

# Mother and Baby Prison Units

An Investigative Study

For Winston Churchill Memorial Trust  
Written by Libby Robins (2011 recipient)

*One chance  
one opportunity,  
one bond*

*(quote from an ex inmate of  
Christchurch Women's Prison  
Mother and Baby Unit)*

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Year of Travel 2011

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## **Executive Summary**

During the period July through to early September 2011, as director of Family Help Trust (FHT) Christchurch and in my capacity as a Winston Churchill Fellowship recipient, I visited six female prisons in the United States of America and four in the United Kingdom. Time spent in each facility varied from two hours in Bedford Hills, New York, through to three days in Coffee Creek, Portland Oregon.

In addition, I met with three researchers, (New York, Maryland and Nebraska) and four not for profit organisations (three in New York and one in Stirling, Scotland). I interviewed 25 female offenders, a mixture of currently incarcerated and previously incarcerated, and over 20 staff members between all the prison facilities.

The purpose of this investigative research was to bring back information that would benefit a range of agencies including: New Zealand government policy makers, members of parliament, the New Zealand Department of Corrections, the New Zealand Women's Prison Service, researchers, Family Help Trust (FHT), Child Youth and Family (CYF), the Families Commission, the Commission for Children and all New Zealand community agencies involved with the offending population.

In 2008 new legislation was passed that allowed infants to remain in two of the three New Zealand prison nurseries until they were two years old (Auckland and Christchurch). The remaining prison (Wellington) was not included in this legislation and is only able to accommodate infants until they are nine months old.

Two of the self-care houses at Christchurch Women's Prison (CWP) were 'toddler proofed' and two mother and baby houses were built at Auckland's new women's facility in Wiri in 2011. These units were officially opened by the then Minister of Corrections, Hon Judith Collins, in September 2011.

Key points and findings that have emerged from this investigative research are:

- New Zealand has been progressive in the style of accommodation provided to mothers and their infants. This model a self-contained motel unit or a small flat or house in the community.
- There was only one prison (Cornton Vale's independent living units), that allowed mothers to accompany their infants on outings outside the prison gates. In contrast, New Zealand women's prisons have made significant efforts to normalise the children's experiences as much as possible and both infants and their mothers visit community facilities beyond the wire.

- The evidence available concerning the reductions in reoffending for mothers having benefitted from prison nurseries, when compared to mothers from the general prison population who were not able to keep their infants with them, is compelling, particularly in the United States. Nebraska Women's Facility and Bedford Hills, New York are the two prisons that stood out for their efforts to provide research evidence.
- It is imperative that New Zealand keeps good data on all mothers who reside and are then released from our mother and baby prison units. This data needs to include community outcomes, albeit this could be considered outside the responsibility of the Department of Corrections for those inmate mothers who are released without parole conditions.
- New Zealand, because of its size, is in a unique position to research the post-release outcomes for these mothers, and provide comparative research that could include a control group. Using randomisation would, in my opinion, be inappropriate, unless it was mothers who had not been able to reside in nurseries due to lack of capacity. It is important that the issue of community outcomes beyond the reach of Corrections' jurisdiction is addressed to ensure that such information is available for research purposes. In the United States there was no scope to cross-match data interstate and in the United Kingdom there was no research was currently being

undertaken on this issue. The only figures I was able to obtain were prison by prison, and data collection methods varied hugely.

- For mothers without any family support, the concept of trained voluntary doulas (birth companions) is worth considering in New Zealand. Doulas were used comprehensively in both the United States and the United Kingdom and were highly valued by inmate mothers.
- International mother and baby prison nursery facilities I visited have the throughput that allows them to provide extensive childcare facilities staffed by professional early childhood educators while mothers attend programmes or work within the prison. While New Zealand's efforts to provide similar is clearly limited by a much smaller number of pregnant inmates, given the gradual rise in female incarceration in New Zealand, together with current harder line sentencing laws, some future proofing needs to be considered.
- While support for breastfeeding mothers in the prisons I visited was considered important, mothers being expected to return to their work duties as early as six weeks post-birth did seem out of line with breastfeeding recommendations and maternity protection.<sup>1</sup> Exclusive breastfeeding is generally recommended for six months after birth, and then a continuation of breastfeeding for up to two

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<sup>1</sup> Ministry of Health NZ. (2008). *Food and Nutrition Guidelines for Health Infants and Toddlers*. Wellington, Ministry of Health

years or longer if desired, along with suitable complimentary foods.<sup>2</sup> Support for breastfeeding is essential as breastfeeding 'success' for this vulnerable population makes a significant positive contribution to maternal and infant well-being and health, both short and long-term, and to maternal bonding and secure infant attachment.<sup>3 4 5</sup>

- While attempts to limit smoking around pregnant mothers and infants were made in both the United Kingdom and United States mother and infant units, all allowed smoking to some degree. It is of particular interest that as of 1 June 2011, when the New Zealand ban on smoking in prison came into effect, there has been no unrest or riots as might have been expected<sup>6</sup> and which was a significant concern to those prisons I visited.
- Judges in some states in America routinely sentence a pregnant woman to 366 days in a state prison, allowing her to potentially keep her infant with her in a nursery. A sentence of less than 366 days in a city jail with no nursery will lead to an automatic separation once the infant is born.

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<sup>2</sup> Galtry, J. *Breastfeeding, labour market changes and public policy in New Zealand*. Is promotion of breastfeeding enough? Women's Studies Department, Victoria University of Wellington.

<sup>3</sup> Feldman, R., Weller, A., Zagoory-Sharon, O., & Levine, A., (2007). Evidence for a neuroendocrinological foundation of human affiliation: plasma oxytocin level across pregnancy and the postpartum period predict mother-infant bonding. *Psychol Sci*, 18. (11):965-970

<sup>4</sup> Buchheim, A., Heinrichs, M., George, C., Pokorny, D., Koops, E., Henningsen, P., O'Connor, P-F., & Gundel, H. (2009) Oxytocin enhances the experience of attachment security. *Psychoneuroendocrinology*

<sup>5</sup> Fonagy, P., Luyten, P., Strathearn, L. (2011) Borderline personality disorder, mentalization, and the neurobiology of attachment. *Infant Mental Health Journal*. 32, (1): 47-69, January/February

<sup>6</sup> [www.stuff.co.nz](http://www.stuff.co.nz) 27<sup>th</sup> August: Ian Steward

- A prison nursery affords a unique opportunity for a recidivist offending pregnant woman to raise her infant in a 'safe and secure' environment away from her complex and generally violent life in the community. In addition, she receives intensive and ongoing support and parent education that will assist her to attain a secure attachment to her infant, so reducing the probability of further prison terms and her children being removed and raised by the state sector. In the absence of mother and infant alternatives to prison residential facilities, and depending on the seriousness of offending, this option is worthy of serious consideration by the New Zealand judiciary.
- Bedford Hills New York not only has extensive programmes for both mothers and their infants, but also mothers estranged from older children. In addition, the supported accommodation, employment assistance and general through service given by the Hour Children Charity offered an outstanding opportunity for recidivist women to reverse the probable negative trajectory for both themselves and their children. Nebraska also went to considerable effort to assist mothers estranged from their children with the five nights a month option in the prison nursery as well as the early childhood visiting facilities and playground facilities.
- in New Zealand, in spite of the problem of whether responsibility lies with the Department of Corrections or Child Youth and Family, the

issue of support for mothers and their infants post-release needs to be addressed. This is central to whether or not prison nurseries, both now and in the future, are considered cost effective and can contribute significantly to reducing reoffending. The New Zealand government's view (then Minister of Corrections Hon Judith Collins) when the new units at Christchurch and Auckland Women's Prisons were officially opened in September 2011 was "this is money well spent if it stops the babies becoming criminals".<sup>7</sup> I contend that equal effort and expenditure is essential in the *community* if recidivism among these mothers is to be successfully reduced.

- The recently published (April 2012) Commission on Women's Offending (Dame Elish Angiolini commissioned by the Scottish government) makes some important recommendations concerning the establishment of 'one stop shop' community facilities that have both residential beds and day centre programmes for low risk repeat female offenders. The purpose is to address their criminality, mental health and trauma issues as well as alcohol and drug addictions.

While there are some residential centres in New Zealand they tend to have limited places and limited resources and they have a single focus e.g. drug and alcohol treatment. Such centres, so long as they catered for

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<sup>7</sup> 3news 22<sup>nd</sup> September, 2011 Jessica Rowe

children as well, could provide the all-important through care concept for mothers and their infants from the mother and baby prison units.

Dame Elish Angiolini's report was in response to the doubling of the Scottish female rates of incarceration over the previous ten years, now having reached a number very similar to that found in New Zealand. It highlights that in a single year up to 30,000 children will have had a mother or father behind bars, 30 per cent of whom will develop physical and mental health problems and up to half will themselves go on to offend.

The cost effectiveness of establishing residential and non-residential centres for female offenders in preference to imprisonment is obvious when compared to the cost of female prison cells in New Zealand. Such centres, together with the through care concept for mothers and their infants returning to the community from the mother and baby units in our female prisons, have the potential to reduce recidivism and ensure better outcomes for mothers, children and families.

## **Introduction**

In December 2010 I was delighted to receive a Winston Churchill Fellowship (2011) to study mothers and babies prison units in the United States and the United Kingdom. From December 2010 until my departure in mid July 2011 I planned and negotiated with 13 prisons to gain entry and assistance with my investigative research.

Taconic Prison in New York State closed its unit within weeks of my departure from New Zealand. Reikers Island, New York State, was unable to facilitate my visit through lack of staffing and Holloway Prison in North London, United Kingdom, refused me access to the prison. New York's Bedford Hills and London's Holloway have mother and baby units that were established in 1901 and 1902 respectively.

With the ten facilities I gained consent to visit I received the most extraordinary assistance and hosting. All were expecting me on the scheduled date and all put considerable effort into my programme. Visits varied from two hours to three days, depending on staffing available and internal regulations with visiting researchers. I had 27 separate flights and in the United States, where weather bombs are frequent, I dodged earthquakes, tornados and airports closing down due to weather.

Most facilities were battling the vagaries of rehabilitative services versus prison musters and the political will of the day. All had made the commitment to give children born into custody the chance to have a 'good enough' mother who was less likely to be re-imprisoned. My heartfelt thanks go to all those who assisted me in this extraordinary journey of discovery.

Sonja Alley, then Correctional Unit Supervisor at J wing, which houses the mother and baby unit at Washington Correction Center for Women (WCCW) has contributed the following wonderful comments that give clear insight into some of the reasons that staff undertake this work.

"I feel lucky to be part of such an innovative, forward thinking program that back in 1999 several thought was a crazy idea and would never work. Statistically we are doing something right and more importantly changing behaviour, thinking and relationships. I cannot think of a more important relationship than a Mother and a Child. Being a Mother takes whatever selfish motives you have as a person away and forces you to realize there are much greater things to invest in, this in part is why so many self-absorbed drug addicts leave a different person and understand the impacts that their poor decisions and addiction have on those around them.

Many of them are not first time Mothers, however it is the first time they are forced to deal with the trial & tribulations that Motherhood brings, not to mention the unconditional love felt that many of the offenders have never experienced”.

*Sonja Alley*

*Residential Parenting Program J Unit, WCCW*

### **New Zealand Mother and Baby Prison Units**

The Corrections (Mother with Babies) Amendment Bill 2008 signalled New Zealand’s intention to allow infants up to the age of two years to remain with their mothers in prison.

As a result of this legislation and a desire to prepare for these changes, late in 2008 Christchurch Women’s Prison (CWP) approached Family Help Trust (FHT) requesting assistance to pilot a parenting service for suitable inmates that would support them inside the wire and through into the community. FHT saw this as an opportunity to support highly vulnerable women to retain their infants and adequately achieve and maintain an effective relationship with them on release, while also interrupting their future criminal trajectory.

## **Travel Scholarship Funding Support**

As well as the Winston Churchill Memorial Trust, this investigative research has been financially supported by:

*Chief Executive of the Department of Corrections (Ray Smith)*

*Chief Executive of Child Youth and Family (Bernadine McKenzie)*

*Lottery Minister's Discretionary Fund*

*Harry Eyre Cohen (now deceased)*

*Family Help Trust*

This investigative study was conducted between July and September 2011 and involved visits to:

### **United States of America**

#### *New York:*

- Bedford Hills NY State Correctional Facilities
- Residential facilities operated by NGO Hour Children
- Correctional Association of New York, Women in Prison Project
- Women's Prison Association and their residential facilities
- Researcher, Dr. Mary Byrne (Columbia University School of Nursing)

#### *Indiana*

- Indiana Women's Prison, Indianapolis: Wee Ones Nursery

#### *Nebraska*

- Researcher, Joseph Carlson, University of Nebraska at Kearney

- Nebraska State Correctional Center for Women

*Oregon*

- Portland Coffee Creek Correctional Facility for Women

*Washington*

- Seattle, Gig Harbour: Washington Correctional Centre for Women

*Hawaii*

- Hawaii Women's Prison
- Salvation Army Family Treatment Services
- Senator Suzanne Chun Oakland

**United Kingdom**

*Scotland*

HMP Cornton Vale Women's Prison

Lilias Graham Trust

*London*

Anna Freud Centre

*Ashford, Mddx*

HMP Bronzefield

*Rugby*

Rainsbrook Secure Training Centre (Youth Justice Board)

*Wilmslow*

HMP & YOI Styal

Of those prisons that I planned to visit, I was unable to gain entry into three of them. These were: New York's Taconic Prison closed its mother and baby unit within weeks of the visit and transferred the small number of mothers and babies across the road to the Bedford Hills facility.

Reikers Island Correctional Facility, New York was unable to facilitate my visit and advised me it did not have the staffing ability. A community group (Hour Children) attempted to intercede on my behalf but this also was not successful. Finally, the United Kingdom's well-known Holloway Prison 'refused' me entry into its mother and baby unit.

### **International Mother and Baby Prison Units**

Mothers and babies prison units have been operating in the United States since 1901 (Bedford Hills Nursery, New York) and up until the 1950s prison-based nursery programmes for children born in custody were common in correctional facilities across the country. Since this time, many have fallen to the vagaries of the political will of the day and by the early 1970s all but Bedford Hills had closed their nursery programmes.<sup>8</sup>

However, with the increase of women being incarcerated, together with the growing understanding of the importance of the mother/infant relationship in determining positive child outcomes, prison nursery units in the United States are once more on the increase.

Research, being carried out by Dr Joseph Carlson (Nebraska University) and Dr Mary Bryne (Columbia University) respectively at Nebraska State

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<sup>8</sup> Mothers, Infants and Imprisonment May 2009 - [www.wpaonline.org](http://www.wpaonline.org)

Correctional Facility for Women and Bedford Hills Correctional Facility on both reoffending rates and infant/mother attachment levels is highly promising and deserves significant attention in this report. As part of my fellowship travel, I was delighted to attend meetings with both researchers.

In the United Kingdom, there are nine mother and baby units, some of which are in youth facilities for young women under the age of 18 years.

Holloway Prison in North London has the longest standing nursery (1902) and established a purpose-built unit in 1992. Babies were able to stay with their mothers prior to this time but the provisions made for them were only basic. Due to the length of time it has been operating and as such its importance to the United Kingdom mother and baby prison estate, Holloway's refusal to allow my visit to its mother and baby unit was probably the only real disappointment during my research. I was significantly concerned that Holloway appeared to refuse entry to scholars from other countries and by so doing prevent them from gaining important knowledge that could be helpful in the development and running of mother and baby units. It was particularly ironic that my visiting research scholarship was from the Winston Churchill Memorial Trust, which originated in the United Kingdom, and that over previous years FHT has hosted several United Kingdom Churchill recipients.

My fundamental concern was that Holloway Prison's refusal implied that this institution is not open to public scrutiny from such visits. While I was visiting other United Kingdom prisons I heard of other scholars who had also been refused entry to Holloway. The official written reason for my refusal was that Holloway had a public duty to protect vulnerable mothers and their babies.

Conversely, other prisons were extremely forthright about their shortcomings and their efforts to overcome them. In particular, Cornton Vale in Scotland stood out in this regard, although its lack of resources and overcrowding clearly limited these efforts.

In 2007, as a result of a call for a public enquiry into the deaths of six women at HMP Styal within a 13 month period, the Home Office commissioned a report conducted by Baroness Jean Corston that recommended sweeping changes for the sentencing of women and in particular women who were mothers.<sup>9</sup> Corston concluded that there were far too many women serving disproportionate or inappropriate sentences for minor, non-violent offences. Because women were generally the primary caregiver of children, their imprisonment caused significant and lasting trauma for their children. Corston recommended a radically

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<sup>9</sup> The Corston Report: Home Office March 2007

different approach for female offenders, and that those existing women's prisons should be dismantled and replaced with small, multi-functional custodial centres for the minority of women for whom the public requires protection. Of particular interest is the recommendation that, because women are generally the primary caregiver of children that alternative community solutions should be found that would be less likely to disrupt the lives of their children. While not excusing women's offending, Corston also pointed out that their offending was usually the result of being victimised through male behaviours. The rates of self-harming within prison facilities associated with mental and physical health problems, which are significantly worse in women's facilities than men's, also reinforces the need for more appropriate options where treatment can take place. "It is clear to me that prison cannot be the right place for managing these types of behaviours, which stem from deep-rooted long-term complex life experiences .....These are problems created within the community, which is where they should be addressed". Baroness Jean Corston March 2007.

In January 2008 The Children's Commissioner for England, who leads a national organisation called 11 Million, wrote a discussion paper aimed at policy makers, politicians and members of the judiciary concerning prison mother and baby units. This discussion built on the Corston Report and in particular, reinforced that: "further consideration should be given to the

needs of babies born to mothers in prison or whose mothers are imprisoned when their children are very young.”<sup>10</sup> 11 Million proposed that ‘there should be an end to the routine use of custody for women who are pregnant, or mothers of very young children, other than in exceptional circumstances where they represent a danger to society’.

It would appear that while government made a ‘commitment’ to fulfilling the Corston Report recommendations, interestingly there was no commitment to additional funding in order to carry out the recommendations.

In the seven *adult* mother and baby units in the United Kingdom, there are 75 places, although they have rarely been fully occupied. One of the major reasons for this low occupation is that women are obliged to make decisions based on the needs of their other children at home. Occupying a place in a mother and baby unit inevitably removes them from their home area. This is an important point that New Zealand needs to take account of in its own planning, though at this point only Christchurch and Auckland are able to accept mothers with children older than nine months.

In the United Kingdom, 11 Million ascertains that 18,000 children are separated from their mothers by imprisonment each year. In 2009 (6

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<sup>10</sup> 11 Million Prison Mother and Baby Units – do they meet the best interests of the child? January 2008

November) there were 4,274 women in prison.<sup>11</sup> Since the HMP Styal tragedies, it does appear that conditions in mothers and baby units have improved considerably, but there is widespread support for the move towards the “prison without walls” concept envisaged by Baroness Corston.

### **New Zealand Scene**

A TVNZ news item (11 March 2010) reported on Department of Corrections offender volumes report released the same week, highlighting that between 1986 and 2009 the number of female sentenced prisoners had increased from 98 to 389, a growth of 397 per cent. This is almost twice the rate of increase of male prisoners during the same period. As at 26 March 2012, there were 494 female inmates in custody. This had dropped from 538 on 9 March 2011.<sup>12</sup> According to Judge David Saunders<sup>13</sup> of the Christchurch District Court, this could be due to the 2007 amendment to the Sentencing Act, which made home detention a stand-alone sentence option and permitted offenders to remain in the community where various treatment options could be accessed. Intensive supervision was also added to the sentencing options.

Arohata Prison mother and baby unit in Wellington was the first to be opened in 2002, but has not been used since 2008 as there have been no

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<sup>11</sup> Bromley Briefings November 2009

<sup>12</sup> Judy Roughan, Social Worker CWP email correspondence 9 March 2012

<sup>13</sup> Personal communication 18 May 2012

eligible mothers. It is puzzling that two out of the three women's prisons have a reasonably constant stream of eligible mothers and the third has none. Having said this, Christchurch Women's Prison has had a noticeable drop in pregnant women in the last 12 months for no apparent reason.

The Department of Corrections web site fact<sup>14</sup> sheet states the following:

*Mothers and Babies:*

Purpose:

- To ensure the baby has an opportunity to bond with its primary caregiver in a safe and supportive environment and that a functional relationship can be established pending the mother's release
- To reduce the likelihood of the mother re-offending
- To lower the risk of "intergenerational transmission of criminality"

*Eligibility:* Self Care Unit option is only available to sentenced women who meet security requirements. It must be in the best interests of the child for a woman to be placed in the unit under the mother and baby placement option. Feeding and Bonding Facilities are available to remand and high security women. It must be in the best interests of the child for a woman to use the Feeding and Bonding Facilities.

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<sup>14</sup> [http://www.corrections.govt.nz/about-us/fact-sheets/managing-offenders/specialist\\_units/mothers-and-babies-options.html](http://www.corrections.govt.nz/about-us/fact-sheets/managing-offenders/specialist_units/mothers-and-babies-options.html) downloaded 24 May 2012

*Prisoner obligations:* Prisoners are required to address their offending issues by attending groups and programmes identified in their sentence plan.

*Other Features:* A small number of women give birth while serving a sentence of imprisonment. Others have young children at the time of sentencing. Some prisoners with babies (up to nine months) may be eligible to live in Self Care Units where they have greater ability to manage their own living arrangements.

Self Care Units and Feeding and Bonding Facilities are available at Arohata Prison, Christchurch Women's Prison and the Auckland Regional Women's Corrections Facility under the mother-child placement option.

The Parole Act 2002 allows the New Zealand Parole Board to grant early release on compassionate grounds to a prisoner who has given birth during her sentence. Prison management first assesses the offender's suitability taking account of security classification, the welfare of the offender and the child and the views of Child Youth and Family. A report will then be submitted to the Parole Board.

Mothers with babies aged less than nine months cared for in the community are permitted daily visits in secure, purpose-built facilities

where they can feed and bond with the child. These facilities replicate a domestic lounge setting with a bathroom, kitchenette and sleeping room for the baby. There is also an external courtyard. Feeding and bonding facilities allow a mother to spend up to 12 hours a day with her baby. This arrangement also allows the baby to bond with the caregiver raising the child while the mother serves her sentence.

Women with young babies may also be eligible to apply for home detention, either at the time of sentencing or if serving sentences longer than two years three months before their parole eligibility date.  
*(Department of Corrections Section Ends)*

Now some eight months later, Christchurch and Auckland Women's Prisons are facilitating children attending pre-school outside prison and making significant efforts to normalise their environment as much as possible. This includes mothers and infants attending swimming lessons and other appropriate community groups e.g. breastfeeding support groups. Other options available are:

- visiting the beach
- the local wildlife park
- local malls and day care centres.

Mothers are free to choose their own midwife and other medical specialist services as required.

Given the infant is in the care of its mother, albeit she is in prison, pertinent information only will be recorded in diary case notes. This would include noting any inappropriate behaviour from mother towards the child. Naturally, Child Youth and Family would be informed if significant care issues are noted.

Other parenting support services are also available for the mothers, a requirement of the 2008 legislation. In Christchurch this is the Family Help Trust and in Auckland a joint venture between Presbyterian Support North and the Royal New Zealand Plunket Society.

Training for Corrections officers working within the units housing mothers and babies was conducted by Great Potentials in Auckland during 2011. Additional training is planned for 2012.

To have babies living within prison walls is still very new for New Zealand and the government department charged with overall responsibility. A number of issues still to be worked through, the most important of which is that Corrections is responsible for the female prisoner, while the mother is responsible for the infant, and provided custody is not disputed or CYF takes it (and places child with mother), then there is legal status. Otherwise it is the same as it would be in the community, natural

guardianship. Originally it was expected that officers would not be allowed to handle the children, though over time this has changed as common sense has prevailed. It is clearly important for these children to have adult input from males as well as other adult women. Using the United States concept of 'inmate caregivers' was thought worth considering by CWP, but at this time appears to have limited application.

Prison management accepts that if mother/infant separation is required, particularly for a breastfed baby, this will only be as a last resort, and will recognise the need for full discussion and exchange of views with the community provider. However, these matters are within the jurisdiction of the prison, which will make decisions on a case by case basis.

Children being taken on outings and accessing pre-school outside the wire will also assist with normalisation. In some prisons around the world, all facilities and services are inside the wire, so when the mother is released from the facility and the child is exposed to other noises and experiences, there have been instances where the child is significantly traumatised. The New Zealand Department of Corrections' decision to take children outside the wire for such normal experiences is a sensible one, and probably highly cost effective.

## **Child Youth and Family**

It should not be assumed that a mother with charges against her significantly serious to earn her a term of imprisonment, or a cumulative criminal offending history earning such a penalty, is not a good mother. Also, it is true most women in prison have other significant contributing factors such as spousal violence, illegal drug histories and criminal associations. CYF is not automatically interested in the baby of a mother in prison. The baby is safe until it is released with the mother and it is not until things go wrong in the community that CYF's interest would increase. This brings about the interesting cross-sectoral issue of the Department of Corrections *offender* mandate versus the CYF *child* mandate and makes the New Zealand Mothers and Babies Amendment Act all the more progressive. As far as I could see 'best principles of the child,' embedded into Department of Corrections legislation, is not duplicated in either the United States or the United Kingdom. Rather these principles were part of mother and baby prison units' policies and procedures.

With the exception of prisoners who are paroled with conditions into the community, Corrections has no responsibility beyond the prison gate. Given that the majority of women offenders receive prison sentences of less than two years, most women with babies in prison will be released with no post-release conditions whatsoever. So here is the conundrum: while in prison inmates living with their babies inside the prison walls will

have a significant opportunity to establish safe nurturing mother-infant relationships and receive high quality help and guidance to parent effectively, circumstances that could differ markedly from their experience with any other children they raised in the community.

Throughout my entire travel around prisons in the United States and the United Kingdom the importance of 'through' services in the community, in order to support ex-inmate mothers to continue to effectively parent their children, was continually reinforced – yet raising the necessary funds to provide this through service is fraught with difficulty.

There is no question that the provision of through service in the community post-release is absolutely critical to the long term habilitation success of these women with their infants, and will inevitably strongly influence whether or not they are re-imprisoned at a later date.

## **United States of American Women's Prisons**

### **Bedford Hills Women's Correctional Facility, New York State**



*Demographics:* General muster 670. On the day I visited there were 15 mothers and babies, two or three of which had been transferred from nearby Taconic Nursery, which had closed down due to a drop in muster numbers. In addition there were also three pregnant women in the nursery. Some eight months later (May 2012) this has reduced to eight mothers and baby dyads and one pregnant woman.

A number of ex-inmates I interviewed said Taconic nursery's closure had been in process for some time and was a good decision as they considered the Bedford Hills nursery could meet the needs of the participants.

The majority of the births take place at the local hospital, with significant care taken to ensure the baby is not born in the prison. Mothers are allowed to pick up each other's' infants. Whether nursery and custodial staff pick up and handle infants depends entirely on the circumstances.



As in all the prisons I visited, all pregnant women who want a place on the nursery are required to undertake an assessment process according to a set of selection criteria. Should the superintendent grant this consent, a plan for emergency alternative care in the community for the infant is also organised. Inmates with violent offences, sex offences or previous abuse of a child are unable to gain a place in the nursery. A review to determine if there are any child protection issues concerning prospective nursery mothers is conducted, and if found, these are investigated as part of the nursery place application process.

Bad behaviour can result in the removal of the offender and her baby from the nursery and activation of the care plan. The nature of the woman's

offending can be taken into account as part of the selection process. A prison misbehaviour record does not necessarily mean consent for a place in the nursery will be refused. If a baby is removed because of its mother's misbehaviour, it is not returned to her while she remains in prison.

Having been through the nursery, released and re-incarcerated, a mother with a new pregnancy can be readmitted to the nursery if she meets the criteria, however this does not happen often. Historically, many of the nursery mothers do not have long sentences.

Catholic Charities, a large community NGO, is contracted to provide the Nursery and Family Services Programme, which includes a contractual requirement to adhere to regular prison policies and procedures. Unless the NGO and the prison have a close working relationship, the opportunity exists for tension. Given Catholic Charities spoke well of this relationship, it is clearly being maintained at Bedford Hills. Services provided are described as follows:

- The Mother and Infant Nursery – this is a housing unit where pregnant women and mothers with infants reside. Those pregnant will have obtained consent to retain their infants in the nursery post-birth. The nursery has a play area that allows a mother a safe

place to interact with her child outside her room when not in required programmes.

- Infant Care Centre (operating from 8-11am and 1-4pm only) – the centre provides infant day care services for mothers from the nursery when they are attending programmes. This is not available to the mother for any personal time-out assistance. It is divided up into sections for toddlers and infants and there was a line of cradles, one of which was gently swinging with the infant sleeping in it. Three or four infants were there when I visited. All toys and equipment are either provided out of the DOCCS budget or donated.
- Parenting Centre - provides the LEAP (literacy, education and parenting) programme to inmates, offering family literacy, parenting and education for offenders without the basic General Equivalent Qualification (GED) qualifications.<sup>15</sup> Attaining GED is a requirement at Bedford Hills Prison.
- Playroom – sits within the facility children’s visiting centre, allowing children to visit their mothers in a play centre environment. This allows non-nursery offender mothers a safe area to interact with their children. Mothers must remain with the child at all times. Catholic Charities has developed its own parenting education model that it considers has a therapeutic impact on both mothers and

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<sup>15</sup> This is the equivalent of NZ’s current NZCEA but gained after the student has left high school and prior to any college/university degree or diploma

children within the Children Centre. Women are offered a great deal to allow them to come to terms with and deal with their issues. These services include advocacy; e.g. to allow the mother a telephone conference with the school; assisting a parent to communicate with a foster care agency where the child is placed; parenting education for all age children. In addition, a 'pre-teen and teen programme' specialty service is provided by a Catholic Charities 'teen time' co-ordinator.



Bedford Hills is a maximum security prison and as such daily visiting privileges are allowed, regardless of the internal security status of the inmate.

On release, mother and baby leave the prison nursery with some formula, nappies and occasionally a stroller. These items are donated by Catholic Charities or provided by DOCCS.

DOCCS provides each offender with \$40 and tickets to cover transportation to the county of release. The nursery employs a 'release advocate' who works with the inmate on a release plan that, for those inmates released locally, is also likely to include the community-based NGO Hour Children. One woman I interviewed, who was from Buffalo, had left her entire extended family and her other children in order to gain the support she needed from Hour Children. Her view was that this support was essential if she was to stay out of prison and stop reoffending, and that post-release support in Buffalo would not be as effective for her.

In addition to the inside visiting centre, there was a large and relatively new outside playground that the children love. Birthdays are a 'big deal' and are highly popular.

Mothers participating in the Children's Centre often have long sentences; given it is a maximum security prison. Their relationships with their children have been disrupted by their imprisonment, and the children's centre offers the opportunity to re-establish these relationships. I was informed that few children reject the opportunity to get to know their mother again. These are all children cared for by family members in the community. I was told that around two-thirds of inmates are single parents and most have at least two children. Please note this statistic has not been verified by DOCCS.

Bedford Hills habilitation services to inmates have around 250 volunteers, of which Catholic Charities has 62. The volunteers are a crucial component to assist the delivery of services to inmates.

For those mothers who have become significantly estranged from their children, by reason of distance from the prison making normal visiting impractical, Bedford Hills Prison has developed a unique and unusual system to assist these mothers to re-establish relationships with their children.

In essence, this is a summer programme, which runs for seven weeks and is available for any child regardless of how far from the facility they reside. Different children participate each week. The children stay with a host family for that week. During the day the child visits the mother, and during the evening takes part in activities with the host family. The programme allows for the mother and child to have concentrated time together. Two out of the seven weeks are usually allotted for those children who reside a significant distance from the facility.

This system appears to work extremely well and is very popular with the local host families, as well as the mothers and their children. The children visit between 9am and 3pm and either Catholic Charities or the host family arranges the transport. Bedford Hills village is a prosperous

community and the inmates' children stay with relatively wealthy families. This did not appear to cause any issues for anyone involved.

To my surprise, I found there is no tracking system to ascertain whether the visiting centre influences the reduction of reoffending rates. This has been deemed too difficult. Once released mothers can go to transitional houses, one of which was operated by the NGO Hour Children, a community agency where I spent time visiting and talking to residents.

In all my visits to the prisons in the United States, inmates assisted the mothers and infants in one form or another. At Bedford Hills, because they receive financial remuneration they were called inmate workers. In some prisons they are seen as baby sitters and in others as parent supporters.

The prison also has a large academic department, which provides education at all levels to all inmates who require this assistance. The primary goal of this department is the attainment of GED.

In addition Catholic Charities runs a parenting centre for inmates, this is extremely impressive and staffed with a combination of inmates, Catholic Charities staff and volunteers. The centre provides education on parenting and child development and inmates have the opportunity to undertake education in child development and early childhood education. This is not

a requirement for working in the day care centre and those selected to be caregivers are given in-service training.

The prison nursery is in a different building. The whole block was once a hospital wing and to some extent still looks like it, though considerable effort has been made to make it child friendly. Mothers have a small hospital-type room with an infant's crib (cot) in it. Inmates are able to decorate their rooms with posters etc. A staff member commented that the women tend to hoard their 'precious' belongings because what they are allowed to keep in the rooms is limited to. A medical office houses the paediatrician, who holds clinics twice a week and is on call for other emergencies. Pre- and post-natal care is provided by the prison medical personnel. Midwives are not used within the correctional facility.

As well as the food supplied to all inmates, a nursery mother can purchase certain food items via the commissary (inmates' prison shop) or from the facility fundraiser sales held by different offender NGOs. Each nursery mother inmate would use the money she earned through her attendance at programmes (not a large amount) or from money sent to her from family or friends. A community kitchen enables women to cook their own food and a communal lounge with a 'safe from toddlers' infant section is also available. When I visited two or three mothers with toddlers were

interacting with each other. Everything looked extremely normal, in spite of living inside a prison.

The manager pointed out that mothers are constantly reassured that the children do not know they are in a prison. I was told by Hour Children that family members who do not see the importance of infant-mother attachment frequently pressure the mothers to give up their children .

All newborn babies need a medical clearance before they are permitted to return with their mothers to the prison nursery from the birthing hospital. If an infant needs to be hospitalised at a later date, the mother can go with the child, notwithstanding the prison will make this decision according to the circumstances, security risk, etc. but the mother inmate cannot remain overnight with the infant. Visiting arrangements for the mother would be organised where required.

A baby will not be placed on the nursery if it is withdrawing from methadone or any other substance. A medical clearance would not be given until the baby is completely detoxed. Pregnant inmates on methadone prior to incarceration would be transported by the prison and would continue to receive this treatment from a methadone clinic.

In New Zealand methadone continues to be available, provided the inmate was in the programme prior to incarceration. Where the sentence is long, over time and with medical supervision, methadone may be reduced .

There is an appeal process to the superintendent if an inmate is refused consent to remain with her infant in the nursery. Once on the nursery, the inmate has to behave to retain the privilege. Serious fighting with another inmate would probably result in the loss of the baby and removal of the offender from the unit.

Infants born during an inmate's incarceration may stay until they are 12 months old. Special consent needs to be obtained from the superintendent of the prison for them to stay up to a maximum of 18 months. This is only given under special circumstances and, if refused, the infant would leave the nursery without the mother.

Bedford Hills' nursery and other women's programmes have undergone many departmental changes over the years, with each superintendent, by necessity, putting his or her own stamp on activities.

I received a strong impression that these imprisoned women have a different level of social functioning to those in New Zealand, as every inmate I met was able to express herself easily and was extremely

articulate. I was assured the psycho/social characteristics of these women were the same as those found in New Zealand, although I was unable to clarify the general standard of education found in the United States female prison population.

Bedford Hills mother and baby unit, the visiting centre and the 'through' support with housing and employment opportunities provided by Hour Children, appeared to me to be an extraordinarily effective collaborative model that New Zealand should contemplate adopting, particularly considering the numbers of New Zealand NGOs, including Family Help Trust, with an interest in the offending population.

Since my return to New Zealand I understand that there are discussions at both a local and national level to explore employment options for offenders post-release. The New Zealand housing issue for offenders, certainly in Christchurch post-earthquake, is problematic.

### **Indiana Women's Prison, Indianapolis: Wee Ones Nursery**

Established in 2008, Wee Ones Nursery has a capacity for up to ten mothers and their babies. The nursery is housed within the facility in designated housing approved for the programme. The Indiana Women's Prison houses maximum to minimum level offenders. While it has no air

conditioning, large fans create a fairly cool, although noisy, environment. Air conditioning is on the nursery's wish list.

The prison design involves a large number of brick buildings bordering a large grassy space with razor wire on the outside perimeter; one of these buildings houses the nursery.

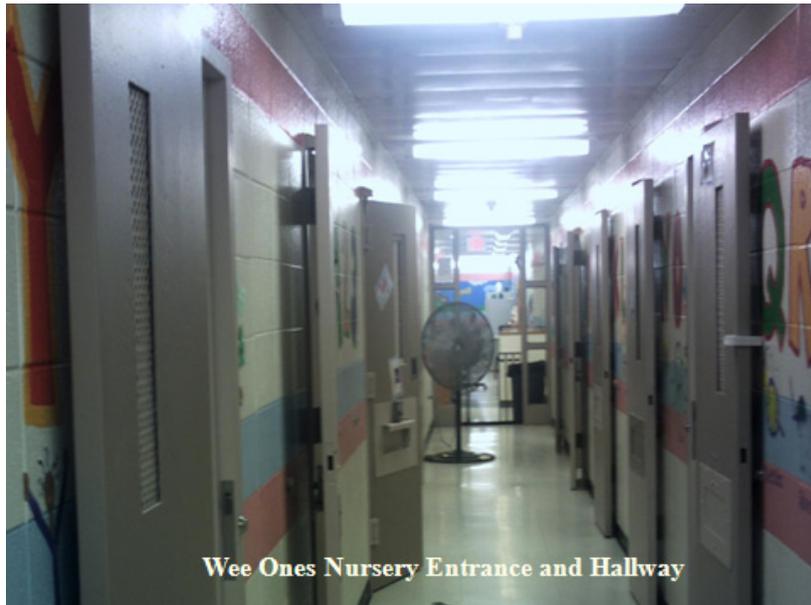
Daily muster comprises around 600 inmates, all of whom wear IDs around their necks. Inmates walk freely everywhere and both staff and inmates address each other by Ms (Surname). I did not see this system in any other prison and was struck by the concept of respect it appears to promote and maintain. It all looked extremely natural and non-threatening.

Two dogs were waiting patiently for their handlers. These were companion dogs and are part of the Indiana Canine Assistant Network (ICAN) programme, which is also in Bedford Hills Prison. A work release re-entry facility is no longer part of this prison campus. In New Zealand this is equivalent to our puppies behind the wire programme at Auckland Women's Prison. The Indianapolis Women's Community Work Release facility, formerly located on the grounds of Indiana Women's prison, was moved to a contract facility (Liberty Hall) in January 2012. Women close to their release date and who meet specific criteria can be transferred to

the various work release facilities available. To assist transition back into the community, all offenders receive re-entry programming from admission to release.

The nursery programme is funded by grants and donations from groups and individuals. Depending on bed space, it is available to all inmates who meet the entrance criteria. As well as pregnancy, the list of other specific criteria includes: non-violent offender, legal custodian of the child, conduct history free of any class A findings of guilt for the past 12 years, and the earliest possible release date is no more than 18 months after projected delivery date.

Inside the nursery building, conditions were relatively cramped with a narrow corridor lined with rooms, a large day room with a television, tables and chairs. Baby equipment was everywhere and the inspirational wall murals were designed by local school children aged from 12 to 14. This day room also houses group programmes, including an ante-natal class when I was there. Despite the cramped conditions, considerable effort had been made to make the environment baby-friendly.



Interestingly, there is also a separate wing within the nursery building for other offenders who meet the criteria of the Wee Ones unit. These inmates are not part of the nursery but live there and attend programmes on the rest of the prison grounds. These women interact with the other women on the opposite hall, and because all meet the criteria to be housed on this unit, may also interact with the babies, so long as the nursery mothers agree.

**Nannies:** Four nannies work on site in the nursery, where they double bunk. These nannies work in the nursery assisting mothers wherever they can. They apply for the full-time seven day a week positions, and are selected for nurturing ability or educational attainment. One of the nannies was a registered nurse. Inmates cannot work as nannies if they have ever been charged with a violent crime, or any crime against a child,

a felony or misdemeanour. Only the complete expunging of such charges could make them eligible. They also need to be able to read. Nannies' roles include anything considered helpful by the mothers, such as looking after the infant while mother is at a class, or staying up with a fretful infant while mother sleeps. The nannies also run a trading system, the contents of which are supplied by the NGO Angelwings. The nanny I spoke to said that the trading closet is the only thing that the mothers ever argue about.

The rooms that house the mother and infant are small but can hold a bed, a cot, a wardrobe and a small amount of space for other baby equipment. The rooms are attractive and not sterile. When I visited all the babies were lying on their backs on top of neatly tucked bedding. This is what the mothers are taught. In the winter, warmer clothing is provided and bedding is tucked in firmly to prevent it from covering the infant's face. Nursery staff and inmates take cot death preventive precautions extremely seriously. No cot deaths have occurred in the four years since the nursery programme was introduced. Since the nursery was established 92 infants have spent time in Wee Ones. Babies can stay until they are 18 months old.



Unit capacity is ten mother and infant rooms, which can also be occupied by pregnant women. An inmate must be within 18 months of release to be able to participate in the programme with her infant.

There is a backup plan for sick babies. Some stay in the hospital and cannot return to the prison nursery without agreement from both the hospital and the prison medical staff. In this event, breast milk is transported by the nursery manager.

On the day I visited the unit was at capacity, with four mothers and infants and six pregnant women. They had already had one set of twins and joked about dreading a set of triplets.

The Wee Ones Nursery programme is funded by grants and donations and is open to all inmates, the same as any other prison programme – although there are strict criteria and of course the women have to be pregnant.

Support from outside the wire is provided by NFP organisations, generally with a religious leaning. Healthy Starts offers prenatal support inside the nursery and some follow up after release.

Even though it is not purpose built, Wee Ones is a well run prison nursery. Nursery staff were utterly committed to the concept and had been extremely creative within limited facilities. Inmates I interviewed raised no issues with me and were pleased to have the opportunity to keep their infants in the nursery.

### **Women's Correctional Facility, York, Nebraska:**

*Basic Demographics:* For 279 inmates (that day's muster) there are 125 staff, including programmes staff, within the local prison budget and another 25 staff paid for from the head office budget. The current prison warden (superintendent) is considered extremely progressive.

This is still the only women's prison in Nebraska with a prison nursery. To a significant extent, it is modelled on Bedford Hills prison nursery. Prior to

the establishment of the Nebraska nursery one of Catholic Charities' key people from Bedford spent five days with the Nebraska Prison programme director. It is clear that the entire prison is extremely proud of the nursery, as well as the rest of the programmes, including kitchen meals.

Pregnant women and nursing mothers receive extra milk, fresh vegetables and fruit and the prison has its own vegetable garden. In addition, they manufacture all the uniforms and other clothing for all the other Nebraska prisons.

The establishment of the nursery in 1974 appears to have happened fairly casually, and while it went to a committee of legislators, no formal legislation covers the nursery. However, significant procedural documentation, in the form of operational memos, governs how things happen within the prison concerning the nursery.

The nursery and associated programmes are state funded by the Department of Corrections, though much of the equipment is funded by various grants and donations. A recent grant from the education sector is funding a new playground for the children. Originally, the nursery was established with a one-off Department of Corrections grant.

The mothers are described as 'state wards' under the Department of Corrections. The prison does have some liability, but given that the children are in the custody of their own mothers, it would have to be proven that the prison had been negligent, which has never happened in its 15 year history. To balance this potential liability, anyone allowed on the unit is carefully screened, and even custodial staff must apply to work there.

Surprisingly, there have been no cot deaths (SUDI) in what would be termed as a highly vulnerable cohort. A committee oversees the allocation of nursery places, and members include the programme director, the nursery manager, child protection services and other relevant community representatives. Should the committee turn the applicant down, the inmate can appeal to the warden, who can, and frequently does, overturn the committee's decision. This process is illustrated below as an example: the inmate had been imprisoned for a first degree assault, which is a violent offence that should have disqualified her for a place on the nursery. The superintendent had details about the circumstances that were not available to the committee and as result he overturned their decision – the inmate is now on probation in the nursery and should her behaviour be a concern she will lose her place.

The recidivism from the nursery over a 15 year period is ten per cent - verified by data collected and analysed by Dr Joseph Carlson, Nebraska State University. The greatest success is with those mothers with babies on their first prison term, and as a result, the nursery sees this as its priority client group. The profile of the ten per cent of mothers who have reoffended post nursery is generally repeat offenders and older mothers.

I had some conversations with five of the nursery mothers, three of whom were first time mothers, one had one other child, while the fifth had three other children. The programme director told me that it was common practice for family members to take over the responsibility of the babies of teenage parents, who as a result do not learn to parent or attach to their infants. The nursery gives them the opportunity to take full parenting responsibility without family interference, and is perceived by the prison as the optimal opportunity for these women.

The prison is a group of large brick buildings with a large open grass space in the middle. A few large trees provide shade, and a tennis court, a sand space and basketball hoop are also features. The day I visited, around 50 inmates were talking, playing cards and sitting around. Everything was very peaceful and it was hard to believe I was actually inside a prison, walking freely among women, many of whom had committed serious crimes. Several women came up to my host to ask

questions about their visiting needs. Two custody staff are on during the day in the open space and one at night. This recreation yard is closed from 8.30pm until 6.00am. On other occasions, this area would be closed e.g. for routine inmate counts or other security reasons. I saw two custody staff casually standing around just 'keeping a weather eye open.'

The pre-school area and associated playground is out of bounds to unauthorised inmates. It is a double trailer. A grant originally paid for this building and the next. Next door is business education, equipped with a grant from the Department of Education (\$32,000 – now nearly all spent). All women accommodated in this prison either live in Nebraska or have offended in Nebraska. An additional approximately 500 women are on transfer to work release programmes in other prison facilities in either Lincoln or Omaha, where they would live but have a job in the community, with a small wage. This assists them to ease back into the community.

I visited one such work release prison in Lincoln. This is a very impressive facility allowing inmates a great deal of freedom, although there were high-tech tracking facilities available to ensure that trust was not breached. I saw some amazing products called 'clear products' specifically designed for prisons. It was possible to see inside televisions and cell phones. Work release facilities need to have good buy-in from the community to ensure their success.

Nebraska Women's Correctional Facility has only two nursery staff, being the programme director and a nursery supervisor. The director has a home economics qualification, though her position now is more of a teaching role. The programme director has purchased and received training in the programme Love and Logic, and uses this for the basis of her parenting programme. For those mothers with permission for their children to visit, attendance at this programme is compulsory. The age range of the children is five to 12 years. Infants and toddlers are accommodated separately in the nursery.

At the Nebraska men's prison facilities, men who are sincere will go through every 'hoop' there is to see their children, and children are also able to have day visits to their incarcerated fathers. There are also day visits for fathers, provided they have undertaken parenting classes. Nebraskan Human Services is quickly in touch with women who have children on the outside, but this is not the case for the fathers who often do not know where their children are for months.

Originally the prison nursery accepted older children, up to the age of 12 years, for its overnight programme, but this has been reduced over the years because of concerns about the older children being on site. Now the age limit is six years. The programme director told me she has seen a disturbing number of children who visited their mothers come back as

offenders, although no data has been collected on this. The nursery can take three mothers and three children for the overnight family preservation programme, which is maximised at five nights per month. The number of continuous days is decided on a case by case basis. Mothers are carefully monitored and graduate up to the overnights. Other non-resident children visit the prison between 10am and 2pm. Most of these children would be state wards and would have a state sector child protection worker with them the whole time. Fathers may visit their babies at any regular visiting times and one additional visit to the nursery is arranged for them to understand its atmosphere and what it looks like.

I was taken into the North Hall wing where double bunks housed four inmates in each cell. This is where all violent women are housed together, although they can access the grass space at will. Another wing, similar in design, but smaller than the main wings at Christchurch Paparua Prison, was used for those women on segregation with mental health problems. Another wing houses substance abuse inmates. The mother and baby unit was housed within this building but was a large open space with an office at one end and ablution area and rooms (cells) around the outside. All inmates share unit cleaning duties. Walking through high risk wings into a nursery with infants and an atmosphere that oozed normality, and was friendly and completely infant-focussed, seemed slightly surreal. Caregivers who are inmate nannies from the general prison population

are employed to assist mothers and their babies; one of these usually lives within the nursery unit.

Very few husbands are in the mix of the nursery inmates at Nebraska, who are mostly single women and York is too small for re-integrative services.

Mothers who leave the prison do have a second chance to be assigned to the nursery, although this has only happened twice and for parole violations rather than new crimes. Mothers can handle each other's infants and frequently do. The programme director and the custodial staff also handle the infants, on the basis that it would be unnatural not to.

The nursery rooms are not locked down at night as mothers need access to the bathroom, bottle warming etc. The unit is extremely low maintenance, hence the absence of staff numbers. One custodial staff member roves and 'pops in' around every half hour and a unit caseworker, whose role is to help with parole plans, has an office in the nursery but is not on the unit full time. All women are expected to be in their rooms at a certain time in the afternoon for muster count. This happened while I was in the nursery and the mothers just politely excused themselves and went to their rooms. There is a cot in each room and space for storage and other equipment.

The rooms are pleasant. The day room is abundant with baby equipment and books. The programme director’s resource room is also extremely well equipped, much like a kindergarten, with a television, suitable videos, a significant number of books and playthings for all ages of children.





It was charming to see how at home the roving custody officer, pictured above, was with the infant. It was very natural and I found it somehow hard to believe I was in a prison.

The programme director wished that children had the opportunity to see the outside world and had often wondered how the children coped once

they left their 'siblings' in prison. There was no data or follow up on this issue.

## **Washington Corrections Center for Women, Gig Harbor, Washington**

*Basic Demographics:* Washington Corrections Center for Women (WCCW), the main prison facility for women in Washington State, has had a residential nursery programme since 1999. The prison is divided into three security levels: minimum, medium, and maximum. The prison nursery programme is located on the grounds of the minimum security division in one of the residential buildings named J Unit. J Unit has two wings: one houses offenders who are not part of the prison nursery programme and the mothers, babies, and some caregiving offenders live on another side.

Total inmate population is 870 and the annual cost is \$43,800 per inmate (\$120 USD per day). When I was there the inmate population on J Unit was 77. Six mothers of infants and two pregnant mothers were in the nursery on the day I visited. The maximum time for infants to remain in the nursery is 30 months. A pregnant offender with a sentence over 30 months after her infant's birth does not qualify for the prison nursery

programme and must make other plans for her baby, such as foster care or permanent adoption.



Frequently, pregnant women are sentenced to 366 days by the judiciary; one year and one day. Below this number, convicted women would be sent to the city jail, where there is no mother and baby facility. I found this a very creative way to ensure that infants are not separated from the mother at birth, if incarceration was deemed necessary.

Female re-imprisonment rate in the general population is 40 per cent, whereas in the nursery it is 11-17 per cent and currently zero per cent in the previously mentioned community residential programme alternative to sentencing.

***Description of the Prison Nursery Unit:***

Each mother/baby pair has their own cell. By comparison, there are three inmates sharing a cell in the general population in J Unit. The cells are large rooms, the largest I saw in any of the prisons in either the United States or United Kingdom, and they really are rooms rather than cells. The mother/baby cells contain plenty of equipment for the infants, a rocking chair and a cradle, with the cot standing by ready for when the infant grows out of the cradle.

There is a separate kitchen on the unit but it is only available for cooking for the babies. The state gives an allowance to mothers for diapers and other baby needs. There is also a baby changing room and a group sitting room where infants can crawl about on the carpet.

An integrated day room allows other J Unit women to socialise with the mothers. As there are significant jealousy and conflict issues, this is not an easy integration and sensibly the mothers tend to keep away from the other inmates in order to reduce this stress and minimise conflict that could potentially impact their ability to remain in the nursery. The yard and play area was due to be rebuilt.

***Special Health Care Provisions:***

A visiting paediatrician makes regular contact with the babies and their mothers in the prison nursery. Pregnant inmates receive ante-natal care from this source and post-partum care from a hospital-based midwifery programme.

This was the only United States prison where I came across the concept of trained voluntary community 'doulas' whose role is to support the inmate during birth when there no family member is available. This is considered a hugely important and highly valued service. Doulas are trained to support during labour and birth but do not take the place of a midwife.



### ***Early Head Start Learning Center:***

The Early Head Start programme, covering birth to three years old, was established in partnership with the Puget Sound Educational Service District on the WCCW prison grounds to support vulnerable mothers and infants with education and childcare services. While offender mothers are 'programming' (working, attending classes, medical appointments, etc.), babies are enrolled in the centre being well-cared for by qualified early childhood educators. The mothers participate in baby care classes. Early Head Start operates its staff numbers according to how many mothers and babies there are in the nursery. WCCW was one of only two prisons in the United States I visited with both a nursery and a child development educational facility for mothers and infants on site.



The Head Start nursery facility was very impressive. On the day I visited several infants were being cared for by Early Head Start staff. All the infants appeared contented and healthy.

Numbers are dropping in the nursery, and as a result the on-site Early Head Start programme has been reduced to three days a week. The prison believes that the newly conceived alternative sentencing system concept, now available to the courts, might be causing this drop.

***Other Childcare Considerations:***

All mothers have to take caregiving classes. Other inmates can apply to be caregivers, where again strict criteria apply. Currently there are three inmate caregivers on the unit, though only one was living there. These caregiving positions are highly sought after. Generally this role is to assist where and when required. Mothers who are attending classes can use the inmate caregivers as babysitters, although they can also use the on-site Early Head Start centre for this purpose.

***Maintaining Family Ties and Transitioning to Life Outside:***

As part of transitioning to exiting the prison on completion of their sentence, women were once taken to town to become used to shopping facilities but this was stopped as shopping now happens on-line. One ex-nursery inmate I interviewed felt this was an unfortunate change of policy

and related her own story when she had a prison staff member with her and how she was extremely conscious of her infant in a supermarket, wandering a little way from her in an open space where she did not know who the other shoppers were. She described this as a 'freaky' experience and was grateful for the prison supervisory support. She pointed out that what is on the supermarket shelves changes while you are in prison, so it becomes a new and scary world.

Washington Corrections Center for Women has developed a creative idea to assist mothers to re-establish and maintain relationships with their children and partners. Two trailer homes (caravans) are kept on site for extended family visits, allowing some inmates to stay with their families overnight. Anyone can apply for this privilege but they have to meet strict behavioural criteria, including the absence of family violence history or charges.

***Observations:***

This was another prison where the commitment of the staff and custodial officers was obvious. I interviewed a custodial officer who had been there for a number of years and clearly enjoyed her current role. During the interview, one of the mothers casually entered the custody office and asked for permission to enter another area. The officer immediately

offered to take the infant in her arms until she returned. Seeing this natural interaction was delightful.

The entire facility of the nursery, combined with the Head Start facility, the gardens and grounds, clearly worked well for everyone concerned.

Another closed wire facility next door was having an incident when I walked outside. Bells were ringing, an inmate was being escorted to another area and the wing inmates were formally standing out of the way while this was going on. Again I was struck by the naturalness and warmth of the nursery and the Head Start facility, while just across the fence 'real' prison life continued. For more information: <http://protectivecustody.org/>

### **Coffee Creek Correctional Facility, Portland, Oregon**

This prison did not have a nursery, but I selected it as part of my research because it still had infant and mother facilities on site in order to promote attachment and encourage the relationship, with the intention of assisting re-offending and reducing re-imprisonment. Incarcerated pregnant women are separated from their infants at birth and adequate prenatal care and a breast-pumping programme is available for those who want it.

*Demographics:* There are seven to 12 pregnant women at any one time. Coffee Creek was the first prison to have an Early Head Start (EHS)

education centre on site and is the only female prison in Oregon. There is a 600 bed minimum, with 1100 female inmate capacity in total. In addition, a relatively small number of male beds is available. Staff ratio is ten inmates to one staff member. Recidivism is currently 27.8 per cent post-release after three years. With a \$70 million dollar budget, the annual cost per inmate is a \$32,000. Oregon has 14,000 incarcerated inmates within a population of 3.8 million. Because it has so many services, the superintendent said it is impossible to quantify whether Coffee Creek Prison achieves reoffending reductions as a result of its EHS programme.

An EHS educational nursery is situated outside the wire, although still on prison grounds, therefore only accessible to inmates in minimum security with 'gate clearance.' Mothers wanting their infants to attend EHS have to apply. The system operates by caregivers bringing in the children to attend the EHS programme. This in itself requires a considerable commitment for two days a week, but all caregivers I spoke to appeared to do this willingly in order for the mothers and children to retain and develop their relationships. Caregivers find it difficult to cope with the transportation costs.

Frequently, children are in the care of the state, which makes the commitment to bring them twice weekly even more difficult. Occasionally

caregivers can access some resources through the Department of Human Services and Child Welfare.

The EHS programme has been specially adapted to deal with inmate and infant separation issues, maximising promotion of a positive relationship and good attachment between the infant and the mother. While there is a sick child policy, caregivers mainly just make the commitment and organise their schedule around that.

Every effort is made to introduce them carefully into the EHS setting each day, initially with the caregiver present, who will then withdraw to another room. This is then reversed at the end of the day. EHS within the prison setting is organised around the unusual situation for both the children and the mothers.

Coffee Creek EHS programme entry criteria are: inmate has obtained a gate clearance; is housed in the minimum facility; has a child under the age of three years; has a caregiver with the ability to commit and transport the child to the facility.

EHS parents are part of the policy council, which gives them input into the direction, provided any changes are within the programme safety

framework. Coffee Creek Prison is highly supportive of the EHS programme.

The orderly inmate in the EHS centre is a volunteer and has a job description. She had to apply and be interviewed for the job, and obviously had to have gate clearance. I talked to her and found she had six children, aged five to 24, and a nursing background.

An attractive garden on site is tended by inmates. This is considered a teaching garden and inmates I talked to clearly take considerable pride in it. They have to apply for the privilege of working in the garden and, to ensure team continuity, inmates are expected to take on this role for at least a year.

In addition, the Capstone Project is run by a community organisation promoting prison gardening, "Let us Grow" ([lettucegrow.org](http://lettucegrow.org)). To be accepted, inmates must have a clear conduct record for at least a year. Gardeners are unsupervised. Currently they spend time working on plants that have other uses and are collecting data on pollinating. The food goes into the kitchen and is offered up as vegetable trays, which have become popular with inmates. Barista (coffee making) training is also available on site.

In the minimum security facility there are four large dormitories housing up to 127 inmates. Bad behaviour earns inmates a transfer to the medium facility. Prison staff work in rotation in the dormitories. There is double bunking and the ablution area, food and recreation, including some exercise machines, are all totally open plan. Televisions can be used by ear-phone only. Conflict in these large dormitories appears minimal as inmates do not want to lose the privilege. There is no set time they have to get up in the morning, so technically they could sleep on their bunks all day, although they are required to check the morning daily schedule call out at 6.30 to find out whether they are required to be anywhere. Failure to attend a scheduled appointment can result in a discipline. There is a separate area called the Lieutenant's Bubble, which is a lock down secure facility in case of emergency e.g. a riot. Ninety-five per cent of inmates see the minimum security as a privilege and work hard to ensure they do not lose it. While there is certainly no privacy, most like the freedom.

A separate building houses mental health and alcohol and drug treatment units, which have eight to ten (double bunking) women in a room, who are separated from other inmates during this period. A separate exercise room is well equipped.

As with most other states, while funding has been cut, there is also a significant focus on mothers and their children in this facility, in spite of

the fact they do not have a residential nursery. Although my host guide had hopes that eventually a nursery would be installed, this is unlikely in the near future.

A prison hair salon is sited in the minimum area, though only those with a licence to practice can work there.

***Family Preservation Programme:*** This programme allows mothers to spend time with their children in a controlled child-friendly environment and with an early educational and family preservation focus. Inmates can remain on this programme until they are released.

In a group interview, inmates told me they can receive visits from family, including children, however they find the visitors room environment extremely stressful because the children are expected to minimise noise and are discouraged from normal play such as running. Consequently, mothers are constantly on guard in case their children play up and really cannot engage with them properly under such circumstances.

Coffee Creek has a large number of rehabilitation programmes for inmates. I met with staff of only a small number, one of which was *Parenting Inside Out*, provided by the NGO PIP Pathfinders. PIP offers parenting training classes with topics that include:

- emotion regulation
- child development
- communication
- problem solving
- positive involvement
- skill encouragement
- limit setting
- child health and safety
- common child problems
- taking care of adult relationships
- preparing for transitioning home.

Activities are created for inmates to do with their children by mail. Entry to this programme is fairly liberal except for those inmates with sex offences or crimes against children. Graduations are very child centred.

In partnership with the local community, Coffee Creek Prison goes to extraordinary lengths to promote positive relationships between inmates and their children. Four special events are held for inmates to attend with their children and caregivers. The largest of these is the summer event called 'Through A Child's Eyes,' which is financially sponsored by the Wilsonville Rotary Club. Rotary successfully raises \$12,000 from the

community to run this event, staffed by volunteers. It features food, games and a carnival atmosphere for the children.

The other three events are on a smaller scale and held in the visiting rooms, organised so that all can attend who want to. Coffee Creek is proud of the efforts it goes to in order to promote quality mother/child relationships.

### **Hawaii (Oahu Island)**

Hawaii was included in my fellowship as a result of the Hawaii Healthy Start home visiting programme, from which the Healthy Families American home visiting system was modelled, which in turn, in New Zealand in 1998, became the genesis for our own national programme Family Start. Prior to the establishment of Family Start in New Zealand, I visited and received training in the Hawaii model and was instrumental in bringing back these concepts for early trialling in Christchurch in 1996.

Sadly, a change of government priorities and state budget cuts has brought Healthy Start Hawaii to its knees and at this time it consisted of a service that was supporting less than 100 families.

It was hoped however, that the new Human Services Committee Senator Suzanne Chun Oakland would be instrumental in a new focus for home visiting services in Hawaii.

Given New Zealand's high rate of incarceration, my additional interest in Hawaii was stimulated by the fact that this state had twice the national average for incarceration. The national recidivism rate is 66 per cent.

While in Hawaii I learned of a very interesting re-parenting approach (HOPE probation) developed by Judge Steve Alm, a first circuit judge in Hawaii. HOPE targets repeat parole violators by conducting random drug checks. This appears to be achieving incredibly positive results. Apparently, the probation service was originally dismissive of the idea as it involved much more work, but this has now changed and, after seeing its positive results, the service appears to be embracing it. A randomised trial has found that 'when compared with identical probationers under typical supervision, HOPE probationers are less than half as likely to be arrested for a new crime, use drugs, skip appointments with their supervisory office or treatment provider or be sent back to prison.' On the face of it, these are impressive results and worth considering for New Zealand.<sup>16</sup>

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<sup>16</sup> Judge Steven Alm's Speech May 11, 2010

## **Hawaii Women's Correctional Facility**

I presented my interim findings from my visits to prison mother and baby units in the United States at the Hawaii Women's Correctional Facility. While highly interested, and although he is known to be extremely progressive with women's issues, given his temporary status the interim manager was unsure what he could actually do to advance women's interests within the prison. Fifty pregnant women have been in the prison this year. My Hawaiian hosts met together later to see how they could gain some mileage by using my figures to advance their cause. They expected it to be a fairly long drawn out process.

## **Cornton Vale Prison, Scotland**

*Basic Demographics:* Cornton Vale Prison was opened in 1975 and is the only female prison in Scotland to take women at all security levels.

The mother and baby nursery was established in 1998. Prior to this, babies born to incarcerated mothers could be accommodated in one large room attached to each unit, but most babies were sent to live with relatives.

Data on babies has only been collected since 2004, since when 27 mothers have been allowed to keep their babies. Of these, one was still in custody and two were unable to be identified from the records. From the

remaining 25 mothers, six have been returned to prison. While these numbers are small, nevertheless they are impressive given that the re-incarceration rate of Cornton Vale's non-nursery females is currently sitting at 87 per cent.

Around the time I visited, August 2011, in an attempt to ease overcrowding and as a result of media attention, 100 inmates were moved to Edinburgh. At that time there were 292 inmates. According to the recent Inspector of Prisons Report, published on 14 June 2011 from an inspection conducted in February 2001, these numbers should have been within the acceptable limit of 300 to fit the prison resources.

This report highlighted the poor access to toilets and that conditions in some areas had worsened, with the mother and baby unit cited as in need of urgent attention. Lack of access to toilets was certainly a major complaint among the pregnant women I interviewed.

There are 275 staff members, though many of these were administration. This was the first prison I saw without razor wire. I was told that the isolation of this prison makes escape pointless and attempts are never made.

Staff members were quite open about the recent damning report, which formed the basis of a business case to improve the facilities. This report, while completed well before the last election, was not publicly released until after the election. I am particularly mindful that improving conditions for prisoners does not win votes in any country.

*Peebles House* – also houses the mother and baby unit. This was currently empty, though there were nine pregnant women in the prison at the time.

Because it was empty, toys and equipment had been stored away, giving the unit rather a bleak feel. It has seven rooms, one large and available for twins. There is a communal toilet and shower, with each room having a wash basin. There is a no bed sharing policy. Food was brought from the kitchen, as there was no cooker in the unit. Although it was a little unclear how mothers could cook fresh food for their children, one staff member said that she understood the kitchen co-operated with mothers over suitable foods that could then be pureed.

Mothers in the unit are not locked in but 'own' their own key, which is returned to staff each morning. It was suggested that a lost key was likely to involve all locks being changed, together with associated unnecessary expense.

There is a sitting room combined with a dining room and a TV, laundry and outside play area. However, because the outside area presented an opportunity for inmates to pass over contraband, the unit was separated out. As Peebles was not purpose-built for mothers and infants, this separation received support.

While smoking is not allowed inside the mother and baby unit, mothers can gain consent to smoke outside the unit, albeit it is a complicated unlocking and supervisory issue and seen to be unmanageable unless it was very occasional. Officers believed that a smoking ban throughout the prison was unavoidable in the future.

Weekly mother and baby meetings are held by staff, generally not attended by inmates unless there were issues between them that needed resolving.

Mothers are able to live with babies up to the age of 12 months in the Peebles Unit, after which they are moved to the independent living houses, though the classification has to fit as the houses are outside the wire.

Infants are occasionally kept longer than 12 months to resolve security issues. The unit is normally considered very child friendly. Staff commented that the inmates are getting younger and more violent.

Some through-care service is provided by the Circle organisation, a voluntary agency that supports families. Apart from Circle, there appeared to be nothing provided by either the NGO sector or the state sector to ensure mothers receive the support they need to remain out of prison. This, of course, is made more difficult by the fact that the women return to homes or families all over Scotland.

#### Independent Living Units:

There are six of these, one of which is available for mothers with children unable to remain in Peebles because the child is over 12 months.

The accommodation that housed one mother and a two year old child was a pleasant three-bedroom house with a yard backing onto the prison. The family of the current resident inmate provided her with child play equipment, but when this is not possible, the prison provides everything that is needed.

When the house is full, the mothers have to share bedrooms with the children. Mothers are completely responsible for keeping the house clean and tidy, and it certainly was. The remaining independent living units are for inmates preparing to transition into the community. Inmate visiting between these houses is only permitted when any resident children are at pre-school, predominantly because the transitional inmates lack the

security clearance for this purpose. Pre-school, for those under the age of three years, is available five days a week to all children of vulnerable mothers in the community.

Cell phones are totally banned in the houses and there is a pay phone in the units, along with a panic button back to the prison. The prison has mobile phone detectors, making individual monitoring unnecessary.

Programmes are compulsory for women who want to keep their infants, and to ensure programmes are attended, the prison is able to hire caregivers for the children: an incredibly creative solution.

Babies coming and going on home leave are automatically checked when they come back. Attempts are made to be sensitive about this. Visiting midwives attend pregnant women up until ten days post-partum, which is funded by the national health service. Babies had their own files and were in the custody of their mothers.

While healthcare workers are permitted to handle the children, custodial officers are not, and neither are other inmates. Health visitors, similar to the New Zealand Plunket service, and midwives visit, and a general practitioner is on staff.

### Mother and Child Developmental Worker:

An important initiative for the mothers and babies at Vale Prison is the mother and child development worker, who should be part-funded by the Scottish Prison Service and part-funded by the Robertson Trust, a philanthropic trust. At the time of my visit, this position was solely funded by the Robertson Trust.

This worker has 11 years experience as a practitioner and manager within the early years sector.<sup>17</sup> At the time of my visit, an evaluation was being completed, since published. The worker's role is to develop the potential of the mother.

The mother and child developmental worker delivers infant massage classes, practical parenting sessions, music, movement and nursery rhyme sessions and handling children's behaviour, which is based on 'Future Childcare Training' materials. The work carried out is emotion focussed with a huge emphasis on enhancing parenting capacity and relationships. Child development, attachment styles and bonding are fundamental to the programme and are all discussed at length throughout all sessions.

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<sup>17</sup> Circle's Families Affected by Imprisonment Project, Throughcare for Female Offenders. Key findings: October 2011

Although the mother and child development worker's funding agreement requires her to work with 20 women, six months into the role she had already worked with 32 women. Criteria for referrals to the service include that the inmate must either be pregnant or have children under the age of five years. This has now been extended to incorporate children up to the age of 16 years. Six women had given birth during the six months in question, four of these children went into care and two of the mothers kept their babies.

Whether a baby can stay with its incarcerated mother is determined in the first instance by the state sector social work department, then the prison establishment will carry out its own risk assessments. The mother and child development worker is invited to the pre-birth case conference alongside other relevant professionals, where she reports on the woman's progress, although this information does not carry any impact and much of the time the decision is already made based on historical data.

To illustrate this, two cases were cited: in the first example the state sector social worker had a large amount of information concerning the inmate, and was not willing to give her the opportunity to parent, based on the state view of her historical chaotic lifestyle. This decision was made without any recognition of how well she was doing in the prison environment. The other example given was a refugee, where the state

sector social worker had almost *no* background information on the inmate but made a decision for her to keep the baby. These issues are clearly frustrating as they defy any inter-agency collaborative logic.

***Prison Visiting Centre:***

I never saw the prison visiting centre, but it was considered wholly inadequate and was strongly criticised in the recent Prison Inspector's report. Significant community lobbying is under way to build an adequate visitors centre.

**St Margaret's Centre (Family Centre):**

Established in 2005, the St Margaret's Centre is shared with the chapel and the chaplain, and in a practical sense offers another use for the under-utilised chapel. It has one staff member, a pleasant large room with plenty of children's toys and equipment for all ages, plus bathroom facilities. Only one family at a time can access this centre. Criteria for use include clean urines, good behaviour and that security issues are dealt with. All the inmates' children can attend the centre, which could be three times a week or even five times a week for two hours at a time. The facility was well used. The maximum was 35 prisoners and there was no waiting list.

Visits are unsupervised, though the centre manager's office is nearby when needed. Play equipment was more than adequate and the centre also had an outside area. Occasionally they held family days, using a barbecue and children's outside play equipment. The play area was fenced off.

Cornton Vale is quite rightly proud of this visiting centre, which has a clear focus on re-establishing family links, maintaining links and fostering bonding. A wide array of activities is arranged, including children's sports and fun days as well as Christmas and Easter parties for children. The St Margaret's Centre was given the Butler Trust award at the end of 2006 for its work with female offenders.

### ***Summary***

My sense was that the staff in the units associated with children and pregnant women were committed to doing the best they could. Among several examples of 'thinking outside the square' an impressive option was the independent living units, outside the prison wire, allowing children to remain with their mothers indefinitely, albeit the mother was still an incarcerated inmate.

Issues raised by pregnant inmates in my interview with them were seen by management as reasonable and some were entirely do-able.

It was well recognised that many of the facilities were not fit for purpose and that this needed to change. However, confidence was lacking around prioritisation and budget allocation by HM Prison Service and the government regardless of the recent damning report, which was not the first time such findings had been published. Having said this, the opinion of some of the community advocates seemed somewhat at odds with my view here.

The current governor has been in the role approximately two years, following several changes, all of which led to a lack of continuity within the prison. I did not meet the governor, however it should be noted, I never asked to. The main buildings were tired and run down and probably not worth spending additional funds on. If government and the prison service are not prepared to spend what was required to improve conditions, it is hard to see what can change for the women incarcerated in this prison.

Facilities such as the St Margaret's Centre are a creative way to make the best of an untenable situation.

*Post Script:* During April 2012, well after I visited Cornton Vale, the Commission on Women Offenders, chaired by former Lord Advocate Dame Elish Angiolini and commissioned by the Scottish government, released a

comprehensive set of recommendations<sup>18</sup> in response to the doubling of incarcerated females in Scotland, the majority of which are held in Cornton Vale. The 37 recommendations include demolition of Cornton Vale Prison and its replacement with a high security jail for serious offenders. Other recommendations bear a remarkable resemblance to The Corston Report 2007: A Review of Women with Particular Vulnerabilities in the Criminal Justice System commissioned by the United Kingdom Home Office. Broadly, these recommendations include:

- alternatives to prosecution
- alternatives to remand
- new sentence options
- a replacement of Cornton Vale with a smaller national specialist prison for those offenders serving longer sentences and those who present a significant risk to the community
- the national specialist prison should include a medical centre, a separate unit for young women, a purpose built mother and baby unit and a family-friendly visitor centre with an outside play area for children

The clear intention of these recommendations is to deal with low risk women in a community setting that would include both residential beds

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<sup>18</sup> (Independent) Commission on Women Offenders (in Scotland) April 2012:

and day programmes. Such centres would address criminal offending, trauma, alcohol and drug treatment as well as mental health – essential one stop shops.

The Commission's findings are strongly endorsed by Brigadier Hugh Monro, Scotland's Chief Inspector of Prisons who recently described conditions in Cornton Vale as 'unsatisfactory' and agreed that it should be closed within five to six years.

### **Rainsbrook Secure Training Facility; Mother and Baby Unit.**

*Basic Demographics:* Rainsbrook is a Secure Training Centre for adolescents aged 12 to 17 years. The centre was opened in 1998, initially with 44 male beds. In 2012 there are 87 male beds and 24 female beds. It is privately operated by G4S (Children's Services), though the buildings are government owned. A Home Office monitor is located on site to monitor contract compliance.

Referrals come directly from the Youth Justice Board's placement team, which is under the jurisdiction of the Home Office. Which facility the young person will attend is decided at sentencing. There are four other youth facilities, but only Rainsbrook has a mother and baby unit, which opened in 2006. Trainees rise at 7.30 and are expected to be in their bedrooms at 9.30pm.

There is no detox centre at this facility and if a young person needing such an intervention were to be admitted, the medical team would be involved in treatment. It is reasonable to assume that young people with significant drug and or alcohol problems would be sent to Bronzefield Prison, which has a proper detox unit and does take Youth Justice girls. Although staff thought they would have more trainees with drug problems, this has not been the case. They also maintain that the typical young person at Rainsbrook has only periodically dabbled in drugs, mainly marijuana.

The majority of placements at Rainsbrook are for violent offences or some types of robberies.

As the centre specialises in vulnerable young people, those deemed not to be vulnerable, including 15 year old boys in particular, are transferred elsewhere. The definition of vulnerability is very broad and is: the young person is at risk of harm from themselves or others.

Criteria for acceptance into the Rainsbrook mother and baby unit includes the following:

- There is a space available in the unit
- The admission to the MBU is in the best interest of both the mother and the baby
- Children's Service (Youth) is in support of the placement

- There is a strong likelihood that the young person will continue to look after her baby when released from the youth facility
- The young person has the capacity to take responsibility as a parent and there are no health or legal reasons that might prevent her from doing so
- The young person has agreed to sign a placement agreement
- The young person's behaviour and attitude will not put anybody else in the unit at risk.

In the mother and baby unit, there are rooms for three pregnant mothers or three mothers with infants. Mothers share a room with their infant. One of these is a larger room able to take a mother and two children.

The nursery unit is large; it has single rooms fitted with both toilet and shower. A large day room and a small infants' room off the day room is fitted with three cots. This allows babies to have a nap during the day and for a qualified nursery nurse to be in the room with them. Girls who are pregnant have compulsory schooling on site, up to six weeks before birth and from six weeks post-partum, with the nursery nurses taking care of the infants. As well as this there are parenting skills classes. The facility goes to considerable effort to ensure that babies experience all the normal noises they would expect to hear if they were in the community, which includes visits to animal parks, rides on buses, cafés, supermarkets,

swimming etc. There is a fenced-in play area on site. Infants take part in these external activities during crèche time, while mothers are in education, therefore the inmates do not go on these excursions.



Separate facilities are provided for changing, bathing and feeding infants and children. Babies can be removed from mothers and placed into family or foster care should the behaviour of the young person determine this, but only after full consultation with all those who know her, which would include the youth offending team and Rainsbrook case manager. The local authority<sup>19</sup> social worker makes the final decision.

Children are normally only allowed to stay until they are 18 months old. One occasion was recalled where a child stayed a little longer. Inmates are called 'trainees' and those pregnant trainees with sentences longer than

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<sup>19</sup> Local council equivalent in NZ

the normal 18 months of the child's age would either undertake a planned separation or the trainee would be transferred to another facility.

At the time of my visit, there were no infants but three pregnant mothers were in residence. All girls are automatically given a pregnancy test at intake, along with a thorough medical examination. The mothers can access the gym for 30 minutes a day, which appeared to be the only time when boys and girls have supervised contact with each other. Other inmates can visit the mother and baby unit, provided they present no risk.

This is informally encouraged to ensure that the mothers receive some additional stimuli. Visiting trainees are not permitted to handle the babies, and apart from the mother, only trained staff have this responsibility. This rule also applies to nursery mothers themselves: they are not permitted to handle each other's babies.



The whole prison runs on a rewards and incentives system, in effect a behaviour modification regime. Everyone is expected to 'earn' their way. Trainees in general cells, which also each have toilets and showers, can even earn the privilege of putting posters on the walls.

Mother and baby unit trainee recidivism is said to be impossible to track because once they reach the age of 18 years, should trainees from the unit reoffend seriously enough to be incarcerated, it would be in an adult facility and there does not appear to be a method of comparing data between adult and youth facilities.

Liability is not really even thought about. There have been no cot deaths and no sick children. Only trained non-custodial staff can handle the babies. The nursery manager, however, is both a trained custodial staff member and a nursery nurse. The three women in the unit were all first time inmates and first time mothers. At the time the trainee with the longest sentence was due for release when her baby would be ten months. One staff member described the unit as similar to a children's home. In short, they receive all the help and support and none of the normal hassles of daily life. Nursery nurses were also doula trained.

The nursery manager spoke with huge pride about the nursery. The nursery is licenced for six mothers and infants, but staffed for three.

Older children go to the local nursery. The mother has full custody of her infant and responsibility for the child at all times, except for when they are in the nursery. There are 13 overnight staff throughout the centre; one is on the MBU at all times. Also there are sleep-in staff and an available duty operations manager. The prison owns all the equipment. An attractive, though small, visitors room has a camera for the use of other mothers/fathers. The unit is not an assessment centre.

A serious offence would not necessarily render the young person ineligible for a place on the MBU. In such a case, the young person could still remain on the MBU and a separation plan would be implemented. In such circumstances, the opportunity to build a relationship with the infant is still considered important, albeit the baby would eventually be placed with family or the local authority while the mother completes her sentence.

Mothers are hand picked for the unit and if their capability of independent living once released is in doubt, staff would work with the young person to develop these skills while they are on the unit.

A sophisticated computer system operates for the night staff, who have to record everything they see through the room windows using a bar code, e.g. what side the mother is sleeping on. No baby is allowed to share the bed with the mother. If mother has fallen asleep with her baby on the

breast, the officer has to call for another to witness her being woken. All the pregnant girls I spoke with intended to live independently when they were released. Two of the pregnant trainees were 16 and the third was 17. Since it opened in 2007 the nursery has housed 21 babies, with the three pregnant women when I visited bringing it to 24.

The girls spend a minimum of six hours in the maternity hospital before they are returned to the facility. If they required medical assistance they would stay as long as necessary e.g. a C section. Nursery nurses have a roster for attending births with the girls.

A boyfriend is allowed to attend the birth, provided the Youth Justice team, which would know the background of the young woman, agrees that he presents no security risk. Availability of post-release family support can be questionable given the type of families that the trainees generally come from. However, there are also many families who have been very supportive. Few babies are removed once on the unit and staff do not normally see post-natal depression.

Babies can go on weekend leave and outings with family members, and are checked for contraband when they return. The nursery is a non-smoking site and a very sterile environment. The main facility is also a non-smoking site.

There are more fresh fruits and vegetables available than in previous years and trainees cook for the children themselves. Nursery nurses' roles are limited as they only deal with the babies while they are in the crèche i.e. 9-12 and 2-4pm. Staff includes a breastfeeding specialist. While it has never happened, if the father of the baby is in the facility he would be allowed visits, as would any other father.

There is no double bunking, nor are there co-ed units. There is a health clinic on site, a dentist, an optician and a psychiatrist who visits every two weeks. No young person is allowed anywhere on their own. Any trainee who goes on and wants to work with young people has to disclose their juvenile record.

Rainsbrook was an impressive facility, but it was unfortunate that there was no data to measure recidivism amongst those mothers who had been given the opportunity to begin to raise their infants in a highly controlled but nurturing and supportive environment.

### **Bronzefield Prison, Ashford, Surrey, United Kingdom.**

*Basic Demographics:* Bronzefield Prison opened in June 2004. It is operated under contract by Sodexo Justice Service and is the United Kingdom's only privately managed purpose-built prison for women. A Ministry of Justice HM Prison Service official works on site to ensure that

the prison complies with all contractual obligations. A fine is given for breaches, although Bronzefield has so far received only a lower contractual penalty, and as a result is proud of its achievements. In fact Bronzefield Prison management considers it to be the 'gold star' facility in the female estate.

The mother and baby unit is modelled along the lines of Styal Prison, which helped Bronzefield Prison set up its unit. Karen Moorcroft, manager of Styal Prison mother and baby nursery, spent some time advising Bronzefield and in 2009 Styal conducted a peer review on the unit. The Inspector of Prisons' 2010 report,<sup>20</sup> while raising concerns in health care in particular, positively highlighted the mother and baby unit and its nursery services, describing it as 'excellent.'



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<sup>20</sup> HMP Bronzefield 13-22 October, 2010: HM Chief Inspector of Prisons

The day I visited (2 September 2011) there were 506 inmates. Muster capacity is 527 and generally around 30 per cent of inmates are foreign nationals. There are four main house blocks holding 137 prisoners each and the 12-room self-contained mother and baby unit, named Little Stars, also opened in 2004. This nursery has capacity for 13 infants up to age of 18 months. No smoking is permitted either on the unit or in the girls' rooms. There are three behavioural status definitions – basic, standard and enhanced. Basic status allows inmates to have limited privileges, standard has average, while achieving enhanced status gains extra privileges. Mothers residing in the mother and baby unit have generally attained enhanced status and tend not to move down a status.

At the time of my visit eight women with seven babies were in the unit; one of which was currently involved with child protection services. This mother was a foreign national with a nine-month old infant. The unit employed a psychotherapist who ran an hour-long group on a Friday called 'Born Inside.' After 40 sessions this group appears to have been wound down, which seemed unfortunate as giving women a confidential forum to discuss issues important to them does seem a sensible concept inside a prison. There were 14 pregnant women in the main prison. Provided a space is available and they are assessed by the mother and baby board for suitability, women can come onto the unit at any time from eight months pregnant.

Nursery staff fundraised some \$38,000 through the Early Surrey Years Education sector and have equipped and landscaped the entire outside area of the nursery. Mothers, infants and staff really enjoy this new outside facility. Plenty of shade cloth protects the babies from the summer sun and artificial child-friendly grass helps crawlers and toddlers.

The nursery was purpose built by the Early Years Foundation, with the intention of mirroring community facilities. All nursery staff have a level three qualification in child care. The nursery manager was unsure how many mothers and their infants had been through the nursery, but believed it was in excess of 100. An operations officer, a family support worker, three nursery nurses and a mother and baby liaison worker staff the unit.

If a mother has a long sentence, she will be separated from her baby prior to 18 months. When the infant is six months old, this is generally reviewed by the social worker to ensure that the child's needs are met. For example a premature baby was not separated until it was eight months old. When the nursery place is granted the mother is advised that a separation will take place, at which time separation planning is started with either monthly or bi-monthly meetings.

The NGO charity Babies in Prison has been a useful fundraiser for equipment and gifts at Christmas and birthdays. There would have to be a life threatening behaviour from a mother to have a baby immediately separated from her once on the nursery. Any behaviour that jeopardises the welfare of the child would call into question the mother's suitability on the unit. Minor offences such as fighting (verbal) would earn a loss of privilege rather than loss of the baby. The baby has a completely separate file, which is a comprehensive dossier and would include details such as the emergency carer, developmental needs and family support requirements.

The main nursery area was a large room, divided into three sections. One section was for small infants in sleeper rockers, another for bigger children with cots and the third section was the primary play area. All sections were very well equipped.

Inmates' rooms are on the upper level of the mother and baby unit. Each room is equipped with a shower and toilet. One larger room, for twins, which has a toilet but no shower. All the furniture is wooden, which is considered more baby friendly. Wonderful murals are everywhere, many of which are by one of the current inmates. She was to receive a speaking role in an imminent visit to the prison by Princess Anne.

The mothers are not locked in at night but are expected to inform the officer on duty if they move out of their rooms. Night movement is for baby needs only. Women have their own keys to their rooms. Recently the women asked for a bathroom exclusively for babies – the request was granted.

All mothers are expected to work and they drop their babies off in the nursery from 8.25am until 11.30am, when they break for lunch and return to the nursery unit to feed the children. Fully breastfed babies are also accommodated, with the mothers returning to the unit to feed their babies. In some cases they will have employment on the unit itself, in other instances the infant will either be taken to where its mother is working or the mother will express milk. Mothers return to work from 1.25 until 4 or 5.00pm. The nursery nurses have also found funding for swimming lessons for the babies through the Babies in Prison Charity.

A community living room has an infant corner, again attempting to mirror the community as much as possible. Current staff were involved in the planning of the nursery. A health professional visits the unit once a week to deal with any issues that come up with baby. *N.B This professional, who is trained in infant health and development is the equivalent of a Plunket nurse in New Zealand.*

Mother has the primary responsibility for the infant and so, while there is strong encouragement for immunisation, ultimately it is the choice of the primary caregiver, the inmate mother. Multidisciplinary meetings concerning the women are held by staff every two months. General practitioners immunise the infants.

The unit has only had one seriously ill baby in the last two years. This infant was born with hydrocephalus and was eventually transferred to Holloway mother and baby unit where, given the proximity of Great Ormond Street Children's Hospital, it could receive better treatment. An oxygen system had to be maintained for this baby so keeping it at Bronzefield was clearly not viable. There have been a few addicted babies. Depending on length of sentence, an inmate would be either maintained on methadone or supported to medically or non-medically detoxify, depending on the individual situation. Bronzefield has a both a non-clinical and clinical substance misuse team.

There is a well-equipped art room that is considered a 'quiet' space where mothers can be creative. Mothers can enjoy this room on their own or with their infants.

Fifty per cent of the mother inmates are foreign nationals, who are usually obliged to serve their sentence in the United Kingdom before deportation

to their own country. It is of interest that there is a significantly higher number of foreign nationals in the nursery population than in the general prison population. Depending on the inmate's immigration status, women may be deported, released into the community, or moved to an immigration detention centre. Crimes committed by foreign nationals are generally about drugs, false documents and fraud.

Only four mothers have been returned to prison. Few babies are adopted out at birth and only three infants have been separated from their mothers since the nursery opened.

Young people and adults share the same units. Food is collected from the main kitchen and kept warm in a 'milk kitchen.' Meat is cooked in the main kitchen, but all other food for the children is prepared by the mothers. In order to prepare for the community, mother inmates attend food courses, health and hygiene classes and are expected to organise the laundry with all nursery residents. No clothes dryer is provided, which is another attempt to model what would happen in the community.

British subjects receive the child benefit, which is to be used exclusively for the child. Budget for nappies, clothing and equipment is kept separate from the inmates' own wages. Family members can bring in equipment for the child as well. Foreign nationals, who are not entitled to the child

benefit, have everything supplied to them by the prison. Budgeting assistance is offered to nursery mothers, generally one on one. One of the local financial institutions visits periodically and gives banking advice.

As the mother has full custody of the infant, any potential liability for the prison is not considered an issue. Insurance covers the nursery 'girls' for any mishap. While the nursery has never experienced a cot death, it has had a stillborn infant. Babies are able to go out to family members for the weekend.

The nursery manager was aware of the concept of the nanny caregivers I had seen in the United States prison nurseries. She had suggested that this could be trialled at Bronzefield Prison, but found little interest from decision makers.

Any non-British citizen receiving a sentence of over a year attracts immediate interest from border control. All women have a 'what if' plan, which involves an emergency carer who could be a family friend or, at last resort, the state sector child protection services. While babies can only remain in the nursery until they are 18 months, if there is only a small difference in the length of sentence, there is some flexibility. Mothers are frequently sent home on home detention curfew (HDC), which involves an electronic ankle band only allowing them out between 7am and 7pm. An

electronic box emits a signal if they breach these conditions, much the same as happens in New Zealand. The care plan is re-visited every eight weeks. A worker is allocated to each infant.

*Haslock 1. Detox Unit tour.* Because the women do not work on Fridays, the day I visited it was very noisy. Two isolation cells are located at the entrance in 'separation and care,' with one women inmate yelling and screaming abuse. I was told that she lived there almost permanently as she was too dangerous to let into the main units. She recently attempted to kill an officer. The detox units are arranged in a spur, with four pods around a central administration area.

Bronzefield was recently runner-up in an award from the Butler Trust, which is the reason Princess Anne was coming to visit. This award was for software designed to allow the inmates to order their own food, check their bank accounts, spend money, and make appointments.

The inmates appeared really enthusiastic about this system and keen to demonstrate it. While they had their own pin numbers they could only activate the system with the additional security of a fingerprint. Each pod housed about 135 inmates. A four-day induction for new inmates includes one day orientation. Family members are invited to participate in the orientation, which ensures they have the correct information. A family

support group helps maintain and re-establish family with social services approval.

To begin with, new prisoners not known to the prison are under two hourly observations. While no suicide has occurred, the coroner is still investigating two deaths in the prison.

Inmates have their own toilet and basin with communal showers in the pods. They are locked in from 5.15pm until 7.45am. An attractive visitors centre includes plenty of tables and chairs. Inmates have a different coloured chair. Enhanced status inmates may have their children outside in the garden. A shop in the visitors room provides the opportunity for family members to make purchases for inmates. A small wedding chapel and a family room is available for children's birthday parties and contact visits. A no sex rule is stringently monitored. For weddings a small buffet is provided afterwards.

Another higher wing was for enhanced inmates, enabling a greater level of privilege.

## **HMP and YOI Styal Prison, Mother and Baby Support Unit, Manchester.**

*Basic Demographics:* Styal Prison main buildings were originally built as an orphanage in the 1890s, closed for this purposes in 1956 and opened again as a women's prison in 1962. Inmate capacity is 459.

Styal Prison's unfortunate spate of suicides over a 13 month period in 2002/03 prompted the now well-known 2007 (Baroness) Corston Report, "A review of Women with Particular Vulnerabilities in the Criminal Justice System" commissioned by the British Home Office. Despite the Ministry of Justice, accepting all the recommendations in its response, and notwithstanding the best efforts of the prisons themselves, little has changed in 2012. On 20 February 2012 the Chief Inspector of Prisons made a scathing speech to the University of Sussex entitled 'Women in Prison: Corston Five Years On.' This placed the responsibility firmly back on the government and emphasised as absolutely unacceptable the disregard and scant attention that the women's prison estate receives, compared to facilities for men. Given this, it is remarkable that Styal Prison's mother and baby unit continues to receive accolades. This is not in isolation from the main prison, which continues to be the subject of considerable concern by the Inspector of Prisons regarding the women's mental health unit. Acknowledgement is given for the dedication and

diligence of the staff, although the facilities remain completely unsuitable to treat women's mental health.

Styal mother and baby unit was additionally recognised in 2010 with the Butler Trust award presented by Princess Anne, which celebrates outstanding dedication, skill and creativity on the part of those working in correctional settings across the United Kingdom.

The unit was established in 2006 and is staffed by qualified childcare professionals employed by Action for Children under contract to HM Prison Service. Mother and infant capacity is eight mothers and nine babies, allowing for a larger room for a set of twins.

Once babies reach the age of eight weeks they attend the nursery all morning, allowing their mothers to attend classes intended to address offending behaviours. A number of individual houses are dotted around the prison estate, a legacy of its origins as a children's home and the nursery is now adapted for purpose.

Surprisingly no custodial staff work within the unit grounds, although they are certainly available to the staff when required. This was the only unit I visited anywhere where this was the case, though Nebraska came close.

Inmates on the unit can have limited access to some other non-nursery inmates who have acquired enhanced status level. Mothers on the nursery must be 18 years and above.

On the day I arrived two inmates were transferred to a less restrictive mother and baby nursery in an open prison. This meant that they would have more privileges, so the transfer was seen as a positive achievement.



These two babies were born while the women were inmates at Styal and the mothers successfully completed a variety of courses designed to address their offending patterns. They were to work in the community and receive a regular salary and while they doing this, the nursery would take care of their infants.

While in the Styal unit mothers are also expected to work and do a variety of different jobs, which can include kitchen-hand duties, cleaning and gardening.

The unit manager viewed the concept of inmate nanny helpers that I saw in operation throughout the United States with considerable concern. Her view was that this would not meet what she considered best practice and minimum standards, pointing out that her nursery nurses have degrees in early childhood education.

Although the unit facilities are certainly old, in fact the oldest buildings in the United Kingdom's prison stock, they are bright and cheerful with graphics and murals created by the inmates. The result has been to make the facility child friendly, rather than stark, dissimilar to other residential or prison institutions. A communal lounge has plenty of appropriate toys, a formal nursery has an outside play area, mothers feed the children in a dining room and are also able to use a well-equipped laundry and kitchen.

Styal nursery (commonly known as Early Years Provision) is regulated by Ofsted, the government agency responsible for inspecting all schools in the United Kingdom, including childcare providers. Ofsted sets certain criteria including adult/child ratios, minimum staff qualifications and quality of learning and care experiences for the child. Facilities are inspected every three years when Ofsted inspectors of childcare examine policies and procedures, public liability insurance and infection control procedures, among other aspects. In addition, these need to meet the requirements of both Action for Children and the prison.

Nursery staff strongly support prison mothers joining in and helping in nursery alongside the staff. In addition the mothers are a great source of peer support to each other.

The layout and ethos of the unit is intended to reflect, as far as possible within the prison environment, the community that mother and baby will experience on release, and is a self-contained living space for the mothers and their babies.

The overall focus of the unit was to teach women the skills they needed to manage well and parent effectively in the community, albeit the prison is a restrictive environment and the choices they make have to be within the prison rules. For example there is no choice concerning immunisations as it is considered a safety hazard for other children if any children are not vaccine protected. Action for Children has purchased the Incredible Years programme, which is well known in New Zealand, and this is implemented within the nursery. The unit manager commented that mothers' memories of playing as children tended to be quite limited, so this was a significant focus.

Mothers have free movement through the house and are not locked in their rooms at night, though the unit itself is locked at night. One staff member sleeps over and keys are removed at lock up.

Because prison is a disempowering experience, the focus of the unit is to achieve good outcomes for both the mother and the infant. Taking responsibility for their own cooking, budgeting and laundry is all part of mothers learning the skills necessary to take care of themselves and their infant in the community once released.

Thinking about tomorrow is a 'huge journey travelled,' according to the manager, who cited one mother who had no cooking skills at all and fed her children breakfast by taking them to McDonalds when she was living in the community. On release, she cooked breakfast for the entire unit, something that she saw as a huge source of personal pride and which previously would have been completely beyond her ability.

Food is ordered from a list and delivered fresh and uncooked. Portions are limited, which means that if inmates eat everything at breakfast they will have no dinner. One day's food is supplied at a time. Additional food cannot be brought in to supplement what is provided by the prison. I did not see discipline promoted in this way at any other nursery unit and it is an interesting example of what would actually happen if these women were indeed living in the community. I applaud Styal for taking this approach.

The community kitchen has a focus on weaning and healthy feeding. There is a baby shop and the nursery buys in bulk from the local supermarket. Mothers keep their state child benefit and also their child tax credit, which amounts to £55 a week, from which they have to buy everything for the baby except food, though milk formula is not supplied by the prison. Foreign nationals are not entitled to anything from the government and the governor of the prison has generously been giving them the £15 equivalent child allowance from the prison budget. The nursery attempts to make up the balance for foreign nationals from donations and assistance from the NGO Babies in Prison. Babies never go without their basic needs.

Eight or nine staff are employed, working in shifts, though not all work full time. While there is a sleepover staff member on site, there has been no occasion when this has been abused and no time when this staff member has been woken unnecessarily, which is seen as evidence of effective staff/prisoner relationships and an ethos of mutual respect. As a result, Action for Children staff are seen as a support rather than custodian or disciplinarian.

Inmates have their own rooms with a wooden cot, a television and a small ensuite bathroom, which is a recent innovation.

Each mother inmate has a laundry day but is freely able to negotiate for a laundry emergency. Serious fighting has never occurred on the unit. The manager commented that the women live up to high expectations on standards of behaviour. Procedures cover poor behaviour and would need to be serious before a baby was removed, such as for violence. The paramountcy principle (best interest of the child) is adhered to at all times.

This is very similar to what I found in other British units, as well as those in the United States. Mothers with babies in prison units play by the rules, as the consequences are too dire for them to do otherwise.

There is a mini bath in the twin room. All equipment is owned by the prison. While some rooms have an ensuite with a toilet, several shared toilets are also located on both accommodation floors.

Whilst the normal age limit for babies is 18 months, the oldest child in the unit is 20 months because this particular mother has been on remand for 13 months so has yet to be convicted or sentenced. The manager believed that it was inevitable that this child would be removed and, as with all other mother and baby units I visited, there was an alternative plan for the baby. I later learned that the nursery went to considerable efforts to put additional services in place to allow this child to remain on the unit

until it was 25 months old and then leave with the mother, so preventing any separation after all. This was an exceptional case but an example of creative thinking by the prison system, supported by services from Action for Children.

Babies are taken out as much as possible into the community, on buses, to libraries, story and rhyme time, the airport, Styal village, toddler groups and the supermarket. Community group Babies in Prisons gives the nursery £15-20 a week for treats. Because of the limited space in the nursery, infants sleep in pushchairs during the day rather than cots.

Nursery time for the babies, while mother attends offending behaviour programmes, is for three hours at a time morning and afternoon. Each child only attends one three hour session per day; the focus of being on the unit is the attachment for baby and mother, therefore it is not considered in the child's best interests to be in full day care. If possible, outings are twice a week.

I was shown a baby profile, very thick, with everything that this infant had achieved and when, which was very thorough. Mothers take huge pride in developing these in partnership with the nursery staff. They are effectively a life storybook that the child may have access to from the mother later in life. The intention is to dispel any stigma around being born in prison and

give the infant a real world view of how it was for him or her. A separate confidential file is kept in the nursery office with addresses and other detail. All this is archived by Action for Children.

Prison data suggests that, after three years the re-incarceration rate from the nursery population is ten per cent, whereas in the general female prison population it is 70 per cent. The unit manager was hoping that some research could eventually be undertaken as they had little idea of how many of these mothers had retained custody of their infants or what the outcomes were in terms of child development.

### United States of America Prisons – summary table

| Prison Name             | Muster numbers   | M & B capacity | Current Numbers     | Nursery Established | Infant Age Limit | Other                 | Additional programmes   | Nursery Operated by:   |
|-------------------------|------------------|----------------|---------------------|---------------------|------------------|-----------------------|---|--|
| Bedford Hills NY        | 760              | 29 pairs       | 15 mums, 3 pregnant | 1991                | 12-18mths        | Inmate helpers        | Visiting nursery, summer camps  | Catholic Charities NGO   |
| Indianapolis IN         | 600              | 10 pairs       | 10 mums 3 pregnant  | 2008                | 18mths           | Inmate nannies        | Family Preservation services, other course  | Prison through external grants                                     |
| Nebraska NE             | 279              | 15 mums        | Full                | 1974                | 18mths           | Inmate nannies        | Visiting centre on site for other children. Space for overnights for children 3-6 (3 rooms) | External grants though originally established by Corrections grant |
| Seattle, WA Gig Harbour | 870              | 20 mums        | 6 mums 2 pregnant   | 1999                | 36mths           | Caregiver inmates     | Early Start Head  | Corrections funded   |
| Coffee Creek, Portland  | 127 min security | No nursery     | No nursery          | N/A                 | N/A              | Inmate helpers in EHS | Early Start Head  | Corrections funded   |

### United Kingdom Prisons – summary table

| Prison Name                         | Muster numbers                                     | M & B capacity                         | Current Numbers                    | Nursery Established | Infant Age Limit | Other           | Additional programmes              | Nursery Operated by:    |
|-------------------------------------|--|--|------------------------------------|---------------------|------------------|-----------------|------------------------------------|-------------------------|
| Cornton Vale                        | 309  | 3 Ind Living Units and 7 in M & B unit | 1                                  | 1998                | No limit         |                 | Developmental Worker Family Centre | Scottish Prison Service |
| Rainsbrook Secure Training Facility | Adolescents 12-17yrs<br>87 male beds<br>24 females | 3 pairs                                | Full                               | 2006                | 18mths           |                 | Full nursery facilities day        | G4S Children's Services |
| Styal                               | 459  | 8 mothers and 9 babies                 | Full                               | 2006                | 18mths           |                 | Full nursery facilities day        | Action for Children     |
| Bronzefield                         | 527  | 12 mothers and 13 babies               | 7 M & B dyads and 1 pregnant woman | 2004                | 18mths           | Psychotherapist | Full nursery facilities day        | Sodexo                  |

## **Supporting Research Evidence**

A study in 1992 by British researcher Dr L Catan, carried out in three mother and baby prison units in the United Kingdom, found that infants who resided in the prison nursery showed a strong, healthy attachment to their mothers and benefited from the intimacy with their mothers and the variety of prison unit life. This study compared mother and child dyads that were living in the prison nursery and a control group of infants who had been placed in the community, either in state care or with relatives. Catan (1992) found developmental deficits in infants who stayed in the nursery for four months or more. However, these deficits soon disappeared after the infants left the prison environment.<sup>21</sup> Follow up was three months post-release from prison.

Interestingly, a 1990 study of 12 infants at the Bedford Hills, New York prison nursery failed to show the same level of attachment evidenced in Catan's work, reporting that 50 per cent of the infants seemed insecurely attached to their mothers and 33 per cent were below the mean in overall development. There was no follow up in this study.<sup>22</sup>

Both of these studies cited that these developmental delays were most likely due to lack of educational resources.<sup>23</sup> In addition, Catan (1992)

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<sup>21</sup> Mother, Infants and Imprisonment; wpaonline.org 2009

<sup>22</sup> Busch-Rossennagel - Mothers and infants and Imprisonment 1990

<sup>23</sup> www.WPAonline.org

blamed poor unit design, staffing and protocols and noted children's movements were severely restricted, including being left strapped in prams or chairs for hours. Catan strongly advised that significant attention should be given to creating a child-friendly and stimulating environment for infants while they were incarcerated with their mothers.

Clearly, over the intervening years the nursery environment for infants at Bedford Hills has improved dramatically. The New York Department of Correction Services published a report (2002) on Bedford Hills and Taconic Prison Nurseries. Participants were recruited in 1997 and 1998. This research was a three-year follow up study. The researchers found that nursery mothers have lower recidivism rates compared to the general female prison population (13 per cent versus 26 per cent) and that 62 per cent of the nursery mothers retained custody of their infants, a further 30 per cent of infants were found to be living with a relative and the remaining eight per cent either could not be found or were in state foster care. I personally find these quite startling results for such a high-risk population and highly promising that the majority of nursery mothers not only did not reoffend, but remained caring for their infants.

An additional three-year follow up study in three Washington State facilities (Rowland & Watts 2007) found 15 per cent lower recidivism rates

versus 38 per cent in the general prison population, equally an overall 50 per cent lower recidivism rate in both the 2002 and 2007 studies.

Following on from the Department of Corrections 2002 study and the 1992 Catan study, Dr Mary Byrne, of Columbia University has been conducting the first longitudinal study of a prison nursery using established and standardised methods to describe and measure the outcomes of prison participants. Her findings concluded that when resources are available a prison nursery programme can provide a positive environment that supports parenting and child development with measurable evidence of secure attachment in spite of the mothers' rates of insecure attachment to their own parent figure. In addition, Byrne's research has confirmed that prison nursery mothers showed lower recidivism rates after one-year post-release than the general population of incarcerated women.<sup>24</sup>

Dr Joseph Carlson has been studying the mother and babies prison unit at the Women's Correctional Facility in York, Nebraska, for 13 years. Dr Carlson of the University of Nebraska at Kearney is a self-confessed 'recovered sceptic' concerning the viability of positive outcomes for prison nursery mothers. His study is unique in the fact that he compared nursery inmates to other inmates who were forced to give up their children for the

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<sup>24</sup> [www.cumc.columbia.edu/dept.nursing/byrne/prison\\_nursery.html](http://www.cumc.columbia.edu/dept.nursing/byrne/prison_nursery.html)  
Mothers, Infants and Imprisonment - [www.wpaonline.org](http://www.wpaonline.org).)

three years before the nursery programme began. His most recent data covers three years post release. Carlson found that recidivism rates for nursery mothers was 16.8 per cent, in comparison to 50 per cent for those women who were forced to give up their babies. Similar findings have been noted in the United Kingdom (Manchester Metropolitan University, 2011) and Australia (Office of the Inspector of Custodial Services, 2009)

A cautionary note has been made by Goshin and Byrne (2009). They state that it is important to remember that women participating in prison nurseries are screened prior to acceptance by type of crime, prior parenting outcomes, and current prison discipline record. This makes direct comparison to women in the general prison population somewhat specious. They conclude, however, that the magnitude of these results around lower rates of recidivism is promising.

I have found no recent research in the United Kingdom on this subject but there is nothing to suggest that the results would be any different between the two countries, particularly considering most facilities and resources in the United Kingdom were outstanding. What data I have been able to collect from the United Kingdom supports quantifiable and rigorous results from studies in the United States.

### Summary of Recidivism Data

| Name of Prison                 | Prison Nursery Recidivism | General prison recidivism |
|--------------------------------|---------------------------|---------------------------|
| Bedford Hills, New York:       | 13%                       | 26%                       |
| Indianapolis: Wee Ones Nursery | 11%                       | 32% provisional           |
| Nebraska                       | 17%                       | 50%                       |
| Gig Harbour                    | 12%                       | 50%                       |
| Coffee Creek                   | 25%                       | 25% *                     |

\*Regardless of criminal risk. It is unknown whether nursery mothers were at a higher risk than non-nursery women

| Name of Prison         | Prison Nursery Recidivism | General prison recidivism |
|------------------------|---------------------------|---------------------------|
| Cornton Vale, Scotland | 10%                       | 87%                       |
| Rainsbrook             | No data*                  |                           |
| Bronzefield Prison     | 2%                        | 67%                       |
| Styal Prison           | 10%                       | 70%                       |

\*Rainsbrook Prison had 21 babies but no ability to collect data because of the age restrictions for this prison.

## **Visits to Community Groups, Not for Profits**

### **Correctional Association (CA) New York**

*Hosted by Tamar Kraft Stolar, Director of the Women in Prison Project and Jaya Vasandani, Acting Director.*

This association was initiated as a NGO in 1844 and in 1846 a law was passed to give the organisation unlimited and unfettered access to the prison. This still stands today and as a result CA remains the only NGO with this level of access. Other NGOs or Not for Profits (NFPs) have voluntary status and as such are restricted by prison policies and management's ever-changing viewpoints on the usefulness of community groups working within prisons.

In essence, CA is the non-government watchdog for prison issues, and prison reform is its primary priority. CA employs around 20 staff and in order to remain independent has only a small amount of government funding. CA does not deliver direct services and attempts to employ as many previously incarcerated women as possible, currently around three.

Their relationship with the Department of Corrections changes from year to year, according to which party is in power and what issues are being challenged by CA. Changing what it considers to be bad legislation occupies a significant amount CA's time and energy.

The project with the most relevance to my visit and what particularly interested me is the Women in Prison Project. An interesting example of CA's efforts in this regard is the Adoption and Safe Families Act - Expanded Discretion Bill (ASFA). This bill allows for the termination of parental rights if a child is in foster care for 15 continuous months out of 22 months. The median sentence for women in New York prisons is 36 months, far exceeding ASFA's timeline and this law does not only apply to inmates but to the general population as well. The unintended consequence of this law hugely impacts on incarcerated women and as a result CA is currently drafting legislation that considers incarceration and stops this automatic procedure, technically allowing a 'freezing process' for women who are incarcerated.

Another piece of work being undertaken by CA is the alternative sentencing laws that, if accepted by law makers, would require judges to take abuse into consideration. An example of this would be a woman being compelled to drive the getaway car because her partner has threatened the life of her children if she fails to comply, however this abuse would need to be a significant contributing factor in the crime she is charged with. Retrospective crimes can be taken into account in this law change. The three strikes law does not apply in New York, though it does in California and some other states. CA is part of a coalition of other NGOs that includes Hour Children.

What particularly impressed me about the CA is its ability to successfully lobby for law changes. Incarceration costs in New York are approximately \$55,000 per year, which appears to be significantly lower than ours. However, without attempting to understand what this includes, a comparison to New Zealand is not viable.

CA's offices are in Harlem, which is an appropriate area considering that African-Americans are incarcerated disproportionately. In New York state there are five *all* woman prisons, two co-ed and 59 men's prisons.

#### **NGO Hour Children, New York:**

In 1986 Sister Teresa Fitzgerald (Sr Tesa) and four other sisters of St Joseph led an initiative to open the doors of St Rita's Convent and begin caring for children whose mothers were in prison. They continued this with support of volunteers from 1986 to 1995 when Hour Children officially incorporated into a non-profit organisation.

Hour Children is now a significant community group in New York, with offices and residential facilities situated on Long Island. Its primary focus is still on incarcerated women and their children. The name Hour Children originated because of the impact the hour of their mothers' arrest has on these children. This was selected by Jean Roulet, sister of Elaine Roulet the original founder of the Catholic Charities Children's Centre at Bedford

Hills. From this original group a number of other services have sprung up around imprisoned mothers with their often estranged children. One objective was encouraging the need to change the bleak and unattractive prison nursery into a brighter and more child friendly atmosphere. Sister Elaine Roulet was never able to convince the diocese of the value and importance of her work in the prison and while there was some original financial support, this fell away quite quickly and was eventually picked up by the New York State Department of Corrections.

Hour Children held the Taconic Prison nursery contract until it was closed in July 2011 and by mutual arrangement had never competed for the Bedford Hills contract. Bedford Hills, while contracting family services to Catholic Charities, uses Hour Children services extensively as part of its post-release plan for inmates. Given that it is almost impossible for ex-inmates to find accommodation in New York on release, and that they face discrimination for with state-funded housing, Hour Children provides extraordinary solutions for an ex-inmate with an infant.

In addition, for those women who are obliged to seek alternative foster care for their infants, Hour Children is able to place these infants with its own caregivers and eventually reunite them within an Hour Children residence. Weekly visiting is arranged for these children to enable them to maintain the parent/infant attachment.

Today Hour Children has five residences that house approximately 60 families each year. This transition to community housing begins while the mother is still incarcerated and is a unique 'through' service. I interviewed four ex-inmates currently either employed by Hour Children or living in one of these residences. They had enormous gratitude for the assistance given by Hour Children. In every case they believed they would not have survived without the support, and for those estranged from their children, would not have been able to re-establish their relationships.



Current Hour Children Programmes and facilities are as follows:

- Three thrift shops run by ex-offenders, initially on unpaid internships from which some gain employment
- Day care
- Three communal residences – 35 families

- Two apartment blocks – which house 12 permanent apartments
- Working Women programme
- Food pantry
- Training programme
- Mentoring programme for children

Sister Tesa Fitzgerald was my host while I visited Hour Children. She drove me to Bedford Hills Correctional Facility for Women, some two hours away from where she worked. What particularly impressed me, apart from her immovable dedication and belief that she was on the right track, was the through service that Hour Children offered incarcerated women both pre- and post-release. Technically Hour Children offers supported accommodation, family and individual support and potential employment, all of which is intended to assist female offenders with children to remain attached and functional for their children, rather than the alternative of alienation, separation and inter-generational cycles of offending.

This was the ultimate through service I believe New Zealand should invest in and is an excellent example of tenacity and determination, originally in a small group of women, now centred on just one dedicated charismatic voice.

## **WPA Women and Criminal Justice: Alexandra Villano**

### **(Director of Strategic Initiatives)**

Established in 1845, The Woman's Prison Association (WPA) is the nation's first service and advocacy organisation working exclusively with women involved in criminal justice and their families. It is a spin off from the Correctional Association and is now operating from a large residence called Hopper Home, named after abolitionist Quaker Isaac T Hopper, one of WPA's co-founders. WPA was spearheaded by Hopper's daughter, Abigail Hopper Gibbons. WPA operates from a historic townhouse, which it purchased in the 1870s, and has used continuously ever since. Initially Hopper Home was run as a residential programme for ex-female inmates, predominantly those convicted of drunkenness, who were then 'farmed out' to rich families as household help. In 1992 WPA renovated Hopper Home and reopened the facility as a residential alternative to incarceration (ATI) programme for women facing substantial state prison sentences, usually for drug charges. The ATI programme was essentially a community-sentencing programme, whereby women who met certain criteria were eligible to attend and enrol in other needed services, such as drug treatment and therapy. As they met the required milestones, set by either the court or the prosecutor's office, and successfully completed the programme, charges were either dropped or reduced and their case would be closed.

In 1993 Huntington House was opened to offer support services to women involved with criminal justice, assisting them to reunite with their children, effectively becoming a transitional service. Mostly, these women have lost custody of their children through imprisonment, or have lost the relationship with them as a result of their imprisonment and are seeking to re-establish this. In its first ten years of operation the Huntington services successfully reunited 300 women with their children.

Huntington House, a short distance from Hopper, houses a maximum of 36 women and their children at any given time. It is known as the Catch 22 issue as women cannot gain state housing assistance because they do not have their children with them and cannot gain custody of their children because they have no housing. This issue is spoken of widely among the female offenders advocate systems I visited in New York.

The WPA government grant is given under the NYC Department of Homeless Services. WPA can house up to 35 women at a time, offering single apartments to take two women at a time if they do not have their children with them, and family apartments for those that do. The apartments are reasonably spacious and more than adequate, providing communal laundries for residents.

Following continued funding cuts at both the state and city level, in October 2011 WPA made the difficult decision to close Hopper Home's ATI programme. However, WPA is committed to re-establishing a residential programme and is currently in negotiations with the city's Department of Homeless Services to operate a 44-bed emergency shelter for women being released from prison. These women would be categorised as homeless upon release and/or have a mental health diagnosis, typically determined during incarceration. The programme would allow women to come directly to Hopper Home, receive stabilisation services and then work toward securing supportive housing, among other goals.

Both Hopper Home and Huntington House are impressive facilities to assist women caught up in the justice system and clearly reduce the state sector funds spent both on incarceration costs and state sector child placement costs. That their funding has been either cut or is in jeopardy is illogical when compared to the cost of the alternative. Unfortunately, the New Zealand justice sector suffers from the same ideology, driven by a large section of the voting public that believes incarceration will stop crime. They do not appear willing to look at prevention costs versus building more prisons, although the beginnings of some new thinking around this area is emerging in New Zealand, with the willingness to establish mother and baby prison units being one such investment.

Finally, WPA has made a significant investment into keeping up with the research of women in prison and the effectiveness of mother and baby prison units.

### **Salvation Army Family Treatment Services, Oahu**

This includes Women's Way, a six month residential treatment programme with a three month outpatient component for women with children, Ke Ola Pono, a four month therapeutic living programme, and a two year transitional living programme at another location. An outreach component provides weekly home visits for recovery support and case management.

The Salvation Army had a ten acre property gifted to it 100 years ago and the majority of these services are housed here.

A maximum of 20 women can use the residential treatment unit. A one child policy is merely for practical reasons as the unit cannot manage more than one child and does not believe the programme is conducive to mothers with more children. Children in the programme are aged from birth to four years of age. Priority is given to pregnant women.

Child Protection Services (CPS) is usually involved and if women leave treatment early CPS usually removes the child. The unit manager maintains that this is a strong motivator for the women. Crystal meth is

Hawaii's drug of choice for women. I was informed that while infants do not really have bad withdrawals from this, little is known about its effects when they grow older. Drug exposure effects may include hyper-arousal, hypo-tonicity or hyper-tonicity, difficulty sucking, and difficulty soothing.

Some anecdotal evidence suggests that behavioural problems associated with crystal meth withdrawal for infants start becoming prevalent when children are around two, but given this is also when children enter the well known 'terrible twos,' without a research study it is impossible to know. Generally, CPS gives mothers one year to clean up or children are adopted out. This is a federal law, with the intent being to reduce the likelihood of having children in the state sector system any longer than necessary.

Of interest is that in New Zealand the current policy 'A Home for Life' is driven by the same motivation. CPS is obliged to offer what support and treatment services are required by the mothers, who pay board out of their state allowance. Family Treatment Services has a \$3.5 million budget, with multiple contracts across several state sector budgets. Some funding cuts have recently been made, resulting in redundancies. The centre does receive some private grants but they are difficult to acquire.

Resident clients are often homeless prior to entry, sleeping in cars, living on camping grounds or on the streets. One quarter of the clients have

come from prison and a third are homeless. The centre prefers the referrals while clients are pregnant.

*Typical case:* at birth tests positive for crystal meth – referred to CPS, which refers to Women’s Way to complete drug treatment. Many women are reunited with a child who has been in foster care and is allowed by CPS to join the mother in treatment. The programme collaborates closely with CPS and includes CPS in discharge planning.

Residential treatment cost is around \$50,000 a year and the Salvation Army makes no apology for this. Residential treatment requires 24 hour staffing with one staff member to each eight residents. The nursery ratio, staff to child, has to be staffed according to the state law; one staff member to three infants, and one to four with toddlers. The programme provides mental health services, including medication management by a psychiatrist in addition to substance abuse counselling, life skills instruction and parent education. A registered nurse and a licensed practical nurse are on staff. While several budget cuts have been made over the years, with some staff made redundant, 90 per cent of the programme budget is met through contracts with the State of Hawaii Departments of Health, Human Services, and the Judiciary. Of particular interest to me was that NGOs have lobbying restrictions put on them or their non-profit status is endangered.

Programmes are transitional. With no funds for external evaluations, none have been undertaken. However, six months follow-up shows clear evidence of the success ratio of completers as against non-completers. The centre has been unable to undertake any additional longitudinal follow up due to lack of resources. Approximately 3000 women have been through the residential programme. The buildings were constructed in 1954 and have required many renovations. Maintenance of the property has been a financial challenge. Contracts only pay for services, therefore ongoing repairs are a significant issue. The centre has attempted to raise funds by leasing out buildings to compatible NGOs, which is also assisting towards providing a one stop shop. The Path Clinic is one such arrangement.

[http://www.waikikihc.org/services/services/women%27s\\_health/](http://www.waikikihc.org/services/services/women%27s_health/)

This is a health centre, on site at the Salvation Army Family Treatment Services Campus, offering obstetrical and gynaecological (OB/GYN) services for women, along with paediatric and primary medical care. Waikiki Health Center provides comprehensive medical and social services for everyone experiencing or at risk of homelessness. Services are provided at Care-A-Van's drop-in centre, across Oahu by [Care-A-Van's Outreach](#), and for homeless youth at Youth Outreach (YO).

I found this collaborative model an ingenious way of solving several issues at the same time. That is, raising funds for the Salvation Army to repair buildings and providing a specialist medical service for the centre's homeless clients and children. A medical health insurance benefit, via Hawaii's medicaid programme Quest, is provided to all low income people, paid by the state under its policy of temporary assistance to needy families.

**Lilias Graham Trust, Thornhill, Stirling, Scotland.**

**Director – Cath Morrison**

The Lilias Graham Trust (LGT) is a 44-year old registered charity. The house was left by Lilias Graham with the intention of providing supported accommodation for vulnerable families. A protective separate trust ensures that the funds remain used for this purpose.

Services follow the government of Scotland's 'Getting it right for every child' policy, which is broadly the equivalent to 'Every Child Matters' in the United Kingdom. 'Getting it right' is Scotland's approach to supporting children and young people, and is an important part of the child protection policy launched in 2008.

The residential accommodation comprises five family units, two of these are in the main house, one in the log house, one in the mobile home and

the fifth in the lodge house about 500 metres from the LGT office. Three purpose-designed indoor play areas provide different play opportunities for children and parents. The most recent of these, a purpose-built art and play therapy space, was built in the secret garden and opened in August 2008.

Within spacious grounds, LGT has ample space, outdoor facilities and a games hall, a pig called Tom and several chickens and ducks! Altogether, LGT provides a great place for fun, and the staff offer excellent support to parents using the facilities to strengthen family relationships.

LGT services follow an ecological model of children's needs. Referrals are received from CPS (social workers) and are initially assessed for risk. The length of time in the service varies from weeks to several months, with no prescribed exit time. Recently LGT has had an increase in referrals for mothers with babies where parenting capacity is the primary issue. Health, development and attachment of child are also a significant focus of the service.

A recent evaluation report was done by Mary Munro on nine families, two of whom did not attend the evaluation interviews. The evaluation found that all those who attended the interviews thought positively of the service. All mothers had retained custody and believed the programme

had assisted them to achieve this outcome. The cost of the residential service is £3,264 per week per family, 60 per cent paid for by local government (social work) while 40 per cent needs to be found through philanthropic trusts, which is a constant struggle. Two cottages on site house homeless families for a nominal rental. For the last 11 years LGT has been the equivalent of a charitable company.

Recently LGT offered three *free* places to the prison for post-release mothers and babies, though for no apparent reason, the prison did not take this up. The LGT manager felt that this lack of uptake might be as a result of having no internal prison champion for the programme.

She also had some concerns that the recent 'damning' report on Cornton Vale was more likely to end up on a dusty shelf than in real changes for female inmates in Scotland, given the lack of government commitment and the limited ability of the Inspector of Prisons to lobby effectively.

It did seem to me that a real opportunity for post-release residential services for women leaving Cornton Vale was lost through the lack of an ongoing collaborative relationship between the prison and LGT. I was not privy to the reasons for this.

## **Anna Freud Centre, (AFC) Hampstead, London, United Kingdom**



Originally named the Hampstead Clinic, it was opened in 1952 when the centre was granted charity status. After her death in 1982, the name was changed to Anna Freud Centre. Anna was the youngest daughter of Sigmund Freud and was one of the founders of child psychoanalysis. Consequently her work has profoundly influenced thinking on modern day child development. My host was Tessa Baradon, head of programme: infancy and early years services and manager of the parent and infant project.

The service that brought me to visit the Centre was the New Beginnings programme for mothers and babies in prison. This programme was developed by the centre in conjunction with NGO the New Bridge Trust, which had good access to the prison at Holloway and was prison visiting and delivering a service called Family Matters. Anna Freud Centre's view

was that while New Bridge was doing some good work it lacked the depth of knowledge necessary, so as a result Anna Freud Centre trained its facilitators and did pre- and post-programme measurement. Initially it was trialled in both Holloway and Bronzefield Prisons and then, by using other prisons, Anna Freud Centre did a Randomised Control Trial (RCT) across seven mother and baby prison units in other prisons. This demonstrated significant improvements in the mothers' reflective functioning and sensitivity to their child.<sup>25</sup> The original trial and the RCT were funded by HM Prison Service. In spite of its success, for no apparent reason, particularly considering this success, funding was stopped. Anna Freud Centre is currently talking to others in the community who are doing preventive work and trying to replicate it with the homeless population, who are at high risk of HIV. Anna Freud Centre is also trialling it in Johannesburg with a control group.

Early in the development of New Beginnings it was decided that while psychoanalysis underpinned the programme it would never be accepted if this was an overt model. The programme is 12 weeks long, two hour sessions at a time, or a half a day for a maximum of six women with their babies, who are required to be present. A project in South Africa tried delivering it twice a week, but it did not work as well because clients

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<sup>25</sup> Baradon, T., Fonagy, P., & Slead, M. (2009) *New Beginnings: A course for mothers and babies in Prison*. Executive Report, Anna Freud Centre

needed time to process what they had learned. It is a structured and evidence-based programme with specific weekly topics, such as how did I become pregnant, which involves a background about conception. Each topic has tasks.

New Beginnings is extremely experiential and helps mothers become highly observant of their babies and understand their cues. It involves two facilitators and resources include *The Owl Babies*, which is a well-known children's book. New Beginnings focuses on patterns of relating and trigger points. The programme also makes heavy emotional demands of both the facilitators and the participants. It uses the psychoanalytic attachment model, based on the work of Alan Schore and Bruce Perry, although the facilitators are not called therapists and it is not a therapeutic group.

### **Concluding Comments:**

This investigative study of mother and baby prison units in the United States and United Kingdom, multiple interviews with both current and previous female prison inmates, interviews with community groups and staff within the prison strongly supports the multiple benefits gained for departments of corrections, state sector child protection services, courts and police.

In particular, mother recidivist inmates, their children and their extended families all experience these benefits, which are also felt throughout our entire society in multiple ways.

It is, however, crucial that the benefits gained from recipients of the mother and baby prison units are reinforced and capitalised with the appropriate effective through service in the community.

Recidivism reduction gains were outstanding and evident in all prisons I visited. Broadly, mothers experiencing the prison nurseries were half as likely to reoffend as their general prison population counterparts.

*Hūtia te rito*

*Ote Harakeke*

*Kei he te*

*Kamako*

*E Ko?*

- *Tear the heart of the flax and where will the bellbird feed? –*

*Keeping Whanau Together*

Contributed by Renée Rushton

## **Appendix A: Inmate Interviews**

**(all names have been changed)**

*Four Ex inmates of Taconic Prison, Bedford Hills and Reikers Island*

All four of these women had been imprisoned in both Bedford Hills and Taconic, one only had also been imprisoned at Reikers Island. Because I ensured their confidentiality and they were no longer in prison I felt their responses were a true representation of how they believed the experience was for them. It doesn't make it factual but *is* their view.

Of all the comments made by these ex-inmates, the Bedford Hills nursery experience stood out as predominantly positive, while Taconic and Reikers Island drew most of the negative comments. Please note I was unable to visit either Taconic or Reikers Island.

- Quality of food while pregnant poor, canned goods only
- Drug treatment was not useful but allowed her to leave prison three months early
- Bedford parenting programmes very educational and therapeutic
- The closing of Taconic was a good idea
- Second chance at life was more than enough – that was all she needed
- Learned for herself – has come from within

- The opportunity to be a mother. Thanks to DOCCS for the nursery and the opportunity
- Became a different person when she gave birth. Opportunity to be a clear-headed mother
- Was in shackles when in hospital but not actually when she gave birth
- No nursery in New Jersey. Watched mothers separated from their babies, has seen the trauma. So important to have these nurseries. Life changing – no words for it
- Best thing that has happened for her – an unimaginable opportunity
- Child still picky because of the lack of choices for infant food
- Utilised everything available – made the most of it
- From Buffalo – left her entire family to attend post-release services available in New York. Knows she can do better and puts the effort in where previously she didn't. Followed the rules. Wants to get ahead. This time she understood what it was like to be without her children. Doesn't want to miss a moment of being a mother. Staff helpful at all times – efforts gets rewarded
- Lots of bad moments. Being around people you don't like. Having to trust your baby with people you didn't know

- Staff never mean to the children.
- Overly cautious about her infant through worry that she could lose it
- No fresh food
- Lots of bad moments. Always watched. Always being told what to do. Bedford best nursery. Day care was really nice. Have to ask for everything. Clean three years, loves her children so much she feels she will stay out of prison

*Group interview: (Coffee Creek Prison)*

I conducted a group interview with seven inmates who were attending the Family Preservation Programme (FPP). They had 17 children between them. Two of these inmates were extremely emotional when they related their stories to me. There are 10-12 vacancies for this programme at any given time and the child needs to be under the age of seven years. Again, caregivers have to be prepared to bring in the children and they can attend the summer camps.

Some children are in the care of the state, but are only able to be part of the programme if there is a goal to return home. FPP has been known to strongly advocate for women where there is just cause, including advocating in the court system. The programme has a budget of around \$150,000 to \$200,000 with three full time staff members. Their rooms are

rent free and their budget allows paying for a variety of different needs of the programme participants. They work with around 18 women and 25 children a year.

*Inmate (Nannie) Caregiver interview: (Gig Harbour)*

Susan (not her real name) was completing a two and a half year prison term and had had two previous prison terms. This was her second time as a caregiver. To qualify for this role, caregivers cannot have any violent or child protection history. Susan had a five year old granddaughter and a 25 year old daughter. In some cases, where the previous child protection is relatively minor, the inmate can apply for an override. This applies to inmates wanting to keep their infant as well.

Caregiver training includes CPR, child development, infant brain development, diaper changing. Mothers have to undergo the same training if they want to look after someone else's child. The Residential Parenting Programme (RPP) clerk (who was also Susan) is responsible for setting up the room for a new mother or pregnant inmate. The clerk is also responsible for ordering supplies and is a liaison between mothers and staff. It is also their role to deal with low level conflicts, she was paid 42 cents per hour.

There is no conflict resolution training available, which I found rather strange, given that this was one of the issues that had the potential to cause considerable difficulties for the women and technically threaten their right to keep their infants. The inmate caregivers also monitor the rules, e.g. no strollers to be parked in the hallways.

There have been occasions when the mother has been hospitalised e.g. mental health issues, in which case the caregiver could end up by looking after the infant until the mother is returned to the unit. Sometimes a significant mental health issue could mean the mother cannot be left unsupervised with the infant, in which case the caregiver would step in and assist.

Susan indicated that the role can get stressful at times but for the most part is extremely enjoyable. She is also studying horticulture and works part-time in the vegetable garden as well as attending bee-keeping classes. She was due for release in February 2013.

Susan's view was that these roles and responsibilities do seem to make being in prison more tolerable and was quite frank that it had been drugs that had brought her back into the prison system on all three occasions. Her opinion was that the officers were extremely vigilant and see everything so there was little point in attempting to mislead them. It

seemed that caregivers and mothers are held to a higher standard on this unit, and Susan did not want to jeopardise this for herself.

*Group discussion with women at Styal (not confidential as in front of staff)*

All were first time inmates and all expressed an intention never to return. They acknowledged the restrictiveness of the prison environment e.g. immunisations – no choice.

There is no weekend leave though the babies can go out. There can be release on temporary licence, which could be appropriate on the unit, though there would need to be a reclassification and this would normally be at the end of the sentence. Other disadvantages were 'missing our family members and not being able to go out with the children.' Mothers are given the current Department of Health guidelines about the appropriate time to wean, though as each mother retains parental responsibility they are able to wean outside of these guidelines provided this decision does not place the health of the baby at risk. The unit has a trained breastfeeding co-ordinator and all mothers are given support should they choose to breastfeed. The choice to breast or bottle feed remains with mother. Baby walkers are not allowed in the unit and babies are not permitted to share mother's beds. Mothers are compelled to work when the baby is eight weeks old. They can earn an early release with a tag – home detention. Only two children are allowed with each adult, so if

a mother, or several mothers, want to have a cigarette, some have to stay behind to mind the children. The unit manager advised there is a strong focus on care and protection but within the limits of not being able to monitor the infant 24 hours a day.

*Four inmate interviews* (names all changed) Bronzefield Prison

Alison: Baby is nine months old, her first child and it's her first term of imprisonment. She had been sentenced to 21 months prison for fraud and had a release date in February 2012. She was hoping she might be released October 2011 on home detention with an electronic tag. Alison said she has a very supportive husband, though he is autistic and is unable to take care of the baby on his own. She was separated from her infant for three months to begin with, which she described as intolerable. When the baby eventually arrived on the unit he was quite unsettled, she has now been on the unit for four months.

She described being separated from her husband as 'the worst thing' but she had learnt a lot about herself, although felt it had been an emotional rollercoaster. She feels she understands herself better now. Being able to understand and manage her emotions and be more honest about how she feels has been good for both her and her husband. Her family has been more accepting and the family counselling has been very helpful. The three most important things have been her self-esteem, motivation and

support – all three of these things she had gained from being on the unit. Her husband is unable to read or write and they will try and get a key worker from a social service agency to help out once she is released. Alison's husband now has a driving licence (had reader help) and drives for the local council.

Katherine: British citizen, born in Britain of Jamaican descent. Her infant is seven months old. She was sentenced to three years in prison but will be released halfway through her sentence. Katherine was eight months pregnant when she was imprisoned, she has two other children, a 17 year old boy and a nine year old girl. She had received one previous prison term and feels the unit is quiet and more settled now than it had been previously. There were eight women currently in the unit, it has capacity for 12. Katherine said there were 36 - 40 on the other units, mostly single cells, with three to four doubles on each wing. Sometimes the girls in the nursery 'play up' but there is a very effective warning system in place. This involves going back to the panel on the third warning where a decision would be made on if the inmate should be removed from the unit. Katherine is expecting to receive home detention on her release. She said the nursery inmate group is fairly self-disciplined as it is in everyone's best interest to behave. She admitted being the bossy disciplinarian of the group. She described this as 'teeth and tongue must eventually meet' and some quarrelling was inevitable. She is not sure of the supports she will

receive on the outside but, at the very least, is expecting the prison to arrange housing as she cannot be released without it. Katherine talked about another inmate who she referred to as 'liar' in the group, but she displayed considerable insight as she talked about the reasons why the other girl told lies.

Raewyn – is a foreign national and is expecting to be deported once she is released. This is her first prison term and her sixth child. She related a very sad tale of 'accidentally' carrying drugs that had been given to her under the guise of a gift for a relative by her sister. As a result she has lost her children, (her former husband has them) her home and probably her business. They would have been placed in state care if the children's father had not been willing to care for them. Raewyn said the nursery girls are very nice and take care of the infants really well. Being in prison was a huge transition for her, as she had never done anything like this before. She never knew that she was carrying drugs and her government has also seized her bank account. She has no idea what will happen when she returns. Her business was 'trade fair booths'.

Danielle: First prison term and has received a 16 month sentence. This infant is her second child. She had a tag release date of Nov 2011 and will receive home detention. Danielle also has a two year old at home with her mother. She feels she would be a well-behaved inmate even if she wasn't

in the unit. She is aged 19 years and is a youth justice (YJ) offender. Her view had been that with her infant and the associated responsibilities of this in the community that she wouldn't be that 'bothered' about being in prison but now feels that prison has matured her. She arrived in July 2011 and was separated from her baby for about one month, which she described as 'breaking her heart'. It was equally heart-breaking that she had to leave her other daughter and that she cannot have her with her now. Danielle described being separated from her child while in prison really made you realise what is important in life. While originally separated from her new infant, she did see him for two hours every week and while it was difficult she doesn't feel she has lost the bond at all. She was seriously ill when he was born and nearly died from complications with a C section. Because she was too sick to look after him he was sent home to her mother.

Danielle feels the nursery unit programme has been brilliant and considers the opportunity for the infant to socialise with others is very important, given the inmates cannot go outside the prison environment. She described it as being really easy to access services and that everything that the baby needs is provided by the prison. There are even day trips for the baby and Danielle's mother is very supportive.

She described the mother and baby groups and the health visitors as being very useful. Social work state services restrict ability for the fathers to see the children but she thought this was actually a good thing. With considerable insight, she described 'trying to convince yourself that they will change and they don't.' It took her previous partner to be imprisoned for her to realise she doesn't have to live her life being totally controlled and that actually she did have competencies of her own! Danielle told me she had received constant 'put downs' while living with him and as a result really didn't believe she had the ability to live and parent on her own. She said that coming to prison was probably the best thing that could have happened to her as it taught her independence. There are plenty of courses to help yourself that she would probably not have done otherwise. The best things were group activities and nursery relief.

*Mary: Cornton Vale:* Interviewed inmate in the independent living units, child Jane (not her real name) was a bright and happy two year old. Mary had been living in the house for 12 months and prior to that had spent two and a half years in the main prison. She was expecting to be released early in April 2012, failing that April 2013. Jane would remain with her regardless. Her home is in Dundee, which is 50 minutes away and her primary support, post release, will be her family. In addition, she will receive some state support from probation and some voluntary social work help. She has two older children aged 18 and 20 and later I was told

that she had another child who committed suicide relatively recently. She also has a grandchild.

Mary is able to visit the other women in the independent living units only when her child is at nursery school. She also holds down a small prison job that she does when Jane is at nursery school five days a week. This pre-school opportunity is free and available to all 'vulnerable' mothers with children under the age of three and for those mothers deemed not vulnerable it is free for children older than three years. Mary feels that she has a lot more patience with Jane and goes home with her once a month for a week at a time. Because she has a background of abusing illegal drugs, she is tested monthly by the prison. Mary expressed a view that she wished she could see her family more often, but felt that the experience of parenting in prison was largely a positive one. She is now off methadone and believed her attitude to life had changed and now revolves around her child. Recently her father said he thought she would be 'ok' this time and stay off drugs, and this comment had given Mary a huge boost in self-esteem – that finally one of her family members believed in her ability to succeed. She has had several prison terms, so many that she cannot remember the number, but she thought at least five, the previous prison term had been for four and a half years.

*Interview with four pregnant women from Peebles House:*

Three were being released before their babies were born and were intending to keep them; one was uncertain what her situation would be as she could still be in prison when the baby was born and was unsure if she would be allowed to keep the infant. Three were in prison for drug-related offences and the fourth for an assault. All women became very vocal when asked how hard was it to be pregnant in prison. The issues were: lack of privacy; they felt they should have single cells; there should be more toilets; better transport for inmates; better communication about appointments as partners often could not attend scans because the advance notice was minimal.

The women believed that they should receive more support though pregnancy programmes were adequate. There should be better communication between staff and inmates; they said the 'right hand didn't know what the left hand was doing' and inmates should be treated in a more humanising way. There were significant concerns from the group that there should be better quality and quantity of food and that while milk was available for pregnant women, it spoiled by the end of the day because there was nowhere to refrigerate it. They complained that they were often hungry in the weekends.

They believed there should be better preparation for going to the mother and baby unit and they claimed that there was insufficient staff to run it, hence why there were no mothers in the unit at present. This particular point was disputed by management, but noted that this was an example of the communication issues that the women were complaining about.

All of these pregnant women smoked, were well informed concerning the dangers and had made some attempts to cut back. I had been informed that some women had chosen not to keep their babies because it meant they could not smoke in the unit. These women did not appear to understand that there was smoking ban in the mother and baby unit, also reinforcing the communication issue already cited. The women said there were good programmes available but access was difficult.

## **Summary of interview themes**

- Nursery intake criteria were stringent
- Nursery staffing was low cost, where there were custodial staff this was minimal
- Inmates highly motivated to obey prison rules
- Accepted the 'fair' consequences of rule breakage
- Opportunity priceless – total infant focus
- Staff loved working in nurseries – babies positively changed the dynamics of a prison
- Inmate nannies were essential and highly valued in the USA
- In United Kingdom nurseries questioned the appropriateness of nannie caregivers
- Some conflicts with other non nursery mothers – ideally nursery should be separate
- Community after care was variable but essential
- Early Head Start alternative valuable (Portland) but no comparison to an on site prison nursery
- Committed staff was critical and needed to come from the top

## **Appendix B: Contributors and Acknowledgements**

Every prison facility I visited was given the opportunity to review the portion related to their facility, and all took advantage of this to ensure the content I wrote in this report concerning their facility was accurate in fact. Where less than positive comments about facilities were made from others I interviewed, the right to have this view expressed was accepted. This reinforced the incredible co-operation I received, both during my investigative visit and during the lengthy report writing.

In particular, I would like to acknowledge the following people:

*Dame Lesley Max and Dr. Annabel Taylor* who provided me with great references for this investigative research undertaking to Winston Churchill Memorial Trust. Lesley is a previous Churchill recipient and Annabel has been involved in researching the criminal justice area, particularly female offenders, for many years.

*Brian Pegler:* my husband who, while originally intending to join me in Scotland toward the end of the fellowship, decided after the 22 February earthquake that life was too short and he would accompany me for the entire journey. His support was invaluable and until we arrived in New York, the first stop, I had not fully comprehended what a challenging task it would have been to travel alone.

*Family Help Trust:* Grateful thanks to the Board of Trustees, my employer, for supporting me to undertake this project. Also for supporting me to develop and design our Mothers and Babies in Prison project some three years ago, which drove my desire to undertake this research project.

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*Jeanette Patrick:* Family Help Trust office administrator and proof reader extraordinaire. Thank you for your ongoing patience in the final stages of the report. I really appreciated your efforts.

*Maggie Riddell:* Social Worker, Family Help Trust for nine years. An integral part of the establishment of our mother and babies service at Christchurch Women's Prison. Significant patience was required to ensure that relationships were established and maintained over a number of years in order to ensure our service was taken seriously by staff and seen as professional and effective. It is not easy for a community group to work within a prison environment, which often sets restrictive boundaries.

*Dr. Venezia Kingi:* Research and evaluation consultant. Previously senior research fellow, Crime and Justice Research Centre, Victoria University of Wellington. Venezia has undertaken research on mothers in prison and prisoners' families and generously peer-reviewed both the research portion and my findings.

*Carol Bartle:* Co-ordinator of the Canterbury Breastfeeding Advocacy Service at Te Puawaitanga ki Otautahi Trust, Christchurch NZ. Her primary interests include infant feeding and mother-baby bond/attachment, mother-to-mother breastfeeding peer counselling and mothers and babies in prison. With Carol's background as a midwife, education and lactation consultant, we wrote a manual for breastfeeding specifically targeted at women in the prison mother and baby units that has proved a most welcome resource. Carol has also been a source of support throughout this project in a variety of ways.

*Wayne McKnight (Manager) and Judy Roughan (Social Worker)*  
*Christchurch Women's Prison:* grateful thanks to you both, for always answering my questions and for your untiring dedication to the establishment of the mother and baby unit. For encouraging Family Help Trust to design and eventually deliver a service to mothers and their babies in prison and in particular for being a constant source of advice and support, when we occasionally it appeared as if we might wander over the

boundary. I have concluded that mother and baby units can only work effectively when prison management and staff are fully engaged and supportive of mothers who have their babies in the unit.

*Renée Rushton:* Previous inmate of Christchurch Women's Prison – grateful for the opportunity the mother and baby unit offered.

*Dr. Robert Lindsay:* Psychiatrist, Kippen, Scotland, without whose encouragement and support I would not have applied for a fellowship to undertake this project. Robert visited us previously on a United Kingdom Winston Churchill Fellowship.

*Tessa Baradon:* Anna Freud Centre, London, head of programme: infancy and early years services and manager of the parent and infant project.

*Cheryl Hanna-Truscott:* Previously a certified nurse/midwife now working in the area of medical assessments of children suspected of having been sexually abused. The establishment of the mother and baby unit at Washington Corrections Centre for Women has allowed her to raise awareness through her incredibly human photographs of incarcerated mothers with their newborns. <http://protectivecustody.org>. Cheryl lives in Gig Harbor, Seattle, Washington State and kindly shared her home with me and my husband while I was in this area. Cheryl has also assisted with

editing on the Washington Corrections Centre for Women and the Early Head Start Centre section in this report.

*Dr Joseph Carlson:* Criminal justice professor, University of Nebraska at Kearney, has conducted a ten year study into mothers and babies in the Nebraskan Corrections Centre for Women at York. This study has strongly supported the notion of the existence of such units within the United States of America women's prison systems. The York programme was modelled on Bedford Hills in New York State. Joe has supported my study and gave me significant guidance during the preparatory phase of my fellowship.

*Sonja M Alley:* Correctional unit supervisor, at the time of my visit, for the residential parenting programme, J Unit, Washington Correctional Center for Women.

*Mary Alley:* Parenting programme co-ordinator for 22 years, Women's Correctional Facility, York, Nebraska. In a recent communication with me, Mary said the following: "Over the years, I have seen the ordeals that children of incarcerated parents go through, particularly when it is their Mom. The kinds of visits we can provide for them goes a long way in their healing process, and a sooner reunification when Mom is released. I have the opportunity to know these kids, and work with their mothers and

families in reuniting, and giving their mothers motivation to do their time, and be the mothers they want to be. It is incredibly rewarding.

“The mothers in our Nursery are given the opportunity to care for their babies, fall in love with their babies, and truly bond. They are in a non-judgemental environment, with other mothers to learn from, as well as staff and all of the outside resources we can provide. I know that many in the public sector feel these mothers don't deserve this opportunity. The truth is, the majority of them will be returning to their children whether we like it or not. I feel proud that we have given them some skills and support to be successful.”

Mary was extremely hospitable and nothing was too much trouble. I really enjoyed visiting this correctional facility.

*Dr Mary W Byrne:* Principal investigator: Maternal and Child Outcomes of a Prison Nursery Program Columbia University. The study was set at the Bedford Hills and Taconic Correctional Facilities from 2000-2008. The overall goal of Mary's research has been to enrich the knowledge base from which prison and community-based parenting programmes can be developed and tested. I was fortunate to meet Mary in New York and benefit from her knowledge and wisdom.

*Marlyn Kopp:* Assistant deputy superintendent of programmes for Bedford Hills Corrections Facility. Marlyn has been with the Department of Corrections and Community Supervision (DOCCS) since March, 2004, and in her current role since September, 2011. She oversees the nursery/parenting services at Bedford Hills. Despite the scepticism regarding the ability to rehabilitate a prisoner, she believes that rehabilitation does occur through programmes such as the nursery/parenting programme.

*Gunnar Browning:* correctional rehabilitation manager at the *Coffee Creek Correctional Facility* Coffee Creek Prison, Portland, Oregon. Gunnar hosted me for three days, organising a variety of meetings with programme staff within the prison. In addition, he collected me from the hotel each morning and delivered me again each night. His hospitality was just outstanding and truly appreciated.

*Joanne Orcherton, Nicki Hansford, Paula Scott and Wendy Picken* Rainsbrook Training Facility and Mother and Baby Unit.

*Julia Hookway:* MBU from April 2009 to September 2011, children and families manager, Bronzefield Prison mother and baby unit.

*Karen Moorcroft:* Manager HMP Styal Prison, mother and baby unit.

*Darleen Reekie:* Cornton Vale mother and baby unit, previously health centre manager.

*Sister Tesa Fitzgerald:* Executive director, Hour Children, New York. A tireless advocate for women offenders and a very hospitable and generous host for my New York visiting schedule.

*Gail Breakey:* Executive director at Hawaii Family Support Institute. Gail hosted me in Hawaii and went to considerable effort to organize meetings with others. Gail has also been a colleague and personal friend for 20 years and has given me considerable advice and support concerning the concept of home visiting during that time. She was integral in both the delivery and research of Hawaii's Healthy Start service which had a major influence on Family Help Trust's services, and eventually the New Zealand Family Start network.

*Linda Rich:* Executive director Salvation Army family treatment services, Oahu Hawaii.

*Tamar Kraft- Stolar-:* Director of women in prison project Corrections Association New York.

*Allesandra Rose* – Previous director of the Children’s Center, Bedford Hills Prison.

*Alexander Villano* – Director of Strategic Initiatives Center, Bedford Hills Prison.

*Sharon Dawn and Alison Green:* Wee Ones Nursery, Indianapolis Women’s Correctional Facility, Indiana.

*Dr Marie-Celeste Condon* - Infant Mental Health Center, Center for Health Care Improvement for Addictions, Mental Illness and Medically Vulnerable Populations, Department of Psychiatry and Behavioural Sciences Washington School of Medicine. Marie took me to an Early Head Start conference in Vancouver, which was a special treat; she presented some of her own fascinating research at this conference on interviews with prison mothers and babies and in particular from the babies’ experience.

*Cath Morrison:* Chief executive, The Lilius Graham Trust, Stirling Scotland.

*Diane Cairns:* Mother and child development worker Cornton Vale Prison.

*Kelly Bowman and Barbara Isenberg:* Bandon, Oregon. Thanks for your wonderful hospitality that gave us some fellowship respite for a few days

and also for all the phone calls you made to various prisons in order to find me contact details.