Jumping Hurdles: the myriad of issues and barriers for incarcerated mothers to regain custody of children

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Abstract

This paper describes the myriad of issues and barriers that mothers face on exiting prison in their attempts to regain parental responsibility of their children. Interviews with professionals and stakeholders in Victoria, Australia who support these mothers, reported that these issues include lack of housing, obtaining a secure job and overcoming drug and alcohol addictions. Women coming out of prison have few organizational skills, as many have become institutionalized whilst in prison. They have poor time management, poor self-discipline, a poor work history and often battle anxiety and depression. Further, they need to prove that they are addressing the issues that caused them to be incarcerated and that they are able to care for their children in order to regain custody of them. Such ‘proof’ involves housing and employment, remaining drug and alcohol free and developing pro-social networks. The research shows that the hurdles incarcerated women need to overcome to meet these requirements are often hampered by limited support and assistance.

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**Introduction**

Existing Australian and international research suggests that women who have recently been released from a period of incarceration frequently face many hurdles in attempting to reunite with their children. These can include continued substance abuse, housing and employment difficulties, stigmatization, educational and training deficits and continued mental and physical health issues (Bergseth, Jens, Bergeron-Vigесаа & Mc Donald, 2011; Carlton & Baldry, 2013; Goulding, 2004; Hannon, 2006; Liddell & Martinovic, 2013; Travis, Solomon & Waul, 2001; Visher & Travis, 2011).

The majority of incarcerated mothers have histories of drug abuse, mental and physical health issues (Baldry, 2010; Baldry & Cunneen, 2014; Bergseth et al., 2011; Carlton & Baldry, 2013; Goulding, 2004; Hannon, 2006; Kingi, 2000; Travis et al., 2001; Visher & Travis, 2011). Kingi (2000) in her New Zealand (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 often struggled with stigmatization and staying ‘clean’ in the face of many temptations, not least of which was the isolation brought about by avoiding their 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). While women make up only 7% of the Australian prison population (Australian Bureau of Statistics [ABS], 2011; 2012) they experience more significant trauma, disadvantage and vulnerability than their male counterparts (Baldry, 2010; Carlton & Baldry, 2013).

Australian studies (Baldry, 2010; Baldry & Cunneen 2014; Carlton & Baldry, 2013) refer to women’s post release experiences being different from men because of past trauma, including being the victims of abuse and domestic violence; multiple disadvantages and inequity such as lack of suitable housing and problems re-uniting with children. Often these issues are compounded when the woman is an Aboriginal and Torres Strait Islander given the relationship between their drug and alcohol abuse. These issues are seen to be connected to histories of trauma, childhood and adult abuse and cycles of criminalization and incarceration (Baldry, 2010; Baldry, 2013).

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 located in areas entrenched with the problems which contributed to their incarceration in the first
place. For instance, women trying to control their drug addiction are often placed in a known drug ‘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 paper commences with background information on the incarceration of women in Australia then provides contextual literature related to a mother’s incarceration and her post release experiences with examples from both the United States (US) and Australia. We then outline the research study including the rationale for the qualitative method, the information on the interview participants and stakeholders who supported mothers who exited prison. Information is then provided on the feminist theoretical underpinnings used in this research. The views of the participants interviewed show the multiple issues and barriers incarcerated mothers face upon release, including the often unrealistic hurdles they need to negotiate if they are to regain custody of their children. Our findings in part confirm what is already known about incarcerated women’s experiences that is, the challenges and barriers have become more complex, despite some government attempts to improve the plight of these women. Better gendered programmatic responses are required to address their social and political disadvantage.

**Background**

Since 2002 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. More specifically, 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). Moreover since June 2013 there has been a 13% (298 persons) increase in females in custody and an 18% (142 persons) rise in Aboriginal and Torres Strait Islander females in custody (ABS, 2014). Of concern is that women receive little or no treatment whilst they are in prison (Baldry, 2010; Cartlon & Baldry, 2013; Easteal, 2001; George, 2011; Perry, 2009; Sisters Inside, 2010).

A problematic trend in Victoria, which has particularly affected mothers, is the increased use of short-term custodial sentences or remand (Drugs and Crime Prevention Committee [DCPC], 2010). Imposing short custodial sentences on mothers for committing non-violent crimes enmeshes them in the criminal justice system and may force their children into care. Because most female offending is less violent, many women receive prison sentences of six months or less. Between 2010 and 2011, 46.8% of female offenders received sentences less than six months, and a further 32.3% received sentences of six to twelve months (Corrections Victoria, 2011). At June 2011, 79% of Victorian women prisoners were serving sentences of six to less than twelve months (Corrections Victoria, 2011). Reliance on short prison sentences to address predominantly non-violent or property-related crimes and those involving substance abuse is increasingly questioned (George, 2011; Sisters Inside, 2010).

Short prison sentences in particular damage the family unit and are disproportionate to the crimes committed. Mothers can lose their homes, jobs, and children (Sisters Inside, 2010). Further, mothers are increasingly spending long periods on remand, are reluctant to disrupt child-care arrangements at this time, and do not qualify for in-prison services and programs which could assist in rehabilitation (George, 2011; Sisters Inside, 2010). 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). Overseas research shows many mothers lose their children while incarcerated because they are divorced or abandoned by their partner (La Vigne, Brooks & Shollenberger, 2009; Richie, 2001).

Preparation for Mothers for Release From Prison

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 also provided funding for some Non-Government Organizations (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 City Mission (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).

In 2009 PricewaterhouseCooper 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 actual extent to which all of the Better Pathways goals and objectives had been met. What is known is that the rate of female incarceration from 2005 to 2009 reduced (Bartels & Gaffney, 2011) but has increased significantly since 2009 (ABS, 2014; Carlton & Baldry, 2013; Corrections Victoria, 2011; Segrave & Carton, 2011) despite these policy initiatives. An executive summary of the evaluation was released to the public, but the full evaluation has remained confidential (Drugs and Crime Prevention Committee [DCPC], 2010).

The proliferation of short-term sentences actually prohibits many women from attending programs inside prisons (Bartels & Gaffney, 2011). 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 is not available to mothers serving sentences of less than three months. This has an impact on the time available for support to these incarcerated mothers prior to release when there is much to organize, 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 affected, and yet they have to prove themselves capable of resuming responsibility for their children (Arditti & Few, 2006; Easteal, 2001; George, 2011; Goulding, 2004; Hannon, 2006).

Research in the US showed that when incarcerated parents receive parenting education in prison they are better able to communicate with their children, the
carers of their children, from inside prison, and are better able to manage their children when they return to the home (see Loper & Tuerk, 2010). Mothers reported less parenting stress, improved communications and relationships with both children and the children’s carers, and less mental stress. Similar research into parenting education within prison has been conducted in Australia (see Frye & Dawe, 2008; and Perry, 2009). The programs include child management skills; enhancing the parent-child relationship; identifying and regulating ones emotional state; managing substance abuse and extending social networks. Results showed increased emotional wellbeing, decreased levels of parenting stress and improvements in children’s behavior (Frye & Dawe, 2008) and increased confidence and patience in day to day communication with their children (Perry, 2009). 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); hence many mothers exiting prison after serving short-term sentences are not able to access the program.

Additionally 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 parents (Allen, Flaherty & Ely, 2010; Clark, 1995; Easteal, 2001; Goulding, 2007; Hunter & Greer, 2011; Koban, 1983; Tuerk & Loper, 2006; Wybron & Dicker, 2009). As the following will show, mothers have enormous hurdles to cross to regain custody of their children.

**Barriers to re-establishing the maternal role**

Barriers to re-establishing the maternal role have been addressed by many researchers in the US and Australia (Arditti & Few, 2006; Baldry, 2013; Baldry & Cunneen, 2014; Bergseth, et al., 2011; Bloom & Steinhart, 1993; Carlton & Seagrave, 2011; Dodge & Pogrebin, 2001; George, 2011; Koban, 1983; La Vigne, Brooks & Shollenberger, 2009; Mc Gowen & Blumenthal, 1978; Richie, 2001; Travis, et al., 2001; Watterson, 1996). The majority of incarcerated mothers are primary caregivers 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; La Vigne et al., 2009; Richie, 2001). Mothers usually have no money, no home, no transportation and no job prospects.
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 12 months following release from prison increases the chance of recidivism by 22%, with subsequent moves progressively increasing recidivism to 60% (George, 2011). Georges’ comments are based on previous findings by Baldry, McDonnell, Maplestone 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 likely to be placed into poor and inadequate housing areas 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.

Women’s coping skills are further stretched by what Arditti and Few (2006) identified as the triple threat, a combination of substance abuse, trauma and mental health problems, all of which are intensified by the prison experience. Richie (2001) identified seven barriers to successful reunification; the most significant included the lack of treatment for substance abuse problems, safe and affordable housing, health and mental health services and comprehensive services. Richie (2001) further found the life of a newly released mother to be extremely complex: with the need to submit urine tests; seek employment; find appropriate housing; attend counseling; manage substance abuse and health problems, and try to regain custody of her children (see also Bergseth et al., 2011). Carlton and Seagrave (2011) believed that the prevalence of trauma and abuse for many female prisoners’ were a consistent and pernicious factor in their lives, in particular for Aboriginal and Torres Strait Islander women. The researchers claimed therefore that incarceration is but one episode in women’s lives which are already characterized by abuse and neglect, and that incarceration serves both as an extension of trauma and a reinforcement of marginalization (Carlton & Seagrave, 2011).

In addition, 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 offender’s family or the state. Women are therefore more
likely than men to return to a ‘broken’ or troubled family. This increases the difficulties in readjusting to living together and resuming the parental role (Arditti & Few, 2006; Bloom & Steinhart, 1993; Koban, 1983; La Vigne et al., 2009; Richie, 2001).

Mothers also face issues in ‘coming to grips’ with living on the outside of prison. Research has 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, with women prisoners experiencing grief upon their release. Kingi (2000) spoke of ‘moving goalposts’ for mothers whose children were under the care of the state. Mothers in her study felt that the criteria for regaining care of their children from the state were continually changing, making reunification almost impossible. For example as they reached each goal (for example staying drug free), another was imposed (such as getting alternative accommodation) making the task virtually impossible.

Further, the children may not remember their mother or they may be hurt, angry and distrustful (Hannon, 2006). They may have been teased at school or had to move school, or they may have been neglected or abused by temporary carers (Arditti & Few, 2006; Bloom & Steinhart, 1993; Kingi, 2000; Mc Gowen & Blumenthal, 1978; Richie, 2001). Some will have grown up during their mothers’ incarceration and no longer see themselves as children (Frye & Dawe, 2008; Hannon, 2006; Wybron & Dicker, 2009). A concerning belief by Wybron and Dicker (2009) is that society is largely uninterested and mainly discriminative towards women with lived prison experience; hence the women feel worthless and isolated when they exit prison.

Parole requirements are seen to be too complex, especially as the mothers feel stigmatized, lost, have little support and lack confidence (Hannon, 2006). Baldry (2007, p.6) highlighted the need for ‘through-care’ policies in providing a ‘continuous, coordinated and integrated management of offenders’, from the day women enter prison until a significant period following their release. The lack of continuity of drug treatment programs post-release placed women at enormous risk of resuming drug use and potentially overdosing. Baldry (2010) also criticized 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-term sentences or have been held on remand. Regardless of whether the mother has been in prison for one month or ten years, it is of critical importance that she receives financial assistance and emotional support to enable reunification and reintegration back into society. It has become clear however that
traditionally there has been insufficient funding for the provision of gender responsive interventions (Baldry, 2010).

**The research study**

The researchers have had an ongoing interest in the way the criminal justice system responds to women who are incarcerated, particularly mothers. Stone's (2013) consultation with stakeholders in 2007 (see below) demonstrated the need for research to be conducted to raise awareness of and assess the adequacies of existing gendered policy and program responses.

Qualitative feminist research on incarcerated mothers’ experiences was used for this research. Qualitative research provides an in-depth understanding of the complexity of these experiences and is particularly suited to feminist research as it offers the researcher access to people's thoughts and memories in their own words. Feminist qualitative research allows for exploration of the interviewee's ideas of reality within a given context (Reinharz, 1992; Babbie, 2010). Hesse-Biber (2014, p. 3) believes that feminist research “centralises the relationship between the researcher and the researched to balance deferring levels of power and authority.” Further feminist research must examine and redress the inequities and social injustice that often undermines and can destroy the lives of women and their families (Hesse-Biber, 2014).

The qualitative data was collected from six semi-structured qualitative in-depth interviews with professionals who case managed mothers whilst in prison and on their release, as well as meetings and discussions with 24 key stakeholders who are advocates for incarcerated mothers. The study aimed to understand the effect which maternal incarceration has on the relationships between incarcerated mothers and their children. Ethics approval from RMIT University was gained prior to the commencement of the research.

‘Expert sampling,’ a type of purposive sampling was used for this research. The sample is selected based on participant expertise in a particular area or field of research (O'Sullivan, Rasel & Berner, 2008). All participants occupied a distinctive role as they had extensive first-hand experience of the issues faced by mothers who have been imprisoned. The interviews with the participants, who had up to 25 years’ experience, enabled an understanding of the issues incarcerated mothers face in regaining custody of their children. In addition participants were asked to outline the issues and challenges incarcerated mothers faced on their exit from prison. Similarly the stakeholders had extensive involvement with incarcerated women, especially mothers and provided ongoing consultations related to issues
that incarcerated mothers face. These stakeholder consultations occurred in meetings, conferences and one-to-one sessions throughout the research. As Mertens and Stewart (2014) state the inclusion of stakeholders is important for feminist qualitative research as they help determine the appropriate methodology and ensure that the researcher is open and respectful of the perspectives and experiences of those interviewed (see also Hesse-Biber, 2014). This was particularly important because some participants were mothers and had themselves been incarcerated. The participants roles included systemic advocacy, mentoring and education on pharmacotherapy, counseling, ongoing support and referrals, and provision of support programs.

The interviews with the professionals (who have been given pseudonyms) occurred in Melbourne, Australia in late 2011 and early 2012. The consultations with stakeholders occurred over a five-year period, from 2007 to 2012 (Stone, 2013). The interviews with professionals were of 45-80 minutes in duration. The interview schedule was comprised of two parts: The first 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. The second contained profile questions on their typical client – the mother. This part of the schedule asked open-ended questions regarding the mothers’ relationships with her children whilst incarcerated, and any challenges they faced in re-establishing their parental role on the outside. 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 time for the participant to familiarise themselves with the schedule. Field notes were written as soon as possible after each interview or stakeholder consultation. Field notes contain observations regarding body language and emotions not necessarily apparent on audio recordings. The interviews were then transcribed by a confidential transcription service.

**Theoretical underpinnings for this research**

Feminist standpoint theory was used for this research as it provides a way of understanding the world, a point of view of social reality that begins with, and is developed directly from, women’s experiences (Brooks, 2007; Hesse-Biber, 2014). Standpoint feminism advocates for change in order to end disadvantage in society. 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 (Hirschmann, 1997; Harding, 2004; Jaggar, 2004; Naples & Gurr 2014; Swigonski, 1993). Standpoint feminism was deemed the most appropriate tool for understanding the participant's perspective in this research because of its concern for oppressed and disadvantaged groups and with facilitating political and social structural change (Hesse-Biber & Leavy, 2007; Hesse-Biber, 2014; Mertens & Stewart, 2014).

Despite some criticisms (see Carrington, 2008; Jaggar, 2004) we believe this theory has significant application for the study of incarcerated mothers as discussed above. Further Brookes (2007) believes that standpoint feminism is suited to understanding women in the criminal justice system because they often have a lifetime of oppression, social and political disadvantage and the current political and social structure contributes and perpetuates this disadvantage. Standpoint feminism has application for this research as it examines the experiences of incarcerated mothers who are an oppressed group, through the eyes of the women who work with them. In addition, Naples and Gurr (2014) believe that standpoint feminism is important for current feminist research as it goes beyond the current and traditional theoretical and methodological approaches. In addition, it assesses the power dynamics or lack of power of the research recipients (Naples & Gurr, 2014). This will be demonstrated in the following discussion of the participant’s responses to their work with these mothers.

**Discussion**

The data collected in this research has been organized in themes for ease of readability and understanding. Thematic analysis includes reviews of the transcriptions of the interviews and making notes of themes as they emerge from the data. These themes, along with field notes enabled interpretations and sensitivities in the data to emerge, and these were then coded (Hesse-Biber & Leavy, 2007; Neuman, 2012). Once data saturation was achieved the following themes emerged (Neuman, 2012). These were the issues and barriers incarcerated mothers face in regaining custody; including drug and alcohol use; health and well-being barriers; individual and family barriers and the challenges negotiating with government organizations.
Issues and barriers in regaining custody

All participants viewed incarcerated mothers as facing an endless cycle of poverty and despair. They have few opportunities for education, training and employment and limited or no family or community support. Often they are required to stay away from their ex-partner or former social circle. Alongside this is their difficulty in obtaining stable housing which is a mandatory requirement for regaining custody of their children. They often 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.

Further, participants felt that custodial sentences of women should be considered as the punishment of last resort. In particular, the damage caused by short-term custodial sentences should be put into perspective and sentences of less than six months should be abolished. This does not mean that long term sentences are required. In fact community based punishment is preferable and more affordable in the long term for non-violent and low risk offending (see George, 2011). Community based sanctions would acknowledge the primary caring role of most mothers in prison and interrupt the cycle of incarceration (see also Baldry, 2010; Bloom and Steinhart, 1993; Easteal, 2001; Goulding, 2007; Mc Gowen & Blumenthal, 1978). Standpoint feminism shows that a lack of structural, legal and political change related to sentencing, policy development and provision of adequate services for incarcerated mother's will further exacerbate mothers disadvantage and make it harder for them to regain custody.

Drug and alcohol issues and barriers to regaining custody

The participants generally felt that the major issue for mothers in regaining the custody of their children was dealing with their drug and alcohol dependency upon release. The need for clean urine tests to obtain subsidized housing, a mandatory requirement to regain custody, is often difficult because they have few supports, feel lonely and depressed and revert to using again. They also felt that some mothers did not want to produce urine samples as this was degrading in front of a stranger and it reminded them of their past experience of abuse and victimization. Further they were perceived as an addict regardless of whether they used or not. Ana commented that:

... It’s like ‘no you were using drugs and alcohol before’...that’s all they’ll see you as.
Compounding these challenges is that mothers face difficulties both registering for a program and accessing appropriate services. Some of these difficulties relate to a lack of communication by Corrections Victoria about the availability of appropriate programs, and some to labeling by the community: Ella commented on the value of drug replacement 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 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’...

As will be seen below there are a myriad of problems in coordinating the mother’s release from prison and her access to post release programs. One participant explained that Corrections Victoria are meant to fund post release programs for women who were on pharmacotherapy, but that her organization is encountering a lot of difficulties with pharmacies not being paid, and the mothers therefore are not having access to regular doses of medication. As well there are not enough pharmacies with permits to assist mothers upon release. Nicky said:

If it hasn’t been organized for you and you come out 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.’

From a standpoint feminist view, mothers who have been incarcerated and who have drug addictions are politically and socially disadvantaged in our society (Hesse-Biber, 2014; Hesse-Biber & Leavy, 2007; Mertens & Stewart, 2014). Further, incarcerated mothers suffer ongoing discrimination as a result of policies which reinforce and exercise control over very powerless lives (see Brookes, 2007; Naples & Gurr, 2014).

Health and well-being barriers to regaining custody

All participants in this study struggled to manage incarcerated mothers who suffered from Post-Traumatic Stress Disorder [PTSD], and stated that many were unaware that they suffered from PTSD. Post-release health issues for mothers also include the lack of general health maintenance but also the risk of overdosing. Similar issues were reported in previous research (see Arditti & Few, 2006; Baldry, 2010; Hunter & Greer, 2011).

Ella confirmed this stating that:
Most have got Hepatitis C, so they need to find a decent doctor they can talk to ...but most (mothers) 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...

Nicky further stated that:

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.

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 as Nicky explains:

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 (from prison)... or if you did use just a little in prison to make sure you weren’t sick (upon release).

The precariousness and vulnerability of women and especially mothers’ post release can be a determining factor in their disproportionate rate of harm and death (Carlton & Seagrave, 2011; Segrave & Carlton, 2011). Research (Arditti & Few, 2006; Easteal, 2001; George, 2011; Goulding, 2004; Hannon, 2006; Richie, 2001) shows the difficulties mothers have in negotiating living on the outside and regaining custody of their children. Such issues are further compounded by the lack of funding of programs and interventions (Baldry, 2010). In addition there is limited interest and recognition (Wybron & Dicker, 2009) of the triple disadvantage that incarcerated mothers’ experience. Standpoint feminism would suggest that these mothers’ lives are negatively affected as a result of policies which fail to address their complex needs during their transition from prison back into society (see Brookes, 2007; Hesse-Biber, 2014).

**Individual and family barriers to regaining custody**

The participants stated that a further challenge in regaining custody is the mothers overcoming institutionalization. Women coming out of prison have few organizational skills, as many have become institutionalized whilst in prison. They frequently have poor time management, poor self-discipline, are often depressed, and feel powerless and worthless. The need to prove that they are addressing the issues that caused them to be incarcerated and that they are able to care for their children upon their release from prison can be a challenge. Mothers may have
unrealistic expectations of the difficulties of regaining custody of their children. Cynthia said:

\begin{quote}
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: behavioral issues, trauma related issues, sometimes anxiety and depression issues, Attention Deficit Hyperactivity Disorder (ADHD) and that’s just stressful...
\end{quote}

Participants spoke of the difficulty mothers have in managing children who are traumatized by the separation and may be very distrustful of the mother. Cynthia said stated that:

\begin{quote}
... 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...
\end{quote}

Georgy commented that often mothers forgot that:

\begin{quote}
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.
\end{quote}

These issues show the increasing complexity that incarcerated mothers face as result of insufficient services to support and encourage their rehabilitation and reintegration into society. Through-care policies and services as Baldry (2007) advocates are critical for mothers while they are in prison and when they are released. Under-resourcing of gender responsive programmatic responses continue to disadvantage incarcerated mothers and perpetuate their political and social, structural disadvantage (Hesse-Biber, 2014; Hesse-Biber & Leavy, 2007; Mertens & Stewart, 2014).

**Negotiating with government organizations to regain custody of children**

The majority of mothers when released from prison had to negotiate with child protection (state government services) to regain custody of their children. This proved difficult and it is possible that mother’s experienced similar issues to those in Kingi’s (2000) study where mothers felt that criteria for regaining custody of children was constantly changing. The participants in this study commented upon the level of discrimination among government workers toward incarcerated mothers and how this affected the mother’s ability to regain custody. The mothers contact with child protection was perceived as an ‘extension of the prison outside, except with no set boundaries’. Further participants felt there was limited
understanding of the mother’s difficulties in re-integration into society. Ana’s statement provides an example:

*Mothers most of the times are on public transport and again they (child protection - state government services) 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 (child protection) apply...*

Cynthia said:

*...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...*

Participants in this study emphasized that child protection staff are often too young, are straight out of university and have few life skills. Sam commented:

*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...*

Participants further expressed frustration about child protection policy in Australia, particularly the lack of family oriented planning and policy. They felt that the child-centered approach used in Australia was very divisive and focused on breaking up families rather than aiming to maintain the family unit at all costs (see Kingi, 2000). From a feminist standpoint view vulnerable mothers are politically and socially disadvantaged through policies which continue to impoverish and exercise power over them, perpetuating a cycle of despair (Brookes, 2007).

An additional challenge mother’s face is if they exit prison on parole. Parole expectations are numerous and often unrealistic for mother’s ability to resume care for their children full time. Juggling a myriad of expectations, related to parole including special conditions related to drug use, housing and child protection are increasingly complex (see also Allen et al., 2010; Baldry, 2007; Baldry, 2010; Hunter & Greer, 2011; Wybron & Dicker, 2009).

**Conclusion**

Although the findings from this research in part confirm what is already known; that is, incarcerated mothers are some of the most vulnerable women in the world, the system is often unresponsive to their plight. Various attempts have been made
in both the US and Australia to address their issues with limited success. This paper outlines increasingly complex challenges and barriers that face women in regaining custody of their children. Of concern is that many issues and barriers need to be addressed when mothers are at their most vulnerable, that is on their release from prison. Research outlined and the participants interviewed in this study believed that incarcerated mothers were overwhelmed in meeting the requirements of various service providers, government and non-government. For example, they need to simultaneously organize housing, jobs, reunification with family as well as meeting child protection demands and parole requirements. Moreover, women are often socially isolated, dependent on illicit substances, have mental health disorders and experience poverty. Many unmet needs were identified in this research, including transitional and long-term housing, availability of prescription medication for mental health problems and suitable jobs or training being available for women exiting prison. More understanding by authorities of the complexity of incarcerated mother’s lives; the often unrealistic expectations that are placed upon them; plus the hurdles that they need to cross, are essential for incarcerated mothers to regain custody of their children. Short-term prison sentences should be avoided wherever possible, and community based alternatives to prison should be expanded and used for mothers with children wherever possible. When community based options are not suitable adequate funding of support programs for all mothers released from prison particularly those who were on short-term sentences is required.

In this paper standpoint feminism provides a lens for understanding the social-structural disadvantages, multiple marginalization, lack of power incarcerated mothers face in managing complex issues and challenges when they are released from prison and regaining custody of their children. Changes to policy and provision of adequate services for incarcerated mother’s is essential to improve mothers opportunities to regain custody of their children.

References


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