is also essential to have data on the affected children.

In the next section we examine data on women in prison and apply the Family Connections Policy Framework to four correction facilities in Massachusetts.
### FIGURE 3. FAMILY CONNECTIONS POLICY FRAMEWORK

<table>
<thead>
<tr>
<th>Policy Component</th>
<th>Areas of Concern</th>
<th>Potential Policy Changes</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>PREVENTION</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Preventing the separation of family members</td>
<td>• “Over-incarceration” of women through mandatory minimum sentences&lt;br&gt;• Lack of alternative sentencing options for nonviolent offenses&lt;br&gt;• Lack of treatment programs for substance abusers (to reduce recidivism)</td>
<td>• Change/reduce mandatory minimum sentences&lt;br&gt;• Greater use of restitution, pre-trial diversion, and alternative sentencing practices&lt;br&gt;• Address family poverty and low-income women’s lack of marketable skills&lt;br&gt;• Increase access to substance abuse treatment</td>
</tr>
<tr>
<td><strong>ANTICIPATION</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Anticipating that children will likely be affected when women are arrested</td>
<td>• Police arrest women without asking whether they have children&lt;br&gt;• Court intake interviews do not include questions about children&lt;br&gt;• Judges sentence women without knowledge of family circumstances</td>
<td>• Develop protocols for police officers to notify children and potential caretakers&lt;br&gt;• Develop protocols for court intake interviews&lt;br&gt;• Develop sentencing protocols that include information on children and family members</td>
</tr>
<tr>
<td><strong>ACCOMMODATION</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Accommodating the separation of children and incarcerated mothers</td>
<td>• Few visits from children&lt;br&gt;• Visiting areas are unsuitable for children&lt;br&gt;• Limited phone calls from prison and no incoming calls from children allowed&lt;br&gt;• Mothers separated from newborns&lt;br&gt;• Parenting programs are not relevant to families’ experiences and children’s ages&lt;br&gt;• Family members angry with mothers&lt;br&gt;• High rates of PTSD and mental illness&lt;br&gt;• Lack of job training and education&lt;br&gt;• Adoption policies speed up loss of custody</td>
<td>• Implement gender-responsive policies to reduce the over-classification of women as high-risk inmates&lt;br&gt;• Build prisons in less isolated areas, provide assistance with public transportation&lt;br&gt;• Create family-friendly visiting areas&lt;br&gt;• Encourage letters, phone and video contacts&lt;br&gt;• Allow infants to stay with their mothers to encourage bonding&lt;br&gt;• Introduce responsive parenting programs and activities&lt;br&gt;• Support networks for caretakers and children in their home communities&lt;br&gt;• Adequate treatment&lt;br&gt;• Increase work and education opportunities&lt;br&gt;• Legal resources to track custody and adoption proceedings</td>
</tr>
<tr>
<td><strong>REUNIFICATION</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Reuniting mothers and children after the mothers’ release from prison</td>
<td>• Mothers are unprepared emotionally and financially to set up a household&lt;br&gt;• Lack of supportive, transitional housing&lt;br&gt;• Lack of jobs, job training, and education&lt;br&gt;• Lack of community support&lt;br&gt;• Lack of information about existing resources&lt;br&gt;• Mothers are ineligible for cash assistance, food stamps, and housing</td>
<td>• Programs that allow mothers and children to spend increasing amounts of time together&lt;br&gt;• Community-based residences to help families reunite and prepare for independent living&lt;br&gt;• Assistance in finding education and work opportunities&lt;br&gt;• Make information on community-based resources available&lt;br&gt;• Alter state regulations regarding eligibility for assistance</td>
</tr>
<tr>
<td><strong>INFORMATION</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Data on mothers involved in criminal justice and corrections, and their children’s circumstances</td>
<td>• Inadequate and inaccurate data regarding number of women involved&lt;br&gt;• Inadequate data regarding women’s family status&lt;br&gt;• Mothers’ reluctance to reveal family information for fear of losing custody&lt;br&gt;• Lack of data on types, quality, and effectiveness of available resources&lt;br&gt;• Lack of coordination with agencies responsible for children, housing, cash assistance, and childcare</td>
<td>• Encourage data collection in corrections agencies&lt;br&gt;• Create non-threatening approach toward mothers so they are more willing to reveal their circumstances&lt;br&gt;• Conduct research to assess the frequency, quality, and effectiveness of existing programs and resources&lt;br&gt;• Build inter-agency collaboration to collect data and develop family-based approaches</td>
</tr>
</tbody>
</table>
In this section we present information on the female inmate population in Massachusetts, using data from the Department of Correction (DOC), the survey we conducted in the summer of 2003, and the four site visits. Like many states, Massachusetts has one state prison, the Massachusetts Correctional Institution (MCI) located in Framingham. Thirteen out of fourteen counties have houses of correction, but only seven house women. Women from other counties serving "county time," i.e., sentences up to two and a half years, are sent to either neighboring counties or MCI Framingham. MCI Framingham also houses women incarcerated for civil offenses and those serving "federal time." Finally, we describe the policies and resources at each of the four sites we visited—MCI Framingham, Hampden County House of Correction, Suffolk County House of Correction, and the Essex County Women in Transition Program—organizing them in a chart according to the Family Connections Policy Framework described in the previous section. Since we are concerned with women who are already incarcerated we examine only the Framework’s ACCOMMODATION, REUNIFICATION, and INFORMATION components. We identify policies and resources as they were described to us; we are unable to comment on their content, quality, frequency, or capacity.

**Increasing Number of Women (and Mothers) in Prison**

We had difficulty collecting data on how many women and children are affected each year by their mothers’ incarceration, i.e., the total number of women who are incarcerated throughout the year, the number who are mothers, the number, age, and placement of their children, and the number of children who visit or have some form of contact with their mothers. In the absence of such data, we estimate them by drawing on the research findings outlined in the previous section and extrapolating them to the Massachusetts prison population.

According to DOC data, during 2003 there were 981 new commitments of women, 91 to MCI Framingham and 890 to the county houses of correction. However, these figures do not represent the total number of women held throughout the year. As Figure 4 shows, the number of new commitments would appear to under-represent women serving longer sentences. For example, while 70 new commitments were sent to MCI Framingham, our survey data revealed that the average daily count of sentenced women was almost 500. We also find that the number of new commitments over-represent women held in county jails. While almost 1,000 were committed, our average daily count revealed a range of 1 to 135. Our average daily count data also revealed a large number of women (172) from throughout the state who are held in the Awaiting Trial Unit (ATU) at MCI Framingham.

**TABLE 4. ESTIMATED NUMBER OF INCARCERATED MOTHERS AND THEIR CHILDREN, MA, 2003**

<table>
<thead>
<tr>
<th>Estimated Number of Incarcerated Women</th>
<th>Estimated Number Who Are Mothers (75% of women)</th>
<th>Estimated Number Affected Children (average 2.3)</th>
</tr>
</thead>
<tbody>
<tr>
<td>9,180</td>
<td>6,885</td>
<td>15,836</td>
</tr>
</tbody>
</table>


*The vast majority of women will return to care for their children again. They must plan to resume vital relationships that have been interrupted, perhaps seriously damaged.* 44
The DOC also collects “snapshot” data on the characteristics of inmates held in state custody on a single day each year, traditionally January 1. In 2003 the number of women held in Framingham on this day was 535. These data are useful in describing inmate characteristics (see next section), but they do not provide us with information on the annual flow of women through the prison and houses of correction. Fortunately, the DOC’s newly appointed Female Offender Specialist provided us with data showing that 3,944 women had passed through Framingham in 2003, that is, almost six times as many women as indicated by the snapshot data.

In the absence of an annual count of women held in the county houses of correction, we assumed that these institutions also held six times as many women annually than appeared in a daily count (this figure is probably an underestimate, since county sentences are shorter than state sentences and there is greater inmate turnover). Since our survey showed that the average daily count of women held in houses of correction was 856, we estimated that around 5,000 women were held annually in the houses of correction. Combining our estimates of prison and county populations, we concluded that approximately 9,000 women were incarcerated in Massachusetts in 2003 (see Table 4).

The DOC’s readily available statistical reports do not routinely provide data on the maternal status of women. However, once again we were fortunate to obtain such data from the Female Offender Specialist. We found that 370 of the women held in Framingham, i.e., 73 percent, were mothers, half of whom had between one and three children, and that 75 of the 99 women housed at the Middlesex Pre-release Center were mothers, who had an average of 2.1 children. We also learned that among the pre-trial and sentenced populations there were 114 pregnant and postpartum women in MCI.
Framingham. In the absence of similar data on women in the houses of correction, we estimated—based on the literature we reviewed earlier—that 75 percent would be mothers who would have an average of 2.3 children.

We concluded that in Massachusetts in 2003 about 6,900 Massachusetts female inmates were mothers, and that about 16,000 children were affected by their mothers’ incarceration that year (see Table 4).

**Female Inmate Characteristics**

Factors influencing the family connections between a mother and her child include her age, criminal history, length of sentence, race/ethnicity, level of education, employment experience, health status, number of children and their ages, the type of relationship prior to incarceration, the children’s placement after incarceration, and the willingness and ability of caregivers to encourage contact between mother and child/ren.

Information from the Department of Correction on women held in the prison and the houses of correction includes women’s ages, offenses, sentences, race/ethnicity, and level of education. As might be expected, these data reveal some distinct differences. Table 5 shows that women in the state prison tend to be older women of color, and to have lower levels of education, than women in the houses of correction.

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**TABLE 5. SELECTED CHARACTERISTICS OF WOMEN HELD IN MCI FRAMINGHAM, AND NEW COMMITMENTS TO COUNTY FACILITIES, MA, 2003**

<table>
<thead>
<tr>
<th>Characteristics of Women Inmates (self-reported)</th>
<th>MCI Framingham Inmate Profile, January 1, 2003 N = 535</th>
<th>Houses of Correction New Court Commitments 2003 N = 909</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Age</strong></td>
<td>Age Median: 35.9 years</td>
<td>Age Median: 32 years</td>
</tr>
<tr>
<td><strong>Race/Ethnicity</strong></td>
<td>White: 61%</td>
<td>White: 64%</td>
</tr>
<tr>
<td></td>
<td>Black: 17%</td>
<td>Black: 21%</td>
</tr>
<tr>
<td></td>
<td>Hispanic: 21%</td>
<td>Hispanic: 12%</td>
</tr>
<tr>
<td></td>
<td>Other: 1%</td>
<td>Other: 3%</td>
</tr>
<tr>
<td><strong>Education (highest grade)</strong></td>
<td>Below 10th Grade: 20%</td>
<td>Below 10th Grade: 14%</td>
</tr>
<tr>
<td></td>
<td>10th-11th Grade: 25%</td>
<td>10th-11th Grade: 19%</td>
</tr>
<tr>
<td></td>
<td>High School/GED: 12%</td>
<td>High School/GED: 30%</td>
</tr>
<tr>
<td></td>
<td>Above High School: 11%</td>
<td>Above High School: 16%</td>
</tr>
<tr>
<td></td>
<td>Not Reported: 32%</td>
<td>Not Reported: 20%</td>
</tr>
<tr>
<td><strong>Marital Status</strong></td>
<td>Single: 52%</td>
<td>Single: 54%</td>
</tr>
<tr>
<td></td>
<td>Married: 13%</td>
<td>Married: 10%</td>
</tr>
<tr>
<td></td>
<td>Separated/Divorced/Widowed: 28%</td>
<td>Separated/Divorced/Widowed: 12%</td>
</tr>
<tr>
<td></td>
<td>Not Reporting: 6%</td>
<td>Not Reporting: 25%</td>
</tr>
</tbody>
</table>

There are also distinct differences in offense patterns. As Figure 5 shows, the largest categories of offenses for women in MCI Framingham are “drug” offenses (35%) and “offenses against the person” (32%). In the houses of correction, the influence of substance abuse is strongly reflected in the offenses for which women are incarcerated, with substance abuse (28%) and “other” offenses (which include driving under the influence of alcohol) (29%), accounting for almost 60% of women’s incarcerations.

Clearly, the incidence of drug and alcohol-related offenses is very high in houses of correction and the state prison, and is a strong indicator of the high degree of drug involvement by female offenders throughout the criminal justice system. That substance abuse is closely related to the mental health of female inmates is reflected in the findings published in a fact sheet issued by the Governor’s Commission on Correction Reform showing that over 60 percent of women in DOC custody have open mental health cases. Women’s drug and mental health status are important factors in determining the likelihood and quality of family connections.

Finally, another key factor in family connections is the length of sentence. Almost half of the women in MCI Framingham have maximum sentences of over three years (14 percent of women have sentences over ten years), while the maximum sentence for almost 90 percent of women in the county facilities is less than one year (see Figure 6). This scattered sentencing pattern has implications for family connections, for, as noted earlier, both episodic and chronic separations are challenging for maintaining family connections.
Family Connections Policies and Resources at Four Sites

In this section we describe the findings from our case studies of four correctional facilities. We present information on their policies and resources in the form of a chart (see Figure 7). These resources are grouped into the “programmatic themes”—family contacts, parenting skills, and therapeutic intervention—that were identified in the previous section on the Family Connections Policy Framework. In the absence of formal definitions for these “themes,” we used our judgment as to how the programs were characterized. However, before discussing policies and resources at each of the four sites we must mention three overarching state policies—in Correction, Public Assistance, and Social Services—that affect many female inmates.

Statewide Policies

The DOC has statewide policies affecting family connections. One example is the generic phone policy. Prisoners can only make collect calls, and the calls can only be made to a list of people who have been approved by correction officials. No more than fifteen names can be placed on an inmate’s list. (However, as the following analysis shows, this policy is interpreted differently at each facility.)

Another generic policy is the Massachusetts Adoption Law, enacted in 1998. Modeled on the 1997 Federal Adoption and Safe Families Act mentioned earlier, it is designed to ensure that children under the care and supervision of the Department of Social Services receive permanent placements—preferably adoption—in as short a timeframe as possible. The criterion for moving ahead with termination of custody by the birth mother is that a child has spent fifteen of the preceding twenty-two months in foster care. However, proceedings to terminate parental rights
for children under the age of 4 may occur within six months of separation from the mother and for older children they may occur within twelve months of separation.

A third generic policy affecting family connections is Chapter 5, Massachusetts “welfare” law. Implemented in 1996, it prevents women with criminal records, especially for drug offenses, from receiving subsidized housing and cash assistance and food stamps. These resources—regarded as essential for mothers wishing to be reunited with their children—were available before 1996.

A Survey of Massachusetts Correctional Facilities

Before we undertook the site visits described below in detail, we sent a brief survey asking about visiting policies and visiting areas (see Appendix A). The data we collected show that no two facilities have the same visiting policies (see Table 6). They vary from permitting visits once a week to almost every day, and while four have special family areas, one prohibits direct contact between mothers and children.

<table>
<thead>
<tr>
<th>Facility</th>
<th>Contact Visits Permitted</th>
<th>Number of Visits Per Week</th>
</tr>
</thead>
<tbody>
<tr>
<td>MCI Framingham</td>
<td>Yes</td>
<td>5 times per week</td>
</tr>
<tr>
<td>Suffolk HOC</td>
<td>Yes</td>
<td>4-5 times per week</td>
</tr>
<tr>
<td>Hampden HOC</td>
<td>Yes</td>
<td>Limited by space</td>
</tr>
<tr>
<td>Berkshire HOC</td>
<td>Yes</td>
<td>3 times per week</td>
</tr>
<tr>
<td>Barnstable HOC</td>
<td>No</td>
<td>Once a week</td>
</tr>
</tbody>
</table>


Family Connections Resources at Four Correctional Facilities

After analyzing the survey, we followed up with site visits to four facilities selected for diversity of age, size, security status, location, and purpose. We provide a brief overview of each and then describe the resources in each that foster family connections. We obtained our information from our on-site conversations with correction officials and counselors and from written materials.

The first site we visited, MCI Framingham, was established in the late nineteenth century and is one of the country’s oldest women’s prisons. It was selected because it is the only women’s prison in Massachusetts. Women are held in two capacities—awaiting trial and serving time for state, county, federal, and civil offenses. The security level for sentenced inmates is 4 on a scale of 1-6, although women awaiting trial are held at level 6, i.e., maximum security. The prison is located in the eastern part of the state, about forty miles from Boston, and there is no direct public transportation to the prison. The prison is currently at 125 percent of capacity, and the Awaiting Trial Unit is at 288 percent of capacity.

The Hampden County House of Correction is a maximum-security facility located in Ludlow, western Massachusetts, and is not convenient to public transportation. It opened in 1992. The facility houses over 1,000 men and approximately 150-160 women (both sentenced and awaiting trial). Women’s movement and access to resources within the facility are hampered by the need to keep male and female inmates separate. However, it is the only facility to incorporate gender-specific programs for women inmates.

The Suffolk House of Correction opened in 1991, replacing a prison on Deer Island. It houses approximately 1,300 men, and 100-120 women. Women from Plymouth and Norfolk counties are also held here and women from Nashua Street jail are sometimes housed here when the jail is overcrowded. Located in central Boston, there is easy access to public transportation. Women with sentences of less than ninety days are sometimes moved to the Whittier Street Health Center.
The Essex County Women in Transition (WIT) Program opened in 2000. WIT is a locked minimum pre-release facility located in Salisbury. Most women from Essex County who serve county time in Framingham use WIT as their pre-release facility. Women from other counties may also be admitted if there is space. WIT holds 20-24 women on any given day and about 100 women each year. Women serving county time in MCI Framingham may be moved to WIT if they have committed nonviolent offenses. WIT is one of three options located at the facility. The others include an electronic monitoring unit and a sobriety program. In July 2003, twenty-four women had incarceration status, twenty women wore electronic monitoring bracelets to track their movements, and twelve women were in the “sober” house.

ACCOMMODATION

Contacts
MCI Framingham allows contact visits and children’s visits are permitted five times a week during regularly scheduled visiting hours; the maximum number of visitors allowed per visit is two adults and three children. There is a separate area where families can meet. Inmates can take age-appropriate games, toys, and books from the Family Services Unit to the visiting area, returning them at the end of each visit. Special visits (extended hours or visits outside of scheduled hours) may take place if permission is obtained in advance. No snacks are provided, but visitors may bring in clear bottles of juice, milk, or water for infants. Since DSS caseworkers are required to bring children to see their mothers at least once a month. DSS caseworkers are given priority during visits and are not searched or made to wait in line.

Suffolk House of Correction permits contact visits to take place during regular visiting hours, 4-5 times a week. Children brought in by DSS caseworkers have more flexible access. There is no special children’s visiting area, no toys or books are provided, and children are not allowed to bring their own toys. Visits are monitored by camera. If a mother wants an adult-to-adult conversation, no staff or volunteers are available to supervise the children. Inmates with electronic monitoring devices have different visiting hours from the rest of the population.

Essex County’s WIT Center permits contact visits that are monitored by correctional officers.

Phone policies
MCI Framingham’s phone policy conforms to that of the Department of Correction. Only collect calls are allowed; calls may be made only to a list of people who have been approved by prison authorities (no more than fifteen names are permitted). Because calls can be expensive, caregivers sometimes refuse to accept collect calls. Hampden County House of Correction has also adopted DOC policy allowing prisoners to make calls to fifteen pre-approved numbers. However, prison staff have a direct line to caseworkers at the Department of Social Services and may allow women to make extra calls to caseworkers from their offices. At the Suffolk County House of Correction inmates are allowed to make collect calls of up to twenty minutes, and at the Essex WIT Center there are no limits on the number of inmates’ phone calls.

Parenting classes
Parenting classes at MCI Framingham are available for women with children ages 2-12. National Guard volunteers run a “Parenting in the Community” class for parents of adolescents; Girl Scout leaders bring the “Girl Scouts Behind Bars” program into the facility on alternate weekends. Volunteers work with inmates and their daughters aged 5-15 years, and teach inmates how to lead scout meetings. Women receive assistance in becoming involved in Girl Scouts in their home.
communities. Parent-child interaction is encouraged through a “Mommy an’ Me” program, run by prison chaplains who help mothers select age-appropriate books for their children, videotape mothers reading the books out loud, and send the tapes to their children. Framingham State College students supply the books. There is also a Big Brothers/Big Sisters program. At the Hampden County House of Correction the prison staff observes inmates’ interactions with their children during visits and provides inmates with feedback on their parenting skills. Inmates are required to participate in parenting classes led by volunteers. Here too, volunteers lead a Girl Scouts Behind Bars program, as they do at the Suffolk County House of Correction. In addition, volunteers lead drug abuse recovery groups and parenting discussions. At the Essex County Women in Transition Program daily parenting groups, recovery groups, activities, and social services for women dealing with addiction are offered, as is a Mom and Me literacy program. Participation is voluntary, except for women in the Recovery Unit and those ordered by a judge to participate.

Therapeutic intervention

MCI Framingham has a Family Services Unit staffed by two family caseworkers whose priority is to work with the 50-65 inmates whose children are under the jurisdiction of DSS caseworkers. The staff also work with the children’s caregivers—who often harbor resentment toward the children’s mothers—to encourage communication between mothers and caregivers. Caseworkers may offer services to other inmates with children, but children under DSS supervision receive priority. Volunteers from Parents Anonymous hold classes for inmates on anger management and raising self-esteem. In Hampden County considerable emphasis is given to the V.O.I.C.E.S. (Validation, Opportunity, Inspiration, Choice, Empowerment, and Safety) program, in which counselors help women address their addictions, understand the effects of trauma, and learn about anger management. They also learn about child development and how to re-establish mother-child connections. Substance abuse treatment is offered at the facility but there is a shortage of beds allocated for women in a nearby facility for seriously addicted women. A ninety-day treatment program at an alcohol treatment center in Springfield has 170 beds for the region. However, only nineteen beds are earmarked for women, and only twelve of these are for women in Hampden County. In Suffolk County the Recovery Unit houses women who have been sentenced for substance abuse offenses and holds them for ninety days of intensive programming. Essex County WIT is described primarily as a treatment center and the Maris Center, a drug treatment program, is also housed at the facility.

Legal advice

Volunteer attorneys from Suffolk Lawyers for Justice and from Aid to Incarcerated Mothers, located in Boston, offer inmates assistance with child custody concerns, clearing up outstanding warrants (which may render them ineligible for pre-release facilities), as well as guardianship and health issues.

REUNIFICATION

“Continuing contact between parent and child is perhaps the most significant predictor of family reunification following parental incarceration.”

Pre-release facilities

At MCI Framingham, women with a short amount of time to serve prior to parole or release may be moved from the prison to the South Middlesex Center which is located close by, or to the Women and Children Program in nearby Westborough. Pregnant women and those who have newborns are given priority, as are women with substance abuse problems. Family visits can take place in a trailer on the grounds for women who have participated in a ten-week course on parenting, but preparation and support for these visits are not routinely provided. At Hampden County there is a pre-release unit with thirty beds for women. In Suffolk County women may be moved to Whittier Street Health Center where they have the opportunity to build connections with other agencies, work on discharge planning, and strengthen community ties. In addition, women inmates may move from the Recovery Unit to McGrath House, a pre-release facility with fifteen beds for women, run by Community Resources for Justice. From there they are able to utilize a Women’s Resource Center in Jamaica Plain, a neighborhood in Boston, that offers drop-in services and group meetings. At Essex WIT work-release opportunities are available for approximately 57 percent of inmates. Inmates who have jobs, sponsors, and no disciplinary issues may be granted approval by a board to receive an electronic bracelet and to work outside the facility.
INFORMATION

Number of inmates and status of children
Data on the total number of women held annually at MCI Framingham are available but are not widely publicized, similar to the number of pregnant and postpartum inmates. Essex County WIT is the only other site with readily available aggregate data on inmate characteristics, including number of children. In Hampden County House of Correction, the Family Services Specialist is knowledgeable about inmate family circumstances because the unit conducts in-depth assessments of inmates’ family circumstances and enters the information into the inmates’ files. Although these data are not aggregated, they estimate that 85 percent of their female inmates are mothers, 90 percent are single parents, over half have had some involvement with DSS prior to incarceration, and 60 percent have ongoing DSS involvement. MCI Framingham has some information (self-reported) on the number of inmates with children, but not on their ages, legal status, location, or the number of visits and contacts. Family specialists who work with the children supervised by DSS estimated that most children live either with their grandmothers or other relatives, with about 25 percent in DSS-supervised foster care. In Hampden County the Family Services Specialist estimated that most children live with their grandmothers and that about 25 percent of the inmates’ children are under DSS supervision. Despite the Department of Social Services’ obligation to ensure children’s visits with their mothers, there are no aggregate data on the number of children under DSS supervision whose mothers are incarcerated.

The only facility that collects data on program effectiveness is the Essex County WIT program. Its data show that women who complete ninety days of treatment have better chances of success than those with shorter stays. In 2003, eighteen out of twenty-three women had not re-offended. Staff at Hampden County expressed an interest in research that would assess the effectiveness of programs, but they do not have the capacity to undertake it.
FIGURE 7. FAMILY CONNECTIONS RESOURCES IN SELECTED FACILITIES, MA, 2003

<table>
<thead>
<tr>
<th>ACCOMMODATION RESOURCES</th>
<th>Framingham</th>
<th>Hampden</th>
<th>Suffolk</th>
<th>Essex (WIT)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Visits/Contacts</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Transportation assistance</td>
<td>X¹</td>
<td>X²</td>
<td>X³</td>
<td>X²</td>
</tr>
<tr>
<td>Contact visits</td>
<td>X</td>
<td>X²</td>
<td>X³</td>
<td>X</td>
</tr>
<tr>
<td>Special children’s visiting area</td>
<td>X</td>
<td>X⁴</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Monitored/supervised visits</td>
<td></td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Toys/books available</td>
<td>X⁵</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Snacks allowed</td>
<td>X⁶</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Holiday parties</td>
<td>X</td>
<td>X</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>Mother-child reading/crafts projects</td>
<td></td>
<td></td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>Phone calls</td>
<td>15 per month</td>
<td>15 per month</td>
<td>20 min. limit</td>
<td>No limit</td>
</tr>
<tr>
<td><strong>Parenting</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Classes (no child present)</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Family literacy</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Girl Scouts Bars</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>Parent discussion groups</td>
<td>X</td>
<td></td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>Pre-natal/post-natal care</td>
<td>X</td>
<td></td>
<td></td>
<td>X</td>
</tr>
<tr>
<td><strong>Therapeutic intervention</strong></td>
<td></td>
<td></td>
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<td></td>
</tr>
<tr>
<td>In-depth family assessment</td>
<td>X⁸</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Anger management</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Self-esteem groups</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Kin/caregiver groups</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Substance-abuse treatment</td>
<td>X</td>
<td></td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>Mental health treatment</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td><strong>Other</strong></td>
<td>Framingham</td>
<td>Hampden</td>
<td>Suffolk</td>
<td>Essex (WIT)</td>
</tr>
<tr>
<td>Legal services, custody issues</td>
<td>X⁹</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Family service specialists</td>
<td>X</td>
<td></td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>Liaison with DSS workers</td>
<td>X¹⁰</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Gender-responsive training</td>
<td></td>
<td></td>
<td></td>
<td>X</td>
</tr>
<tr>
<td><strong>REUNIFICATION RESOURCES</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pre-release planning</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Pre-release jobs</td>
<td>X</td>
<td></td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>Overnight visits at facility</td>
<td>X trailer</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Overnight visits outside facility</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Nursery for infants</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>INFORMATION</strong></td>
<td>Framingham</td>
<td>Hampden</td>
<td>Suffolk</td>
<td>Essex (WIT)</td>
</tr>
<tr>
<td>Maternal status</td>
<td>X</td>
<td>X</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>No. of Children</td>
<td>X</td>
<td></td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>Visits, other contacts</td>
<td></td>
<td></td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>Program, resource utilization</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Program assessment/evaluation</td>
<td></td>
<td></td>
<td></td>
<td>X</td>
</tr>
</tbody>
</table>

¹ Community-based programs, for example, Aid to Incarcerated Mothers and Patriot’s Trail Girl Scouts provide transportation for children to the prison.
² Numbers may be limited due to lack of space in visiting room.
³ Limited to 4-5 times a week.
⁴ Limited space accommodating no more than 20 children.
⁵ DSS Family Service Unit only.
⁶ Clear drinks for infants only.
⁷ Additional phone calls to DSS may be made from the counselors’ office.
⁸ DSS supervised children only.
⁹ Suffolk Law School and others offer pro-bono advice.
¹⁰ DSS supervised children only.
CONCLUSIONS

“Recognizing the centrality of women’s roles as mothers provides an opportunity for the criminal justice, medical, mental health, legal, and social service agencies to develop this role as an integral part of program and treatment interventions for women.” 52

Women in prison have traditionally been either ignored or marginalized. Researchers have only begun to document the numbers, conditions, and concerns of women prisoners within the past two or three decades, and it was not until the past decade that the language of gender-specific practices was widely discussed. Certainly, the notion that maintaining and strengthening family connections is one of the most successful ways of reducing recidivism is not new,53 but creating a well-coordinated, systematic, and gender-specific approach to family connections would be an innovation. The resources necessary to accomplish such a plan need to include more than parenting classes; they should also address women’s histories of abuse and provide tools to help women enter the labor force. Even in cases where it is unlikely that women will be reunited with their children, they can benefit from resources to help them cope with developing positive relationships. Modeling such relationships in institutional facilities is essential.

As we stated at the beginning of this report, we have been thwarted by a lack of readily available data that are necessary for an in-depth review of policies and resources. Our aim is not only to point out the data that are lacking but also to let more people know about the positive resources and efforts we have identified. The data we collected lead us to the following conclusions:

• The overcrowded ATU at MCI Framingham creates extra burdens on the family relationships of women who have not yet been sentenced.

• Women from areas of the state without institutional facilities also have extra burdens placed on their relationships, ranging from difficulties in making contacts with their families to obtaining information about custody hearings.

• Visiting policies vary in their frequency and the conditions under which they take place. Not all facilities allow contact visits, and none has a visiting room that is both fully equipped for children and large enough to accommodate the families that need it. Despite the long trips some children take to visit their mothers and the extra time required to wait in line to enter the facilities, only one venue allows children to bring snacks (clear fluids, only).

• DSS policies ensure that children under their supervision are required to have regular visits with their mothers and this mandate is reflected in existing protocols spelling out the mutual responsibilities of DSS workers, correctional officers, and inmates during visits. However, it is an unfortunate irony that inmates who are reluctant to reveal they have children when they are arrested (out of fear of losing custody) are more likely to lose custody because they do not maintain contact with them, resulting in a catch-22 situation.

• Although making calls would appear to be less problematic than visits, in fact phone policies are quite restrictive. DOC rules limit the number and length of calls inmates can make, children cannot call in, and caregivers often block collect calls from incarcerated mothers because of the expenses entailed.

• There appear to be wide variations in parenting resources and in the level of skilled and experienced personnel working with women on family issues (legal, emotional, and educational). Volunteer groups—Girl Scouts, ministers, religious groups, attorneys, the National Guard, and community-based groups—are a mainstay of support, but their existence is often tenuous because of their dependence on external funding and institutional authorization.54
• Despite the high incidence of mental illness, substance abuse, and sexual trauma—often in combination—treatment remains fragmented rather than holistic. Addressing one problem at a time is not the most effective form of treatment. Few correctional facilities have adopted a gender-specific approach that recognizes that women’s circumstances require special consideration.

• Successful transitions from prison to community life cannot be accomplished through correction alone. Women who leave facilities and want to be successful parents need concrete resources such as housing, therapeutic treatment, a source of income, and supportive networks. There has been a decline in previously relied upon resources to assist family reunification. Changes in Massachusetts public assistance policies have resulted in a decline in inmates’ eligibility for cash benefits, food stamps, and subsidized housing after release.

• Small-scale community-based and pre-release centers are highly conducive to maintaining family relationships, particularly when security concerns are addressed through the use of electronic bracelets.

• Although some opportunities exist for women to participate in work release, we do not know the extent to which these experiences are parlayed into jobs after release.

• There is a lack of accurate information about both the people who are affected by incarceration—mothers, children, and caregivers—and the resources—number, type, and quality—that facilitate family connections. Much of the information is anecdotal and knowledge about the implementation of policies, practices, and resources is sparse. There has been virtually no research in Massachusetts to document current policies and practices and their effectiveness.

• The lack of data extends to other critical areas—for example, the Departments of Social Services and Transitional Assistance. We are also not familiar with the degree to which DSS case-workers assist with family reunification for mothers coming out of prison. We were unable to explore data collection in the Department of Transitional Assistance on children who receive benefits while their mothers are in prison.

• Although we have not focused on the Department of Public Health in this report we are aware that it has been responsible over the years for introducing some landmark programs to MCI Framingham. Also, although the Department has extensive data on HIV/AIDS in Massachusetts, a disease that is a very real problem for many women inmates, we were unable to review policies and practices regarding treatment and the special concerns presented by the disease for family connections.
First, we need to acknowledge that female offenders in general, and women in prison in particular, have special needs that are largely overlooked within the criminal justice and correction systems, and it is unacceptable to marginalize women based on the rationale that they constitute only a relatively small proportion of the prison population. It is essential that we change our overall approach to women in correction if we wish to effectively address female inmates' needs. We draw some encouragement from the fact that a 2004 report on the overall status of correction noted that “…There should be a dedicated external review of the unique issues pertaining to female offenders.”

We agree with this finding and make the following general and specific recommendations:

**General (Long-Term)**

1. Commission a thorough review of current resources and policies throughout correction facilities and undertake a detailed inventory—quality and quantity—of existing resources in prisons serving women and family connections. Assess the effectiveness of all resources and policies through timely and consistent evaluations of participation levels, quality, relevance, and satisfaction; enable follow-up studies to measure program/policy impacts.

2. Explore and adopt system-wide, gender-specific, and holistic treatment approaches that address women’s roles as parents, their drug abuse problems, and their histories of emotional, sexual, and physical abuse.

3. Delineate areas of responsibility and oversight within correction for developing and maintaining gender-specific approaches.

4. Develop a comprehensive Family Connections Policy Framework that addresses the PREVENTION and ANTICIPATION components, as well as ACCOMMODATION, REUNIFICATION, and INFORMATION. This effort should be undertaken with the cooperation of experts, including the Departments of Social Services, Transitional Assistance, Mental Health, Public Health, and community-based agencies.

5. Expand the focus of the Family Connections Policy Framework from its ACCOMMODATION, REUNIFICATION, and INFORMATION components to include PREVENTION and ANTICIPATION.

6. Develop a research plan/management tool to monitor both the process and the effects of existing treatment and administrative practices.

**Specific (Short-Term)**

**ACCOMMODATION**

1. Expand transportation options to facilitate and increase prison visits.

2. Establish contact visits for families at all facilities.

3. Create family-friendly visiting rooms with sufficient space to accommodate all families.

4. Allow children to bring snacks into correctional facilities or have food available for them.

5. Encourage mothers to engage in age-appropriate reading and play with children.

6. Review phone policies to facilitate calls between mothers and children.
7. Establish consistency of services and visits by volunteer and outside organizations.

8. Encourage mothers and children to exchange letters, drawings, photographs, and audiotapes.

9. Supervise visits and provide support to families that have a history of difficult relationships with children and other family members.

10. Make efforts to overcome mothers’ fears of revealing they have children.

11. Acknowledge and reward innovative and successful programs.

12. Encourage correctional personnel to share innovative approaches and to communicate with, and learn from, one another.

REUNIFICATION

1. Increase opportunities for weekend furloughs, overnight family visits, work release, and utilization of community services.

2. Use visits as a teaching tool: create instructive, supportive preparations and debriefings around family visits.

3. Establish collaborative relationships among correction, state, and private agencies to prepare women to gain access to treatment, housing, jobs, education, childcare, and financial resources on their re-entry to the community.

4. Permit women awaiting trial and serving nonviolent sentences on parole to be monitored with electronic bracelets, allowing them greater freedom of movement to visit family members.

5. Review state public assistance and housing policies regarding mothers’ eligibility for benefits and subsidies.

INFORMATION

1. Analyze existing data more effectively (and add new data where necessary) to provide information on the full number of women and children who are affected by their mothers’ incarceration for any length of time.

2. Create opportunities to encourage correctional personnel to review existing data on inmate characteristics, expand data collection for planning purposes, and develop consistent reporting practices for state and county inmates.

3. Provide accessible information to family members on regulations affecting family connections, e.g., phone and visiting policies, and transportation options.

There were a number of positive changes in 2004. With a new Correction Commissioner, a newly appointed Female Offender Specialist, and comprehensive reports from two distinguished Commissions—Criminal Justice and Correction—we are optimistic that the time is ripe for discussion and action to improve awareness of the special problems of women in prison and to highlight the importance of maintaining family connections for both their families and for society.
A final draft of this report was presented at a forum held at the University of Massachusetts Boston in March 2005. The purpose of the forum was to solicit responses to the report's findings and recommendations prior to its printing and dissemination. The audience consisted of approximately fifty invited experts. Several participants were invited to comment on the report's findings and recommendations. The commentators included the Commissioners, or their delegates, of the Departments of Correction, Mental Health, Public Health, Social Services, and Transitional Assistance; an attorney who works with Aid to Incarcerated Mothers (AIM), and a law professor experienced with juvenile girls in the custody of the Department of Youth Services. In addition, the report was sent to the Lieutenant Governor of Massachusetts, Kerry Healey, a criminologist by training and the invited speaker.

This section summarizes responses to the report from the seven commentators, six small group discussions, and a one-page questionnaire distributed to all forum participants.

The high number of women and children affected by mothers' incarceration.
A major contribution of the report was considered to be providing estimates of the annual numbers of Massachusetts women and children who are affected by their mothers’ incarceration. These numbers effectively highlighted the magnitude and seriousness of the issue of family connections.

The need to improve data collection and include more focus on houses of correction.
There was widespread agreement with the report's recommendation that the DOC should make “flow” data, i.e., annual counts of the women in their custody, more accessible. There was similar agreement on the need for more data on women and their children; and it was suggested that it would be helpful to introduce training for intake officers and caseworkers on collecting data in a non-threatening manner. The Commissioner of the Department of Social Services discussed ways in which data on mothers and children could be collected without breaching confidentiality, and other agencies made suggestions on the feasibility of sharing data. There was general agreement that an inventory of services and resources available to women in prison should be conducted, and that a review of resource utilization and effectiveness was essential. Houses of correction need to be included in reviews of inmate needs and resources.

The difficulty of establishing and maintaining family connections was reinforced.
Many in the audience agreed that prison visits were problematic. Difficulties included conditions at the correctional facilities that frightened children, the distances involved coupled with the lack of public transportation, a reluctance to see children become upset when parting from their mothers, and social workers' apprehensions about making prison visits. Some participants mentioned that social workers often did not provide children with the monthly visits required by DSS. Increasing awareness of these problems was noted. The DSS Commissioner commented that he had recently requested an end to the practice of routinely searching diapers for contraband.

Continuing concern about custody termination and lack of foster care reviews.
The AIM attorney underscored a concern about termination of custody cases without mothers’ knowledge. Problems occur when notices of such terminations are sent to women at their last address rather than to their correctional institutions. Indeed, the termination process may be speeded up when women do not appear at custody hearings. Similarly, women are either not notified or cannot attend their children’s foster care reviews. The Commissioner of DSS offered to review current practices and to work to change these practices. The juvenile justice expert stated that teenage girls are especially likely to lose custody because as minors they have even fewer rights than adult mothers.
Length of sentence as a factor in family connections.
The AIM attorney and experts from several correctional facilities agreed with the report’s observations that mothers serving short sentences often have more problems with maintaining family connections than mothers serving longer sentences. Mothers with shorter sentences tend to have severe substance abuse problems and they cycle in and out of prison, never staying long enough to benefit from real treatment options. Each time they are incarcerated their children are likely to experience serious disruptions.

Underscoring the necessity of addressing women’s physical, sexual, and substance abuse problems.
Numerous participants addressed the problem of multiple abuses that women inmates often experience. They echoed the report’s findings that maintaining family connections is particularly important for these women because their children provide a strong motivation for efforts to turn their lives around.

Agreement that greater collaboration among state agencies was desirable.
Commentators from several state agencies agreed with the report’s recommendations that state agencies could collaborate more to address these issues. Several commentators mentioned positive models they had developed. DSS and DOC had jointly organized a family group conference in a women’s prison to discuss the placement and care of an inmate’s two young children; the Department of Public Health recently completed a strategic plan for the treatment of substance abuse involving collaboration with several state agencies; and the Department of Transitional Assistance recently created a discharge plan that involved collaboration with other agencies to move homeless families into new housing. In addition, the Commissioners offered to look into closer collaboration in sharing data on children, and in ensuring that women leaving prison are eligible for health benefits and housing. An Assistant Commissioner from the Department of Mental Health stated that mentally ill mothers experience a “conspiracy of silence” that is very similar to the situation of women in prison.

Importance of examining the PREVENTION, ANTICIPATION, and REUNIFICATION components.
Several participants suggested that the next focus of research should be documentation of the resources and protocols affecting the PREVENTION, ANTICIPATION, and REUNIFICATION components of the Family Connections Policy Framework, especially the re-entry phase.
ENDNOTES


4 Adalist-Estrin, “Why Maintain Relationships?”


6 Commonwealth of Massachusetts, New Court Commitments to Massachusetts County Correctional Institutions in 2003 (Boston: Department of Correction, 2004); Commonwealth of Massachusetts, January 1, 2003 Inmate Statistics (Boston: Department of Correction, 2004).

7 Commonwealth of Massachusetts, New Court Commitments in 2003; Commonwealth of Massachusetts, January 1, 2003 Inmate Statistics.


11 Harrison and Beck, “Prisoners in 2003.”

12 Harrison and Beck, “Prisoners in 2003.”


18 Mumola, Incarcerated Parents and Their Children, 1.

19 Christina Jose Kampfner, “Post-Traumatic Stress Reactions in Children of Incarcerated Mothers.” In Children of Incarcerated Parents, Gabel and Johnston, eds.

20 Denise Johnston, “Effects of Parental Incarceration.” In Children of Incarcerated Parents, Gabel and Johnston, eds., 105.

21 Typically women’s low income status and lack of property prevent them from being able to post bail.

22 Mumola, Incarcerated Parents and Their Children, 1.

23 In interviews with over one hundred women in prison, Erika Kates found that children of white women were more likely to enter state custody than children of African-American or Hispanic women. See her Litigation as a Means of Social Change.


25 Kampfner, “Post-Traumatic Stress Reactions in Children of Incarcerated Mothers,” 92.

26 Kampfner, “Post-Traumatic Stress Reactions in Children of Incarcerated Mothers,” 93.

27 Kampfner, “Post-Traumatic Stress Reactions in Children of Incarcerated Mothers,” 97.


30 Mumola, Incarcerated Parents and Their Children, 1.

31 Miriam Ehrensaft et al., Patterns of Criminal Conviction and Incarceration among Mothers of Children in Foster Care in New York City (New York: Vera Institute of Justice and Administration of Children’s Services, December 2003), 25.

32 Hughes and Harrison-Thompson, “Prison Parenting Programs: A National Survey,” 58.


The Personal Responsibility and Work Opportunities Reconciliation Act (PRWORA), 1996, permits states to refuse to pay Temporary Assistance to Needy Families benefits to women with drug records.

Parke and Clarke-Stewart, “The Effects of Parental Incarceration on Children.

Hughes and Thompson, “Prison Parenting Programs: A National Survey,” 58.

As a former director of a pre-trial diversion program for women in Boston, Erika Kates is familiar with this model.


Commonwealth of Massachusetts, New Court Commitments; Commonwealth of Massachusetts, January 1, 2003 Inmate Statistics.

These data were provided by Michelle Donaher, Female Offender Specialist, Massachusetts Department of Correction, 2004.

Data provided by Michelle Donaher.

Carol Hardy-Fanta and Sylvia Mignon, Alternatives to Incarceration for Substance-Abusing Female Defendants/Offenders in Massachusetts, 1996-1998 (Boston: University of Massachusetts, March 2000).


Commonwealth of Massachusetts, January 1, 2003 Inmate Statistics.

Antoniewicz, Fact Sheet.


Community-based programs, for example, Aid to Incarcerated Mothers and Patriot’s Trail Girl Scouts

Covington, “A Woman’s Journey Home,” 68.

Erika Kates, Helen Levine, and LaKay Cornell, Women of Color and HIV/AIDS in Massachusetts, Fact Sheet (Boston: Center for Women in Politics and Public Policy, University of Massachusetts, December 2004).

Commonwealth of Massachusetts, Strengthening Public Safety, 48.

Commonwealth of Massachusetts, Strengthening Public Safety, 53.
WOMEN IN PRISON AND FAMILY CONNECTIONS

Female Population
1. Do you hold **sentenced** women in your county facility? _______
   a) If no, where are they held? _______
   b) If yes, what is your average daily count for 2003? _______
   c) If yes, what is your average daily count for 2002? _______
   d) If yes, what is your average daily count for 2001? _______

2. Do you hold **pre-trial** women in your county? _______
   a) If no, where are they held? _______
   b) If yes, what is your average daily count for 2003? _______
   c) If yes, what is your average daily count for 2002? _______
   d) If yes, what is your average daily count for 2001? _______

3. Do you hold federal women in your county? _______
   a) If no, where are they held? _______
   b) If yes, what is your average daily count for 2003? _______
   c) If yes, what is your average daily count for 2002? _______
   d) If yes, what is your average daily count for 2001? _______

Demographic Information
4. What is the average age of the female inmates? _______
5. Do you keep data on the education level of female inmates? _______
6. Do you keep data on the marital status of female inmates? _______
7. Do you keep data on the children of female inmates? _______

Visiting Practices
8. Can inmates have contact visits with their children? _______
9. How many visits is an inmate allowed per week? _______
10. Are inmates able to have special visits with their children? _______
11. Do you keep data on how often inmates have visits with their children? _______

Is there someone who is responsible for the women inmates we can contact?

THANK YOU VERY MUCH FOR YOUR TIME
APPENDIX B

WORKS CITED AND ADDITIONAL REFERENCES


Bistrian, Jordan. Incarcerated Mothers and the Foster Care System in Massachusetts: A Literature Review. Boston: Massachusetts Department of Social Services, April 1997.


Center for Women in Politics and Public Policy’s extrapolation from inmate population data obtained from the Department of Correction, 2003.


About the Authors

Erika Kates is the research director at the Center for Women in Politics and Public Policy. She was the first criminal justice planner in Massachusetts to be hired with Law Enforcement Assistance Administration (LEAA) funding, working first in Lawrence and then in Eastern Middlesex County, where she was a member of the first group of Women in Criminal Justice. She has directed a pretrial diversion project for female offenders appearing in the Boston courts, and was a member of a committee seeking alternatives to incarceration in Hampden County. In 1984, she completed a doctoral dissertation investigating the legal concerns and resources for women in prison in five prisons in the Northeast. At the Center she oversees research projects on women holding political office in New England and the U.S., and economic inequities among women in Massachusetts. For the past fifteen years, she has conducted research on low-income women’s access to education and published widely in this area.

Paige Ransford is a research assistant at the Center. She was previously a counselor and life skills educator at Suffolk County House of Correction. Her previous work at the Center includes an examination of the sentencing patterns in the Boston courts of female offenders with histories of substance abuse. She is currently tracking women in political office in Massachusetts, the rest of New England, and the U.S.

Carol Cardozo was a research associate at CWPPP for 10 years before her retirement in 2003. In that capacity, she worked on a study that examined the sentencing patterns of female defendants/offenders with histories of substance abuse. She was an active member of the Caucus of Massachusetts Women Legislators’ Working Group on Women in Prison.