ANALYSIS OF PRISON NURSERY BENEFITS AND PROGRAM STRATEGIES: ALASKA DEPARTMENT OF CORRECTIONS OPPORTUNITY FOR REDUCTION IN RECIDIVISM AND IMPROVED BONDING BETWEEN INCARCERATED MOTHERS AND THEIR INFANTS

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Second, I would like to thank the nine (5) Superintendents and Wardens of female correctional Centers that cheerfully offered their help and assistance by providing me access to information about prison nurseries already in existence. Their pioneering efforts in this field have set a firm foundation for those who will follow in designing subsequent prison nursery programs.

Third, I would like to thank Dr. Mary Byrne and Barbara Blanchard of Columbia University. Their knowledge about the longest existing prison nursery in the United States, at the Bedford Hills Correctional Facility, was invaluable. Dr. Byrne is one of the preeminent experts on the benefits of prison nurseries. She has published a number of landmark longitudinal studies on the subject, and her willingness to share her passion and expertise was enlightening and extremely helpful.

And finally, I offer my sincere thanks and appreciation to the entire faculty of the Master of Public Administration Department at the University of Alaska Anchorage. Their knowledge, coaching, teaching, and support throughout my journey through this program have been priceless. I offer special thanks and acknowledgment to Professors Protasel, Saylor, and Selkregg for their guidance and direction throughout this Capstone experience.

Above all, I publicly acknowledge my thanks to my Lord and Savior, Jesus Christ, for always blessing me and carrying through every obstacle.
KEY DEFINITIONS

**Adult Attachment Interview (AAI):** a procedure for assessing the state of mind of adults with respect to attachment.

**Attachment Behavior:** a system of goal-directed behaviors designed to maintain proximity to the caregiver.

**Attachment Theory:** mothers who are available and responsive to their infant’s needs establish a sense of security. The infant knows that the caregiver is dependable, which creates a secure base for the child to then explore the world.

**Attachment Organization:** an organized system of behavior in response to specific stimuli

**Dyads:** Mother / Infant pairs

**Recidivism:** a prisoner's subsequent return to incarceration after being released into the community.

**Strange Situation Procedures (SSP):** an assessment tool used to observe an infant’s attachment behavior towards the primary caregiver in response to perceived danger.
EXECUTIVE SUMMARY

It costs $128.93 per day to house a prisoner in the State of Alaska (Pew Center on the States: Alaska (B), 2009). The Department of Corrections budget for fiscal year 2011 was $258,178.4 million dollars (State of Alaska, 2011). The projected Fiscal Year 2010 DOC budget was 3.7 percent of the state budget (5.3% in 2007), which is larger than all other Alaska Justice agencies. It follows that the societal costs of incarcerating prisoners can be reduced through reducing prisoner recidivism.

According to a US Department of Justice special report (Glaze & Maruschak, 2008), an estimated 809,800 prisoners of the 1,518,535 held in the nation’s prisons at midyear 2007 were parents of minor children, or children under age 18. This represents an estimated aggregate of 1,706,600 minor children, accounting for 2.3% of the U.S. resident population under age 18. (Glaze & Maruschak, 2008; Rev 2009).

Most corrections systems do not allow incarcerated mothers to co-reside with their infants in prison. Although, “4% of state and 3 % of federal inmates said they were pregnant at the time of admission (Marushak, 2008). The separation of the infant from the mother during the crucial period between birth and the first 24-months of life has been proven to compound the problems in the child’s development.

Further, these children have been shown to have weakened attachment, bonding and abandonment issues, and the absence of the foundation that is critical for later personality growth leading to healthy adult relationships (Carson, 2009). Moreover, many of the children born to mothers during incarceration are either placed in foster care, or with relatives that need state financial aid to support the additional child. This is an additional societal cost. Moreover, a higher percentage of the children in foster care become eventual wards of correctional systems.

Conclusive empirical evidence supports the importance of secure attachment between the mother and child towards the child’s later success in life. Furthermore, “numerous longitudinal studies have concluded that early attachment patterns can potentially predict social behaviors later in life (Lyons-Ruth & Alpern, 1993). Establishing a secure attachment contributes to the crucial emotional, social, and intellectual development of the child (Black, 1992).

Nationally, prison nurseries have reported impressive outcomes in the reduction of recidivism within the population of women participating in their programs.

<table>
<thead>
<tr>
<th>Recidivism Data</th>
<th>Illinois</th>
<th>Indiana</th>
<th>Ohio</th>
<th>Nebraska</th>
<th>New York</th>
<th>Washington</th>
<th>West Virginia</th>
</tr>
</thead>
<tbody>
<tr>
<td>General Population</td>
<td>51%</td>
<td>34%</td>
<td>30%</td>
<td>21%</td>
<td>26%</td>
<td>40%</td>
<td>24%</td>
</tr>
<tr>
<td>Nursery Program</td>
<td>0.00%</td>
<td>11.00%</td>
<td>17.00%</td>
<td>10.00%</td>
<td>13.00%</td>
<td>11.00%</td>
<td>0.00%</td>
</tr>
<tr>
<td>Percent Change</td>
<td>-100.00%</td>
<td>-67.65%</td>
<td>-43.33%</td>
<td>-52.38%</td>
<td>-50.00%</td>
<td>-72.50%</td>
<td>-100.00%</td>
</tr>
</tbody>
</table>

TABLE 1: RESPONSES TO RECIDIVISM INQUIRY ON PRIMARY DATA QUESTIONNAIRES (APPENDIX C);

* ILLINOIS DATA FROM STATE WEBPAGE
HTTP://WWW.IDOC.STATE.IL.US/SUBSECTIONS/NEWS/DEFAULT.SHTML#20100409
RECOMMENDATION:

1. Create legislation that develops a co-residing nursery program to address the critical issues of attachment and child development for women and the infants they deliver during incarceration.

2. Explore and pursue grants, community partnerships, and available services such as WIC and Medicaid to assist in supporting costs for the program.

3. Locate the initial co-residing prison nursery program in the DOC facility with the largest population of female prisoners.
PROBLEM STATEMENT

The cost of incarcerating prisoners is a major burden on the nation and on the State of Alaska. Valuable resources that could be used to address other pressing problems facing our nation and our state are used on the prison system. Some of these costs could be generated through the subsequent incarceration of the children of incarcerated parents. Thus, intergenerational incarceration is a contributing factor to the overall cost of incarceration.

A 2007 survey by the Bureau of Justice Statistics provided the following statistics on female prisoners: “4% of state and 3% of federal inmates said they were pregnant at the time of admission. Of those in state prisons who said they were pregnant at admission, 94% received an obstetric exam. More than half (54%) received some type of pregnancy care” (Marushak, 2008). Empirical data from multiple studies show that children of incarcerated parents are at a much higher risk to become incarcerated than the ratio found in the general population (Murray & Farrington, Evidence-based programs for children of prisoners, 2006).

Although many of the women will be the primary caregiver for their children upon release from prison, most Corrections agencies do not allow pregnant mothers to co-reside with their infants (Carson, 2009). The separation of the infant from the mother during the crucial period between birth and the first 24-months of life has been proven to compound the problems in the child’s development, such as weakened attachment, bonding and abandonment issues, and the absence of the foundation that is critical for later personality growth leading to healthy adult relationships (Carson, 2009).

Many U.S. correctional facilities prior to the 1970s allowed pregnant prisoners to transfer to community facilities where they delivered and co-resided with their infants (Shepard & Zemans, 1950) cited in (Goshin & Byrne, 2009). A change in public perception in terms of issues relating to
security, safety, liability, and program efficacy resulted in the repeal of many of the laws supporting prison nurseries (Goshin & Byrne, 2009).

One approach to reducing the societal burden of incarceration is the prison nursery. A prison nursery provides a setting for pregnant incarcerated women to keep and care for their newborn, while serving their sentence. Although relatively uncommon in the US, globally, prison nurseries are the rule rather than the exception (Kaufman 2006). Research shows that mothers who are allowed to reside with their infants in a correctional setting are substantially more likely to be rehabilitated, as demonstrated by reduced recidivism (Goshin & Byrne, 2009).

Moreover, infants cared for in prison nurseries show markedly improved attachment (secure) to their mother than would otherwise be expected (Byrne, Goshin, & Joestl, 2010). Many studies show that secure attachment in infancy is the foundation for the successful pro-social development later in life (Goshin & Byrne, 2009). Prison nurseries may then be a correctional innovation that can both reduce recidivism (demonstrated) and lower rates of intergenerational patterns of incarceration.

The state of Alaska Department of Corrections (DOC) does not have a prison nursery program that allows new mothers to co-reside with their infants through the critical stages of early development, which prevents the child from developing secure attachment that is crucial for later success in life. According to Bowlby (1982), “It is well established that the central aspects of human behavior are created in infancy through early primary care giving relationships” (Bowlby, 1982). Interviews with key informants and subject matter experts from prison nursery programs in other states would provide valuable data for this project.

PURPOSE OF THE STUDY

The purpose of this capstone project is to review available research on prison nurseries and (1) their impact on the quality of infant attachment to the mother; and (2) the rate of recidivism of
these mothers. Due to time and resource constraints of the capstone project, my analysis will be limited to an extensive review of relevant available data from prisons that have nursery programs for co-residing mothers and infants. There are currently nine (9) prisons identified in leading research on prison nursery programs by Drs. Goshin and Byrne (Goshin & Byrne, 2009) as well as in a recent study of prison nursery programs identified through a report from the Women’s Prison Association posted on the National Institute of Corrections webpage (United States Department of Justice, 2009).

The policy research questions for this project are:

1. Does a review of national data about prison nurseries indicate a cost savings benefit for Corrections Departments as demonstrated by a reduction in recidivism amongst women participating in prison nursery programs?

2. Does a review of research data on prison nurseries indicate improved outcomes, including improved attachment organization, for women who participate in prison nursery programs?

3. Does a review of research data on prison nurseries indicate improved long-term outcomes and benefits for infants because of the foundation of secure attachment that forms between the mother and infant in co-residing nurseries?

4. Does the profile of the female prisoner population within Alaska DOC support the need for a prison nursery for the approximately 500 female prisoners within Alaska DOC?

My client for this Capstone project is Mark Erickson, MD; Psychiatrist. Dr. Erickson is the Medical and Quality Improvement Director of the Behavioral Science Division at the Southcentral Foundation (SF), located at 4201 Tudor Center Drive Anchorage, AK 99508. Dr. Erickson envisions the audience for this policy paper as Katherine Gottlieb, the President / CEO of the Southcentral Foundation; Governor Sean Parnell, Members of the Legislature, and the State of Alaska Department of Corrections (DOC) Commissioner Joseph Schmidt.

METHODOLOGY
This descriptive research design uses quantitative and qualitative research techniques. The primary investigator will examine peer reviewed articles, published studies, journals, reports, program evaluations, and issue briefs to learn how establishing prison nurseries has impacted the outcomes for the mothers, their infants, and the host DOC agencies. In addition, primary data will be collected by interviewing key informants associated with six (6) of (9) existing prison nursery programs across the nation.

PROCEDURE

Using a non-experimental, descriptive research design, this investigator will conduct a series of telephonic and email interviews with program staff using open and closed ended questions. Due to the short time frames for this project, initiating direct contact with an option for the respondent to fill out an emailed questionnaire or to participate in a telephonic survey may provide the best response rate. I estimate that contacting eight to ten prison nursery programs across the United States. Based on survey literature this investigator would expect a 50% response rate by using a mailed questionnaire (Hager, Wilson, Pollak, & Rooney, 2003).

The primary investigator will perform an extensive literature review of peer reviewed documents and research on prison nursery programs along with extant data contained in administrative documents, state websites, and available program documents from prison nursery programs.

The primary investigator will compare the published data from the nursery programs in relations to recidivism and outcomes for the mother and child to answer specific questions about the impact of the program on the participants lives post re-entry into the community.

HISTORY AND BACKGROUND

*The Children of Incarcerated Parents are at Serious Risk of Intergenerational Incarceration*
According to a US Department of Justice special report (Glaze & Maruschak, 2008), an estimated 809,800 prisoners of the 1,518,535 held in the nation's prisons at midyear 2007 were parents of minor children, or children under age 18. This group is comprised of 52% of state inmates and 63% of federal inmates. It represents an estimated aggregate of 1,706,600 minor children, accounting for 2.3% of the U.S. resident population under age 18. (Glaze & Maruschak, 2008; Rev 2009). The children of incarcerated parents are at serious risk to become statistics of intergenerational incarceration and in turn add to the cycle of incarceration, release, and re-incarceration, thereby adding to the growing prisoner population.

**Prison Nurseries Increase Mothers Chance for Post Release Success**

Establishing prison nurseries in DOC is one method of intervening in the lives of incarcerated mothers and their infants during a crucial stage of child development. Currently, a small number of correctional jurisdictions (approximately nine 9) have prison nursery programs. Current research on Attachment establishes the importance of establishing Secure Attachment between the infant and mother during the early years beginning at birth (Bowlby, 1982). The structured environment of a prison nursery provides an opportunity for secure attachment to form, while the mother is being supported through education and training programs designed to provide her better parenting skills, that will increase her chances of success post release (Carson, 2009) and (Goshin & Byrne, 2009). Further:

Improving rates of secure attachment in infants with incarcerated mothers has the great potential to promote healthy development in the child’s life and prevent the negative sequelae linked to maternal incarceration, thereby decreasing the systemic burden of providing services to this population (Goshin & Byrne, 2009).

**A Beneficial, Rehabilitative Effect on the Mother**

Recent research shows that mothers who are allowed to keep their newborn in a prison nursery do far better in caring for their newborn than would be predicted based on their attachment organization assessed before the birth of the child. This finding suggests that simply
allowing a mother to keep and care for her infant in a safe, secure place has a beneficial, rehabilitative effect on the mother. Reduced recidivism of mothers in prison nurseries is evidence of this rehabilitative influence (Carson, 2009).

**Reduced Intergenerational Patterns of Incarceration**

In addition the quality of the bond the infant forms with the mother (secure) is also much improved from what would be predicted by psychological assessment given before the birth of the child. The quality of an infant’s attachment to mother is associated with pro-social development later in life. It is then likely that prison nurseries reduce intergenerational patterns of incarceration although this has yet to be demonstrated. As noted by Sroufe et al. (2005), “Secure attachment establishes a foundation for positive child development and may confer long-term resilience to this vulnerable population of children” (Sroufe L. A., Egeland, Carlson, & Collins, 2005).

Reduced domestic violence is one such possibility. Neglect and abuse in childhood are potent risk factors for domestic violence in adulthood, either perpetration or victimization (Anda, Bremner, Walker, Whitfield, & Perry, 2006). As the data stands it is reasonable to assert that prison nurseries prevent neglect and abuse by substantially improving maternal-infant bonding and care of the child. It follows that a long-term effect of prison nurseries may be to reduce the risk of domestic violence, later in life, among children born in prison nurseries. Moreover, “parental incarceration is strongly associated with adolescent delinquency, adult criminality, and mental health disorders” (Farrington, Jolliffe, Stouthamer-Loeber, & Kalb, 2001).

According to Carson (2000), the absence of the opportunity for secure attachment to form leads to the potentially damaging effect of the mother rejecting the child. This rejection has the potential impact of causing the child to grow up “feeling abandoned by mothers who do not want them, thus causing another set of problems for the individual, the community, and potentially for the criminal justice system” (Carson, 2001). In short, effects of increased secure attachment organization between mother and child may lead to a reduction in intergenerational incarceration
among the children born to mothers in prison nurseries; a reduction in domestic abuse among this population and generally improved long-term outcome success rates for later life adjustment.

**Benefits to the Newborn Include Reduced Lifetime Risks**

There are numerous other likely benefits to the newborn including reduced lifetime risk of alcohol and drug dependence, dramatically reduced suicide risk and general health benefits including a reduced risk of cardiovascular disease and even cancer (Felliti, Anda, Nordenberg, Williamson, & Spitz, 1998), (Anda, Bremner, Walker, Whitfield, & Perry, 2006).

It has been shown that behaviors such as “smoking, alcohol or drug abuse, overeating, or sexual behaviors may be used as coping mechanisms by people who have been exposed to stress abuse, domestic violence, or other forms of adverse childhood family and household dysfunction” (Felliti, Anda, Nordenberg, Williamson, & Spitz, 1998). Felliti et al., goes on to say, “High levels of exposure to adverse childhood experiences would expectedly produce anxiety, anger, and depression in children” (Felliti, Anda, Nordenberg, Williamson, & Spitz, 1998).

**LITERATURE REVIEW**

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**NATIONAL COSTS OF INCARCERATION**

According to Senator Jim Webb (D. Va.), Taxpayers in the United States spend approximately $68 billion a year to finance local, state, and federal spending on corrections. We have 2.3 million people in state and federal prisons in the United States. We have the world’s highest incarceration rate. With 5% of the world’s population, our country now houses nearly 25% of the world’s reported prisoners (Webb, 2009).

**One in Every 31 Adults in the United States is in Prison**

In addition, more than 5 million people who recently left jail remain under “correctional supervision,” which includes parole, probation, and other community sanctions. About one in
every 31 adults in the United States is in prison, in jail, or on supervised release (Pew Center on the States (A), March 2009). This segment of the population contributes to the high costs of prisoner recidivism; in Alaska, 66 percent return to custody (Brandenburg, 2009).

**In Alaska it Costs $128.93 per Day to House a Prisoner**

It costs $128.93 per day to house a prisoner in the State of Alaska (Pew Center on the States: Alaska (B), 2009). The Department of Corrections budget for fiscal year 2011 was $258,178.4 million dollars (State of Alaska, 2011). As shown in Table 1 below, the projected Fiscal Year 2010 DOC budget was 3.7 percent of the state budget (5.3% in 2007), which is larger than all other Alaska Justice agencies. It follows that the societal costs of incarcerating prisoners can be reduced through reducing prisoner recidivism.

**Justice System Agencies account for 9 percent of Alaska's total State Agency Spending**

Expenditures for the major justice system agencies—the Departments of Corrections, Public Safety, Law, the Alaska Court System, Public Defender Agency, and the Office of Public Advocacy—have comprised about 9 percent of Alaska’s total state agency spending for the past ten years; Fiscal Years 2000-2010 (University of Alaska, Spring 2009).
350 to 430 Female Prisoners are housed at the Hiland Mountain Correctional Center

A review of the DOC 2009 Offender Profile provides a snapshot of the Alaska Department of Corrections on December 31, 2009; the most recently published data. In December 2009, Alaska’s prisons held approximately 4490 prisoners in twelve (12) correctional facilities across the state. This population included 471 incarcerated women; of those, 182 were classified as Alaska Native women. At any given time, approximately 350 to 430 of the total Alaska DOC female prisoner population are housed at the Hiland Mountain Correctional Center in Eagle River, Alaska (Department of Corrections Administrative Services, 2009).
DOC Probation and Parole Officers Supervised Approximately 1200 Women Offenders

In addition, Probation and Parole Officers supervised an additional 5813 offenders in 13 Alaskan communities across the state; from Barrow to Sitka (Department of Corrections Administrative Services, 2009). Of these, 1195 were women offenders, and of that group, 297 were Alaska Native women (Department of Corrections Administrative Services, 2009).

In Alaska 66% Offenders of Return to Jails or Prisons

Alaska suffers a high level of prisoner recidivism. According to Bryan Brandenburg, Deputy Director Alaska DOC, “95% of Alaska’s sentenced offenders return to our communities and 66% return to our jails and prisons, this administration concluded it was time to consider a different DOC approach.” The Department of Corrections has embarked on a course to reduce prisoner recidivism through evidence based programs that address recidivism. Currently offered programs include: education, substance abuse, criminal thinking/behavior and re-entry (Brandenburg, 2009). Current research supports the efficacy of prison nursery programs in reducing recidivism among participants (Carson, 2009).
Greater representation of women from poor backgrounds

The demographic pattern for the female prison population across the nation includes a greater representation of women from poor backgrounds. Many of these women have social histories that include drug use, mental psychopathologies, and victimization (Chesney-Lind & Pasko, 2004; Glaze & Maruschak, 2008; McClellan, Farabee, & Couch, 1997; Siegle & Williams, 2003) cited in (Goshin & Byrne, 2009). These characteristics are generally indicative of long periods of social instability prior to incarceration (Parke & Clarke-Stewart, 2002).

It is noteworthy that the women in prison nurseries have similar social/criminal histories as the women within the general prison population (Women's Prison Association, 2009). Further, screening guidelines for most prison nurseries exclude women with some of these common traits. They are often seen as poor candidates for care-giving in a prison. Concerns for risk to children and accompanying liability issues frame these decisions (Marshall, 2011 unpublished).

Surveyed incarcerated mothers cited the agony of being separated from their children

Empirical data from numerous studies found that family connections and familial support are important to the successful reintegration of offenders back into the community, and it helps in the reduction of recidivism. (Adams & Fischer, 1976); (Glaser, 1969); (Hairston, 1998); (Holt & Miller, 1972); (Klein, Bartholomew, & Hibbert, 2002); (Ohlin, 1954). A study conducted by Pennix, (2000) revealed that each of the 100 incarcerated mothers who were interviewed “cited the agony of being separated from her children and the resulting emotional turmoil, including shame, depression, anger, sorrow, and rejection, along with an overwhelming fear that children would never understand the separation” (Byrne M., 2010).
Children of incarcerated parents are at significant risk to follow their parent into the prison system.

According to Stanton (1980), “children of the incarcerated also demonstrate below-average academic performance, even when compared to children of mothers on probation (70 percent compared to 17 percent), and are more likely than similarly disadvantaged children to fail or drop out of school” (Stanton, 1980); (Trice & Brewster, 2004). According to La Vigne, “Some may develop delinquent habits that turn into criminal behavior in later life. Others may internalize their feelings and risk later depression, anxiety, and substance abuse.” (La Vigne, Naser, Brooks, & Castro, 2005)

According to (Johnston, 1995), children of incarcerated parents are subject to, “higher rates of troubling behaviors, including aggression, depression, anxiety, parentified behaviors, substance abuse, survivor guilt, and an increased risk of a child’s own involvement with the criminal justice system.” Empirical data from multiple studies show that children of incarcerated parents are at a much higher risk to become incarcerated than the ratio found in the general population (Murray & Farrington, Evidence-based programs for children of prisoners, 2006). Moreover, “Neurochemical systems that regulate social behavior have been shown to be strongly affected by parental nurturing in infancy and in the absence of quality maternal care can be abnormally developed and stimulate reward pathways associated later in life with violence and addiction” (Pedersen, 2006) cited in (Byrne, Goshin, & Joestl, 2010).

Children of incarcerated parents typically experience long-term emotional & behavioral challenges

In describing some of the outcomes for children of incarcerated parents, La Vigne (2005) said, “Children typically display short-term coping responses to deal with their loss, which can develop into long-term emotional and behavioral challenges, such as depression, problems with school, delinquency, and drug use.” La Vigne (2005) went on to say, “In addition to lowering the likelihood of recidivism among incarcerated parents, there is evidence that maintaining contact
with one’s incarcerated parent improves a child’s emotional response to the incarceration and supports parent-child attachment” (La Vigne, Naser, Brooks, & Castro, 2005).

**Foster Care is an additional societal cost for children of incarcerated parents**

Society pays an additional cost for the care of children of incarcerated parents that enter the Foster Care system. According to Carson (2001), “In many of these cases additional welfare costs are incurred by the state to help support these children in the foster care system.” Further, “Nationally, total costs for foster care, including staff salaries and all other extras, are estimated at $17,500 per year” (Fletcher, 1996) cited in (Carson, 2001). The Daily costs for foster care in some of the larger cities in Alaska are listed in the chart below:

<table>
<thead>
<tr>
<th>VILLAGE NAME</th>
<th>00 MO-29 MO</th>
<th>30 MO-11 YR</th>
<th>12 YR-19 YR</th>
<th>1ST 10 DAY</th>
<th>Emergency Shelter</th>
</tr>
</thead>
<tbody>
<tr>
<td>Anchorage</td>
<td>$27.67</td>
<td>$24.59</td>
<td>$29.20</td>
<td>$36.89</td>
<td></td>
</tr>
<tr>
<td>Eagle River</td>
<td>$27.67</td>
<td>$24.59</td>
<td>$29.20</td>
<td>$36.89</td>
<td></td>
</tr>
<tr>
<td>Bethel</td>
<td>$38.18</td>
<td>$33.93</td>
<td>$40.29</td>
<td>$50.90</td>
<td></td>
</tr>
<tr>
<td>Fairbanks</td>
<td>$28.77</td>
<td>$25.57</td>
<td>$30.36</td>
<td>$38.36</td>
<td></td>
</tr>
<tr>
<td>Juneau</td>
<td>$27.67</td>
<td>$24.59</td>
<td>$29.20</td>
<td>$36.89</td>
<td></td>
</tr>
</tbody>
</table>

Table 3: Retrieved from Alaska Department of Health and Social Services, Office of Children’s Services [http://www.hss.state.ak.us/ocs/Publications/pdf/fcrates.pdf](http://www.hss.state.ak.us/ocs/Publications/pdf/fcrates.pdf)

Children graduating from the foster care system are at significant risk to have living situations where someone in their household receives public assistance (Williams, Pope, Sirles, & Lally, 2005). Further, in a 2005 study of 140 adults who graduated from the Alaska foster care system, 78% of the sample group had lived in this situation within the past 6-months (Williams, Pope, Sirles, & Lally, 2005).
The table below lists the percentage of the sample group using the various social welfare systems in Alaska:

<table>
<thead>
<tr>
<th>Service</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Any Program</td>
<td>77.3%</td>
</tr>
<tr>
<td>Medicaid/Medicare</td>
<td>55.6%</td>
</tr>
<tr>
<td>Food stamps</td>
<td>31.8%</td>
</tr>
<tr>
<td>TANF</td>
<td>26.6%</td>
</tr>
<tr>
<td>WIC</td>
<td>27.3%</td>
</tr>
<tr>
<td>Supplemental Social Security</td>
<td>26.6%</td>
</tr>
<tr>
<td>Foster care or adoption subsidy</td>
<td>4.6%</td>
</tr>
<tr>
<td>Unemployment</td>
<td>10.6%</td>
</tr>
<tr>
<td>Public housing</td>
<td>9.4%</td>
</tr>
<tr>
<td>Energy program</td>
<td>7.6%</td>
</tr>
<tr>
<td>Child care subsidy</td>
<td>4.6%</td>
</tr>
<tr>
<td>Student financial aid</td>
<td>7.7%</td>
</tr>
<tr>
<td>Other aid</td>
<td>15.6%</td>
</tr>
</tbody>
</table>

TABLE 4: 2005 HOUSEHOLD PUBLIC ASSISTANCE OR AID PROGRAM USE, PAST 6 MONTHS RETRIEVED FROM ALASKA FOSTER CARE ALUMNI STUDY. FROM: HTTP://WWW.UAA.ALASKA.EDU/SWEP/UPLOAD/AK_FOSTER_CARE_ALUMNI_STUDY.PDF

Moreover, the same study revealed that “Nearly 30% of alumni were incarcerated for some period of time after leaving care. Nearly 21% of interviewed alumni reported being placed in juvenile corrections while in care, but only 64% of these were jailed again after leaving care” (Williams, Pope, Sirles, & Lally, 2005). This appears to be a potential nexus between the incarcerated mother, the child in foster care, and intergenerational incarceration.

One approach to reducing the societal burden of incarceration is the prison nursery.

A prison nursery provides a setting for pregnant incarcerated women to keep and care for their newborn while serving their sentence. Although relatively uncommon in the US, globally, prison nurseries are the rule rather than the exception (Kaufman 2006) cited in (Goshin & Byrne, 2009). Research shows that mothers who are allowed to reside with their infants in a correctional setting are substantially more likely to be rehabilitated, as demonstrated by reduced recidivism (Goshin & Byrne, 2009).
Prison nurseries currently exist in 8 states across the United States; Illinois, Indiana, Nebraska, New York (2 nurseries), Ohio, South Dakota, Washington and West Virginia have prison nursery programs. Prison Nurseries provide an opportunity for incarcerated mothers and their infants to co-reside within the confines of a prison form birth up to 36-months in some cases (Goshin & Byrne, 2009). Further, (Goshin & Byrne, 2009), “Establishment of a prison nursery is predicated on the fact that children benefit from sustained contact with their mothers throughout their early months of life” (Goshin & Byrne, 2009).

Nurseries provide infants with a foundation for successful pro-social development

Moreover, infants cared for in prison nurseries show markedly improved attachment (secure) to their mother than would otherwise be expected (Byrne, Goshin, & Joestl, 2010). Many studies show that secure attachment in infancy is the foundation for the successful pro-social development later in life (Goshin & Byrne, 2009). Prison nurseries may then be a correctional innovation that can both reduce recidivism (demonstrated) and lower rates of intergenerational patterns of incarceration.

Early intervention benefits the mother and the child.

Establishing a prison nursery provides an opportunity for early intervention in the lives of mother and child. Moreover: “Such programs allow women and their infants to form a strong bond and enable the inmate mother to develop parenting skills. These programs often offer vocational or educational classes to improve the family’s likelihood of a successful community reintegration” (Parke & Clarke-Stewart, 2002).

According to the New York Department of Correctional Services (1992), “It has long been recognized that inmates who have strong ties with their families during incarceration have a greater chance of positive rehabilitation and run a much lower risk of recidivism,” cited in (American Medical Association, 1997).
ATTACHMENT

“No area in developmental psychology has a richer legacy of truly long-term longitudinal studies than attachment research in the Bowlby-Ainsworth tradition (Grossman, Grossman, & Waters, 2005). Grossman et al (2005) goes on to say “The major longitudinal studies of attachment and its role in individual development are masterpieces of methodological, problem solving, and monuments to developmental analysis” (Grossman, Grossman, & Waters, 2005).

Forming a secure attachment with the mother is important to the child’s later success in life

Conclusive empirical evidence supports the importance of secure attachment between the mother and child towards the child’s later success in life. Furthermore, “numerous longitudinal studies have concluded that early attachment patterns can potentially predict social behaviors later in life (Lyons-Ruth & Alpern, 1993). Establishing a secure attachment contributes to the crucial emotional, social, and intellectual development of the child (Black, 1992).

The results of current research, by (Byrne, Goshin, & Joestl, 2010), has provided robust data on the level of attachment experienced by infants who are allowed to co-reside with their mothers in prison nurseries. In a group of 30 infants who co-resided with their mothers for a year or more were classified as securely attached. Of the infants who co-resided for less than a year, 43% were classified as securely attached (Byrne, Goshin, & Joestl, 2010). (Byrne et al, 2010) goes on to say:

The year-long co-residing group had significantly more secure and fewer disorganized infants than predicted by their mothers’ attachment status as measured by their Adult Attachment Interview (AAI)” (Byrne, Goshin, & Joestl, 2010)

ATTACHMENT RESEARCH

One of the primary findings of attachment research “suggests that a child's psychosocial outcomes are associated with the mother's internal attachment classifications (e.g., van IJzendoorn, 1995) cited in (Borelli, Goshin, Joestl, Clark, & Byrne, 2010). Further, Bowlby posited that a mother could improve her parenting skills by being helped to recognize and understand the feelings she
had as a child, thus developing an acceptance of the feelings expressed by her child (Bowlby, 1940) cited in (Bretherton, 1992).

Infants are attached to caregivers through a system of goal-directed behaviors designed to maintain proximity to the caregiver. Caregivers should be interactively present in an ongoing way and respond to the child’s attachment cues (Sroufe L. A., Egeland, Carlson, & Collins, 2005). Sroufe et al., (2005) said:

Many behaviors can serve the attachment system, and no behavior is exclusively an attachment behavior. If one behavior fails in the aim of achieving proximity (the infant calls but the caregiver does not come), another may be used (the infant raises its arms)” (Sroufe, Egeland, Carlson, & Collins, 2005).

As the infant develops it will use other attachment behaviors, e.g., crawling towards the mother instead of crying. If these behaviors are responded to by the mother, children tend to cry less by the end of the first year, and they are able to use more flexible signals as they gain the ability (Sroufe, Egeland, Carlson, & Collins, 2005).

**Developing into a self-reliant child is greatly impacted by the level of attachment**

The study showed that developing into a self-reliant child is greatly impacted by the level of attachment experienced as an infant. Infants who are securely attached to their primary caregivers generally grew up as self-reliant preschoolers. “This is because, in having their security needs met through responsive care, they acquired a sense of themselves as effective and capable” (Sroufe L. A., Egeland, Carlson, & Collins, 2005). Moreover, infants who lacked that secure attachment had dependency problems later in life. “In infancy and throughout later life it balances exploration, learning, knowledge, and skill that result in security based on self-reliance with intimacies in which one can rely on one’s partners to provide security” (Ainsworth M. D., 2010).
STRANGE SITUATION PROCEDURE

Assessing the individual organization attachment between the mother and infant

There are Patterns of attachment that can be observed around the first birthday of the child. The Strange Situation Procedure (SSP) is a measurement tool, which is used to assess the individual organization attachment behavior of an infant towards its mother. This test is designed to be given at 12-months of age (Ainsworth, Blehar, Waters, & Wall, 1978). The SSP has been tested and the results validated in assessments of thousands of children across many countries (Solomon & George, 2008) Cited in (Byrne, Goshin, & Joestl, 2010).

The three classifications developed by Ainsworth (1978) are listed below, along with a 4th that was introduced by Mary Main, Judith Solomon, and Erik Hesse in 1990:

1) Secure: They are active in play and also in seeking contact when distressed after a brief separation, they are readily comforted and soon return to absorbed play (Sroufe L. A., Egeland, Carlson, & Collins, 2005).
2) Anxious/Avoidant: Avoids mother during reunion, especially after the second brief absence. Many are friendlier to strangers than their own mother (Ainsworth, Blehar, Waters, & Wall, 1978). They are not able to confidently explore their surroundings.
3) Anxious/Resistant: Upon reunion, the infant oscillates between seeking proximity and contact and resisting contact when it’s offered by the mother. They are not able to confidently explore their surroundings.
4) Disorganized/Disoriented: Caregiver is chronically unavailable, and the infant is unable to organize his behavior around the caregiver, a collapse in organized functioning. Other forms of maltreatment may also be present (Main & Hesse, 1990; Main & Solomon, 1990) cited in (Sroufe L. A., Egeland, Carlson, & Collins, 2005)

MATERNAL AND PARENTING BEHAVIOR

An important component of attachment theory concerns the relationship between the mother’s childhood experiences and the impact those experiences have on the quality of her attachment relationship with her child (Grossmann, Fremmer-Bombik, Rudolph, & Grossmann, 1988) cited in (Fonagy, Steele, & Steele, 1991). “Evidence linking maternal attachment and
parenting behavior abounds” (see De Wolff & van IJzendoorn, 1997, for a meta-analytic review) cited in (Goshin & Byrne, 2009).

As stated previously, the patterns of attachment organization are established during infancy and they form the basic frame of the infant’s view of relationships later in life. “They continue to influence relationships throughout childhood, across the lifespan, and even into the next generation (Bowlby, 1973, 1988) cited in (Fonagy, Steele, & Steele, 1991).

**ADULT ATTACHMENT INTERVIEW**

*Maternal Representations of Attachment*

The Adult Attachment Interview (AAI) is an assessment instrument that has been used to identify three types of attachment representations: 1) Autonomous, 2) Preoccupied, and 3) Dismissing. Moreover, these representations are predictive of the infant-mother relationship (Fonagy, Steele, & Steele, 1991). Fonagy, Steele, & Steele go on to say, “It has been suggested that these classification bear a systematic association to the strange situation classifications of infant patterns of attachment.” According to Goshin & Byrne (2009), “It allows researchers to identify three “organized” patterns of attachment (secure/autonomous, insecure/preoccupied, and insecure/dismissing).”

Autonomous mothers have objectivity and balance in their views about their childhood experiences. They tell an organized, coherent, and believable story. They generally don’t have significant unresolved issues from their childhood. These mothers are able respond to their child’s attachment cues in a manner that promotes secure attachment (Fonagy, Steele, & Steele, 1991).

Preoccupied mothers seem overwhelmed and confused, and they may display anger and be overly involved in their childhood experiences. They are not able to provide consistent responses to their child’s attachment cues. Infants of preoccupied mothers tend to have a anxious/resistant attachment classification (Fonagy, Steele, & Steele, 1991).
Dismissing mothers appear to be cut off from their childhood experiences. They are not connected to their childhood experiences, and often have a history of rejection by their mothers. They may present as insensitive and unresponsive to the attachment cues of their infant (Fonagy, Steele, & Steele, 1991).

**INTERGENERATIONAL CONCORDANCE**

*Maternal representations of attachment are predictive of attachment patterns in infants*

Fonagy, Steel, & Steele, (1991) conducted a study of 100 mother child dyads to determine if the suspected connection between maternal and infant patterns of attachment existed. The mothers were given the Adult Attachment interview during their prenatal stage and one year after birth. The Dyads were given the Strange Situation Procedure at 12-months of age (Fonagy, Steele, & Steele, 1991).

The study provided empirical data supporting the hypothesis that maternal representations of attachment were predictive of the subsequent attachment patterns of their infants. “Maternal representations of attachment (autonomous vs. dismissing or preoccupied) predicted subsequent infant-mother attachment patterns (secure vs. insecure)” (Fonagy, Steele, & Steele, 1991). Furthermore, the results demonstrated a strong concordance in 75% of the time. Byrne et al., (2010) found that co-residing prison nurseries established empirical data supporting the attachment (secure) benefit to infants:

Using intergenerational data collected with rigorous methods, this study provides the first evidence that mothers in a prison nursery settings can raise infants who are securely attached to them at rates comparable to health community children, even when the mother’s own internal attachment representation has been categorized as insecure” (Byrne, Goshin, & Joestl, 2010).

During a study of Attachment organization of a sample of incarcerated women, Gorshin & Byrne (2009) found that the attachment distributions of the incarcerated sample were very similar to low-socioeconomic mothers (SES). One potential outcome of this correlation is that current interventions applied to the SES group could be easily modified and used to improve the parenting
skills of incarcerated mothers co-residing with their infants in a prison nursery (e.g., Hoffman, Marvin, Cooper, & Powell, 2006) cited in (Goshin & Byrne, 2009).

![Meta-analytic Findings of Attachment Organization Distributions](image)

**FIGURE 2:** **CHART COMPARING THE ATTACHMENT ORGANIZATION DISTRIBUTION OBSERVED DURING THE 2009 STUDY CONDUCTED BY BORELLI ET AL., (2009).**

**LONGITUDINAL STUDIES ON HOW THE SEPARATION FROM MOTHER AFFECTS CHILD**

There was a paucity of evidence relating to the study of infant/child connections to their mothers prior to the early 1940’s (Bowlby, 1982). In his foundational book on attachment, Bowlby (1982) lists some of the early studies on how the separation from their mother affects children. Bowlby conducted a review of the research related to the separation of children from their mothers, published prior to the publication of his own work in 1958.

Prior to World War II, Bowlby studied 44 cases of maladjusted children at the London Child Guidance Clinic. Many of these children demonstrated symptoms of not showing affection and a propensity for theft. “Bowlby was able to link their symptoms to histories of maternal deprivation and separation” (Bretherton, 1992) (Bowlby, 1982).
Numerous longitudinal studies support the importance of attachment in child development

René Spitz and Katherine Wolf conducted a study in 1946 of one-hundred (100) infants who were cared for in a prison while their mothers were incarcerated. Dorothy Burlingham and Anna Freud conducted a study during World War II, between 1942 and 1944 that involved children ranging in ages from birth to 4-years-old. James Robertson conducted a study between 1948 to 1952 observing children between 18-months and 4-years of age. Two additional studies were conducted at the Tavistock Child Development Research Unit in England. Additional information on these studies is contained in appendix E.

Bowlby (1982) lists numerous additional studies of children removed from their home that were conducted in different countries, including: the United States, England, Poland, Scotland, and Czechoslovakia before the publication of his seminal work on Attachment Theory (Bowlby, 1982). According to Bowlby (1982), the studies mentioned above contained different subject; e.g. “they differ in age, in the type of home they come from, in the type of institution ot which they go and the care they receive there, the length of time they were away, and whether they are healthy or sick” (Bowlby, 1982).

In one of the earliest discourses on attachment theory, Bowlby posited that infants exhibit clear signs of attachment behavior at 12-months of age. He describes the following behaviors as instinctual actions that help to bind the infant to the mother; “suckling, clinging, following, smiling, and crying” (Bretherton, 1992).

UGANDA PROJECT

Between 1953 and 1955, Mary Ainsworth conducted an observational study of 26 families in Uganda. The infants ranged from 1 to 24 months of age. Ainsworth focused on the advent of proximity promoting signals and behaviors towards the mother. These observations were made every 2 weeks, over periods up to 9 months (Bretherton, 1992). Three (3) patterns of infant attachment were observed:
1. Securely attached infants cried little and seemed content to explore in the presence of the mother.
2. Insecurely attached infants cried frequently, even when held by their mothers, and explored little.

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**BALTIMORE PROJECT**

According to Bretherton (1992), in 1963 Mary Ainsworth observed 26 families in Baltimore, Maryland. The study followed the babies from birth through 54 weeks of age. These visits occurred within the homes, under natural conditions. Each family provided approximately 72-hours of data. Mother infant behavioral patterns during feeding situations, face-to-face interaction, crying, infant greeting and following, close bodily contact, obedience, attachment exploration balance, approach behavior, and affectionate contact (Ainsworth, Blehar, Waters, & Wall, 1978).

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**THE MINNESOTA STUDY**

John Bowlby's work on attachment was the inspiration for the Minnesota longitudinal study, which covered a 30-year period. The study began in the mid 1970's and included a sample of over 200 first-time mothers classified as living at the poverty level socioeconomically (Sroufe, 2005). The 30-year longitudinal study was predated by a short-term study that followed children from infancy to kindergarten (Sroufe, Egeland, Carlson, & Collins, 2005).

The data from the preliminary study validated the theory that the quality of care by the principal caregivers predicted the later security of the child, as well as self-confidence, curiosity, flexible self-control and positive functioning with peers (Arend, Gove, & Sroufe, 1979; Matas, Arend, & Sroufe, 1978) cited in (Sroufe, Egeland, Carlson, & Collins, 2005).

Sroufe (2005) posited that these subjects were at moderate risk for parenting difficulties because of their impoverished status. Sroufe, (2005) hypothesized that the quality of infant-caregiver attachment relationships are predicated on the historical interaction between the infant
and the caregiver (Sroufe, 2005). Sroufe (2005) went on to say, "Variations in attachment quality were the foundation for later individual differences in personality."

NEW YORK BEDFORD HILLS AND TACONIC CORRECTIONAL CENTERS

Dr. Mary Byrne (2010) conducted a longitudinal study of 97 mothers and 100 infants co-residing in the nursery programs in the Bedford Hills and Taconic Correctional Centers in New York State. The mother and infant dyads received an intervention consisting of “tailored nurse practitioner visits, parenting education, and infant day care (Byrne M., 2010). Each of the mothers was scored on the results of individual Adult Attachment Interviews that were conducted at the time of entry into the nursery. The results showed that two-thirds (2/3) of the women had “internalized insecure attachment representations with their own parent figures at the beginning of the program (Byrne M., 2010).

Each child was observed under the Strange Situation Procedure (SSP) at age one. “Seventy-five percent of the infants were classified as securely attached to their mothers” (Byrne, Goshin, & Joestl, 2010). Further, “only 25 percent of those mothers had been coded autonomous (secure) on the AAI at the time of prison entry” (Byrne, Goshin, & Joestl, 2010). It is highly significant that women who entered the program coded as having insecure attachment representations were subsequently able to raise infants that tested as securely attached under the SSP. Moreover, “For these infants, who will encounter multiple maternal and environmental stress factors, infant secure attachment would be expected to provide measure of resilience over time” (Sroufe, 2005).

The demonstrated results of the longitudinal studies supports the hypothesis that co-residing prison nurseries provides a foundation and structured environment that allows mothers to improve their parenting skills, their attachment organization, and their ability to provide the kind of care and nurturing that results in forming a secure attachment between mother and infant. According to Byrne (2010), the most persuasive outcomes come from programs that address the child’s development, the mother’s mental health, and a structured reentry into society.
Further, “essential program components include parenting support, provision of health resources, integrated substance abuse treatment, and fostering community ties” (Byrne M., 2010).

**REVIEW OF CURRENT PRISON NURSERY PROGRAMS**

This investigator contacted staff at nine (9) facilities, across the nation, that house co-residing prison nurseries. Five (5) agencies responded to my request to complete and return a questionnaire as part of this project. All agencies were contacted telephonically prior to forwarding the questionnaire. Whenever possible, the principal investigator used primary data from these questionnaires when describing the current programs. This investigator also utilized secondary data contained in official State WebPages and extant data from administrative documents. The name of the facilities and their participation status is listed below:

1. Decatur Correctional Center (Illinois Department of Corrections) did not respond.
2. Taconic (New York State) did not respond.
3. South Dakota Women’s Prison (South Dakota) did not respond.

The following facilities completed and returned the questionnaires for this project:

1. Indiana Women’s Prison (Indiana Department of Corrections)
2. Nebraska Correctional Center for Women (Nebraska Department of Corrections)
3. Ohio Reformatory for Women (Ohio Department of Rehabilitation and Correction)
4. Washington Correctional Center for Women (Washington Department of Corrections)
5. Lakin Correctional Center (West Virginia Department of Corrections)

The primary investigator interviewed a former employee of Bedford Hills and Dr. Byrne about the operation and design of the nursery program at that facility. Current employees and administrators did not respond to the survey request.

1. Bedford Hills Correctional Center (New York State, Department of Corrections)

**ILLINOIS DEPARTMENT OF CORRECTIONS**

The Illinois Department of Corrections (IDOC) began a prison nursery program called “Moms and Babies” in 2007. The program can hold up to ten (10) mother/infant dyads for up to 24-months. The program is intended to aid offenders in successfully reentering the community by enhancing and strengthening their family structure. The program is designed to: “Help strengthen
the special bond that is critical to healthy mother and child relationship, while at the same time teaching inmates the tools to be a good parent after they reenter society” (State of Illinois, 2010).

The IDOC Moms and Babies program has demonstrated its efficacy at providing prosocial outcomes such as strengthened families and a reduction in recidivism (Randle, Michael P., IDOC Director, 2010). Further, Director Randle said, “We are pleased with the success of the Moms and Babies program. It is helping reduce the recidivism rate for women in the state of Illinois. Program participants show a zero percent recidivism rate compared to the statewide rate of 51.3 percent” (State of Illinois, 2010).

**INDIANA WOMEN’S PRISON**

The Indiana Women’s Prison (IWP) nursery program, Wee Ones Nursery (WON), began in 2008. The nursery can accommodate ten (10) mother/infant dyads. The maximum length of stay in the program is 18-months.

The program is funded by grants and donations, including $66,000 from the Department of Health, and $25,000 from The Woman’s Fund of Indianapolis. No state funds are budgeted for the program, but three (3) Full Time Equivalent (FTE) Corrections Officer positions and one (1) Case Manager Position are funded by the State of Indiana Department of Corrections (Indiana, 2011). These positions provide services to the general population as well as the nursery program.

IWP has a wide array of programs and classes available to the mothers living in the nursery. Class offerings include prenatal education, lactation/breast feeding education, family therapy, and parenting classes (Indiana, 2011). The mother child dyads reside in private rooms that are located in a general-population unit of the facility. Medical services for the infants are provided by a volunteer Pediatrician, who may be compensated through Medicaid.

The nursery program is designed to use parenting education within a living environment that is conducive to strengthening the attachment (secure) between the mother–child dyads during the crucial months following delivery (State of Indiana, 2011). As of February 2010, thirty (30)
mothers and their infants have participated in the program. The program claims a 67.5% reduction in recidivism, over a 3-year period, for the women who have gone through the program as compared to the rate for women in general population (G.P.) (Indiana, 2011).

NEBRASKA CORRECTIONAL CENTER FOR WOMEN

The Nebraska Correctional Center for Women (NCCW) began offering parenting programs in 1974. The initial program provided parenting classes and allowed women to have overnight visits with their children (State of Nebraska, 2011). In 1994 NCCW started a prison nursery program with a one-time Nebraska Department of Education $25,000 grant. “The York Foundation”, a local non-profit, pays for nursery equipment and some teachers to work with inmate mothers and their toddlers (Nebraska, 2011). The local United Methodist Church and other church groups also make periodic monetary, toy, and clothing donations (Nebraska, 2011). The expenses for infant medical care are covered by Medicaid through the local community clinic (Nebraska, 2011).

Dedicated staffing for the nursery includes 1.9 Full Time Equivalent positions (FTE’s) to provide security on the third shift, at night (Nebraska, 2011). In addition, the nursery has 3.8 (FTE) Case Workers assigned to the provide security and case management services seven days per week. A Parenting Coordinator is assigned part-time to the nursery program and part-time to the other parenting programs in the Nebraska Department of Corrections (Nebraska, 2011). All of these positions are state funded.

The NCCW program was inspired by the seminal prison nursery program at the Bedford Hills Correctional Center in New York State. The nursery is in a standalone unit which was specially constructed in 2004. The nursery will accommodate 15 mothers and 17 infants. Each dyad has a private room, and the maximum length of stay in the nursery is 18-months. “The overall goal of the program is to improve parenting skill and create a positive and nurturing bond between the
baby and mother” (State of Nebraska, 2011). The program claims a 52.38% reduction in recidivism over a 17-year span of the program (Nebraska, 2011).

NEW YORK

The State of New York passed a law: New York Correction - Article 22 - § 611 Births to Inmates of Correctional Institutions and Care of Children of Inmates of Correctional Institutions, which mandates that pregnant prisoners be able to keep their child in with them in prison for a maximum of 18-months (Onecle, 2011). The only crime categories which are excluded from the provisions of Corrections Law 611 are arson and crimes against children. Inmates whose mental health status poses a danger to the child are not allowed into the program. All other issues are negotiable relative the best interest of the child (New York, 2011).

The Bedford Hills Nursery Program is one of the oldest co-residing prison nurseries in the Nation. The nursery is located in a retrofitted hospital unit, and the mother/infant dyads have private rooms and ample community space to socialize with their infants (New York, 2011). The program can take up to twenty-nine (29) mothers and the infants born to them during their incarceration.

The Bedford Hills program is state funded through a contract with Catholic Charities.; there is no waiting list and all appropriate inmate mothers have to be accommodated by statute. Although the counties where the women were convicted are mandated to cover the costs for the infant (they would pay the costs in the community), state dollars covers any shortfall in funding (New York, 2011). The cost of infant medical care is covered by Medicaid, and the infants are also eligible for WIC.

The Nursery Program is supervised by a nursery manager. The unit also has a dedicated day care, which is supervised by a Day Care Manger. Further, “the day care manager is a highly trained child development expert (New York, 2011). As part of the requirements for entry into the program, the mothers must complete an 8-week curriculum consisting of parenting classes, health
classes, literacy class, and orientation and transitional services for reentry into society (New York, 2011).

The manager is available to the mothers and caregivers 8-hours per day. Further, the nursery employs approximately 20 inmate caregivers from the general population. These inmates receive special training and they can earn an Associate Arts Degree in Child Development while working in the program. The day care facility is designed to accommodate toddlers and infants in separate areas. The mothers and the inmate caregiver have access to child development experts during a normal workday.

The program has a contract for a pediatrician, a nurse, and a part-time case manager through Catholic Charities. Security staff monitors the unit from 5:00 pm until 9:00 am. All mental health services and inmate medical care is provided by the Department of Corrections. The mothers are required to participate in DOC required treatment such as GED and substance abuse treatment. Further, they are allowed to hold jobs in general population, while their infants are in daycare. The design of the Bedford Hills nursery program is intended to approximate the experiences of a working mother in the community, where a mother may have to find suitable day care while she works (New York, 2011). The program claims a 10% rate of recidivism for program participants over a 3-year period.

THE OHIO REFORMATORY FOR WOMEN

The Ohio Reformatory for Women (ORW) opened their Achieving Baby Care Success (ABC's) prison nursery in 2001. The program is funded through a Federal Temporary Assistance for Needy Families (TANF) block grant that provides $69,370 per year (Ohio, 2011). Most of the staff assigned to the nursery also provides services to the entire prison population, with the exception of a part-time pediatrician who works 2 to 3 hours per week (Ohio, 2011). Further, the pediatrician is funded through the TANF grant. In addition, the Union County Health Department
collaborates with the Ohio Department of Rehabilitation and Correction (ODRC) to provide classes and provide classes to the mothers.

The nursery can accommodate 22 mothers and 23 infants for up to 18 months. The mothers must have a relatively short sentence for a non-violent crime to qualify for the program. Each offender must participate in an individualized treatment plan that addresses the reasons for her incarceration. Further, hands-on parenting classes are a crucial part of the overall therapeutic milieu for the program (State of Ohio, 2011). The overarching goal of the program is for mother and child to reenter the community with an established secure attachment for the infant and requisite parenting skills for the mother (State of Ohio, 2011).

The Ohio Department of Rehabilitation and Correction recognizes the significance of the scientific support for secure attachment between mothers and their infants. The ABC’s program is intended to alleviate the emotional and intellectual impairment that impacts infants who are denied this critical component of development (State of Ohio, 2011). The program claims a 43.33% reduction in recidivism over a 10 year period (Ohio, 2011).

WASHINGTON

The Washington Correctional Center for Women (WCCW) started the Residential Parenting Program (RPP) in August 1999. The nursery is co-located in a General Population minimum custody unit. The program is designed to accommodate twenty (20) mother/infant dyads for up to thirty (30) months (Washington, 2011). Each dyad has a private room.

The program is entirely funded through a combination of Federal Temporary Assistance for Needy Families (TANF) block grants through the Puget Sound Education Services District—Early Head Start (PSESD-EHS). Social Workers are provided through collaboration with the Washington State, Department of Health and Human Services (DSHS).

DSHS also provides infant medical care through the Mary Bridge Children's Hospital. The hospital provides well baby care, pediatric services, and a nurse hotline (Washington, 2011).
PSESD-EHS provides onsite toddler care and child development services onsite (Washington, 2011). Moreover, participants are also eligible for the Women, Infant, and Children Food Supplement Program (WIC). Tacoma Community College provides educational programs for the mothers. The WCCW provides 24-hour security staffing for the nursery (Washington, 2011).

According to the statistics provided by the RRP, 241 mothers and 240 babies (including 4 sets of twins) have entered the RRP since 1999. 23 offenders were removed from the program for inappropriate behavior, and 235 have been released from custody. Twenty-eight offenders have re-offended and returned to prison with new charges. The program claims a 72.5% reduction in recidivism over a 12-year period for those completing the program in comparison to the general population (Washington, 2011).

**WEST VIRGINIA**

The Lakin Correctional Center (LCC) opened the Keeping Infant Development Successful (KIDS) unit on July 1, 2009. As such, it is the newest co-residing nursery program reviewed in this study. The nursery is housed in a four-bedroom modular unit which is outside, but adjacent to, the secure perimeter. The nursery can accommodate five mother /infant dyads for up to 18-months.

The State of West Virginia passed legislation establishing the creation of the nursery program. The law specifically forbids the use of state funds to support the nursery. Fundraising is cited as one of the major challenges for the program (West Virginia, 2011). The KIDS program is funded through Early Head Start grants, and the program is fully staffed by Early Head Start employees. The dyads are also eligible for WIC support.

The first baby was born into the program on August 12, 2009. Thus far, three (3) mothers have released back to the community and none has returned to custody. The recidivism rate for the general population is 24%.
KEY FINDINGS FROM THE QUESTIONNAIRES

The data provided by the respondents to the questionnaire and interviews with key informants was robust in administrative content:

NURSERY BUDGETS

The oldest nursery program is in New York State. It started in 1901. The program is required by state statute, and must accommodate all eligible pregnant offenders. Program services are contracted through Catholic Charities. The county jurisdiction where the mother’s crime occurred is expected to pay for child care costs, but according to a key informant, the state will pay the costs if the county doesn’t.

The newest program, located in West Virginia, started in 2009. It is also authorized by statute, but their statute prohibits the use of any state funds to run the program. West Virginia’s nursery program is managed by Early Head Start employees.

Most programs use federal TANF grants, which are generally provided to Corrections, through other state agencies, such as Health and Social Services and Early Head Start Education funding to Corrections. Child care costs are funded through Medicaid, WIC, TANF grants, and donated services.

<table>
<thead>
<tr>
<th>Questions</th>
<th>IWP</th>
<th>ORW</th>
<th>NCCWNP</th>
<th>NYDOC</th>
<th>WCCW</th>
<th>LCCC</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Facility Capacity</td>
<td>697</td>
<td>2917</td>
<td>275</td>
<td>NR</td>
<td>764</td>
<td>455</td>
</tr>
<tr>
<td>Facility Budget</td>
<td>$11,500,000.00</td>
<td>$37,683,009.00</td>
<td>$10,300,000.00</td>
<td>NR</td>
<td>$25,000,000.00</td>
<td>$7,954,407.00</td>
</tr>
<tr>
<td>Yearly Nursery Budget</td>
<td>$91,000.00</td>
<td>$69,370.00</td>
<td>$10,250.00</td>
<td>NR</td>
<td>NR</td>
<td>NR</td>
</tr>
<tr>
<td>State Funds</td>
<td>$66,000.00</td>
<td>$0.00</td>
<td>$25,000.00</td>
<td>DOC by Statute</td>
<td>Dept SHS</td>
<td>0 by statute</td>
</tr>
<tr>
<td>Grant Funds</td>
<td>$25,000.00</td>
<td>$69,370.00</td>
<td>$0.00</td>
<td>NR</td>
<td>Early Head Start</td>
<td>Early Head Start</td>
</tr>
<tr>
<td>Donations</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>WIC</td>
<td>No</td>
<td>No</td>
<td>No</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Medicare</td>
<td>No</td>
<td>No</td>
<td>Yes</td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
</tr>
</tbody>
</table>

TABLE 5: PRIARY DATA COLLECTED FROM QUESTIONNAIRES (SEE APPENDIX C)

NURSERY CAPACITY

The smallest nursery is in West Virginia, and it will accommodate 5 mothers. The largest program is in Bedford Hills, and it will accommodate 29 mothers. Most programs allow mother/infant dyads to remain in the program for 18-months, but the average stay is approximately 9 months. All programs make accommodations for the possibility of twins. The programs in Indiana, Ohio, and Washington have designated part of their general population spaces for a prison nursery program. The nursery programs in Nebraska, New York, and West Virginia were created in dedicated, stand-alone spaces.
The security staffing for all of the nurseries is part of the normal security staffing for the facility. The average security component for a nursery is 3 full time equivalent (FTE) positions.

The security staff generally monitors the program at night, and program staff supervises the nursery during the standard dayshift. Nursery Program staff are provided through a combination of volunteer collaborations, contract services, grants, and partnerships through local non-profits, Early Head Start, Universities, and TANF grants.

### Nursery Capacity

<table>
<thead>
<tr>
<th>Questions</th>
<th>IWP</th>
<th>ORW</th>
<th>NCCWNP</th>
<th>NYDOC</th>
<th>WCCW</th>
<th>LCCC</th>
</tr>
</thead>
<tbody>
<tr>
<td>Stand Alone Unit</td>
<td>No</td>
<td>No</td>
<td>Yes</td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
</tr>
<tr>
<td>Maximum Stay (Months)</td>
<td>18</td>
<td>18</td>
<td>18</td>
<td>18</td>
<td>15</td>
<td>18</td>
</tr>
<tr>
<td>Number of Mothers</td>
<td>10</td>
<td>22</td>
<td>15</td>
<td>29</td>
<td>20</td>
<td>5</td>
</tr>
<tr>
<td>Number of Infants</td>
<td>10</td>
<td>23</td>
<td>17</td>
<td>Unlimited</td>
<td>20</td>
<td>5</td>
</tr>
<tr>
<td>Average Stay (Months)</td>
<td>6</td>
<td>8</td>
<td>7.5</td>
<td>7</td>
<td>15</td>
<td>12</td>
</tr>
<tr>
<td>Reason for Early Discharge</td>
<td>Infant Health</td>
<td>Release Date</td>
<td>Rule Infractions</td>
<td>Early Release</td>
<td>Transfer/Beah</td>
<td>Rule infractions</td>
</tr>
</tbody>
</table>

Table 6: Nursery capacity data from survey questionnaires (see appendix c)

### NURSERY STAFFING

<table>
<thead>
<tr>
<th>Questions</th>
<th>IWP</th>
<th>ORW</th>
<th>NCCWNP</th>
<th>NYDOC</th>
<th>WCCW</th>
<th>LCCC</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nursery Security Staff (FTE)</td>
<td>3</td>
<td>3</td>
<td>1.9</td>
<td>3</td>
<td></td>
<td>4</td>
</tr>
<tr>
<td>Pediatrician</td>
<td>Yes</td>
<td>0</td>
<td>0</td>
<td>Yes</td>
<td>Yes</td>
<td>0</td>
</tr>
<tr>
<td>Facility Medical Coverage</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>0</td>
<td>Yes</td>
</tr>
<tr>
<td>Social Worker</td>
<td>No</td>
<td>No</td>
<td>No</td>
<td>Yes</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>Mental Health</td>
<td>No</td>
<td>No</td>
<td>No</td>
<td>No</td>
<td>No</td>
<td>No</td>
</tr>
<tr>
<td>Probation Officer</td>
<td>No</td>
<td>No</td>
<td>No</td>
<td>No</td>
<td>No</td>
<td>No</td>
</tr>
<tr>
<td>Case Manager</td>
<td>2</td>
<td>1</td>
<td>3.8</td>
<td>0.5</td>
<td>2</td>
<td>Yes</td>
</tr>
<tr>
<td>Volunteer Groups</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
<td>Yes</td>
</tr>
</tbody>
</table>

Table 7: Nursery staffing data from survey questionnaires (see appendix c)

**Additional findings from the questionnaire responses**

- 3 of 6 nurseries were in standalone units, separate from general population.
- All nurseries provided single rooms for the dyads.
- 5 of 6 programs provided for the mother’s medical and mental health issues through the institution’s DOC staff.
- 2 programs reported that legislative mandate established their programs (New York and West Virginia).
- All programs provided extensive, required, parenting and child development programs.
- 5 of 6 nurseries are funded through grants and donations to DOC.
Funding sources include TANF grants, Early Head Start, Medicaid, WIC, community volunteers and partnerships (pediatrician).

5 of 6 nurseries required delivery prior to entry.

All programs excluded offenders with crimes against children.

The diversity between the program models contained some consistent requirements for a successful program, e.g. child development and parenting classes and crime appropriate treatment opportunities.

**SUMMARY OF RECIDIVISM FINDINGS**

As stated above, Alaska DOC is seeking ways to reduce recidivism among the prison population because of the spiraling costs to incarcerate prisoners within the corrections system.

One of the most exciting outcomes proclaimed by the administrators in each of the programs surveyed has been a phenomenal reduction in the rate of recidivism among the program participants when compared to the rate found in general population inmates.

<table>
<thead>
<tr>
<th></th>
<th>*Illinois</th>
<th>Indiana</th>
<th>Ohio</th>
<th>Nebraska</th>
<th>New York</th>
<th>Washington</th>
<th>West Virginia</th>
</tr>
</thead>
<tbody>
<tr>
<td>General Population</td>
<td>51%</td>
<td>34%</td>
<td>30%</td>
<td>21%</td>
<td>26%</td>
<td>40%</td>
<td>24%</td>
</tr>
<tr>
<td>Nursery Program</td>
<td>0.00%</td>
<td>11.00%</td>
<td>17.00%</td>
<td>10.00%</td>
<td>13.00%</td>
<td>11.00%</td>
<td>0.00%</td>
</tr>
<tr>
<td>Percent Change</td>
<td>-100.00%</td>
<td>-67.65%</td>
<td>-43.33%</td>
<td>-52.38%</td>
<td>-50.00%</td>
<td>-72.50%</td>
<td>-100.00%</td>
</tr>
<tr>
<td>Time-frame</td>
<td>4 Years</td>
<td>3 YRS</td>
<td>10 Years</td>
<td>17 Years</td>
<td>3 Years</td>
<td>12 Yrs</td>
<td>2 Years</td>
</tr>
</tbody>
</table>

TABLE 8: RECIDIVISM DATA QUESTIONNAIRES TO PRISON ADMINISTRATORS IN THE LISTED STATES (SEE APPENDIX C). *ILLINOIS DATA RETRIEVED FROM STATE WEBSITE: HTTP://WWW.IDOC.STATE.IL.US/SUBSECTIONS/NEWS/DEFAULT.SHTML#20100409

*Reduction in Foster Care costs is an additional savings*

These findings have to be viewed with some caution, because of the possible effects of self-selection bias in the findings. Would a similar comparison group of women in general population exhibit the same recidivistic traits as the women in the nursery program? Moreover, it is essential to factor in the cost of the children raised in the foster care system. These same children are at high risk to follow their mothers in a pattern of intergenerational incarceration. The subsequent costs of incarceration would further increase the burden posed to society by these children as adults. At $128 per day to incarcerate prisoners, a substantial decrease in recidivism for any segment of the prison population is significant.
PROJECTED REMODELING COSTS TO OPEN A NURSERY IN HMCC

The key component of the nursery programs reviewed during this study is a nursery that is separated from general population. In some cases, the nursery has been set up in a stand-alone unit that is totally separate from general population, and in the other programs, the nursery is in a part of general population that has been converted into a separate nursery area. Only Indiana has nursery inmates and general population inmates sharing the same living area.

The Hiland Mountain Correctional Center is the current, long-term, dedicated facility for female offenders. A wing of the facility could be converted into an appropriate nursery space through construction remodeling. The final project would have ten (10) private rooms for mother/infant dyads, and at least one of the rooms would be Americans With Disability (ADA) compliant. The nursery would also be compliant with all local safety, construction, and Fire Marshal building codes. The projected one-time construction costs were provided in a personal conversation with a facilities management expert employed by Alaska DOC. These figures represent a best guess and would require a real Request for Proposal to determine actual costs.

<table>
<thead>
<tr>
<th>Construction Costs to Open a Nursery</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tasks</td>
</tr>
<tr>
<td>Material Hazzard Survey</td>
</tr>
<tr>
<td>Project Design</td>
</tr>
<tr>
<td>Construction Costs</td>
</tr>
<tr>
<td>Total</td>
</tr>
</tbody>
</table>

TABLE 9: CONSTRUCTION COSTS (PERSONAL CONVERSATION APRIL 11, 2011)

PROJECTED STAFFING COSTS TO OPEN A NURSERY IN HMCC

The preferred staffing contingent for a prison nursery program includes a child development expert that can teach parenting classes and be an onsite expert resource for child development issues (New York, 2011). Further, the services of a case manager to coordinate
reentry plans and child placement back in the community provides significant support for successful reentry of the mother and child. The program in Bedford Hills, New York uses inmate aides to help work in the nursery. The ideal staffing component and associated costs, for a nursery at HMCC is listed below:

<table>
<thead>
<tr>
<th>Position</th>
<th># of Employees</th>
<th>Hours per week</th>
<th>FTE</th>
<th>Salary &amp; Benefits</th>
<th>Hourly Rate</th>
<th>Additional Yearly Cost</th>
</tr>
</thead>
<tbody>
<tr>
<td>Corrections Officer</td>
<td>3</td>
<td>252</td>
<td>3</td>
<td>$82,172.04</td>
<td>$22.44</td>
<td>$0.00</td>
</tr>
<tr>
<td>Pediatrician</td>
<td>1</td>
<td>2</td>
<td>0.25</td>
<td>$125,000.00</td>
<td>$100.00</td>
<td>$10,400.00</td>
</tr>
<tr>
<td>Social Worker</td>
<td>1</td>
<td>40</td>
<td>1</td>
<td>$77,010.36</td>
<td>$23.67</td>
<td>$0.00</td>
</tr>
<tr>
<td>Nurse (LPN)</td>
<td>1</td>
<td>4</td>
<td>0.5</td>
<td>$81,551.16</td>
<td>$25.36</td>
<td>$5,274.88</td>
</tr>
<tr>
<td>Nursery Manager</td>
<td>1</td>
<td>40</td>
<td>1</td>
<td>$77,010.36</td>
<td>$23.67</td>
<td>$77,010.36</td>
</tr>
<tr>
<td>Inmate Aide</td>
<td>3</td>
<td>120</td>
<td>3</td>
<td>$2,080.00</td>
<td>$1.00</td>
<td>$6,240.00</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>10</strong></td>
<td><strong>458</strong></td>
<td><strong>8.75</strong></td>
<td><strong>$442,743.92</strong></td>
<td><strong>$195.14</strong></td>
<td><strong>$92,685.24</strong></td>
</tr>
</tbody>
</table>

TABLE 10 HMCC NURSERY STAFFING

**PROJECTED COST SAVINGS OVER TIME FOR ALASKA DOC**

The current cost to incarcerate inmates in Alaska is $129.00 per day. For the current population of five-thousand (5000) prisoners, that equates to $645,000 per day. The average length of participation in nursery programs is 9.25 months or 2775 bed-days. In general population inmates have a 66% rate returning to prison after release (recidivism). The anticipated rate of recidivism in a nursery program is 23%. This equates to a savings of $275,640.75 per year for the bed-days not filled by mothers returning to prison (See Table 11). Additional long-term savings are anticipated due to the demonstrated improved outcomes for the infants nurtured in the prison nursery.
### TABLE 11: ANTICIPATED COST SAVINGS

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong># Beds</strong></td>
<td>10</td>
</tr>
<tr>
<td><strong>DOC Daily Cost Per Bed</strong></td>
<td>$129.00</td>
</tr>
<tr>
<td><strong>Total Nursery Bed-days</strong></td>
<td>3650</td>
</tr>
<tr>
<td><strong>Avg Length of Stay (Bed-days)</strong></td>
<td>2,775</td>
</tr>
<tr>
<td><strong>Nursery Bed-days Saved</strong></td>
<td>2,137</td>
</tr>
<tr>
<td><strong>Yearly Projected Savings</strong></td>
<td>$275,640.75</td>
</tr>
</tbody>
</table>

### SUMMARY AND CONCLUSIONS

- It has been shown that the costs of incarcerating offenders places a burden on society by using limited and precious resources to incarcerate offenders instead of pursuing higher order benefits for society.

- The significant cost of incarcerating prisoners in Alaska is impacted by a high rate of recidivism in its prison population (66%) as well as the impact of intergenerational incarceration of the children of incarcerated parents.

- Additional societal costs are incurred through potentially poor outcomes for the infants in terms of adverse health effects, foster care cost, and the eventual incarceration. This is neither the wisest nor the best use of the state’s resources.

- The extensive literature on attachment supports the hypothesis that allowing infants to develop secure attachment during the first 24-months of life has significant long-term societal benefits for the mothers and the infants (demonstrated).

- Longitudinal studies conducted by Byrne, Carson, and Joestl have demonstrated positive outcomes for mother/infant dyads allowed to co-reside in prison nurseries during the critical formative period when secure attachment is formed.

- The long-term benefits of early secure attachment between mothers and children have been demonstrated in other longitudinal studies, e.g. Ainsworth, Bowlby, Robertson, Spitz, Wolf and Sroufe.

- One of the most significant findings from the data gathered from six (6) of the (9) current co-residing prison nursery programs in the nation has been a marked reduction in recidivism within the participants in the nursery programs; at least a 40% decrease within every program.

- The expected reduction in recidivism is a key finding that supports the establishment of a prison nursery in Alaska DOC, and it has the most immediate impact on the costs of incarceration in Alaska.
Alaska has approximately 500 female prisoners incarcerated within the Alaska Department of Corrections (DOC). At any given time, approximately 400 are held at the Hiland Mountain Correctional Center in Eagle River, Alaska. With the exception of a prison nursery program, DOC has concentrated treatment resources designed to meet the needs of the state’s female offenders held at this facility.

The facility currently places significant emphasis on treatment programs:

- Substance abuse treatment
- Acute and sub-acute mental health programs
- Residential substance abuse treatment programs
- Adult Basic Education and GED classes
- Vocational education
- College courses
- Faith Based therapeutic community

The facility location, physical plant design, large female offender population and units positions to meet many of the treatment needs of the female offenders in Alaska DOC. The addition of a Nursery program with a strong parenting and child development component would place Alaska DOC on Par with the most successful female offender programs in the nation. When considered against the long-term costs of failing to act, the choice is clear.

**RECOMMENDATION**

1. Create legislation that develops a co-residing nursery program to address the critical issues of attachment and child development for women and the infants they deliver during incarceration.

2. Explore and pursue grants, community partnerships, and available services such as WIC and Medicaid to assist in supporting costs for the program.

3. Locate the initial co-residing prison nursery program in the DOC facility with the largest population of female prisoners.
REFERENCES


   Corrective and Social Psychiatry and Journal of Behavior Technology Methods and Therapy, 22 (4), 21-27.


Nebraska, Q. (2011, March 17). Administrator of the Program. (L. Marshall, Interviewer)


Ohio, Q. (2011, March 18). Administrator Ohio Department of Rehabilitation and Reformation. (L. D. Marshall,
Interviewer)


News: http://www.idoc.state.il.us/subsections/news/default.shtml#20100409


PRINCIPAL INVESTIGATOR:
L. Dean Marshall, Superintendent
Hiland Mountain Correctional Center
9101 Hesterberg Road
Eagle River, Alaska 99577
Telephone: (907) 696-9106

DESCRIPTION:
I am interested in the process and steps you took to establish your prison nursery program; and any available data, including outcomes, on participants in the program. I hope to use the information to assist me in determining the appropriateness of a prison nursery at my facility. As an administrator of the program, you are the best person to describe the implementation, evolution, and current status of your program. This research study will involve one or two interviews with you, each lasting approximately 30 minutes. I will use a structured interview questionnaire. You may provide verbal or written responses to the questionnaire.

VOLUNTARY NATURE OF PARTICIPATION:
Your participation in this study is voluntary. If you don't wish to participate, or would like to end your participation in this study, there will be no penalty or loss of benefits to you to which you are otherwise entitled. In other words, you are free to make your own choice about being in this study or not, and may quit at any time without penalty.

CONFIDENTIALITY:
Your name will not be attached to your interview responses. Your name and any other identifiers will be kept in a locked file that is only accessible to me or my research associates. Any information from this study that is published will not identify you by name.

BENEFITS:
There will be no direct benefit to you from participating in this study. The results of this study may benefit the Alaska Department of Corrections by providing current best practices for prison nurseries that can be implemented in Alaska DOC.

RISKS:
Discussion of any negative aspects of your program might be uncomfortable. However, there are no other known risks to you.

CONTACT PEOPLE:
If you have any questions about this research, please contact the Principal Investigator at the phone number listed above. If you have any questions about your rights as a research subject, please contact Dr. Claudia Lampman, Compliance Officer, at (907) 786-1099.

SIGNATURE:
Your signature on this consent form indicates that you fully understand the above study, what is being asked of you in this study, and that you are signing this voluntarily. If you have any questions about this study, please feel free to ask them now or at any time throughout the study.

Signature ___________________________________ Date __________________________

Printed Name __________________________

A copy of this consent form is available for you to keep.
Thank you for your assistance with this survey. Your responses will be helpful in proposing a prison nursery for Alaska DOC.

1. Facility Name:
   - Custody Classifications:
   - Total Bed Capacity:
   - Yearly Operating Budget: $

2. Name of Nursery Program:
   a) Yearly Nursery Operating Budget: $
   b) Other Nursery Funding Streams e.g. grants, donation, and other agencies:
      1. 
      2. 
      3. 
   c) Maximum Time Mother and child can be in the Program:
   d) Maximum capacity of Mothers:
   e) Maximum capacity of infants:
   f) Average Length of Stay in nursery:
   g) Main reasons for leaving the program before completion:

3. Total Nursery Staff: Please list the titles, how they are funded, and whether they are fulltime or part time employees.
   a) Security Staff:
   b) Medical Staff:
   c) Social Workers:
   d) Mental Health Staff:
   e) Probation Officer:
   f) Case Managers:
   g) Others (list):

4. Mandatory Classes and programs required for nursery participants. What position provides the instruction, and how are the classes funded (DOC or Contract)?
   a) 
   b) 
   c) 
   d) 

5. Nursery Design: / Optimum SQFT for each that applies:
   a) Is the nursery in a stand-alone unit or part of general population?
   b) Does each mother co-reside with her infant in a private room or in dorm?
      1. 
      2. 
      3. 
   c) Dedicated Nursery Offices: List purpose and any "special" requirements/equipment:
      1. 
      2. 
      3. 
      4. 
   d) Classrooms attached to nursery (#):
   e) Kitchen attached to Nursery (Y/N):
   f) Laundry attached to Nursery (Y/N):
   g) Does the Nursery have a Dedicated Day Care area (Y/N)/:
   h) Other dedicated Spaces:

6. What are the Offender Eligibility Requirements to enter the program?
   a) Status on Entry (pregnant or post delivery)
   b) Excluded Convictions:
   c) Length of Sentence:
   d) Mental Health Status:
   e) Custody Levels:
   f) Child Services Review:
   g) Other:
7. Recidivism Data: Please list the rate and time-frame. (13% after 3 years)
   a) General Population:
   b) Nursery Program:

8. Lessons Learned and Challenges:

Note: The questionnaire responses are on file with the primary investigator for this project. Questions should be addressed to Lawrence Dean Marshall through the University of Alaska Anchorage Master of Public Administration program.
§ 611. Births to inmates of correctional institutions and care of children of inmates of correctional institutions. 1. If a woman confined in any institution as defined in paragraph c of subdivision four of section two of the correction law or local correctional facility as defined in paragraph (a) of subdivision sixteen of section two of the correction law, be pregnant and about to give birth to a child, the superintendent as defined in subdivision twelve of section two of the correction law or sheriff as defined in paragraph c of subdivision sixteen of section two of the correction law in charge of such institution or facility, a reasonable time before the anticipated birth of such child, shall cause such woman to be removed from such institution or facility and provided with comfortable accommodations, maintenance and medical care elsewhere, under such supervision and safeguards to prevent her escape from custody as the superintendent or sheriff or his or her designee may determine. No restraints of any kind shall be used during transport to or from the hospital, institution or clinic where such woman receives care; provided, however, in extraordinary circumstances, where restraints are necessary to prevent such woman from injuring herself or medical or correctional personnel, such woman may be cuffed by one wrist. In cases where restraints are used, the superintendent or sheriff shall make and maintain written findings as to the reasons for such use. No restraints of any kind shall be used when such woman is in labor, admitted to a hospital, institution or clinic for delivery, or recovering after giving birth. Any such personnel as may be necessary to supervise the woman during transport to and from and during her stay at the hospital, institution or clinic shall be provided to ensure adequate care, custody and control of the woman. The superintendent or sheriff or his or her designee shall cause such woman to be subject to return to such institution or local correctional facility as soon after the birth of her child as the state of her health will permit as determined by the medical professional responsible for the care of such woman. If such woman is confined in a local correctional facility, the expense of such accommodation, maintenance and medical care shall be paid by such woman or her relatives or from any available funds of the local correctional facility and if not available from such sources, shall be a charge upon the county, city or town in which is located the court from which such inmate was committed to such local correctional facility. If such woman is confined in any institution under the control of the department, the expense of such accommodation, maintenance and medical care shall be paid by such woman or her relatives and if not available from such sources, such maintenance and medical care shall be paid by the state. In cases where payment of such accommodations, maintenance and medical care is assumed by the county, city or town from which such inmate was committed the payor shall make payment by issuing payment instrument in favor of the agency or individual that provided such accommodations and services, after certification has been made by the head of the institution to which the inmate was legally confined, that the charges for such accommodations, maintenance and medical care were necessary and are just, and that the institution has no available funds for such purpose.

2. A child so born may be returned with its mother to the correctional institution in which the mother is confined unless the chief medical officer of the correctional institution shall certify that the mother is physically unfit to care for the child, in which case the statement of the said medical officer shall be final. A child may remain in the correctional institution with its mother for such period as seems desirable for the welfare of such child, but not after it is one year of age, provided, however, if the mother is in a state reformatory and is to be paroled shortly after the child becomes one year of age, such child may remain at the state reformatory until its mother is paroled, but in no case after the child is eighteen months old. The officer in charge of such institution may cause a child cared for therein with its mother to be removed from the institution at any time before the child is one year of age. He shall make provision for a child removed from the institution without its mother or a child born to a woman inmate who is not returned to the institution with its mother as hereinafter provided. He may, upon proof being furnished by the father or other relatives of their ability to properly care for and maintain such child, give the child into the care and custody of such father or other relatives, who shall thereafter maintain the same at their own expense. If it shall appear that such father or other relatives are unable to properly care for and maintain such child, such officer shall place the child in the care of the commissioner of public welfare or other officer or board exercising in relation to children the power of a commissioner of public welfare of the county from which such inmate was committed as a charge upon such county. The officer in charge of the correctional institution shall send to such commissioner, officer or board a report of all information available in regard to the mother and the child. Such commissioner of public welfare or other officer or board shall care for or place out such child as provided by law in the case of a child becoming dependent upon the county.

3. If any woman, committed to any such correctional institution the time of such commitment is the mother of a child under one year of age, such child may accompany her to such institution if she is physically fit to have the care of such child, subject to the provisions of subdivision two of this section. If any woman committed to any such institution at the time of such commitment is the mother of and has under her exclusive care a child more than one year of age the justice or magistrate committing such woman shall refer such child to the commissioner of public welfare or other officer or board exercising in relation to children the power of a commissioner of public welfare of the county from which the woman is committed to be cared for as provided by law in the case of a child becoming dependent upon the county.
APPENDIX D

ADDITIONAL RESEARCH

Parole Violators Account for Almost 35 Percent of Admissions to State Prisons

According to one study, “more than 40 percent of probationers and more than half of parolees do not complete their supervision terms successfully.” The study goes on to say, “In fact, parole violators account for almost 35 percent of admissions to state prisons, and nearly half of local jail inmates were on probation or parole when they were arrested.” (Pew Center for the States (C), December 2008)

The majority of women in the correctional system are mothers,

According to Covington (2002), “The majority of women in the correctional system are mothers, and a major consideration for these women is reunification with their children (Covington, 2002). The necessity of safe housing, gainful employment, medical care, treatment programs, and potential probation requirements, while trying to deal with parenting issues and the needs of her children can overwhelm an offender and lead to criminal behavior and recidivism. According to Brown et al., this is an additional level of burden (Brown, Melchior, & Huba, 1995).

Strategies for reducing the harmful effects on children of incarcerated parents

The children of incarcerated mothers must also be considered as part of a unit, if the mother is to successfully return to the home as a primary care giver in a stable family unit. According to Murray & Farrington, (2006) strategies for reducing the harmful effects on children of incarcerated parents improving communication between the mother and child and offering improved opportunities for meaningful contact. The prison nursery would be an ideal location to facilitate two of these activities in the facility:

1. Communication. Give children’s caregivers professional advice about how to provide honest and clear explanations about parental absence to children (Poehlmann, 2005)
2. Contact. Increase children’s opportunities to maintain contact with their imprisoned parent; in particular through more child friendly visiting arrangements in prisons


(Neubauer, 2005); (Council of Europe, 1997); (Trice & Brewster, 2004)) cited in (Murray & Farrington, Evidence-based programs for children of prisoners, 2006).

**Nurseries foster an opportunity for attachment between mother and infant**

A prison nursery provides an environment that will foster an opportunity for the crucial attachment (secure) to develop between the mother and infant. The quality of the attachment formed during this crucial period of an infant’s life has been shown to be an essential component of the child’s future development (Lennon, A, 1992) cited in (American Medical Association, 1997).

“The lack of opportunity for regular and sustained contact between an infant and parent will prevent the development of the infant’s attachment to the parent” (Parke & Clarke-Stewart, 2002).

**The history of Attachment Theory**

The psychoanalytical concept of Attachment grew out of John Bowlby’s initial exploration of Freud’s theme of object relations in 1958 (Bowlby, 1982). During the nascent stages of Bowlby’s investigation, he posited the following: “The hypothesis to be advanced here is different from any of those listed above and is built on the theory of instinctive behaviour already outlined. It postulates that the child’s tie to his mother is a product of the activity of a number of behavioural systems that have proximity to mother as a predictable outcome” (Bowlby, 1982).

Bowlby (1982) went on to say, “Attachment behaviour is regarded as a class of social behaviour of an importance equivalent to that of mating behaviour and parental behaviour.” Bowlby theorized that attachment behavioural systems are developed through the relationship established between the primary caregiver (usually the mother) as the infant interact with, and is impacted by, his/her environment (Bowlby, 1982).

Many of the early observations of Attachment Behavior were observed among animals as well as human subjects. Attachment behaviour in non-human primates is well documented; two primary conditions were observed; 1) Maintaining proximity to another animal and 2) the specificity of the animal (Bowlby, 1982), e.g. the infant maintaining close proximity to the mother.
Bowlby (1982) lists studies of Attachment behavior in rhesus macaques (Hinde, 1991), baboons, chimpanzees, and gorillas (Fossey, 1979) cited in (Bowlby, 1982). In each case, Attachment behaviour was well documented in each subject group.

**Disorganized attachment in infancy is a strong predictor of hostile behavior in preschool**

In contrast, children deprived of secure attachment to a primary caregiver are more likely to experience “deviations in personality development that lead to aggressiveness, coldness in personal relationships, difficulties with learning, and difficulty with parenting as an adult” (Black, 1992). “One study indicated the strongest predictor of excessive hostile behaviors toward peers in preschool was a disorganized attachment relationship during infancy” (Lyons-Ruth & Alpern, 1993).

“Mary Ainsworth’s innovative methodology not only made it possible to test some of Bowlby’s ideas empirically, but also helped expand the theory itself and is responsible for some of the new directions it is now taking.” Bretherton goes on to say, “Ainsworth contributed the concept of the attachment figure as a secure base from which an infant can explore the world. In addition, she formulated the concept of maternal sensitivity to infant signals and its role in the development of infant-mother attachment patterns” (Bretherton, 1992).

**Attachment Research**

Attachment organization is the pattern of attachment behaviors that derive meaning from the context with regard to “other behaviors, with regard to social partners, and with other aspects of context” (Sroufe L. A., Egeland, Carlson, & Collins, 2005). Sroufe et al., (2005) describes attachment organization as an organized system of behavior in response to specific stimuli e.g., organized affective sharing, where a 12-month-old discovers a new toy, expresses joy, and shows it to her primary caregiver.

1. The concept of attachment organization includes the following concepts: Organization is revealed through the interplay of emotion, cognition, and social behavior.
2. Development is defined by changes in organization of behavior over time (Sroufe, 1996).
3. Organization of behavior is essential to defining individual difference. The way that behaviors are organized with other behaviors, combined with context, reveals meaningful differences.

People display a natural range of emotional responses to significant occurrences in their live; e.g., fear, anxiety, and anger. These emotions can occur in the day-to-day maintenance of a relationship. It is a sign of disturbed development when they occur inappropriately; such as failure to grieve a significant loss (Sroufe, Egeland, Carlson, & Collins, 2005). Moreover:

This is usually the result of failures by significant adults to respond appropriately to the young child’s normal needs for closeness to caregivers and fears of separation in threatening situations, or by direct or implicit threats of abandonment made by caregivers (Sroufe, Egeland, Carlson, & Collins, 2005).

The Strange Situation Procedure

The SSP is a test that consists of 3-minute episodes, with the entire procedure lasting a total of 20-minutes (Bowlby, 1982). The 1-year-old is placed in an unfamiliar playroom with a nice supply of toys; first with the mother present. A stranger enters the playroom and plays with the child briefly while the mother leaves briefly before returning. During the second separation the baby is left alone in the playroom, and finally the stranger returns, and finally the mother returns (Bretherton, 1992), (Bowlby, 1982). According to Bowlby (1982), the SSP was indentified through clinical judgment and tested by sophisticated statistical technique before being accepted as valid.

The Adult Attachment Interview

The Adult Attachment Interview (AAI) is a 20-question, semi-structured interview that uses questions and probes to gain a detailed representation of the person’s childhood attachment experiences and their subsequent impact on the subject’s current functioning (Fonagy, Steele, & Steele, 1991), (Byrne, Goshin, & Joestl, 2010). The results of this process provide “classifications of
the mother’s mental representations concerning relationships” (Fonagy, Steele, & Steele, 1991). The Adult Attachment Interview's ability to measure Adult attachment organization has been proven across multiple cultures (Goshin & Byrne, 2009).

**Longitudinal Studies**

Dorothy Burlingham and Anna Freud conducted a study during World War II, between 1942 and 1944 that involved children ranging in ages from birth to 4-years-old, who were kept in a wartime nursery. The conditions during this early study were not scientifically rigorous, but “Much that is recorded is now known to be typical and the vivid accounts presented have become famous” (Bowlby, 1982).

René Spitz and Katherine Wolf conducted a study in 1946 of one-hundred (100) infants who were cared for in a prison while their mothers were incarcerated. These dyads were observed for the first 12-months of the infant’s life. At the 6 to 8 month time frame, the infants were separated from their mothers, but they remained in the same environment under the care of a different primary care provider (Bowlby, 1982).

James Robertson conducted a study between 1948 to 1952 observing children between 18-months and 4-years of age. These children were placed in residential nurseries or had gone to the hospital. Robertson observed many of his subjects before, during, and after their removal from their homes (Bowlby, 1982). Robertson produced papers and a film documenting this study between 1952 and 1954 (Robertson, 1962) cited in (Bowlby, 1982).

Two additional studies were conducted at the Tavistock Child Development Research Unit in England. The first observations were recorded by Christopher Heinicke in 1956 and the second by Ilse Westheimer in 1966 (Bowlby, 1982). They each recorded observations of groups of children between 13 months and 3 years of age. Their research used a quasi experimental research design with experimental and comparison groups. The data was treated statistically and provided detailed accounts of the behavior of the children in the experimental group (Bowlby, 1982).