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# Reconciling the Opportunities and Obstacles of Motherhood Following Corrections Involvement

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Reconciling the Opportunities and Obstacles of Motherhood

Following Corrections Involvement

by

Summer Brooke Newell

A dissertation submitted in partial fulfillment of the  
requirements for the degree of

Doctor of Philosophy  
in  
Sociology

Dissertation Committee:  
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Portland State University  
2018

## Abstract

This mixed methods dissertation is comprised of three papers that consider interrelated ways in which social bonds, within the context of parenting, are experienced by women recently involved with the corrections system. Types of social bonds considered include agency professionals, romantic partners, and children—all previously theorized to play a role during the reentry period. These social bonds are considered within the context of the challenges experienced during this period, and how and why these social bonds may—or may not—support women as they transition back into the community.

*Dedicated to the women who shared their homes and complicated stories with me,  
even when it was difficult to do so.*

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## **INTRODUCTION**

More than 7 million offenders are under some form of correctional supervision in the United States (Glaze and Bonczar, 2007) with approximately 600,000 offenders released from prison and jails into the communities annually (Lipsey and Cullen, 2007). Issues related to community reentry and reintegration have been given significant attention over the last decade (Clear, 2007; Petersilia 2009; Travis 2005; Travis and Vishner 2005). Challenges of reentry are well documented, including securing housing (Metraux and Culhane, 2004), low education levels and securing living wage employment (Holzer, Raphael and Stoll, 2003), substance abuse disorders and mental illness (Hammett, Roberts and Kennedy 2001), reunification with families including children (Glaze and Maruschak, 2008) and stigmatization. Current literature suggests that factors such as age, criminal background, education level, drug use, and education levels are important predictors for outcomes post-incarceration for men and women, measured by recidivism, desistance, and other indicators of successful reentry and reintegration into communities. Given that men have long constituted the majority of the corrections system, most reentry literature has focused on male community reintegration experiences.

With the proportion of women becoming involved in the corrections system rising at a higher rate than males (Glaze and Bonczar 2007), it has become apparent that it is necessary to recognize the role of gender on reentry trajectories

(Brown and Bloom 2009). Since the 1980s, there has been a significant increase in efforts by academics and policy makers to address criminality among women (Bloom 2003; Brown and Bloom 2009). Some criminologists have asserted that theories predicated and tested on male samples should not necessarily be applied to women (Miller and Mullins 2006). Feminist criminologists have asserted that due to the unique predictors of criminality and desistance among women that to “add gender and stir” to established criminological theories is not adequate in addressing challenges that women face (Chesney-Lind 1997). It should be noted that the vast majority of women involved in the corrections system (85 percent) are under community supervision rather than incarcerated. Despite this disproportion, there is far less information concerning women being supervised as compared to women who are incarcerated, which is also scant (Bloom, Owen and Covington, 2002).

This dissertation aims to explore the role of social bonds, defined as relationships that connect an individual to a larger community, particularly with mothers and their relationships with their children. Significantly more women than men are in active parenting roles prior to becoming involved in the corrections system, and it is unclear if being in a parenting role during and/or following corrections involvement is a motivator or stressor (or both) for successful reentry outcomes (Bloom, Owen, and Covington 2002). Most mothers say they want to be a good parent, and therefore children may provide motivation

to desist from certain behaviors. With corrections involved women, the stressors of reentry or community supervision including securing safe housing and employment, may preclude opportunities to form positive bonds with their children.

A common theme in the reentry literature is the concept of social bonds, which have long been theorized as being integral to determining reentry outcomes (Hirschi 1969; Laub and Sampson 2003; Giordano et al. 2002). Social bonds, as mentioned above, are relationships that connect individuals with the social world, including families and peers, their community ties, but also commitments to prosocial endeavors such as employment (Durkheim 1893, Hirschi, 1969, Laub and Sampson 2003). Increased social bonds and better social integration are theorized to be positively associated with better outcomes following corrections involvement (Laub and Sampson 2003). It is important to note that the terms reentry, recidivism and reintegration are interrelated concepts in understanding the time period following corrections involvement. When discussing the reentry period, often the focal outcome measure is recidivism, or whether a person commits crime again. Recidivism is usually measured by self-reported criminal behavior, official records of criminal activity, or a combination of both. Reintegration is conceptualized as when outcome measures during the reentry period expand beyond recidivism to also include factors such as social bonds, employment status, and community engagement. A reintegration perspective

allows for a robust understanding of the reentry experience and may contribute to better understanding the factors associated with recidivism and desistance from crime (Cobbina 2009, Clear 2009). The concept of desistance is also essential to define in this context, and has historically not been uniformly operationalized (Laub & Sampson 2003). For example, desistance is sometimes strictly defined as avoidance of any criminal behavior, although some authors define desistance as any reduction in crime. Further, some authors have recognized that certain types of crimes can be desisted simultaneously with increases in other criminal activity.

There is less clarity in the literature, however, as to whether social bonds and social integration are similar predictors or manifest in similar ways for reentry outcomes for women as compared to men. While it has been evidenced that social bonds such as marriage and employment are integral to successful reentry outcomes for men (Sampson and Laub 1995; Laub and Sampson 2003), there are conflicting findings whether these same factors serve as predictors of the same successful outcomes for women. Some findings suggest that marriage may actually be a predictor of increased criminal involvement for women (Cobbina 2010). Furthermore, research has emerged that suggests that increased social networks and positive social bonds, outside of intimate relationships, may be better predictors of outcomes for women (Arditti and Few 2008). Examples include relationships with prosocial family members and relationships with children. More specifically, research has emerged that childbearing and parenting

may be important catalysts for positive behavior changes among women released from corrections custody, but less so for men (Richie 2001; Giordano et al. 2002; Edin and Kefalas 2005).

This study considers social bonds as a whole for previously incarcerated women, but primarily focuses on the impact of the type and quality of relationships with their children as they face reentry and reintegration challenges. Given the increased rate of incarceration for women, it is necessary to identify whether there are unique predictors of desistance for women, identify what these predictors are, and develop social policies that implement strategies for addressing the unique predictors. Also given that women are much more likely to be in an active parenting role prior to corrections involvement as compared to men (Bloom, Owen and Covington, 2002), relationships with children may play an important role in influencing important outcomes such as recidivism and substance use. Social bonds with children are not as well understood for the corrections-involved population, but likely have strong implications for their life trajectories, particularly for women. Ignoring the potential power children have in steering reentry outcomes for women would lead to retaining inadequate gender-responsive strategies for increasing success rates following corrections involvement. Investigating these relationships more closely may contribute to improved criminological theory that is gender-specific. Given the paucity of research concerning the role of social bonds for reentering women, the

overarching question that I address in this dissertation is “How do relationships with their children affect the trajectories of women following corrections involvement?”

In order to contribute to the understanding of the role children play in the reintegration process, I use both quantitative and qualitative approaches with data from two different, yet related, projects to answer my question. This project aims to illuminate how children may contribute to the successes achieved or contribute to the challenges experienced by corrections involved women living in the community.

## **THEORY**

Early control theorist Hirschi (1969) posited that there is a natural inclination to participate in deviant acts, which therefore requires moving from asking “Why do people deviate?” to asking “Why do people conform?” In this conceptual framework, deviancy is understood as a natural inclination, yet established social controls reduce deviant acts. Hirschi (1969) claims that what predicts conforming behavior are the social bonds that are formed between the individual and society. In his framework, deviant impulses are controlled by the connections one has with conventional social groups. Stronger bonds lead to increased control and delinquency becomes less likely. Hirschi (1969) outlines four specific components of the social bond: attachment, commitment,

involvement and belief. The first, attachment, refers to connection to others, and therefore deviant acts may alienate individuals from whom they are connected. Commitment refers to investments in prosocial endeavors, and the more committed one is to these endeavors, individuals have more rewards to lose if participating in deviant behavior. Involvement refers to the availability of time to conduct deviant acts. If one is more involved with prosocial endeavors, they are less likely to have time to act on their natural inclination for deviancy. Belief is the set of values and meaning that is attached to a set of rules. If certain rules are understood as legitimate, then one has a “moral” obligation to refrain from breaking the rule, but if the rules are viewed as illegitimate, then deviancy is likely to increase. Beliefs are developed through socialization with parents, schools, and other institutions. Hirschi’s (1969) framework describes these four elements as interrelated; an increase in one of the elements predicts an increase in the other three elements.

While Hirschi (1969) emphasized social bonds during adolescence as determinants of juvenile and later life deviancy, Sampson and Laub (1995) build on this theory by suggesting that social bonds are also crucial during adulthood in determining deviant trajectories. In their Theory of Adult Social Bonds, the key to desistance is the age-graded accrual of quality social bonds over the life span. Sampson and Laub define desistance as a reduction or elimination of criminal activity. Similar to Hirschi (1969), they argue that as individuals accrue quality

social bonds (such as a good marriage or gainful employment) there is more investment in prosocial endeavors, thereby reducing motivation and opportunities for deviant acts. With increased investment in employment and a significant other, there is more to risk when committing deviant acts.

Indeed, the literature suggests that marital attachment and stable employment are instrumental in positive desistance outcomes (defined as a reduction or elimination of criminal behavior) for men (Laub and Sampson, 2003). In their observations with longitudinal data of at-risk boys, Sampson and Laub recognized that early life predictors based on social bonds of adolescent boys did not necessarily predict later deviant trajectories. While delinquent boys were more likely to commit crimes later in life overall, some boys who participated in criminal acts as adolescents did not participate in criminal acts as adults. Moreover, some boys who did not commit deviant acts as adolescents grew to engage in criminal activity as adults (Sampson and Laub, 1995). This suggests that the proclivity to conduct delinquent acts is mutable, and the authors propose that social bonds are important in adolescence, but also remain important into adulthood. Those who are able to attain increased social bonds, most commonly defined by these authors as a quality marriage and gainful employment, are much more equipped to resist a natural proclivity toward crime (Sampson and Laub, 1995).

Giordano, Cernkovich, and Rudolph (2002) build on Hirschi's and Sampson and Laub's theories of social bonds and deviancy. Their research provides more evidence that proclivity to crime is indeed mutable, and that social bonds facilitate prosocial behavior. Giordano et al. (2002) describe control theories as providing "an important but incomplete accounting of change processes" (p. 992). Taking a symbolic interactionist approach, Giordano et al. (2002) describe early control theories as not recognizing "up front" cognitive work by individuals that is necessary in sustaining life changes. By recognizing agentic change and how those individual changes interact with social controls such as social bonds, Giordano et al. provide a complementary concept to social control theory, but explore slightly different conceptual terrain. This complementary concept allows for flexibility in understanding why some who are exposed to prosocial experiences persist to commit crimes. The concept also allows for recognizing that change, through cognitive transformation, is possible even when individuals are faced with immense challenges such as low education, low employment skills, and few prosocial social bonds. Furthermore, it allows for the recognition that there are critical time points when individuals have increased capacity for change due to shifting perceptions, desires, and social identities. Recent release from jail or prison, or the requirement of community supervision, may be a critical time period that allows for cognitive shifts that facilitate change.

In their Theory of Cognitive Transformation, Giordano et al. (2002) propose four types of cognitive transformation that are “intimately related”. The most fundamental shift is a basic openness to change. The concept of readiness for change is compatible with other treatment literature (Miller 1985; Prochaska and DiClemente, 1983). For example, many parole and probation officers, as well as treatment centers, use the stages of change framework (sometimes referred to as the Transtheoretical Model) in assessing individual capacity for changing behaviors, as well as developing strategies to work with the varying stages of change (i.e. precontemplation and contemplation). The second cognitive shift is the opportunity and exposure to a particular hook or set of hooks for change. This is premised on the concept that while openness to change is necessary, it is not sufficient to foster change. This hook for change has the capacity to play an important role in fostering transformation. Examples of hooks for change can be the desire to rebuild or develop prosocial relationships, or a desire to leave an antisocial lifestyle. The third transformation in the conceptual framework is when one is able to develop a prosocial “replacement self” that can ease in pulling out of an antisocial identity. For example, the desire to change from an “addict” to a “person in recovery” or the desire to change from being a “bad parent” to being a “good parent.” The fourth cognitive change encompasses how one views antisocial behavior as unappealing and no longer viable and prosocial behavior as functional. Parallel to Giordano, Shadd Maruna (2000), highlights narratives that

individuals who desist from crime develop to make sense of their past, find meaning in everyday prosocial behaviors, and take control of their future. From this perspective, changing the narrative that individuals have developed about their lives has implications for understanding desistance. Both Giordano et al. and Maruna build on Hirschi's (1969) concept of the internalization (or socialization) of the legitimacy of social norms and laws. If one can transform their conceptualizations of laws as being legitimate and sensible they are more likely to abide by these laws. Therefore, this theory outlines a person's capacity to change their proclivity to antisocial behavior, where social bonds are necessary, but not sufficient to achieve change. Agentic actions facilitate the cognitive transformations necessary to initiate and sustain change in deviant behaviors.

One of the most significant contributions by Giordano et al. (2001; 2002) is that gender matters when thinking of pathways to crime as well as desistance from crime patterns. Due to the unique circumstances of corrections-involved women as compared to men, Giordano and colleagues provided a framework that avoided the "add gender and stir" criticized by feminist criminologists (Chesney-Lind 1997). Giordano et al.'s (2002) findings in a longitudinal study of delinquent female and male adolescents interviewed as adults, revealed similarities among desistance patterns among men and women, such as low educational achievement and extreme poverty. They also found significant gender differences in the desistance process. Women were more likely than men to acknowledge

religiosity in their personal transformations, and more often relied on their children as catalysts for change.

Some literature has emerged that suggests that increased social networks and positive social bonds, outside of intimate relationships, may be better predictors of outcomes for women (Arditti & Few, 2008). While marriage appears important for men's prosocial reentry experiences, research suggests that social networks and non-romantic social bonds may be better predictors of prosocial outcomes for women (Arditti & Few, 2008). It may even be beneficial for women to avoid romantic relationships during reintegration into the community (Leverentz, 2006). Examples of non-intimate relationships that may facilitate successful reentry include relationships with female family members (Valera, Chang, Hernández, & Cooper, 2015) and peers in treatment and reentry programs, as well as agency case workers and other professionals (Heidemann, Cederbaum, & Martinez, 2014; Bui & Marash, 2010).

While Giordano et al. (2002) and others (Brown and Bloom 2009) have provided some evidence that women are more likely to rely on their children to facilitate positive turning points in their lives, the literature has yet to provide a robust understanding of the impact children have on mothers involved in community corrections. Given that women are much more likely to be in an active parenting role prior to corrections involvement as compared to men (Bloom et al., 2003), childbearing and parenting may be important catalysts for positive

behavior changes among released women but less so for men (Edin & Kefalas, 2005; Giordano et al., 2002; Richie, 2001). These previous findings are limited in scope, and there is emerging evidence that children, while sometimes providing motivation for mothers, also present emotional and logistical challenges during the often turbulent reentry period (Robison & Miller, 2016).

Reentering persons are usually addressing substance use and mental health issues, facing housing instability or homelessness, and experiencing barriers to gainful employment (Bloom et al., 2003). Adding parenting to these competing demands likely complicates this process. Pearlin's Stress Process Model (Aneshensel, 1992; Pearlin, Menaghan, Lieberman, & Mullan, 1981) suggests that the increased demands associated with parenthood (i.e. housework and child care), coupled with lack of resources to meet these demands may lead to distress, and subsequently, adverse mental health outcomes such as symptoms of depression (Nomaguchi & Milkie, 2003). Women leaving the corrections systems are most often single and lack resources that ease the burdens of parenting such as access to child care, parenting skills, logistical support such as transportation to school, and social support to help cope with the struggles of parenthood. Based on the Stress Process Model (Pearlin, 1981), these increased stressors likely impact depression symptoms differently for actively-parenting mothers compared to mothers who do not have custody of their children,

Corrections-involved women are more likely to experience mental health challenges compared to corrections-involved men (James & Glaze, 2006), as well compared to women in the community (Cabeldue, Blackburn, & Mullings, 2018), and incarceration has been found to worsen mental health statuses (Freudenberg, Daniels, Crum, Perkins, & Richie, 2005). Nearly all women who are incarcerated will return home and face reunification with family members often including their children, yet little information is known about how children impact their mother's mental health statuses during the reentry period. Parenting is of particular concern for corrections-involved women because they are more likely to have a minor child and considerably more likely to be in an active parenting role at the time of their arrests compared to their male counterparts (Bloom, Owen, & Covington, 2003; L.E. Glaze & Maruschak, 2008; Women in Prison Project, 2009). Corrections-involved mothers, then, more often need to reconcile relationships with their children after separation compared to corrections-involved fathers.

### **Contents of this Dissertation**

This dissertation is comprised of three papers that consider interrelated ways in which social bonds, within the context of parenting, are experienced by women recently involved with the corrections system. I consider social bonds

with agency professionals, romantic partners, and children—all previously theorized to play a role during the reentry period. These social bonds are considered within the context of the challenges experienced during this period, and how and why these social bonds may—or may not—support women as they transition back into the community.

*Paper One: Parenting Intervention for Corrections-Involved Parents: Does Social Support Explain Why Mothers Have Better Outcomes than Fathers?*

Paper one of this dissertation explores social bonds with romantic partners and agency professionals related to a parenting intervention and asks: How does the impact of participation in a parenting intervention vary for justice-involved mothers as compared to fathers? Previously, our research team (Bank, 2012) unexpectedly found that corrections-involved women benefit from a parenting intervention more than their male counterparts and I sought to unpack this finding. This RCT developed a sample that was about 50 percent mothers, allowing for comparison of trajectories between corrections-involved mothers and fathers, which so far is uncommon in the criminological research. To address the research question stemming from the original RCT, I hypothesize in paper one that social bonds with romantic partners and/or agency professionals (“home visitors”) associated with a parenting intervention may provide a contextual explanation for the variance in outcomes for men and women. Secondly, it was hypothesized that participation in the intervention facilitated positive social bonds

for women that promoted positive outcomes during the reentry period. Comparing the social bonds of these women with their male counterparts will contribute to the literature by helping us understand how both relationships (romantic and with agency professionals) may play different roles for mothers compared to fathers, and help unpack the finding that women benefitted more from a parenting invention that men.

*Paper Two: 'Prison Has Nothing on This': Negotiating and Reconciling Relationships with Children after Incarceration*

Paper two qualitatively considers how and why parenthood during the reentry period can simultaneously provide social control (as framed by Hirschi (1969) and Sampson & Laub (1995, 2003) as well as financial, emotional, and logistical strain. Here, I hypothesized that mothers who have higher levels of child custody following corrections involvement are more likely to exhibit prosocial behaviors, but may also experience increased stressors. In-depth interviews conducted with recently released mothers provide rich data to address these competing influences. Questions asked addressed quality of social bonds, relationship statuses, and certain behaviors such as substance use, criminal activity, employment status, access to services, and mental health. Findings will uniquely contribute to the literature by comparing mothers who do and do not have custody of their children during the 12-month follow up period.

Paper Three: *Parenting and Depressive Symptoms of Corrections-Involved Women Reentering the Community*

The third paper considers the relationship between custody of children and mental health outcomes for mothers during the reentry period. Given that corrections-involved women are more likely to experience poor mental health outcomes and have active relationships with their minor children compared to corrections-involved men, paper three of this dissertation aims to understand how relationships with children might impact mental health trajectories of mothers, specifically depression symptoms, following separation due to incarceration. Exploring how mental health outcomes are moderated by having custody of children broadens understanding of the reentry process for mothers. For example, if parenting does promote protective social bonds as posited by Sampson & Laub (1995, 2003), while simultaneously increasing depression symptoms of mothers, then policy designed to support mental health outcomes of reentering mothers would be warranted. If depression symptoms stem from lack of support while parenting, addressing this lack of support could boost the protective benefits of reentering the role of a mother. Like the second paper of this dissertation, paper three uniquely compares mothers who do and do not have custody of their children.

## **LITERATURE REVIEW**

### **WOMEN IN THE CORRECTIONS SYSTEM**

The proportion of women incarcerated in jail or prison has grown enormously, while the proportion of women on parole or probation has grown slightly since 2000 (Glaze 2011). Between mid-year 2000 and 2007, the percentage increase of female prisoners under state and or federal jurisdictions was almost two times that of male prisoners (West and Sabol 2010). Within the jail population between 2010-2014, males experienced a 3.2 percent decline while the rates for women increased by 18.1 percent (Minton & Zeng, 2015). Much of this growth can be attributed to increased drug surveillance and policies, with about one third of women in prison serving drug-related sentences (Mauer and Chesney-Lind 2002). As compared to men, women are more likely to be incarcerated for drug and property crimes and less likely to be incarcerated for violent offenses (West and Sabol 2010). This increase in incarceration among women, however, does not reflect an increase in criminal behavior as imprisonment rates have increased disproportionately to rates of arrest. Drug policies increased mandatory sentences, thereby increasing the length of time low-level offenders spend incarcerated. These policies disproportionately impact women as they are more likely to be lower-level offenders (Lapidus et al. 2005; Frost et al. 2006).

The literature indicates that pathways to crime differ by gender. For example, there is evidence that suggests that female victimization may lead to criminal behavior disproportionately to their male counterparts (Chesney-Lind and Shelden 1998), and it likely follows that trajectories following incarceration have gendered patterns as well (Giordano et al. 2002). As mentioned previously, one important, and perhaps crucial, difference is that women are much more likely to be in an active parenting role prior to and following corrections involvement (Glaze and Maruschak 2008; Bloom, Owen and Covington 2002).

In corrections and community supervision environments, women's needs are often underassessed and unaddressed (Shram et al. 2004). Many corrections based policies are premised on experiences of men, since men comprise much more of the justice system. Needs assessments for women have focused primarily on housing and employment attainment, which are necessary but not sufficient to meet the needs of women reentering communities (Brown and Bloom 2009). Van Voorhis et al. (2010), while not providing comparisons with men, do demonstrate that for women in community corrections, "substance abuse, economic, educational, parental and mental health needs appear to be the needs most associated with future offending" (p. 281).

Since the number of women incarcerated are growing at twice the rate of men (Sabol and West 2009), it is important to develop more adequate understanding of the experiences of women and how they lead both into and out

of the corrections system (Giordano et al. 2003; Salisbury and Van Voorhis 2009). Ways in which other investigators have conceptualized and tested pathways to and desistance from crime are outlined next.

## **PATHWAYS INTO CRIMINAL BEHAVIOR FOR WOMEN**

Researchers have found that some of the predictors of male corrections-involvement may also predict female corrections-involvement (Giordano et al. 2002; Van Voorhis et al. 2010). Examples include economic disadvantage (Giordano, Kerbel, and Dudley 1981), family factors such as lack of supervision (Canter 1982; Cernkovich & Giordano 1987); and associating with antisocial or delinquent peers (Cairns and Cairns 1994).

Literature from gender studies as well as criminology has nonetheless established significant and distinct patterns both in pathways to and desistance from criminal activity for women as compared to men. On a broad level, the literature consistently shows that women have closer relationships to family, a tendency to derive status from romantic partners, and achieve less power and success in employment (Gilligan 1982, Giordano et al. 2002, Van Voorhis et al. 2010). On a more specific level, many factors have been evidenced to better predict deviant outcomes for women as compared to men.

*Distinct predictors of deviant outcomes for women*

*Family backgrounds.* Corrections-involved women have been found to have significantly different family backgrounds compared to the general population of women as well as for all men, including corrections-involved men. For example, corrections-involved women are more likely to be from a single parent home, usually a mother, than women in the general population (Bureau of Justice Statistics 1994).

*Victimization.* Corrections-involved women are more likely to have had experienced sexual and physical abuse, as well as other forms of victimization as compared to their male corrections-involved counterparts (Bloom et al 2003). Linkages between female victimization and criminal involvement are evidenced, for example, in that early sexual abuse happens more often for women than men and predicts adult criminality more than that for men (Chesney-Lind and Shelden 1998). The pathways perspective contends that female criminal behavior is more likely than male criminal behavior to begin with childhoods of sexual, physical and emotional abuse. Such victimization may impact the development of social bonds with families, partners and children (Chesney-Lind 1989).

*Family corrections involvement.* Corrections-involved women are more likely to have at least one incarcerated family member as compared to corrections-involved men. Fifty percent of corrections-involved women and 37

percent of men had an immediate family member who had been incarcerated (Bloom, Owen and Covington 2002).

*Poverty.* Corrections-involved women are more likely than their male counterparts to experience economic hardship, stemming from lower educational levels and fewer vocational skills. Since women are more likely to have or resume custody of their children, economic hardship causes additional hardship (Glaze 2011). Also compared to their male counterparts, corrections-involved women find more difficulty in obtaining and maintaining legitimate and living-wage level employment that will meet their family's needs (Flower 2009).

There is also evidence to suggest that women are more likely than men to commit crimes in order to meet the needs of their children or to acquiesce to the wishes of a significant other even if this violates their personal values and beliefs (Van Voorhis et al. 2010).

*Relationships.* While romantic relationships with others predict criminal involvement for men and women, evidence suggests that for women, corrections involvement is much more likely to be fueled by the dynamics of their relationships with their significant others (Richie 1996, Robertson & Murachver, 2007). Other relationships, outside of romantic partners, appear to also be a factor in criminality because criminal involvement also tends to come through relationships with family members and friends (Chesney-Lind 1997; Owen and Bloom 1995; Owen 1998).

*Mental health.* Corrections-involved women appear to have mental health statuses that differ significantly from corrections-involved men and women living in the community (Cabeldue et al., 2018). For example, anxiety, depression self-injurious behavior, and trauma-related diagnoses such as PTSD, are more prevalent among women in this population. These mental health statuses have been demonstrated to be stronger predictors of women's recidivism than men's (Belknap & Holsinger 2006; Bloom et al 2003; Van Voorhis et al. 2010; Benda, 2005).

*Substance abuse.* While a well established predictor of criminal involvement for men and women (McClellan et al., 1997), there is some evidence to suggest that substance use has unique effects on women because of its strong correlation with mental illness and histories of victimization that are more prevalent among corrections involved women (Bureau of Justice Statistics 1999; Covington & Bloom 2007, Van Voorhis et al. 2010). Substance abuse is thought to more often begin as a coping mechanism for women as compared to men, and substance abuse for men and women may lead to minor crimes to sustain addictions. From this perspective, involvement in the criminal justice system is a direct response to what may be considered behaviors learned to adapt to pervasive disadvantage (Belknap 2001; Bloom, Owen and Covington 2004, Chesney-Lind 1989).

*Parenting.* Significantly more women than men were single parents immediately prior to corrections involvement (30.9% and 3.9% respectively) (Mumola 2000). Ferraro & Moe (2003) found that corrections-involved women cited economic need to care for their children as the basis of their criminal activity, while non-mothers more often cited drug and alcohol addiction as contributing to their core pathway to crime. It follows that more women than men commit crimes based on parental stress.

## **LIMITED UNDERSTANDING OF DESISTANCE FROM CRIMINAL BEHAVIOR FOR WOMEN**

Given the unique pathways into crime for women as compared to men, it likely follows that desistance patterns may also be unique. While there has been a great deal of scholarship on desistance from crime (Travis 2005, Petersilia 2009), nearly all of the research has been comprised of male samples (Taxman, Young and Byrne 2002; Travis and Petersilia 2001). With the information available concerning the trajectories of women post-corrections involvement being scant, it remains difficult to develop gender responsive strategies to assist women in improving their outcomes.

Given that the concepts of social bonds are well established for male desistance from crime, it follows that social bonds could also predict outcomes for

women. The literature that does exist (Gilligan 1982, Giordano et al. 2002, Brown and Bloom 2009, Cheney-Lind and Shelden 1998) suggests that positive social bonds are indeed important for determining outcomes for women, but they manifest in different ways.

One of the most compelling concepts, albeit less understood, is the possibility that relationships with children may be more likely to serve as social control for women as compared to their male counterparts. For example, in a longitudinal sample of women beginning in adolescence, Giordano et al. 2002 found that women were significantly more likely to report relying on their children as catalysts for change. Brown and Bloom (2009) also found that children serve as motivators for corrections-involved women, but cautioned that the stressors that the women face (employment, housing, erosion of parental control) pose significant obstacles for women as they attempt to “reclaim” motherhood.

## **CHILDREN AND REENTRY**

Approximately 70 percent of all women under correctional supervision in the United States have least one minor child, with 65 percent of women in state prisons, and 59 percent of women in federal prisons being mothers (Mumola 1999; Bloom, Owen and Covington, 2002). Usually, the occurrence of criminal behavior happens during women’s childbearing years, which exacerbates the

occurrences of family disruption for families with corrections-involved mothers (Brown and Bloom 2009). Motherhood brings unique concerns for corrections-involved women, and these concerns are of the “uppermost in the minds of reentering women—constituting a critical subjective aspect of their lives” following corrections involvement (Brown and Bloom, 2009). Resuming motherhood may provide structure that facilitates a woman’s desistance from criminal behavior (Rumgay 2004). On the other hand, parenting and reuniting with children while facing the challenges of reentry such as addiction, low levels of employment, difficulty in securing housing, and mental health issues may only provide additional stressors during this transitional time, potentially increasing the chances of recidivism (Brown and Bloom 2009).

For the children of these offenders, the intergenerational cycle of criminal behavior is a concern. This cycle is commonly found among children who have family members who are incarcerated or have been involved in the criminal justice system that continue the cycle of criminal behavior (Dallaire 2007). While not the focus of this dissertation, the intergenerational cycle of crime may be mediated by facilitation of parenting roles of mothers during the reentry process. Children of mothers who experience criminal involvement are at significantly higher risk for adverse outcomes as compared to children of fathers who experience criminal involvement. These adverse outcomes include low academic achievement, as well as aggressive and antisocial behavior (Dallaire 2007). In

addition, children of corrections-involved mothers are much more likely to enter the child welfare system as compared to children of corrections-involved fathers (Dallaire 2007; Johnson and Waldfogel 2002).

The majority of corrections-involved women are single mothers prior to corrections-involvement with an average of two children, and are in active parenting roles prior to incarceration (Bloom, Owen and Covington, 2002). Children may serve as a source of motivation for life changes (coined as “hooks for change” by Giordano et al. 2002) for female offenders while under community supervision, but mothers face many obstacles in building relationships with their children post-incarceration including housing and employment deficiencies (Giordano et al. 2002).

Given the higher rates of active mothers as compared to fathers in the corrections system, it then follows that reunification with children following incarceration poses unique challenges to corrections-involved mothers as they are more likely to, or at least attempt to, resume a parenting role regardless of child custody statuses (Brown and Bloom, 2009). Bloom et al. (2003) demonstrate that the mother-child relationship appears to be a significant factor for community integration. Paralleling early social control theories, the maintenance of family ties and reentry to family life post incarceration may have positive impacts on female offenders since they can reduce the likelihood of recidivism (Arditti and Few, 2006). Even in cases where the nature of criminal activity may have put

their children at risk, most women report worrying about their children both prior to, during and following criminal justice involvement (Richie 2001). Thompson and Petrovic (2009) suggest that the focus of post-incarceration support should emphasize family and prosocial friends, since they are key sources of social support for successful reentry and reintegration. When conceptualizing gender-responsive intervention strategies during the reentry and reintegration period, it is reasonable to surmise that facilitating relationships with children may be a key factor in improving outcomes for parenting mothers.

## **RESEARCH QUESTIONS**

Considering the theoretical gaps in understanding adult social bonds with children following corrections involvement, I focused on the overarching question: “How do relationships with their children affect the trajectories of women following corrections involvement?” Within the three papers that comprise this dissertation, I investigated two specific research questions: (1) Does the impact of participation in a parenting intervention vary for justice-involved mothers as compared to fathers? and (2) How do social bonds, particularly with children, affect mothers with criminal justice involvement?

The first paper, *Parenting Intervention for Corrections-Involved Parents: Does Social Support Explain Why Mothers Have Better Outcomes than Fathers?*,

addresses the first research question. This paper builds on the analyses of Bank et al. (2012) to investigate how outcomes differ for mothers as compared to fathers in a randomized control trial of an intervention for parents living in the community with their children (using the Health Families Project, or HFP). Analyses considered if the parenting intervention facilitated social bonds with children and other prosocial adults for participants, and I compared the outcomes for participating mothers with fathers.

The second and third papers both address the second research question by comparing mothers who live with their children following incarceration and those who did not (all from the Mothers and Families Project (MFP) dataset). Each of these papers considers separate outcomes in this comparison group. Paper 2, *'Prison Has Nothing on This': Negotiating and Reconciling Relationships with Children after Incarceration*, examines how familial bonds including children, romantic partners, and other social supports affect prosocial and antisocial outcomes. Paper 3, *Parenting and Depressive Symptoms of Corrections-Involved Women Reentering the Community* specifically addresses mental health outcomes using the same comparison group. More details on how each of the papers address the research questions can be found in Table 1, which includes the key independent and dependent variables used in my dissertation. Below, I describe the two sources of data ("HFP" and "MFP") used in this dissertation in greater detail.

<b>Table 1. Summary of Research Questions</b>				
<b>Overarching Question</b>	<b>Specific Research Questions</b>	<b>Hypotheses</b>	<b>Variables</b>	<b>Analyses</b>
		<b>Paper 1 (Mixed Methods) Parenting Intervention for Corrections-Involved Parents: Does Social Support Explain Why Mothers Have Better Outcomes than Fathers?</b>		
How do relationships with their children affect the trajectories of women with corrections involvement?	(1) How does the impact of participation in a parenting intervention vary for justice-involved mothers as compared to fathers?	(1) Factors that influence gender differences include engagement in romantic relationships and engagement with intervention staff.	<b>HFP-</b> (IVs) Intervention group, gender. (Controls) Level of criminal risk and level of child custody. (DVs) Engagement with romantic partners and engagement with intervention staff.	Baseline to Term  Regression  Interaction analyses to detect gender differences
		(2) Participation in a parenting intervention facilitates social bonds that promote prosocial behavior.	<b>MFP-</b> (Interviews) Compare women with custody who did complete the intervention versus those who did not attend or did not complete. (Focus Group) Conducted on 4/13/11 with women who attended and/or graduated from intervention.	Qualitative- Code statements that indicate: (a) temporal ordering of events (prosocial interactions, intervention, child custody status), (b) children providing stressors and/or positive motivation for behavior change. (c) the intervention had implications for relationships with children and focal outcomes for mothers (e.g. substance use, criminal activity, employment, service utilization, mental health.)

(2) How do social bonds, particularly with children, affect mothers with criminal justice involvement?	<b>Paper 2 (Qualitative) 'Prison Has Nothing on This': Negotiating and Reconciling Relationships with Children after Incarceration</b>		
	(4) Mothers who have higher levels of child custody following incarceration are more likely to exhibit prosocial behaviors.	<b>MFP-</b> (IVs) Level of custody (DVs) Problem solving strategies and indicators of prosocial engagement (Interviews) Comparison of mothers with custody of children versus mothers without custody of children.	Qualitative-  Baseline and Term Interviews  Code statements that indicate quality of social bonds, relationship statuses and focal behaviors (i.e. substance use, criminal activity, employment, service utilization, mental health.)
	<b>Paper 3 (Mixed Methods) Parenting and Depressive Symptoms of Corrections-Involved Women Reentering the Community</b>		
	(3) Actively parenting mothers will report less depression symptoms than non-actively parenting mothers.	<b>MFP</b> (IVs) Actively parenting and non-actively parenting mothers (DVs) Beck Depression Inventory	Baseline to Term (Change over time)  T-test and correlation  Qualitative- Code statements that indicate relationship between actively parenting and mental health outcomes.

## **DATA COLLECTION METHODS**

Data collected for the three papers that comprise this dissertation were derived from two different, albeit related, data sets. The Healthy Family Project (HFP) was a 5 year project awarded to the Oregon Social Learning Center (OSLC) by the National Institute on Drug Abuse (NIDA) to test an evidence-based parenting intervention for corrections-involved individuals living in a rural community with their children. The Mothers and Families Project (MFP) was a pilot project that stemmed from the findings of the Healthy Family Project that provides data that can answer questions not available in the HFP data. Both projects have rich data available, and my mixed-methods design allowed for insight into the role of children in the lives of women with corrections involvement.

Substantial data are available from HFP documenting the trajectories of the sample of families ( $n = 152$  families) and are particularly useful to address the research questions due to having equal proportions of corrections-involved mothers and fathers enrolled, as well as the integration of a control group in the study design.

Building on preliminary findings from HFP, the Mothers & Families Project (MFP) was conducted in the urban Portland Metro area. Data from MFP contributes to the present research questions by providing qualitative data that HFP was not able to integrate into the assessment battery. Since 2010, I

conducted interviews with mothers recently released from jail or prison who have custody of their children, as well as recently released mothers who do not yet have or did not plan to have significant contact with their children ( $n= 39$  mothers). More details on these two projects follow.

### **Healthy Family Project (HFP)**

Funded by the National Institute on Drug Abuse in 2005, “Motivational Parent Intervention for Corrections Involved Parents,” was a five-year project that was a collaboration between Lincoln County Community Corrections (LCCC) and the Oregon Social Learning Center (OSLC), with Lew Bank serving as the Principal Investigator. Lincoln County is a rural county situated on the central Oregon coast. For simplicity, the community name of the project became the “Healthy Family Project.”

Families were eligible if at least one parent had corrections involvement (parole, probation, or incarceration in jail or prison) within the last two years and were living with or had significant contact with at least one child between the ages of 0-15. Up to two children per family were enrolled in the project. Each corrections-involved parent, deemed the Primary Adult (PA), invited another adult close to their children to participate in the study, such as a romantic partner, their own parent, or a roommate or friend, which the project enrolled as the Other Adult (OA). Data were collected from 152 rural adults with current or recent

corrections-involvement (parole, probation, jail and/or prison). Adults previously convicted of violent or sexual predatory crimes were excluded from participation; nonetheless, post-hoc analyses indicated that the study sample was comparable to the county-wide community corrections populations on key demographic factors such as gender, race/ethnicity, and intensity of corrections involvement (Mowbray, McBeath, Bank and Newell, 2016).

Families were recruited through several avenues, but primarily through referrals from local corrections officers. Families were randomly assigned to attend an intervention (MPMT) or to receive services in the community as usual (CAU; control group). Families were truly volunteers, that is, they were not required by court order to attend these specific parenting classes. Randomization included yoking by gender, which allowed for an equal distribution of mothers and fathers in both groups. Despite the distribution of women and men in the corrections system to consistently be around 20 percent and 80 percent respectively, mothers comprised 50 percent of the entire PA sample demonstrating that women were much more likely to volunteer for the intervention (See Table 2). Over the five years of the grant, 152 families

	Female	Male	Total
Community Services as Usual	33	39	72
Healthy Family Project (Intervention)	41	39	80
Total	74	78	n = 152

participated in the study totaling about 500 participants enrolled in the project as a whole (counting PAs, OAs and all participating children in both study conditions).

Extensive multi-agent assessments, primarily quantitative in nature, were conducted with each enrolled family at baseline, at intervention termination (about 6 months following baseline) and again one year following intervention termination for a total of three assessments over a 18 month time span.

Participants that completed assessments included the PA, OA, enrolled children if over the age of 4, corrections officers, home visitors, children's teachers, and project staff. Assessment themes included criminal histories (both self-report and archival records), self-reported substance use, employment history and statuses, and various measures of relationships with their children.

#### *Methods and Data Collected from the Healthy Family Project*

Data collected from family participants, before the onset of this dissertation work, were primarily quantitative and included a multi-method, multi-agent strategy. Comprehensive assessments were conducted with each of the PAs, OAs, and all enrolled children (up to 2 per family) who were over the age of four, at each study wave (baseline, intervention termination and follow-up). Family assessments included the collection of data concerning criminal histories (both self-report and collection of official records), self-reported substance abuse

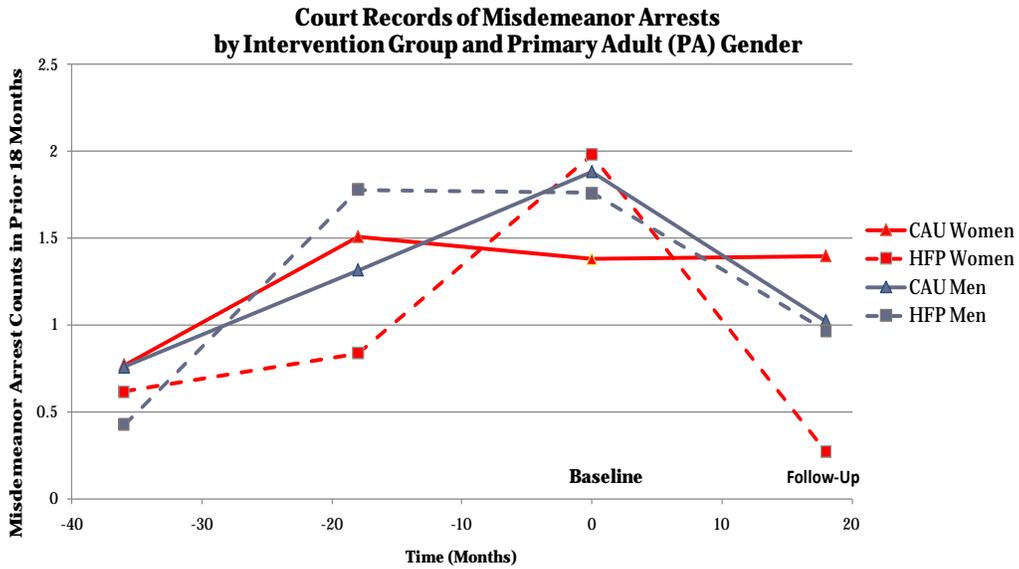
histories, employment status, onsite oral drug screening, experiences with Department of Human Services Child Welfare (DHS), family activities, depression scales, among others. In addition to the three major waves of assessments, data were also collected regarding service utilization (i.e. health care, mental health services, public aid) every two months via brief telephone interviews.

This multi-agent, multi-method approach is useful when examining the trajectories of these families over their 18-month participation in the project. The primarily quantitative data allow for several analyses that will help shed light on the gender differences found in the preliminary analyses of the study data. The quantitative component of the present project focused primarily on adult outcomes because as I will explain below, preliminary analyses demonstrated gendered results among the adults in the intervention.

Preliminary data analyses conducted by a research analyst and the project Principal Investigator at OSLC, the host institution, suggest a gendered effect of the parenting intervention. At intervention termination, both MPMT assigned mothers and fathers experienced gains as compared to the control group (CAU). At the one-year follow up, however, gains for MPMT fathers had tapered while gains for MPMT mothers had continued to improve. Gains considered included improved employment, reduced substance use, reduced recidivism, and better behavioral outcomes for children as measured by teacher assessments. The most

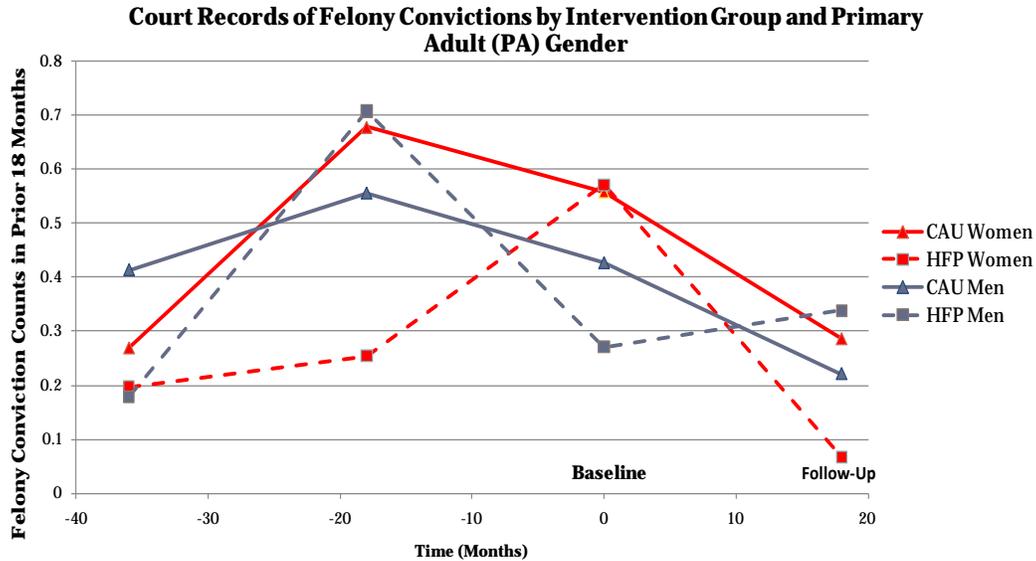
compelling preliminary finding is that based on archival records of misdemeanor and felony arrests, intervention group women at 18-month follow up had lower recidivism rates than intervention group men or control group men or women (Bank, 2011). (See Figures 1 and 2.)

**Figure 1.**



NOTE: These are estimated marginal means from a repeated measures linear growth model, controlling for PA age and education at A model for pre and post only (last 2 time points shown here) shows a significant group\*time linear effect [ $F(1,146) = 3.72$  ( $p = .087$ )] and a significant linear group\*time\*gender interaction [ $F(1,146) = 3.43$  ( $p = .066$ )].

**Figure 2.**



NOTE: These are estimated marginal means from a repeated measures linear growth model, controlling for PA age and education at BL. The model shows a significant cubic group\*time\*gender interaction [ $F(1,146) = 3.50$  ( $p = .052$ )]. A model for pre and post only (last 2 time points shown here) shows a significant linear group\*time\*gender interaction [ $F(1,146) = 2.49$  ( $p = .117$ )].

### **Mothers & Families Project Methods**

Bank et al. (2012), having promising preliminary analyses demonstrating intervention efficacy, especially for women, collaborated with PSU investigators to conduct a pilot group in the Portland Metro area that builds on findings from HFP but with slight conceptual differences. The Mothers & Families Project (MFP) was a pilot project which began in 2010 with the intention of building on findings found in the Healthy Family Project. Due to finding efficacious results in the preliminary analyses for intervention-assigned mothers in HFP, and less so for intervention-assigned fathers, MFP investigators determined that focusing on

corrections-involved mothers would be the most effective next step. Project investigators also made the decision to solely recruit and enroll corrections-involved mothers who were released from jail or prison within the last 12 months. Note that the inclusion criteria differ slightly from HFP, which requires parents to have recent corrections-involvement whereas MFP inclusion criteria specifically require recent incarceration in jail or prison. To further explore the role of children following corrections-involvement, MFP also recruited mothers who have been recently released who are unable or do not have immediate plans to have custody of their children. The goal was to recruit an equal proportion of mothers who have custody of their children and those who have little to no contact with their children.

In a partnership with Multnomah County Department of Community Justice (MCDCJ), researchers from Portland State University (Thompson, Newell, Bank & Oswald 2012) recruited recently released probationers and parolees to screen for study criteria. Parole and probation officers were asked to refer eligible mothers to the project. In addition to having a recent release from jail or prison, women must have been mothers of children under the age of 18 with or without consistent contact or custody. Recruiting the participants through MCDCJ resulted in a slow recruitment process. Although there were several hundred eligible women being released into Multnomah County during the recruitment period, the message was not disseminated as readily as expected. In

order to facilitate recruitment, I attended community meetings of case workers from various agencies working with recently released individuals, and a contact from the Department of Health Services was a primary referral of mothers who eventually participated in the project. Other women were recruited from the Londer Learning Center, an educational program that serves recently incarcerated individuals.

In order to recruit more participants from prison, project staff coordinated with the prison staff to have a listing in the prison newspaper *Coffee Talk* soliciting women to contact the project once they were released in order to participate. This method yielded participants but the majority of participants coming out of prison were recruited from a posting on a listserv from an organization that serves as a coalition for most of the organizations in the tri-county area serving recently released individuals (Reentry Organizations and Resources or ROAR). Organizations in this coalition include Oxford Houses, homeless shelters and faith-based organizations.

Following project approval from the Portland State University IRB, participants who contacted project staff were screened for eligibility and informed of the purpose of and the requirements for the project. Women were asked to participate in three interviews over an 18 month time period, matching the assessment timeline of HFP. Each interview would last about two hours and they were compensated with a \$25 gift card to a large box retail store that sells useful

items (i.e. Fred Meyer or Target). If the women were eligible and interested, they were given the choice to come in to the project offices or have an interviewer come to their home, so long as there was a place where an interview can occur with relative privacy and little distractions. About half of the interviews were conducted at the research office as many women did not have space conducive to a private interview in their homes. The other half of the interviews were conducted in the participants' current living situation which included their own homes, temporary stays with families, treatment centers and several transitional housing settings.

Once the interviewer met with the participant, an informed consent was conducted. The informed consent emphasized the significant measures that the project staff undergoes to ensure participant confidentiality, and that their agreement to participate or not participate in the project would not help or harm their parole or probation status. Exceptions to confidentiality were also explained (if project staff heard of current child abuse or evidence to suggest the interviewee would harm themselves or someone else).

Following participants consenting to the project (there were no refusals at this stage in the process), the digital audio recorder was turned on and the interview began. Questions were diverse and comprehensive, with detailed questions asked both about the participant and their children, regardless of child custody status. Examples of questions about children included their current living

situations, behavior, school success, and quality of their relationship with the interviewee. Other questions probed how the participants' corrections involvement may have impacted these variables for their children. Examples of questions asked about the adult participant include self-reported criminal and substance abuse history, victimization experiences as a child and as an adult, service utilization and their perception of the experiences of mothers in the corrections system. Participants also completed the Beck Depression Inventory (Beck et al., 1996). Most interviews took close to the full two hours and there were not any significant problems in conducting the interviews.

A total of 39 women participated in baseline interviews and 30 women participated in follow-up interviews six months to one year following baseline.

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## **Paper One**

### **Parenting Intervention for Corrections-Involved Parents: Does Social Support Explain Why Mothers Have Better Outcomes than Fathers?**

Community reentry and reintegration following incarceration incorporates complex social processes that are not fully understood, particularly when most research concerning this area is focused solely on desistance from criminal behavior rather than other social outcomes. Considering other social outcomes, such as social support, including romantic and familial relationships, engagement with social and health services, and employment status is essential to understanding the contexts in which desistance does and does not occur. Taking into account these other contexts challenges a definition of success post-incarceration that only measures recidivism while excluding measures of community reintegration. Following a unique randomized trial with adults living in the community post-incarceration, the research team had the opportunity to consider gender as a contextual factor and social processes including parenting, romantic relationships, and interactions with a social service provider as possible predictors of reintegration outcomes. Interventions that support parenting with corrections-involved adults and their families have found to have benefit for both the parents (Colalillo & Johnston, 2016) and the children (Eddy & Poehlmann, 2010), including the intervention that our group conducted. Prior to this project,

our team completed a randomized, controlled trial of a parenting intervention to recently corrections-involved parents of young children living in a rural community, known in the community as the Healthy Family Project (HFP).

Findings from the trial revealed unexpected improved outcomes in employment, substance use and recidivism for mothers compared to all fathers and control group mothers (Bank, 2012; 2013). Initial findings were generally favorable for mothers and fathers at the intervention end (approximately 6 months following baseline). At follow up 18 months later, however, the mothers continue to maintain benefits while the benefit to fathers ebbed (Bank, 2013). These gendered findings were unexpected and provided a unique opportunity for me to investigate why mothers exhibited better outcomes than the fathers, as compared to a control group. A mixed methods approach was undertaken to explore why women may have benefitted from the intervention as compared to men.

Based on the relatively scant literature, I developed a working hypothesis that women may be more amenable to gaining social support as compared to their male counterparts, which might help explain why the variant outcomes. This was hypothesized to happen in two ways. First, I expected women to use the skills in the intervention to increase social support derived from romantic relationships. Further, I expected that women may have been more likely to agree to a component of the intervention that was thought to provide and facilitate further social support. Home visits were an optional component, offered weekly, of the

intervention and were designed to provide time to practice parenting skills learned in the class. While not necessarily in the protocol of the intervention, home visitors, in addition to providing parenting support, provided assistance identifying and addressing needs these families faced such as accessing social and health services.

To test these hypotheses, I conducted further analyses using data from this intervention to ask a) were HFP participants more likely to have a stable romantic relationship during the 18-month assessment period compared to the community as usual group?; b) If so, is there a gender difference in this finding?; and c) among HFP participants, were women more likely to participate in the voluntary home visits provided by the intervention staff?

To contextualize these findings, interviews and focus groups were conducted with women who completed the intervention. Open-ended questions regarding aspects of their and their families' lives were conducted including relationship statuses (romantic and otherwise) and perceptions of social support. Questions regarding the intervention were asked to better understand how they perceived the intervention to have impacted their lives, with specific questions of how attending the intervention may or may not have facilitated relationships and social support.

## **Background**

The experiences of criminal justice involved individuals living in the community are not well understood in the literature. Individuals on parole or probation have grown exponentially since the 1980s, with currently 7 million individuals in the United States under correctional supervision, with two-thirds on probation or parole (Glaze and Herberman, 2013).

The proportion of women becoming involved in the corrections system is rising at a higher rate than males (Glaze & Kaeble, 2014) with the number of women in U.S. federal and state prisons increasing by 203% between 1995 and 2008 (Women in Prison Project, 2009). This growth has illuminated that it is necessary to recognize the role of gender on reentry trajectories (Brown and Bloom 2009). Since the 1980s, there has been a significant increase in efforts by academics and policy makers to address criminality among women (Bloom 2003; Brown and Bloom 2009). Some criminologists have asserted that theories predicated and tested on male samples should not necessarily be applied to women (Miller & Mullins, 2006). Feminist criminologists have asserted that due to the unique predictors of criminality and desistance among women that to “add gender and stir” to established criminological theories is not adequate in addressing challenges that women face (Chesney-Lind, 1997). The vast majority of women involved in the corrections system (85 percent) are under community supervision rather than incarcerated and since 2010, women in jail has been the

fastest growing correctional population (Glaze & Kaeble, 2014; Glaze & Bonczar, 2010). Despite this growth, there is far less information concerning women being supervised in the community as compared to women who are incarcerated, which is also scant (Bloom, Owen, & Covington, 2003).

Given the increased rate of incarceration for women, it is necessary to identify whether there are unique predictors of desistance and successful reintegration for women, identify what these predictors are, and develop social policies that implement strategies for addressing the unique predictors. Criminologists have long emphasized the role of social bonds in predicting outcomes during the reentry period. It has been evidenced that social bonds such as marriage and employment are integral to successful reentry outcomes for men (Laub & Sampson, 2003; Sampson & Laub, 1995), and there are conflicting findings whether these same factors serve as predictors of the same outcomes for women. Evidence is mixed on whether social bonds and social integration are similar predictors or manifest in similar ways for reentry outcomes for women as compared to men (See Cobbina, 2010; Giordano, Cernkovich, & Rudolph, 2002; Giordano, Seffrin, Manning, & Longmore, 2011; Huebner, DeJong, & Cobbina, 2010; Leverentz, 2006).

Research has emerged that suggests that increased social networks and positive social bonds, outside of intimate relationships, may be better predictors of outcomes for women (Arditti & Few, 2008). While marriage appears

important for men's prosocial reentry experiences, research suggests that social networks and non-romantic social bonds may be better predictors of prosocial outcomes for women (Arditti & Few, 2008). It may even be beneficial for women to avoid romantic relationships during reintegration into the community (Leverentz, 2006). Examples of relationships that women may uniquely benefit from include female family members (Valera, Chang, Hernández, & Cooper, 2015) and peers in treatment and reentry programs, as well as agency case workers and other professionals (Heidemann, Cederbaum, & Martinez, 2014).

Improving reentry outcomes for women requires adequate gender-responsive strategies that consider how social bonds shape their experiences, likely in contrast to their male counterparts. The findings from this intervention provide a fertile setting to begin to understand how social bonds may facilitate outcomes for parents reentering the community. The focus of this analysis is social bonds with romantic relationships and agency professionals.

### *Healthy Family Project, Description and Findings*

Our original intervention included community corrections involved adults (n = 152) currently or recently supervised by parole and probation officers in a rural Oregon county. Participants were selected from families with at least one parent involved with community corrections. The study was developed as part of a community intervention study testing the efficacy of a specific parent training

intervention (based on the Parent Management Training-Oregon model) for community corrections involved adults and their children. Participants were randomly assigned to either (1) community as usual (CAU) where individual participated in the usual programs available in the community (the control group) and (2) motivational parent management training (MPMT; community preferred name is the Healthy Family Project (HFP)) where adults attended a 12- week group parenting program targeted at improving parenting skills, but also with the goal of improving health outcomes for the adults (Eddy & Poehlmann, 2010)

Despite not having any gender-specific hypotheses at the onset of the controlled trial, the following gender differences in recidivism and employment emerged in the data and are not fully understood (Bank, 2012). Assessments were conducted at study enrollment (Baseline), six months following enrollment (Term), and eighteen months following enrollment (Follow-up).

### *Recidivism*

Based on both self-report and archival data, intervention efficacy for recidivism was not found at Term, however by Follow-up women in the intervention showed fewer arrests and convictions. This was similarly true for males using self-reported data, but Oregon archival records of crime data only supported the results for women.

### *Employment*

Women began the study significantly less employed than men. The trend for community-assigned women and men from both study groups was reduced employment over time. For HFP-assigned women, employment improved gradually over time.

## **The Current Study**

### **Study Objectives**

I developed two hypotheses to address the overarching research concern of learning why the impact of participation in a parenting intervention varies for justice-involved mothers as compared to fathers. Based on the literature, I hypothesized that factors that influence gender differences include (1) engagement in romantic relationships and engagement with intervention staff and (2) participation in a parenting intervention facilitates social bonds with an agency professional that promotes prosocial behavior.

## **Methods**

### *Design*

A mixed method approach was applied that included secondary quantitative analyses of data from a randomized controlled trial (HFP) with primary qualitative analysis of interviews conducted following the trial (MFP).

## *Participant Recruiting and Screening*

### Healthy Family Project

Participants in the Healthy Family Project (HFP) consisted of families with at least one parent involved with community corrections ( $n = 152$ ) in a rural Lincoln County, Oregon. Families met eligibility requirements if the primary adult (person involved with corrections) had significant contact with 1 or 2 of their children ages 15 years or younger. Individuals previously convicted of violent crimes or suspected of predatory sexual behavior were excluded from study enrollment due to the group intervention program and the need to provide childcare for participants' children on-site while HFP groups were in session. Criteria for these two exclusion categories were provided by county CPS and Parole and Probation officers. Each eligible family was randomly assigned to one of two conditions, HFP or Community as Usual (CAU).

Only families assigned to the HFP group received the cognitive restructuring and motivational parent management training (MPMT) curriculum in 12 weekly sessions and home visitations that define the intervention. Assessments were conducted during three phases: baseline, intervention termination 6 months later, and a 12-month follow-up. Service utilization data was collected from all families every 60 days, yielding 10 assessment waves during the 18 months in which families participated in the trial.

Over 500 adults and children participated in the original study: 78 men and 74 women (mean age, 31.49 years) currently or very recently on parole or probation comprises the sample of primary adults (PAs) for this study.

Demographics of this study are outlined in Table 1.

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**Table 1. HFP Sample Demographics (n = 152)**

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	Female	Male	All
PA participants	74	78	152
Healthy Family Project (Intervention; HFP)	41	39	80
Community Services as Usual (Control; CAU)	33	39	72
Age (mean)	31.2	31.8	31.5
Active or bench supervision at baseline (%)	71.6	89.7	80.7
Active or bench supervision within two years prior to the baseline (%)	28.4	11.3	19.9
PA gross monthly income less than \$1,000 (%)	47.9	28.9	38.3
PA gross monthly income less than \$2,000 (%)	32.9	35.5	34.2
Less than HS education (%)	27.0	38.4	32.9
HS Education or GED (%)	43.2	50.0	46.7
Unemployment (%)	63.5	21.8	42.1

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#### Mothers & Families Project (MFP)

Following completion of the randomized control trial, the team conducted a smaller scale pilot project focused on mothers in a different region of the state.

The intention of the pilot was to observe how the intervention might work for a

group of mothers in an urban environment, and with participation criteria that included release from jail or prison within 12 months of the first interview.

Mothers of children under the age of 18 (with or without custody or contact) were recruited, which allowed us to compare experiences of women with custody of their young children with women who did not have custody. Women who were actively parenting were asked to participate in a parenting intervention nearly identical to the intervention conducted in Lincoln County. MFP differed from HFP because only mothers were recruited and did not have a parallel control group, MFP also recruited recently released mothers who were not actively parenting their children for comparisons addressed in other manuscripts.

*Assessments and Interviews.* Participants were asked to participate in an abbreviated version of the assessment conducted in the original RCT in addition to participating in semi-structured interviews. These assessments and interviews were primarily conducted by the first author, who had previously contributed to the RCT. Assessments and interviews occurred in the same session and lasted between 1-2 hours. Participants chose where they wanted to participate, which was most often their place of residence or the study offices. Compensation of \$25 in the form of a gift card were given to those who completed the assessments. Interviews were audio recorded.

*Focus group.* In addition to conducting interviews with participants, a focus group was conducted two months following the end of the intervention that

included both women who had graduated from the intervention as well as those who attended a few sessions, but did not graduate. Questions were directed toward learning which components of the intervention were most helpful and recommended changes.

All efforts toward the Mothers & Families Project, including recruitment and data collection, were approved by the institutional review board at Portland State University.

## **Data Collection Measures**

### *Independent Variables*

*Intervention group assignment.* Healthy Family Project = 1; Community Services as Usual = 0.

*Gender.* Male = 1; Female = 0.

### *Dependent Variables*

*Relationship status.* All primary adult (PA) participants were asked to invite another adult (OA) to participate in the original RCT. The OAs were required to be involved in the focal children's lives, and were most often the romantic partner of the PA. Participants without a romantic partner were invited to instead invite a friend or family member to participate. Data related to changes in romantic relationship statuses for the primary adults (PA; corrections involved) in

the study were not specifically collected in the original RCT, leading us to construct a variable using three related and extant variables: (1) marital status, (2) relationship to the other adult (OA) identified to participate in the study and (3) whether the primary adult lived with the OA. These variables were collected at each of the three major study waves baseline, term, and follow-up allowing for a measure of change in relationship status over time (see Table 2). Once this variable was constructed, I conducted analyses to determine both stability and growth of the relationship status between the baseline and term assessments. Stability was indicated when the relationship status variable remained unchanged, while an increase indicated a growth in relationship status. The data were collapsed to conduct a logistic regression. For stability, 0 = no change, and 1 = any change regardless of amount and direction. For growth, 0 = no change, and 1 = any increase regardless of amount. (See Table 2).

<b>Table 2. Construction of Relationship Status Variable</b>			
Original HFP Variables		Calculation	Relationship Status Variable
(1) Marital Status (MS)	1 = Single 2 = Married 3 = Separated 4 = Divorced 5 = Widowed	0 = MS 1, 3-5, ROA 3-5, LOA 0 1 = MS 1, 3-5, ROA 3-5, LOA 1 2 = MS 2, ROA 3-5, LOA 0	0 = Single, no partner, does not live with the OA 1 = Single, no partner, lives with the OA 2 = Married, does not have partner who is OA, does not live with OA
(2) Relationship to OA (ROA)	1 = Spouse 2 = Partner 3 = Friend 4 = Relative 5 = Other	3 = MS 2, ROA 3-5, LOA 1 4 = MS 1, 3-5, ROA 1-2, LOA 0 5 = MS 2, ROA 1-2, LOA 0	3 = Married, does not have partner who is OA, lives with OA 4 = Single, has partner who is OA, does not live with OA
(3) Lives with OA (LOA)	0 = No 1 = Yes	6 = MS 1, 3-5, ROA 1-2, LOA 1 7 = MS 2, ROA 1-2, LOA 1	5 = Married, has partner who is OA, does not live with OA 6 = Single, has partner who is OA, lives with OA 7 = Married, has partner who is OA, lives with OA
<b>Dummy Variable Created</b>			
<i>Stability</i>	0 = no change		1 = any change regardless of amount and direction
<i>Growth</i>	0 = no change		1 = any increase regardless of amount.

*Home visits.* Home visits were conducted by paraprofessionals trained who were previously trained on intervention tools, attended classes with participants, and conducted home visits in order to help participants practice what they learned in class. In addition, although not officially part of the study protocol, home visitors provided connection to community services such as housing, childcare, and mental health services. These visits were measured by a count of all home visits that were participated in by the primary adult during the

intervention period. Because the CAU group did not have the opportunity to participate in home visits, separate analyses were conducted that (1) included the CAU families with a home visit count of 0 and (2) excluded the CAU families from analyses entirely.

#### *Control Variable*

The original analysis plan called to include a measure of risk into the models, to determine if level of risk had an impact. Risk level is important to consider given that women are generally determined to have lower levels of risk (as determined by the risk model adopted by the county in which these women were released). I did not have sufficient risk scores to run robust models due to incomplete data provided by the community corrections agency.

#### *Qualitative Data Coding and Analysis*

The semi-structured interview guide was generally followed, with the experienced interviewer prompting the participant for clarification or elaboration, as needed. When participants went off topic, the interviewer coaxed the participant back to the key questions on hand. Primary inquiries included social support within and without the scope of the intervention, specifically with agency professionals, as well as engagement and disengagement with current and past

romantic partners. A thematic analysis (Marshall & Rossman, 2011) was conducted using a hybrid inductive deductive-approach, primarily on a semantic level of what participants actually said. Authors first inductively analyzed interviews and focus group data attending to salient perspectives on social bonds during the reentry period including with family, friends and others. Next, I followed with deductive coding that narrowed the scope to relationships with romantic partners and agency professionals. I specifically sought responses from the mothers related to engagement or disengagement with romantic partner(s), and responses specifically related to home visits, home visitors (agency professionals) and possible outcomes related to home visits were sought.

A summary of the hypotheses, the associated variables chosen to test these hypotheses and the data source (HFP or MFP) are outlined in Table 3.

	Type	Variables	Source*	Notes
Hypothesis 1 Factors that influence gender differences include engagement in romantic relationships and engagement with intervention staff.	IV	Intervention Assignment	HFP	1 = Healthy Family Project, 0 = Community as usual
	IV	Gender	HFP	1 = Male, 0= Female
	DV	Relationship variable	HFP	See Table 2.
	DV	Engagement with intervention staff	HFP	Number of home visits conducted by project staff.
Hypothesis 2 Participation in a parenting intervention facilitates social bonds that promote prosocial behavior.	Qual	Temporal ordering of events (i.e. release, intervention participation, focal outcomes).	MFP	Focus Group Questions (See Script)
	Qual	Anything about the intervention that affected your personal outcomes?	MFP	MFP Follow-up Interview, Section I, Questions 5 & 6
*Healthy Family Project (HFP) consists of a sample of male and female corrections involved parents, and the Mothers & Families Project (MFP) consists of a sample of female corrections involved parents.				

## Results

### Quantitative Analysis

*Relationship Status.* Initial analyses determining if relationship growth and relationship stability (between baseline and follow-up) is predicted by intervention status and gender revealed a significant negative relationship between intervention assignment and likelihood of relationship status gain, and marginally significant negative relationship between intervention assignment and likelihood of relationship stability (See Table 4). This means that intervention participants were less likely to attain or maintain romantic relationships during the

study period. Participant gender alone did not significantly predict relationship growth or stability status in either analysis.

**Table 4. Summary of Logistic Interaction Analysis for Predicting Stability and Growth of Romantic Relationship Status by Intervention Assignment and Gender (n=132)**

Predictor	Growth			Stability		Odds Ratio
	B	SE B	Odds Ratio	B	SE B	
Intervention Group	-1.764*	.848	.171	-.992†	.539	.371
Gender of Primary Adult	-.214	.610	.808	-.162	.517	.850
Intervention Group x Gender	.740	1.125	2.097	.560	.741	1.750
Constant	-1.099*			-.143		
$\chi^2$		7.330			4.374	
df		3			3	

Intervention group predictor coded 1 for intervention group (HFP) and 0 for community services as usual group (CAU).

Gender of Primary Adult predictor coded 1 for male and 0 for female.

\*p < .05. \*\*p < .01. \*\*\*p < .001; † < .10

*Home Visits.* As mentioned in the data collection section, in order to determine if gender predicted engagement in home visits, we looked at (a) solely the intervention group (Table 5) and (2) the entire sample with 0 indicated for the amount of visits for the control group (Table 6). Both of these models indicate that women were significantly more likely to engage in the optional home visit component.

**Table 5. Summary of Analysis for Predicting Home Visit Participation by Gender (n=80)**

Predictor	<i>B</i>	<i>SE B</i>	<i>Odds Ratio</i>
Gender of Primary Adult	-3.003	1.051	-.308
Constant	9.439		
<i>R</i> <sup>2</sup>		.095	
<i>F</i>		8.167**	

Gender of Primary Adult predictor coded 1 for male and 0 for female.  
\*p < .05. \*\*p < .01. \*\*\*p < .001

**Table 6. Summary of Analysis for Predicting Home Visit Participation by Gender Including Control Group (n=152)**

Predictor	<i>B</i>	<i>SE B</i>	<i>Odds Ratio</i>
Gender of Primary Adult	-1.958	.795	-.197
Constant	5.676		
<i>R</i> <sup>2</sup>		.039	
<i>F</i>		6.064*	

Gender of Primary Adult predictor coded 1 for male and 0 for female.  
\*p < .05. \*\*p < .01. \*\*\*p < .001

### **Findings from Qualitative Responses**

In order to contextualize these findings, I turned to the qualitative data and conducted an analysis of interviews with recently released mothers who did and did not participate in the intervention. Demographics of the interviewees are outlined in Table 7 and are consistent with literature of mothers recently involved in the corrections system and with the original RCT with the exception of greater racial diversity.

**Table 7. MFP Respondent Characteristics**

Characteristic	Mean/Percentage	Range
<i>N</i> = 39		
Age at interview (#)	34.77	21-47
Children (#)	3.21	1-9
Respondent race (self-report)		
Black	23.1%	
White	46.2%	
Hispanic	10.3%	
Multiracial	23.1%	
Married (at time of interview) (0=no; 1=yes)	15.4%	
Romantic relationship (at time of interview) (0=no; 1=yes)	35.9%	

My analysis of these MFP data suggest that these groups (intervention vs. non-intervention mothers) experienced social support differently, thereby implying that the intervention may have played a role in facilitating social support. These findings can be summarized by the following and will be described further.

(1) Mothers who did participate in the intervention cited incidents of having greater social support compared to those that did not participate in the intervention.

(2) This social support was often cited as stemming from the intervention, including having a “safe” environment with other women with similar experiences (i.e. single, corrections-involved).

(3) Mothers who did not participate in the intervention reported greater incidences of negative social support as well as experiences of isolation compared to intervention participants.

It should be noted that the women in this sample largely identified as single, and therefore references related to current romantic partners and relationships were scant throughout these data.

#### *Mothers in the Intervention*

Mothers in the intervention referred more often to incidences of accessing social services, including housing, therapy, and medical care compared to mothers who did not participate in the intervention. Here, an intervention participant noted that while some components of the intervention were helpful (gas reimbursement, child care, meals), the most helpful component was the relationship with the home visitor who allowed the participant to call outside of the class time.

*... just where you guys met me. Like, you met me right where I was at and you helped me through every which-way I turned. And just the welcoming. The extra stuff was awesome, the food and the gas for people who had cars and the bus tickets and the child care was huge for me. But just the fact of, like I could call you guys on my personal time, it wasn't just specifically at class that I could seek out support that I needed. And it's still an ongoing thing. So it wasn't somewhere that I went just*

*to get a certificate. Like, it's become a part of my life.*  
(Participant 20)

In the focus group that we conducted following the intervention with mothers who had participated in the intervention, most of whom who had graduated, an intervention graduate describes the relationship outside of class helped in building trust and feeling cared for.

*Class did a lot for me. I mean, they met me where I was at. They called and checked up on me when I didn't call them. And that showed me, like, that trust, it started building that trust, like wow, somebody's really that concerned about me, and my children. It wasn't just all about my kids. It was about me too. You know, of being a healthy mother. (Focus Group, Intervention Graduate)*

She further describes how she began to understand the parenting class as being more than about helping her kids, that it was also aimed at helping her build skills that will impact her as a individual.

Several participants reported the intervention provides a place for mothers with similar experiences (i.e. single, corrections-involved). One intervention participant noted the “safe” environment where she can express herself outside of her family:

*It just made me feel good, I have somewhere to go, I can talk and socialize and just tell my feelings about whatever, about anything. Cuz a lot of times people don't understand, you need somebody to talk to outside your family. Outside your husband. Outside your kids, you know. Even sometimes outside your friends. Cuz*

*sometimes, you tell your friends something, you know, that's gonna go everywhere. I knew I was safe. Just like one of the ladies that was there had issues with her boyfriend that I knew, he used to be my boyfriend. She had kids by him, but you know, she cried and she expressed stuff. So, I think a lot of us felt there.* Participant 12

When asked if it was helpful to have people in the intervention who had gone through similar experiences, Participant 20 was unequivocal in her response.

*100 percent. I don't think that I would have been as open as I would have if I had been sitting in a class with women who are either married...cause I don't think any of us, except maybe one was married, so the women that were married and just had the dream that we all fantasize about. Like, I may have opened up, but my attitude would have been a whole lot different.* Participant 20

At least two other participants concurred:

*Yeah, it got me out, got me away into a real world setting with other women that had the same issues as I do.*  
(Participant 22)

*I liked listening to everybody's perspective... I liked to learn that I'm not the only one that struggles with parenting. And that it's real, and I don't have to be ashamed of it.* -Focus Group Respondent (Attended intervention)

*Mothers, No Intervention*

Mothers who did not participate in the intervention were less likely to refer to accessing social services or medical care and they were more likely to refer to experiences of isolation.

Parents (non-intervention) describing isolation, particularly as a young, single parent:

*...because I'm so secluded. I have a lot of trust issues and stuff and I don't think there's too much going on in my head to where I'm not making sense or anything, I know from my experiences why I feel the way that I do. I just kind of feel so secluded and I don't even want to compare myself to other people. You know, to the next 23-year-old female, because I probably may feel a little bit more intimidation, not necessarily jealousy, but just the intimidation of not knowing for sure if what I'm doing is what any other 23-year-old mother's doing. And because I don't know what they're doing, I'm not associated with other females of my age, a single parent or what not. You know, just not knowing what other people are exactly going through so it makes me kind of feel like I'm all alone. Participant 9*

Another non-intervention participant describes isolation, amplified by complex familial relationships.

*Basically I feel like I only have my mom here because that's basically who's only here. My sister's not here no more. If my sister was here than I probably wouldn't even talk to my mom. You know, I can love her, but love her from a distance. It's hard because I feel like I don't have no one here and my sister's not here and so I feel like I'm alone. Participant 26*

## **Summary of Key Results**

Analyses from both HFP and MFP data are inconclusive in determining if participating in the intervention assisted in sustaining or growing romantic relationships due to most of the sample identifying as single and rarely were currently seeking romantic relationships. Both MFP and HFP data support that home visits were beneficial. In HFP, women were found to be more likely to participate in the home visit component, suggesting that women's propensity to engage in home visits may explain some of the gender differences in the findings. Many MFP participants reported finding social support in the intervention, citing feeling supported and cared for. This support came from the home visitors, as well as other participants in the class who were experiencing similar life trajectories, which helped create a "safe" environment.

## **Discussion**

### *Romantic Relationships*

The effects of a romantic relationship during reentry may be more complicated to unpack for women than for men, which may explain why I did not have significant findings for either romantic relationship change or stability in these models. These findings suggest that there was a negative relationship between attaining or maintaining romantic relationships and intervention assignment, but gender did not make a difference in this finding. Classic social

bond theories have maintained that if persons leaving the corrections system are able to build a romantic relationship (“the love of a good woman”) that they are more likely to have positive outcomes (Laub & Sampson, 2003; Sampson & Laub, 1995). For women, it remains unclear if growing romantic relationships during the reentry period is a protective factor for effective reintegration, as it is thought of for their male counterparts. While classic social bond theories are primarily theorized based on male datasets, it has come to light that romantic (and other) relationships, and the outcomes related to these social bonds, during this period of reentry follow a different pattern for women, including some evidence that suggests that refraining from romantic relationships may lead to better outcomes for corrections-involved women (Leverentz, 2006). Maintaining or attaining romantic relationships, then, may correlate with positive outcomes while indicating adverse outcomes for women, but confirmation of this is beyond this project’s scope.

### *Home Visits*

Optional home visits may benefit women more than men primarily because they are more likely to participate and receive long term intervention. It is unclear how home visits are beneficial based on the HFP data, but data from the MFP interviews suggests that home visits may have the capacity to reduce barriers and improve participant access to community services, and may, in turn,

lead to the positive outcomes found in the intervention for mothers. Typical barriers to substance abuse and mental health programs include unawareness of availability, stigma, child care, and transportation (Begun, Early, & Hodge, 2016), and it is possible that home visitors were able to assist participants in problem solving and overcoming at least some of these barriers. Positive social support is likely a key to intervention for women in general, but it may play an especially important role for mothers' transitioning out of the corrections system who may find community with other mothers with similar, often stigmatized, circumstances. Parenting classes specifically for criminal justice involved parents, and possibly mothers-only groups, may have benefits. It should be noted that in other analyses based on the HFP sample, women in the HFP study were more likely to engage in services (medical, government assistance, housing), although an intervention effect was not found (Mowbray, McBeath, Bank, & Newell, 2016).

Using the Hirschi (1969), Sampson & Laub (1995), and Giordano et al's (2002) framework, I believe that the intervention assists in facilitating social bonds, through home visits as well as the class itself specifically because it reduces the barrier of stigma for corrections-involved mothers. These increased social bonds, according to these theorists, may be the mechanism within the intervention that supports better outcome for mothers. These data are assisting in "unpacking the black box"—or identifying the intervening mechanism between

the intervention and outcomes. Further, I found evidence that a parenting intervention specifically tailored to corrections-involved mothers was important in facilitating social support. This could be because of the stigma attached to corrections involved individuals, and particularly corrections involved mothers (O'Brien 2001), suggesting that a mainstream parenting class would not have provided the same supports.

### *Study Limitations*

While I can surmise that the Portland-based intervention (MFP) had similar positive outcomes for mothers as the Lincoln County-based intervention (HFP), this cannot be stated with complete certainty. It is possible that the women who had more social support to begin with were more likely to agree to the intervention. Only three women who had the opportunity to participate in the intervention refused, and the reasons cited were logistical (i.e. scheduling conflicts). This portion of the project is unable to speak to gender differences as the sample for the MFP project were solely mothers, given that there were not qualitative interviews of fathers.

Further, while it is well established that victimization is correlated with criminal behavior, the relationship is not fully explained (Cheney Lind 1997). A victimization questionnaire was included in the MFP assessment and nearly all

participants experienced significant and severe histories of trauma and abuse, from families of origin, romantic partners and within the corrections system. Little variation was found in trauma histories, and therefore was not included within this paper. Much of the sample identified as being single and therefore interpersonal violence was not often the most pressing concern as reported by this sample, although it had certainly been a core issue in their pasts. Future research should not overlook this essential component in understanding the impact of romantic partners in the lives and trajectories of corrections-involved women.

### *Conclusion*

Despite these limitations, I find evidence of the mechanism connecting the parenting intervention and positive—pro-social—outcomes: it may be the creation and facilitation of social bonds and support. This facilitation may be particularly potent for women, perhaps providing some explanation of the gendered improvements in employment and recidivism at follow-up assessment of the original HFP intervention. This also lends support to social bond theories suggested by Hirschi (1969), and Sampson & Laub (1995), but modified for women’s experiences (as suggested by Giordano et al., 2002). The intervention (which includes optional home visits) may mediate the additional stressors that come with mothering while transitioning back into the community, as well as assist in straddling barriers to gaining health and social services. In an upcoming

manuscript using these data, I will provide further exploration of the specific role children have during the reentry period for mothers (paper two of this dissertation).

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## **Paper Two**

### **‘Prison has nothing on this’: Negotiating and reconciling relationships with children after incarceration**

#### **Introduction**

Compelling narratives are the heart of OITNB, and they often reflect the current reality of women experiencing the corrections system during a period of unprecedented mass incarceration in the United States. Ninety-five percent of all persons who are incarcerated will return to the community (Hughes & Wilson, 2003) and will face daunting challenges in rebuilding their lives. In order to improve outcomes, including reduced recidivism, it is essential that we understand women’s experience of incarceration, and equally essential that we understand the experiences of community reintegration following incarceration. One important factor, that may influence incarceration and reintegration experiences, is that women who are incarcerated are significantly more likely to (1) be a parent to minor children and (2) be in an active parenting role at time of their incarceration as compared to their male counterparts (Bloom, Owen, & Covington, 2003; L.E. Glaze & Maruschak, 2008; Women in Prison Project, 2009). OITNB presents a few moving stories of motherhood while at Litchfield Penitentiary, including that of main characters Daya, Sophia, and Gloria. However, the scale and scope of incarcerated women’s relationships with their children, what they have to do to maintain those relationships, and what happens

with those relationships post-incarceration, are underrepresented in the television series.

Despite women comprising a small part of the corrections system overall, the rate of incarceration of women has increased by 700 percent between 1980 and 2014 (Carson, 2015) and despite recent declines in overall arrests for men and women in the past decade, this decrease has been more pronounced for men (National Resource Center on Justice Involved Women, 2016). Overall in 2013, 1.3 million women were involved in the federal or state corrections system (Glaze & Kaeble, 2014), making it necessary to identify whether there are unique predictors of desistance and successful community reintegration for women, to identify what these predictors are, and to develop social policies that implement strategies for addressing these factors. Criminologists have long emphasized the role of social bonds in affecting reentry outcomes after release from prison. While evidence suggests that social bonds such as marriage and employment are integral to successful reentry outcomes for men (Laub & Sampson, 2003; Sampson & Laub, 1995), there are conflicting findings about whether these same factors serve as predictors of the same outcomes for women. Evidence is mixed on whether social bonds and social integration are similar predictors or manifest in similar ways for reentry outcomes for women as compared to men (See Cobbina, 2010; Giordano, Cernkovich, & Rudolph, 2002; Giordano, Seffrin,

Manning, & Longmore, 2011; Huebner, DeJong, & Cobbina, 2010; Leverentz, 2006).

While marriage appears important for men's prosocial reentry experiences, research suggests that social networks and non-romantic social bonds may be better predictors of prosocial outcomes for women (Arditti & Few, 2008). It may even be beneficial for women to avoid romantic relationships during reintegration into the community (Leverentz, 2006). Examples of non-intimate relationships that may facilitate successful reentry include relationships with female family members (Valera, Chang, Hernández, & Cooper, 2015) and peers in treatment and reentry programs, as well as agency case workers and other professionals (Heidemann, Cederbaum, & Martinez, 2014; Bui & Marash, 2010). Given that women are much more likely to be in an active parenting role prior to corrections involvement as compared to men (Bloom, Owen, & Covington, 2003), childbearing and parenting may also be important catalysts for positive behavior changes among released women but less so for men (Edin & Kefalas, 2005; Giordano et al., 2002; Richie, 2001). Giordano and colleagues (2002) suggested that children may serve as a 'hook for change' for at-risk mothers, that is, relationships with children serve as an incentive for corrections-involved for mothers to change risky behaviors. Giordano et al.'s model suggests that these parent/children relationships may be more potent as 'hooks for change' for mothers compared to fathers. Meanwhile there is emerging evidence that children,

while sometimes providing prosocial motivation for mothers, also present emotional and logistical challenges during the often turbulent reentry period (Robison & Miller, 2016). Challenges facing adults reentering the community from incarceration are relatively well-documented, including maintaining sobriety, securing housing, and finding employment (Petersilia, 2003; Travis, 2005) but these challenges are often exacerbated for women, particularly because of the added challenges of rebuilding relationships and/or attaining custody of their children (Arditti & Few, 2008; Bachman, Kerrison, Paternoster, Smith, & O’Connell, 2016). The full scope of these challenges, and how they affect incarcerated mothers during their reentry experiences, has not yet been addressed in the literature; this serves as the motivation for this chapter.

To understand the challenges for women returning to the community from incarceration I interviewed 39 mothers recently released from jail or prison (within the past 12 months), some who are actively parenting their children and some who are not, to learn about their post-incarceration experiences, with an emphasis on their relationships with their children before, during, and post-incarceration. Classifying mothers as “actively parenting” was more difficult than I expected because these mothers were in transition, some were only living with their children part-time. For example, some women were intermittently staying with the same family member who cared for their children while they were incarcerated, thereby providing some parenting but not necessarily taking the

primary parenting role. This sample did represent a wide range of parenting practices, ranging from having no contact with children to gaining full and sole custody of four children immediately following release. Transcription, coding, and analysis of the qualitative interviews helps to unpack the seeming paradox found in the literature, that the role of children in the lives of community-supervised mothers is both that of motivation for positive change, but potentially come at a significant cost such as stress related to increased responsibility. Therefore, analysis in this chapter seeks to answer the following research question: How do formerly incarcerated mothers engage in relationships with their children and how do these relationships affect mothers' reintegration experiences?

### **Methods**

The focus for this chapter is a part of a larger study looking at the implications of corrections involvement for women who are parents living in the community in a large West Coast city. For this chapter, I look solely at mothers recently in jail or prison (<1 year since release), and I intentionally recruited mothers who are both actively and not actively parenting children (n=39). Participants were primarily recruited through parole and probation officers, but were also recruited through other community outfits such as the state Department of Health Services. I conducted semi-structured interviews with respondents over

two time waves (baseline and approximately 12 months following baseline), and, for each interview, they received a \$25 to a local big box store for their time. Interviews were broad in scope, but one section specifically solicited responses concerning relationships with children, both before and after incarceration. Questions included (a) if and how children provide motivation for change (i.e. desistance from crime and substance use), and (b) if and how children present stressors to women during the community reentry period. Interviews were transcribed, and both authors independently reviewed each of the transcripts using a thematic approach as described by Ryan & Bernard (2000) to identify common themes across the manuscripts. In order to address the primary research question, inductive analysis was conducted by both authors to find patterns in how mothers described their reentry experiences within the context of relationships with their children. Both authors discussed themes that emerged to come to an agreement on contextual meaning and reconcile differing interpretations. Themes were deductively sought related to children as motivators and stressors during the reentry period, and these comprise the findings reported in this chapter.

## **Findings**

### *Demographics*

The sample demographics (See Table 1) are not dissimilar to local and national statistics of U.S. women incarcerated in an urban setting (Glaze & Kaeble, 2014),

including a relatively young population and overrepresentation of women of color.

**Table 1. MFP Respondent Characteristics**

<i>N</i> = 39		
Characteristic	Mean/Percentage	Range
Age at interview (#)	34.77	21-47
Children (#)	3.21	1-9
Respondent race (self-report)		
Black	23.1%	
White	46.2%	
Hispanic	10.3%	
Multiracial	23.1%	
Married (at time of interview) (0=no; 1=yes)	15.4%	
Romantic relationship (at time of interview) (0=no; 1=yes)	35.9%	

The findings—discussed in detail below—provide confirmation for what other researchers have found regarding the reentry period for mothers: it is a particularly challenging time, and even more challenging if the mother is actively parenting or attempting to be reunited with children. Further, the influence of children on their mother’s behaviors and outcomes during this time is mired with complexity. Evidence was found that being a mother is an important motivator for positive change for these women. Nearly all mothers in the sample, regardless if

they are currently parenting their children, indicated that their children are their primary motivation for behavior change. These mothers also recognized the challenges that come with mending and rebuilding relationships with children after an absence, and having enough resources to adequately care for children. Roughly 20 percent of mothers in this sample made the choice to not seek full custody of their children due to recognizing that reunification may have a negative impact on both the children and themselves.

### ***Overview of Motherhood during Reentry***

Parallel to the literature, this sample of women are facing complex challenges in the post-incarceration period. These challenges include finances, transportation, attending and paying for education, and familial relationships.

*I don't receive financial aid, I don't have a job, I'm on all this assistance, I can't really afford my own rent, I don't have a car, I don't have a license, I have a bad record, so it's gonna make it complicated with me to find a job. Even with this vocational training, I can't find, like, the ultimate job for myself is still going to something that's there but not quite there, you know.*  
[Aurora]

These complex challenges were often exacerbated by parenting children.

*I'm just tired. I got a lot of stuff goin on at home. I'm just irritated because my son is acting out and, you know, legal stuff going on with him. And then my mom, and then my sister, (sighs), her trial is coming up. So I'm just like...school, midterms. I'm just really tired. I really don't take time to*

*take care of myself. I'm too busy taking care of everybody else right now.*  
[Miranda]

Here, this mother was balancing common reentry issues such as attending school and troubled family systems (sister with legal issues) with her teen child's adverse behavior and subsequent legal system involvement. These quotes highlight the complexity of often competing demands on time and resources: although children may be held out by many mothers as motivations to change, in many instances, these children contributed to substantial stress and aggravation during the reentry process.

#### *Parenting during Reentry*

Mothers who were actively parenting, when asked about the 'hardest thing' about being released, often mentioned that parenting their children after an absence is the biggest challenge they face during the reentry period.

*Parenting. I struggle with it every day. I struggle with guilt. That's where a lot of my stuff comes with [daughter]. I know what she's been through. I know I've put her through so much hurt. Both me and her dad have put her through so much that I feel like I owe her the whole world.*

This mother later mentions that parenting post-absence is even more difficult than prison.

*Prison has nothing on this. Because you would think prison is the hardest thing you'll ever face in your life and it's not.* [Kimberly]

Here, there is more evidence of the complexity of being a mother while attempting to adjust to life in the community after incarceration. Although typical representations of imprisonment suggest it is the most severe form of punishment (with the exception of the death penalty), for at least some of the respondents, it was the separation from their children, and the difficulties with reestablishing these relationships post-incarceration, that was really the most serious punishment they faced.

### *Children as Motivation (or 'Hooks for Change')*

This analysis suggests several important themes revolving around 'children as a hook for change.' These themes, discussed in detail below, include: (a) one's identity as a mother and its importance as a motivation for change; (b) children as motivation for achieving and maintaining sobriety; (c) the importance of self-care to allow the respondent to be an adequate parent; and (d) de-emphasizing romantic relationships to instead focus on parenting.

### *Identity as a Mother*

Having an identity as a mother was often cited as a motivation for change in this sample. When the women were asked what their biggest motivation for change, their role or identity as a mother emerged often, such as from Tabitha:

*It's for my kids but more than anything, it's like, I'm a mother. People always say, well you can't do it for your kids, you have to do it for yourself. But I think I do it for the fact that I'm a mother and I don't want to be a drug addict that just does whatever she wants. I think a lot of my life is just being a mom, so that's kind of the motivating... [Tabitha]*

Parallel to having an identity as a mother, concerns for their children's well-being and future also frequently served as motivation for the mothers in this sample as indicated by Esmerelda.

*Him [son]. I'm trying. I mean, that's my motivation, I just want to be able to raise him and don't have to worry about any probation, needing to do this and doing that. So I just want to hurry up and do everything so I can take care of him. [Esmerelda]*

### *Sobriety*

Mothers also consistently cited their children as being a primary motivator for specific pro-social behaviors, such as maintaining sobriety. Marissa explained that, similar to Esmerelda above, motivation for staying clean came in the form of wanting a better life for the child, something she felt during pregnancy:

*I was pregnant. And I knew, cuz this is what I knew. I knew I could keep going in my addiction and take her down with me or I could change and, you know, become the mother I wanted as a child. And so, I chose the latter. [Marissa]*

Lisa was motivated to stay sober, because she knew that if she didn't, seeing her child again would be unlikely, and this risk helped her persist through substance abuse treatment.

*And so I walked around with that shame for a while, but I had to, no matter what I was thinking, I had to stay sober. So I would do it a day at a time. Or a minute at a time. And I didn't have [daughter], I didn't know if I was going to see her again. So I have to stay sober to see her again. But the time from when I got arrested to the time that I did get to finally talk to her on the phone for the first time, it was like eight months. That whole time in recovery was the hardest in my life. [Lisa]*

Some mothers were concerned about how their older children would think or feel about them if they relapsed. Miranda describes staving off strong temptation to use drugs by thinking of what it would be like to explain her behavior to her children.

*Sometimes I've even gotten as far as walking down the steps. And I have to, like, are you nuts, where you going. And then I always think of "and then what." I tell myself, I'm gonna get this and this, but then what. And then then what's is what I don't like, so I don't do it. I really don't want to be explaining to my kids why I'm sittin' in county jail cause I got caught stealin' or selling some dope or in somebody's house getting' high. I really don't want to see or feel that. [Miranda]*

#### *Self-Care*

Some mothers recognized that taking care of themselves was necessary in order to take care of their children. For Marissa, the end goal of behavior change was to take care of her child, but the means of achieving that goal was to take care of herself.

*It's the most important. Well, my relationship with myself is more important because I gotta be right with myself, if I don't take care of*

*myself, I won't take care of her. But she's definitely the most important.*  
[Marissa]

### *De-prioritizing Romantic Relationships*

Nearly all the mothers in the sample were unmarried and identified as single.

Mothers often cited the needs of their children as their motivation to avoid romantic relationships. Parenting was viewed as all-encompassing, leaving little room for others. Aurora explains that focusing her attention on another person (such as a romantic partner), would be beneficial to neither her daughter nor herself.

*It's more important for me to just focus on me and her and just to focus on just doing the best that I can for us. Instead of trying to accommodate another person's needs and base my life off of that because it's not going to support my daughter and it's definitely not going to support me.*  
[Aurora]

Kimberly also described needing to avoid a romantic partnership, but also needing to limit friendships.

*Basically, since my incarceration, I've committed to raising my children. I feel as if I owe it to 'em and there's only so much time in the day. I don't have the time, energy, the patience, the attention span, like, to give to anybody else. And so the friends I have in my life are very few as well because my four children, they take all of me.* [Kimberly]

One married participant mentioned that she was expecting her husband to improve his behavior for the sake of their children, and that she was beginning to prioritize her children over her marriage.

*I'm satisfied [with my romantic relationship] but I think things need to change. Because there's a lot of things, cuz I've been through so much and my kids, uh, you know, I've been, my daughter lives here but my son is with his godmother not too far from here, but, I want, my kids have never been away from me. And my kids don't know nothing about me going to jail. They ain't never had to experience this, but last year I did 20 days, so, my kids are my priority, more than my marriage. And I don't want no arguing or no drinking, cuz I've seen that in my dad. [Coretta]*

### **Challenges of Parenting during Reentry and Post-absence**

While having an identity as a mother and caring for the well-being of their children motivated their behaviors during the reentry period, parenting children during this time simultaneously compounded other stressors mothers were experiencing during this time. Challenge cited with parenting during the reentry period including managing children's expectations and addressing children's behavior.

#### *Managing Expectations and Children's Behavior Post-absence*

When asked specifically about challenges with children, Miranda mentions that children's expectations have changed as they have grown older:

*Just reuniting. They're older now, I was gone a long time, so. Their expectations are different than when they were 2. So just that kind of stuff. [Miranda]*

Rhonda cites the challenges of reconciling what she can provide for her child as compared to the child's previous caregivers. While she was incarcerated, her child had access to more resources when living with his grandparents, and now has less,

including the need to sometimes share a room with her and her partner.

*I mean he's got way too many toys. Grandma and grandpa when they had him for his first three years, they spoiled him on everything. I mean, he knows where every toy aisle is in every store. And I can't compete with that, you know what I mean?...And I think he probably got out of the habit of being so neat is because of the fact that when we lived in that other place, when he lived with grandma and grandpa he had his own room, but when he lived in the other place, he shared a room with us. [Rhonda]*

She goes on to explain the difficulty of managing her child's behavior that resulted from her absence.

*Everything that he does to people, it's because of the fact that he wants me home, consistently. He wants me all to himself. He wants me, I mean, half the time he gets in trouble at school because he wants me to come pick him up. You know what I mean, so, nine times out of ten, the reason why he's acting out is because he wants my time. [Rhonda]*

Adverse and non-social behavior of the children due—at least in part—to separation was common in this sample. Esmerelda connects her son's current non-compliant behavior with feeling abandoned or confused due to caregiver changeover.

*Yeah, he won't listen. I don't know if he felt abandoned or if he is confused, but, or maybe my sister didn't work with him. But yeah, he is off the hook now. I'm trying to get back into the thing, showing him what to do right and not to do this and not to do that, but he's off the hook right now. So I'm just trying to work with him every day, being patient about everything. [Esmerelda]*

Another respondent, Lisa, had a daughter who engaged in age-inappropriate behavior due to anxiety around losing her mother again.

*She was anxious. She was tense, kinda skittish. She was, it took her awhile to get comfortable. She wanted to just, this last time when she first started visiting me at the shelter, she wouldn't get off my hip. And she's 8-years-old and I'm carrying her around like a 4-year-old. And she wouldn't let go. It was hard. She [sighs], well she sees now the potential danger in everything. Her childhood has been cut short. Lisa*

Respondents' children also seem to respond differently, at least partially as a product of their age. Whereas Lisa's young daughter acted much younger than her age, Kimberly's older children expected Kimberly to earn their respect again and they used her criminal background against her during family conflicts; they even threatened to report her to the authorities.

*My kids are very smart. When they're mad at me, they're throw out there, "You're just gonna go back to jail mom." [Laughs]. They want to hurt my feelings. And being that we live here, they know this is parole or probation housing, if they disagree with something, they'll be like, well I'm gonna tell on you. Or I'm gonna tell my teacher. [Kimberly]*

Fortunately, Kimberly goes on to explain some success she made with addressing her kids' behavior.

*There's a trust issue with both the two older ones because they remember the most of, you know, is mom really here to stay and how far can I push her and what can I get away with. But my kids make sure every day that they tell me they love me. And that just shows me that I'm doing my job. And then when I tell 'em no. I'm the mean mom, I'm the meanest mom in the world. And every time they tell me that, it just reassures me that I'm not parenting out of guilt anymore. [Kimberly]*

Although Kimberly achieved some success, these age-based differences in expectations of children for their mothers only adds to the complexity and stresses experienced by these mothers as they attempt to reintegrate themselves into the community after their incarceration.

### *Co-parenting*

Another challenge cited was learning to co-parent with the child's caregivers who were often still providing care during this time. For example, some women's parents were caring for their children, and upon release, they moved into their parent's home, thereby having to renegotiate their roles as adult children and as parents.

When asked if her mom, also her child's caregiver, has the same ideas about what should happen with her son, Sheila states:

*On some things. Because she's been dealin' with him more and knowin' his ways and his mood swings and his ups and downs and she got him into the [redacted] school, the academy, where they try to really help African American kids. She has more insight on his situation. So there's times where I don't see what she see, but, again, I don't try to step on her toes where she has already started because then that's just going to disrupt the whole program that was already going, so I kind of have to merge my way in it kind of. Because he listens a lot to versus me, he's like "Yeah, ok, yeah right. We'll see how long you're here." [Sheila]*

This respondent has to allow her mother to continue in the parenting role, as well as begin to establish a parenting relationship with her son, despite him not trusting

that she will be around long. This complicated role requires resumption of parenting while trying to collaborate with one's own parent, leads to additional stress and difficulty in the attempt to resume one's mothering role.

### **Mothering without Custody of Children, Recognizing Challenges**

Some mothers who were not actively parenting their children chose to not pursue having custody, because they recognized the challenges that could bring them.

*I think at first, like if I was to get both of them back right now, I think it would be a little challenging. I think [son] would try to push my buttons to try and see what he could get away with living with me. I think [daughter] might, even though [daughter] is like a really good kid right now, I think that she might like, try to possibly see what she could get away with.*  
[Callie]

However, this decision did not come without grief.

*My children are mostly grown, you know, but for the three younger ones? I mean, to live with them, I've already moved past that part, it's probably not going to happen again. But, yeah, just to have some kind of relationship. But, it's really not...(chokes up)* [Marcella]

When asked how important it was to have custody of her daughter, Johnna, who did not expect to regain custody of her daughter, explained that having a relationship is still important:

*It [child custody] would be the greatest thing. So it's very important, but I can't say that I'm actively...it's not what my drive is. But anything,*

*anything to do with her is very important. I would drop the world to, you know, to make sure that she was alright...I had her until she was 6. So, it's definitely, we have a spiritual bond no matter what, it's gonna take a lot to get back to that, but I know I'm not giving up on that knowledge that it's there somewhere out there in the universe still, you know, what we had. So, we, you know, building that with her again is very important to me.*  
[Johnna]

These experiences suggest that re-establishing tattered relationships with children remains a goal for some women, even if having custody is not an option. Children, then, may provide motivation for behavior change, even if the women are not planning on living with their children, because prerequisites for rebuilding these relationships often consist of safe housing and sobriety.

### **Discussion and Conclusion**

This sample of mothers reentering the community experienced the challenges that are commonly experienced by women reentering the community following incarceration, including securing housing, maintaining sobriety, and gaining employment. It follows that the fictional women of Litchfield Prison would have similar experiences to this sample of women once they are released. Having relationships with children provided motivation for this sample of mothers to increase pro-social behavior such as staying clean and sober and avoiding relationships that may be troublesome. Children served as motivation even for those who were not planning to live with the children again. Relationships with

their children, particularly if they had custody, compounded their challenges, however, and added additional obstacles such as having to mend a severed mother-child relationship and addressing a child's behavioral issues related to separation from his/her mother.

These findings support the growing conclusion that parenting following incarceration can be a motivator for change, or at least increase intentions to change behavior. Simultaneously, reassuming a parenting role after separation comes not only with the practical challenges of motherhood (Michalsen, 2011), it also requires mending emotional relationships with children who have experienced loss (albeit temporary) of a parent which can subsequently lead to adverse child behavior. These findings do not clarify whether relationships with children might predict women's desistance from antisocial behavior following incarceration, but I can report that all mothers in the sample indicated a desire to build relationships with their children, even if they were unable (by choice or legally) to assume custody.

More than expected, women in this sample noted that avoiding romantic relationships was necessary for them to stay clean, maintain relationships with their children, and avoid criminal behavior. Similar to my findings, Leverntz (2006) found that romantic relationships may hinder positive outcomes for female ex-offenders. This is in stark contrast to Sampson & Laub's (1995, 2003) thesis that delinquent men are more likely to desist from crime if they are involved in a

romantic relationship. This contrast is an important example of how criminological theories, which have been premised on men, cannot be unilaterally applied to women's experiences.

Since much criminological theorizing, and the attendant criminal justice policymaking, has been developed with a focus on men's criminal motivations and men's needs, this current research—pointing to the distinct role of motherhood for incarcerated females—suggests some policy recommendations that take notice of these distinct experiences for mothers. My research suggests policies that take advantage of motherhood as an important “hook for change,” while providing the resources to make this possible, and not yet another obstacle that the reentering mother must struggle to overcome. Therefore, policies meant to reduce recidivism among reentering women should consider providing more resources for housing, childcare, and job training and coaching. Further, because while resumption of the parenting role is so important for these mothers, there are often behavioral and emotional repercussions associated with the lengthy separation of mother and child. This suggests the need for other forms of parenting support directed at these mothers and their children, such as parenting classes and social and emotional counseling for both the mothers and their children.

Finally, to help maintain family bonds during the incarceration, I would also suggest resources directed toward the maintenance of family ties. Examples

of how these bonds may be maintained include financial incentives to support and encourage the child's caregivers to take the child to visit their mother during her incarceration, and the use of technology to allow for virtual visiting if distances are too far to travel. Together, these types of social policies might help to minimize disruption to the mother/child bond, and make the resumption of mothering roles less burdensome on the recently released mother.

While children are clearly important motivations and “hooks for change” in the lives of mothers who have recently been returned to the community following a period of incarceration, this desire to reconnect with one’s children creates some additional stress. Reentering mothers who seek to regain custody of their children face financial, familial, time, and emotional pressures associated with the resumption of their parenting role. These pressures add to the already complex and difficult reentry process experienced by all individuals returning the community and attempting to avoid a return to prison or jail. While children appear to be motivators for change, it is also clear that, along with the positives of parenting come many other obstacles that must be navigated if one is to successfully avoid subsequent recidivism. Representations of motherhood in OITNB hint that characters in the television series could face similar experiences with their children upon their release from Litchfield Penitentiary. Since nearly all of the women represented in the show are slated to be released at some point, perhaps an OITNB spin-off would provide an opportunity of increased

representation of reentry experiences of women and, in particular, mothers of minor children. Will Daya make the effort to regain custody of her child? If so, will it be worthwhile? How will Sophia and Gloria manage the inevitable challenges of making up for lost time as a parent? What resources will all of them have (or not have) access to in supporting their desired outcomes with their children? Does the motivation of wanting to be a mother help these women overcome the enormous challenges that come with reintegration into the community following incarceration?

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## **Paper Three**

### **Parenting and Depressive Symptoms of Corrections-Involved Women Reentering the Community**

#### **Introduction**

Corrections-involved women are more likely to experience mental health challenges compared to corrections-involved men (James & Glaze, 2006), and compared to women in the community. For example, anxiety, depression self-injurious behavior, and trauma-related diagnoses such as PTSD, are more prevalent among women in this population (Cabeldue, Blackburn, & Mullings, 2018). These mental health statuses have been demonstrated to be stronger predictors of women's recidivism than men's (Belknap & Holsinger, 2006; Benda, 2005; Bloom, Owen, & Covington, 2003; Van Voorhis, Wright, Salisbury, & Bauman, 2010). Incarceration has been found to worsen mental health statuses (Freudenberg, Daniels, Crum, Perkins, & Richie, 2005). Nearly all women who are incarcerated will return home and face reunification with family members often including their children, yet little information is known about how children impact their mother's reentry outcomes including their mental health statuses. Parenting is of particular concern for corrections-involved women because they are more likely to have a minor child and considerably more likely to be in an active parenting role at the time of their arrests compared to their male counterparts (Bloom et al., 2003; L.E. Glaze & Maruschak, 2008; Women in

Prison Project, 2009). Corrections-involved mothers, then, more often need to reconcile relationships with their children after separation compared to corrections-involved fathers. Given that corrections-involved women are more likely to experience poor mental health outcomes and have active relationships with their minor children, this project aimed to understand how relationships with children might impact mental health trajectories following separation due to incarceration.

## **Background**

Women have increasingly become incarcerated or under community corrections supervision over the last three decades. While women comprise a small part of the corrections system overall, the rate of incarceration of women has increased by 700 percent between 1980 and 2014 (Carson, 2015). Despite recent declines in overall arrests for men and women in the past decade, this decrease has been more pronounced for men (Carson, 2015; National Resource Center on Justice Involved Women, 2016). Overall in 2013, 1.3 million women were involved in the federal or state corrections system (Glaze & Kaeble, 2014).

Classic criminological theory has suggested that strengthening familial bonds may facilitate better outcomes (Laub & Sampson, 2003; Sampson & Laub, 1995), implying that relationships with children provides informal social control that may assist with desistance from criminal behavior. Other scholars have

posited that for corrections-involved women, children may provide a ‘hook for change,’ because the desire for their children to have good outcomes may outweigh antisocial tendencies (Giordano, Cernkovich, & Rudolph, 2002). Still others acknowledge that children present emotional and financial challenges that make the reentry process and change difficult for corrections-involved mothers, particularly when compounded with other daunting reentry challenges (Cobbina, 2010; Richie, 2001). Reentering persons are usually addressing substance use and mental health issues, facing housing instability or homelessness, and experiencing barriers to gainful employment (Bloom et al., 2003). Adding parenting to these competing demands likely complicates this process.

Pearlin’s Stress Process Model (Aneshensel, 1992; Pearlin, Menaghan, Lieberman, & Mullan, 1981) suggests that the increased demands associated with parenthood (i.e. housework and child care), coupled with lack of resources to meet these demands may lead to distress, and subsequently, adverse mental health outcomes such as symptoms of depression (Nomaguchi & Milkie, 2003). Women leaving the corrections systems are most often single and lack resources that ease the burdens of parenting such as access to child care, parenting skills, logistical support such as transportation to school, and social support to help cope with the struggles of parenthood. Based on the Stress Process Model (Pearlin, 1981), these increased stressors likely impact depression symptoms differently for actively-

parenting mothers compared to mothers who do not have custody of their children, and paper three explores this relationship further. Exploring how mental health outcomes are moderated by having custody of children broadens understanding of the desistance process for mothers. For example, if parenting does promote protective social bonds as posited by Sampson & Laub (1995, 2003), while simultaneously increasing depression symptoms of mothers, then policy designed to support mental health outcomes of reentering mothers would be warranted. If depression symptoms stem from lack of support while parenting, addressing this lack of support could boost the protective benefits of becoming a mother.

This project considers the interplay of motherhood and mental health trajectories following incarceration and during the community reentry process. This urban sample of recently-released corrections involved mothers included about half who had active custody of their children while the other half did not. I sought to learn (1) What levels of depression do corrections-involved mothers have following corrections involvement? (2) Do depression symptoms statuses change over time?; and (3) Do we find differences in depression symptoms in mothers who have custody of their children compared to those who do not have custody?

## **Methods**

Mothers were recruited who have recently been released from incarceration who do and do not have active custody of their children (n=39). Participants were primarily recruited through parole and probation officers, and were also recruited through other community outfits such as the state Department of Health Services. I conducted semi-structured interviews, as well as administering the Beck Depression Inventory (BDI; A. T. Beck, Steer, & Carbin, 1988) to measure depression symptoms with respondents over two time waves (baseline (BL) and a follow-up (FU) approximately 12 months following baseline). Interviews and assessments took up to two hours and participants received a \$25 gift card to a local big box store for their time.

Comparing actively parenting and non-actively parenting mothers allowed us to observe changes in context (parenting status) and outcomes (mental health) over time. For this paper, I included both baseline and follow-up interviews in the analysis and ‘actively parenting mothers’ were defined as mothers who had lived with their children for any period in the last 12 months at the follow up interview. The semi-structured interview guide was broad in scope and solicited responses regarding relationships with children both before, during, and following incarceration. Questions included (a) if and how children provide motivation for change (i.e. desistance from crime and substance use), and (b) if and how children

present stressors to women that may impact mental health outcomes during the community reentry period. The interview guide was generally followed, with the experienced interviewer prompting the participant for clarification or elaboration, as needed. When participants went off topic, the interviewer coaxed the participant back to the key questions on hand. A thematic analysis (Marshall & Rossman, 2011) was then conducted using a hybrid inductive deductive-approach, primarily on a semantic level of what participants actually said. Authors first inductively analyzed interviews attending to salient perspectives on parenting and mental health outcomes during the reentry period. Next, we followed with deductive coding that narrowed the scope to depressive symptoms during this same period. Based on variance I found in the BDI among parenting and non-parenting mothers (described in findings), we also sought passages that we thought improved understanding of the differences found between these groups. That is, how actively parenting children (or not) may affect the mental health outcomes of these mothers. For all qualitative data, we discussed themes that developed from the data to come to an agreement on contextual meaning and reconcile differing interpretations.

#### *Beck Depression Inventory (BDI)*

The BDI is a widely used and validated screening instrument to detect depression. The BDI has 21 items and consists of a series of ordered statements in relation to

particular symptoms of depression such as pessimism, past failure, loss of pleasure, and self-dislike (A. Beck, Steer, & Brown, 1996). For the purposes of the analysis, I did not consider clinical diagnoses of depression provided by the BDI. The BDI was used to calculate the frequency of self-reported depression symptoms at the baseline and follow-up interviews allowing for a measure of change over time. While this method does not capture clinically significant levels of depression, measuring depression as a continuous variable instead of a discrete variable has the advantage of increased precision and “allows for the full representation of the individual variation in depression” (Hankin, Fraley, Lahey, & Waldman, 2005, pg. 108; Mirowsky & Ross, 2002).

## **Results**

### *Demographics*

Sample demographics (See Table 1) at baseline are not dissimilar to local and national statistics of U.S. women incarcerated in an urban setting (Glaze & Kaeble, 2014), including a relatively young population and overrepresentation of women of color. Very few participants are married. Of the 39 baseline participants, 30 completed the follow-up interviews, with a range of 8-13 months following the baseline. Of the 30 mothers who completed both the baseline and the follow-up assessments, about half (n=16) lived with their children at all during the time between assessments.

**Table 1. Baseline MFP Respondent Characteristics**

<i>N</i> = 39		
Characteristic	Mean/Percentage	Range
Age at interview (#)	34.77	21-47
Children (#)	3.21	1-9
Respondent race (self-report)		
Black	23.1%	
White	46.2%	
Hispanic	10.3%	
Multiracial	23.1%	
Married (at time of BL) (0=no; 1=yes)	15.4%	
Romantic relationship (at time of BL) (0=no; 1=yes)	35.9%	

**Table 2. Mothers who Completed Both Baseline and Follow-up Assessments**

<i>N</i> = 30	
Mean Baseline BDI Score	14.2
Live with children (at all) between baseline line and follow up assessment	53.3%
Did not live with children (at all) between baseline line and follow up assessment	46.7%

*BDI Scores*

My analysis of change over time in depression symptoms on the Beck Depression Inventory indicates differences in mothers who lived with their children post-

incarceration (between baseline and follow-up interviews) compared to those who did not. Mothers who lived with their children between the baseline and follow up interviews reported higher overall rates of depression symptoms than mothers who did not live with their children in the 12 months prior to the follow-up interview, suggesting that having custody of children may impact the mental health outcomes of mothers during this time. This is indicated in three ways.

*(1) BDI Scores at Follow-Up Interview*

I compared stand-alone BDI scores at the follow up interviews for mothers who did and did not live with their children during the 12 months prior to follow-up. Mothers who did not live with their children in the last 12 months (as of the follow up interview) reported an average BDI score of 9.6 whereas those lived at least one month with their child(ren) in the past 12 months reported an average BDI score of 15.3. Given that higher levels of BDI scores indicates higher levels of depression symptoms, this suggests that corrections-involved mothers who live with their children following incarceration have higher rates of reported depression symptoms than do mothers who did not live with their children during that same period. These findings are marginally significant at the .10 level suggesting that with a larger sample I might find substantial disparity in reported

depressive symptoms of mothers who live with their children compared to those who do not live with their children among a corrections-involved population.

**Table 3. Comparison of Beck Depression Inventory (BDI) Scores for Mothers, by Whether They Lived with their Children in the Past 12 Months, at Follow Up Interview**

	Mothers, Did Not Live with Children in Last 12 Months	Mothers, Lived with Children in Last 12 Months
Average BDI Score at Follow Up Interview	9.6	15.3

*Source:* Mothers and Families Project data. N=30, t-value = -1.809 (p=.081)

*(2) Change in BDI Scores*

I found that in the entire sample, 56.7 percent of mothers reported an improvement, or a decreased score, in their reported depression symptoms between baseline and follow up interviews, suggesting that for most women reentering the community, depression symptoms improve over time. In Table 4, I show the changes in BDI scores between the baseline and follow up interviews comparing women who (at the follow up interview) lived with their children for at least one month out of the past 12 to women who did not live with their children at all in the last 12 months. Mothers who did not live with their children were more likely than those who did to show an improvement in BDI scores. Among mothers who lived with their children prior to the follow-up interview, 52.9% had a reduction in the amount of reported depression symptoms compared to their

baseline reports. In comparison, 61.5% of mothers who did not live with their children indicated improvement in their BDI scores (indicating reduced symptoms of depression). These findings were not statistically significant, likely due to the small number of cases.

**Table 4. Change in Depression (BDI) Scores, Baseline to Follow-Up Interview, by Whether Respondent Lived with Children Prior to Follow-Up Interview**

	Did not live with kids prior to follow-up interview	Lived with kids prior to follow-up interview
Depression did not Improve	38.5%	47.1%
Depression improved	61.5%	52.9%

*Source:* Mothers and Families Project data. N=30, chi-square = .222 (p=.462)

(3) Does Amount of Time Living with Children Matter?

To understand if the amount of time mothers lived with their children in the previous 12 months affected their depression symptom scores, I calculated a correlation coefficient between number of months (out of a possible 12) living with their child(ren) in the previous year and the BDI score at the follow up interview. The resulting correlation coefficient was marginally significant (p = .062) and positive, indicating that the more time the mothers lived with children, the higher their average BDI scores at the follow up interview. Therefore, not only does living with children result in higher amounts of reported symptoms of

depression, the more time spent living with children, the more depression symptoms are reported by those mothers.

### *Supporting Evidence from Interviews*

To illustrate how these differences in mental health outcomes unfold for corrections-involved women, I turned to the interviews that were conducted at the same time as the BDI assessments. Findings from the qualitative analyses largely supported the findings from the BDI analyses. Findings are organized by mothers who were actively parenting their children and those who were not during the assessment period (between baseline and follow-up). Separating these groups illustrates the varying emotional experiences between these two groups of mothers. Resumption of motherhood following incarceration as well as staying separate from their children results in somewhat distinct stressors that appear to impact the emotional well-being of mothers reentering the community. Most mothers from the sample, whether they were parenting or not, reported that their children served as motivators for prosocial behavior, such as sustaining recovery from drugs and alcohol. Custody of children, however, nearly always came with increased stress, including mending relationships with children following separation and financial strain. For non-actively parenting mothers, there is some alleviation of stress in knowing their children are being taken care of. Despite being mothers, those separated from their children can more often turn their

attention to addressing stressors of reentering the community with less familial strain.

### ***Actively Parenting Mothers***

#### *Children as Supports*

In some cases, children effectively serve as motivators for their mothers to change their behavior which can indirectly lead to improved emotional outcomes.

Rhonda, who had been incarcerated most of her life, explains how having her first child in her thirties changed her perspective and subsequently her behavior while she was serving her third prison sentence. Her child reduced her feelings of anger and disappointment after nearly a lifetime of violence, trauma, and subsequent incarceration.

*I never thought I'd ever change. I never thought I would ever get over being angry or hating the world and understanding that corrections officers are only there to do their job instead of making my life living hell. They're not making my life a living hell if I'm doing what I'm sposed to. And I never put that together until I had my son. That's what happened, I think my son just helped me heal.*

Rhonda's son was able to participate in a preschool that she could participate in while incarcerated that led them to grow their relationship during that period, and she was able to attain custody of him almost immediately after her release. She cites that having custody of her son requires her to manage her anger more often

and practicing this with her son has spilled over to her relationships with her partner and in her work environment.

Kimberly, who managed to regain custody of all four of her minor children, explained that she felt she had to get her children back in order to make a full recovery from addiction and to minimize her children's anxiety during the separation.

*I fought the system to have my kids. They said I wasn't ready and I knew that it was very important that my kids were back with me within a timely manner. Not only for my own recovery but for their own transition. And, so I didn't have to hear that, "Why can't you get us back?"*

For Kimberly, having custody of her children reduced her anxiety and worry about being separated from her children, particularly with her concerns about what her children were experiencing while separated from her. According to her account, reunification was a crucial component of her overall recovery and reintegration into the community. She adds that she is learning how to better take care of herself emotionally that allows her to better care for her children.

*Like I really believe I'm learning how to love myself, but to do that every day. To take care of myself first, so I'm able to take care of my children. And I became really cold-hearted over the years of not being hugged and not being loved...but something changed inside of me where I got out and I got my kids, it was really hard for me to hug my children, like I'd get shaky with, especially with the [oldest]. And I couldn't figure out why I was like that but eventually I realized it's because I didn't know how to love my own self.*

For some mothers, their children helped them avoid certain risk factors for

criminal behavior, such as entering abusive relationships. Patricia, for instance, explained that having her daughter live with her helped her avoid violent relationships (which had sometimes led to criminal behavior) because she did not want her daughter to have the same experiences. Refraining from abusive relationships was central to Patricia's emotional health and having her daughter in her home supported her in doing so.

*Every relationship has gotten better, but still looking back, everyone was abusive, just in different ways. But I learned from each one. But still. Now I now, hey, I'm not gonna let somebody treat me how I wouldn't want my daughter to be treated. Because obviously she'll follow in my footsteps.*

Children play a complex role in the lives of reentering mothers. These data show that children can play a positive and supporting role by providing motivation to engage in pro-social behavior, but I also learned that parenting during this time can present substantial obstacles during an already difficult transition period.

#### *Parenting Is Difficult During Reentry*

Parenting following separation was universally difficult for women who regained custody of their children, and women had to manage competing priorities, such as maintaining sobriety, with taking care of their children. When asked what challenges she was facing once being released, Marissa explained:

*Umm, just being a big girl I guess. I'm used to drugs and selling drugs and I didn't have any responsibility, you know. And I love my life now but sometimes it's really overwhelming, it's stressful. And I'm like, wow, I have responsibilities now. Am I going to make it? Am I going to fail? Can I go to school and be a single mom? Can I be a single mom? Just those types of things. Doing it all on my own with a child.*

Supporting herself previously was premised on using and selling drugs, and Marissa now experiences anxiety about not being able to make it in a drug-free environment, particularly as a single mother. This includes finding legal employment that is less lucrative than selling drugs, with the added strain of a child to care for.

Miranda explained that having custody of her son is compromising her ability to succeed now that she is out of prison, and that she is considering sending him to live back with her parents, where he lived during their separation.

*So I'm thinking I'm gonna make him go back to my mom and dad's cuz I can't, you know, I gotta do my own stuff too. He's 15. I can't hold his hand. He knows he's supposed to go to school. I don't know what he's thinking.... I'm here, I've been here. I'm consistent. I'm clean and sober. I ain't been back to jail. I'm working. So, I can't do any more than I'm doing and I'm not gonna put my recovery in jeopardy being all stressed out and behind. Family will get you every time. If you don't be careful, you'll fall back into those same old dysfunctional thinking traps and I'm not doing that to myself.*

She goes on later to explain her complex feelings about having her son live with her, and having to consider sending him to her parents:

*So right now, I'm kinda sad because I've gotten used to him being there and stuff and, you know, I center my day around me and him. And if he's*

*not there, I know I'm probably gonna get a little depressed and stuff but I ain't going to let it stop me, I gotta go to school and I gotta go to work.*

Outside of her parents, little social support was available for her as a single mom to meet her needs for a successful integration while parenting. While she finds comfort in having her son live with her, she recognizes that he requires more parenting than she can currently offer when she is trying to keep herself on track with school, work, and maintaining sobriety. For Miranda, making the difficult choice to send her son back to her parents means prioritizing her own mental health outcome (sobriety), despite feelings of sadness of not being able to care for her son.

For Kimberly, who previously reported that regaining custody of her children was crucial to her recovery, struggles to manage her own guilt and to be present for her four minor children.

*I struggle with [parenting] every day. I struggle with guilt. That's where a lot of my stuff comes with [my daughter]. I know what she's been through. I know I've put her through so much hurt. Both me and her dad have put her through so much that I feel like I owe her the whole world. ... Prison has nothing on what I go through on a daily basis to just be there for my kids. And, that was the one thing that when it came out of my mouth for the first time, like, "Prison has nothing on this." Because you would think prison is the hardest thing you'll ever face in your life and it's not.*

Parenting children who have experienced a separation from parent, usually under stressful circumstances, requires mending the relationship and addressing

behavioral issues related to the separation. Rhonda explains that her son sometimes initiates trouble at school in order to spend more time with her.

*Everything that he does to people, it's because of the fact that he wants me home, consistently. He wants me all to himself. He wants me, I mean, half the time he gets in trouble at school because he wants me to come pick him up, cuz I told him, "You get in trouble at school, I'm having your school call me" ...but he wants that because it's more time with me. You know what I mean, so, nine times out of ten, the reason why he's acting out is because he wants my time.*

Many actively parenting mothers explained that due to guilt about their past behavior, disciplining children is exceedingly difficult. Providing a structured environment that involves rules is challenging to maintain when also trying to address the hurt and anger the children feel due to the separation. Kimberly explains that this has been a process with her children.

*My kids are very smart. When they're mad at me, they're throw out there, "You're just gonna go back to jail mom." [Laughs]. They want to hurt my feelings. And being that we live here, they know this is parole or probation housing, if they disagree with something, they'll be like, well I'm gonna tell on you. Or I'm gonna tell my teacher. And that's where it's setting the boundary, where my kids, I know it will come, to where they respect me as their mother.*

Reuniting with children following incarceration brings a level of comfort for some of the mothers in this study. Children can provide motivation to improve the mother's own well-being (in the case of Kimberly) and to reduce behaviors that potentially lead to poor emotional outcomes, such as entering relationships with abusive partners. The benefits of reunification, though, do not come without the

cost of increased stressors. While all parents experience increased stress, single, corrections-involved mothers with very limited resources and social supports experience stressors with a higher severity—that likely have a negative impact on mental health outcomes.

### ***Mothers not currently parenting***

#### *Children as Supports*

Mothers who did not have active custody of their children shared some of the experiences that their actively parenting counterparts reported, including children serving as a motivator for positive changes. Even though Nicki was not currently living with her son, his feelings about her being incarcerated motivated her to deal with the considerable obstacles that she faced. She expects that becoming more stable will enable her to live with her children again.

*I appreciate his presence in my life a lot more. Because, like, my kids are a lot of my reasons for wanting to get it together and wanting to press forward and dealing with my housing situation and all these hassles. You know, because, I don't want to go back to jail and I know that my son doesn't and he worries about it. He voices his concerns, "Are you coming back tomorrow? You're not going back to jail, please, don't hit nobody..." You know what I'm saying? So, it's just, I don't know, that's my big thing. Everything that I'm doing is for my kids so that they can be stable so that I can be with them.*

Most of the non-actively parents in the sample either maintained a relationship with their children or hoped to in the future. For these mothers, children served in a similar motivating role that parenting mothers described.

### *Rebuilding Relationships with Children Is Challenging*

Also similar to actively parenting mothers, non-parenting mothers reported strain associated with the need to rebuild strained relationships with children following separation. When asked how the separation during incarceration affected her son's behavior, Tiana explains:

*It made him more attached to me and made him, he like, he's angry, and you know that he's angry, he just feels unsafe, unsecure, he doesn't know what the next day will bring. So I think that, if he's anything like me, and he sure does act like it, I think that he's just hurt and scared, and the only way to deal with being hurt and scared is to be angry because it's easy to be angry, than it is to be hurt and scared.*

Nicki who had full custody of her children before being incarcerated, found that once released her child could not understand why she could not live with him.

*I mean the whole situation, especially coming from being with my kids 24/7 to coming home and... My son, he's like, "That's my mom. I don't understand why my mom can't live with me." So, that's the biggest obstacle to him. Every time I visit him and have to leave I have to like put 20 minutes aside to tell him I'll be back, I'm not going to jail again.*

Despite these common experiences, the emotional strain related to reuniting with children was reported as considerably less acute with non-parenting mothers compared to parenting mothers. Non-parenting mothers were able to physically

separate themselves from their children more often than their parenting counterparts, tempering the burden. Mothers who were not actively parenting their children most often identified their current priorities within the context of personal stability and growth, sometimes with the goal of living with their children again, and sometimes not.

Sarah sees reuniting with her daughters as possible, but only after following a specific sequence of events including maintaining her faith, finding work, establishing housing, maintaining sobriety and working through lingering legal issues.

*I'm gonna continue living is my faith-based home. Putting God, I think, first, and giving myself a religious line helps keep me to walk in my every day, do what I need to do, it keeps me proactively looking for a job. And then the steps to recovery are going to reflect in the juvenile case that I have in court and the girls will come home with me, but I have to have stable housing first. But that's all gonna happen, you know.*

Even though Kendra misses her children, and they miss her, she feels she needs to have her life in order before taking the children back from her mother.

*I know they miss me. And they like to hear from me. They get all excited and happy when they hear from me, so. I could say, yeah, they miss me. I miss them a lot too. But I want to be ready to be able to take care of them when I do get them. I don't want to leave the burden with my mom forever, but, I want to be ready.*

Sarah and Kendra are prioritizing stabilizing her own life, including mental health aspects (sobriety) and spirituality, as they recognize that this is necessary before

even considering living with her children.

Non-parenting mothers often reported experiences of relief or peace when they know their children are in good homes, or at least better placements than they believe they personally could provide. Coming to this conclusion was usually reported as an ongoing process, but the further they were along in this process, the less strain they experienced related to their relationships with their children. When Marcella was asked if she had concerns about her children becoming connected to other caregivers, she explained she was concerned but had to eventually had to acknowledge that would occur.

*I was concerned. And then I finally accepted it. Because, I mean, she's doing what I can't. I was in prison for a good chunk of his life and she's raising him, she's there to make sure he goes to school, make sure he has clean clothes, make sure he eats. I mean, I can't be mad for her taking care of my son when I couldn't.*

Marcella's biggest challenge was maintaining sobriety and she was able to better achieve this without the strain of parenting.

Callie's anxiety regarding her children's living experiences was alleviated when she learned that her daughter became attached to her foster parents and was pleased that she was with loving caregivers since she was unable to play that role.

*I'm glad that my baby, she's attached to her foster parents. Which is really good, you know, I want her to have somebody that, you know, my whole thing was, if they're not with me, I hope that who they're with, they can attach with. Because that's something that I believe that they need. You know, because if I'm locked up and I can't be with them, like right now I'm*

*not with them, but I want them to have somebody that they can attach to. Somebody that is kind and caring and that they care about.*

Donita experienced shame and guilt both during and after incarceration about losing custody of her children, but over time made some peace with that outcome.

*Well sometimes I had a hard time calling my children because my one daughter would cry or there was things going on that I couldn't control and that would hurt me and it was just better than I didn't know things ...I felt so hopeless and powerless and a lot of shame and guilt that I wasn't there. I'm doing the best I can now. But I've come to the realization that I'm not a bad person because I lost custody of my kids. I'm to blame for that, but it doesn't make me a bad mom.*

It is important to note that coming to the conclusion that their children were okay, or even better off, in other placements was not easy to achieve for non-parenting mothers. Reconciling guilt and shame of not living with their children was difficult, but paid off for these mothers in greater emotional freedom that allowed them to focus on overcoming personal, rather than parental, challenges.

A strong theme that emerged for women choosing to not live with their children was an honest assessment of their situation. Some did not trust that they could maintain sobriety or refrain from criminal behavior. Protecting their children and themselves from the emotional fallout that would occur if they relapsed was priority for some mothers, and this seemed to lead to reduced anxiety overall.

When asked if she expects to live with her children again, Marcella explains that she wants to, and her son wants to be able to stay with her now. She

acknowledges, though, that relapse is not impossible for her and she does not want her son to experience the outcomes that follow such as another separation.

*I hope to live with him one day. He says all the time he wants to live with me, he doesn't want to be with his dad. He's like, "Mom, when are you going to get your own place? Let me come stay with you." I don't know son, cuz I don't. He's like, "Well, I hope you do, so that I can come and stay with you." And I don't know even if that time when I do would be a good time for me. Because, I can't say that once I move out of here, once I get my own place, I'm not gonna relapse. I pray to God I don't, but I don't know what the future is going to bring, you know. And I wouldn't want to lose him all over and put him through that.*

Similar to parenting mothers, non-parenting mothers in the sample received some of the benefits of having children as a motivation in their life. They also benefited from reduced burdens related to parenting, such as providing care and finances. Nearly all of the non-parenting mothers, though, reported having to work through the shame associated with mothers who choose not to, or not allowed to, parent their children.

## **Conclusion**

Women reentering the community following corrections involvement experience varying levels of mental health outcomes at least partially based on whether they are actively parenting their children. This was first demonstrated by comparing the reported depression symptoms (BDI) of women who lived with their children at all and those who did not live with their children at any time

during the assessment period. Mothers that did not live with their children at all during this time reported reduced depression symptoms compared to mothers that parented. Stand-alone scores of depressive symptoms at follow-up demonstrated similar results. Next, I found that the amount of time that mothers parented was positively correlated with depression symptoms. Given the small number of cases, any (even marginally) significant results are striking, and suggest that these results would have the potential to appear in the population of criminal justice-involved women—at least in the focal county.

These findings counter Laub & Sampson's (2003; 1995) findings that stronger familial ties provide informal social support that improve outcomes for corrections-involved adults. These findings are supported, however, by Pearlin's Stress Model (1981; 2005), that suggests that parents often experience greater depression symptoms compared to their non-parenting counterparts in a general population. In this model, mothers, and especially single mothers, experience greater levels of depression compared to non-parents and fathers. Depression symptoms, per this model, are associated with a greater burden of parenting, and are exacerbated by having less parenting resources including social support and finances. The vast majority of the sample are single mothers, and nearly all are resource-deprived with weak social supports, which is congruent with the Stress Model. One caution is that in contrast to the general population of parents and

non-parents studied in the Stress Model, this sample compares parenting and non-parenting mothers which is not a perfect comparison. The premise that actively parenting leads to greater stress which can lead to poor mental health outcomes still informs my findings.

### *Limitations*

Findings are based on a small sample, and caution must be taken before making broader conclusions based on these data. I did reach marginal significance in finding differences in groups using the BDI scores, suggesting that a larger sample might yield similar results. Despite the BDI scores and data from the qualitative interviews not being generalizable, I believe that the congruency between the BDI outcomes and the interview data strengthens my findings. The participant attrition rate of 23.1% between baseline and follow-up interviews is relatively low given the vulnerable population, nonetheless, my findings would have been more robust with a higher participation rate.

Most of the women shared with the interviewer that having their children served as an important motivator for behavior change. It is possible that social desirability influenced their responses, given the stigma attached to not fulfilling the role of motherhood, particularly with a criminal history (Kauffman, 2001; O'Brien, 2007; Sharpe, 2015). It is also possible that the motivation they claim to receive from children is entirely premised in a need to be socially accepted. Some

researchers have found, however, that poor and single women often find motherhood appealing, and sometimes found relationships with children more fulfilling than a long-term romantic relationship (Edin & Kefalas, 2005).

### *Discussion*

Interviews with parenting and non-parenting mothers suggest that challenges in the reentry process are exacerbated by actively parenting children. Both groups of mothers experienced reentry challenges, including maintaining sobriety, housing stability and addressing lingering legal issues. Women actively parenting their children, however, often reported that these challenges escalated with the additional responsibility of parenting, particularly following a traumatic separation. Non-actively parenting mothers, although facing similar stressors, more often reported that by accepting that their children were in safe and stable placements and that this appeared to free them to work on personal obstacles. Whether they chose to not parent their children or if they were not allowed to, guilt and shame was commonly reported. Mothers who were given support to reconcile these feelings, appeared to have a better chance at a successful community integration.

Despite some of the benefits of not having custody of children that were outlined here, this data also supported that parenthood can provide motivation in a mother's recovery process, perhaps even by serving as protective "social bonds"

as posited by Sampson & Laub (1995, 2003). It appears that most of the strain related to parenting, and subsequent mental health outcomes, was related to lack of resources including finances and social support for this primarily single mother population, which strongly supports the Pearlin Stress Model (1981) This suggests that for women to experience the benefits that parenting might bring them in this transitional stage, social supports need to be in place to improve their likelihood of a successful reintegration into the community. Resources that my sample could have used included affordable housing, respite care, and mental health counseling for mothers and children that specifically addresses the trauma related to separation. Per Pearlin's (1981) model, reducing the burdens that come with parenting by providing these supports will improve mental health outcomes, that will then support overall healthier community integration for corrections-involved women. Future research that determines what types of supports best serve mothers, parenting or not, following incarceration would be a worthwhile contribution to understanding how to best facilitate successful outcomes.

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## **Conclusion**

### **Summary of Findings**

This dissertation presents three papers that consider interrelated ways in which social bonds, within the context of parenting, are experienced by women recently involved with the corrections system. I considered social bonds with agency professionals, romantic partners, and children, all relationships that have been posited in the literature to affect the trajectories of women reentering the community following incarceration (Giordano, Cernkovich, & Rudolph, 2002; Laub & Sampson, 2003; Leverentz, 2006; Sampson & Laub, 1995). These social bonds are considered within the context of the challenges experienced during this period, and how and why these social bonds may—or may not—support women as they transition back into the community.

*Paper One: Parenting Intervention for Corrections-Involved Parents: Does Social Support Explain Why Mothers Have Better Outcomes than Fathers?*

Building on findings from a previously conducted RCT, paper one of this dissertation explored social bonds with romantic partners and agency professionals related to a parenting intervention and asks: How does the impact of participation in a parenting intervention vary for justice-involved mothers as compared to fathers? The original RCT included a unique sample of about 50 percent women and 50 percent men, which is uncommon in the criminology

literature, and allowed for a comparison across these groups. In order to unpack the unexpected gendered findings from a RCT (Bank, 2012) that corrections-involved women benefit from a parenting intervention more than their male counterparts, I hypothesized about two specific social bonds in the lives of these mothers and fathers. In paper one, I hypothesized that social bonds with romantic partners and/or agency professionals (“home visitors”) associated with a parenting intervention may provide a contextual explanation for the variant outcomes for men and women. Next, it was hypothesized that participation in the intervention facilitated positive social bonds for women that promoted positive outcomes during the reentry period.

My findings were inconclusive about the impact of a romantic partner for women during the study period. Notably, intervention participants, including mothers and fathers, were less likely to maintain or enter a romantic relationship compared to the control group, although there were no significant differences between mothers and fathers. Given that women had improved outcomes in the RCT, it is possible that these women experienced the positive outcomes, at least in part, because they tended to refrain from romantic relationships. Previous research strongly supports that women are likely to be influenced by male partners (Leverentz, 2006; Richie, 1996), and my findings provide some support for this finding. This further strengthens Giordano’s (2002) assertion that Sampson & Laub’s (1995, 2003) long-held findings that marriage as a predictor

of positive outcomes following deviance--likely does not hold true for women. Some researchers have explained this disparity using the process of assortative mating (Giordano, 2010). Since men are more likely to commit crimes than women, women are less likely to find prosocial partners, particularly when they have been involved in crime. This process can lead to increased likelihood of victimization by a male partner as well as a pathway to commit more crime, since women have shown to be influenced by antisocial male partners (Carbone-Lopez & Kruttschnitt, 2010).

Based on the literature that women may benefit from other social bonds, including agency professionals (Heidemann, Cederbaum, & Martinez, 2014), I looked to see if mothers in the intervention were more likely than fathers to participate in the optional “home visitor” portion of the intervention, which provided parent coaching and support, but also helped families problem solve other issues such as transportation and access to human services. “Home visits” were measured using two separate approaches, and both yielded the same result: women assigned to the intervention were significantly more likely to participate in optional home visits than men assigned to the intervention. This may mean that variant gender outcomes found in the original RCT may be at least partially due to women being more likely to engage in the optional “home visitor” component of the intervention, providing evidence to suggest that women are

more likely to benefit from relationships with agency professionals than their male counterparts as posited by Heidemann, et al. (2014).

Using qualitative interviews with mothers who did and did not graduate from the intervention, I found other factors that may provide further explanation of the RCT findings. Furthering the previous finding that women were more likely to participate in the optional “home visitor” program, women nearly always reported that the home visit component was helpful. Home visitors provided emotional and logistical supports that they could not get from other resources. Another strong theme found in the interviews was that the mothers were encouraged to attend the intervention because it was specifically for corrections-involved mothers. It became clear that most of these mothers would not have felt comfortable in a mainstream parenting intervention. These findings support the existing literature that corrections-involved women, and mothers in particular, can face stigma due to being perceived as contradicting the social role as mother by participating in crime (Kauffman, 2001; O’Brien, 2001; Sharpe, 2015), and further suggests that interventions tailored specifically to this group could yield better outcomes. Next, I turned my attention to these mothers’ relationships with their children.

Paper Two: *‘Prison Has Nothing on This’: Negotiating and Reconciling Relationships with Children after Incarceration*

Paper two qualitatively considered how and why parenthood during the reentry period can simultaneously provide social control (as framed by Hirschi (1969) and Sampson & Laub (1995, 2003)) as well as financial, emotional, and logistical strain. My sample also gave a unique opportunity to compare mothers who were and were not actively parenting their children. Here, I hypothesized that mothers who have higher levels of child custody between baseline and follow-up interviews are more likely to exhibit prosocial behaviors but may also experience increased stressors. Questions asked addressed quality of social bonds, relationship statuses, and certain behaviors such as substance use, criminal activity, employment status, service utilization, and mental health.

My findings largely supported my hypotheses. Nearly all women in this sample, regardless of custody levels of their children, reported that their children, or their identity as a mother, provided motivation for them to engage in pro-social behavior. Although there is not a comparison with fathers, this consistent finding at least partially supports Giordano's (2002) assertion that women are more likely than men to declare parenting as motivation to work toward improved outcomes. Women simultaneously reported the challenges that come with parenting during this period. Usually, these women are addressing multiple challenges in their life including maintaining sobriety, securing housing and employment, and meeting their parole requirements. I found that parenting, although providing motivation and focus for some mothers, further compounded an already difficult transition

period. One finding here, that as far I know has not been reported in the literature, is the specific parenting challenges that come following a traumatic separation. Researchers have noted that children of incarcerated mothers in comparison to children of incarcerated fathers are particularly at risk for adverse outcomes after the separation occurs (Arditti, 2005; Giordano, 2010). Since mothers are more likely to have been the caregivers, finding alternative caregivers is difficult. Children of these mothers are also more likely to experience behavioral problems, psychological distress and failure at school (Arditti, 2005). This pattern played out with children in my sample. Based on reports from the mother, as well as some observation by the interviewer, many of the children in this sample were experiencing emotional distress, challenges in school, and even criminal justice involvement. It is important to note that while the mother's incarceration was indisputably a traumatic event in the children's lives, it is likely that the children experienced many bouts of instability and trauma before they were separated from their mothers, and in many cases, this is not the first time they were separated (Giordano, 2010; Johnston, 2006).

Mothers in this sample described how relationships with their children needed to be mended including restoration of trust and reestablishing the role as a parent. Mothers struggled to balance the guilt of being separated from their children that sometimes led them to be lax with household rules, with the need for children to have structure and guidance. As noted previously, children's behavior

was often difficult due to the separation and traumatic history, and this made this balancing act even more daunting. Mothers also reported that they had to negotiate relationships with the previous caregiver of their children—those who provide care while they were away—particularly when these caregivers were family. For example, some mothers moved in with their parents following incarceration who were also taking care of their child, and this presented obstacles to reestablishing a role as a parent when the child’s grandparent has played that role for a significant period of time.

Various reasons explain why some of these mothers were not parenting their children. Some legally did not have the option, while others were working to get their children back. Still others made the conscious choice to not parent again, sometimes because their children were in good homes that they did not want to disrupt, and/or they were not confident that they could maintain sobriety and take on that parenting role again. These mothers more often reported that they were able to focus on their own challenges—and believed that taking on parenting would jeopardize their own success. Notably, these mothers still reported that having relationships with their children (if not custody) motivated them to improve their behaviors, as well as experiencing similar feelings of guilt and shame related to the separation from their children. Previous literature has not focused on relationships between children and mothers who are not able to or have chosen to not be parents post-incarceration. Further research is needed to

better understand how children still play a role in these women's lives and for a greater understanding of how these women are reconciling their identities and shaping their lives outside of a parenting role. My findings suggest that for some mothers, choosing not to actively parent, or coming to terms that they are not able to actively parent, could be at least part of a viable path to desistance. Paper three again compares parenting and non-parenting mothers, but looks specifically at how children may impact the mental health outcomes of mothers during the reentry period.

*Paper Three: Mental Health Outcomes for Corrections-Involved Mothers Reentering the Community*

The third paper considered the relationship between custody of children and mental health outcomes for mothers during the reentry period. Given that corrections-involved women are more likely to experience poor mental health outcomes and have active relationships with their minor children compared to corrections-involved men, paper three of this dissertation aimed to understand how relationships with children might impact mental health trajectories of mothers, specifically depression symptoms, during the reentry period. Using three measures of how much time mothers lived with their children between the baseline and follow-up interviews, along with a depression symptoms inventory assessment (BDI), I consistently found that the longer a mother lived with their

child, the higher levels of depression symptoms they reported. My findings suggest that mental health outcomes, or at least depressive symptoms, are moderated by having custody of children. This is a significant contextual finding in understanding how children impact the outcomes of reentering mothers, and Pearlin's Stress Model (Pearlin, Menaghan, Lieberman, & Mullan, 1981; Pearlin, Schieman, Fazio, & Meersman, 2005) sheds some light on this finding. This model suggests that increased stress, in the absence of appropriate buffers, can lead to poorer mental health outcomes, and in particular depression. Based on this model, others found that parenting is a stressful experience for most parents, but mothers, particularly single, low-resourced mothers experience greater amount of stress, and fewer buffers than their married or higher-SES counterparts (Nomaguchi & Milkie, 2003). Since MFP respondents are nearly all single and low-resourced, it follows that parenting, a universal source of stress, is especially stressful. This stress is heightened by their children being more likely to experience emotional distress, as well as behavioral and educational challenges (Arditti, 2005) as discussed in paper two. Without buffering mechanisms for these women, Pearlin's (1981; 2005) model predicts that these women are especially likely to report the attendant depressive symptoms. If reentering a parenting role does promote protective social bonds as posited by Sampson & Laub (1995; 2003), while simultaneously increasing depression symptoms of mothers, then policy designed to support mental health outcomes of reentering

mothers is warranted. If depression symptoms stem from lack of support while parenting, addressing this lack of support could boost the protective benefits of reentering the role of a mother. Further research is needed to better understand this complex relationship between motherhood and mental health, including the benefits and obstacles associated with resuming an active parenting role (or not) following incarceration.

## **Limitations**

### *Healthy Family Project*

There are several factors that may be considered limitations of this study. First, while it is possible to know the characteristics of the population that volunteers for this study, it is important to also understand the characteristics of populations who do not volunteer for this type of research in order to claim that findings are generalizable to a corrections-involved population. PI Bank of the original RCT did conduct an analysis of corrections-involved individuals who did not participate in the study in Lincoln County and did not find significant differences in the groups (i.e. age, level of criminal activity, substance use, income, etc.). In other words, there were no apparent differences between those who did and did not volunteer for the study based on these characteristics. Therefore, while this study may not be generalizable to the general population, it

can be surmised that results from HFP can be informative concerning corrections-involved individuals in a rural county.

Further, the HFP assessment did not directly ask participants if and how the intervention was helpful to them, and relied entirely on outcome variables. MFP asks the limited number of intervention participants if and how the intervention impacted them, but this is a small sample size. Further, this project uses HFP data for a purpose other than intended, although the research questions closely follow the original research questions of the NIDA-funded project.

#### *Mothers & Families Project*

While I can surmise that the Portland-based intervention (MFP) had similar positive outcomes for mothers as the Lincoln County-based intervention (HFP), this cannot be stated with complete certainty. It is possible that the women who had more social support to begin with were more likely to agree to the intervention. Only three women who had the opportunity to participate in the intervention refused, and the reasons cited were logistical (i.e. scheduling conflicts). This portion of the project is unable to speak to gender differences as the sample for the MFP project were solely mothers, given that there were not qualitative interviews of fathers.

### *Victimization*

While it is well established that victimization is correlated with criminal behavior, the relationship is not fully explained (Cheney Lind 1997). A victimization questionnaire was included in the MFP assessment and nearly all participants experienced significant and severe histories of trauma and abuse, from families of origin, romantic partners and within the corrections system. I found very little variation in trauma histories, and therefore did not include within the context of this dissertation. Further, much of the sample identified as being single and therefore interpersonal violence was not often the most pressing concern as reported by this sample. It is important to note that interviews were conducted out of earshot of any other individuals. Rarely was a romantic partner present in the home while completing the MFP assessments. This may partly be explained by most of the women indicating that they do not currently have a romantic partner. Nonetheless, a few partners were in the home (but out of earshot) during the interview process and this may have impacted the responses to the assessment, particularly questions concerning victimization.

### *Definition of Child Custody*

Papers two and three both addressed the issue of amount of time mothers spent with their children following incarceration. Measuring this time period presented more challenges than I first expected. It became apparent relatively quickly that the term “custody” is only used as a legal term by most of this

sample. Having “custody” of a child did not mean that a parent was living with that child, or even spending time with them. Many mothers in my sample had intermittent interactions with their children, even when they were not living with their children. Some mothers had multiple children that included a wide age range, sometimes with different partners, that led to multiple children of one mother in significantly different living situations. My best, albeit imperfect, solution was to ask mothers at the follow-up interview to estimate how many months they lived with at least one of their children in the last 12 months. Overall, this was an adequate measure but could not pick up scenarios where mothers may have seen children often, but were not actually living with them. Or conversely, where women were living with children, but were also living with the alternative caregiver (such as the women’s parent) and had little to do with the parenting of the child.

### *Social Desirability*

Most of the women shared with the interviewer that having their children served as an important motivator for behavior change in papers two and three. It is possible that social desirability influenced their responses, given the stigma attached to not fulfilling the role of motherhood, particularly with a criminal history (Kauffman, 2001; O’Brien, 2007; Sharpe, 2015). It is also possible that the motivation they claim to receive from children is entirely premised in a need to be socially accepted. Some researchers have found, however, that poor and

single women often find motherhood appealing, and sometimes found relationships with children more fulfilling than a long-term romantic relationship (Edin & Kefalas, 2005).

#### *Attrition Rate*

Findings are based on a small sample, and caution must be taken before making broader conclusions based on these data. The MFP participant attrition rate of 23.1% between baseline and follow-up interviews is relatively low given the vulnerable population, nonetheless, my findings would have been more robust with a higher participation rate. Future longitudinal research in this area would be better served by securing sufficient resources (i.e. staff time) for staying in consistent contact with participants to reduce attrition rates. Although it is worth mentioning that a perfect retention rate is likely near impossible considering the vulnerable nature of and transitional time in these women's lives.

#### **Discussion and Conclusion**

This project stemmed from the desire to decipher the unexpectedly gendered findings of HFP, the RCT conducted prior to this work on this dissertation. HFP was groundbreaking in that it provided a nearly 50 percent comparison of mothers and fathers, which allows for gendered comparisons and is sorely lacking in the criminological literature. Here, women experienced better

outcomes in recidivism and employment status as compared to a control group and to men in the intervention (Bank, 2012). My follow-up findings suggested that women were more likely to engage in an optional “home visitor” component of the research study, which may explain some of the variance in outcomes as “home visitors” provided emotional and logistical support that the mothers benefited from, as described in interviews with participants of MFP. Since qualitative interviews could not be conducted with the HFP sample, I was not able to get the perspective of fathers, including why they were less inclined to take advantage of the full services of the intervention, and future research should investigate this further. Nonetheless, learning that women were more inclined to take advantage of, and benefit from, this component is noteworthy. If indeed the home visitors, in conjunction with the parenting intervention, were key to the positive outcomes I found for mothers, this could have tremendous potential to better help parenting mothers leaving the corrections system.

My findings also help confirm that social bonds are necessary for the desistance process as long suggested by Sampson & Laub (1995, 2003) because social relationships help support a gradual increase in social investments that make deviant behavior riskier. The primary examples that Sampson & Laub (1995, 2003) cite as beneficial social bonds are marriage and consistent employment. Giordano (2002) noted that while Sampson & Laub’s (1995, 2003) concepts of social bonds are helpful to understanding desistance, the findings

were based on a sample of entirely men, and that the social bonds that most benefit women function differently than those that benefit their male counterparts. They found that women were more likely to name their children and spirituality as their primary motivations for changing behavior. My outcomes at least partially support Giordano's (2002) assertions, as nearly all the mothers in this sample name their children as their motivation for change, and romantic relationships did not necessarily predict better outcomes for women in this sample. For women, relationships with children may serve as better investments than a marriage. Although as noted through these papers, children also provide stressors that might challenge any benefit that comes with the increased social bonds. While Sampson & Laub (1995, 2003) and Giordano (2002) both facilitate understanding of social relationships in the desistance process, neither quite account for the stressors that attend these social bonds. My findings demonstrated that actively parenting mothers had increased depression symptoms compared to non-actively parenting mothers, and consistently reported the difficulties that children add to an already difficult transition period. Improved models of desistance that build on these theories of informal social bonds that account for gender and interaction with social stressors would help us shape improved policies that are better tailored to the experiences of corrections-involved women and their children.

Giordano (2002) also noted that Sampson & Laub's (1995, 2003) theory of informal social control does not take into account the "upfront" work that desisting individuals must undergo, called "cognitive shifts" (p. 991). For some individuals this means shedding antisocial identities (i.e. addict, criminal) for prosocial identities (i.e. mother, employee). Future scholarship would be worthwhile to detect if undergoing a cognitive shift to adopt an identity of "mother" is supportive of desistance, and if an identity of "father" yields similar outcomes. My findings suggest that the motherhood identity would be more potent in predicting positive outcomes, but further work is needed.

MFP interviews demonstrated that women reported being in a non-mainstream parenting intervention was essential to their success, because they would not feel comfortable participating in an environment where they might feel a stigma for being corrections-involved mothers, another noteworthy finding for future intervention development. Perceiving stigma as a correction-involved mother is founded as the literature suggests that corrections-involved mothers are judged more harshly than correction-involved males in relation to their role as parents (Kauffman, 2001; O'Brien, 2001; Sharpe, 2015).

I learned in papers two and three, consistent with the literature, that these women almost universally reported that their children serve a motivation, or an anchor, for them to improve their lives as reported by Giordano (2002) and others. While it is possible that these women reported this to achieve social desirability

and to buffer stigma, I generally perceived these reports to be genuine sentiments during the interview process. Also learned in papers two and three was that the motivation that children provide cannot always help women overcome the logistical and mental health challenges in their lives. Children of these women have experienced separation and other traumas, and their behavioral, mental health, and educational outcomes reflect those experiences. Parenting is always difficult, but being a single, low-resourced mother of children with behavioral and other challenges, parenting can approach being impossible. In order to capitalize on women's increased likelihood to be motivated by their children, better understanding is needed to provide improved resources to these reconciling families. For example, the promising findings in the original RCT, in addition to my follow up findings in MFP, suggest that mothers, when given basic support and a stigma-free environment, can improve their outcomes compared to both corrections-involved fathers who received the same intervention and a control group. Other projects have shown similar potential including a emotion-focused intervention for mothers reuniting with their children following incarceration (Shortt, Eddy, Sheeber, & Davis, 2014) that saw reduction in mother's criminal involvement compared to a control group.

Some mothers in the sample were able to make an honest and sober assessment of their situation and made the choice not to parent. Still others had this decision made for them, either by alternative caregivers or the State.

Including these mothers in this investigation is novel within criminological research, and these findings suggested that children still play a role in how these women perceive their lives and their identities. Policies that support re-building relationships of non-parenting mothers and their children, without the goal of living together, may have potential to improve the outcomes for both the mothers and children. When appropriate, giving children the opportunity to know their mothers still care for them, and allowing the mothers to demonstrate that they still care and are present for them, could improve emotional outcomes of both.

Including these non-actively parenting mothers also allowed us to learn that they are less likely than their actively parenting counterparts to experience depressive symptoms. This has two important implications (1) for some mothers, making the choice, or having the choice made for them, to not actively parent may lead to improved mental health outcomes and (2) mothers who choose to resume a parenting role need increased supports to buffer the stress related to parenting that lead to depression symptoms. As outlined in paper 3, Pearlin's Stress Model (1981, 2005) helps us understand this finding. Chronic stress can lead to depressive symptoms, and parenting is always a stressful experience. Lower resourced single mothers are at most risk to experience increased stress, thereby predicting increased depressive symptoms. Further research is needed to tease out the differences in outcomes between mothers who chose not to parent and those who had the choice made for them, as I would expect some nuanced

differences in mental health outcomes and was beyond the scope of this dissertation.

Arditti (2006) recommended that parole officers may be an important resource when considering interventions and policies that specifically support incarcerated mothers. It was surmised that given the already paramount role that parole officers play in the lives of these women, they may be better situated to support what she calls the “triple threat” of what women face when they leave prison (depression, violence and addiction) compared to social workers. Similar to Arditti (2006), my sample often reported positive relationships with their parole officers, therefore, they may also be able to prioritize helping mothers (parenting or not) facilitate relationships with children as appropriate. Parole officers may be able to better accommodate parenting mothers in order to reduce their stress outcomes. Obligations to parole officers can be difficult to meet for parenting mothers, and officers that make accommodations for mothers with children (such as child care, transportation, flexible scheduling) may see better outcomes.

Finally, further understanding the relationships between corrections-involved mothers and their children may help build strategies to reduce the intergenerational transmission of criminal behavior often found in families (Dallaire, 2007). If children are indeed motivators for corrections-involved women, then one strategy may be to assist in reducing challenges that women face in “reclaiming” motherhood following corrections involvement. This has not only

potential to improve outcomes for these mothers, but any improvements for mothers very likely translate into better outcomes for their children and potentially break long-standing family patterns.

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