I’m still your Mum:
Mothering inside and outside prison

A thesis submitted in fulfilment of the requirements for the degree of Masters of Arts (Research)

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March 2013
Candidates Declaration

This thesis contains no material which has been accepted for the award of any other degree or diploma in any other university or institution. To the best of the candidates knowledge the thesis contains no material previously published or written by another person, except where due reference has been made in the text of this thesis.

Except where due acknowledgement has been made, this thesis is the work of the author alone. Ethical procedures and guidelines have been followed.

This thesis has not been submitted previously, in whole or in part, to qualify for any other academic award in any other University either in Australia or in any other country.

The content of this thesis is the result of work which has been carried out since the official commencement of the approved research program.

Signed

Una Stone

31/03/2013
Acknowledgments

My sincere thanks to my supervisor Marietta Martinovic whose encouragement, friendship and endless support contributed so much to this thesis. My heartfelt thanks also to Dr. Margaret Liddell who provided wisdom and guidance over the entire time frame and who eagerly stepped into the foreground when Marietta took maternity leave. Her patience and encouragement saw me complete this thesis with a minimum of stress. Both women kept me focused and enthusiastic during an extremely busy period.

My sincere thanks also to my manager Alan Ogilvie for understanding the effort required to write this thesis, and affording me the time to complete it. Without his support this thesis would not have been completed.

Particular thanks must be extended to the professionals interviewed for this research. Their time is invaluable and I appreciate every minute they provided me. Their commitment to the women they support, their enthusiasm and their energy are infectious. It amazed me to find such a high morale in organisations where workers often seem to face despair on a daily basis. They were willing to share their experiences and concerns with me and did so in a highly professional manner. I must acknowledge also the kindness of those who introduced me to them, and recommended my research.

Finally I must acknowledge my family for their understanding and patience during what was a difficult time for us all.
### Abbreviations

<table>
<thead>
<tr>
<th>Abbreviation</th>
<th>Full Form</th>
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<tr>
<td>ABS</td>
<td>Australian Bureau of Statistics</td>
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<tr>
<td>ACT</td>
<td>Australian Capital Territory</td>
</tr>
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<td>ADCQ</td>
<td>Anti-Discrimination Commission Queensland</td>
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<tr>
<td>ADHD</td>
<td>Attention Deficit Hyperactivity Disorder</td>
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<td>AIHW</td>
<td>Australian Institute of Health and Welfare</td>
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<td>ANCD</td>
<td>Australian National Council on Drugs</td>
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<td>CCATS</td>
<td>Child Care And Transport Subsidy Program</td>
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<td>CCO</td>
<td>Community Corrections Order</td>
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<td>CHMS</td>
<td>Corrections Mental Health Screen</td>
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<td>CHRIIP</td>
<td>Centre for the Human Rights of Imprisoned People</td>
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<td>CRC</td>
<td>Criminal Record Check</td>
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<td>Criminal Record Number</td>
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<td>DCPC</td>
<td>Drugs and Crime Prevention Committee</td>
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<td>DHS</td>
<td>Department of Human Services</td>
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<td>DoJ</td>
<td>Department of Justice</td>
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<td>DPFC</td>
<td>Dame Phyllis Frost Centre</td>
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<td>DUMA</td>
<td>Drug Use Monitoring in Australia</td>
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<tr>
<td>FaHCSIA</td>
<td>Department of Families, Housing, Community Services and Indigenous Affairs</td>
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<td>FSS</td>
<td>Family Support Service</td>
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<td>MADD</td>
<td>Mothering at a Distance Program</td>
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<td>MCM</td>
<td>Melbourne Citymission</td>
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<td>NCCD</td>
<td>National Council on Crime and Delinquency</td>
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<td>NGO</td>
<td>Non-Government Organisation</td>
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<td>NSW</td>
<td>New South Wales</td>
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<td>NZ</td>
<td>New Zealand</td>
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<td>ORT</td>
<td>Opiate Replacement Therapies</td>
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<td>PFI</td>
<td>Parenting From the Inside</td>
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<td>PTSD</td>
<td>Post Traumatic Stress Disorder</td>
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<td>PUP</td>
<td>Parents Under Pressure parenting program</td>
</tr>
<tr>
<td>QLD</td>
<td>Queensland</td>
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<tr>
<td>SA</td>
<td>South Australia</td>
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<tr>
<td>SMR</td>
<td>Standard Morbidity Ratios</td>
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<tr>
<td>UK</td>
<td>United Kingdom</td>
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<td>USA</td>
<td>United States of America</td>
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<td>VACRO</td>
<td>Victorian Association for the Care and Resettlement of Offenders</td>
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<td>VWMP</td>
<td>VACRO Womens’ Mentoring Program</td>
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<td>WA</td>
<td>Western Australia</td>
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<tr>
<td>WISP</td>
<td>Womens Integrated Support System</td>
</tr>
</tbody>
</table>
# Table of Contents

Candidates Declaration.................................................................................................................. ii
Acknowledgments .......................................................................................................................... iii
Abbreviations ................................................................................................................................ iv
Table of Contents .......................................................................................................................... v
List of Tables ................................................................................................................................. vii
Abstract .......................................................................................................................................... 1

**Chapter One:** The focus of the research .............................................................................. 2
  1.1 Introduction ....................................................................................................................... 2
  1.2 Background to the research ......................................................................................... 3
  1.3 Context of the research: The Victorian landscape ....................................................... 5
  1.4 Rationale for the research ............................................................................................ 9
  1.5 Scope of the research ................................................................................................... 10
  1.6 Objectives and Research Question ............................................................................ 10
  1.7 Structure of the Thesis ............................................................................................... 11

**Chapter Two:** Ignored or forgotten: The cycle of women’s lived prison experiences. . 12
  2.1 Introduction ..................................................................................................................... 12
  2.2 Early focus on incarcerated mothers and their children ........................................... 13
  2.3 Mothering inside prison ............................................................................................... 17
  2.4 Mothering outside prison ............................................................................................. 31
  2.5 Conclusion ..................................................................................................................... 40

**Chapter Three:** Trying to make sense of it all... ................................................................. 41
  3.1 Introduction ..................................................................................................................... 41
  3.2 Feminist Theory ........................................................................................................... 42
  3.3 Labelling Theory .......................................................................................................... 47
  3.4 A Qualitative research methodology .......................................................................... 49
  3.5 The research method .................................................................................................. 50
  3.6 Thematic analysis .......................................................................................................... 57
  3.7 Ethics approval ............................................................................................................. 58
  3.8 Reliability & Validity ................................................................................................. 58
  3.9 Conclusion ..................................................................................................................... 59

**Chapter Four:** Women on the margins .................................................................................. 61
4.1 Introduction............................................................................................................. 61
4.2 Profile of the professionals clients........................................................................... 62
4.3 Women with lived prison experience: On the Inside.................................................. 63
4.4 I’m still your Mum – challenges on the outside....................................................... 69
4.5 The daily reality of working in the sector............................................................... 80
4.6 Theorising womens experiences............................................................................... 86
4.7 Conclusion............................................................................................................... 95

Chapter Five: Spreading the net: Multiple marginalisations........................................... 97
5.1 Introduction............................................................................................................. 97
5.2 Mothering from inside prison..................................................................................... 98
5.3 Mothering post-release .......................................................................................... 105
5.4 The daily reality of working in the sector ............................................................... 110
5.5 Multiple marginalisations....................................................................................... 113
5.6 Conclusion............................................................................................................... 115

Chapter Six: Interrupting the cycle .............................................................................. 116
6.1 Introduction............................................................................................................. 116
6.2 Strengths and Limitations ..................................................................................... 116
6.3 Addressing the research questions: analysis and results .......................................... 118
6.4 Recommendations from this research.................................................................... 126
6.5 Further research ................................................................................................... 128
6.6 Conclusion............................................................................................................... 129

References................................................................................................................... 130

Appendices.................................................................................................................. 151
List of Tables

<table>
<thead>
<tr>
<th>Table No.</th>
<th>Title</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>3.1</td>
<td>Table of Professionals</td>
<td>53</td>
</tr>
<tr>
<td>3.2</td>
<td>Typical Client Profile by Professional</td>
<td>63</td>
</tr>
</tbody>
</table>
Abstract

In Victoria over the last decade, the rate of female incarceration has continued to rise. This is despite some attempts by government to address recidivism through gender responsive policies and programs. Of specific concern is that the majority of women prisoners are primary carers for their children. Hence, their incarceration splinters the family unit and can perpetuate the intergenerational cycle of offending.

This thesis studies the impact of maternal incarceration and the issues associated with reunification of the mother and her children. In particular it examines the issues which mothers face in mothering, both inside and outside prison. The information was gathered from the perspective of those professionals who support mothers with lived prison experience. It examines the daily challenges they face in supporting these mothers. Using purposive sampling, six professionals were selected for interview. Standpoint feminism underpins the research because it is concerned with facilitating change to address political and social structural disadvantage. Labelling theory was also incorporated as it is an important theoretical consideration when examining discrimination of women with lived prison experience.

This research demonstrates the multiple marginalisations of mothers in the criminal justice system. It also highlights the limited services available to them inside and outside prison, inadequate funding for services and inexperienced case managers both inside and outside prison. The research shows that little has changed in almost fifty years; the typical profile of the mothers’ show they still come from backgrounds characterised by disadvantage (such as poverty, homelessness, and physical abuse) and their offences are mostly non-violent. Furthermore, core problems that mothers face in regaining custody of their children remain the same, which invariably results in a failure for many of them to regain custody. Recommendations from this research include abolishing short custodial sentences, housing prioritisation for mothers exiting prison, and policy reform to prioritise funding for drug rehabilitation services both inside prison and in the community to ensure continuity of support post-release.
Chapter One: The focus of the research

I’m no longer a wife or a mother...just a number.... I breathe! .............
I am slowly dying. Becoming all I can be! I am not just a number, but a
woman, a real person, someone’s mother! Not just a number...not just
a number....

(Talvi, S. 2007, P.xx1)

1.1 Introduction

The above quotation exemplifies the grief and shame which incarcerated mothers experience through being separated from their children. It also highlights how worthless they feel when they can no longer identify as a mother, and when they can no longer care for their children. How the mother copes with her incarceration has a profound effect on her success or failure to maintain the mother-child relationship from inside prison. Further, how the mother copes with separation from her children has a profound effect on her success or failure to regain custody of her children on release (Easteal, 2001; Richie, 2001; Goulding, 2004; Arditti & Few, 2006; Hannon, 2006).

Whilst it has been argued that the criminal justice system is largely a male domain, it can also be argued that child welfare is largely a female domain (McGowen & Blumenthal, 1978; Dodge & Pogrebin, 2001; Enos, 2001; Morash & Schram, 2002; Goulding, 2004; Arditti & Few, 2006; Hannon, 2006; Allen, Flaherty & Ely, 2010; Hunter & Greer, 2011). Most imprisoned parents are men and it is the women in their lives - girlfriends, wives and mothers - who look after their children while they’re in prison (Danner, 1998; Farrell, 1998a). Incarcerated women are children, mothers, siblings and kin to numerous members of society who are affected in different ways when they are arrested, incarcerated and ultimately released back into society (Johnston & Gabel, 1995; Farrell, 1998a; Morash & Schram, 2002; Travis & Waul, 2003; Goulding, 2004; Visher & Travis, 2011). These women have to bear the loss of normal contact with their children and the feelings of guilt and shame which accompany infrequent visits in unfriendly surroundings, plus the surrender of the child’s development to others (Davies & Cook, 1998; Farrell, 1998b; Enos, 2001; Travis & Waul, 2003; Goulding, 2004; Visher & Travis, 2011).

Further, whilst agencies argue their respective responsibility for the care of children of imprisoned parents, the care of the inmate mother is clearly the responsibility of the criminal justice system. Without statistical data on the number of parents in prison, the number and ages of their children and the care arrangement in place for the children, planning for services to
accommodate the specific needs of mothers in prison remains difficult (Mc Gowen & Blumenthal, 1978; Johnston & Gabel, 1995; Stanley & Byrne, 2000; Goulding, 2004; La Vigne, Brooks & Shollenberger, 2009).

The focus of this research is mothering both inside and outside prison, that is, on post-release. This research explores the impact of maternal incarceration on the mother-child relationship from the perspective of those professionals who support the mothers. It explores therefore not only the issues which mothers face in maintaining their mother-child relationship both inside and outside prison, but also the issues which these professionals face in supporting them. This chapter provides a background and context for this research. It then outlines a rationale for the research and the scope of the research. The research question and objectives are then provided and the chapter concludes with the thesis structure.

1.2 Background to the research

Female prisoners currently represent 7% of the total prison population in Australia (Australian Bureau of Statistics (ABS), 2012). Over the last decade there has been a disproportionately rapid growth in the number of women in prison in Australia. Involvement of males in criminal activities is still much higher than that of women, however, between 2002 and 2012 there was a 48% increase in the number of female prisoners in Australia in contrast to a rise in male prisoners of 29% (ABS, 2012). During 2012 alone, the number of female prisoners rose by 8.4% compared to a rise of just 0.4% for male prisoners. This means that the number of female prisoners in Australia increased at a rate 21 times that of male prisoners during that period.

In Victoria between June 2007 and June 2011 there was a 24.5% increase in the number of female prisoners compared to a 12.5% rise in male prisoners. This represented a rise in the overall percentage of female prisoners from 6.1% in 2007 to 6.8% in 2011 (Corrections Victoria, 2011). According to a submission by Baldry (2010b) to the Drugs and Crime Prevention Committee (DCPC) the female imprisonment rate grew by almost one third in 2008-2009, despite the implementation of Corrections Victoria Better Pathways strategy in 2005 which was aimed at reducing female recidivism. The imprisonment rate for women at 30th June 2011 was 14.4 per 100,000 female adults, compared to a rate of 176.4 per 100,000 for female Indigenous adults. Indigenous female prisoners account for 6.3% of the total female prison population. The fastest growing female prison population in Victoria is that of Vietnamese females, which has grown from 5.4% in 2007 to 15.6% in 2011 (Corrections Australia, 2011).
Similar figures are found in the Western World. For example, in New Zealand (NZ), the female prison population represents 5.9% of the total prison population (International Centre for Prison Studies, 2012). Likewise, a rise in female incarceration has occurred in the United States of America (USA), Canada and the United Kingdom (UK). Female prisoners in the USA account for 8.7% of the prison population (International centre for Prison Studies, 2012). Various theories have been offered as explanation for the rate of increase in female prison populations in the USA. Some say that the ‘war on drugs’ and the Rockefeller drug laws have led to the selective over-incarceration of women (Douglas & McDonald, 2012). In comparison, the female prison population in Canada represents 5.1% of the total prison population. In the UK women represent 4.7% of the total prison population, where it is argued that harsher responses to female offenses have contributed to the dramatic rise in female incarceration (Sheehan, McIvor & Trotter 2007; International Centre for Prison Studies, 2012). For over two hundred years, researchers and experts have said that prisons don’t work; they don’t rehabilitate and they don’t stop crime (Watterson, 1996).

A disturbing fact to emerge from all statistics and recent studies conducted on female incarceration in Australia and internationally, is that the profile of female offenders has not changed in almost fifty years. These women are poor, unskilled, unemployed, with histories of childhood abuse and violent relationships (McGowen & Blumenthal, 1978; Johnston & Gabel, 1995; Kilroy, 2000; Chesney-Lind & Rodriguez, 2004; Richie, 2001; Goulding, 2004; McIvor, 2007; Wybron & Dicker, 2009). Carlen (1994, p.309) as cited in Goulding (2007, p.30) encapsulates this:

> Whatever else prisons may be for, they have always housed large numbers of the poor, the unemployed, the unemployable, the homeless, and the physically ill and mentally disturbed…

Compared to their male counterparts, female offenders are more likely to be primary carers for children and less likely to have a partner to look after the children in their absence. They are also more likely to suffer from mental health problems and more likely to have histories of substance abuse (McGowen & Blumenthal, 1978; Goulding, 2004; Sheehan, McIvor & Trotter, 2007; Australian Institute of Health and Welfare (AIHW), (2010). Over-represented in this group are Indigenous women, Vietnamese women and women who have experienced prior episodes of institutionalisation, domestic violence and homelessness (McGowen & Blumenthal, 1978; Richie, 2001; Goulding, 2004; Baldry, Mc Donnell, Maplestone & Peeters, 2006; Grunseit, Forell & Mc Carron, 2008; Forsythe & Adams, 2009; Allen et al., 2010; Hunter & Greer, 2011). Many will
have spent a large proportion of their lives in institutions; from children’s homes or foster care through to detention centres or psychiatric care facilities, and finally prisons. The legacy of these experiences is a lack of self-esteem, distrust of authorities, depression and frustration, all of which contribute to an intergenerational cycle of offending (Wybron & Dicker, 2009). This cycle of offending can best be broken by addressing the disadvantage which feeds the process, plus intervention to minimise the harm caused to children who have a parent in prison (Robinson, 2011). These children have to deal with the stigma of parental incarceration and a fractured family unit. Further, society has to grapple with the increased pressure and untold consequences for social services, foster care systems, childhood development and parenting patterns (Mc Gowen & Blumenthal, 1978; Johnston & Gabel, 1995; Travis & Waul 2003; Goulding, 2004; George, 2011).

1.3 Context of the research: The Victorian landscape

In Victoria there are currently two female prisons. The Dame Phyllis Frost Centre (DPFC) is situated in Melbourne with an operational level of 300 prisoners and Tarrengower is situated in the north of the state with an operational level of 72 prisoners (Corrections Victoria, 2011). The DPFC is a maximum security rated prison which was built in 1996. A range of accommodation options are available including cellular and cottage style accommodation. It functions as a multi-purpose prison providing a complex mix of facilities and services, including reception, maximum security and medium security. The DPFC also includes specialist accommodation for remand and sentenced mainstream women prisoners as well as those afforded protection status (Corrections Victoria, 2011). Tarrengower has a minimum security rating and was built in 1987. This prison has ten self-contained units with single room and shared accommodation, a 12-bed transition unit that was added in December 2002, plus an 18 bed unit which was opened in 2010. It functions as a prison with an emphasis on release preparation and community integration (Corrections Victoria, 2011).

One of the most significant changes in Victorian female offending between 2007 and 2011 was the increase of women prisoners whose most serious offence or charge was for drug offences (12.5% to 20.9%). Between 2007 and 2011, receptions for drug offences increased by 50% (Corrections Victoria, 2011).¹ During that period, women were more likely to be in prison for offences against the person (30.6%), property related offences (28.1%) and drug offences.

¹ Sentenced data relates to prisoners who were sentenced during this specific period of time. Reception data relates to prisoners received into custody during this specific period of time.
In June 2011 a Global Commission on Drug Policy Report stated that the 40 year ‘war on drugs’ had been lost, and reported an increase worldwide in opioid use of 35%, cocaine use of 27% and cannabis of 8.5%. They concluded that policies around the criminalisation of these substances have clearly failed (Douglas & McDonald, 2012).

Because of the less violent nature of most female offending, many women receive prison sentences of six months or less (Corrections Victoria, 2011). Between 2010 and 2011, 46.8% of female offenders received sentences of less than six months, and a further 32.3% received sentences of six to twelve months. According to a submission by Sisters Inside to the DCPC (2010) the damage done by short sentences is disproportionate to the crimes committed. Mothers can lose their homes, their jobs, and their children. Further, they do not qualify for in-prison services and programs which could assist in their rehabilitation (Sisters Inside, 2010).

According to the DCPC, the Victorian Department of Justice (DoJ) attributes the rise in female incarceration to a number of factors including the aforementioned increase in drug offences, but also to a move away from the use of imprisonment as a last resort (2010). It is difficult to understand why, with all the existing literature on intergenerational cycles of crime and the negative effects which maternal incarceration has on the children, short custodial sentences are increasingly used to manage female offending (Mc Gowen & Blumenthal, 1978; Farrell, 1998a; Kilroy, 2000; Goulding, 2004; Frye & Dawe, 2008; George, 2011). Research has shown that maternal incarceration causes the abrupt separation between the mother and her child, and makes it very difficult for the incarcerated mother to maintain relationships with her children (Mc Gowen & Blumenthal, 1978; Farrell, 1998a; Enos, 2001; Goulding, 2004; Frye & Dawe, 2008; George, 2011).

In a recent community survey undertaken by the Sentencing Advisory Council to determine attitudes to current sentencing practices, respondents clearly favoured alternatives to prison for drug-addicted persons (83.5%); those with mental illness (91.7%) and non-violent offenders (74.9%). The recommendation for both drug-addicted and mentally impaired persons was for a community based intensive program of rehabilitation and counselling. The recommendation for non-violent offenders was a Community Corrections Order (CCO) (Gelb, 2011).

Alternatives to custodial sentences for mothers are especially important because when the family structure is broken by maternal incarceration the social and emotional effects are devastating and long lasting (Johnston & Gabel, 1995; Easteal, 2001; Morash & Schram, 2002; Arditti & Few, 2006; La Vigne et al., 2009). Many women entering prison come from violent and abusive backgrounds. It follows therefore that if they have dependent children that those
problems are shared with their children (Johnston & Gabel, 1995; Green, Haney & Hurtado, 2000; Wybron & Dicker, 2009). However incarceration is often the mother’s first opportunity to evaluate her own life and how her lifestyle may have affected her children (Watterson, 1996; Radosh, 2004; White & Haines, 2004; Wybron & Dicker, 2009).

The normal worries of motherhood do not disappear when the mother is locked up behind prison bars. Rather, they are increased by the mother’s concern for her child’s physical and emotional well-being in her absence, and by the transient lifestyle which often is the result of placement changes in kinship care, foster care and residential care (Johnston & Gabel, 1995; Cunningham, 2001; De Cou, 2002; Goulding, 2004; Radosh, 2004; Hannon, 2006; Wybron & Dicker, 2009). Research has shown that there is little difference between the parenting concerns and attitudes of incarcerated mothers and demographically matched non-criminal mothers (Henriques, 1982; Le Flore & Holston, 1989; Berry & Eigenberg, 2003; Poehlmann, 2005; Tuerk & Loper, 2006).

Issues which particularly impact on the well-being of incarcerated mothers include being separated from their children, health issues relating to substance abuse and the psychological trauma relating to past experiences of sexual abuse and violent relationships (Johnston & Gabel, 1995; Davies & Cook, 1998; Richie, 2001; Goulding, 2004; Tuerk & Loper, 2006).

Most incarcerated mothers hope to return to their parenting role after release from prison. Often however, the stress imposed by separation has severely damaged the mother-child relationship. Children are typically angry and distrustful and resent being ‘abandoned’ by their mother (Farrell, 1998b; Cunningham, 2001; Easteal, 2001; Richie, 2001; Radosh, 2004; Arditti & Few, 2006; La Vigne et al., 2009). The prison environment offers little opportunity for mothers to prepare for re-entry back into the family (Snyder-Joy & Carlo, 1998; Easteal, 2001; Richie, 2001; De Cou, 2002; Arditti & Few, 2006; La Vigne et al., 2009). Typically, mothers enter prison with few parenting skills, and leave with none. Furthermore, the dependency of the prison environment does little to prepare the mother for the financial and emotional responsibilities she will face on release (Farrell, 1998b; Snyder-Joy & Carlo, 1998; Dodge & Pogrebin, 2001; Easteal, 2001; Goulding, 2004; Kilroy, 2005; Wybron & Dicker, 2009). However, research has repeatedly shown that women who are empowered to control their own lives will re-integrate more successful on release from prison. They will also be more effective at parenting and be better equipped to break the cycle of abuse which has characterised their own lives (Cunningham, 2001; Easteal, 2001; De Cou, 2002; Radosh, 2004; Tuerk & Loper, 2006).

In addition, a reduction in reoffending and reintegration into family life is important in criminal justice policy, given that those who maintain family ties and who re-enter society successfully
are less likely to re-offend (Cunningham, 2001; Easteal, 2001; Tuerk & Loper, 2006). Furthermore, the mother’s successful re-entry into family life may lessen the burden on the state welfare system and reduce the number of children growing up in recurring cycles of poverty and criminal activity (Arditti & Few, 2006, Frye & Dawe, 2008; George, 2011).

Over the last decade, Corrections Victoria has formally endorsed the importance of maintaining the mother-child relationship once a mother has been imprisoned. The Better Pathways Strategy (2005 - 2009) was aimed at addressing recidivism through gender responsive policies and programs. It has also provided funding for some Non-Government Organisations (NGO’s) to provide services. These include, but are not limited to:

- A Transitional Bail Support program, which provides transitional housing for offenders being released into the community without secure housing.
- The Women’s Integrated Support Program (WISP) in conjunction with Melbourne Citymission (MCM), The Victorian Association for the Care and Resettlement of Offenders (VACRO) and the Brosnan Centre, have since 2006 provided support and guidance for many women exiting prison and seeking employment.
- Women4Work which is managed by MCM and assists women to find employment, and the
- Childcare and Transport Subsidy Program (CCATS) which addresses failure to meet supervision orders due to the cost of childcare and transport (Corrections Victoria, 2008).

However, the success of these initiatives remains unknown. In 2009 Price Cooper Waterhouse conducted an external evaluation of the Better Pathways Strategy. Whilst the evaluation praised the improved gender-responsiveness of available programs and services, it was unable to determine the extent to which the Better Pathways goals and objectives had been met. This was because the full evaluation was not, and has still not, been made public (DCPC, 2010). It was noted that despite these policy initiatives, the rate of female incarceration has continued to grow, as discussed earlier in this chapter (DCPC, 2010).

Non-Government programs offered in Victoria that are important to mothers exiting prison include:

- Flat Out Inc. which offers individual support and advocacy to women exiting prison. They also conduct research and provide community education pertaining to female incarceration (Flat Out, 2012).
- The MCM Family Support Service (FSS) at DPFC which provides one-on-one support to mothers on child and family reunification services (Melbourne Citymission, 2012).
- Prison Network Ministries offer a range of programs including ‘Fun with Mum’ which aims to enhance visiting experiences for mothers. They also offer one-on-one support post-release (Prison Network Ministries, 2012), and
- The VACRO Womens Mentoring Program (VWMP) which provides support for women exiting prison or on CCO’s (VACRO, 2012).

It will become apparent in this research they these programs suffer over-demand and are insufficiently funded to support women exiting prison for what they consider to be an adequate period of time.

1.4 Rationale for the research

This research grew out of the researchers’ concern for the rising number of incarcerated mothers worldwide, but specifically in Victoria. There is limited research in Australia into mothers’ experiences post-release in attempting to reunite with their children. Given the rising number of incarcerated mothers worldwide whose profile has not changed, the researcher was interested in whether any government initiatives were successful in reuniting mothers and their children. Initially it was the researchers’ goal to interview mothers inside prison, both on a one-on-one basis and in focus groups. However, after lengthy consultation with a range of stakeholders the researcher decided to rework phase one to be more substantial, and to interview the staff of NGO’s (herein known as the professionals) who support mothers exiting prison for their perspectives on the issues mothers face both inside and outside prison. This was determined to be necessary as the ethics approval to interview mothers inside prison became problematic (see chapter 3.7 for further explanation). Further, the literature in this research had indicated that NGO’s working with mothers both inside prison and post-release had never been asked for their opinions, and yet they are in a perfect position to assess the issues which mothers face in regaining custody post-release. They operate on a daily basis between the mothers and the policies with govern the mothers. Ethics approval was received from the RMIT ethics committee for phase one on 23/11/2006 (see Appendix One).

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2 Initially, phase one involved interviews with professionals working with mothers exiting prison, phase two involved interviews with mothers inside prison, and phase three involved conducting focus groups inside prison.
This research lends itself to feminist standpoint theory because the theory is concerned with facilitating change to end social and political disadvantage. This research is also concerned with social values and the affect these have on our daily experiences. Labelling theory is therefore incorporated to examine discrimination against women with lived prison experience. These theories and how they relate to this research will be further elaborated in chapter 3.3.

1.5 Scope of the research

The research was conducted through interviews with professionals in Victoria who provide support services to women with lived prison experience. Using purposive sampling six professionals were selected for interviews. The researcher was interested in identifying any gaps or impediments to support for women with lived prison experience. It was envisaged that identifying any gaps in the support available could benefit the NGO’s by assisting them to procure further funding. It was also hoped that identifying any gaps in support and services could raise awareness of the importance of these services for women with lived prison experience.

This research does not explore paternal incarceration,\(^3\) nor does it specifically explore the impact of maternal incarceration on either Indigenous women or women of ‘Culturally and Linguistically Diverse’ (CALD) backgrounds. Interview questions relate to mothers in general.

It is acknowledged that not all mothers seek to regain custody post-release. As this research will show, in some cases the mother-child relationship is too damaged for this to occur.

1.6 Objectives and Research Question

This research aims to understand the effect which maternal incarceration has on the relationships between incarcerated mothers and their children. In particular, this research focuses on these issues from the perspectives of the professionals who support women with lived prison experience. The research also aims to address the problems which professionals can face in supporting these mothers on a day to day basis. The specific objectives of this research are from the perspective of the professionals who support them, and are as follows:

- To increase understanding of the impact which maternal incarceration has on the mother-child relationship;
- To increase understanding of whether mothers regain custody of their children post-release, and what issues they may encounter in achieving this, and

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\(^3\) See Hairston (1990) for similar research on imprisoned fathers.
➢ To increase understanding of policies and programs effecting the reintegration of incarcerated mothers back into society.

1.6.1 Research Question
The above objectives lead to the main research question and the sub questions.

What impact does maternal incarceration have on how mothers maintain their mothering role both inside prison and on release?

1.6.2 Sub questions:
➢ From the perspective of the professionals, what are the main issues which incarcerated mothers face in maintaining their mother-child relationship?
➢ From the perspective of the professionals, what are the main issues which mothers face post-release in regaining custody of their children?
➢ From the perspective of the professionals, what resources are available to assist mothers maintain their mother-child relationships both inside prison and on release?

1.7 Structure of the Thesis
Chapter Two presents an analysis of the pertinent Australian and international literature on maternal incarceration and how it can affect the mother-child relationship.

Chapter Three outlines the theoretical framework and methodology employed in this research. Relevant feminist theories are reviewed and the chosen theory for this research is justified. The choice of a qualitative approach is also justified.

Chapter Four presents the findings from interviews with the professionals. It also provides statistical information on the professionals’ typical client profile.

Chapter Five outlines the major research findings and contextualises these with previous research, and Chapter Six provides concluding comments and recommendations for further research.
Chapter Two: Ignored or forgotten: The cycle of women's lived prison experiences.

Taking the most hurt people out of society and punishing them in order to teach them how to live within society is, at best, futile. Whatever else a prisoner knows, she knows everything there is to know about punishment because that is exactly what she has grown up with. Whether it is childhood sexual abuse, indifference, neglect; punishment is most familiar to her.

(Tchaikovsky, C.1997).

2.1 Introduction

The above quotation describes the cycle of punishment which women with lived prison experience have typically endured. According to Carlen (2002), even though it can be argued that female offenders receive more lenient sentences than male offenders; individual women are punished more severely as a consequence of their incarceration, that is, primarily because they are primary carers for children. Most female offenders' lives have been characterised by punishment. They have usually suffered domestic violence, sexual abuse and abandonment (Johnston & Gabel, 1995; Kilroy, 2000; Morash & Schram, 2002; Travis & Waul, 2003; Chesney-Lind & Rodriguez, 2004; Goulding, 2004; McIvor, 2007; Wybron & Dicker, 2009). As Kilroy (2000, p.5) asks ‘when will we as a society understand the connection of experiences of abuse and women in prison, and most importantly stop the cycles of abuse and the incarceration of women?’.

The majority of women in prison in Victoria are not there for crimes of violence, but for crimes of poverty; prostitution, homelessness, illegal drug possession and theft. Increasingly, they are incarcerated for parole breaches, missing appointments with their Community Corrections officer, missing attendance at a program or having unsuitable accommodation (Watterson, 1996; Baldry et al., 2006; McIvor, 2007). The criminal woman is considered worse than her male counterpart, and the criminal mother is even worse because she has deviated from the ideal virtues of her gender (Farrell, 1998a). In addition, incarcerated mothers present with different and more complex needs because of their backgrounds of abuse.

The cycle of addiction and dysfunction is nurtured within the prison where the punitive environment is anathema to a process of healing (Easteal, 2001; Morash & Schram, 2002;
Carlen & Worrall, 2004; Radosh, 2004). Further, as a result of their mothers’ incarceration, children suffer instability, fear, anger and rejection because they are exposed to the very life circumstances which brought about their mothers’ incarceration. They are also vulnerable to perpetuating the cycle of criminality (Greene, Haney & Hurtado, 2000; Wybron & Dicker, 2009).

This chapter provides an analysis of the pertinent Australian and international literature on maternal incarceration and the challenges of mothering inside prison and post-release. Studies which are most relevant to the research question have been reviewed chronologically within the dominant themes. Each theme commences with a review of USA studies and concludes with Australian studies. The chapter commences with a review of foundational studies which set the scene for the dominant themes; mothering inside and mothering outside prison. There is substantively more research available on mothering inside, as reflected in this chapter. The first theme ‘Mothering inside prison’ has three sub-themes. The first is ‘Doing’ mothering inside’ which examines how the mother manages motherhood from inside the prison, that is, maintaining contact with her children and being involved in their lives. The second sub-theme is ‘Being’ a mother inside prison’ which analyses how mothers maintain their identity as mothers whilst being unable to fulfil their roles as mothers inside the prison. The third sub-theme is ‘Health and coping mechanisms inside prison’ which considers how mothers cope with the issues addressed in the first two sub-themes. The second major theme is ‘Mothering outside prison.’ This also has three sub-themes. The first sub-theme is ‘Re-establishing the maternal role’ which examines how mothers seek to reunify with their children on release. The second sub-theme is ‘Health challenges on the outside’ which reviews the mothers’ health post-release. The third sub-theme is ‘Housing as an imperative need’ which analyses the role which having safe and affordable housing has to play in successful reunification.

2.2 Early focus on incarcerated mothers and their children

Most of the early research which focused on incarcerated mothers and their children was conducted in the USA. These studies employed mainly quantitative methods and large samples, and produced much descriptive data on families with an incarcerated parent. Some studies are particularly important because they established findings which would become evident in further research. Those studies are discussed here.

One of the earliest foundational studies of note is that conducted in California by Zalba (1964) who investigated how collaboratively social welfare agencies met the needs of incarcerated mothers. Zalba collected questionnaires and conducted interviews with 124 incarcerated mothers, and collected questionnaires from 114 social welfare agencies. Seventy two percent of
the mothers had been in jail for 5 weeks prior to sentencing; this transition period being the most stressful and confusing for families in determining care arrangements for the children. Temporary and haphazard arrangements were often made – based on the fantasy that the mother would not receive a custodial sentence (Zalba, 1964). Although 38% of the children required placement during this period, only 7% received agency assistance. Many mothers reported not knowing how to source agency assistance. Several incarcerated mothers, despite saying that they would do anything to see their children, advised carers not to bring the children to visit, fearing the environment would prove a harmful experience for them (Zalba, 1964).

Zalba noted that staff turnover was high in agencies surveyed, with 57% having had case loads for only six months or less. Whilst the majority of agency workers favoured interagency communication, sharing of casework information was almost non-existent. Therefore plans were made for individuals, not families (Zalba, 1964). This study established four clear conclusions:

- Incarcerated mothers' felt socially isolated;
- They had a limited understanding of sentencing and welfare practices;
- Some incarcerated mothers were reluctant to have their children visit them despite their deep sorrow at being separated, and
- There was a need for greater interagency collaboration to enable family based planning (that is, planning for the family unit as a whole, including children) (Zalba, 1964).

These conclusions are significant because they have been consistently supported by further research throughout the Western World as this literature review will show, suggesting that little has changed in the issues surrounding maternal incarceration since 1964.

Another large and influential study on the needs of incarcerated mothers was conducted by Mc Gowan and Blumenthal on behalf of the National Council on Crime and Delinquency (NCCD) in the USA in 1978. They surveyed 9,379 incarcerated mothers in 46 prisons across eight states about their concerns and what services would assist both them and their children. They then conducted in-depth interviews with 65 women incarcerated in New York, visited several programs for women offenders and spoke with children of former and current prisoners. They found that 67% of the women were primary carers and approximately 85% of these mothers maintained some form of contact with their children during incarceration. Over 75% of the mothers hoped to re-establish a home for their children following release. Further, approximately 58% of children lived with their mother prior to her arrest, however, one in eight of these children were subsequently placed into foster care (Mc Gowan & Blumenthal, 1978). Despite the high percentage of mothers maintaining contact, their findings concur with findings established by
Further, they established three more conclusions which have become evident in further studies:

- The mothers usually had the primary caring role;
- The longer the mother remained incarcerated, the more risk there was to the mother-child relationship becoming severed, and that
- The chance of a successful reunification was diminished if the mother was a recidivist.

A qualitative study by Koban in 1983 specifically investigated the differing effects of maternal and paternal incarceration. She interviewed 130 incarcerated mothers from two prisons in Kentucky along with a comparative group of incarcerated fathers. More children had lived with their mother prior to incarceration (74.3%) than with their father (24.5%). Koban (1983) found that women’s relationships with their children and family structure was more fractured by incarceration than is their male counterparts. Further, the pre-incarceration living arrangements of the children were the most significant factor in reunification. She concluded that men’s children usually remain with their mothers; that more men than women had visits from their children; and that men were more likely to be incarcerated closer to home, thereby alleviating the financial reasons for non-visiting (Koban, 1983). These findings are significant in that they support Zalba (1964), Mc Gowen & Blumenthal (1978) in highlighting the complex needs of incarcerated mothers and calling for more gender responsive policies and family-based programs (Koban, 1983).

In 1993, due to the increasing rate of female incarceration, the NCCD commissioned a reassessment of the 1978 study published by Mc Gowen and Blumenthal. This was conducted by Bloom and Steinhart. This study was based on questionnaires with 439 incarcerated mothers across eight states plus Washington D.C. during 1991 and 1992. Bloom and Steinhart (1993) found that little had changed in that the majority of the children had been in the legal custody of their mothers at time of arrest, supporting Mc Gowen and Blumenthal (1978) findings. They showed however, that 54% of mothers had never received visits from their children; the main reasons being attributed to the distance involved (over 50% of the mothers said their children lived more than 100 miles away) and there was reluctance by the carer (be that foster carer of relatives) to permit visitation (Bloom & Steinhart, 1993). Findings further suggested that carers suffer financial hardship which can contribute to their reluctance to visit, as many rely on public transport. This becomes a barrier to sustaining the mother-child relationship and fosters the social isolation of the mother (Bloom & Steinhart, 1993). The reluctance of carers to take children to visit and the incarcerated mothers’ isolation concur with conclusions established by
Zalba (1964) and supported by Mc Gowen and Blumenthal (1978) and Koban (1983). Further, Bloom and Steinhart (1993) supported previous research in recommending non-custodial sentences, collaborative services and a stronger focus on maintaining the family unit.

The first large Australian study of the impact of parental incarceration on families was conducted by Hounslow, Stephenson, Stewart and Crancher in 1982. A postal survey was completed by 244 incarcerated parents (27 females and 215 males) across 10 prisons in New South Wales (NSW). This was followed by interviews with 105 of the prisoners and 33 adult family members. Despite the small number of mothers who participated in this study, findings are consistent with Zalba (1964) in that care arrangements were ad hoc and based on unrealistic expectations of sentencing outcomes. Further, the specific needs of incarcerated mothers were explored and findings supported previous research in the USA (Zalba, 1964; Mc Gowen & Blumenthal, 1978; Koban, 1983; Bloom & Steinhart, 1993) in that the group was found to have suffered more social isolation than incarcerated fathers. In particular, women were found to have suffered:

- a loss of identity as mothers, due in part to socially accepted notions of women, and mothers in particular;
- loss of ability to ‘do’ mothering in that they were stripped of maternal responsibilities, and
- Classes held within the prison did not equip them with any vocational skills (Hounslow et al., 1982).

Subsequently, Butler in 1994 conducted interviews with 20 mothers post-release in NSW and concluded that although 80% of the mothers resumed care for their children, maternal incarceration had been a traumatic experience for both mother and children. The biggest issue was in trying to re-establish a bond with children post-release (Butler, 1994). The majority of the mothers regarded the damage done to their mother-child relationship as terminal. Butler (1994) supported Zalba (1964) and Bloom and Steinhart (1993) in recommending family based planning but also recommended specialised individual family case-workers.

These foundational studies established many findings as discussed above, and recommended policy changes to address maternal incarceration. These include family based planning and collaborative services in order to focus on the specific and complex needs which incarcerated mothers and their children have. Mc Gowen and Blumenthal (1978) together with Bloom and Steinhart (1993) suggested non-custodial sentences for mothers with children. Finally, Butler (1994) recommended individual family case workers to provide support to the families of incarcerated mothers and thereby alleviate some of the mothers concerns for her family. This
research will show how little has changed and how little has been addressed in almost fifty years.

Later studies on maternal incarceration tended to employ qualitative or mixed methods. These studies build on findings established by the foundational studies and provide more focus on the challenges of maintaining the mother-child relationship. These studies are reviewed in the two dominant themes below; Mothering inside prison and Mothering outside prison.

2.3 Mothering inside prison

Mothers in prison are largely invisible to society, but the revolving door syndrome\(^4\) ensures that families are constantly disrupted (Farrell, 1998a; Kilroy, 2000; Denton, 2001; Baldry, 2007; Wybron & Dicker, 2009). According to Baldry (2007, p.6), ‘one of the strongest predictors of being sentenced to prison is having been in prison before’. Stability is not a common factor in the lives of incarcerated mothers. The impact of maternal incarceration does not begin and end with each prison sentence. Rather, there is a high risk of negative health outcomes and an increased risk of criminal behaviour later on in their lives (Arditti & Few, 2006; Wybron & Dicker, 2009; La Vigne et al., 2009). Imprisonment is not necessarily worse for women than for men, but it is different because women’s needs are different, and women present with different problems (Hairston, 1991; Watterson, 1996; Martin, 1997; Farrell, 1998a; Forsythe & Adams, 2009; Forsythe & Gaffney, 2012). The increasing number of incarcerated women – the majority of whom are single mothers – has necessitated a re-examination of gender related experiences and policies (Morash & Schram, 2002). Thankfully, the body of knowledge on the experiences of incarcerated women is growing, and as a result, current correctional policies pay increased attention to gender-responsive services for women (Carlen, 2004; McIvor, 2007; Hunter & Greer, 2011).

2.3.1 ‘Doing’ mothering inside

While separation is painful for both fathers and mothers, according to the foundational studies reviewed above, women are more likely to be the primary carers prior to incarceration and most expect to resume parental responsibilities on release. Some notable research has been conducted on the specific needs of incarcerated mothers in maintaining their mother-child relationship, and the many factors involved (Datesman & Cales, 1983; Hairston, 1991; Martin, 1997; Farrell, 1998b; Kingi, 2000; Mumola, 2000). One such factor is the frequency of contact

\(^4\) This refers to a cycle of disadvantage and incarceration (see Goulding, 2004; Hannon, 2006; Baldry, 2007 and La Vigne, Brooks & Shollenberger, 2009).
which the mother has with her children during the period of incarceration. Obviously, prison regulations and policies will dictate how often the mother is able to receive visits from her children, but there are other factors involved which determine whether visits occur. These include the reluctance of the mother to have her children visit; the reluctance of carers to bring the children to prison; the distance involved which can exacerbate the financial cost to the carer; the age of the children and the length of the mothers’ custodial sentence (Johnston & Gabel, 1995; Farrell, 1998b; Easteal, 2001; Morash & Schram, 2002; Tomaino, Ryan, Markotic & Gladwell, 2003; Travis & Waul, 2003; Goulding, 2004; Goulding, 2007).

In examining factors which determine the incarcerated mothers’ frequency of contact with her children, Datesman and Cales (1983) in their USA study found that 95% of mothers intended to resume care of their children on release with over 38% stating that maintaining the mother-child relationship was their biggest challenge whilst in prison. Sixty five percent of mothers had received visits from their children and reported maintaining that contact as the most important factor in their relationships with their children. Hairston (1991) conducted interviews with 56 inmate mothers and found that 85% planned to reunite even if they had not been living with their children prior to incarceration. Seventy percent of mothers stated that separation was the hardest factor in their incarceration, however only 60% of mothers had been the primary carers prior to incarceration. Hairston (1991) also found that 63% of mothers did not want visits, and whilst not specifically asked to provide a reason, their responses to other questions suggested that most were ashamed of being in prison. Forty two percent of the children involved did not know their mothers were in prison, and a further 16% had been deliberately deceived into thinking their mother was elsewhere. Further, all of the mothers with children in foster care reported having received none or infrequent visits (Hairston, 1991).

Mumola (2000) in a nationwide random sample of adults in prison had similar results. He found that 64% of mothers in State prisons and 84% in Federal prisons had been the primary carers, compared to 44% and 55% of men respectively. Mothers had more frequent contact but this was mainly by telephone or letters. Hairston (1991) however drew attention to the fact that most programs are based on the assumption that mothers are the primary carers. She referred to Mc Gowen and Blumenthal’s (1978) findings that 48% did not cohabit prior to incarceration (1991). She suggested therefore that reunification plans are not very realistic, and added that the more custodial sentences a woman had, the less likely she was to have been living with her children at the time of arrest. This supported Mc Gowen & Blumenthal’s (1978) research finding that the longer the separation the more the mother-child relationship is at risk of permanent collapse. Findings from Hairston (1991) also acknowledged that there are situations where the family is
better off being separated from an abusive or neglectful mother. Further, there are situations where the mother is better off not maintaining contact with a partner whose presence is characterised by substance abuse, criminal behaviour or other negative influences which could act as triggers of past habits and encourage recidivism (Hairston, 1991).

Addressing the lack of evidence into how incarcerated mothers manage to sustain their parenting role until they are released, Martin (1997) conducted a five year longitudinal study of incarcerated and post-release mothers in Minnesota the USA. Fifty five interviews were conducted with incarcerated mothers and with 36 of these mothers after five years. She found that at the latter interview, 66% were still highly involved parents, but 34% had lost contact with their children. This latter group however had a history of custodial sentences and drug/alcohol abuse issues. Martin (1997) stressed that this group still cared for their children but were emotionally disconnected. Her findings support previous research that accumulated custodial sentences threaten the breakdown of the mother-child relationship (Mc Gowen & Blumenthal, 1978; Hairston, 1991). She further stressed that both groups of mothers were just as capable of mothering but in the latter group their ability to function was impacted by their own negative parenting experiences, which further impacted on their ability to negotiate shared parenting with their children’s carers (Martin, 1997). In supporting Hairston (1991) Martin (1997, p.21) further acknowledged that sometimes the children are better off without their mother:

"Whilst it is crucial to provide generous visitation and support to mothers in prison, it is equally important not to romanticise the mother-child bond and ignore the reality that some mothers are just not capable of adequate parenting."

Kingi (2000) in her longitudinal study of 56 incarcerated women in NZ commented on the lack of policies which address the specific needs of incarcerated mothers, given that they are more likely to have been their children’s primary carer prior to incarceration. Her findings support Mc Gowen and Blumenthal (1978), Hairston (1991) and Martin (1997) in that the majority of mothers in her sample who were serving long custodial sentences had little or no contact with their children, suggesting the cumulative effect of separation. Her findings also supported Zalba (1964) in the haphazard nature of placement arrangements for children.

Martin (1997) and Kingi (2000) both echoed previous conclusions by Zalba (1964), Mc Gowen and Blumenthal (1978), and Koban (1983) for family based planning and stressed that family visitation policy and programs should recognise the crucial role which substitute carers play in maintaining the mother-child relationship. Kingi (2000) further determined that childcare arrangements were often changed within a short period of time by request of the mother,
suggesting the mothers’ dissatisfaction with temporary carers and her frustration at not being able to care for her children herself.

The issue of mother-carer relationships and the threat of lost parental status has been a particular focus in some studies (Beckerman, 1994; Enos, 2001; Casey-Acevedo & Bakken, 2002; Poehlmann, 2005). Beckerman (1994) in her study of incarcerated mothers with children in foster care found that less than 50% of the 53 incarcerated mothers in her sample had regular communication with their children’s caseworkers. Less than 50% were familiar with court proceedings. Enos (2001) highlighted the role of the carer and suggested that poor mother-carer relationships can function as a barrier to contact with children. Casey-Acevedo & Bakken (2002) interviewed 222 incarcerated women (61% of whom were mothers) and observed their visitation patterns over one month. They found that 61% of mothers had no visits with their children. The main barriers to visits appeared to be distance and the resistance of carers, with many reporting having strained relationships with their children’s carers (Casey-Acevedo & Bakken, 2002). They suggested that some mothers prefer to remain isolated and not receive visits, however no data was provided to support this claim. Their findings support earlier research on the impact which visits have on maintaining the mother-child relationship, and the role carers have in providing that crucial link. Subsequently, Poehlmann (2005) interviewed 98 women in prison (68% of whom were mothers) and conducted follow-up questionnaires in an effort to link limited family visits with maternal depression. She argued that poor mother-carer relationships were a factor in reduced visits, and acknowledged the importance of the mother-carer relationship in maintaining the mother-child relationship.5

In Australia less research has been conducted specifically on the challenges which incarcerated mothers face in maintaining contact with their children, however findings support those in the USA. According to Farrell (1998b), Easteal (2001), Tomaino et al., (2003), and Goulding (2004) incarcerated mothers perceive separation from children as their greatest punishment. Because of this, visits are a lifeline to their children. Farrell (1998b) and Goulding (2004) spoke of the distance between home and prison as a major consideration in Australia, given the geographical isolation of the few female prisons. Many of the mothers in their studies received few visits due to the time and cost involved in travelling back and forth. Both Easteal (2001) and Goulding (2004) specifically commented on the punitive policy of withdrawing visits for prison discipline offences, and how this further damages the mother-child relationship and punishes the child. Tomaino et al. (2003) conducted surveys with 106 incarcerated parents in seven prisons in

5 For more information on the psychological effect of visits on mothers, see Casey-Acevedo, Bakken and Karl (2004) for research which linked frequency of visits with the mothers’ behavioural problems.
South Australia (SA). They also found that inaccessibility to the prison was a major factor in reduced family visits. Forty three percent of mothers in their study had never received visits from their children. The most frequently cited explanation for this was the distance of the prison from home and the associated travel costs (Tomaino et al., 2003). In many cases the emotional and financial burden placed on carers resulted in little contact between the incarcerated mother and her children (Farrell, 1998a; Tomaino et al., 2003; Goulding, 2004). Recommendations from research conducted by Farrell (1998a), Easteal (2001) and Tomaino et al, (2003) included policy reform which limits custodial sentences and encourages home detention or community service in recognition of the mothers’ primary care giving role.

Another finding from the above studies was that incarcerated mothers have little knowledge or understanding of the legal issues surrounding child care (Easteal, 2001; Tomaino et al., 2003). This was supported by further research conducted by Hannon (2006) and Sheehan and Levine (2007). Hannon (2006) produced a discussion paper based on interviews with incarcerated mothers, carers, criminal justice practitioners and support agency staff which examined criminal justice policies and their impact on children with an incarcerated parent. Sheehan and Levine (2007) set out to examine the care arrangements for children in Victoria whose parents had been incarcerated. Quoting Department of Human Services (DHS) statistics from the 2003 Public Parenting Audit, Hannon (2006) reported that only 28% of Australian children in kinship care were reunited with their primary carer. This statistic is particularly alarming as most children of incarcerated parents in Victoria go into kinship care, as supported by Sheehan and Levine (2007). Carers in Hannon’s research (2006) also reported a high level of financial stress. Her recommendation was for more collaborative services and gender-responsive policies.

A study which specifically aimed to address incarcerated parents’ ignorance of legal processes was conducted by Grunseit, Forell and Mc Carron in 2008 on behalf of the Law and Justice Foundation of NSW. The researchers interviewed 46 incarcerated parents (6 mothers and 40 fathers) and 21 ex-prisoners (two mothers and 19 fathers). They also interviewed 20 Corrections Victoria staff, legal providers and held numerous focus groups (Grunseit et al., 2008). The researchers found numerous barriers to obtaining both legal information and legal representation inside prison, the most prominent including:

- poor literacy skills
- restricted access due to prison lockdowns or being segregated
- having no experience in determining the quality of information gleaned
- not knowing how to book an appointment with a legal service
the legal service being over-subscribed, and
the quality of the legal advice being compromised by the inmates emotional and mental state (Grunseit et al., 2008).

The researchers further reported that inmates often go to prison with multiple legal problems including child custody, and they are highly disadvantaged (Grunseit et al., 2008). Supporting findings of foundational studies (Zalba, 1964; Mc Gowen & Blumenthal, 1978; Hounslow, 1982; Koban, 1983; Bloom & Steinhart, 1993) as well as Hannon (2006), their findings established the need for more collaborative effort by service providers and by the legal intermediaries on whom the prisoners rely for access to a myriad of services (Grunseit et al., 2008).

This theme has reviewed findings which support the importance of family visits and the crucial role which carers play in maintaining the mother-child relationship; the impact of separation on the incarcerated mother and the need for better family-oriented programs and gender-responsive policies. Most importantly, research discussed above has stressed the importance of maintaining the mother-child relationship. According to Denton (2001), incarceration expands the mothers’ social isolation and leaves her invisible to the greater community. The next subtheme discusses the psychological and emotional needs of the incarcerated mother, plus her invisibility to the wider community.

2.3.2 ‘Being’ a mother inside prison

At the start of the 1900s the concept of the ideal mother evolved into a ‘noble calling’. According to Theodore Roosevelt (1903) as cited in Morash & Schram (2002, p. 73):

The good mother...is more important to the community then even the ablest man...but the woman who shirks her duty as wife and mother earns the right to our contempt.

Most incarcerated mothers experience feelings of guilt, shame and despair over their enforced separation from their children – the ‘bad mother’ syndrome (Farrell, 1998b; Dodge & Pogrebin, 2001; Chesney-Lind & Rodriguez, 2004; Arditti & few, 2006; Berry & Mahdi, 2006; Hunter & Greer, 2011). According to Mead (1934) humans learn and adapt social roles in interaction with others and this develops their sense of ‘self’ or identity. The mothering role provides women with an identity along with the values attributed to it by others. The recognition of these values by others provides what we recognise as self-respect (Mead, 1934; Clark, 1995). The mothering culture encourages mothers to maintain relationships with other mothers and thereby provides an audience for sharing experiences (Clark, 1995). The incarcerated mother however, is subjected to a process of control designed to “peel away a prisoners identity and self-image"
According to Clark (1995), the value placed on the ‘good mother myth’ encourages incarcerated mothers to drown their feelings of failure and guilt, plus their hopes for the future, in alcohol and drugs. A whole new generation is then affected by maternal incarceration and swept into the cycles of powerlessness and anger. Women can only break the cycle of despondency and depression by finding hope and self-esteem through their relationships with their children (Carter, 1995).

During the late 1900s the research focus moved from the impact on the families of incarcerated mothers to the impact of incarceration on the mothers themselves. In the USA some longitudinal studies were conducted which included prison administration staff, corrections officers, lawyers, foster parents as well as the incarcerated women (Watterson, 1996; Enos, 2001; Rathbone, 2006; Talvi, 2007). Watterson (1996) interviewed almost 1000 female prisoners and more than 250 prison officials during the 1970’s. She noted that mothers pay a double penalty – they serve time and lose their children. Prison strips them of their identity, their independence and dignity. Enos in her 2001 study agreed. She conducted her research over five years, from 1992 to 1997. She noted that the inmate mothers’ identity as a mother is compromised by incarceration as she has to balance the dual identities of mother and inmate. As an incarcerated mother she may be labelled ‘unfit’, and in some jurisdictions in the USA mere incarceration may constitute abandonment and thus form grounds for loss of custody (Enos, 2001). Rathbone (2006) spent five years meeting with incarcerated women in MCI-Framingham. She commented that the incarcerated mothers’ sadness never ends. Talvi (2007) interviewed 100 incarcerated women over a two year period. One of the mothers commented:

I am guilty of many things: not getting help for my depression, using drugs, drinking, and being a poor excuse for a mother (2007, p. 151).

Parenting quality is one of the many issues addressed by research on incarcerated mothers, but the findings are inconsistent. Some studies indicate that there is no difference in mothering values held by mothers inside or outside prison, but that the lack of opportunity for incarcerated mothers to engage in mothering activities causes enormous role strain (Henriques, 1982; Le Flore & Holston, 1989; Berry & Eigenberg, 2003; Poehlmann, 2005; Tuerk & Loper, 2006; Berry & Mahdi, 2006). For these mothers the pain of separation can be directly related to maternal stress and depression which can damage the mother-child relationship (Clark, 1995; Tuerk &

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6 These studies are unique because they employ qualitative data using large samples and describe the true life trajectories of their participants. This provides depth to the data through the concrete, vivid and meaningful experiences they relate (Babbie, 2010).

7 MCI-Framingham is the Massachusetts Correctional Institution at Framingham, in the USA.
Loper, 2006). Research further suggests that the longer the mother remains incarcerated, the more difficult it is to maintain the mother-child relationship, and the more the mother suffers emotional and behavioural problems related to role strain (Mc Gowen & Blumenthal, 1978; Hairston, 1991; Martin, 1997; Kingi, 2000; Casey-Acevedo, Bakken & Karle, 2004). Mothers also suffer more role strain if they do not approve of the care arrangements for their children (Le Flore & Holston, 1989; Berry & Eigenberg, 2003). Other research indicates that for some mothers incarceration is viewed as an opportunity to make a fresh start (Clark, 1995; Ferraro & Moe, 2003; Berry & Mahdi, 2006). These mothers regard prison as a retreat; saving them from the cycle of drugs and allowing them to spend quality time with their children. Ferraro and Moe (2003) in particular noted the links between prior victimisation, poverty and crime. Mothers in their sample linked their criminal behaviour to efforts to escape from violent men and as an alternative to poverty and homelessness. However, they used convenience sampling to interview 30 incarcerated women (97% of whom were mothers) so their findings cannot be generalised.

Alternative findings were presented by Dalley in 1997. She conducted an exploratory study which sought to increase understanding of the inmate mothers’ lives. The study examined imprisoned mothers in three correctional facilities in Montana, through surveys, questionnaires and interviews. Both the imprisoned mothers and the attorneys' representing their children were interviewed. The results from this study showed that the mothers generally came from abusive and neglectful families, and that their children experienced similar problems (Dalley, 1997). However, the study concluded that most of the children’s problems could not be directly associated with maternal incarceration. This study found that in some cases the mother-child relationship was so severely damaged that maternal incarceration had minimal further impact on the relationship (Dalley 1997). Although the findings from this study appear contradictory to other studies, it must be recognised that the attorneys for the children were interviewed, not the children themselves.

More recent studies conducted by Allen et al., (2010) and Hunter and Greer (2011) further develop the issue of incarcerated mothers’ low self-perceptions, and the links between drug use and crime. Allen et al. (2010) conducted interviews with 26 incarcerated mothers with histories of substance abuse. All of these women had negative self-perceptions as mothers and they viewed themselves as social outcasts. Eighty one percent were recidivists. The researchers found that the incarcerated mothers’ multiple marginality rendered them disposable in the eyes of the attorneys who represented children of imprisoned mothers and made custody recommendations to the court.  

8 The attorneys were guardians’ ad litem, that is, attorneys who represented children of imprisoned mothers and made custody recommendations to the court.
of society. Further, they suggested that incarcerated mothers are invisible; ignored and forgotten by the outside world. Allen et al. (2010) coined the phrase ‘throwaway moms’ in reference to the invisibility of incarcerated mothers within society. Hunter & Greer’s (2011) findings concur. They conducted a three year longitudinal study with 41 incarcerated women and found that the women could not describe their sense of self. They attributed their weak sense of self to abusive childhoods, seeing themselves as disempowered and merely ‘people pleasers’ (Hunter & Greer, 2011). These findings support previous research in that substance abuse was used as a coping strategy (Ferraro & Moe, 2006; Berry & Mahdi, 2006; Allen et al., 2010). Hunter and Greer developed further the notion of invisibility and found that for women engaging in substance abuse their ‘addict identity’ reflected their life trajectories and gave them a sense of self:

The interdependent relationship between destabilising conditions, a nebulous self and addiction keeps these women locked in a perpetual struggle to define and understand who they are; to move past their addict identities and to end the cycle of disrupted and chaotic lifestyles (Hunter & Greer, 2011, p.220).

Further studies indicate that incarcerated mothers bury their guilt by engaging in self destructive drug use. Because their identity revolves around mothering, they believe that having lost their children they have no further reason for living (Moe & Ferraro, 2006; Shamai & Kochal, 2008). Clark (1995) believed that some mothers contain the pain and maintain contact, while others make up for feelings of impotence by being argumentative and engaging in conflict whilst in prison. Even though some incarcerated mothers succumb to feelings of despair and have little contact with their children, they still identify as mothers (Moe & Ferraro, 2006; Berry & Mahdi, 2006). In their 2006 study, Moe and Ferraro also used a self-selected sample, and in their 2008 study conducted in Israel, Shamai and Kochal interviewed 109 incarcerated mothers who were all enrolled in a rehabilitation program. It is therefore difficult to generalise their findings because of the possibility of sampling bias. It should be noted however that in their study Tuerk and Loper (2006) interviewed 357 incarcerated mothers, but the sample was self-selected and the mothers asked to focus on their relationship with just one child – the child with whom they had the closest relationship.

Australian research has been undertaken with similar findings by Farrell (1998a), Goulding (2004) and Wybron and Dicker (2009). With her focus on the needs of the incarcerated mother, between 1992 and 1995, Farrell interviewed 130 incarcerated women and staff in nine custodial centres for women in the three Australian states NSW, QLD and VIC, plus women in four prisons in the UK. Her research was an international comparative study of the impact of imprisonment.
on incarcerated mothers and their children (Farrell, 1998a). Her findings showed that the inmate mother is doubly scorned by society. Not only is she seen to contravene the socially constructed ideal of a woman, but she is also seen to contravene her role as a loving, trustworthy, reliable and responsible parent. She therefore attracts two labels; the ‘bad mother’ as well as the ‘criminal’ (Farrell, 1998a). The prison environment itself was found to compound the inmate mother’s rejection from society because the rules and regulations of prison life actually ran counter to the needs of incarcerated mothers with young children (Farrell, 1998a). In her (2004) study in WA, Goulding interviewed 52 women during 2002, 43 of whom were incarcerated at time of interview. Mothers in her study reported feelings of guilt and the fear of being labelled as ‘bad mothers’. In a later smaller study, Wybron and Dicker (2009) conducted internal interviews with 18 women in the Australian Capital Territory (ACT). Twelve of these women represented eight womens services in the ACT and the other six women had lived prison experience. All of the mothers in these three studies reported feelings of social isolation, low self-worth, guilt, shame and fear (Farrell, 1998a; Goulding, 2004; Wybron & Dicker, 2009).

According to Morash & Schram (2002), the forced dependency fostered by the prison environment is antithetical to caring for a child as women become so dependent on the prison that they are no longer able to care for themselves or their children (Morash & Schram, 2002). Much research has questioned how women in prison, particularly mothers, who are rendered powerless by being no longer responsible for day to day decisions about their children, can be expected on release to function as responsible adults (Koban, 1983; Le Flore & Holston, 1988; Clark, 1995; Easteal, 2001; Tuerk & Loper, 2006; Goulding, 2007; Wybron & Dicker, 2009; Allen et al., 2010; Hunter & Greer, 2011).

Goffman (1961) spoke of the effect which institutions have on individuals; he called this ‘disculturation’ whereby the individual no longer knows who they are or how they fit in the social world. Watterson (1996) used the phrase ‘the concrete womb’ in relation to the mind-numbing and repetitive isolation and control exercised by the prison complex. In fact, according to Olsson (2005), the prison environment thrives on the child/parent model of punishment and control. Most women say this is the hardest aspect of being in prison; adapting the ‘child’ persona and speaking in a differential tone, learning to be totally submissive, and being told what to do and when to do it (Olsson, 2005). Goulding, in her 2007 Western Australia (WA) study found that prisoners’ lives had been so regimented that they couldn’t cope with personal responsibilities on the outside. She recommended more transitional housing to bridge the cultural gaps between prison and the outside world.
Prisons have traditionally been viewed as places of punishment where strict supervision and control is seen as necessary for the smooth running of the establishment (Kingi, 2000; Easteal, 2001; Kilroy, 2005; Goulding, 2007; Carlton & Seagrave, 2011). Gender stereotypes can have a major effect on how women, especially mothers, are treated in prison. The justice system, like all institutions, can reflect the commonly accepted stereotypes of gender, race, class and ethnicity. In so doing, they can perpetuate gender-related inequities both inside and outside the prison (Morash & Schram, 2002). In Australia some research has been conducted which shows the negative attitudes of correctional staff towards mothers in prison (Kilroy, 2000; Denton, 2001; Easteal, 2001; Tomaino et al., 2003; Goulding, 2007; Douglas & Walsh, 2009). Kilroy (2000) described the inmate mothers’ relationships with staff as being highly negative which has a demoralising impact on the mothers. Denton (2001) found that women prisoners were depicted by staff as sluts and whores, and that women drug users were considered even worse. To many prison staff, women drug users were:

Sick, difficult...treacherous...dreadful – the most shocking disgusting women you’ve ever met (Denton, 2001, P.2)

Easteal (2001) described inmate mothers as being treated as though they were less than human. This they felt was reflected in the inadequate level of medical care they received and the inconsistency of rule implementation by correctional staff. Tomaino et al. (2003) reported how the negative attitudes of correctional staff upset children during family visits. They frequently used the words ‘intimidating’ and ‘disrespectful’ to describe the staff (p. 27). Goulding (2007) found that correctional staff used a ‘form of mental brutalisation with their privilege system’. She found that the most feared ‘tool of control’ was cancellation of visits (p.64). Research conducted in QLD by Douglas and Walsh’s (2009) found the issue of discrimination amongst child protection workers so big as to warrant specific attention. Douglas and Walsh’s (2009, p.28) participants reported that ‘adversarial approaches’ were often employed by those workers who were young, inexperienced, and difficult to trust. Further, they seemed to accept and perpetuate myths about domestic violence being merely a relationship issue. In maintaining a judgemental approach they appeared to be more interested in closing the case; that is, removing the child, rather than solving the problem (Douglas & Walsh, 2009). They recommended that only the more skilled and experienced workers should be working in such a complex field.

This theme has reviewed the diminished sense of self-worth which women – mothers in particular – develop as a result of incarceration and removal from their children. Links between victimisation, substance abuse, poverty, criminalisation and recidivism have all been
established, that is, the multiple marginalisations of these women have been identified. The issue of infantilisation will be further developed in relation to being released from prison. Coping strategies were briefly discussed and will be developed fully in the next sub-theme. Recommendations from these studies include more gender-responsive programs to address the many marginalisations of mothers in the criminal justice system.

2.3.3 Health and coping mechanisms inside prison

In the USA a national survey conducted by the Bureau of Justice Studies found differences between incarcerated mothers and fathers, with more than one-third of mothers (35%) being sentenced for drug-related crimes compared to 23% of fathers. Mumola (2000) also reported a significant difference in pre-incarceration lifestyles with mothers having more serious drug histories (65%) than fathers (58%), and being twice as likely to have been under the influence of drugs when arrested.

Additional research with similar findings was conducted in the USA by Greene et al., (2000). The researchers conducted interviews with 102 incarcerated mothers across three prisons in central California and found that 86% reported abusive childhoods and 69% reported serving time for drug related offences. Sixty two percent had been exposed to drugs and alcohol at an early age and 54% had been separated from their parents for extended times as children (Greene et al., 2000). Further, 79% of their sample had been incarcerated an average of 4 times previously, suggesting a link between victimisation, drug use and recidivism. Furthermore, mothers in their sample were living on the economic margins of society and were dependent on the males in their lives for their supply of drugs; often necessitating sexual favours in return for drugs (Greene et al., 2000). The researchers acknowledged the possibility of self-report bias because only those mothers who were keen to discuss their problems participated in the study. However they also claimed that this depth of information can sometimes only be uncovered through self-report data. Nevertheless, their findings are supported by Ferraro and Moe (2003) who reported 80% of their sample of 27 incarcerated mothers had addictions to illegal drugs or alcohol, and all had been living on the economic margins of society (Ferraro & Moe, 2003). Both studies recommended non-custodial sentencing in recognition of the primary caring role of mothers, supporting previous research recommendations (see Bloom & Steinhart, 1993; Clark, 1995; Martin, 1997; Farrell, 1998a; Kilroy, 2000; Easteal, 2001; Enos, 2001)).

In addition, Carters’ USA (2006) research also addressed links between poverty, victimisation, drug abuse and recidivism. She questioned the reliance on incarceration as the only means of addressing poverty-related crimes. She also called for rehabilitative services and mental health
services which can address these issues in the community; thus maintaining the family unit and stopping the cycle of poverty, abuse, mental health disorders and crime (Carter, 2006).

In Australia, links between poverty, drug abuse and recidivism have also been established. A study based on the Drug Use Monitoring in Australia (DUMA) data between 2002 and 2006 was conducted by Forsythe and Adams (2009). They found that child abuse was associated with a higher likelihood of drug dependence among female detainees (64%) than among male detainees (40%). Sixty one percent of female detainees who had experienced mental illness also reported having been sexually abused as a child, compared with 52% of males. However, the researchers acknowledged the possibility of participants being included multiple times in the sample due to repeat custodial sentences (Forsythe & Adams, 2009). Despite this problem, and because the sample was so large (15,387 males and 2,893 females), this research highlighted the need for gender-responsive services and programs, particularly in addressing the complex treatment needs of female offenders (Forsythe & Adams, 2009).

In Australia, the link between victimisation, drug use and mental health has been well documented in the literature and has been identified by many researchers (Pollard & Baker, 2000; Kilroy, 2000; Goulding, 2004; Wybron & Dicker, 2009). Pollard and Baker (2000) received completed questionnaires from 70 incarcerated women, all of whom were on the Caraniche\(^9\) drug and alcohol program. Of the total sample, 93% had used drugs from an early age and 76% had suffered from abuse (38% of which was sexual abuse). Those who had been abused had a lower sense of self and were more likely to self harm or express aggression. Kilroy (2000) in her research in QLD reported that 98% of incarcerated women had suffered physical abuse, 89% sexual abuse, and 88% used drugs and/or alcohol prior to incarceration. Further, 42% had attempted suicide with 150 attempts and 41% had self-harmed with 331 self-harm experiences. According to Kilroy (2000) twenty-three percent attributed their self-harm and suicide attempts to the abuse they had experienced in their lives. Goulding (2004) and Wybron & Dicker (2009) also found a significant link between histories of abuse and mental illness. Goulding (2004) found that in many cases poverty had underpinned the womens lives, and that any existing coping life skills had been wiped out by institutionalisation. Further, her findings supported previous research as early as Zalba (1964) with unrealistic expectations around custodial sentences resulting in haphazard care arrangements for children, and families enduring social isolation. Wybron and Dicker (2009) found it was “difficult to disentangle the institutionally experienced trauma with previous traumatic experiences” (p. 15).

\(^9\) Caraniche is a Melbourne based provider of psychological and drug and alcohol treatment services to prisoners.
Subsequently, in an attempt to measure the prevalence of mental disorder among offenders nationally, Forsythe and Gaffney (2012), using DUMA data gathered during 2010, conducted statistical analysis on a sample of 690 police detainees. Approximately 50% of detainees had previously been diagnosed with a mental disorder. This was the first Australian study to use the Corrections Mental Health Screen (CMHS), which was validated for gender-specific screening by the National Institute of Justice, USA (Forsythe & Gaffney, 2012). The CMHS consists of a set of gender-specific questions designed to screen detainees for mental disorders. It was developed for use by non-clinical staff to provide early identification of those detainees requiring further psychiatric assessment. Affirmative responses to four or more questions for women, and to five or more questions for men, determined whether they had ‘screened-in’, that is, identified as having a diagnosable mental disorder. Forty two percent of women and 28% of men who reported no previous diagnosis still ‘screened-in’ (Forsythe & Gaffney, 2012). The researchers acknowledged that detainees who were unable to provide informed consent or who displayed violent behaviour were not interviewed; therefore those with the most severe mental health disorders would most likely be in that group and would therefore be under-represented in the DUMA data (Forsythe & Gaffney, 2012). Recommendations from this study include incorporating routine screening in police processing, followed by ‘comprehensive psychological assessment and appropriate treatment’, preferably not in a prison setting (Forsythe & Gaffney, 2012, p.7). Despite the acknowledged problems with their sample, their findings support previous research in establishing a strong link between drug use, mental health and criminal behaviour among women.

Building on Kilroy’s findings (2000) that 89% of women in her sample had experienced sexual abuse; the literature demonstrates that strip searching women in prison who are survivors of sexual abuse can cause them to relive the trauma of past assaults (Goulding, 2004; Kilroy, 2005; Wybron & Dicker, 2009; George, 2011). Many of these women are also suicidal, and the continuous threat of being strip searched further traumatises them on a daily basis (George, 1995; Simmering & Diamond, 1996; Davies & Cook, 1998; Easteal, 2001; Goulding, 2004; Kilroy, 2005; Wybron & Dicker, 2009). Strip searches take away the woman’s dignity and any feelings of self-worth they may have brought with them into the prison. Further, research shows they serve to exacerbate feelings of helplessness, suicidal thoughts, and episodes of self-mutilation and can result in the woman turning to illicit substances in an effort to numb the mental trauma; all of which impact on the quality of the mother-child relationship (George, 1995;

10 Refer also to the Australian Institute of Health and Welfare (AIHW) Bulletin 104: June 2010. This report suggests that self-report data may underestimate the extent of mental illness among prisoners because some prisoners are unaware of their mental health problems.
Simmering & Diamond, 1996; Davies & Cook, 1998; Easteal, 2001; Goulding, 2004; Kilroy, 2005 and Wybron & Dicker, 2009). Strip searches of prisoners in Victoria are permitted under Section 45 of the Corrections Act 1986. According to the 2006 Anti-Discrimination Commission (ADQC) report (QLD), strip searches are not routinely conducted on women in low or open security prisons unless there is a reasonable suspicion that the woman is concealing a prohibited item. Women are also permitted to have contact visits without being strip searched after each visit (ADCQ, 2006). However, women in the DPFC in Victoria are held under maximum security despite their majority low–risk status. These women are routinely subjected to strip searches, prompting many of them to suspend visits from their families (George, 1995; Easteal, 2001).

Correctional authorities justify these searches as a means to discover contraband entering the prison. However, this policy has been shown to be ineffective in controlling drugs in prison (Kilroy, 2005; George, 2011). According to Kilroy (2005), there were 41,728 prisoner and cell searches conducted in Brisbane Women’s prison during the period from August 1999 to August 2002, resulting in only two findings of significant contraband (Kilroy, 2005). According to the Australian National Council on Drugs (ANCD), between 1st December 2010 and 31st January 2011 there were 9,257 prisoner and cell searches conducted in the DPFC in Victoria (2011). These searches resulted in 11 drug seizures: four from visitors and seven from prisoners; the latter being three seizures of alcohol, one of white powder and four of prescription medication (ANCD, 2011). According to the Ombudsman Victoria’s (2008, p.39) report as cited in DCPC (2010), the low figures for positive drug tests ‘seriously underestimates or distorts’ the true extent of the problem at DPFC (p. 71).

This theme reviewed links between child abuse, substance abuse and mental health. The incidence of overdoses and suicides is also higher in females post-release. This will be discussed in the next theme ‘Mothering outside prison’.

2.4. Mothering outside prison

Existing research suggests that women who have recently been released from a period of incarceration face many challenges in attempting to reunite with their children. These can include continued substance abuse, housing and employment difficulties, stigmatisation, educational and training deficits and continued mental and physical health issues (Travis, Solomon & Waul, 2001; Goulding, 2004; Hannon, 2006; Bergseth, Jens, Bergeron-Vigesaa & Mc Donald, 2011; Visher & Travis, 2011). Women in particular often find their post-release lives defined by loneliness and feelings of ineffectiveness, which manifest as an inability to cope with

11 Brisbane Womens Correctional Centre accommodates approximately 258 prisoners.
the myriad of demands imposed on them by parole requirements. They struggle to interact with estranged families and often return to their pre-incarceration peers and subsequently, to their pre-incarceration habits.

It has been noted in studies already cited above that the majority of incarcerated mothers have histories of drug abuse and mental health, yet they receive little or no treatment whilst they are in prison (Watterson, 1996; Dodge & Pogrebin, 2001; Easteal, 2001; Travis et al., 2001; Richie, 2001). The proliferation of short term sentences actually prohibits many women from attending programs inside. For example, according to a joint submission by Flat Out and the Centre for Human Rights of Imprisoned People (CHRIP) to the DCPC (2010), the WISP program does not apply to mothers serving sentences of less than three months and it is only funded for up to twelve months. This has an impact on the time available for support prior to release when there is much to organise, especially housing, and also limits post-release funded support (CHRIP, 2010; Flat Out, 2010). Mothers, particularly those serving short sentences, are frequently released back into the community with their pre-incarceration problems exacerbated by homelessness and a lack of income, their coping skills shredded, and yet they have to prove themselves capable of resuming responsibility for their children (Easteal, 2001; Richie, 2001; Goulding, 2004; Arditti & Few, 2006; Hannon, 2006; George, 2011). These issues are addressed in the following sub-themes.

2.4.1 Re-establishing the maternal role

Barriers to re-establishing the maternal role have been addressed by many researchers in the USA (Mc Gowen & Blumenthal, 1978; Koban, 1983; Bloom & Steinhart, 1993; Watterson, 1996; Dodge & Pogrebin, 2001; Richie, 2001; Travis, Solomon & Waul, 2001; Arditti & Few, 2006; La Vigne, Brooks & Shollenberger, 2009; Bergseth, Jens, Bergeron-Vigesaa & McDonald, 2011). The majority of incarcerated mothers are primary carers and expect to resume parental responsibility on release however they rarely receive any financial support from the fathers of their children. Additionally, many are divorced or abandoned by their partners during their incarceration (Dodge & Pogrebin, 2001; Richie, 2001; La Vigne et al., 2009). Further, because of their primary caring role, when mothers are incarcerated the children’s care arrangements can be more unstable, regardless of whether the placement is with the offenders family or the state. Women are therefore more likely than men to return to a splintered family. This increases the difficulties in readjusting to living together and resuming the parental role (Koban, 1983; Bloom & Steinhart, 1993; Richie, 2001; Arditti & Few, 2006; La Vigne et al., 2009).
Research has shown that economic independence is the first hurdle for mothers exiting prison (Mc Gowen & Blumenthal, 1978; Bloom & Steinhart, 1993; Watterson, 1996; Kingi, 2000; Richie, 2001; Arditti & Few, 2006). Mothers usually have no money, no home, no job and no transportation. Richie (2001) found the life of a newly released mother to be extremely complex: dropping off urine tests; looking for employment; looking for housing; attending counselling; managing substance abuse and health problems, and trying to regain custody of her children. Mothers need to get treatment for their addiction so they can get employment, and they need employment before they can get a house to live in and be reunited with their children. In addition, initial contact with her children may be within working hours if they are in the custody of the state. Any of these urgent needs can consume all of the mothers’ emotional and financial resources (Richie, 2001). According to Kingi (2000), most mothers feel uncertain about their ability to manage their own lives. They feel disorientated and have difficulties dealing with stigmatisation in the community.

Research has also shown that women often return to a strained home environment. Watterson (1996) found that ‘getting free’ was more liberating as a fantasy than as a reality, and spoke of the impacted grief which female prisoners face on release. Kingi (2000) spoke of moving goalposts. Mothers in her study felt that the criteria for regaining care of their children were continually changing, making reunification almost impossible. Further, the children may not remember their mother or they may be hurt and distrustful. They may have been teased at school or had to move school, or they may have been neglected or abused by temporary carers (Mc Gowen & Blumenthal, 1978; Bloom & Steinhart, 1993; Kingi, 2000; Richie, 2001; Arditti & Few, 2006). Women’s coping skills are further stretched by what Arditti and Few (2006) identified as the triple threat; substance abuse, trauma and mental health, all of which are intensified by the prison experience. Richie (2001) identified seven barriers to successful reunification; the top four being treatment for substance abuse problems, safe and affordable housing, health and mental health services and comprehensive services. These particular barriers will be further addressed in the next sub-themes.

According to Loper and Tuerk (2010) incarcerated parents who receive parenting education in prison are better able to communicate with their children and carers from inside prison, and are better able to manage their children when they return to the home. Further, they are better equipped to handle the stress of separation and are less likely to isolate themselves from their children. Loper and Tuerk assessed the effectiveness of the Parenting from the Inside (PFI) program in the USA. Mothers reported less parenting stress, improved communications and relationships with both children and carers, and less mental stress (2010).
Similiar research into parenting education within prison has been conducted in Australia. Frye and Dawe (2008) conducted a review of the ‘Parents under Pressure’ (PUP) program in QLD. The PUP program is currently provided to families in QLD\(^{12}\) and runs weekly over a period of three to four months. The program includes child management skills; enhancing the parent-child relationship; identifying and regulating ones emotional state; managing substance abuse and extending social networks (Frye & Dawe, 2008). Acknowledging the primary caring role dominant amongst incarcerated mothers, this was the first trial of the program with mothers who had been incarcerated. One of the objectives of the program is to interrupt the cycle of criminal behaviour of incarcerated parents. Results showed increased emotional wellbeing, decreased levels of parenting stress and improvements in children’s behaviour (Frye & Dawe, 2008). In NSW the Mothering at a Distance Program (MADD) was evaluated by Perry (2009) with similiar findings. Additionally, mothers in that program reported increased confidence and patience in day to day communication with their children. Here in Victoria, parenting skills are included in services offered by Corrections Victoria in their WISP program (Corrections Victoria, 2008). However, as noted above, WISP is only funded for three to twelve months of support provision (CHRIP, 2010; Flat Out, 2010).

Research in Australia has also addressed the barriers to family reunification (Goulding, 2004; Hannon, 2006; Wybron & Dicker, 2009; Baldry, 2010a). Goulding (2004) in her ‘Severed Connections’ research with 52 women in WA, sought to understand the particular impact of incarceration on womens’ familial and social connectedness. Forty three of the women were incarcerated at time of interview and nine were newly released. Upon release they faced a number of challenges which required significant coping skills. These challenges include: chronic homelessness; drug addictions; abusive partners; mental illness and social isolation. For those few who had strong family connections, jobs and stable accommodation, they still suffered severe stress from broken relationships (Goulding, 2004). Further, Goulding (2004) concurred with research forty years earlier (Zalba, 1964) in that child custody arrangements tended to be ad hoc due to the mothers unrealistic expectations of not receiving a custodial sentence.

In her (2006) research into barriers to reunification, Hannon described the children’s anger and resentment towards their mother, some of whom will have grown up during their mothers’ incarceration and no longer see themselves as children. These findings are supported by Frye and Dawe (2008) and Wybron and Dicker (2009). Additionally, mothers in Hannons (2006) sample found the parole requirements to be too complex, especially as the mothers feel

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\(^{12}\) The PUP program is also provided across ten locations in the UK. (See Frye & Dawe, 2008).
stigmatised, lost, have little support and lack confidence. It should be noted that the Corrections Victoria Best Practice Guide for Case Management with Women (2009) encourages a strengths-based approach to limit potential discrimination and address the complexity of womens’ needs post-release. It also acknowledges that the supervision and compliance roles of the community corrections officer can create conflict (Corrections Victoria, 2010). Baldry (2010a) also criticised the lack of post-release programs to address barriers to reunification and suggested that these should apply to all women post-release, including those who have served short custodial sentences or have been held on remand. Regardless of whether the mother has been in prison for one month or ten years, she still needs intervention to address reunification and reintegration back into society (Baldry, 2010a).

This sub-theme has discussed the challenges which mothers post-release must overcome in order to regain custody of their children. Mothers must juggle a myriad of parole requirements whilst feeling isolated in the community. The transition stage was determined to be of particular importance. Some of the challenges identified include managing substance abuse and mental illness. These are addressed in the next sub-theme.

2.4.2. Health challenges on the outside

As noted above, challenges facing women who have recently been released from a period of incarceration include continued substance abuse and continued mental and physical health issues (Kingi, 2000; Travis, Solomon & Waul, 2001; Goulding, 2004; Hannon, 2006; Bergseth et al., 2011; Visher & Travis, 2011). Kingi (2000) in her NZ longitudinal study of 54 women with lived prison experience found that most women were unable to cope with their post-release day to day anxieties. Those who had drug addictions struggled with stigmatisation and staying ‘clean’ in the face of many temptations, not least of which was the isolation brought on by avoiding ones past social circles. Frequently, they returned to poverty and the challenge of dealing with addictions, whilst trying to regain custody of their children (Kingi, 2000).

In the USA researchers in the Urban Institute designed a multistate longitudinal project of men and women prior to release and post-release (Visher, La Vigne & Travis, 2004). The project included a pilot study in Maryland (phase one) followed by full research studies in Illinois, Ohio and Texas (phase two). The pilot study in Maryland (2004) consisted of interviews and surveys with 324 prisoners (235 men and 89 women) one to three months prior to release, and at two subsequent post-release intervals; two months and four to six months (Visher et al., 2004). The researchers acknowledged that self-report data can include some inconsistencies resulting from lapses of memory, but their data was derived from those experiencing first-hand the challenges
of prisoner re-entry. Their findings are important because they support previous research listed above. They reported that more than 52% of participants post-release had substance abuse problems with women reporting more extensive drug use. Additionally, women were more likely than men to report depression and PTSD. Most of the participants were living below the poverty level (Visher et al., 2004).

In 2004, La Vigne et al. (2009) conducted analysis on the responses of only those 142 women who had participated in both phases one and two of the Texas research project. Their aim was to document the unique circumstances women face both leading to incarceration and those inhibiting reintegration on release. They reported that women were twice as likely as men to be re-incarcerated within 12 months of release, typically due to drug related property offences. Their findings also showed that women met a different set of re-entry challenges with a different set of skills deficits (La Vigne et al., 2009). Of particular note was their substance abuse which was found to be the greatest predictor of reincarceration. Their educational and employment deficits meant that women were less likely to have been employed before incarceration, and just as unlikely to be employed post-release. Further, by the eight to ten month post-release interview, 31% had lived with a past inmate, and 19% were living with people with substance abuse issues (La Vigne et al., 2009).

Research conducted in Australia shows similar findings (Goulding, 2004; Hannon, 2006; Baldry, 2007; Wybron & Dicker, 2009). However, little is still known about the growing number of ex-prisoners in our community (Carlton & Seagrave, 2011; Kinner, Preen, Kariminia, Butler & Andrews, 2011). Goulding’s 2004 research reported most of the 52 women she interviewed (nine post-release and 43 incarcerated) found it difficult to integrate back into mainstream society, 52% used illicit drugs and 27% were alcohol abusers. Hannon (2006) also reported that many women exiting prison suffered extreme loneliness and not surprisingly, sought solace in their former friends who were often still addicted to illicit drugs. Baldy (2007, p.6) highlighted the need for ‘throughcare’ policies in providing a ‘continuous, co-ordinated and integrated management of offenders’, from the day they enter prison to a period of month’s post-release. In a submission to the DCPC (2010) by Anex13, it was noted that the lack of continuity of drug treatment post-release places women at enormous risk of resuming drug use and potentially overdosing. According to Wybron and Dicker (2009), society is largely uninterested and mainly discriminative towards women with lived prison experience; hence the women feel worthless and isolated when they exit prison.

13 Anex is an NGO which addresses substance abuse and harm reduction issues.
Research conducted by Davies and Cook (2000), Graham (2003) and Hobbs, Krazlan, Ridout, Mai, Knuiman and Chapman (2006) has established a link between incarceration and post-release morbidity. In 1998 and 1999 Davies and Cook documented the disproportionate rate of female death post-release and highlighted the well documented factors of poverty, substance abuse and mental health which gave rise to their vulnerability. They cited that between 1990 and 1995, 62 women had died within three months of leaving prison. The majority (41) died from drug overdoses and another four from drug-related complications (Davies & Cook, 2000). Graham (2003) conducted a study of post-release mortality among Victorian prisoners by linking prisoner data with coronial data between 1990 and 1999. The study found that unnatural death was 10 times more likely among recently released prisoners over the study period than in the general community, with no difference being recorded between Indigenous and non-Indigenous prisoners (Graham, 2003). Hobbs et al. (2006) conducted research using DoJ records on prisoner release together with hospital admission data obtained from the Department of Health. Standard morbidity ratios (SMR) were calculated using mortality data for WA supplied by the Department of Health. Findings confirmed that females post-release were at greater risk of hospitalisation and death than their male counterparts (Hobbs et al., 2006). Of particular concern was the period immediately following their release, as nearly 50% of all Indigenous female prisoners and 35% of all non-Indigenous female prisoners had hospital admissions in the first 12 months following release, compared to the respective rates for male prisoners of 24% and 19%. The main reasons for these hospital admissions were suicide, drug and alcohol problems and poisoning (Hobbs et al., 2006).

Addressing the limited research into post-release morbidity, Carlton and Seagrave launched their Surviving Outside research initiative in Victoria in 2009. This initiative was launched with the support of many Victorian support agencies including Flat Out Inc, MCM and VACRO. They interviewed 14 female ex-prisoners and 16 prison advocates (Carlton & Seagrave, 2011). They sought to extract the personal stories and trajectories behind the statistics already established. A key theme which emerged was the prevalence of trauma and abuse as a consistent and pernicious factor in many female prisoners’ lives, in particular those of indigenous females. The researchers claimed therefore that incarceration is but one episode in lives already characterised by abuse and neglect, and that incarceration serves both as an extension of trauma and a reinforcement of marginalisation (Carlton & Seagraves, 2011).

This theme has discussed the health issues which women face post-release. These include PTSD, substance abuse, mental illness and social isolation. Post-release morbidity and suicide
were also discussed. One of the first challenges however for mothers post-release is finding a safe place to live. This is discussed in the final sub-theme below.

2.4.3 Housing as an imperative need

The link between incarceration and homelessness has been given much attention in the literature to date (Davies & Cook, 2000; Malone, 2008; Thomson, 2008; Barton & Russell, 2012). The situation can be very grave in the USA, as drug or alcohol use can mean a mother can be barred from public housing and unable to claim benefits unless they can prove that they’re attending a rehabilitation program. In 1997, according to statistics generated by the Californian Department of Corrections, in urban areas such as San Francisco and Los Angeles 30% to 50% of parolees were estimated to be homeless (Travis et al., 2001). The researchers reported stigmatisation among housing workers to be a large issue. Further, they found that women exiting prison had particularly unrealistic expectations of both getting and keeping a job, especially given the requirement for housing and employability references.

In 2011 in the USA, an interesting study was conducted assessing the needs of women exiting prison; interesting because at the time its approach was unique, that is, they interviewed service providers for their perspectives on the most pressing needs of these women, as well as their perceptions on how these needs were being met (Bergseth et al., 2011). To date there had been no similar approach in the USA. They distributed a survey and secured a response rate of 50% (24 responses). The researchers acknowledged the small sample size but suggested that the strong response rate strengthened their findings (Bergseth et al., 2011). Seven ‘need’ categories were identified by more than one third of the respondents: employment; housing; family-related needs; mental health; interpersonal functioning; substance abuse and acceptance/support. Each of these needs have been previously identified in the literature. Fifty percent of the service providers identified inadequate funding as their primary challenge in providing support, and mentioned the difficulty of addressing the many complex needs of women exiting prison. They described the women as being overwhelmed at trying to organise housing, jobs, reunification with family and meeting parole requirements (Bergseth et al., 2011). Unmet needs which were identified included transitional and long-term housing, availability of prescription medication for mental health problems and suitable jobs available for women exiting prison.

In Australia, according to George (2011) only 30% of women expect to live with their partners or their parents on release from prison, compared to 67% of their male counterparts. Moving house once in the immediate 12 months post-release increases the chance of recidivism by 22%, with subsequent moves increasing to 60% (George, 2011). Georges’ comments are based on
previous findings by Baldry, McDonnell, Mapleton and Peeters (2006) who found that women were more likely to return to prison than men – not because they were more criminally inclined but because they were more socially disadvantaged. Baldry et al. (2006) also determined the lack of safe and affordable housing to be the highest barrier to women reuniting with their children. Further, they found that those inmates with a mental illness or intellectual disability, including single women with children, were particularly vulnerable to poor housing on release. According to Baldry et al. (2006), Walsh (2007) and Murray (2009), for many women, homelessness exacerbated pre-existing mental illness, but for others homelessness contributed to their mental illness. They suggested therefore that these factors are interactive and interdependent on each other. Furthermore, Murray (2009) stated there is a shortage of transitional, short and long term public housing with which to meet the 'no exit’s policy of the 2008 Australian Government White Paper on Homelessness.  

Many women lose their homes while they are incarcerated and many women commit crimes because they are homeless. Women exiting prison are not given a realistic chance of rehabilitation if they are placed in housing entrenched with the problems which brought about their incarceration in the first place, such as women trying to control their drug addiction being placed in a known ‘hot spot’ (Thomson, 2008). Having secure and affordable housing therefore is imperative if women exiting prison are to successfully reintegrate back into society. Without a safe home base women cannot reconnect with their children, seek employment, meet their many parole conditions and connect with support services (Chudiak, 2008). Many women exiting prison are released on parole, however to qualify for parole they must have stable accommodation. This places a terrible strain on the incarcerated mother and her family if relationships have broken down during the woman’s incarceration, or if the mother is no longer welcome in her home because of her past violence or drug and alcohol abuse (Malone, 2008).

This theme has reviewed links between incarcerated mothers’ multiple marginalisations and recidivism. In reviewing the literature and research it has been established that women exiting prison face more complexities in reuniting with their children than their male counterparts. Of major concern is their social isolation, their dependency on illicit substances, their mental health disorders and the poverty which underpins their lives.

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14 The ‘no-exits’ policy of the 2008 White Paper on Homelessness ‘The Road Home’ is particularly relevant to prisoners exiting prison. The policy aims to prevent any person exiting a medical or custodial environment from being made homeless. See Department of Families, Housing, Community Services and Indigenous Affairs (FaHCSIA).gov.au.
2.5 Conclusion

Little research has been conducted on the particular issues mothers face in prison and on release, and even less is known about the issues they face in re-establishing the maternal role. In particular, in Australia little research has been conducted on these issues from the perspective of service providers who are best placed to assess the impact of maternal incarceration on the mothers’ chance of reunifying with her children. In NSW, Baldry, Ruddock & Taylor (2009) conducted a needs analysis on mothers leaving prison who had dependent children. Their research included interviews with service providers but was specifically focused on Aboriginal mothers.

Women emerge from prison in much worse shape than when they entered. Typically, they are traumatised, stigmatised, and homeless, with their physical and mental health problems exacerbated and their children alienated and angry (Richie, 2001; Dodge & Pogrebin, 2001; Arditti & Few, 2006; Baldry, 2007; Bergseth et al., 2011). It is acknowledged that some mothers will always need to be imprisoned due to the seriousness of their offending, but for most mothers the human cost to them and their families is insurmountable (Farrell, 1998a; Kingi, 2000, Easteal, 2001; Kilroy, 2005; Carlton & Seagrave, 2011). Studies reviewed in this chapter have repeatedly called for more collaborative services and more gender-responsive policies and programs. The female prison population is sufficiently small to allow policy makers to develop more cost-effective and humane methods of addressing the social problems these women face, rather than relying on prison as the only sanction, particularly given the negative impact of short custodial sentences on the whole family. Programs should be developed which strengthen families rather than fragment them, and in so doing, reduce the intergenerational cycle of poverty, addiction and criminality (Kingi, 2000; Watterson, 1996; Frye & Dawe, 2008; George, 2011).
Chapter Three: Trying to make sense of it all...

A feminist standpoint is a way of understanding the world, a point of view of social reality, that begins with, and is developed directly from, women’s’ experiences. The next step is to draw on what we have learned from women’s experiences, to apply that feminist standpoint toward bettering the condition of women and creating social change. Women’s experiences not only point to us flaws in larger economic and political systems but also offer potential solutions to these flaws.

(Brooks, A. 2007, p.60).

3.1 Introduction

This quotation demonstrates the importance of feminist standpoint theory for examination of women with lived prison experience. The researcher extends the notion of feminist standpoint theory to incorporate labelling theory for analysis of discrimination of women with lived prison experience.

As this study is focusing on women and their role as mothers, it is imperative that this research encompass feminist theory. Feminism is rooted in the belief that women’s truth in experience and reality is very different from men’s (Grant 1993; Ramazanoglu & Holland 2002; Noaks & Wincup, 2004; Walter, 2010). During the late 1960s and 1970s, feminist scholars became increasingly frustrated at the contradictions between their lived experiences as women and mainstream feminist theories and findings (Harding, 1991; Noaks & Wincup, 2004; Hesse-Biber & Leavy, 2007). Expanding on these notions, feminist standpoint theories emerged in the early 1980s and became the most debated and influential theories of feminism in the social sciences (Hirschmann, 1997; Wylie, 2003; Harding, 2004).

This chapter outlines the theoretical framework and methodology employed in this research. The selection of a qualitative method as opposed to a quantitative method is justified, as is the methodology. The sampling approach and issues pertaining to accessing the sample of participants is also discussed. Ethics approval for this research is detailed, and finally, limitations and issues relating to reliability and validity are outlined.
3.2 Feminist Theory

Because women’s movements have developed at different periods, across many different languages and cultures, and in many different ways, the characteristics of feminism remain debatable (Ramazanoglu & Holland, 2002; Noaks & Wincup, 2004). Initially women were left out of research samples altogether; later traditional theories were re-worked to include women, but feminist theory was not used to interpret the research findings. This is what Daly (1995, p.445) as cited in Morash & Schram (2002, p. 3) referred to as ‘add women and stir’ (see also Hesse-Biber & Leavy, 2007 and Carrington, 2007). Feminism today focuses attention on women as victims and is underpinned by a sense of moral outrage at how women are viewed and treated in society (Harding, 1991; Noaks & Wincup, 2004; Neuman, 2012). It has been argued that a latent love of women permeates most feminist research. This can be confronting to those who are not used to loving and valuing women for themselves. It is that mutual love and support that has been the basis of much social activism for women (Harding, 1991).

Feminist criminology is diverse - there are many strands of feminism - from radical and social feminism to liberal and cultural feminism. However, as mentioned above there has been a consistent neglect of women in criminological thought and enquiry (Farrell, 1998a; Cunningham, 2001; White & Haines, 2004; Walter, 2010). This is due in part to the perceived statistical insignificance of women portrayed by crime statistics (Farrell, 1998a; Morash & Schram, 2002). Feminist criminology is based on the premise that women are structurally disadvantaged in the present society, that is, that women occupy an unequal position in society (Ramazanoglu & Holland, 2002; White & Haines, 2004).

According to Hesse-Biber and Leavy (2007) there is no single feminist methodology, nor is there a single feminist concern:

- Liberal feminists believe that women are oppressed because they suffer discrimination. Their focus is on equal opportunities for both men and women. Liberal feminism’s inability to acknowledge social divisions among women has created debate about the extent to which it can be considered a feminist theory (Dominelli, 2002; White & Haines, 2004; Hesse-Biber & Leavy, 2007).

- Radical feminists believe that women are oppressed because of men’s’ control over their personal and public capacities - the patriarchal society. Radical feminism has been criticised for its inability to address the roots of social problems; that is, the structural issues in society (Dominelli, 2002; White & Haines, 2004; Hesse-Biber & Leavy, 2007).
Postmodern feminism has deepened feminist analysis to include concepts of language, discourse, deconstruction and difference. Postmodern feminism has been criticised however for over-emphasising differences and thus undermining the collective identities which women create in their relations with others (Dominelli, 2002; Ramazanoglu & Holland, 2002; Hesse-Biber & Leavy, 2007).

Traditional Marxist feminists believe that women’s oppression lies in their social exclusion. They are frustrated at the roles which women occupy in a capitalist society, for example, as generally home labour or low-paid employment (Jaggar, 2004; White & Haines, 2004).

Social feminists explain women’s oppression using a revised version of the Marxist theory of alienation (Jaggar, 2004).

Feminist standpoint theory stems from the Marxian notion of a standpoint of the proletariat. According to Marx, the different societal positions held by the different classes provide distinct perspectives on reality (Tanesini, 1999; Jaggar, 2004). Research from a feminist standpoint perspective seeks to understand how the social structure contributes to the day to day reality of women’s lives, and seeks an emancipatory transformation of the social structure (Swigonski, 1993; Hirschmann, 1997; Harding, 2004; Jaggar, 2004). Thus, research which focuses on stereotypes can lead to programs and policies that call for personal change strategies, whereas research which focuses on the social structure advances programs and policies that are committed to social change and social justice (Swigonski, 1993; Harding, 2004; Jaggar, 2004).

The researcher therefore chose feminist standpoint theory as being the most comprehensive feminist theory to encompass this research, because it is concerned with facilitating change to the social structure in an attempt to end disadvantage for women in our society who have lived prison experience.

3.2.1 Feminist Standpoint Theory

Approaches to adopting a feminist standpoint vary because there are many feminist theories and many epistemological positions (Harding, 1991). In feminist standpoint research, women’s situations in a gender-stratified society are used to generate more accurate descriptions and theoretically richer explanations than conventional feminist research (Harding, 1991).

According to Harding (2004) feminism is a political movement, but the general assumption in mainstream feminism is that politics inhibits the production of scientific knowledge. Standpoint theory challenges this assumption in that it empowers oppressed groups; it presents as a
philosophy of the sciences, an epistemology, a methodology and a political strategy (Harding, 2004; Jaggar, 2004). Feminist standpoint theory can map how social and political disadvantage can be transformed into an epistemological and political advantage (Harding, 2004; Jaggar, 2004). Feminist standpoint research is research directed by social values and political agendas. ‘Knowing’ therefore from a feminist standpoint can be political, provocative and potentially transforming (Harding, 2004).

Feminist standpoint theorists (see Swigonski, 1993; Wylie, 2003; Harding, 2004) argue that women have a heightened awareness of their own oppressed perspective plus that of the dominant view, referred to as a ‘double consciousness’. Often, this heightened awareness is as a result of the roles women occupy in society; for example, mother, wife, daughter, sister and so forth. In this respect women fulfil the everyday tasks of cooking, cleaning and nurturing whilst being attuned to the male perspective (Harding, 2004; Jaggar, 2004; Brooks, 2007).

According to Nielsen (1990) as cited in Hesse-Biber & Leavy (2007), women who are oppressed learn to survive socially, physically and emotionally by familiarising themselves with how men view the world. In abusive relationships women learn the moods and associated behaviours of their abuser. Thus double consciousness becomes their key to survival (Brooks, 2007). In order to survive, the oppressed group must have knowledge, awareness and sensitivity of both the dominant group’s view of society plus their own; that is, a more complete view of social reality (Swigonski, 1993; Harding, 2004; Jaggar, 2004). Feminist issues therefore are no longer pigeon-holed as of interest only to women, but can inform theoretical, methodological and political thought (Harding, 2004).

Feminist standpoints only emerge when women reflect on the reality of their lives through a politicised framework. Different standpoints have emerged to explain women’s oppression by class, gender, race and so forth. Patricia Collins, for example, as cited in Harding (2004) developed Black Feminist Standpoint Theories to reflect the role of women of colour in slavery and undervalued jobs, and the way that they experience this oppression.

It is argued that in order to bring about change, society requires an understanding of how society operates as a whole, and the complex interrelationships between the dominant and oppressed groups. It is women’s ability to understand both groups’ behaviours that puts them in a unique position from which to bring about change (Tanesini, 1999; Brooks, 2007). Further, because feminist standpoint theory is concerned with facilitating change, it encompasses empowerment of the oppressed in order to bring about that change. Conducting research that is
centred on women’s lives therefore produces an accurate picture of how society operates, but it also provides knowledge of knowing where to start in building a new society where all members are equal (Tanesini, 1999; Brooks, 2007).

Standpoint theory is both a social and political epistemology. Its core focus is that those who are oppressed may have an epistemic advantage by virtue of their experience (Wylie, 2003; Harding, 2004; Jaggar, 2004).

3.2.2 Feminist Standpoint Epistemology

An epistemology is a way of determining how researchers know what they know (Ramazanoglu & Holland, 2002). Feminist standpoint epistemology requires that women’s concrete experiences be at the centre of the research process. Further, the standpoint of women generates ontology of relationships (Jaggar, 2004). According to Collins (1990) as cited in Brooks (2007, p.56) it is these ‘concrete experiences’ themselves which provide the ultimate ‘criterion for credibility’ of feminist standpoint knowledge claims. The basis of feminist epistemology is that women are able to understand different aspects of the world and human activities in ways that challenge the male perspective of existing realities (Harding, 2004; Jaggar, 2004; Narayan, 2004).

One of the most criticised aspects of feminist standpoint epistemology is the concept of ‘double vision’ which is the notion that oppressed groups; for example women, have an ‘epistemic advantage’ from having knowledge of both their own practices and those of their oppressors (Swigonski, 1993; Wylie, 2003; Harding, 2004; Jaggar, 2004; Narayan, 2004). Thus, the standpoint of the oppressed includes and is able to explain the standpoint of the dominant group (Tanesini, 1999; Jaggar, 2004). According to Jaggar (2004), the standpoint of the oppressed is more impartial because it reflects the interests of society as a whole. In a society where the production of knowledge is controlled by the dominant class, the reality of the oppressed will be interpreted according to the values and interests of the dominant class (Jaggar, 2004). However, the premise that oppression bestows an ‘epistemic advantage’ should not, it is argued, lead to the idealisation or romanticisation of oppression and ignore its real material deprivations (Narayan, 2004). Further, an epistemic advantage is not automatic. According to Harding (2004, p.9):
The moment of critical insight is one that comes only through political struggle, for it is blocked and its understanding obscured by the dominant, hegemonous ideologies and the practices that they make appear normal and even natural.

It has been argued that feminist standpoint theory’s focus on the experiences of women means that it ignores the epistemological concept of objectivity (Wylie, 2003; Harding, 2004; Jaggar, 2004). Feminist standpoint theorists claim however, that rather than dismissing the researchers' human emotions, subjectivities and lived experiences as contaminants in the quest for knowledge, that in embracing them it is possible to generate new knowledge. The concept of the ‘value-free researcher’ is dismissed and the personal experiences, values and passions of the researcher actually guide the research project (Hesse-Biber & Leavy, 2007). Thus a feminist epistemological framework is regarded as ‘honest and value laden’ (Longino, 1999 as cited in Hesse-Biber & Leavy, 2007).

Feminist standpoint theory has been accused of proposing a single standpoint arising not from ordinary lives but from privileged, middle class white women (Jaggar, 2004; Carrington, 2008). It is stressed by feminist standpoint theorists, that it is the ongoing self-reflection which enables the justification of socially-situated knowledge claims. Thus, they argue that ongoing self-reflection provides for a stronger objectivity than that of the traditional starting point of the dominant class (Wylie, 2003; Harding, 2004; Jaggar, 2004). The research undertaken in this thesis has been conducted through the eyes of the professionals who support women exiting prison; professionals who have had years of experience working in the justice sector. Some of them have lived prison experience themselves, further validating the information gathered.

Much of the criticism around feminist standpoint theory lies in the assumption that ‘experience’, around which this research is centered, applies to all women; thus negating differences among women (Wylie, 2003; Daly, 2004; Harding, 2004; Jaggar, 2004; Brooks, 2007; Carrington, 2008). Feminist standpoint theorists respect that women come from a diverse range of class, cultural and racial backgrounds. As well, they occupy diverse social roles in diverse social realities. By sharing their unique experiences women can develop a common position, or standpoint, without compromising their differences (Wylie, 2003; Harding, 2004; Jaggar, 2004; Brooks, 2007). According to Harding (2004, p.63), differences in women’s experiences, if used correctly, need not be a source of weakness but can be a ‘scientific and political resource for feminism’. Further, feminist standpoint theorists recognise that women’s struggles are
constantly evolving. They accept the importance of continued dialogue between women in building more just societies (Wylie, 2003; Harding, 2004; Jaggar, 2004; Brooks, 2007).

Despite the above criticisms, standpoint theory continues to be used in social research, and it continues to be challenged. Feminist standpoint epistemology requires women’s knowledge to be validated, translated into practice and applied towards social change and the elimination of oppression (Wylie, 2003; Harding, 2004; Jaggar, 2004; Brooks, 2007). The inseparability of epistemology, politics and power encourages feminist researchers to imagine a more just world where human relations can be different (Ramazanoglu & Holland, 2002; Harding, 2004; Jaggar, 2004). Feminist standpoint epistemology is a unique philosophy that requires us to understand the world through the experiences of oppressed women, including the mental and physical violence they endure as an oppressed group (Brooks, 2007). The application of this theory is particularly important because this research examines the experiences of incarcerated mothers who are an oppressed group. Further, this research examines the mental and physical violence which they endure as members of that oppressed group. The researcher extends the notion of feminist standpoint theory to encompass labelling theory. Labelling theory can be useful in examining discrimination of women with lived prison experience.

3.3 Labelling Theory

Labelling theorists stress that it is not merely one’s behaviour but the label which society attributes to that behaviour which defines a person as a criminal. What is considered to be criminal changes over time, across cultures and even across genders (Lilly, Cullen & Ball, 2002). Howard Becker’s (1963) work on marijuana use in the 1960s made labelling theory one of the most influential sociological theories of its time. Becker asserted that society makes rules by defining what a criminal act is, and then applies labels to those who contravene the rules (Van Krieken et al., 2000; Lilly et al., 2002; White & Haines, 2004; Muraskin, 2007).

According to labelling theory, the acquirement of a label singles a person out for special treatment; they are perceived as different, requiring different treatment (Lilly et al., 2002). Dominelli (2002) says many problems experienced in the home have earned women the label of ‘bad mother’; for example, women have been blamed for failing to protect their children from abusive partners. In some cases the labelling becomes the ‘master status’ as it overrides all other statuses the individual may have (Becker, 1963; Van Krieken et al., 2000; White & Haines, 2004; Muraskin, 2007).

This is relevant to this research because incarcerated mothers are labelled both as criminals and as bad mothers. Labelling theory argues that individuals engaging in criminal activity attract a negative reaction from others which transforms from a negative image of the activity into a negative image of the person. Individuals will then reorganise their self-image into negative definitions of themselves. This is known as a self-fulfilling prophecy (Vold, Bernard & Snipes, 2002). This is particularly relevant to mothers exiting prison who are negatively affected by discrimination in society.

Women have been labelled and treated differently for centuries simply because of their gender (Muraskin, 2007). Labelling theorists stress that one’s ability to counteract labelling is determined largely by the level of power one enjoys in society; powerful groups define both the crime and the expected reaction to the crime (Vito & Holmes, 1994). As women have less power than men, they have less ability to counteract the label which has grave consequences for them (Muraskin, 2007). Attributing a label to someone does not merely provide a social judgement of that person, but it publicly degrades that person’s moral character. So it is not simply their behaviour that is seen as ‘bad’ but the person themselves (Lilly et al., 2002). When a mother is labelled as ‘bad’ she sees herself as a ‘bad mother’. This can put a strain on family relationships, especially with her children. Many recent studies claim that incarcerated mothers experience feelings of shame – the ‘bad mother’ syndrome (Dodge & Pogreb in, 2001; Arditti & Few, 2006; Berry & Mahdi, 2006; Hunter & Greer, 2011).

If a person is labelled as criminal, then others see that person and respond to that person as having criminal traits (Van Krieken et al., 2000; Lilly et al., 2002; White & Haines, 2004; Muraskin, 2007). That person’s self image, which is derived from how society treats them, then takes on the characteristics of the label (Haralambos & Holborn, 1980). Cohen (1987) as cited in Van Krieken et al. (2000, p. 444) referred to this reaction as a ‘moral panic’. Mothers experience feelings of guilt over abandoning their children. These feelings of self-deprecation and anxiety, along with the ‘bad mother’ label result in a painful and enduring stigma. Labelling theory therefore is particularly relevant to research about mothers with lived prison experience because of the effect which a negative maternal self-image can have on the mother-child relationship (Chesney-Lind & Rodriguez, 2004).

When a person is given a label, they often lose their social circle; they are only welcome amongst people similarly labelled (Lilly et al., 2002). This is a particular problem for mothers exiting prison, particularly if they are drug users and need to avoid ‘hot spots’. (See chapter 2.4).
Negative labels can also lead to employment difficulties and housing difficulties, thereby limiting the mothers’ chances of being able to resume care for her children (Lilly et al., 2002). Further, women who commit crime present as more psychiatrically disordered than their male counterparts (Muraskin, 2007).

Because labelling theory is concerned with the meanings and understandings that individuals apply to behaviour, it is particularly suited to a qualitative methodology.

### 3.4 A Qualitative research methodology

A research methodology is the frame of reference for the research project. Methodologies are broad; the main categories are quantitative and qualitative (Walter, 2010). A qualitative approach is best suited to research which is exploratory and seeks to understand a phenomenon (Creswell, 2005; Babbie, 2010; Walter, 2010; Neuman, 2012). This research explores the effect which spending time in the prison environment has on the relationships between incarcerated mothers and their children and is particularly suited to a qualitative approach. Qualitative researchers are bound by principles which combine ontological, epistemological and methodological beliefs. These are often referred to as a paradigm, or a set of beliefs which guide action, determining the questions asked and the interpretations brought to them (Denzin & Lincoln, 1994; Walter, 2010; Neuman, 2012).

Qualitative data can highlight subtleties in behaviour not achievable in quantitative research (Jupp, 1989; Denzin & Lincoln, 1994; Crotty, 1998; Burns, 2000; Maxfield & Babbie, 2005, Walter, 2010). This approach has assisted the researcher to look beyond the locked doors and to see the world of maternal incarceration and its long term effects through supporting professionals’ eyes. Eisner (1979) cited in Burns (2000, p.11) emphasised this when he stated there can be ‘little meaning, impact or quality in an event isolated from the context in which it is found’.

Most women in prison share similar life experiences. Typically they have suffered childhood experiences which include: parental substance abuse; sexual abuse by parents or male relatives; living in poverty and suffering fear and trauma during most of their lives (Reinharz, 1992; Radosh, 2004; White & Haines, 2004). Recent feminist work has focused on two key areas; explaining and responding to men’s violence towards women, and addressing the issues associated with inequality and difference in the criminal justice system (White & Haines, 2004).
Qualitative and quantitative approaches offer different aspects of social science research (Burns, 2000; Babbie, 2010; Neuman, 2012). Quantitative approaches produce data which can be generalised to the wider population, however they offer no interpretation of experiences, nuances of meaning or the nature of social relationships; all important in this research (Babbie, 2010; Walter, 2010; Neuman, 2012). Qualitative approaches produce data that can’t be generalised; however the richness, individuality and complexity of the qualitative data collected enable the researcher to gain new insights into relationships, causes and effects (Burns, 2000; Babbie, 2010; Neuman, 2012). Qualitative research can also play a role in advocating for change and improving the lives of individuals (Creswell, 2005). Moreover, the findings from this research may facilitate in-prison and post-release support services design, and may highlight the gaps in the current service offerings.

The research methodology frames the methods used by the researcher. Qualitative research is concerned with ‘what’ questions: what happens to whom; what underpins that behaviour, and what are the outcomes (Babbie, 2010; Walter, 2010; Neuman, 2012). The research method must therefore fit with the chosen methodological approach.

### 3.5 The research method.

Each research method has strengths and weaknesses (Babbie, 2010, Walter, 2010; Neuman, 2012). In selecting the best research method for a research project, the researcher must first address the practical considerations – for both the researcher and the participant – and how this method will facilitate access to the participants. The researcher must also address how cost effective the research will be in terms of time and money. Secondly, the researcher addresses how best the chosen method can produce the data required to answer the research question (Babbie, 2010; Walter, 2010; Neuman, 2012).

#### 3.5.1 The sampling method

The sampling method used in this research was purposive. Purposive sampling, also known as judgemental sampling, is when the researcher selects the sample based on their judgement or knowledge of the target sample and how best they can contribute to the research purpose (Babbie, 2010; Walter, 2010; Neuman, 2012). Purposive sampling is not appropriate if the goal is to get a representative sample, as the cases selected rarely represent the greater population (Babbie, 2010; Newman, 2012). More specifically, ‘expert sampling’ is a type of purposive
sampling whereby the sample is selected on the basis of their expertise in a particular area (O'Sullivan, Rasel & Berner, 2008).

Qualitative research can involve small samples. The sample in this study was six. This was considered optimum for the scope of this thesis. Qualitative researchers look for meanings behind individuals' experiences (Hesse-Biber & Leavy, 2007). The purposive sampling variables used for selecting the professionals were:

- The professionals had to work with mothers either in prison or exiting prison
- Their organisations could not be funded by DoJ as the researcher had not sought DoJ ethical clearance
- The professionals may work with families of incarcerated mothers (husbands, partners, children or other family members) but they had to have sufficient focus on the mothers' issues in regaining custody of their children in order to respond to the researchers' questions
- The professionals may provide different services; either systemic advocacy or specialist services to mothers exiting prison.

Ethics approval was obtained (see 3.7). The Plain Language Statement (see Appendix Three) and interview schedule (see Appendices Four and Five) were sent to each professional prior to scheduling the interviews.

3.5.2 Sample profile

The following table represents the profile of professionals interviewed. Because the researcher is of Irish nationality, female Irish pseudonyms have been assigned to each professional to ensure anonymity.
Table 3.1 Table of research participants (professionals)

<table>
<thead>
<tr>
<th>Name</th>
<th>Experience</th>
<th>Clients</th>
<th>Services provided</th>
</tr>
</thead>
<tbody>
<tr>
<td>Aoife</td>
<td>Almost 5 years</td>
<td>Women during and post incarceration</td>
<td>Systemic advocacy, program and service referrals, co-ordination and goal setting</td>
</tr>
<tr>
<td>Sinead</td>
<td>3 years</td>
<td>Women during and post incarceration</td>
<td>Systemic advocacy, program and service referrals, co-ordination and goal setting</td>
</tr>
<tr>
<td>Niamh</td>
<td>Over 6 years</td>
<td>Men and women during and post incarceration</td>
<td>Advocacy and education on pharmacotherapy, program referrals and ongoing support</td>
</tr>
<tr>
<td>Eilish</td>
<td>Over 15 years</td>
<td>Men and women during and post incarceration</td>
<td>Counselling, program and service referrals, plus psych support</td>
</tr>
<tr>
<td>Grainne</td>
<td>23 years</td>
<td>Families during and post incarceration</td>
<td>Referrals to a range of local community health systems, ongoing psych support, housing and provision of support programs</td>
</tr>
<tr>
<td>Saoirse</td>
<td>25 years</td>
<td>Families during and post incarceration</td>
<td>Program and service referrals, mentoring, housing, advocacy and provision of support programs</td>
</tr>
</tbody>
</table>
3.5.3 Identifying and accessing the sample

Identifying the sample was a complicated process. It took almost six years of attending specific conferences and seminars for the researcher to be accepted and recognised by the professionals she wished to interview. It was only because the researcher was known as a regular attendee genuinely interested in the topic that her research was supported. Attending relevant conferences and seminars also facilitated the necessary networking; contacts were made and then the researcher was introduced to others and so forth. The researcher was then able to identify the most suitable professionals to approach for participation in this research.

One problem the researcher came across in identifying the sample was that some professionals in NGO’s whom the researcher was interested in interviewing were either working on particular programs funded by the DoJ or were contracted directly by the DoJ. This restricted the potential interviewees as these professionals were not able to participate in the research.

The researcher was cognisant of the demands she was placing on the professionals in asking them to participate in this research. According to Noaks & Wincup (2004) researchers need to be explicit about both the demands and the implications their research may have on the participants. The participants are doing them a favour in agreeing to assist, so demands placed on their time and resources need to be realistic. As Bell (1999, p.46) cited in Noaks & Wincup (2004, p.57) states:

If at some time in the future, colleagues or other research workers ask for your co-operation with a project, would you be willing to give them the same amount of time and effort as you are asking for yourself? If not, perhaps you are asking too much.

Once the target sample was identified it was a very time consuming exercise to schedule the interviews. According to the professionals, they are approached on a daily basis – often unsuccessfully – for their support in research projects. They are extremely overworked with constant demands being made on their time. For example, they may be called to attend court on behalf of their client, they have an ‘open door’ principle and therefore a client may drop in with an urgent problem, or just simply problems present themselves and they are then unable to be interviewed at that time. As one of their managers explained, much as they applaud research they must always put the needs of their clients first. The researcher therefore must exercise patience and understanding and appreciate the time and resources afforded to them. Once an interview commenced the professionals were more than happy to give the researcher their complete attention and time, which was very much appreciated.
Six semi-structured interviews were conducted over a period of six months. Lengths of interviews were between 45-80 minutes duration. Prior to the commencement of the interviews the participants signed the consent form (see Appendix Two).

Field notes were written as soon as possible after each interview. Field notes contain observations regarding body language and emotions not necessarily apparent on audio recordings.

3.5.4 Semi-structured Interviews

Feminist theory in particular has been influential in the development of interviewing strategies, focusing on interviewer discretion and reflexivity. For a woman to be fully understood in social research it is often necessary for her to be interviewed by another woman (Oakley, 1981; Reinharz, 1992; Ramazanoglu & Holland, 2002; Noaks & Wincup, 2004). Feminist social research therefore is often equated with a woman-to-woman qualitative interview; an interview which has been likened to a conversation in which the interviewer pursues certain topics but permits the respondent to do most of the talking (Babbie, 2010; Noaks & Wincup, 2004). This approach to data collection respects the understanding and experiences of the research subjects and facilitates their empowerment (Ramazanoglu & Holland, 2002; Noaks & Wincup, 2004; Hesse-Biber & Leavy, 2007). Further, in-depth interviewing is particularly suited to female researchers because women are socialised to ask questions about one’s feelings, and to respond to those feelings without threatening the participant (Reinharz, 1992; Noaks & Wincup, 2004).

A feminist interviewer is interested in the diversity of women’s realities which are often unarticulated. Even if the interviewer is known to the respondent, she will still be cognisant of her role both as in ‘insider’ and as an ‘outsider’ (Hesse-Biber & Leavy, 2007). Being an outsider might encourage the interviewer to pursue avenues of enquiry they might otherwise have taken for granted. It is important to note that the insider/outsider status is fluid and changes during the interview (Hesse-Biber & Leavy, 2007). In this research, even though the researcher was acquainted with most of the respondents through her years of networking, her insider status was evidenced by a mutual understanding of why certain questions were being asked (thereby acknowledging the depth of knowledge and understanding which the interviewer had of the research topic) and the time and support afforded to her. Her outsider status was evidenced by the generous explanations and depth of knowledge provided of issues pertaining to women with lived prison experience.
Semi-structured in-depth interviews were conducted with six professionals who work on an ongoing basis with both incarcerated mothers and post-release mothers. Semi-structured interviews are interviews where an interview schedule/list is used, however, the questions need not be addressed in that particular order (Babbie, 2010; Walter, 2010; Neuman, 2012). The interviewer allows the respondent to address the topic as they deem fit, and to expand on any issues which are raised. This allows for spontaneity and results in richer data, whilst still ensuring that all questions are addressed (Noaks & Wincup, 2004; Neuman, 2012). This type of interview therefore is suited to topics where the interviewer requires particular issues to be addressed but does not want to interrupt the flow of the interview; allowing the interviewee greater scope in providing input (Noaks & Wincup, 2004; Hesse-Biber & Leavy, 2007; Babbie, 2010; Walter, 2010; Neuman, 2012).

Semi-structured interviewing requires skill: rapport must be established with the interviewee; there must be sufficient understanding of the subject for the interviewer to recognise significant themes, and some probing is necessary to permit the interviewee to expand on emerging themes (Noaks & Wincup, 2004). This requires a level of flexibility in designing the interview schedule.

3.5.5 The interview schedule

Standpoint theory requires that the research must be for the subjects of the research, that is, to advance their causes. The researcher therefore must ensure that questions posed consider the empowerment of the subjects. They must also consider how the outcomes of the research will be used and how the research project will benefit the clients (Swigonski, 1993).

Consent forms were completed by all professionals (see Appendix Two).

The interview schedule was comprised of two parts:

- Part ‘A’ contained profile questions on the professionals themselves plus questions pertaining to their work in supporting mothers incarcerated and on post-release. Questions on the theoretical underpinnings of their work practices were included here. (See Appendix Four).

- Part B contained profile questions on their typical client – the mother. This part of the schedule asked open-ended questions regarding the mothers’ relationships with their...
children whilst incarcerated, and any challenges they face in re-establishing their parental role on the outside. (See Appendix Five).

Starting interviews with standard questions which ask for demographic information is considered an ‘ice-breaker’ and can put the participant at ease (Reinharz, 1992; Noaks & Wincup, 2004). The interview schedule was emailed to each participant before the scheduled interview took place, thus providing them time to familiarise themselves with the schedule.

Interviews using open-ended questions are particularly suited to feminist research as they offer the researcher access to people’s thoughts and memories in their own words. They allow for exploration of the interviewee’s idea of reality within a given context, and may enable the researcher to generate theories (Reinharz, 1992; Babbie, 2010). Open-ended questions are those which address the participant’s feelings about a topic or situation and typically commence with the words ‘how do you feel about’ or ‘what do you think about.’ They encourage the participant to speak freely in their own words about their own experiences, thus generating rich thick data (Minichiello, Aroni, Timewell & Alexander, 1995).

A qualitative interviewer needs to use probes to get in-depth answers without biasing later answers. It takes practice and skill to be able to listen, think, take notes and talk all at the same time (Babbie, 2010). Probes allow the interviewer to show support and encouragement for the respondent. It is also very important to listen to the language used by the respondent and to pick up on markers; passing references to information which is particularly important to them (Hesse-Biber & Leavy, 2007).

When preparing questions it is important to remember that research is about questions and not necessarily about answers. Often an answer may generate a number of additional questions, which have the potential to themselves generate additional rich and deep data (Minichiello et al., 1995). In conducting semi-structured interviews there is always the welcome potential of new issues emerging. It is important therefore for the researcher to maintain an interview guide, which is a list of issues the researcher wants to cover (Minichiello et al., 1995). The interview guide for this research was revised after each interview as the participants provided material not previously thought of by the researcher. The actual interview schedule however remained static.

Interviews conducted in this research study were tape recorded. Tape recording provides the interviewer freedom to concentrate on establishing rapport and generating a conversational style of interviewing. Meanwhile, a full and accurate account of the interview is maintained on
tape (Minichiello et al., 1995). As suggested by Hesse-Biber and Leavy (2007), Babbie (2010) and Walter (2010) the tapes were then transcribed, and ready for thematic analysis.

### 3.6 Thematic analysis

Thematic analysis is the most common tool used when interviews are the chosen method. The researcher reviews the transcriptions of the interviews making notes of themes as they emerge from the data. These themes, along with field notes which include interpretations and sensitivities of the researcher, are then coded. Further analysis provides for sub themes to emerge (Hesse-Biber & Leavy, 2007; Babbie, 2010; Walter, 2010; Neuman, 2012). Thematic analysis was used in this research. It provided the researcher with a thorough interpretation of the data.

The first stage is to organise the data by performing a coding exercise, that is, by marking the segments of transcribed data into meaningful segments. Some segments may contain more than one code as concepts overlap. The researcher needs to re-read the transcribed data many times to ensure that all data is assigned to a code (Hesse-Biber & Leavy, 2007; Babbie, 2010; Walter, 2010; Neuman, 2012). The researcher must also look for meaningful ‘gaps’ in the data, as this in itself is meaningful. A master list of codes is maintained. Coding is a time consuming exercise but careful reading and analysis will result in meaningful interpretation. It is recommended to have an ‘other’ code in the early passes to trap those concepts which are initially hard to group together, or whose relevance has yet to be determined (Hesse-Biber & Leavy, 2007; Babbie, 2010; Walter, 2010; Neuman, 2012).

The next stage in thematic analysis is to explore the relationships between the concepts. When links between concepts emerge these must be analysed to determine the stronger or ‘master’ concept. An extensive literature review and focused interview questions provide familiarity with the data; thus enabling the researcher to identify the emerging concepts and to ensure coding is efficient (Hesse-Biber & Levy, 2007; Babbie, 2010; Walter, 2010; Neuman, 2012).

In qualitative research, interpreting the data and conducting rigorous thematic analysis results in a well conducted research product, and assists in meeting reliability and validity requirements.
3.7 Ethics approval

The ethics application for this research was divided initially into three phases: phase one involved the collection of data from professionals in the justice sector; phase two involved the researcher entering prison and interviewing prisoners one-on-one, and phase three involved conducting focus groups inside the prison. Ethics approval for phase one was received from the RMIT ethics committee on 23/11/2006 (see Appendix One). The ethics approval did not include phases two or three of the proposed research. Because of the time taken to network and identify the professionals, and because the researcher received advice of the complexity and length of time required to gain access to prisoners, a strategic decision was made to interview the professionals in a more detailed manner and that became the focus of the research. The researcher reworked phase one to include questions pertaining to the daily practice of supporting mothers exiting prison and any difficulties the professionals may have in providing that support. The professionals occupy a distinct role in that they work between the mother and the policies which govern her. Little research has been conducted in Australia on the needs of mothers reunifying with their children from the perspective of the professionals who support them. Further, it had also become apparent during networking that the professionals felt their voices were not being heard.

Interviews took place late in/during 2011 - early 2012. Because the perspectives of the professionals had become the focus of the research the interview schedule was divided into two parts to allow the professionals to add insight into how their support meets the needs of mothers exiting prison. See Appendices Four and Five and 3.5.5 in this chapter. This added more to the body of knowledge on the needs of mothers exiting prison and reunifying with their children.

The researcher was required to complete an Ethics Application for one of the NGO’s involved in this research. Ethics approval was obtained; however this is not submitted because of anonymity. This could be provided upon request. All participants completed the participant consent forms (see Appendix Two).

3.8 Reliability & Validity

Reliability and validity are central to quantitative research; reliability referring to the consistency and generalisability of the data. Qualitative researchers prefer to focus on the rigour of their research; producing thick rich descriptions of the lives of people being studied and selecting meaningful concepts which best represent them (Babbie, 2010; Walter, 2010; Neuman, 2012).
3.8.1 Reliability

Internal reliability refers to the plausibility of the data provided by the respondent (Babbie, 2010; Neuman, 2012). The respondents in this research are professionals who work on a daily basis with women in the criminal justice system. They are privileged to have the trust of the women they support, and are therefore in a unique position to relate their stories accurately.

External reliability in qualitative research depends on the researchers’ ability to write in a style that is clear and without embellishment (Walter, 2010; Neuman, 2012). External reliability was ensured because the data presented as findings in this research can be accepted as an honest account of women living with lived prison experience, as well as an open review of the issues faced by professionals in their support of these women. Case examples exemplify the issues.

3.8.2 Validity.

Validity refers to the extent to which our data or results measure what we intended them to measure (Walter, 2010; Neuman, 2012). Validity is concerned with the level of confidence in the researchers’ ability to accurately relate the truth of the social world (Neuman, 2012). The superior validity of field research is the depth of meaning of experiences; for example, homelessness, depression and anxiety (Babbie, 2010).

The question of validity in feminist qualitative research has always been argued. Since there are no universally agreed criteria of validity across time and cultures, feminist researchers have difficulty deciding which truths are ‘better’ (Ramazanoglu & Holland, 2002; Noaks & Wincup, 2004). Feminist researchers focus on authenticity; providing an honest and balanced account of life from the viewpoint of the person who lives it (Noaks & Wincup, 2004; Babbie, 2010).

It is not possible to judge between competing stories of life experiences, hence feminist research attempts to produce a framework for judging different knowledge claims even though there is no agreed framework for validity (Ramazanoglu & Holland, 2002).

3.9 Conclusion

This chapter has reviewed both the theoretical framework for this study and its methodology. Feminist standpoint theory has been described and justified as a theory well suited to a study of women with lived prison experience. Feminist standpoint theory is particularly relevant to this research because it advocates for change in order to end disadvantage in society. Alternate
feminist theories have been critiqued and evaluated. The researcher has further outlined the relevance of Labelling Theory to this study. The sample profile has been outlined and issues pertaining to accessing that sample have been reported. Interviewing NGO’s for their perspectives on addressing the research question is significant for this research because this approach has not yet been undertaken in Australia. The professionals are best placed to assess the issues which mothers exiting prison face in reunifying with their children. This research also addresses the issues faced by professionals in delivering that support. Further, the strengths and weaknesses of qualitative research have been outlined and choice of method for this study has been justified. Ethics approval has been critical in permitting this research which addresses identified gaps in the literature on women with lived prison experience and the impact which being in the criminal justice system may have on their relationships with their children.
Chapter Four: Women on the margins

The problem is the impression can be given when a person is a drug or alcohol user that they don’t care about their children because of their lifestyle. You will see the drug user crying their eyes out saying I do love my kids but this has got such a hold on me, I can’t do it.

(Interviewee: Saoirse)

4.1 Introduction

The above quotation exemplifies the deeply held frustrations by all professionals about how drug use is perceived in our community and the assumptions made of people who use drugs. Of particular frustration is the lack of understanding about why their clients turn to drugs, and the vicious circle of despair which ensues when a child is taken from their mother.

This chapter presents the findings for this research. The information has been organised into themes which emerged from the interviews with professionals who work with mothers inside and outside prison. This chapter commences with a profile of the mothers, herein known as the professionals’ clients. The first theme presented in this chapter discusses the many issues which incarcerated mothers face in attempting to retain the mother-child relationship, including their coping mechanisms and health challenges inside prison. The second theme outlines the challenges which mothers face post-release; trying to regain parental status whilst fulfilling the myriad of parole commitments. It also discusses their health issues as a result of their incarceration. The third theme outlines the day to day reality which professionals experience in working to support these mothers, and presents the theoretical underpinnings of their approach. The final theme discusses the stigmatisation of women with lived prison experience and the consequences thereof. This theme also includes suggestions from the professionals on ways to interrupt the intergenerational cycle of imprisonment. Case examples have been inserted in various themes to demonstrate/further highlight the issue under discussion.

As will be noted in this chapter the word ‘frustration’ appears many times. This is the term used predominantly by the professionals.
4.2 Profile of the professionals clients

The professionals were asked about their typical client profile. Data from this research suggests that the typical profile of mothers in prison supports that largely documented in the literature (see chapter 1.2). All clients were reported to have both mental health and substance abuse issues. Most clients had left school early and were unemployed. Further, all typical clients were either single mothers or in de facto relationships. It is interesting to note that in all profiles except Grainne’s, the client had not been involved in crimes of violence; suggesting only a very small number of violent female offenders. This supports the statistics reported in chapter 1.3. Further, three of the six professionals reported a typical sentence for mothers of six – twelve months; also supporting the statistics reported in chapter 1.3. The other criteria are displayed in table 4.1.

Table 4.1 Typical client profile by professional

<table>
<thead>
<tr>
<th>Professionals</th>
<th>Age (yrs)</th>
<th>Ethnicity</th>
<th>No. of children</th>
<th>Length of sentence</th>
<th>Crime of Violence?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Aoife</td>
<td>23 – 40</td>
<td>Higher numbers of Indigenous and Vietnamese</td>
<td>Varied</td>
<td>Not available</td>
<td>No</td>
</tr>
<tr>
<td>Sinead</td>
<td>20 – 30</td>
<td>Australian</td>
<td>1-2</td>
<td>Varied</td>
<td>No</td>
</tr>
<tr>
<td>Niamh</td>
<td>23 - 40</td>
<td>Anglo Saxon</td>
<td>1-5</td>
<td>6-24 months</td>
<td>No</td>
</tr>
<tr>
<td>Eilish</td>
<td>20 - 30</td>
<td>Anglo Saxon</td>
<td>2-3</td>
<td>6-12 months</td>
<td>No</td>
</tr>
<tr>
<td>Grainne</td>
<td>20 – 30</td>
<td>Higher numbers of Indigenous and Vietnamese</td>
<td>Varied</td>
<td>Varied</td>
<td>Rising occurrences</td>
</tr>
<tr>
<td>Saoirse</td>
<td>30 - 45</td>
<td>Anglo Saxon</td>
<td>2-3</td>
<td>6-12 months</td>
<td>No</td>
</tr>
</tbody>
</table>

All professionals found it difficult to determine a typical ethnicity for their clients, however both Aoife and Grainne had noticed a higher representation of Indigenous and Vietnamese women; again supporting statistics as reported in chapter 1.3. Determining a typical number of children...
was also difficult for all the professionals. Both Aoife and Grainne reported some clients with no children and some with up to eight children. Lastly, determining a typical sentence length was problematic as some professionals do not have access to that information; it is irrelevant to their provision of service.

4.3 Women with lived prison experience: On the Inside

This theme is concerned primarily with the challenges which incarcerated mothers face in maintaining the maternal role from inside prison. It discusses who has care of the children whilst the mother is in prison, and the consequences thereof. Further, it highlights the physical and psychological impact on the mothers and their families.

4.3.1 Mothering from inside

The difficulties which mothers in prison face in maintaining a relationship with their children are complex and numerous. Applying to have a child in prison with its mother was not seen as a viable option by most professionals. The reason for this was that the current overcrowded environment was seen as too dangerous. Further, the process of applying for a mother-baby unit was seen as too lengthy and complex. The age of the child was also an issue in that mothers are happy to have babies with them but not pre-schoolers who are easily influenced by their environment. Saoirse explained that mothers are not in a position to apply until they are sentenced and that often this is too late for them to consider this issue:

One of the biggest problems is that the process takes a long time. Before she’s remanded, the Mum doesn’t know how long she’s going to be in for. Would you take the child in - then when you go to court you might get bailed or get out or get a two year sentence...it’s like, do I uproot the child?........

The following case example demonstrates how the Mothers and Children policy can cause frustration among incarcerated mothers. Sinead in particular questioned the policy requirement for all nominated carers to be approved by Corrections Victoria.
Case example 4:1

It’s really strict; you have to nominate who can help to look after your child and it has to be approved by the prison. So one of the classic examples was I saw this Asian woman in the prison who must have made an application for another person to be a carer and the officers were telling her it had to be approved by the prison. I thought culturally this is bullshit because in a lot of cultures it’s quite common for a child to be raised by the village. It’s like the mother isn’t given the autonomy and respect to decide who can care for her children. I know there’s duty of care but when I’ve seen a couple of kids up there the women just love it; it’s really beautiful and a lot of women will talk about how, if they had their child inside that it wouldn’t be detrimental to them, they’d have so much love.

Interviewee: Sinead

The shame and guilt which mothers face on leaving their children can also damage the mother-child relationship. Many mothers don’t know how to tell their children, especially if the children are getting older and are less likely to believe that mum is in hospital or elsewhere. The shame can come from family members too, as best described by Niamh:

I’ve spoken to some women who, because they don’t want their children to know they’re inside, choose to lose contact with their kids...and that decision can come from the family as well.

Interviewee: Niamh

The question of who cares for the child can be very complex. On the one hand, if there are kinship arrangements then the mother has to rely on family members to bring the children to visit. However, if the family have determined (as described above) to keep the mother’s incarceration from the children, then she won’t receive any visits, and there’s no legal avenue for her to pursue as she has handed her child over into the care of her family. The professionals explained how multiple short sentences in particular can be a problem because the child can bond more to other family members; for example, the grandmother. Then the mother has to acknowledge that the child is best left there. Saoirse best describes the impact on the families:

Families are generally burnt in the process of all this stuff...some families continue to be fantastic for women who’ve been in 10 times, but for a lot of families it takes its toll and the families have been victims in a lot of ways and they are just over it.

Interviewee: Saoirse
On the other hand, if DHS is involved then the mother faces a different set of problems in maintaining contact with her children. These can include last minute cancellations and stigmatisation by DHS workers. Eilish and Aoife in particular spoke of the constant instability around children’s visits:

If you’re relying on an unreliable family member who’s also been brought up in an abusive environment, that’s problematic; and if you’re relying on DHS child protection workers to get your child in, that’s problematic because they’ll often cancel at the last minute...

Interviewee: Eilish

No Mum has a good relationship with DHS just by nature of what they do... they just won’t make it very easy for the mother to have contact with her child. So there’s nothing you can do when you’re inside.

Interviewee: Aoife

The prison environment itself can have an impact on family visits, particularly if the mother is in Tarrengower where distance makes even the cost of phoning home prohibitive. Aoife in particular spoke of the lack of community assistance for taking children to visits at Tarrengower and how the mothers incarcerated there are particularly isolated. Other factors impacting on family visits include the age of the children, the relationship between the mother and the carer, and the emotional backlash on all involved. Some mothers don’t want their children to see them in prison and they don’t want their children to visit them because of the negative environment. Others don’t want visits because of the stress and anxiety which visits create. Teenagers can show a lack of respect for their mothers’ decisions, and some younger children don’t separate well or are traumatised by the officers. Niamh and Saoirse best explain:

There’s excitement and apprehension and there can be an outflow of emotion and this sort of negative expectation that their child won’t come to them... which is all they want you know, but the child may think this person is a stranger, particularly if Mum has gone when the baby was little.

Interviewee: Niamh
Sometimes the child is more bonded to the carer...I have seen children scream for an hour after separation from the carer. So sometimes there is that attachment to Mum but quite often there is the attachment to the carer. So it can be a catch 22.

Interviewee: Saoirse

The following case example highlights the difficulties in mothers receiving visits from teenage children, and how sometimes the child is unresponsive, but that sometimes the mother is unresponsive too.

**Case example 4:2**

*Sometimes there is reluctance on the children’s part and so the mother may say that that’s the issue but the fact is the children don’t want to come in, particularly children over 10 who are able to process the situation and get angry at Mum; they sometimes don't want to say ‘Mum’. Sometimes there really are attachment issues where the attachment isn’t as strong as it could be and so to be honest, some mothers could give or take their kids. I took a child in just before Christmas and we were there five minutes and the child wanted to go home. The child was 14 but the mother’s interaction was so poor the child just felt totally out on a limb and I had to take her home again. So sometimes there are just attachment issues but sometimes it’s just all too hard. It does put them on an emotional rollercoaster or it’s just confronting.*

Interviewee: Saoirse

**Saoirse also explained that the carers’ attitude towards the mother can determine the level of contact. Often the carer does not approve of the mother, her crimes or her lifestyle, and whilst happy for someone else to facilitate family visits, refuses to take the child themselves. Grainne elaborated on the situation:**

*It’s really important because if the relationship between the caregiver and the person in prison has broken down its very difficult... and if the children are in foster care, the foster carers don’t tend to like to take the kids, so somebody else takes the kids... they are getting more and more removed from the daily life of their kids...*

Interviewee: Grainne

4.3.2 Coping mechanisms and mothers’ health inside

For most mothers, losing their children is the worst aspect of incarceration. Some mothers cope by internalising; others take drugs to numb the pain they feel being separated from their
children. Sinead explained that she had never seen a mother lose her children and cope well. She felt that they all have good days and bad days. Mothers have told Sinead that they go through the same experience of loss and grief as if their child had died, but that it’s even worse because the child is alive but they can’t see, touch or talk to them. Grainne spoke of how manipulative mothers in prison can be and how the officers complain about their constant demands, but that this is all part of how women survive; by being very resilient. Niamh spoke of the grief and despair mothers experience and how this leads to using drugs:

There’s that self-loathing and loss of faith. I can’t do what my purpose is in life and that’s to love and raise my child so there’s this ‘fuck the world, I don’t care what happens to me’. They’ll start using again. It’s huge; the women I’ve worked with are broken, broken women.

Interviewee: Niamh

Aoife elaborated on the long term impact of mothers losing contact with their children:

Being removed from her children just dramatically increases the chance of the revolving door through the prison system; it’s the number one factor and it’s very hard for them to find a reason to go forward....it’s a vicious circle.

Interviewee: Aoife

Grainne and Saoirse further described how mothers sometimes make promises they can’t keep in an effort to bond with their children. Additionally, they feel guilty and want to get back into their children’s good books, but the children need boundaries and security, neither of which the incarcerated mother can provide.

Most professionals commented on health issues which women face as a direct consequence of their incarceration, both physical and mental health issues. Half of the professionals discussed how – as most of the women have been living below the poverty level - women’s health sometimes improves inside prison with easier access to a doctor enabling them to address some long standing health issues. In particular, if the women have been using drugs prior to incarceration, they can stabilise their health needs inside and catch up on basic dental and medical care. However, Aoife spoke about the issue of increased weight gain during incarceration. This is due in part to the diet, but also to prescription anti-depressants, and can cause the womens’ self-esteem to spiral downwards:
They’re very big in the prison system at prescribing anti-depressants to subdue as opposed to treat mental health - in my opinion. And they use a standard drug...rather than the best medication for that individual as is their right under the Human Rights Charter of Healthcare...and it leads to weight gain.

Interviewee: Aoife

The issue of medication provided to women - both in the Youth Justice System and DPFC was a passionate topic for five of the six professionals. Eilish explained how it appears that women require more medication because they express themselves more:

Now it seems that women have to be more medicated - repress your emotions - but if you’ve had an abusive childhood that’s all you’ve ever done anyway so it doesn’t help...you need to learn how to be an emotional being, not repressing everything, and if DHS won’t give you your kids of course you’re going to keep repressing. So the whole thing is ridiculously geared up to setting you up to use drugs...

Interviewee: Eilish

In order to receive visits from their children incarcerated mothers are subjected to strip searches. Professionals explained that for most mothers the joy of seeing their children outweighs the trauma of the strip search, but for others it can be a major issue. In particular, for those women who have been victims of abuse this is a particularly traumatising experience. According to Eilish, most of the women inside prison suffer from PTSD on account of their abusive backgrounds. They have nightmares, flashbacks and experience different triggers, but the women don’t realise this or know how to deal with their symptoms. Women can experience these symptoms during a strip search; she explains how you have to ‘pack yourself up’ to numb yourself to what is occurring. She elaborates here, along with Niamh:

You’ve got to wise up and toughen up and say ‘fuck this’, and ‘fuck that’, you know...have some sort of tough exterior or you’re not going to survive in there. And you see what happens to the ones who don’t get that – they end up in the psych ward you know.

Interviewee: Eilish
You sort of end up on auto pilot... so it's just sort of totally numb, always. I think that women are really good at showing a facade...

Interviewee: Niamh

All professionals discussed how important it is that services and programs be available in prison to assist mothers deal with drug abuse problems, mental health problems and a lack of parenting skills. However, when queried about the availability of programs inside for mothers the general consensus was scathing. All of the professionals expressed frustration at the apparent ad hoc provision of programs for mothers in prison. Some commented specifically on the lack of funding, the lack of staff to supervise mothers attending programs and the confusion over eligibility to attend programs. Aoife explained how mothers on remand can't access programs and how Corrections Victoria is stopping many external service providers from accessing the mothers prior to release; a necessity of providing good continuity of care. Eilish and Saoirse commented particularly on drugs programs:

The people I see don’t seem to do much there; I’ve had one person get something out of the Caraniche Drug program. Corrections would say ‘we’ve got a drug program running, we’ve got a psychologist’ ... and it sounds great but you've probably got 300 people trying to access that program... not many people are going to get into that program.

Interviewee: Eilish

Rules in prison change all the time and programs change all the time so I can't keep up with all of this. For example, there may be a drug and alcohol program but you have to be sentenced for that but then tomorrow they make a decision, you don't have to be sentenced anymore... and then they say you have to be doing more than two years. There are a lot of programs that just stop running.

Interviewee: Saoirse

Most of the problems which incarcerated mothers face follow them outside of the prison. There, unfortunately, they face a new set of challenges. These are outlined in the next theme.

4.4 I’m still your Mum – challenges on the outside

There are many challenges and hurdles which mothers face on exiting prison and attempting to reclaim parental responsibility for their children. These include the lack of housing; obtaining a
secure job; meeting parole conditions, and overcoming drug and alcohol addictions. Another major challenge is overcoming stigmatisation, but that will be covered in greater detail in 4.6.

4.4.1 Daily challenges to reunification

Getting out of prison normally means having to meet parole conditions. Saoirse in particular elaborated on the many challenges women have to meet which can include parole appointments, meetings with DHS and meetings with drug and alcohol counsellors. They may also have to attend for urine screening. Women coming out of prison have little organisational skills, particularly as many have become institutionalised whilst in prison. In addition they have poor time management, poor self-discipline, a poor working history and are typically battling anxiety and depression where just getting out of bed is difficult. In addition, they need to prove that they are addressing the issues that caused them to be incarcerated. They also need to prove that they are able to care for their children if they have been removed from them. This may mean housing or employment, but it may also mean that they have to stay away from their ex-partner or former social circle.

All professionals spoke of the apparent lack of understanding by DHS staff of just how complicated and confusing all of these challenges are to newly released mothers. Aoife best explains:

Mothers most of the times are on public transport and again they (DHS) just don’t get how long it takes to run around and do all of that... and how walking out of prison can be completely overwhelming... even to get on a train... so expecting a mother to just pick up and start doing it all ...and you know the pressure that they apply..

....and it’s very difficult for some mothers because there’s usually a long history of mistrust...if they’ve been through child protection themselves...

Interviewee: Aoife

All professionals described the mothers’ daily struggle in dealing with multiple services and having to tell their stories over and over again due to the high turnover of staff in DHS. High case loads can mean little support is available and generates a referral elsewhere, so it can be very hard on the mothers. All professionals emphasised that DHS staff are generally themselves too young, are straight out of university and have few life skills. Eilish and Sinead elaborated on some of the problems which mothers experience in dealing with DHS:
You’ve probably missed out on so much with your children and are wanting to overcompensate...you feel you can’t get enough of them...but instead you’ve got a DHS supervised visit in a tiny little office...and you’ve no self belief because, you know not only are you a drug addict and a criminal, you’re also a bad mother aren’t you.

Interviewee: Eilish

When they write their reports...they outline all the shitty stuff about why the children were removed in the first place...it’s always very negative... it’s like any hope you may have had for reunification is much hindered if you’ve been inside. Removal of children is extreme....incarceration is just a huge black mark against your name...

Interviewee: Sinead

Professionals then discussed the mothers’ anxieties and their “terror”...at being released back into their home to care for alienated children. Saoirse in particular sums up the mixed emotions of mothers on release and the problem of thinking the grass is always greener on the outside:

A lot of girls don’t love being out, they’d rather be in prison, but they don’t know that until they get out. In jail they’re thinking that the main thing they’re missing is their children and when they get their children back the children drive them crazy. They go from nothing to 24/7. A lot of the children have issues themselves; behavioural issues, trauma related issues, sometimes anxiety and depression issues, Attention Deficit Hyperactivity Disorder (ADHD) etc and that’s just stressful...

Interviewee: Saoirse

Saoirse and Grainne then elaborated on how some mothers handle having their kids back. They explained how some mothers try to spoil their children to make up for the guilt and shame they feel for having left them. In addition, they explained that having spent their last cent on the children, some mothers may need to steal from the supermarket in order to feed them.

It’s a major problem I reckon. Boy I see that in virtually every mother I work with...guilt about their children ends in inappropriate penalties...

... A lot of women have the closest bond with their child while they are in prison but as soon as they get out they don’t... that’s very common.....

Interviewee: Saoirse
You’ve got to rebuild that relationship. Don’t expect the kids to come running up to you, don’t promise the kids the world, a new bike for Christmas, or that you’re going to stay out of prison.

Interviewee: Grainne

How mothers cope with their struggles to reclaim maternal responsibilities can be closely linked to their health post-release. The following theme discusses this in some detail.

4.4.2 Surviving maternal incarceration

By far the biggest issue for mothers in getting their lives back on track and getting their children back, is dealing with drug and alcohol problems. All professionals discussed the problems which mothers face in a society where substance dependence is a crime, not a health issue. Saoirse pointed out how damaged the mothers can be because of their depression and their struggles with drugs and alcohol; how they can’t build relationships but fight every day not to use drugs. The pressures facing mothers in this regard are best explained by Eilish and Niamh:

Most have got Hepatitis C, so they need to find a decent doctor they can talk to ...but most are in drug user clinics...so there are problems ‘cos if they’re trying not to use they’re going to run into other drug users there and if they’re not strong enough...they'll start using again...

...they can’t mix with their old buddies... they don’t have a social network...it gets too lonely and too hard on the women and so often they don’t get to that point where they can produce clean urines, they go and use again because they’re lonely and isolated and DHS won’t let them see their kids.

Interviewee: Eilish

It could be in a hot spot where there’s lots of drug use...you come to do a urine test and you bump into all these people that you know... and guaranteed the only time people will offer you drugs for free is when you don’t actually want them!

Interviewee: Niamh

Aoife elaborated on the degradation of producing urine in front of a stranger and explained that some children’s lawyers will request a particular schedule – say three per week – of clean urines. This is something the mothers just have to put up with in order to get their children back,
but she explained that often the mothers are not believed anyway; that they are just regarded as drug users:

... It’s like ‘no you were using drugs and alcohol before’...that’s all they’ll see you as.

Interviewee: Aoife

In discussing post-release drug services and programs it emerged that mothers face many difficulties both registering for a program and accessing the service. Some of this relates to a lack of communication by Corrections Victoria, and some to labelling by the community. Aoife and Eilish explained that Corrections Victoria are meant to fund people post-release who are already on pharmacotherapy, but that her organisation is encountering a lot of difficulties with pharmacies not being paid, and the mothers therefore not having access to regular doses; there’s just not enough pharmacies with permits. Niamh explained the problem of interrupting supply:

Things like psych meds can’t be stopped straight away...anything can happen if it’s not streamlined when you leave....so being sure you have access to medication...there’s generally a big hiccup. It’s hardly ever done.

Interviewee: Niamh

Further, Eilish explained that often doctors prescribe methadone or Suboxone\(^\text{16}\) for mothers but without any long term plan for withdrawal, and without advising mothers of the side effects; for example, that it rots their teeth. Niamh and Eilish eloquently explain the problem of labelling by the community:

If it hasn’t been organised for you and you come out well I can guarantee it’s going to take you a while before you’re able to get on a program...especially if you live in a country town because word has spread ‘you’ve been incarcerated, we don’t want your type at this pharmacy’.

Interviewee: Niamh

Drug replacement – great to have those programs...but quite often you’re not allowed to walk around the shop, you’ve got to sit on a seat and wait while they serve everyone

\(^{16}\) Suboxone is a medication for treatment of opiate addiction (see www.suboxone.com).
else. All those messages you know about ‘you’re worthless, you’re not as good as anyone else, you’re different, and you’re not trusted’…

Interviewee: Eilish

All professionals explained that post-release health issues include the lack of general health maintenance but also the risk of overdosing. Aoife explained that the problematic drug use in the community is changing all the time; for example, if there’s a lot of benzos flooding the market there’s a higher increase of overdose post-release with Zanax . She also explained that heroin use increases your risk of overdose. Sinead explained how if the mother has been a drug user but has not used whilst in prison, then her tolerance will be down…so overdosing becomes a huge threat. Niamh elaborated on some typical situations mothers face on release:

Overdosing is a huge risk; we know that a quarter of all fatal overdoses are people released from prison…in Victoria they overdose fatally within two weeks of being released. You could have been inside for a couple of years and you’re never going to use again…but depending on who picks you up…or if you did use just a little in prison to make sure you weren’t sick…..

Perhaps you’re reconnecting with a partner…and there’s a gender inequality within using relationships - the guys go first…and may only have the one fit (syringe) so you share…you haven’t got your own because you weren’t planning on using…and they do you up because you might not be proficient at injecting yourself…and on it goes with a high risk of blood borne viruses.

Interviewee: Niamh

Finally in this sub theme, the professionals addressed the multiple marginalisations of their clients. All professionals commented on how and why separation from her child often occurs prior to the mothers’ incarceration and the vicious cycle which then ensues. As noted in the ‘typical’ client profile, most mothers entering prison have both substance abuse and mental health problems. Saoirse spoke of the high number of self-harm incidents among women in prison and related this to their histories of trauma and victimisation.

Sinead and Aoife in particular provide the following comments that highlight these pertinent problems:

17 Zanax is a benzodiazepine used to treat anxiety and panic disorder.
From my experience, whether mum is abusing substances like alcohol, drugs, prescription medication... that’s not the problem; it’s why they’re using in the first place... ...if the children have been taken away before...that leads to other issues such as dependence on drugs and alcohol...

Interviewee: Sinead

They haven’t had the best family environments....many of them have been wards of the state...and the second you remove that child you can guarantee that they’re going to keep going through the system and there’s not going to be anything that can stop that.

Interviewee: Aoife

All professionals highlighted the different experiences and needs of incarcerated mothers compared to their male counterparts; specifically in relation to the lack of support networks and visits:

There’s a big difference...there is somebody there looking after the kids. The women support the men more...but the women are more damaged than the men;  for a woman to go to prison they’ve experienced a lot worse of what society has to offer... they’ve usually burnt bridges with their own family ...It’s rawer for women....more of a raw emotion.

Interviewee: Grainne

I drive past Barwon and if it’s a visit day...it makes me sick because I see these people lined up, women and kids going in to meet the dads or partners you know, you don’t see many men lined up outside of a women’s’ prison taking the kids to visit a woman.

Interviewee: Eilish

The following case example highlights the cycle of marginalisation which persists when generations of children are taken into care:
Case example 4:3

I’m working with a woman who is now an adult and she’s disclosed that when she was a child she was in the child protection system, then she has kids and then her kids are in the child protection system. There’s a cycle that goes on and on and one of the worst things is when a mothers children are taken away from her and put in the care of maybe her parents and her parents were investigated when she was younger...it’s messy and it’s horrible.

Interviewee: Sinead

The professionals explained how mothers with mental health problems are particularly vulnerable. Saoirse best explains their anxiety:

It’s the mental health problems in the first place that cause the offending behaviour that then cause separation...so it’s all wrapped up together there. Most women are very anxious about getting out; it’s almost very rare to get excitement without anxiety.

Interviewee: Saoirse

The following case study further highlights the problems mothers face when they suffer from mental illness, and how this can affect their plans for reunification.

Case example 4:4

There’s this woman I used to work with and her child was taken out of custody and given to the biological dad when there’d been a history of family violence. I’ve seen it happen before and it’s bullshit. This woman met her partner when she was 12 and he was 20 something; so it raises a lot of questions about that relationship. So they had an adult relationship when she was a child, then they had a child and she’s about 19 now. Then she had issues with mental illness and was diagnosed with schizophrenia, and things got out of hand and she assaulted the dad...ended up inside and it was all related to mental illness. Anyway she’s out but there’s restraining orders on her, and this was seven years ago but she can’t move past it. Sometimes there’ll be days when she seems happy but she’s not; it just haunts them for the rest of their lives you know... and then there’s her mental illness...there’s been a lot of deterioration.

Interviewee: Sinead

In addition to the health and reunification challenges facing mothers on release, they also have to address the more practical problems of sourcing housing and employment. Without both of these they will not be able to reclaim maternal responsibilities.
4.4.3 Housing and employment

All professionals agreed that everything starts with housing; if the mother does not have stable housing then her life won’t be stable and she won’t get her children back. Aoife and Saíorse explained how mothers can miss out on parole because they have no house to go to, and how often they have children who would be reunited with them had there been appropriate housing available to them. They described situations where the children are counting the days until their mother gets out, but when she finally gets out she still can’t have them, and the children don’t understand; their hearts are broken. Without housing and with limited support the mother is back inside within a short period of time.

In particular, there was a lot of frustration amongst the professionals with the classification of incarcerated mothers’ need for housing, and the mixed messages given by the Department. Because while they’re in prison they’re not classified as homeless, mothers exiting prison are not classified as high need. Aoife and Eilish elaborated:

When a mother is coming out of prison she’s not seen as being in high need of housing, she’s seen as medium....but you know the risk of the revolving door is greater but they’re not seen as high need...it doesn’t make sense to me...and it doesn’t make sense to the mothers.

Interviewee: Aoife

With the housing situation in Victoria - and there just is none you know – if you don’t have a family to go to they give you a cheap hotel for a few nights, or if you’re lucky you might get a transitional house.

Interviewee: Eilish

Sinead explained that mothers can be in transitional housing for years, waiting for public housing. She elaborated on the numerous obstacles which mothers suffer in trying to get appropriate housing so they can have their children live with them. She explained that mothers need to have custody before they can apply for housing, but they need housing before they can apply for custody. Aoife further explained that the mother needs to have 25% access to their child before they can apply for an extra bedroom for that child, but they can’t get the room without first having the child. Sinead best explained:
It’s just not working at all. What’s the point of having someone living in the property for four years...so they’re in limbo...we’ll have a mum and she’s looking at trying to gain access again with her child and a transitional housing provider will say ‘well you don’t have a child in your care so you’re not eligible for a two bedroom’.

Interviewee: Sinead

The following case example highlights the difficulties mothers face in securing public housing, even those threatened with long-term homelessness. The mother cannot resume care for her children without appropriate housing. In despair, many of them, as in this case example, turn to drugs. This case example also highlights the stress which working in the sector must place on the professionals. They work with, and empathise with, the most vulnerable group of women in our society.

Case example 4:5

| I was working with a woman who had been released from prison. She had three children in care; she knew her eldest was in a safe place but for her youngest two, she was trying to jump through hoops to get Segment 1 housing, which is recurring homelessness. The to-ing and fro-ing, you need to get this piece of paper, how do I get this piece of paper and it was just on a daily basis, it was heart breaking to watch. She tried her hardest to maintain contact but the foster family that had her two youngest basically told her she was a fuck-up and had no right to see her children. And the number of times she’d be jumping through hoops and there’d be a new DHS worker and another set of game playing she’d have to go along with just to see her children. There’d be days when she was positive; trying to keep her morale up to keep fighting and not give up. I actually saw her the other day (and I hadn’t seen her in about eight years) and she still doesn’t have her children. So she tries to nullify the pain of loss; it’s so sad. |

| Interviewee: Niamh |

All professionals further expressed their frustrations on the proliferation of ‘inappropriate’ housing; that is, housing in areas where drugs users frequent, or where there is an established level of violence, neither of which meet the requirement for ‘safe’ housing.

A lot of women go into rooming houses and all sorts of places that are not appropriate or housing services will say well you don't have your child with you so you're going to

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18 Segment 1 means that if you have a history of being homeless or you are at risk of long-term homelessness, then you have the highest priority in receiving public housing.
be accommodated as single and therefore she has not got an appropriate place even if she is to get her children.

Interviewee: Saoirse

I’ve just had a trans-gender person in yesterday who has just gotten into a ministry property in XX and I know that is just like, violent and terrible. So I’m thinking ‘Jesus Christ, I hope this is going to be alright’...

Interviewee: Eilish

The challenge of securing a stable job is another challenge which mothers face on exiting prison with a criminal record number (CRN). Not only do they lack the necessary level of education - the typical profile suggests most mothers exit school early - but all professionals agreed that it is now harder than ever for mothers to find work because police checks are required even for cleaning jobs. Niamh further commented on how some mothers want to study to change their lives but the requirement for a police check just for an internship means they don’t even get a foot in the door. Saoirse, Grainne and Aoife best express the frustrations of all professionals:

You’ll find women get cash in hand jobs more than anything else where it’s not going to build their self-esteem....that’s a major problem but some women never really get in the head space to even get a job. So every day is difficult.

Interviewee: Saoirse

When you consider the educational levels of the women... it’s a bit unrealistic to expect these women coming out of prison, with a record, with all these challenges to go and walk into a job. I think that people need to get over the fact that time is their sentence; they’ve done their time. It should be a slate wiped clean.

Interviewee: Grainne

The greatest contributor to a mother not being able to work, to go forward in her life, is because she’s not with that child. More so than housing and more than anything else it’s that separation you know....

Interviewee: Aoife
The professionals explained that the challenges facing mothers exiting prison are many, and that there are few resources to assist them. The next theme elaborates on the daily challenges faced by the professionals in supporting the mothers.

4.5 The daily reality of working in the sector

This theme outlines the daily reality which professionals experience in working to support mothers in prison and post-release, and presents the theoretical underpinnings of their approach.

4.5.1 Day to day challenges

Professionals outlined the services and the many referrals they provide. Some professionals explained systemic advocacy and what that entails. This involves doing whatever is necessary to assist women in their journey to reintegration. This may involve referrals regarding housing, community health, ongoing psychological support, and mentoring the mothers in their dealings with DHS. Aoife explains:

> What does support mean? It depends on the person, because the second you try and label what support is, you’re putting people into boxes and it just doesn’t work...

> Obviously we do a lot around housing...mainly it’s a journey; you do whatever you pick up along the way...and some women ...they’ve never really been assisted to work out how to pay bills you know, and the prison system doesn’t teach them anything about that.

Interviewee: Aoife

Other professionals spoke of educational programs and phone services providing advocacy around pharmacotherapy, psychological counselling and referrals to other appropriate services.

> ...whatever we can’t provide we refer out....there is nowhere near the amount (of post-release services) there needs to be.

Interviewee: Grainne

19 Systemic advocacy is an effective democratic process to ensure fair treatment and social justice for people who are disadvantaged, in an effort to bring about a long lasting change (Disability Policy & Research Working Group (dprwg.gov.au).
All professionals spoke of the services they provide to mothers in prison. These include taking children to visit; facilitating special days for mothers in prison to spend with their children and their dads, and running child and family centres where visitors can go before and after visits so the children can have some timeout. In addition they offer sports programs, craft programs, and mentoring for both the children of incarcerated parents and those in the Youth Justice system. Grainne and Saoirse explain further:

Having somebody who can regularly bring the child, prepare the child for the visit and work with Mum too on how to build/rebuild that relationship is really difficult...in terms of maintaining contact that's a really difficult one.

Interviewee: Grainne

...we get to know the women through our programs inside...we usually have a remand worker in prison.

Interviewee: Saoirse

All professionals outlined their frustrations with the lack of funding and services available to provide systemic advocacy. Aoife and Saoirse in particular explained that most of the Government funding is focused on support – which is great – but targeting the bigger picture is what brings about change. All post-release services have to be funded by Corrections Victoria, and if they deem they have a program addressing a particular need then other organisations cannot be funded to provide that service...‘you can't be seen to be in competition with them’. However, if that organisation decides to fund the service themselves, because they realise that Corrections funded services are not meeting the demand, they are not granted access to the mothers for the last six or eight weeks of their sentence. This means that they can’t start working with mothers before they are released. Aoife and Niamh explain:

A lot of agencies are too scared to piss off their funders...too scared to get out there and be a little bit more proactive... if you don’t work with the women before they come out there’s a really high chance these women will fall through the cracks...so it’s pretty dire straits for women coming out.

Interviewee: Aoife

When it comes to lots of government services, it seems like it’s just about ticking boxes...it’s not about quality...so the services that are actually providing a good service,
they generally have less funds because they don't tick the box the way the government wants them to do.

Interviewee: Niamh

All professionals had a negative view of working with Corrections Victoria and DHS. Problems discussed included the immaturity of some Community Corrections officers who deal with clients on parole. Saoirse explained how some try to get involved but most wash their hands and say ‘it’s not my responsibility’. Saoirse explained:

I’ve got nothing against them, don’t get me wrong, but some are sympathetic and some are just hard minded...‘do it or breach’ sort of thing.

Interviewee: Saoirse

Eilish spoke about her dealings with DHS child protection and their lack of training regarding drug issues and how to deal with them. She spoke of their lack of respect for her views, and the frustration she feels when a client is trying really hard to meet requirements to get her child back and DHS just don’t recognise this. Eilish explained:

The biggest frustration for me is that I don’t have any faith in DHS child protection workers...DHS youth justice workers, they’re great; they seem to be trained in regard to drug issues and how to deal with them. DHS child protection workers – they don’t listen to me, they don’t value what I’m saying, they wouldn’t ever be honest with me.....

..A lot of people who come to see me don’t have their kids with them and are dealing with DHS...yes they might still be struggling with drug use but they’re really trying and DHS will whip the kids out, and I get really frustrated...they’re making it to counselling appointments of their own choice, not because they’ve been ordered to....they’re trying.

Interviewee: Eilish

The following case example highlights the professionals’ frustrations with some decisions made by DHS workers. According to the professionals, some DHS domestic violence workers do not see or understand the whole picture when dealing with cases, and often decide to remove children from mothers who are not the perpetrators of the violence. The professionals regard this as a ‘quick fix’ decision made with complete disregard for the importance of keeping the child with the mother.
Case example 4:6

I was meeting with a domestic violence worker and a family worker and we were talking about a woman who had reported family violence to the police but the baby hadn’t been taken away. So I said ‘where are we at?’ and she said ‘well if there’s any more issues as far as DHS, domestic violence, family violence then DHS will come in and they’ll probably take the child away’. And I said ‘ok, the issue I have is this woman is getting too scared to report any issues of family violence because DHS will come down on her. The perpetrator doesn’t live with the woman but he’s obsessed with her and will make any effort to get to her’. And she says ‘well she can control her environment’. I was really annoyed because she just didn’t understand and the family worker was sitting there saying nothing. It was annoying because it would just come back to the mum again...why she doesn't just finish with him...

Interviewee: Sinead

Finally, Aoife most eloquently summarised the frustrations expressed by all professionals in trying to bridge the gaps in child protection support, and having to stay on top of what’s currently available by whom:

It’s really hard to map where supports are in this sector... I might have to make ten calls to work out where that person might get some support for that issue...and that’s the other thing that funders just don’t get – you can spend from 9am to 4pm trying to do just one or two tasks for someone just because it’s so hectic. You can’t do things in an hour and see a person once a fortnight and actually get somewhere. I’ve had more disappointment with the child protection system in this workplace than anything else.

Interviewee: Aoife

The next theme elaborates on the approach the professionals adopt in their support of women with lived prison experience.

4.5.2 Approaches to empowerment

This section discusses the approaches which professionals use in their work to support women inside and outside prison. All professionals discussed using a self-empowerment model and how this means working with every client on their individual needs, for an indeterminate period of time. Aoife and Niamh in particular spoke of the difference between intensive support and dependency; of building self-esteem and self-worth without dis-empowering the woman. At all times the woman determines what she needs. Niamh elaborated:
When you’re working with people it’s about where they’re at – not where you want them to be. I think you need to be constantly communicating and making sure this is what the mother, the woman wants, and not just go ‘oh this is what she should want’. They might not be ready; sometimes it has to be really small steps.

Interviewee: Niamh

Professionals explained that working on women’s individual needs means acknowledging that not every woman who has been incarcerated will have experienced trauma or homelessness, but that the women they see have experienced these traumatic events and are in need of support as they’re just not coping. Saoirse elaborated by outlining their support, particularly during the critical period immediately following release:

We provide 24/7 support...because we are working with high risk people whose issues don’t happen between nine to five... are even less likely to happen then. We don’t give the woman a time period for support; we may work with her for one day or for five years. We try to give pretty intense support in the first period after release, whereas some organisations would say once a fortnight – we would say once a fortnight is really not worth anything. It’s a person’s life... and we would try to put ourselves in that situation and think ‘how would I cope’....

Interviewee: Saoirse

All professionals were passionate in discussing how they build trust with their clients. Grainne pointed out that everybody has strengths and that in working with the women they focus on identifying these strengths and building on them. Their strength, she suggested, may be their resilience and creativity; perhaps to date not applied in the right manner. Niamh suggested that perhaps working with peers who really understand their problems assists in building trust. She elaborated:

I think because we are very honest; to be a peer you have to be accepted by your community, it’s not a one-sided thing. Having a friendly, non-biased someone who understands can make such a difference; they want to hear from people with that lived experience as well...that empowers them that other community members have achieved these things.

Interviewee: Niamh
All professionals acknowledged that in working with women there needs to be more flexibility and time; that it’s a lot more emotional working with women than with men. Aoife spoke of instances where it had taken about two years for a ‘working level’ of trust to be established and how a lot of services would have closed to those women for disengaging at times. She explained that issues - contrary to departmental expectations - can’t be resolved in a set time period; if you commit to something then you need to see it through for however long it takes. Aoife best elaborates:

So if I’m working with a woman and I’m aware that it’s going to take a little longer for her to start doing urines for the department and that’s okay...that’s how the woman feels, but on the flip side there’s the department breathing down fire and saying no, no, no, you need to be doing this screen...that’s where the self-empowerment road can be very difficult because you’ve got competing perceptions of how things should be...particularly parole and child protection...they make it very difficult for that to take it’s time and take its right journey.

Interviewee: Aoife

Niamh and Saoirse further elaborated on the levels of flexibility and commitment required to fully support their clients. Saoirse explained that often she will accompany a woman to appointments when she knows the woman is in a ‘bad head space’ and would not attend on her own; leaving her open to losing her housing, her children and breaching parole. Without this level of support the woman’s problems would be tenfold. Niamh elaborated the philosophy behind total support and how not all services agree:

Because of our boundaries, we’re sort of fighting for someone....other services may think we’re too personal and we should just ‘do our job and not care about these people’. So peer support can be seen as being divisive. I’ve worked in a role where I was client liaison and there were case workers and psychologists who said I couldn’t talk to their clients... I don’t understand …this ‘us and them’ stuff...

Interviewee: Niamh

Sinead however, pointed out that the self-empowerment model is troublesome when a woman is suffering from a mental illness and is unable to best determine her future. Despite wanting to self-empower the women, she stresses that if you’re working with someone who’s had a considerable amount of trauma, they may not be able to determine what is best for them.
All professionals explained how one of the challenges they face in supporting mothers exiting prison is the level of discrimination in the community towards people with lived prison experience; particularly mothers. The next theme provides further detail.

**4.6. Theorising womens experiences**

This theme discusses the stigmatisation of women with lived prison experience, the consequences thereof and where women differ from men in this regard. Finally this theme covers suggestions provided by the professionals on where improvements could be made to stop the intergenerational cycle of imprisonment.

**4.6.1 The stigmatisation of women and consequences thereof**

The stigma attached to having lived prison experience has huge consequences for women exiting prison; this stigmatisation affects their chances of rebuilding their lives and lingers for years after their release, if it ever dissipates at all. Further, it severely affects their chances of gaining suitable housing and employment and reuniting with their children. All professionals agreed that there is too much discrimination in the community towards women with lived prison experience, and particularly within the support sector itself. Sinead in particular explained how mothers don’t have to be using drugs to be not coping well, but that the publicity around child protection cases means that all are tarnished with the same negative brush. She feels that single women in particular attract too much criticism. Grainne outlines society’s labelling of women with lived prison experience:

> It certainly is a big issue. People don’t understand why women go to prison and there’s a lot less women in prison so if you do go…well you’ve either done something really bad or you’ve got a terrible history and all that sort of stuff…so the woman is labelled.

*Interviewee: Grainne*

Discussions followed on circumstances where drugs are involved, and the stigmatisation which that attracts. All of the professionals agreed that too many assumptions are made about mothers who use drugs; drugs are used because a lot of the time the women can’t handle the pain or because they think they’re bad mothers. They are labelled as bad mothers so treat themselves as such. Aoife stressed that having to do urines for the Department is just as traumatising as being inside; it’s really just an extension of the prison system for them. Stigmatisation in the sector has many repercussions on the women as Eilish and Aoife explain:
If they could have an authentic relationship with the DHS worker it could be different... as soon as you've got a drug history...DHS is just like a continuation of Corrections really for mothers... just like having a prison officer on your case over your kids, because you’re not free when you get out....and in prison you know you’re in a prison, you know the boundaries are clear cut...

Interviewee: Eilish

Most people would think that if you’re from the sector you must be non-judgemental, but some of the most judgemental people I’ve met have been in the sector...so you can challenge other agencies when they’re being discriminatory and that can cause friction but it needs to be labelled discrimination and it’s pretty rife particularly with housing and with child protection. The Department has a very limited understanding of the issues that a woman has to go through in the prison system.

Interviewee: Aoife

The following case example demonstrates the level of discrimination within DHS child protection and how this affects mothers trying to reunite with their children.

**Case example 4:7**

I was in a case conference meeting with DHS child protection and with a woman who had been released. One of the issues was the number of visits she was getting with her child. DHS had been bringing the child up to see her in prison for so many hours, and when she got out, those hours were lessened and she was like, ‘I can’t understand why that is because you were allowing my child to come up this many hours per week and now it’s been lessened’. It was a huge difference for her being in the community because prisons are a patrolled environment, but it didn’t matter what she did they kept moving the goal posts. I felt it didn’t matter that she finally got housing or that she was doing some urines. The posts kept getting shifted. We sat there in one of the case conference meetings and were having a conversation about what had happened and everything and one of the child protection workers said, ‘you left your daughter’, and I thought ‘no hang on, it’s not that she made a choice and went, I’m going to leave her’. So that was a pure personal judgment that she made.

Interviewee: Sinead
Sinead had some good advice for her clients which she shared:

> Often the responses we receive from other community services allude to the fact that if a woman has been in prison then she must be dangerous... not everyone who goes to prison is violent and we’ve been working with women for twenty years and have never focussed on why they’ve been inside. So I tell them ‘don’t let yourself be defined by the fact that you’ve been inside; if you’re homeless, you’re homeless, and you’ve got as much right to service as anyone else’.

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**Interviewee:** Sinead

Labelling extends also to the services provided, especially if the service revolves around drug use. Niamh (who provides advice on pharmacotherapy) explained that often their expertise is not taken seriously; they’re just drug users – what would they know. Niamh elaborates:

> It’s interesting that our expertise is sometimes not valued... it’s about who you are... society would rather brush that under the rug.

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**Interviewee:** Niamh

One of the professionals however, whilst acknowledging labelling exists in the public sector, speculates as to why this may be the case:

> DHS... a lot of their workers are really good...they don’t do what they promise to do but their hearts are in the right place...they’re just seeing it from the children’s point of view and when you get a report in black and white you wouldn’t think highly of the parent either....

> And parole, they get the cold hard facts; they get a person’s history that may be pages and pages long. It doesn’t look very good and then to think this person is going to be a pretty hard case, that’s understandable too you know. I guess we have the benefit of getting to know the women while they are straight, while they are inside, while they are at their best.

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**Interviewee:** Saoirse

When questioned about women being labelled on the outside, it became clear from all professionals that the consequences of labelling post-release differ between men and women. The professionals explained that women have more problems seeking employment post
incarceration than men. While it is difficult for men to find employment with a CRN their physical build can often get them into labouring jobs where a criminal record check (CRC) is not required, but women tend to have children to look after. Eilish spoke of the ‘bad mother’ label and the bad perception by DHS of women who go to prison – that they’re non-maternal. They suggested that the consequences of this label are bad enough inside prison but are far worse on the outside when the mother has to prove herself worthy of getting her children back. Eilish explained:

It’s having no self-belief you know because not only are you drug addicted and a criminal; you’re also a bad mother aren’t you? And women are in your face, they’re emotional...

Interviewee: Eilish

The self loathing...you’ll have done your time but you’re still treated like you’re worth nothing. I think if you’re put in this pattern of feeling worthless then things are just going to keep happening time and time again and the cycle really needs to be broken.

Interviewee: Niamh

Saoirse and Grainne elaborated on the fact that women are more emotional. Saoirse explained that women self-label, but that it’s not easy being straight out of jail where people are scared of offenders. Saoirse explained:

I’m sure it’s not easy to be accepted – think jail, think bad person. Someone’s behaviour may have been bad but it doesn’t mean the person is bad.

Interviewee: Saoirse

And Grainne further elaborates on how women often deal with their emotions:

There is a gender thing happening... when we’re working with men in prison they are quite respectful most of the time... if they swear in front of you or whatever... they get angry, they will apologise for that. Women are running off pure emotion so if you’re not able to support them in the way they want they can get angry and carry on and there’s not that level of respect in a lot of cases. It’s not that they mean to be disrespectful but it’s just different....
You’re dealing with all the emotions and somebody gives you a bad look or makes a comment about where you’ve been....it can really add to the problem and it takes a very strong woman not to react....so the cycle continues.

Interviewee: Grainne

The following case example demonstrates the depth of discrimination within the community towards women with lived prison experience.

Case example 4:8

I had a woman who was actually in jail in the 80’s with me, it’d be about four years ago now and she kept going back in and out and then she went for this cleaning job down south somewhere, and she rang me and she said funnily enough, ‘Will you be my referee’, ‘Yeah, okay that’s pretty funny’. So I’m her referee and she said, ‘I’m not going to tell him I’ve been in jail’, because it was years ago, her only conviction in the last decade had been stealing a packet of sausages from the supermarket for her kids, you know to feed them. So she said, ‘I’m not going to tell him about the thing, I’m going to try and get the job then when I’ve worked and he sees I’m a good worker, I’ll just forget to do the police check and then by the time I’ve worked and he sees I’m a good worker, I’ll just forget to do the police check and then by the time I get it done, hopefully he’ll keep me on’. Bloody hell yep, he did the check, she got the job, I spoke to him, they worked as a team you know and they were somewhere down there and they went into a shop, someone recognised her and she found out that she’d been in prison and he was just disgusting with her, he was, ‘How dare you’, and, ‘Get out of here’, like he was just disgusting and she rang me really distressed. This is like 15 or so years after she’d ever been in prison, she’d raised another couple of kids since then, like her life was on track – she does voluntary work for the drug services down there you know, like it was just disgusting, she was just devastated and that’s a cleaning job!

Interviewee: Eilish

All professionals were asked to comment on the challenges which mothers face in exiting prison and rebuilding their lives, and how much they are impacted by societal attitudes to crime and justice. The next theme elaborates.

4.6.2 The professionals’ recommendations

All professionals expressed frustration with the current criminal justice system and how it functions to support/not support mothers with lived prison experience. Aoife re-visited the problem with mothers being on remand for long periods of time and not being able to access programs inside prison, then falling through the cracks because of the few post-release
programs available. The transition period in particular was seen as problematic by all professionals; they commented that currently there are insufficient services, and insufficient intensive support. Grainne, Niamh and Saoirse best express the problems in transition:

There is so much they have to navigate...they don't have good conflict skills and these are the things they need to address in prison...so trying to build up that resilience in women so they feel like they're doing something because sometimes there is just nothing they can do but try to include their children in their lives....

Interviewee: Grainne

If there was someone at the point before women actually leave prison they could get the ball rolling and actually support the women; take them to appointments, organise meetings with DHS etc. There’s a really big need for that support role because just going into a meeting with DHS is really scary for women. So someone who understands, someone who is maybe a peer and has been through that as well so can understand the complexities and the issues. If the government would ever give money for this sort of support services, I believe it would be very beneficial.

Interviewee: Niamh

I think a lot of women would benefit from having a family worker... they need it to deal with the issues around being reunited with the children, the partner and whatever. Just focussing on the mother child relationships and all the issues with the children...it would be a great service.

Interviewee: Saoirse

The following case example highlights the issue of accessing programs inside prison, and how a family worker could best assist the mothers exiting prison.
**Case example 4:9**

I had one girl yesterday in court… she’s out now in follow-up with DHS with the kids, she’s doing all the right things but I had to try and get a psychological report done for her for DHS and it was so difficult, her trust issues with that are huge… I’ve only seen her three or four times and I have to get enough detail to do the report. There’s so much going on and DHS just placed the kids with another family member but that family member’s just as fucked up, or probably worse, but DHS can’t know that so she’s got to hide that …but she’s only allowed to see the kids in the care of that person and there’s so much going on and she’s angry and she’s got post-traumatic stress. Hasn’t even worked through the violent childhood she had and it’s just so difficult because there’s so much, you know – it’d be great if they could just be in a rehabilitation program.. or if they have to go to prison to be in a program for six months prior to leaving or something because she’s just so traumatised that – and there’s so much going on in her head and there’s so many issues, her mother; her sister; her kids; the other kids…her own stuff… and she just can’t stay on one track… and you just think, ‘How are we ever going to keep this contained enough to deal with one issue at a time’.

Interviewee: Eilish

Eilish and Saoirse expressed their frustration at the time wasted in prison which could be better spent in a rehabilitation program with supportive workers around the women instead of prison officers. Eilish acknowledged that many women would go back to using again, but that this situation is part of getting off drugs; lapses and relapses must be built into any rehabilitation program. They were both passionate however that the outcome - the mother getting off drugs - would be more positive for the mother, her children and society in stopping the cycle of abuse. Saoirse best explains the situation regarding rehabilitation programs:

Rehab is a massive area. There definitely needs to be more drug and alcohol services ...there are very few rehabs...very hard to get into and it takes a long time to get into them. There are only two rehabs where you can take your children. Bridgehaven I think is too open and free and easy and is very small, and the freedom can be a trap for many women. Odyssey House is safer but there is limited one on one counselling and a lot of women need that...but that’s just not catered for. There are a lot of women who don’t fall into appropriate categories for either of those places. We need more options and more flexibility in programs.

Interviewee: Saoirse
All professionals felt frustrated with the current criminalisation of drugs and society’s attitudes towards drug users. Eilish and Niamh suggested that if there was a legal heroin program and it was seen as a health issue – then people could pick up their legal heroin and not have to score illegally. This would enable more people to heal. Niamh best expressed their frustrations:

We’ve got to get rid of the idea of locking up women because they use drugs; it’s not about the good of the person.

Interviewee: Niamh.

All professionals expressed frustration at the basis of child protection policy in Australia; particularly, the lack of family oriented planning and policy. The child-centred approach used in Australia was seen to be very divisive and focused on breaking up families rather than aiming to maintain the family unit at all costs. Aoife best sums up the professionals’ frustrations:

...the best place for a child, I don’t care what anyone says, is with their family...if we only had a place for the family to be together, put in those supports...you know we’re all about reaction in this State, no preventative work at all. You couldn’t get a more backward system. The Department never sits down and tells the woman what is going to help ...we never hear that and I think it’s a massive problem.

Interviewee: Aoife

Further frustration with the criminal justice policy in Australia was also best summed up by Aoife:

I’ve worked in countries which are financially worse off...but they seem to handle the issues better and keep families together. They try to do preventative work because if they don’t they will end up with a massive number of children living on the streets...ours is a very punitive system and it’s targeted towards people living in poverty... there’s a lot of judgement around ethnic backgrounds; poverty and homelessness fractures a family.

Interviewee: Aoife

When queried about failings in the current service offerings, Eilish was adamant that only the most experienced people should work in the sector. Typically, they do not understand that what women with a drug history need is more support around them. Eilish and Aoife best explained:
...if the person could communicate then it would mean don’t whip the kids out, put in more support around those times of relapse...because you’ll find they don’t want to be using; they’re in that last stage but maybe they haven’t processed their own childhood stuff.

Interviewee: Eilish

I think a lot of the child protection workers need to step back and think about what they do know and understand...I see them, they’re very textbook orientated.

Interviewee: Aoife

Eilish further suggested a strength-based system\(^\text{20}\) would work better in boosting the self-esteem of the women and promoting them to a path of recovery:

My frustration is that they don’t work with a strengths-based model...because that will work...you need bolstering up, you have no self-belief but if you’ve got workers saying “okay, you haven’t done enough but good on you for doing some” even that would be encouragement wouldn’t it? It’s just so punitive...

Interviewee: Eilish

Professionals were finally asked to comment on society’s attitudes towards prisons, rehabilitation and the people who get caught up in the system. All professionals were passionate that prisons do not work; in their view prisons are about punishment, not rehabilitation. They questioned the necessity of custodial sentences for mothers who are non-violent, and suggested that the impact of breaking up the family unit was misunderstood by government and society as a whole. Grainne, Niamh and Aoife explain:

I think that we’re a society that is fearful and ignorant of the unknown and I think that drug users and people who have been incarcerated are considered unknowns; they don’t know them so they fear them.

Interviewee: Grainne

We’re building generations of children...for want of a better word, who are wards of the state, dysfunctional. We’re building a society of damaged people.

\(^{20}\) A strengths-based model is an alternative or an addition to using a traditional ‘carrots and sticks’ approach (see Maruna & LeBel (2003)).
When you sit down with people and talk about the types of things these women have been through, you feel a genuine sympathy and empathy for them, and it can break down barriers so they start to see that the prison system doesn’t actually work. Why do we do it this way? It doesn’t make the community any safer, but you know we’ve constantly got the Government telling us that prisons are the reason that communities seem safer...and when you sit with these women, you realise that they’re the most inspirational, strong but very, very traumatised women who just needs lots of support.

One professional however commented on how prison can be a godsend for women with drug abuse issues:

Sometimes it’s the only option and it’s literally a lifesaver. Otherwise the merry go round of using drugs and everything else out there is just so great they can’t get off themselves. Life just gets totally out of control. So prison gives them some headspace, clear headspace and gets them off the merry go round to reassess and try to go forward.

In conclusion, all professionals were adamant that punishing women offenders by incarcerating them can perpetuate the cycle of multiple marginalisation. They spoke of the discrimination endured by women with lived prison experience and by drug users in general. Saoirse in particular was passionate about the lack of detoxification services in the community and spoke of the singular benefit of being incarcerated; getting access to rehabilitation services and getting off the merry go round of using drugs.

4.7 Conclusion

This chapter has highlighted the issues which women with lived prison experience face in maintaining contact inside prison and in regaining care of their children on release. The typical profile of these women has been examined, and their multiple marginalisations highlighted. This chapter has discussed the psychological and physical trauma associated with having lived prison experience, and outlined some of the coping mechanisms employed by the women. The level of discrimination in our society, and in the sector, towards these women has been
examined, and the disdain and disappointment of the professionals towards this has been highlighted.

This chapter highlights issues associated with securing safe and affordable housing, and the lack of collaboration between services which makes reunification with children seem almost impossible. The problems associated with substance abuse have also been discussed and particular health issues – both inside prison and on release – have been addressed.

Finally, the day to day reality of working in the sector providing support to women with lived prison experience has been outlined by the professionals. Their enduring passion, patience and devotion for their work have been highlighted, along with the many frustrations they suffer in dealing with multiple services and unrealistic departmental timeframes and expectations.
Chapter Five: Spreading the net: Multiple marginalisations

The ability to mother one’s children according to social expectations and personal desires depends ultimately on one’s access to the resources of time, money, health and social support.

(Ferraro & Moe, 2003 p.14)

5.1 Introduction

The above quotation highlights how difficult it is to rear children according to social expectations when one comes from a background largely defined by disadvantage. As this research shows, most mothers in prison come from abusive, impoverished, violent backgrounds and suffer from mental illness and substance abuse. Inherent in the quotation is the discrimination which mothers face when they fail to meet the ‘good mother’ stereotype.

This chapter analyses the data presented in chapter four. Feminist standpoint theory and Labelling theory are employed in the analysis. The themes presented do not directly mirror those themes in chapter four as there is little literature to support data gathered on the daily reality of working in the sector. This is because no research to date has been conducted in Australia on the needs of mothers reunifying with their children from the perspective of the professionals who support them. As far as can be determined, research from this perspective has only been conducted in the USA by Bergseth et al., (2011).

The first theme relates to mothering inside prison. This theme discusses the problems mothers face in maintaining the mother-child relationship, specifically problems resulting from short custodial sentences. It also discusses the impact which some policies have on this issue, and questions their relevance to the current female prison population. The second theme relates to mothering outside the prison. This theme reviews the complexity of parole requirements, the lack of housing to meet the needs of mothers exiting prison, and the myriad of challenges mothers face in proving themselves capable of resuming responsibility for their children. The third theme relates to the daily reality of working in the sector. This theme discusses how the professionals support mothers exiting prison and the challenges they face in liaising between the many different service providers. It explains their daily frustrations in dealing with DHS workers in particular, and the level of discrimination in those organisations. Lastly, it explains
how professionals define systemic advocacy, and the values underpinning their work with mothers. The final theme relates to the multiple marginalisations of mothers with lived prison experience. This reviews the well documented typical profile of mothers in prison and the insidious presence of trauma in their lives.

As will be noted the word ‘frustration’ appears many times in this chapter also. In some instances it is the researchers’ choice of expression, but in most cases it was the expression used by professionals during their interviews, and it was the overwhelming feeling which permeated each interview. However, the researcher noticed the extremely high morale, energy and commitment of each of the professionals and the organisations for which they work. This could mean that they find great fulfilment in supporting and empowering the mothers they work with, but find frustration in dealing with policies relating to mothers with lived prison experience, which have changed so little over time.

5.2 Mothering from inside prison

This section discusses the challenges mothers face in mothering from inside the prison, including their coping mechanisms and the impact which the prison environment and policies have on their physical and emotional health.

5.2.1 Managing motherhood inside prison

The data from interviews with the professionals shows that some mothers are reluctant to have their children in prison with them because they perceive the prison to be too dangerous an environment for children. This was noted to be of particular concern with the current overcrowding at the DPFC in Deer Park. Others may wish to have their children with them but are either reluctant to apply or find the process too difficult. The professionals explained that one of the problems is the uncertainty around the time women spend on remand and the complexity of arranging child care. The issue of unrealistic expectations regarding child care have been well documented in the literature (Zalba, 1964; Hounslow, 1982; Kingi, 2000; Goulding, 2004). However, this research shows that women are now spending considerable time in prison awaiting sentencing. This further complicates any care planning and leads to the mothers’ reluctance to uproot her child until sentence is passed. According to the professionals, the ‘Mothers and Children’ policy (see chapter 4.3) is based around the best interests of the child, however, it only serves mothers once they are sentenced, and since the approval process can take upwards of a month, it is of little value to incarcerated mothers, almost 50% of whom
are serving sentences of six months or less (Corrections Victoria, 2011). The professionals stressed that when mothers are successful in having their children with them in prison the child’s presence promotes a loving environment and the continuity of their mother-child relationship. They also stressed the importance of maintaining early relationships with babies, as babies often bond more with the carer than the incarcerated mother causing a complete breakdown of the mother-child relationship. This raises questions about the ‘Mothers and Children’ policy and its ability to assist mothers in maintaining their mother-child relationship, given the impact of current sentencing attitudes.

The data from this research supports previous studies in recognising the mothers’ primary caring role and stressing the importance of maintaining the mother-child relationship (Zalba, 1964; Mc Gowen & Blumenthal, 1978; Hounslow, 1983; Hairston, 1991; Martin, 1997; Farrell, 1998b; Kingi, 2000; Casey-Acevedo & Bakken, 2002; Travis & Waul, 2003; Poehlmann, 2005; Carter, 2006; Goulding, 2007). This literature shows the mother-child relationship is equally at risk of permanent collapse when the mother is incarcerated for either a long term, or for very short sentences. Alongside this, Victoria has moved away from using custodial sentences as a last resort (DCPC, 2010). As of June 2011, 79% of women in prison in Victoria were serving sentences of six to less than twelve months, 20.9% were in prison for drug offences and 28.1% for property related offences (Corrections, 2011). From a feminist standpoint view, severing the mother-child bond for minor offences is symbolic of a patriarchal system which uses power to control vulnerable people, and has little regard for the cycle of disadvantage that ensues. The professionals interviewed for this research expressed their frustration that so much research has been conducted on the importance of maintaining the mother-child bond, but that mothers are still serving custodial sentences for non-violent crimes; being unnecessarily enmeshed in the criminal justice system for minor offences and having their children put into care. Assigning custodial sentences to mothers disrupts the family, often in an irreparable manner. It is of concern that findings from previous research have not been considered important with mothers continuing to receive short custodial sentences which fracture the family unit. Niamh’s comment in particular sums up the professionals’ concerns for the future; that we are building generations of dysfunctional, damaged wards of the state.

In addition, a large volume of research has condemned the reliance on custodial sentences as the only method of addressing poverty related crimes (see Mc Gowen & Blumenthal, 1978; Bloom and Steinhart, 1993; Farrell, 1998b; Easteal, 2001; Tomaino et al., 2003; Carter, 2006; Goulding, 2007; Baldry, 2010a; Forsythe and Gaffney, 2012). According to the professionals,
our criminal justice system is very punitive and targets people living in poverty. It is a major concern that at the time of writing this chapter, the Federal Government announced that the single parent allowance will be cut once their youngest child reaches the age of eight; they then move to the Newstart allowance to encourage them to find employment (Department of Human Services, 2013). The impact on single mothers due for release is likely to be huge due to the Newstart allowance of $35/day being under the poverty line. Further, as the literature has shown (see Watterson, 1996; Goulding, 2004; Baldry et al., 2006; Baldry, 2007; McIvor, 2007) the majority of women in prison are there for crimes of poverty, so the impact of the Newstart allowance is likely to exacerbate their situation and their propensity to offend.

The question of who cares for the children whilst their mother is incarcerated has been discussed in the literature (McGowan & Blumenthal, 1978; Hairston, 1991; Martin, 1997; Kingi, 2000; Poehlmann, 2005; Hannon, 2006). The data from this research elaborates on the complexities which mothers face in organising child care, and the pros and cons of kinship care and foster care. One such issue is the cycle of incarceration and foster care. According to the professionals, many mothers currently in prison have themselves been wards of the state; hence their longstanding distrust of DHS child protection services. The data from this research also suggests a high level of discrimination amongst DHS child protection workers, along with large case loads and a high turnover of staff. According to the professionals, such issues exacerbate positive relationships between the mother and the child protection worker. Further, the professionals indicate that there are immense issues associated with kinship care; not least of which is the shame and guilt faced by the families of the incarcerated mother. According to the literature, most children of incarcerated parents in Victoria go into kinship care, but as few as 28% are reunited with their mothers (Hannon, 2006; Sheehan & Levine, 2007). The professionals felt this outcome was related to the child being more settled with the substitute carer (most often the grandparents) resulting in the mother being refused resumption of parental care. As they suggested, incarcerated mothers face a double-edged sword; they lose their child - either through DHS or through kinship care. Standpoint feminism suggests that the social structure can perpetuate a woman’s social disadvantage; this is indicated by welfare and criminal justice policies which ignore the further marginalisation imposed on mothers with lived prison experience. Labelling theory may also be useful in explaining the level of discrimination by DHS child protection staff towards mothers with lived prison experience.
5.2.2 Social Isolation and coping mechanisms

The literature shows many mothers in prison suffer social isolation, often as a result of a negative relationship with their child’s carer (Zalba, 1964; Mc Gowen & Blumenthal, 1978; Hounslow, 1983; Farrell, 1998b; Morash & Schram, 2002; Travis & Waul, 2003; Goulding, 2007). Most mothers in prison were primary carers prior to their incarceration; they therefore rely either on family members or foster carers to bring their children to visit. As discussed above, either solution can be unpredictable and unsatisfactory (Zalba, 1964; Mc Gowen & Blumenthal, 1978; Hounslow, 1983; Farrell, 1998b; Morash & Schram, 2002; Travis & Waul, 2003; Goulding, 2007). Interviews with the professionals indicated that incarcerated mothers receive few visits from male partners, extended family or carers and they have to rely on community services to bring children to visit. The data showed that some support organisations offer this service, but they rely heavily on funding and are often largely under-resourced. This is especially relevant to mothers incarcerated in Tarrengower, and is a reason why mothers are often reluctant to go there even though it is a minimum security setting. At the time of writing this chapter Melbourne Citymission approached Corrections Victoria for funding to increase staffing of their FSS program (Miletic, 2012). It is hoped that the importance of such services will be recognised by Government as critical in maintaining family ties, given the role they play in the mothers’ successful re-entry into society (Mc Gowen & Blumenthal, 1978; Bloom & Steinhart, 1993; Kingi, 2000; Richie, 2001; Goulding, 2004; Arditti & Few, 2006; Wybron & Dicker, 2009).

The level of social isolation endured by mothers in prison is reflected in the level of control exercised by the prison environment. Visits are a privilege and as such can be cancelled for in-prison infringements (Goulding, 2007). This constant instability around children's visits increases the mothers' anxiety level which can negatively affect the visit outcomes. The prison also controls access to outside services and support such as Legal Aid. This can be limited due to prison lockdowns or the mother being segregated (Zalba, 1964; Mc Gowen & Blumenthal, 1978; Hounslow, 1983; Tomaino et al., 2003; Grunseit et al, 2008). Further, according to the professionals interviewed for this research, the level of legal support is dwindling due to cuts in legal aid funding. It is not possible to do more than speculate on the outcomes of this situation given that most mothers in prison are primary carers and need access to advice on maintaining their maternal status. This is an area where incarcerated mothers are clearly disadvantaged over incarcerated fathers, as most children of incarcerated fathers remain with the mother at home. Researchers (see Zalba, 1963; Mc Gowen & Blumenthal, 1978; Hounslow, 1983; Tomaino et al., 2003; Grunseit et al., 2008) have repeatedly recommended collaborative
services to address the special needs of incarcerated mothers; it is a sad indictment on our criminal justice system that this has not yet been addressed. From a feminist standpoint view these vulnerable mothers are politically and socially disadvantaged through policies which continue to impoverish and exercise power over them. Standpoint feminism may also explain the level of control exercised by a patriarchal criminal justice system, including the courts, prison and so on.

All professionals spoke of the impact which separation from their child has on the mothers, viewing the mothers they work with as broken women. Their comments are supported by the literature (Le Flore & Holston, 1989; Dodge & Pogrebin, 2001; Tuerk & Loper, 2006; Hunter & Greer, 2011). The coping mechanisms employed by mothers in prison have also been previously raised as an issue; they either use prison to get clean from drugs (Clark, 1935; Ferraro & Moe, 2003; Berry & Mahdi, 2006), or they turn to drugs to numb their pain (Shamai & Kochal, 2008; Allen et al, 2010; Hunter & Greer, 2011). What was interesting to note was that there were mothers who benefited from a custodial sentence by getting their health back on track, and as Saoirse commented, having the best relationship with their children whilst inside. The professionals stressed that for many reasons, these mothers still tend to revert to drug use when they are released, with their general health deteriorating, and hence it is only a short term period of being clean. The professionals explained how incarcerated women are also more prone to overdose when they return to the community, putting them at risk of dying. Given the increase of sentences in Victoria for drug offences (see chapter 1.3) the professionals felt that it would cost the community much less if mothers could access detoxification and rehabilitation services within the community and avoid spending time in prison away from their children. This is of major importance given that some community detoxification and rehabilitation services are shutting down due to lack of funding. Questions are raised about how services are prioritised to receive funding.

The question of maternal quality has been much addressed in the literature. Research shows that incarcerated mothers still love their children, but for many the guilt and shame of separation is too much to handle (Henriques, 1982; Le Flore & Holston, 1989; Berry & Eigenberg, 2003; Poehlmann, 2005; Tuerk & Loper, 2006; Allen et al., 2010; Hunter & Greer, 2011). Research has also determined that mothers inside prison have a weakened sense of self due to negative parenting and they often consider themselves to be worthless (Farrell, 1998b; Denton, 2001; Wybron & Dicker, 2009; Allen et al., 2010). The data from this research provides further insight into how mothers experience incarceration. According to the professionals, incarcerated
mothers experience the same stages of grief as if their child had died, but they do so without support from other loved ones. The professionals said that for mothers the single most punishing aspect of being incarcerated was being separated from their children. They described the self loathing incarcerated mothers experience when unable to fulfil their parenting role, and how angry and isolated they become. Further, they explained this becomes a vicious circle with them again using drugs and losing all chances of getting their children back.

5.2.3 The negative prison environment

It is understandable that the professionals were scathing of in-prison programs and their availability. Some of the biggest issues from the interviews with the professionals were the problems caused by the lack of in-prison drug counselling, mental health services and parenting classes. Their comments support Forsythe and Gaffney’s (2012) research which recommended routine mental health screening of police detainees followed by appropriate treatment, preferably not in a prison setting. According to the professionals, few mothers qualify for programs because they are either on remand or are serving short sentences, or where the demand is too high and funding has been cut. These issues, when viewed through a feminist standpoint lens, can also be said to reflect a controlling patriarchal criminal justice system exercising control over vulnerable people. All professionals expressed deep frustration at constantly changing rules for qualification of programs inside prison. According to the professionals, if Corrections Victoria has funded an in-prison program then NGO’s are barred from running their own programs inside prison, regardless of whether the Corrections funded program is meeting the demand or not. This prevents the professionals from gaining access to a mother and working with that mother before she is released. If they don’t have access to mothers before they are released, there is a high chance the mothers will fall between the cracks and return to prison, as incarcerated mothers are not able to commence counselling services or be involved in detailed planning for their release into the community.

Most professionals agreed that women in prison are seen to be more demanding, argumentative and emotional than their male counterparts, but that this is mainly as a result of their traumatic backgrounds. According to the professionals, it is the incarcerated mothers’ resilience which enables them to survive incarceration. From a feminist standpoint view it may be possible to liken the mothers’ resilience to the concept of ‘double consciousness’ being key to their survival. The literature shows that most women suffer from some form of mental illness and that many come from abusive backgrounds and suffer from undiagnosed PTSD (Le Flore & Holston, 1989; Chesney-Lind & Rodriguez, 2004; Arditti & Few, 2006; Baldry, 2010a; Hunter &
Interviews with the professionals suggest that women are routinely medicated inside prison, and that this is done to make the women easier to control. According to the professionals, this occurs in Youth Justice Centres also. The professionals spoke of standard anti-depressants being used rather than individual-specific treatment. They mentioned that few treatment plans are drawn up and that no explanations of side effects are offered. It is a major concern that women, because of their gender attributes, are being routinely medicated. Feminist Standpoint theory is particularly relevant here because it is concerned with the control and management of extremely vulnerable people through gender discriminative policies and procedures.

Of particular concern was that the professionals believed incarcerated mothers experience much stigmatisation inside the prison itself, even more so if they have been using drugs. This supports previous research by Kilroy (2000), Denton (2001), Easteal, 2001, Tomaino et al. (2003) and Goulding (2007). According to the literature, women in prison have very negative relationships with the prison staff. Tomaino et al. (2003) also reported negative attitudes of staff towards the families of mothers. Denton (2001) specifically referred to the condemnation by staff of incarcerated mothers who use drugs.

The professionals also believed the degradation of being strip searched contributed to feelings of worthlessness, and necessitated the mothers to harden themselves up or end up in the psychiatric ward. Niamh described women as being particularly good at showing a facade and burying their feelings. The effect of strip searching women with histories of abuse has been well documented in the literature, and claims for its benefit have been refuted (George, 1995; Simmering & Diamond, 1996; Davies & Cook, 1998; Easteal, 2001; Goulding, 2004; Kilroy, 2005; Wybron & Dicker, 2009; George, 2011). Questions arise about why prison policy of routine strip searching is continued for women of low security status, given the emotional trauma which ensues. Such policy reinforces the ‘bad mother’ label and makes the mothers less resilient to challenges post-release. It is difficult to understand why prisons continue to apply practices which do not appear to have any benefits to either the women or the prison. The feminist standpoint position would interpret such policies as condoning practices which have little or no benefit to incarcerated women or prison staff, and hence reinforce and exercise control over very vulnerable and powerless women.
5.3 Mothering post-release

According to Koban (1983), Bloom and Steinhart (1993), Richie (2001), Arditti and Few (2006) and La Vigne et al. (2009) most mothers exiting prison return to a fractured family; to resentful children who feel they were abandoned and who may have suffered neglect by carers. Additionally, mothers themselves feel anxious and nervous about resuming maternal responsibilities as well as tackling the many complex demands placed on them by conditions of parole orders (Watterson, 1996; Richie, 2001; Hannon, 2006; Frye & Dawe, 2008; Baldry, 2007; Wybron & Dicker, 2009). Data from interviews with the professionals supports previous research and further elaborates on the complex life which mothers face on release. According to the professionals, because a lot of the mothers have themselves been wards of the state and have not had good parenting models, they do not know how to manage children who are themselves traumatised by the separation and may be very distrustful of the mother. The literature suggests these children may have been in trouble at school, or may have been bullied (Mc Gowen & Blumenthal, 1978; Kingi, 2000; Richie, 2001). Lack of parenting skills can result in mothers overcompensating for their absence by spoiling their children and not setting boundaries. Sometimes the mother returns to drugs as a coping mechanism and this leads to her return to prison. Hence a vicious circle ensues. This demonstrates the damage done by the separation. Professionals believed that most mothers would benefit from parenting classes inside prison, but few meet the qualifications or find there is an over-demand for the classes. Research by Frye and Dawe (2008) into the PUP program in QLD and Perry (2009) who reviewed the MADD program in NSW showed that mothers who attended parenting classes reported reduced parental stress and better behaved children. In Victoria, parenting skills are addressed by the WISP program (Corrections Victoria, 2008) but according to the professionals responsibility for this program often changes, making it difficult to determine who is running it at anytime, and the demand for its service far exceeds its availability. Further, WISP is only funded for up to 12 months and the professionals regarded this as too short a timeframe for most mothers.

According to the literature the mother-carer relationship has a large impact on how the mother-child relationship survives the mothers’ incarceration (Beckerman, 1994; Enos, 2001; Casey-Acvedo & Bakken, 2002; Poehlmann, 2005). A negative mother-carer relationship can result in less prison visits. Further, the literature has shown that many mothers lose their children whilst incarcerated because they are divorced or abandoned by their partner (Dodge & Pogrebin, 2001; Richie, 2001; La Vigne et al., 2009). The professionals expanded further on the challenges which mothers face in regaining custody of their children, stating that mothers can
spend years trying to regain custody, and some never do, even when children are in kinship care during their incarceration. According to the professionals, some families are sufficiently damaged as a result of the mothers’ incarceration that they do not want the mother back in the home, or they refuse her custody of her children. They may have also suffered financial and emotional hardship as a result of the mothers’ incarceration. This is particularly the case if the mother is a recidivist, as the family has been disrupted each time. The threat which multiple custodial sentences place on the survival of the mother-child relationship is well documented (Mc Gowen & Blumenthal, 1978; Hairston, 1991; Martin, 1997; Kingi, 2000) and highlights the value of interpreting the results through a feminist standpoint lens. In doing so, the perpetuation of social disadvantage due to maternal incarceration highlights the need for social and criminal justice policies to change, and to support the family unit rather than fracturing it.

The complexities of parole requirements and the difficulties which mothers experience in meeting them have been documented in the literature. One reason for this is that some mothers become infantilised in prison, particularly if they have been medicated (Travis & Waul, 2003; Hannon, 2006; Frye & Dawe, 2008; Wybron & Dicker, 2009). It is therefore unrealistic to expect these mothers to cope with the many parole requirements, whilst seeking accommodation and employment and trying to reunite with their children (Koban, 1983; Le Flore & Holston, 1988; Clark, 1995; Easteal, 2001; Tuerk & Loper, 2006; Baldry, 2007; Wybron & Dicker, 2009; Allen et al., 2010; Baldry, 2010a; Hunter & Greer, 2011). The professionals believed the requirements placed on mothers exiting prison are unrealistic. The mothers feel powerless and worthless, and cannot handle the emotional rollercoaster of trying to reunite with their children. They described how depressed mothers can be, struggling every day with their addictions and unable to reunite with their children when they’ve been living for the day until they see their children again. The professionals further detailed the level of discrimination among child protection workers and how this exacerbates meetings between mothers and their children. They described their dealings with DHS as an extension of the prison outside, except with no set boundaries. Mothers are made to feel worthless at a time when they are trying to overcome their feelings of guilt. It is of concern that the mothers’ complex needs do not appear to be taken seriously and that labelling is so prevalent among these workers. The feminist standpoint position would suggest that the DoJ is setting goals and timelines for mothers exiting prison with little understanding of how they apply to mothers post-release experiences. Dealing with DHS is perhaps the biggest frustration which the professionals face in supporting mothers with lived prison experience, and will be further discussed in the next theme.
The literature has shown that over half of mothers exiting prison have substance abuse problems to manage (Goulding, 2004; Visher et al., 2004; Hannon, 2006; La Vigne et al., 2009; Wybron & Dicker, 2009). Interviews with the professionals support the literature in stating that managing drug and alcohol addictions is the biggest factor for mothers in getting their lives back on track and regaining their children. They spoke of the day to day battle which some mothers fight in trying to stay away from their old friends and ‘hot spots’. They elaborated on the problems mother face in both registering and accessing drug services post-release. Further, the professionals expressed concern that there are only two rehabilitation facilities in Melbourne (Bridgehaven and Odyssey House) which take mothers and their children, neither which suit all circumstances. Questions are raised about why, at time of writing this chapter, the funding for Bridgehaven is being cut (Medew, 2013). It is difficult to understand how these services are not prioritised for funding given their critical need within the community. Addressing this issue through a feminist standpoint lens highlights the perpetuation of enforced dependence and isolation of these mothers; that is, social disadvantage.

Labelling theory is particularly relevant to those mothers who have previously abused drugs and alcohol and are trying to stay clean post-release. The professionals explained how stigmatised women drug users are, in particular mothers, which is supported by Kingi (2000), Goulding (2004), Hannon (2006) and Visher et al., (2004). According to the professionals, in order to obtain their methadone mothers have to attend clinics or pharmacies, where they experience a level of ridicule and labelling, especially in country areas where the individual is known to the community. A mother with lived prison experience will be known as drug user first, as a criminal second and as a mother last, that is, she will attract three labels in total. Of particular concern were the comments from professionals around pharmacotherapy and problematic policies for arranging post-release access for mothers. They explained how dangerous it is to interrupt medication, but that this occurs frequently. They also explained how little care is taken when medication is prescribed; no treatment plans are undertaken, and no symptoms explained. It could be interpreted that Corrections Victoria is not overly concerned with the specific needs of these vulnerable people, and because of this mothers reliant on pharmacotherapy are exiting prison with no post-release programs in place.

Women post-release are ten times more likely to die from unnatural causes than those in the general community (Davies & Cook, 2000; Graham, 2003). Davies & Cook (2000) further determined that the majority of these deaths are due to drug overdoses or drug-related complications. Further, the DCPC (2010) showed the policies regarding post-release Opiate
Replacement Therapies (ORT) are complicated and problematic; leaving many mothers post-release vulnerable to overdosing. One of the reasons for this is the cost of these treatments (2010). The data from this research provides more insight into this issue. According to the professionals, the danger of overdosing is directly related to the proliferation of certain drugs on the market at any given time, and the mothers’ history of drug using. They explained that if the mother had abstained from using whilst in prison then her tolerance would be low. Niamh specifically stated that fatal overdoses typically occur in the first two weeks following release. The professionals believed this transition period is when mothers feel most isolated and worthless. They are unable to socialise with their previous circle of friends, are trying hard to overcome the difficulties associated with parole requirements and regaining custody of their children, so they are easy prey to friends or associates offering them free drugs. Further, they state there is also the threat of blood born viruses. This raises questions on the effectiveness of policies regarding access to ORT post-release given that much research (see Kingi, 2000; Travis et al., 2001; Goulding, 2004; Hannon, 2006; Baldry, 2010a; Bergseth et al., 2011; Visher & Travis, 2011) has outlined the importance of support during the transition period. From a standpoint feminist view, mothers with lived prison experience who have drug addictions are politically and socially disadvantaged in our society. Further, their lives are endangered as a result of policies which fail to address their complex needs during their transition from prison back into society.

Literature has shown that in order to qualify for parole, mothers need to have stable accommodation (Chudiak, 2008). However, a mother often loses her public housing whilst in prison, because the length of time she can hold her house is determined by the relevant state public housing policy (Hannon, 2006). The amount of time before a tenant has to relinquish public housing due to temporary absence also differs from state to state. In Victoria this is six months (DHS, 2012). Hence mothers are further disadvantaged when they are given a custodial sentence. The lack of safe and affordable housing is one of the major barriers to mothers reunifying with their children (Baldry et al., 2006; Hannon, 2006; Walsh, 2009; Bergseth et al., 2011). Previous research has determined that single mothers and those suffering from mental health disorders are particularly vulnerable to receiving inappropriate housing on release (Baldry et al., 2006). In addition, George (2011), states almost 60% of female prisoners require housing on release but due to the lack of long term housing in Victoria, they are moved from one transitional house to another. Further, she explained that the chance of recidivism greatly increases with each move post-release. It is a sad indictment on our criminal justice system that
mothers can breach their parole requirements and be returned to prison because of unsuitable housing, when in many cases the custodial sentence itself has rendered the mothers homeless and has continued on release to perpetuate this.

All professionals agreed with previous research findings that obtaining safe and secure housing was paramount to the exiting mothers’ reunification plans (Mc Gowen & Blumenthal, 1978; Davies & Cook, 2000; Kingi, 2000; Richie, 2001; Goulding, 2004; Arditti & Few, 2006; Baldry, 2007; Wybron & Dicker, 2009; Baldry, 2010a). They explained that mothers can stay in transitional housing for up to 12 months. The professionals however, provided further insight into the situation faced by mothers exiting prison, and the merry-go-round they ride in obtaining housing and regaining custody. Firstly, they explained that mothers are not classified as ‘high need’ for housing because whilst in prison they are considered to be housed. Secondly, mothers need to have 25% access to their child before they can apply for two-bedroom accommodation; however, they cannot get this access without appropriate housing. According to the professionals, mothers can wait in transitional housing for close to 12 months; all the time getting more and more alienated from their children. They can also be placed in inappropriate housing; that is, close to a well known drug ‘hot spot’ when they are trying to stay clean. In Melbourne there is less housing available now, so the situation is at crisis point. It is clear that women, especially mothers exiting prison are not prioritised for housing. Further, according to the professionals there is much discrimination among housing workers which can delay applications for housing. Their opinion is that the housing policy is not working at all in supporting mothers regain custody of their children. Because standpoint feminism is concerned with how the social structure contributes to the day to day reality of women’s lives (Swigonski, 1993; Hirschmann, 1997; Harding, 2004; Jaggar, 2004), a feminist standpoint view would suggest that these mothers are being subjected to ongoing disadvantage by policies which exercise control over the fundamental needs of very vulnerable people.

The difficulties in gaining employment have been discussed in the literature (Travis & Waul, 2003; Visher et al., 2004; Arditti & few, 2006; Bergseth et al., 2011). Data from this research further explains the difficulties which mothers face in seeking and keeping employment, which is another requirement for reunification with their children. The professionals interviewed for this research, felt incarcerated women in particular face more stigmatisation in attempting to gain employment, and they tend to rely on cash in hand jobs which offer low pay and provide little boost to their self-esteem. Because of their physical build and their limited education and training, women tend to apply for cleaning jobs. However, these positions now require police
checks. The professionals explained how having a CRN can be a reason for exclusion from the workforce, further marginalising mothers exiting prison. All professionals explained their frustration with our society which applies life-long labels to people who have been in prison, in particular mothers. As the professionals said, there is a perception that people who have been in prison are violent, and that mothers in particular must be ‘bad’ people. Questions arise related to the lack of a Spent Convictions Scheme\(^{21}\) in Victoria to set a time limit on the use of criminal records. Without this it is almost impossible for mothers exiting prison to obtain employment and therefore prove that they are capable of resuming maternal responsibilities.

### 5.4 The daily reality of working in the sector

The need for family-based planning has been well documented in the literature (Zalba, 1964; McGowen & Blumenthal, 1978; Hounslow, 1983; Koban, 1983; Bloom & Steinhart, 1993; Watterson, 1996; Farrell, 1998b; Morash & Schram, 2002; Travis & Waul, 2003; Arditti & Few, 2006; Hannon, 2006; Goulding, 2007; Frye & Dawe, 2008; Grunseit et al., 2008; Bergseth et al., 2011). Interviews with the professionals however, highlighted that little has been achieved in this area for almost fifty years, with little recognition of its relevance or importance. The situation is becoming more critical each year with the growing number of mothers serving custodial sentences. According to Corrections Victoria (2011) the imprisonment rate for women was 14.4 per 100,000 females at 30 June 2011, an increase from 12.6 at 30 June 2007. It is a curious circumstance that such a volume of data recommending family based planning could be ignored for such a long time. An assumption could be made that because mothers make up such a small percentage of incarcerated adults that their complex needs have been largely ignored. In Victoria, the Better Pathways Program was intended to address the absence of in-prison gender based programs and services (Corrections Victoria, 2009). In reality, according to the professionals, few mothers qualify for these programs because they are not available to prisoners on sentences of six months or less, or to mothers on remand.

Professionals interviewed for this research spoke of their frustrations in dealing with DHS child protection workers and their apparent lack of life experience. This supports research by Douglas and Walsh (2009) conducted in QLD. The professionals expressed concern that child protection workers often resorted to removing the child as the only way of solving the problem and closing the case. They described removal of the child as extreme, but it is acknowledged that

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\(^{21}\) Part V11C of the Crimes Act 1914 deals with the collection, use and disclosure of old conviction information. Victoria is the only State without legislation addressing this. In Victoria, full disclosure is at the discretion of the police (www.nationalcrimecheck.com.au).
sometimes the child must be removed for their own safety. Nevertheless, in the professionals’ opinion the child is often removed too soon and these decisions appear to be made as ‘quick fixes’, and not in the interests of the family as a whole. Case Example 4:5 illustrates this. In this situation the mothers’ non co-resident partner is being abusive but the solution proposed is to remove the child, further punishing the mother, and not addressing the abuse itself. This raises questions on how decisions such as these pass departmental scrutiny. In the professionals’ opinion, child protection workers lack maturity and exposure to issues regarding drug use and domestic violence. The professionals perceive such staff typically to be young university graduates who are textbook oriented and naive, who don’t value but in fact ignore their opinions as service providers. Additionally, the high turnover of these workers could relate to the young workers’ inability to cope with the pressures of dealing with the specific needs of mothers exiting prison, and making decisions as described in the above case example. Furthermore, According to the professionals, mothers with lived prison experience are the most vulnerable and complex people in the community. Only the most experienced staff therefore - from both DHS and DoJ - should be working with them.

Additionally, as previously mentioned in this chapter, mothers with lived prison experience – especially those with substance abuse problems – are discriminated against in the general community (Kingi, 2000; Goulding, 2004; Hannon, 2006; Visher et al., 2004). According to the professionals, there is much discrimination particularly amongst child protection and housing workers which contributes to the isolation and feelings of worthlessness which mothers face on release, particularly during the transition time when they are most at risk of self-harm. The professionals attribute this to a systemic lack of understanding by DHS of the issues which mothers face inside and outside prison, Comments made by the professionals support QLD research conducted by Douglas and Walsh (2009) who reported the same adversarial approaches of child protection staff and how this can affect the mothers’ chance of reunifying with her children. They also spoke of the lack of understanding which such workers have of issues relating to domestic violence and how they appear to accept dominant stereotypes of offenders. It is of grave concern to learn that discrimination is so rife in this sector.

The professionals suggested that mothers exiting prison would benefit from having a case manager assigned to them; someone to liaise between the mother and her partner and children, and to work with them on rebuilding the mother-child relationship. The professionals believed that maintaining the mother child relationship is one of the main factors in keeping mothers out of prison and interrupting the cycle of criminalisation. It is acknowledged that while the cost of a
case manager would be high, it would be more cost effective method than imprisonment and a better method of addressing poverty related crime. It should be noted that since the above interviews took place Corrections Victoria have introduced dedicated case managers for some women offenders on CCO’s (Corrections Victoria, 2009).

Collaborative services and support have been identified in previous research as being of tremendous importance in rehabilitating mothers back into the community and reuniting them with their children (Zalba, 1964; Mc Gowen & Blumenthal, 1978; Hounslow, 1983; Watterson, 1996; Farrell, 1998a; Morash & Schram, 2002; Travis & Waul, 2003; Goulding, 2007; Frye & Dawe, 2008; Bergseth et al., 2011). Data from this research supports previous research and further explains the frustrations which the professionals face on a day to day basis in supporting mothers exiting prison. Because of the lack of collaboration between departments and services, the professionals can spend hours sourcing the necessary information to assist the mothers. The professionals explained how, without sufficient services in place, they are required to provide advocacy on issues relating to child care, housing, legal advice, child visits, parole requirements, mental health services, management of household finances and so forth. They spoke of changing rules around program qualification and parole conditions, and the lack of information thereof. They shared their frustrations about the lack of clear direction on who provides what service for mothers. It is questionable as to how much importance is credited to these services if there is so little coordination across service delivery.

The professionals interviewed for this research spoke of the limited timeframe for funding support to mothers exiting prison. As previously mentioned, WISP is only funded for up to 12 months service delivery (Corrections Victoria, 2008). The professionals expressed their passion for providing support indefinitely, or for as long as it is deemed necessary. As Saoirse explained, that could mean for one day or for five years. They explained also how the mother herself must determine the stages in her progress because all mothers exit with different needs and some cope better than others. The professionals described how they expend a lot of energy negotiating with DoJ against their expectations of how mothers have progressed at any given time. No recognition of progress is ever made by the department; in fact the professionals spoke of how negative their reports can be. Their comments support those provided in a joint submission to the DCPC (2010) by Flat Out Inc and CHRIP on the time limits imposed by DoJ. The professionals were also very critical of DoJ rules around provision of services, and explained how, in their opinion, some services stick rigidly to those rules in order to maintain
their funding, hence giving the impression that quality of their delivery was less important than meeting DoJ funding criteria.

Data gathered from this research further elaborates on values underpinning the professionals' definition of the support they offer. They explained how all mothers are different and their needs are very complex. Self empowerment is the crux of rehabilitation, therefore the mother must recognise and take responsibility for herself first, and then for her children. Hence, the professionals focus heavily on identifying the mothers’ strengths and building on them together. Eilish specifically spoke of the need for a strengths based model; acknowledging every effort and every step taken by mothers in their rehabilitation. It is interesting to note that a strengths-based approach is recommended in the Corrections Victoria Best Practice Guide for Case Management with Women (2010) (Corrections Victoria, 2010). The professionals felt this approach is not used consistently by Corrections workers. Some of the mothers’ problems can be related to the issue of infantalisation; that mothers need to be gently taken back into adulthood, and also to the day to day struggle some mothers face in staying clean of drugs. The professionals further explained how trust is not one-sided; that the mothers need to identify with the service providers and it can take a number of years for trust between them to be established. However, as some of the professionals have lived prison experience themselves, establishing trust may be easier for them. Standpoint feminisms’ concept of ‘double consciousness’ (see Swigonski, 1993; Wylie, 2003; Harding, 2004) is particularly relevant to this research because the professionals understand the needs of both the mothers and the relevant government departments, and are therefore in a unique position from which to bring about change. Further, research from a feminist standpoint perspective promotes programs and policies that are committed to social change and social justice (Swigonski, 1993; Harding, 2004; Jaggar, 2004). A feminist standpoint position would find that both social and political policies have failed mothers with lived prison experience, and if no change takes place that the issues facing these mothers will continue to underpin their multiple marginalisations.

5.5 Multiple marginalisations

It has been well documented that mothers in prison come from backgrounds characterised by physical and sexual abuse, poverty, social isolation, substance abuse and mental health problems, and that many of them have been wards of the state (Johnston & Gabel, 1995; Green et al., 2000; Travis & Waul, 2003; Chesney-Lind & Rodriguez, 2004; Kilroy, 2005; Mc Ivor, 2007; Wybron & Dicker, 2009; Allen et al., 2010; Baldry, 2010a; Carlton & Seagrave, 2011; Hunter &
Greer, 2011). Carlton and Seagrave (2011) found the lives of these mothers to be cemented in trauma, such that incarceration perpetuates their trauma and reinforces their marginalisation. The data from interviews with the professionals supports this position and provides further insight into how marginalised these mothers are. According to the professionals, quite often the child is separated from the mother before the mother is incarcerated. This can be due to drug use, domestic violence or a combination thereof. The professionals explained that once the child is removed there is often nothing left for the mother: she doesn’t want to take drugs; she just can’t cope, and once her children have gone she has lost the only worthwhile part of her life, her motherhood. Further, because a lot of mothers have themselves been wards of the state, once their children are removed they can see the cycle continuing and they despair. As the professionals stressed, if the mother could have her addiction or mental health problems addressed within the community with non-biased support, it could interrupt the cycle. They also explained how important it is to build into any rehabilitation program the expectation of relapses as this is a normal part of getting off drugs.

The professionals stressed how little benefit a custodial sentence is to mothers and their children. In most cases the mother is incarcerated for crimes underpinned by poverty, but the poverty does not disappear whilst she is in prison. Until there is political acknowledgment of the need for change, these vulnerable and powerless people will continue to suffer impoverishment, discrimination, abuse and social isolation. A submission by Sisters Inside to the DCPC raised a question about the logic behind three month custodial sentences and the disproportionate harm done to the family unit. The professionals felt that incarcerated women are more damaged than their male counterparts, and mothers more damaged again. Additionally, there is much self-harm amongst mothers inside prison. These comments support the literature in that the mothers normally return to fractured families and have no support network (Bloom & Steinhart, 1993; Dodge & Pogrebin, 2001; Travis et al., 2001; Goulding, 2004; Arditti & Few, 2006; La Vigne et al., 2009; Bergseth et al., 2011).

Once released, the professionals explained, the mothers face a myriad of challenges to get their lives back on track, but that does not guarantee complacency. Case Example 4.8 illustrates the deep seated discrimination which the mothers face. This mothers’ only conviction over a decade was to steal from a supermarket in order to feed her children. Years later she is working happily in a cleaning job and fails to disclose her prison background. Her manager finds out and ‘kicks her out’ unceremoniously. As the professionals explained; there is an assumption in the community that people with lived prison experience are violent and bad people, and that
mothers with lived prison experience are the worst kind of people. It would be nice if the community could learn from Sinead as she advises her clients ‘don’t let yourself be defined by the fact that you’ve been inside’.

5.6 Conclusion

The professionals explained that in order to bring about change, the big picture needs to be seen and addressed. That is, the impact which social welfare and political policies, as well as criminal justice policies, have on increasing the marginalisation of impoverished people. The professionals criticised Australia’s’ reactionary response to crime and justice, as opposed to the preventative approach of other countries22. Mothers exit prison more damaged than when they enter. They have lost their children, their homes, their social circle and their jobs. In most cases, they have not lost their addiction or their mental health issues. They will still be living under the poverty line. Our criminal justice system is focused on the punishment and rehabilitation of offenders as individuals, not as members of families with responsibility for the care of children. Further, success is measured by recidivism rates and not on the successful or unsuccessful reintegration of offenders back into society (Mc Gowen & Blumenthal, 1978). As Watterson (1996) stated:

In any other business this rate of failure would not be tolerated....the public would go wild at spending billions of dollars in public funds with nothing to show for it but failure (p.337).

Feminist standpoint theory requires analysis on a political and social structural level in order to make a standpoint. It is apparent that feminist standpoint theory has a role to play in providing a strategy to bring about change and interrupting the cycle of maternal incarceration.

This chapter has explored the impact of maternal incarceration on the mother-child relationship. It has outlined the many struggles that mothers face in mothering from inside the prison and on release. It has explored and explained the level of frustration which the professionals feel in supporting these mothers. Finally it has examined the multiple marginalisations which underpin these mothers’ lives. This research highlights the lack of attention afforded to these mothers and to those who support them. It further highlights the enormous long term damage which maternal incarceration imparts on families, and suggests that these issues are best addressed within the community.

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22 See Lappi-Seppala (2012) for a review of Nordic penal policies over the last 50 years, with some comparative statistics for USA, Canada, Australia and NZ.
Chapter Six: Interrupting the cycle

Women are made to feel that they mustn’t want their children back because the department says...you should be willing to do what you have to...but it’s not actually about what they’re willing to do it’s about what they’re capable of doing and how they’re being supported.

(Interviewee: Aoife)

6.1 Introduction

The above quote highlights the fact that the professionals in this research – and by default the mothers they support – view parole demands as being unrealistic. It also highlights the rigid policies and guidelines of the parole boards’ set conditions and how worthless the mothers can be made to feel when they do not meet expected DoJ demands and timeframes. Finally it reflects the level of empathy and understanding which the professionals who were interviewed in this study have for the mothers, and the level of support they willingly provide.

The chapter commences with the strengths and limitations of this research. It then analyses how the research questions have been addressed. In so doing it also examines the objectives for the research. Specifically, this research has added to the body of knowledge on the hurdles mothers face both in prison and post-release in maintaining their mother-child relationship and reunifying with their children. This research also highlights gaps in the support available to these mothers, and has outlined systemic problems with existing policies and programs.

6.2 Strengths and Limitations

This research, along with all other qualitative studies, has inherent strengths and limitations determined by the method used. Qualitative research is often criticised as being biased or anecdotal, however when it is carried out properly it is unbiased, in depth and reliable (Walter, 2010; Neuman, 2012).

6.2.1 Strengths

The following strengths can be attributed to this research:

- This research explores the impact of maternal incarceration on the mother-child relationship from the perspective of the professionals who support those mothers. To
date, as far as can be determined, research into the impact of incarceration on the ability of mothers to regain custody of their children has not been gathered from this perspective, with the exception of Baldry’s 2009 needs analysis into Indigenous mothers exiting prison. The professionals work with both the mothers and the relevant government departments so they understand the issues from both sides. Further, as some of them have themselves experienced incarceration this accentuates the validity of the data (Walter, 2010; Neuman, 2012).

- This research explores the day to day work which the professionals perform in supporting mothers with lived prison experience and the values and beliefs which underpin their services. To date, information has not been gathered from this perspective on mothers with lived prison experience, with the exception of Baldry’s 2009 study on Indigenous mothers exiting prison.

- The opinions of the professionals are significant because they draw the multiple experiences of maternal incarceration together, and allow us to see the impact these experiences have on families and the community. This provides for in depth and reliable data (Walter, 2010; Neuman, 2012).

- This research employs feminist standpoint theory; a theory aimed at facilitating political and social structural change (Hess-Biber & Leavy, 2007). This is particularly suited to issues pertaining to women in the criminal justice system because their backgrounds suggest a lifetime of social and political disadvantage. Feminist standpoint theory has much to contribute to research into how the current political and social structure contribute and perpetuate this disadvantage.

### 6.2.2 Limitations

The following limitations can be attributed to this research:

- The research is a small exploratory study which cannot fully address the impact issues have on the mother-child relationship, and how this in turn perpetuates the cycle of marginalisation. However, the research does provide a snapshot of the issues surrounding mothers with lived prison experience.
No interviews were conducted with mothers inside prison. This would have been valuable in addressing the issues mothers face in maintaining their mother-child relationship from inside the prison. The professionals' knowledge in this area was limited to their own experiences – for those who had lived prison experience – and to information passed on by their clients.

It was beyond the scope of this research to question the health of the mother-child relationship prior to incarceration; however it would have been useful to know how often the mother-child relationship had been broken prior to incarceration.

Qualitative approaches produce data that can’t be generalised (Burns, 2000; Babbie, 2010; Neuman, 2012). The data from this small exploratory study cannot be generalised to all mothers with lived prison experience, nor can it be generalised to all organisations that support them.

### 6.3 Addressing the research questions: analysis and results

The research questions outlined in chapter 1.6 will now be used as a framework within which to consider the results. The headings of the following sections reflect the research questions.

#### 6.3.1 What impact does maternal incarceration have on how mothers regain custody of their children post-release, and what are the associated issues?

This question is addressed also in the sub questions where more detailed responses are provided.

Interviews with the professionals have highlighted that short sentences of less than a year pose different problems for the mother and her children. Further, the professionals indicated mothers can spend a long time on remand. This means that if the mother has a young child she will face a dilemma; whether to uproot the child and apply to have him/her in prison with her, or to find a substitute carer for the child. Interviews have also shown that there are different problems associated with both kinship care and foster care and that either way, the mother faces many hurdles in regaining custody of her children once she is separated due to incarceration.

The literature presented in chapter two has shown that maternal incarceration threatens the destruction of the mother-child relationship (Mc Gowen & Blumenthal, 1978; Hairston, 1001; Kingi, 2000; Martin, 1997). This is particularly the case when there are multiple incarcerations.
or where there is a long custodial sentence. The more custodial sentences the mother receives the less likely her children will be living with her at the time of her arrest (Hairston, 1991).

The literature and interviews demonstrated that the majority of mothers in prison are there for crimes of poverty and disadvantage (Watterson, 1996; McIvor, 2007; Wybron & Dicker, 2009; George, 2011). Further, the mother can lose her home (including all personal effects), whilst incarcerated (Davies & Cook, 2000; Goulding, 2004; Baldry et al., 2006; Thomson, 2008; Barton & Russell, 2012). Without a secure house on release she will not be able to regain custody of her children (Chudiak, 2008). In addition, the literature and interviews have shown that the majority of mothers in prison have been physically and sexually abused, suffer mental illness and have substance abuse problems (Johnston & Gabel, 1995; Morash & Schram, 2002; Goulding, 2004; Baldry, 2007; Wybron & Dicker, 2009). This research has shown that maternal incarceration exacerbates each of these problems. Some professionals interviewed for this research stated that if a mother was not mentally ill before incarceration she definitely would be afterwards. This can affect the mothers' ability on release to prove that she is capable of parenting her children, and can also render her less likely to handle the stress of meeting the myriad of parole demands.

Finally, this research has highlighted the multiple marginalisations of mothers with lived prison experience. Interviews with the professionals have indicated that many of the mothers were themselves wards of the state while their mothers were incarcerated. It can be particularly distressing for them to have their own children go into care. This research illustrates an endless cycle of poverty and despair. What became obvious as the research progressed was that little has changed to interrupt this cycle. Because standpoint feminism is concerned with facilitating change to end political and social structural disadvantage, it became apparent that this theory was strategically suitable for this research because of the lack of change in policies regarding mothers with lived prison experience. There have been many criticisms of standpoint feminism. Some eminent researchers, including Carrington (2008), have dismissed this theory as being useful in exploring the multiple marginalisations of mothers in prison. However, it may be that unless we use a strong feminist standpoint lens to examine these issues that the situation is not likely to change. It is possible that given the many years in which there has been limited action, if we now examine these marginalisations from a feminist standpoint position that change may occur. Standpoint feminism enables us to stand back and examine the broad social and political influence on the life trajectories of mothers with lived prison experience.
In conclusion, this question has been answered from the perspectives of the professionals. The researcher has described the impact which maternal incarceration has on the mothers’ chances of regaining custody of her children. Further detail is provided in responses to the following sub questions.

6.3.2 What are the main issues which incarcerated mothers face in maintaining their mother-child relationship?

The literature, interviews and case examples have determined that the major factor in maintaining the mother-child relationship from inside prison is receiving visits from children (Farrell, 1998b; Easteal, 2001; Tomaino et al., 2003; Travis & Waul, 2003; Goulding, 2004; Goulding, 2007). As the literature has shown, it is difficult to maintain a relationship with letters and phone calls. The prison routine limits access to a telephone and the calls themselves can be costly (Farrell, 1998b; Mumola, 2000; Goulding, 2004; George, 2011). This research documents the many reasons why mothers do not receive visits. As the literature presented in chapter two has shown, the distance of the prison from home and the associated cost of travel is a factor which influences both family and foster carers’ reluctance to take children to visit (Farrell, 1998b; Easteal, 2001; Tomaino et al., 2003; Goulding, 2004). Carers can also be adverse to visits because they disapprove of exposing children to the prison environment (Poehlmann, 2005). Interviews with the professionals have shown that often the mother has to rely on community services to take children to visit, but that these services can also be under-resourced.

Another factor in receiving visits is the reluctance on the part of either the child or the mother. This was identified in both the literature and the interviews with the professionals. Children can be too young to remember their mother, or they may be teenagers who condemn their mother for abandoning them and are not interested in visiting. Often the mothers are themselves reluctant to receive visits, preferring to remain isolated through guilt for abandoning their children (Berry & Mahdi, 2006; Moe & Ferraro, 2006). Interviews in this research have shown that receiving visits can result in an emotional rollercoaster for the mother. This research has highlighted however that despite the mental trauma caused by strip searching, as shown in both the literature (George, 1995; Kilroy, 2005) and in the interviews with professionals, that this practice is rarely a reason for mothers to refuse visits from their children. The literature has also highlighted that visits are a privilege and can be withdrawn for infringements inside the prison (Farrell, 1998b; Easteal, 2001; Goulding, 2004). This can cause much upset if families arrive at the prison to be told they cannot visit, especially given the distance normally involved.
and the cost of travel. Finally, the literature and interviews showed that the negative prison environment and attitudes of some correctional staff can be a factor in mothers not receiving visits from their children (Farrell, 1998b; Tomaino et al., 2003; Goulding, 2004).

Grunseit et al., (2008) demonstrated that prison routines can result in limited access to legal advice and information regarding child custody. This has an impact on the mother as often they have little notice of court hearings, do not understand the legal processes and terminology, and can be too embarrassed to acknowledge their ignorance. This makes it very hard for the incarcerated mother to maintain contact with her children. As illustrated in the literature, mothers are often divorced or abandoned by their partners during their incarceration (Dodge & Pogrebin, 2001; Richie, 2001; La Vigne et al., 2009). If the mother has insufficient notice of legal actions she is unable to fight to retain custody.

Another major issue in maintaining the mother-child relationship from inside prison is how the mother is coping with the separation. As the literature and interviews have demonstrated, most mothers are primary carers and expect to resume parental responsibilities on release (Morash & Schram, 2002). However, some are unable to cope with the shame of having abandoned their children and they choose to isolate themselves from their families (Moe & Ferraro, 2006). Others choose to numb the pain by taking drugs (Shamai & Kochal, 2008). Further, the literature and interviews provide evidence of a high incidence of mental health disorders among incarcerated mothers, with incidents of self-harm and attempted suicides in prison (Farrell, 1998b; Easteal, 2001; Goulding, 2004; Kilroy, 2005; Wybron & Dicker, 2009).

As the literature, interviews and case examples have illustrated, mothers in prison present with many health problems, including drug and alcohol abuse, child abuse and mental health disorders (Kilroy, 2000; Goulding, 2004; Baldry, 2007; Wybron & Dicker, 2009). Hence, another factor in maintaining the mother-child relationship from inside prison is the mothers’ health and the lack of opportunities to address her health problems. Interviews with the professionals suggest that most of the mothers suffer from PTSD, and many are unaware of this. They exit prison with the same drug and alcohol addictions, leaving them vulnerable to committing the same crimes for which they were previously incarcerated, and further damaging their mother-child relationship. The literature and interviews have also demonstrated the mothers’ poor parenting skills; many as a result of having been wards of the state themselves. However they receive limited access to parenting education inside prison (Frye & Dawe, 2008; Perry, 2009).
In conclusion, this question has been answered from the perspectives of the professionals. The researcher has highlighted the many issues which incarcerated mothers face in maintaining their mother-child relationship. Interviews with professionals demonstrated the multiple marginalisations these mothers face, making it difficult for incarceration to have any positive long-term effect. Their health problems, their guilt and shame all contribute to a breakdown of the mother-child relationship.

6.3.3 What are the main issues which mothers face post-release in regaining custody of their children?

As the literature presented in chapter two shows, separating children from their mother causes major problems for both mother and children. Often the mother is divorced or abandoned by her partner whilst she is incarcerated. She may not even know where her children are (Dodge & Pogrebin, 2001; Richie, 2001; La Vigne et al., 2009). The literature, interviews and case examples have illustrated that mothers encounter many hurdles in regaining custody of their children (Arditti & Few, 2006; La Vigne et al., 2009), and how different problems will arise depending on whether the children have been in kinship care or foster care. The interviews and examples suggest that many mothers never regain custody of their children.

The professionals in particular stressed how discrimination among child protection workers can negatively impact on visits with their children post-release. They also determined that leaving children in kinship care can be as much a threat to reunification as having children in foster care. Families of incarcerated mothers can suffer financial stress as well as shame, and are often reluctant for the mother to resume custody on her release. Children in foster care can be alienated through limited access over the custodial term. Finally, the mother has to prove herself the best custodial option for her child, which is particularly difficult given the complexity of parole demands and her mental state post-release.

As presented in chapter two, the literature shows that because of their primary caring role, mothers are likely to return to a fractured home (Bloom & Steinhart, 1993; Farrell, 1998a; Richie, 2001; Goulding, 2004; Arditti & Few, 2006). Particular problems can occur if the child was very young when the mother was incarcerated. The child may bond more to the carer. Her children may have suffered discrimination or may have been abused themselves in care (Watterson, 1996; Kingi, 2000). Additionally, the literature and interviews have shown that mothers in prison typically have limited parenting skills, because many will have been abused as children or have been wards of the state (Loper & Tuerk, 2010). They find it difficult therefore
returning to a fractured home with this skill deficit. Interviews with the professionals highlighted that often the mother tries to make up for lost time with her children by making promises she can’t fulfil. This can further damage an already fragile mother-child relationship. As the professionals observed, it often results in the mother becoming impoverished again, re-offending and returning to prison.

As the literature has highlighted, the most urgent need for mothers exiting prison is secure housing (Davies & Cook, 2000; Baldry et al., 2006; Baldry, 2007; Chudiak, 2008). Without this she will not regain custody of her children. This research indicates that mothers exiting prison are not prioritised for public housing. They need to secure housing in order to have their children, but they need their children in order to get housing. This research identified the frustrations which both mothers and the professionals experience with the housing policy. This research further highlights the current shortage of public and transitional housing in Victoria, and the existence of discrimination among housing workers, which increases the difficulty of securing housing. Being discriminated by housing workers is a concern, particularly as the literature has shown that single mothers and those suffering from mental illness are most vulnerable to receiving inappropriate housing (Baldry et al., 2006).

As presented in chapter two, literature has shown that securing employment is another major issue for mothers exiting prison. Because many of them have exited school early they have educational deficits which can preclude them from obtaining employment (Travis et al., 2001). This research further explains how the most menial of jobs now require a police check to be completed. Mothers with a CRN face much discrimination in society. Case example 4.8 in particular shows the problem in not having a Spent Convictions Scheme in Victoria. This in effect labels mothers with lived prison experience and limits the jobs they can apply for.

The literature and interviews with the professionals have demonstrated that the transition period from prison is when the mother is most vulnerable, as this is when the mother is coping with a myriad of parole demands (Hobbs et al., 2006; Baldry, 2007). This research has shown how isolated mothers can be during this time in particular, and how overwhelmed they can be by parole demands. They are trying to secure employment and housing, manage their substance and mental illnesses, and regain custody of their children. Many of them will have been institutionalised and will find it hard to make decisions. Many cannot cope with the level of discrimination they attract. Interviews with the professionals have highlighted how vulnerable mothers are to resuming their drug habits, overdosing, or even suiciding during this time.
In conclusion, the response to this question is:

- Mothers are particularly vulnerable post-release,
- They may have lost both their homes and their children while incarcerated, and
- They face many challenges before they can regain custody of their children.

Interviews with the professionals have highlighted the effects which a high turnover of child protection case-workers, as well as unrealistic parole expectations and timeframes has on the mothers’ ability to meet these challenges, and why many of them never regain custody of their children.

6.3.4 What resources are available to assist mothers to maintain their mother-children relationships both inside prison and on release?

The research has shown that there are insufficient resources to address the many issues which mothers with lived prison experience face in maintaining their mother-child relationship, both inside prison and on release. The main reason for this is accredited to the relatively small percentage of women in prisons worldwide (Farrell, 1998a; Carlen, 2002; Morash & Schram, 2002), and the resources required in tailoring existing programs and services to meet the different needs of incarcerated mothers (Farrell, 1998a; Morash & Schram, 2002). Interviews with the professionals suggest that another reason is a lack of understanding by government departments of the complex needs of these mothers.

As the literature, interviews and case examples have indicated, mothers with lived prison experience are extremely vulnerable people with very complex problems, the resolution of which will impact future generations. There was limited evidence of the success of the Better Pathways Strategy to date in addressing recidivism among mothers with lived prison experience. This research has shown that there are limited services available to provide ongoing support, that is, support whilst the mother is in prison and when she leaves, and until she no longer needs it. There are also limited services to provide one-on-one support, which the professionals deemed critical in addressing recidivism. Further reinforcing the perspectives of Zalba (1964), Bloom and Steinhart (1993), Farrell (1998b), Kingi (2000), Goulding (2004), Hannon (2006), Baldry (2007) and Grunseit et al. (2008) this research has highlighted the problems which occur when different government departments have conflicting attitudes and how this increases the workload of those organisations providing support to the mothers. It can also increase the mothers’ tension and isolation post-release. Interviews with the professionals also extend the perspectives of Zalba (1964), Mc Gowen and Blumenthal (1978), Bloom and

As the literature presented in chapter two shows, incarcerated mothers can face many difficulties in qualifying for in-prison programs. Further reinforcing the perspective of Kingi (2000), Solomon and Waul (2001), Goulding (2004), Hannon (2006), Baldry (2007) and Visher and Travis (2011), the interviews with the professionals showed that if mental health and drug abuse problems are not addressed inside prison, the mother’s chance of successful reintegation into society is limited. Further, her chance of regaining custody of her children is also limited.

Interviews with the professionals have highlighted deficiencies in services addressing the mothers’ health challenges post-release. Specifically, the problems mothers face in securing an uninterrupted supply of pharmacotherapy. The number of permits for chemists to supply pharmacotherapy is also deemed to be an issue, as is the labelling of mothers in the pharmacotherapy program. Interviews with the professionals have demonstrated the lack of gender responsive drug rehabilitation services available for mothers and children. In Victoria there are only two drug rehabilitation programs for mothers and their children, and one of them has been threatened with closure due to limited funding.

In conclusion, this question has been answered from the perspective of the professionals. The researcher has highlighted the limited resources available to support mothers with lived prison experience, and the apparent limited attention this issue has received. Also highlighted are the frustrations of professionals who wish to address this issue but are met with rigid policies which prevent them from providing the level of support they believe the mothers need. Very little has changed for both the mothers and the professionals in almost 50 years. See Zalba (1964), McGowen and Blumenthal (1978), Koban (1983), and Bloom and Steinhart (1993). Despite Government attempts to bring about change, the professionals have never been satisfied with the level of progress. It could be assumed that the complexity of the needs of marginalised mothers has impacted on the success of policy implementation.
6.4 Recommendations from this research

It was the unreserved opinion of all professionals interviewed for this research that prioritising funding for community services and drug rehabilitation services would reduce the number of mothers entering prison and interrupt the intergenerational cycle of offending.

The following information provides suggestions for strategic directions, both long and short term, for better managing offending mothers and their families. The long term strategies are deemed to be more complex:

**Long term**

- Custodial sentences should be considered as the punishment of last resort. In particular, the damage caused by short term custodial sentences needs to be put into perspective; sentences of less than six months should be abolished. Community based punishment is preferable and more affordable in the long term, acknowledging the primary caring role of most mothers in prison and the cycle of punishment which ensues (see Mc Gowen & Blumenthal, 1978; Bloom and Steinhart, 1993; Farrell, 1998b; Easteal, 2001; Tomaino et al., 2003; Carter, 2006; Goulding, 2007; Baldry, 2010a; Forsythe and Gaffney, 2012).

- Collaborative services should be a focus for all policies regarding mothers with lived prison experience. Having a single case worker assigned to liaise between all government and non-government agencies would increase the effectiveness of services by reducing the confusion of conflicting policies, and facilitating ‘throughcare’ policies (see Baldry, 2007, p.6). It may also address the prevalence of discrimination within some of those services. It is acknowledged that Corrections Victoria has recently introduced some dedicated case managers for women offenders as part of the Better Pathways Strategy (Corrections Victoria, 2009). Whilst this is welcomed, it will be absolutely critical for those case managers to coordinate and collaborate with other service providers. An evaluation needs to determine whether there are sufficient resources to enable this.

- Family based planning should be a priority for DHS. This could prevent children being unnecessarily removed from their mothers, and would enable services to focus on the family as a unit. Currently there is no knowledge of the exact number of children with
parents in prison. Of concern is the primary caring role of most mothers in prison, the
disruption to their families and the intergenerational cycle of offending.

- Policy reform should be initiated to address the poverty and social issues in the
  community rather than relying on custodial sentences as the only way of addressing
  them:

  - Policy reform to prioritise funding for the availability of drug rehabilitation
    services both inside prison and in the community to ensure continuity of support
    post-release. These could encompass counselling as well as provide
    comprehensive services to mothers and their children in safe and secure
    environments.
  - Policy reform to increase public and transitional housing and recognition of the
    impact which the current lack of housing has on vulnerable people.

- Policy reform should be initiated to ensure that front-line child protection workers have
  had exposure to, and training in, issues relating to domestic violence to enable them to
  make informed family based decisions. This means that only the most experienced staff
  should work with mothers with lived prison experience. There should be strategies to
  mentor new workers to achieve an ongoing family based approach.

- There needs to be a whole of government approach to address the systemic
  stereotyping of mothers in prison, and to acknowledge the multiple marginalisations
  which underpin their offending.

**Short term**

- Where there is an over demand for services provided by DoJ within the prison,
  services which can be provided by the professionals should be welcomed. Support
  should be extended past current provision timelines as outlined by the professionals.

- A Spent Convictions Scheme as exists in all other Australian States should be
  enacted to set clear time limits on the use of criminal records. This could prevent
  mothers with lived prison experience being discriminated against when seeking
  employment, and prevent the perpetuation of the ‘bad mother’ label.
- Women exiting prison should be prioritised for housing, that is, they should be considered as 'high need' for housing.

- There should be sufficient permits for pharmacies to supply post-release ORT and thereby avoid women ‘falling between the cracks’ and endangering their health.

- The Mothers and Childrens Program should be reviewed to reflect current sentencing practices of short term custodial sentences and long periods on remand. This could increase the number of mothers applying to have their child in prison with them. More mothers and children units could potentially be required.

6.5 Further research

To address the issues listed above, further research into the impact of maternal incarceration needs to be conducted as follows:

- Research into the increasing rate of female incarceration in Victoria needs to be conducted. There needs to be research into the multiple marginalisations of females in prison and how this impacts on their offending patterns.

- Research into maintaining the mother-child relationship from inside the prison needs to be conducted. This would involve conducting interviews inside the prison to explore factors, internal and external to the prison, which impact on the mothers’ relationship with her children. Of specific interest would be those issues faced by Indigenous mothers. This is because of their large representation in Australian prisons.

- Research is needed into the issues mothers face in regaining custody of children post-release. This would involve conducting a case study of a number of mothers from a period prior to their release date. This research would also identify why some mothers do not regain custody or no longer wish to regain custody of their children. Of specific interest would be those issues faced by Indigenous mothers.

- Research into the increasing number of incarcerated women from CALD backgrounds is required, specifically Vietnamese women, given their growing representation in Victorian prisons (as indicated in chapter 1.3)

- Research needs to be undertaken using both qualitative and quantitative methods to enhance the depth and breadth of data relating to mothering with lived prison experience. It would be really important to find out how many women with lived prison experience
have regained their primary caring status. Research needs to be undertaken to determine how this data could be collected given that, as far as can be determined, the DoJ does not maintain these records. A national survey capturing this data may be able to be conducted via NGO’s and government departments. This could address some of the issues raised by the data in this research (see chapter four).

6.6 Conclusion

This chapter has highlighted the multiple marginalisations of mothers in prison, and the cycle of poverty and crime perpetuated by maternal incarceration. Further, it has demonstrated the complex needs of these vulnerable people and the pervasive ignorance of this in the community. Research has documented the larger and long-term cost to society when these issues are ignored (Arditti & Few, 2006; Frye & Dawe, 2008; George, 2011).

Feminist standpoint theory is particularly relevant to this research. The literature has shown that most mothers in prison are there for non-violent crimes and crimes of poverty. Their marginalisations continue to multiply. There is less housing, less support, more poverty and more discrimination than before. This research demonstrates the level of frustration which the professionals experience with ineffective policies, labelling by government staff and the general lack of interest by society as a whole. Further, this research has highlighted the need for services in the community to replace custodial sentences. By reviewing these issues through a feminist standpoint lens, it may be possible to raise awareness and address the cycle of disadvantage which these mothers endure in the community.

This research has raised the awareness of issues pertaining to maintaining the mother-child relationship inside and outside the prison, and the lack of services to address these issues. It provides a theoretical and practical contribution to policy reform in this area.
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Appendices
Appendix One

RMIT Ethics Approval
Dear Una Stone

Re: Human Research Ethics Application

The Design and Social Context Human Research Ethics Sub-Committee, at its meeting 2nd November 2006 considered your ethics application entitled “What is the effect of maternal incarceration on the relationship between a mother and her child?”

I write to advise that your application has received approval for Phase 1 with the Level 2 risk classification please note the comment below.

This research project has been divided into three phases. Phase 1 involves the collection of data from individuals with experience of the prison system. This first Phase does not involve contact with prisoners or with officials from any prison system. Phases 2 and 3 involves the researcher entering a prison and engaging with prisoners.

During its deliberations the Committee recognised the sensitive nature of the research project. The Committee also recognised the potential benefits that could flow from the research.

In particular the Committee:
1. Acknowledges the integrity and value of the research project and conditionally approves the project.
2. Approves the collection of Phase 1 data - that is data based on interviews with people who have had experienced in prison systems.
3. The committee has not approved the collection of any Phase 2 or 3 data.
4. Requires the applicant to formally report to the Committee by 31 March 2007 on the progress of the project.

The Committee will review the project at its April 2007 meeting. The committee will at that time consider an application for the collection of Phase 2 and 3 data provided that:
1. Phase 1 has been successfully completed or is progressing satisfactorily.
2. Approval to enter and interact with prisoners and staff has been granted by the relevant authorities. You will need to provide the Committee with written evidence of this approval.

It is advised that you can submit the above amendments to the DSC HRESC B, data collection can not commence until approval has been granted. The next meeting of the DSC HRESC B is to be held 7 December.

Should you have any queries regarding the above amendments please seek advice from the Chair of the sub-committee Assoc. Prof. Heather Fehring on 9925 7840, heather.fehring@rmit.edu.au or contact me on (03) 9925 7877 or email heather.porter@rmit.edu.au
I wish you well in your research.

Yours sincerely

[Signature]

Heather Porter
Secretary
Design and Social Context
Human Research Ethics Sub-Committee
Operational Unit - Bundoora
Appendix Two

Consent Form
Appendix 1

RMIT HUMAN RESEARCH ETHICS COMMITTEE
Prescribed Consent Form For Persons Participating In Research Projects Involving Interviews, Questionnaires, Focus Groups or Disclosure of Personal Information

PORTFOLIO OF
Design & Social Context

SCHOOL/CENTRE OF
School of Global Studies, Social Science & Planning

Name of participant:

Project Title:
I’m still your Mum: Mothering inside and outside prison.

Name(s) of investigators:    (1)
Una Stone
Phone: 9925-2799

(2)

1. I have received a statement explaining the interview/questionnaire involved in this project.
2. I consent to participate in the above project, the particulars of which - including details of the interviews or questionnaires - have been explained to me.
3. I authorise the investigator or his or her assistant to interview me or administer a questionnaire.
4. I give my permission to be audio taped □ Yes □ No
5. I give my permission for my name or identity to be used □ Yes □ No
6. I acknowledge that:

   (a) Having read the Plain Language Statement, I agree to the general purpose, methods and demands of the study.
   (b) I have been informed that I am free to withdraw from the project at any time and to withdraw any unprocessed data previously supplied.
   (c) The project is for the purpose of research and/or teaching. It may not be of direct benefit to me.
   (d) The privacy of the information I provide will be safeguarded. However should information of a private nature need to be disclosed for moral, clinical or legal reasons, I will be given an opportunity to negotiate the terms of this disclosure.
   (e) The security of the research data is assured during and after completion of the study. The data collected during the study may be published, and a report of the project outcomes will be available on request. Any information which may be used to identify me will not be used unless I have given my permission (see point 5).

Participant’s Consent
Where participant is under 18 years of age:

I consent to the participation of _____________________________ in the above project.

Signature: (1) (2) Date:

(Signatures of parents or guardians)

Participants should be given a photocopy of this consent form after it has been signed.

Any complaints about your participation in this project may be directed to the Secretary, RMIT Human Research Ethics Committee, University Secretariat, RMIT, GPO Box 2476V, Melbourne, 3001. The telephone number is (03) 9925 1745.

Details of the complaints procedure are available from: www.rmit.edu.au/council/hrec
Appendix Three

Plain language Statement
17th October 2011

Dear Professional,

This letter is to introduce myself and briefly explain what I’m doing. It is also to invite you to participate in my research by allowing me to conduct an interview with you.

First, my name is Una Stone and I am a postgraduate research student at RMIT University. I am studying for a Master of Arts degree by Research in the School of Global Studies, Social Science and Planning. The title of my research is

*I’m still your Mum: Mothering inside and outside prison.*

My primary supervisor is Ms. Marietta Martinovic, who is a lecturer at RMIT. Her contact details are at the end of this letter.

*What my research is all about...*

My research is looking at how the mother-child relationship can be affected by the imprisonment of the mother. In order to understand the mothers experience I would like to interview professionals who work with incarcerated/post incarcerated mothers. I am very interested in your feedback on the possible short and long term effects on the mother in her parenting role, and in particular which case management approaches your organisation have found to work best in providing support to these mothers.

*Why I’m doing it...*

Increasing numbers of women are serving prison sentences now, many with young dependent children. There have been many studies looking at the separation between imprisoned mothers and their children, but very few have approached the issue from the perspective of the professionals who support these mothers both in prison and on release.

*How I’m doing it...*

I would welcome the opportunity to interview you as a professional because of your extensive experience working with incarcerated/post incarcerated mothers. During the interview I would like to discuss your views on how maternal incarceration can affect the mother-child relationship, both in the short term and in the long term. I would welcome any feedback which you may provide on the level of support and/or programs available to mothers in prison and on release, and whether these programs, in your opinion, typically prepare mothers for reunification with their children, and support them on release. Again, because of your extensive experience working with these mothers, I welcome your opinion on what practices work best in assisting them and how they relate to a theoretical underpinning.

If you agree, I would like to tape record the interview. This will enable me to accurately record what we have discussed. However, if you don’t feel comfortable being tape recorded then we can do the interview
without it. Later on, when I have interviewed other professionals I will put all the information together and use it to try to understand the effect which maternal incarceration has on the mother/child relationship. This information will form the basis for my thesis report which may be published in journals in Australia and in other countries.

Your participation in this research is voluntary. If you do agree to participate and then later change your mind, all data will be withdrawn from the research. Anything we talk about in an interview is confidential, and I will not use your name in the research. All the interview tapes and hand-written notes will be stored in a locked cabinet in my supervisor’s office at RMIT. My supervisor and I are the only people who will have key access to this information. According to the RMIT Guidelines on Research Practice the data will be kept for a five year period from the date of publication.

If you have any questions or concerns about the research, or if you’re unsure about anything, please feel free to ask for clarification at any time. You can contact me or my supervisor from the details below.

Thank you very much for taking the time to read this letter. If you do wish to participate in this research, there is a ‘consent form’ attached for you to sign.

Yours Sincerely,

Una Stone

Mrs. Una Stone,
Master by Research (Applied Criminology) student
School of Global Studies, Social Sciences and Planning
Criminal Justice Program
RMIT University
Telephone: 9925-2799
Email: una.stone@rmit.edu.au

My supervisor’s details are:

Ms. Marietta Martinovic, BA (CJA), MA (CJA),
Lecturer, Director, Honours Program (CJA),
School of Global Studies, Social Sciences and Planning
Department of Justice and Youth Studies
RMIT University
Telephone: 9925-2393
Email: Marietta.martinovic@rmit.edu.au

Any complaints about your participation in this project may be directed to the Secretary, RMIT Human Research Ethics Committee, University Secretariat, RMIT, GPO Box 2476V, Melbourne, 3001. The telephone number is (03) 9925 1745. Details of the complaints procedure are available from: www.rmit.edu.au/council/hrec
Appendix Four

Interview Schedule Part A
PART A

*Interview schedule (Professionals)*

**You and your organisation**

1. How long have you worked with incarcerated mothers?
   1) 5 years or less
   2) 6 to 10 years
   3) 11 to 15 years
   4) Over 15 years

2. What services do you provide?

3. Do you make any referrals to other support services?
   - [ ] Y
   - [ ] N

4. Do you have a particular theoretical framework that you apply when working with incarcerated/post release mothers? (For example, employing feminist principles of empowerment and self-determination?)
   - [ ] Y
   - [ ] N

5. In your experience how important is the use of a theoretical framework in your work with these mothers?

6. In your opinion can any of your outcomes with these mothers be attributed to this theoretical framework?
   - [ ] Y
   - [ ] N

7. What issues do you as a professional face in applying your theoretical framework?
   - [ ] Y
   - [ ] N

8. Can you share some of your practices with me?
Appendix Five

Interview Schedule Part B
PART B

Interview schedule (Professionals)

Your ‘typical female client’ profile

<p>| | | |</p>
<table>
<thead>
<tr>
<th></th>
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</thead>
<tbody>
<tr>
<td>a) Age:</td>
<td>b) Ethnicity:</td>
<td>c) Marital status:</td>
</tr>
<tr>
<td>d) Employed/Unemployed:</td>
<td>e) Level of education:</td>
<td></td>
</tr>
<tr>
<td>f) No. of biological children:</td>
<td>g) Average time incarcerated:</td>
<td></td>
</tr>
<tr>
<td>h) Offence category (Violent/non-violent):</td>
<td>i) Substance abuse issues:</td>
<td></td>
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<td></td>
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<tr>
<td>J) Mental health issues:</td>
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</tbody>
</table>

Issues whilst incarcerated

1. In your opinion what are the main issues around incarcerated mothers maintaining contact with their children?

2. In your experience what impact does losing contact with her children have on the mothers’ physical and mental health?

3. What is your understanding of the coping mechanisms employed by incarcerated mothers in trying to maintain contact with their children?

4. What is your understanding of the role the care-giver plays in mothers maintaining contact with their children?

5. What is your opinion of in-prison programs and their availability to incarcerated mothers?

Issues post release

1. If her child is on a Child Protection Order, what in your opinion are the issues faced by mothers in regaining custody of their child?

2. If contact with her child is lost or damaged whilst she is incarcerated, can you provide any strategies that are used to help the mother to re-establish contact?

3. Is there an issue with the way that mothers who have lived prison experience are labelled? Can you elaborate?

4. In your experience are there any particular health issues facing mothers on release from prison?

5. What is your opinion of post-release services and their availability to mothers?