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Psy 3320

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Annotated Bibliography

1. Fritz, S., & Whiteacre, K. (2015). Prison nurseries: Experiences of incarcerated women during pregnancy. *Journal of Offender Rehabilitation*, 55(1), 1-20. doi: 10.1080/10509674.2015.1107001

In this study, researchers compare the emotional and physical impact on inmates's when they are immediately separated from their newborn versus the implementation of prison nurseries. The researchers struggled to get in contact with all 90 of the women who were the first participants in the nursery program, as well as the 98 women who would have been eligible before the program existed. Luckily for them, 27 of the original participants of the program and 15 who were pre-nursery program agreed to participate. Prior to the interview, all participants had to give informed consent, and were all provided with a \$50 gift card to participate in the study, but their questions were different. Results showed that there were numerous similarities between the two groups during their actual birth experience, but obvious differences when it came to separating the infant from the mother,

since only one group had to forcefully separate from their newborn. These results show that given a society's better understanding of the emotional and physical state of incarcerated pregnant woman, it could lead to prison programming becoming more practicable and prison nurseries becoming more dominant in this country.

2. Schroeder, C., & Bell, J. (2005). Doula Birth Support for Incarcerated Pregnant Women. *Public Health Nursing*, 22(1), 53-58. doi:10.1111/j.0737-1209.2005.22108.x

This study evaluated the presence of doulas (birth support) for pregnant woman who were incarcerated at the time of their delivery. The participants for this study consisted of 18 pregnant inmates, 14 of them who agreed to be interviewed after their labor about their experience with having the doula present. As well as, 40 anonymous satisfaction surveys that were taken from the nurses, doctors, officers, and the doulas themselves who had been present for the births. The results from the anonymous surveys showed great promise, all of the participants marked the experience as highly satisfying for the inmates. Of the inmates who were interviewed about their labor and the experience with the doula, they were also highly satisfied and advocate the support program to other pregnant inmates. By providing the doula support to incarcerated pregnant woman, it gave them a positive experience, which otherwise could be quite terrifying . However, it became even more apparent that this unique population is in need of much greater support many different areas.

3. Mason, L. G. (2013). The Journey of One Pregnant Incarcerated Woman Through Systemic Bias. *Affilia*, 28(1), 32-39. doi:10.1177/0886109912475173

In this study, researchers follow the experience of a pregnant incarcerated woman and an agency that helped the future mother before and after the birth, including all the rights she had as a mother. This process began with the agency, The PHVA , meeting specifically with the inmate named Jane biweekly for many months, with the goal of expanding her knowledge of the care of an infant, as well as growing a bond between her and her child. Once Jane was at 30 weeks , they helped inform her on everything she needed to know about the process. They followed her from 30 weeks to 2 weeks after birth making sure that the baby was in the right hands and best situation. During the entire process, the agency came to find that the inmate never actually had power herself, that instead she was at the will of those who were around her, including nursers, social workers, doctors and especially the guards. By providing home visit programs, such as this agency, it gave the pregnant inmate support during her pregnancy and her childbirth, that she would have otherwise been without. These programs could be quite powerful in the lives of incarcerated woman who are pregnant, helping not only the families involved but as well as the prison facilities by giving a sense of a community and openness.

4. Huang, K., Atlas, R., & Parvez, F. (2012). The Significance of Breastfeeding to Incarcerated Pregnant Women: An Exploratory Study. *Birth*, 39(2), 145-155. doi:10.1111/j.

In this study, researchers explored the different experiences, knowledge and beliefs of breastfeeding with the women who are a pregnant inmate in the New York City jails. The participants consisted of 20 pregnant woman that ranged in age from 18 to 40. The pregnant inmates participated in interviews and questionnaires that were modified by the researchers themselves as they seemed fit to explore more into the topic at hand. The researchers found that the challenges the pregnant inmates experienced gave them feelings of uncertainty in breastfeeding itself, such as the pain and having to do so in a public setting. Separation from the infant after childbirth also left the participants with feelings of doubt, and therefore giving them the idea of wanting to have another chance, to ultimately have a new start with motherhood. These results show insight to the future for correctional facilities and their programs in hopes that they can accommodate for this incarcerated population.

5. Williams, L., & Schulte-Day, S. (2006). Pregnant in Prison--The Incarcerated Woman's Experience: A Preliminary Descriptive Study. *Journal of Correctional Health Care*, 12(2), 78-88. doi:10.1177/1078345806288914

This study looks into the psyche of pregnant women who are incarcerated in California. More specifically they are looking into the effects of postpartum depression, on Incarcerated and also non incarcerated women, and how they differ. The participants

consisted of 120 participants who had just recently given birth. The ages of these participants ranged from 19-41 years of age. The results showed that, as far as postpartum depression, it found that 40% scored in the minimal range, 20% in the mild range, 23% in the moderate range, and 17% in the severe range. Meaning that 40% were moderate to severe, with the other 60% being minimal to mild. These results concluded that women who are giving birth while incarcerated are more than likely to suffer from postpartum depression without the means of being able to be with their child or seek further help through therapy. Furthermore, these women are more susceptible to dealing with postpartum depression.

6. Hall, R. C., Friedman, S. H., & Jain, A. (september 2015). Pregnant Women and the Use of Corrections Restraints and Substance Use Commitment. Journal of the American Academy of Psychiatry and the Law Online , 43(3), 359-368. Retrieved February 24, 2017, from <http://jaapl.org/content/43/3/359>

In this study, researchers evaluated the use of restraints and/or shackles with incarcerated pregnant woman, as well as substance abuse of pregnant woman and the treatments dictated. Researchers found that although typically psychiatrists are not involved in any part of the delivery process, that with mental illness or substance abuse that comes afterwards in the incarcerated pregnant mothers, that their presence needs to become more mandatory after all. By providing these important concerns, it is important that the Doctor document these factors so the necessary risks that need to be taken can benefit this

population.

7. Howard, D. L., Strobino, D., Sherman, S. G., & Crum, R. M. (2010). Maternal Incarceration During Pregnancy and Infant Birthweight. *Maternal and Child Health Journal*, 15(4), 478-486. doi:10.1007/s10995-010-0602-y

In this study, researchers examined pregnant incarcerated woman and if in fact it effected their newborns birthweight. The participants consisted of 360 infants that had been born to incarcerated pregnant woman in state prisons in Texas, from the dates January 1, 2002 until December 31, 2014. Researchers used two different measurements to access the exposure for the incarcerated women. First, it was done by the number of weeks of their pregnancy that they spent incarcerated, second their age when they were admitted to prison. The results found that women who were admitted to prison during their first trimester, had the greatest unchanged mean of infant birthweight, while the women who entered during the first half of their second trimester had the greatest unchanged rate of their delivery being preterm. The results showed the relationship to be the strongest with the mothers who had been incarcerated during their first trimester.

8. Lorenzen, D., & Bracy, K. (2011). MOMS Plus: A Public Health Program for Substance Using Pregnant Inmates in an Urban Jail. *Journal of Correctional Health Care*, 17(3), 233-240. doi:10.1177/1078345811401361

In this study, the researchers evaluated a public health program that is designed to help pregnant incarcerated women who are drug abusers. MOMS Plus serves 400 clients annually and 90% of those clients are incarcerated. They seek to help these women improve their lifestyle choices and to quit abusing drugs. This study involved 646 clients in 2006, 560 clients in 2007, and 464 clients in 2008. Of all these participants, the majority of the women were of color. The researchers found that 100% of the women are pregnant and abusing substances among many other issues. 90% of these women, have legal or criminal issues, 70% have mental health issues apart from substance abuse. Furthermore, 98% are homeless and 95% also have other children besides the one they are currently pregnant with. These results are pretty incredible concerning all of the participants of the MOMS Plus program. This program obviously targeted the ones who need the most help from them. By providing this program, the women who went through it, have all had a very good turnaround period.

9. Kubiak, S. P., Kasiborski, N., & Schmittle, E. (2010). Assessing Long-Term Outcomes of an Intervention Designed for Pregnant Incarcerated Women. *Research on Social Work Practice*, 20(5), 528-535. doi:10.1177/1049731509358086

This study evaluated the long-term effects of incarcerated mothers and their rights as a parent. The researchers received the data for this study from 10 years of administrative child welfare, criminal justice, and vital statistics data on mother/ child dyads were collected. The researchers found that, overall, 31% of all of the women lost parental rights

after an average of 4.2 years as well as their ethnicity did not show a major factor in the study. Furthermore, 33% remained arrest free after the birth of their child while 70% have retained their child custody. These results show that cultural or ethnic roles do not necessarily factor into whether the mother will retain the rights to their child. However, not every individual will be a success after giving birth in prison. Social work plays a huge role in supporting the relationships between the mother and children, and can factor into the children's lives and upbringing.

10. Kubiak, S. P., Young, A., Siefert, K., & Stewart, A. (2004). Pregnant, Substance-Abusing, and Incarcerated: Exploratory Study of a Comprehensive Approach to Treatment. *Families in Society: The Journal of Contemporary Social Services*, 85(2), 177-186. doi: 10.1606/1044-3894.320

This study describes the outcomes of social and psychological functioning of pregnant incarcerated women and their child birth. The participants consisted of 52 pregnant women who had drug and alcohol issues were targeted for this study. However, these women also must not have an assault record. The age range was from 19 to 42 years with a mean of 28. The researchers found that a majority of 75% women did not complete high school, and of those women 65% were african-american, and 35% were european-american. Out of all of the participants, there was only one married woman, however 45% claimed they had a financial supporter or significant other. Half were convicted for property related offenses, and the other half on drug offenses. Majority claimed Cocaine as their

primary drug of choice. These results showed that treatment interventions can be beneficial to the women who are incarcerated and with child. However, it doesn't show a strong effectiveness on changing the culture or helping anyone prevent going to prison. Most women when they get out of prison return to extreme poverty, and more abuse without the aid of programs needed by the individuals.