Strengthening families impacted by incarceration

A review of current research and practice

May 2009
Strengthening families impacted by incarceration

* A review of current research and practice

May 2009

Prepared by:
Jessica Meyerson and Christa Otteson

Wilder Research
451 Lexington Parkway North
Saint Paul, Minnesota 55104
651-280-2700
www.wilderresearch.org
## Contents

- Introduction ......................................................................................................................... 1
- Service needs of families affected by incarceration ........................................................... 3
- Key research-supported practices ....................................................................................... 8
- Promising research-based programs serving the needs of families affected by incarceration ...................................................................................................................... 18
  - Prisoner reentry programs that incorporate family support ............................................ 18
  - Programs that improve parenting skills and strengthen family relationships during the period of incarceration ............................................................................................ 20
  - Mentoring approaches for offenders and their children ................................................ 23
  - Research-based programs that support caregivers ........................................................ 25
  - Research-based programs with a strong faith-based component .................................. 26
- Conclusion ........................................................................................................................ 27
- Bibliography ..................................................................................................................... 28
Acknowledgments

The authors of this report would like to thank the staff of Volunteers of America for their support of this project. Beth Poffenberger Lovell, Volunteers of America’s Director of Children and Families, was especially helpful in providing the authors with information about the organization’s proposed Family Strengthening initiative.

We would also like to thank the following senior staff from Volunteers of America’s proposed pilot sites for taking the time to speak with us about their programs:

Pam Bollinger
Nancy Ives
Carolyn Law
Shannon Schumacher
Caterina Tassara-Vaubel

Thank you to the following Wilder Research staff who provided their assistance with the project:

Amanda Eggers
Heather Johnson
Ron Mortenson
Greg Owen
Kerry Walsh
Introduction

Volunteers of America is a national, nonprofit, faith-based organization dedicated to helping those in need rebuild their lives and reach their full potential. Since its founding in 1896, the organization has supported and empowered America's most vulnerable populations, including men and women returning from prison, at-risk youth and families, the homeless, the disabled, and those recovering from addictions. Through thousands of programs, it serves more than 2 million people in over 400 communities across the United States.

In early 2009 the organization announced plans to launch a new nationwide “Family Strengthening” initiative. The purpose of this initiative is to strengthen and support families affected by parental incarceration. Five pilot sites, Volunteers of America Dakotas, Volunteers of America Illinois, Volunteers of America Indiana, Volunteers of America Northern New England, and Volunteers of America Texas have been selected to design and implement the new initiative.

In February 2009, Volunteers of America asked Wilder Research to conduct a thorough literature review to identify any research-based programs or practices that could be incorporated into the new Family Strengthening model.

The literature reviewed for this report includes:

- Research-based analyses and scholarly articles by leaders in the reentry field (e.g., Petersilia, 2004 and Travis and Waul, 2003);

- Studies commissioned by governmental agencies (e.g., U.S. Department of Health and Human Services, U.S. Department of Labor, the U.S. Department of Justice, etc.)

- Reports by leading organizations committed to the issue of reentry, child well-being, or crime reduction (e.g., Public/Private Ventures, the Urban Institute, Family Justice, National Crime Prevention Council, Annie E. Casey Foundation, the Family Corrections Network, etc.)

- Well-established “best practices” and “evidence-based programs” directories and compendia (e.g., SAMHSA’s National Registry of Evidence-based Programs and Practices, OJJDP’s Model Programs Guide, the Children Bureau’s Child Information Gateway, etc.)

Unfortunately, rigorous evaluations of what works in the arenas of prisoner reentry and working with families affected by incarceration are notoriously scarce. One meta-
analysis of the reentry field found that for the entire 25 year period from 1975-2000, when “hundreds of work release programs, halfway houses, job training education programs, prerelease classes, and so forth, were implemented in the U.S., the literature contains only nine credible evaluations” (Petersilia, 2004). Indeed, as far as the authors of this report could determine, no “evidence-based” program currently provides truly comprehensive, long-term supportive services to entire families affected by incarceration.

However, there are several prisoner reentry programs that have successfully incorporated some elements of family support into their approach (e.g., Family Justice’s La Bodega de Familia program and the Osborne Association’s FamilyWorks program). There are also a number of positive youth development programs and child welfare approaches (such as one-on-one mentoring for high-risk youth, and family group conferencing and wraparound services for families in crisis) that appear to hold some promise for prisoners and their families. Finally, several programs have demonstrated significant success in partnering with the faith-based community to provide support to prisoners and their families. Each of these programs and approaches could serve as a partial model for organizations seeking to implement family-centered reentry programs.

In addition, the existing body of research strongly supports several basic practices that could be used to guide the development and implementation of a comprehensive, long-term support program for families affected by incarceration. For example, there is significant evaluation research to support the use of cognitive behavioral therapy to address families’ social and emotional dysfunction, and there is a strong expert consensus for involving the families of prisoners in pre-release planning.

To incorporate the broad and diverse range of research that speaks to families affected by incarceration, the remainder of this literature review is organized into three sections:

- A brief review of the service needs of families affected by incarceration
- A review of the most widely agreed upon research-based “practices” related to families affected by incarceration
- An inventory of specific evidence-based programs, service models, and curricula that have been used to provide supportive services to incarcerated parents, their children, and their children’s caregivers

This organizational structure is intended to offer an accessible, practice-focused overview of both specific programming options and broad practices and principles that are relevant to supporting families affected by incarceration. An extensive bibliography and resource list are included at the end of this report.
Service needs of families affected by incarceration

There is significant evidence that the consequences of incarceration are felt upon release not only by ex-offenders, but also by their children, families, friends, and communities. Whether or not ex-offenders are able to obtain employment, repair relationships, and successfully reorient themselves to the communities they left is tied not only to the attitudes, skills, and activities of the ex-offender, but also to the responses of the families and communities of which they are a part. This circle of individuals has a stake in the success of reentry that is on par with the investment that offenders, themselves, have in meeting benchmarks of progress and avoiding criminal activity. When designing a family-focused approach to reentry support, there are several areas of need that emerging programs should consider.

Common needs of incarcerated parents

Goldsmith and Eimicke (March, 2008) point to the many challenges ex-offenders face upon release. It is not unusual for them to require “employment, training, mentors and networks of supporters who can facilitate their reentry into civil society.” Balter Rossman (2003) also identifies the importance of meeting more basic needs (food, shelter, and clothing) of prisoners upon release. Surprisingly, most ex-offenders leave prison with no plan in place to access services related to these vital resources, and too many are without accessible informal supports which might provide necessary assistance. Not having access to housing and employment upon release can precipitate a return to risky relationships and activities. Jeremy Travis, as quoted in Goldsmith and Eimicke (2008), identifies the following challenges of reintegration for ex-offenders:

- Shortage of public housing
- Child-support payments
- Gang activity
- Social characteristics of neighborhoods
- Restrictions on where ex-offenders can work and limited job prospects
- No savings and no immediate entitlement to unemployment benefits
The challenges and service needs of many prisoners are also influenced by their gender. Even today, most research on prisoner reentry and the impact of incarceration on children has relied on male inmate data. This is extremely problematic since most strategies that are effective for preparing male inmates for reentry have been shown to be less effective for women. For example, studies of substance abuse treatment programs for incarcerated women demonstrated that confrontational tactics demanding “accountability,” while effective for men, often caused women to withdraw. Women also did better if group leaders were not male. Similarly, therapeutic groups consisting of both men and women decreased female participants’ willingness to participate, particularly important for women who have been victims of abuse by men (National Institute of Justice, July 2005).

In addition, female inmates often face very different psychological and physical challenges than male prisoners. Prior to incarceration, female prisoners are more likely than male prisoners to have been the primary caretakers of their children, and may find separation from them extremely traumatic. They are also more likely to have histories of sexual abuse, domestic violence, posttraumatic stress disorder and other mental illnesses than male offenders (Travis and Waul, 2003). The need for more gender-responsive programming and services for female offenders is one of the biggest challenges currently confronting the reentry field.

**Common needs of children of prisoners**

Travis and Waul (2003) cite a body of literature related to children’s well-being that is sorely deficient in regards to studies of the impact of imprisonment on children. Few, if any, longitudinal studies have been done to determine long-term impact on these children, and most existing studies have relied on self-reports of well-being by caregivers. Additionally, determining the relationship between having a parent who is incarcerated and negative outcomes can be difficult, due to the overlapping nature of other risk factors, namely social isolation, poverty, and unstable living situations.

In many cases, prisoners have not been their children’s primary caregivers prior to their arrest; as a result, their incarceration does not always cause significant household disruption. However, incarceration does often have, at the very least, financial implications for children of prisoners and their caregivers. If children are split up between more than one household (because relatives do not have the capacity to care for all siblings together), the added trauma of being separated can exacerbate the already distressing experience of losing a parent to incarceration (Travis and Waul, 2003)
Johnston (1995, as cited in Bilchik, 2007) refers to a “conspiracy of silence” in which caregivers try to protect children of prisoners by avoiding or refusing to participate in conversations about the parent’s incarceration. Children are often offered unsatisfying or deceptive explanations about their parent’s absence. This leads to resistance related to discussing parent’s imprisonment, and children who are “undermined in their ability to cope and left more anxious and fearful” (Johnston, 1995 as cited in Bilchik, 2007).

Children with incarcerated parents are also likely to have experienced “forced silence” about their family situation. This stifling of communication and repression of the realities and struggles that a family faces can lead to strained social relationships throughout a child’s life. Offering families, and particularly children, a supportive environment in which to talk openly about their family members’ incarceration can help counteract some of the “silencing” that children of incarcerated parents experience (Bilchik, 2007).

Not surprisingly, research shows that children’s school performance suffers when a parent is incarcerated. The family instability that is associated with a parent’s incarceration can make it difficult for children to establish positive and consistent relationships with learning environments. This, combined with a forced withdrawal resulting from the silencing of children, discussed above, often leads to difficulty attaching to supports and locating a child’s own internal strengths. Thus, attachment to the stable and potentially supportive environment of school is undermined, and children are not able to make full use of the services and social support available to them in this context (Bouchet, 2008).

Children of incarcerated parents are also much more likely to experience poverty, instability and reduced access to sources of support (Travis et al., 2001 as cited in Bilchik, 2007). They may experience social exclusion consisting of “pre-existing deprivation, loss of material and social capital following imprisonment, stigma, and diminished future prospects.” For these children, rates of specific “risky” and negative behaviors are much higher. They are more likely to exhibit externalized behaviors including anger, aggression, and hostility to caregivers and siblings, to drop out of high school and to engage in delinquent behavior such as lying, cheating, and stealing (Bilchik, 2007, p. 7). This can make it difficult for them to sustain meaningful one-to-one relationships with appropriate role models and mentors. By utilizing a family model, and connecting the family to multiple sources of support, children have access to a greater number of people within a context of family support. Additionally, strong family ties and a feeling of familial “connectedness” may reduce children’s likelihood of engaging in troubling behaviors (Bilchik, 2007).
For most children, the incarcerated parent is their father. However, 8-10 percent of children with an incarcerated parent have lost their mother to the corrections system. These children are especially vulnerable and exhibit unique characteristics. Mothers in prison are more likely than fathers to enter incarceration with an identified mental illness. They are also more likely to be drug users, live in poverty, and to be victims of physical or sexual abuse. Children whose mothers are in prison also experience a greater degree of household disruption due to incarceration. When a father goes to prison, children are likely to remain in the custody and home of their mother; when a mother is incarcerated, children are much more likely to be transferred to the care of a non-parental caregiver, most often a grandparent. In fact, less than 10 percent of children of incarcerated mothers are in foster care (the number is even lower for children of incarcerated fathers). Programs serving children of incarcerated mothers should also consider the age at incarceration, which is a determinant of the social and emotional implications of the parental incarceration (for a detailed discussion of the impact of incarceration based on child’s age, see Bilchik, 2007). Further, children with a mother in prison, as opposed to those with an incarcerated father, are more likely to have been present at the time of their mother’s arrest – a traumatizing event for a child to experience (Bilchik, 2007).

**Common needs of caregivers**

Carol Shapiro and Meryl Schwartz draw from the work of Jorgensen (1986) to explain the implications of incarceration for the family as a whole – particularly for caregivers:

No matter how long the absence, coming home is not so simple. Families are deeply affected when a member goes to prison. A mother loses a son. A spouse loses a partner – possibly the breadwinner – and a helper with the children. A child loses a parent. While the member is away, the family has reorganized itself. Different members have assumed different roles. When mothers are incarcerated, relatives frequently take over parenting. The re-introduction of an absent member changes these relationships, more so if the member has been gone a long time. This family must figure out how to live together again (Jorgensen, 1986: 49).

Mullins and Toner (2008) cite the need for “relationship repair” for many relationships that span prison and family, not only to address negative histories and actions that preceded incarceration, but also to address the implications of incarceration and reentry on family members, particularly caregivers. The stresses experienced by the ex-offender are often indirectly experienced by the caregiver, as well. The caregiver may experience increased financial and social pressure, resentment of the offender, and shame related to the implications of incarceration (Bilchik, 2007).
Considering caregivers when designing supports for families affected by incarceration can be especially difficult, given the often-changing nature of this role. Children of incarcerated parents may be under the care of more than one adult in more than one household during incarceration, and the identification of primary caregiving responsibilities may not be clear. This is likely to become even more complicated upon a parent’s release, when expectations are high and opportunities are scarce. Further, caregiving responsibilities often change upon a prisoner’s release, when guardianship may transfer from a grandparent, aunt or uncle, or other family member or friend to the newly released parent. More often, however, informal caregiving responsibilities become shared, rather than transferred altogether, upon a prisoner’s release. Helping families clarify, identify, and plan for caregiving roles and responsibilities can help alleviate some of the stress of reentry for families (Shapiro and Schwartz, 2001).
Key research-supported practices

In recent years, funders and practitioners in the fields of corrections and human services have placed a strong emphasis on replicating proven, “evidence-based” program models and tools. As part of its literature review, Wilder Research did search for, and identify, a number of evidence-based programs that may serve as partial models for Volunteers of America’s proposed project. These programs are described in some detail in the next section of this report (see “Promising research-based programs” on p. 21). However, none of the programs we identified is currently providing the precise array of services that Volunteers of America proposes to offer.

In addition there are some important potential drawbacks to replicating “evidence-based” programs and tools that should be considered by anyone designing a new program model. Constraining new programming to only those specific activities that are defined as “evidence-based” can reduce opportunities for innovation. It is also not always effective, and can even be detrimental to the populations being served. The appropriateness of a pre-existing model is particularly questionable when new programming seeks to redefine the setting or population in which the model is to be utilized.

One recent example of the problems that can occur when agencies seek to replicate multiple evidence-based interventions designed for different contexts can be found in the experience of Project Greenlight. A much heralded project designed by reentry experts at the Vera Institute of Justice, Project Greenlight sought to implement a number of different evidence-based cognitive behavioral therapy programs, employment programs, life skills programs, and release planning strategies with 735 New York State prisoners. Despite the “proven nature” of the interventions implemented, a 2006 National Institute of Justice evaluation found that participants in Project Greenlight were significantly more likely to recidivate than the members of two comparison groups. The Project Greenlight designers and evaluators generally attribute these negative results to a failure to adequately match the interventions used to the specific needs and context of the New York state prison population (Ritter, 2006).

As a result of problems like those encountered in Project Greenlight, an increasing number of reentry experts are advocating a move away from relying heavily on ready-made, evidence-based programs. Instead, they suggest designing and implementing programs based on research-based principles and practices which have been shown to be effective across a wide range of specific interventions. This approach has been widely accepted in Canada for over a decade, and is achieving growing currency here in America as more and more organizations encounter the limitations of replicating others’ models (Petersilia, 2004).
For this reason, the following section of this review offers a brief overview of some of the basic programmatic practices that appear to be widely supported by the available research on families affected by incarceration. All of the practices described here have been implemented by at least some of the leading research-based programs listed in the next section of this report, and they all have the endorsement of leading researchers and organizations in the reentry field. By incorporating these practices into a general framework, organizations engaged in multi-site reentry support services can provide clear, cohesive program elements without limiting local programs’ abilities to respond to different needs across multiple service contexts. For details regarding specific programs, see the next section, “Promising research-based programs serving the needs of families affected by incarceration.”

**Start by mapping the family system and its potential strengths**

When designing a family-focused reentry support strategy, programs are likely to define their target population as prisoners, their children, and their children’s caregivers. This definition of “family,” however, may not fully capture the complexity of many prisoners’ family relationships. Travis (2003) points to a study of incarcerated fathers (Hairston, 1995, 1998) which found that half had fathered children with more than one woman. Incarcerated mothers, on the other hand, are likely to have been removed from the role of primary caregiver prior to entering prison. According to the U.S. Department of Justice, less than half of parents in state prison reported living with their children before admission. The dispersement of a prisoner’s children adds a layer of complexity when attempting to address reintegration at the level of the family, rather than the level of the prisoner. This fragmentation leads to familial relationships that are often more complicated and fragile than those found in more traditional families including two parents engaged in mutual care giving within a single household (Travis and Waul, 2003, p. 13).

In addition, many prisoners who are estranged from their children and their children’s caregivers may still have extended kinship networks or sources of community support that can play a critical role in the success or failure of their reentry process. To address such complex situations, the Annie E. Casey Foundation advocates addressing “as many different types of family structures as possible” in planning programs for families affected by incarceration” (Bouchet, 2008, p. 6).

The organization *Family Justice*, creators of the La Bodega de la Familia Model, have developed a number of tools and instruments specifically for helping human service professionals map out prisoners’ families. For example, they have developed and tested the *Relational Inquiry Tool*, a simple eight-item questionnaire designed to facilitate a strengths-based conversation between an offender and supervision officer and identify the
unique context of release for each individual. This tool has been piloted at five sites with 99 inmates and evaluated through focus groups and pre- and post-tests. The evaluators found evidence of the following outcomes:

- Openness between correctional staff and inmates increased by using the tool.
- Using the tool gave correctional staff an increased understanding of the inmate.
- Both correctional staff and inmates believe the tool will be beneficial in reentry planning (diZerega and Shapiro, December 2007).

Family Justice also recommends using genograms (family trees) and ecomaps (graphic representations of a family’s system of supports and resources) to fully understand the prisoner’s family and community context. This approach is intended, in part, as an antidote to traditional reentry planning assessment processes which have focused almost exclusively on offender’s needs and deficits. “Instead of focusing only on deficits, asking about positive social connections and personal strengths and resiliencies can provide case managers with a different entry point to talk about behavior change” (diZerega and Shapiro, December, 2007, p. 2). A similar emphasis on identifying and building upon family strengths has begun to characterize many successful programs in the child welfare system. For example, the popular **Strengthening Families** model developed by the Center for the Study of Social Policy tries to build on family strengths and other sources of community support to nurture five **protective factors** that have been shown to help prevent child abuse and neglect.

While it is important to try to build on family strengths, it is also important to recognize that family reunification is not always possible or advisable. For some ex-offenders, family ties may act as a conduit to risky behavior such as violence, drug use and criminal activity, rather than an insulator from these negative influences. Conversely, for some families, relationships with offenders that are steeped in histories of victimization or disappointment can mean that families will not be ready or willing to work at repairing a relationship or providing support to an offender when she or he is released (Travis, 2003). In these cases, it is important to identify other sources of social support, whether tapping into existing relationships or helping the ex-offender establish new ones.
Take steps to ensure that the immediate needs of children and caregivers are being addressed

While there is a growing consensus that reentry programs should focus on and nurture family strengths, there is also an urgent and persistent need for programs that meet the basic needs of newly incarcerated prisoners and their families. The process of incarceration itself can produce numerous economic and legal challenges for the children and family members left behind. In many cases the family may experience a sudden loss of income (either in the form of lost wages or lost child support payments). In some cases, caregivers may also be forced to quit their own jobs in order to care for children, and they may be required to go through lengthy legal proceedings and to overcome numerous bureaucratic hurdles before they receive appropriate family benefits and privileges.

Despite the best efforts of law enforcement and child welfare officials, it is also not uncommon for children to be left without proper guardians or caregivers following a parent’s arrest. The literature on reentry is rife with stories of children who have been left to their own devices for days, and even weeks, following the arrest of their mother or father. Even when children of prisoners are quickly provided with a responsible caregiver, they may still experience severe trauma after witnessing the arrest of their parent, requiring counseling and support services to help them overcome the experience (Bernstein, 2005).

A few programs (e.g., Colorado’s Work and Family Center) place a strong emphasis on addressing family legal and economic issues immediately following incarceration. A handful of others, such as GASP and the Annie E. Casey Foundation’s Kinship Navigator program, try to help caregivers and children negotiate the many challenges of their new situation. However, this is still an area that most reentry programs almost completely neglect – wrongly assuming that other sectors of the human service system will provide any immediate support services that are necessary following a prisoner’s arrest.

Use the period of incarceration as an opportunity to strengthen family relationships

The importance of family involvement and support while an individual is in prison can help positively steer the offenders’ decisions about how they spend their time in prison. The maintenance of family ties during incarceration can also help mitigate the negative impact that imprisonment has on an inmates’ sense of purpose and hope for the future (Travis and Waul, 2003, diZerega and Shapiro, December 2007, and The Urban Institute).
For children with incarcerated parents, there is strong evidence that maintaining ties to their parent is extremely important to helping the child learn how to deal with the separation in a healthy way. However, families face a number of obstacles to maintaining contact with their incarcerated loved one. Support programs may subsidize the cost of phone calls between home and prison; assist with transportation to and from correctional facilities to enable children, partners and other supportive family members one-on-one visits; help families advocate for visitation conditions that are respectful and accessible; and provide counseling to families before and after visits to help them work through relationship struggles with the incarcerated family member and the traumatic effects of separation. For children of prisoners, identifying obstacles to children’s interaction with an incarcerated parent (such as a caregiver who believes the child is better served by severing ties during incarceration) and offering solutions (such as escorting the child to visits if the caregiver is unwilling to do so) can be effectively integrated into a family support model.

Incarceration also provides prisoners and their families with a unique opportunity to improve their general relationship skills and social competencies. As the program profiles in the previous section suggest, there is significant evidence that research-based parenting programs can have a positive impact on incarcerated prisoners’ parenting knowledge and skills. There is also extremely strong evidence to support the use of cognitive behavioral treatment programs to change prisoners’ negative behaviors and improve family functioning. In the words of one researcher, “The importance of using cognitive-behavioral programs cannot be overstated.” (Listwan et al., 2006) Numerous studies have demonstrated that cognitive behavioral treatments can reduce prisoners’ recidivism rates, reduce illegal substance use, and improve individual problem solving skills and social competencies.

**Engage family members and community supports in the release planning process**

Throughout the literature on reentry there is a consistently strong insistence that planning for reentry begins at the very start of an offender’s incarceration. However, a recent survey of release planning protocols across the country conducted by the Urban Institute found that most correctional agencies do not begin planning for reentry until shortly before the prisoner’s release, and they seldom involve family members.

By engaging families of prisoners in discussing and planning for reentry very early on in the sentence, offenders may be better positioned to access whatever services are available, and to identify realistic alternatives in the absence of desired training. Further, developing a family-focused transition plan can coordinate communication and understanding among
family members regarding what to expect upon reentry. Roles can be clarified and planning, based on a family’s unique needs and assets, can begin early, allowing for the identification of additional needed services and resources prior to release (Mullins and Toner, 2008).

The **Family Justice** model of family-focused supervision and case-management provides one possible model for incorporating families into the release planning process. However, it is important to note that the Family Justice model is designed primarily to support and guide the ex-offender. As a result, it may not always fully capture or address the needs of caregivers, children, and other family members. An alternative model for engaging the family in more mutually beneficial pre-release planning may be found in the realm of child welfare, where **family group conferencing (FGC)** has become a popular tool for helping families to create reunification plans.

In FGC, a trained facilitator guides the family in crisis through a highly structured planning process, which includes all family members who are willing to participate. The family plan they develop together specifies concrete goals (for both individual family members and the family unit as a whole), as well as measurable milestones and techniques for monitoring progress. It also outlines the specific resources and types of support that will be available to assist the family in implementing its plan.

While FGC has not been widely used to deal with issues relating to prisoner reentry in this country, it has been used in a variety of child welfare and juvenile justice contexts with positive outcomes. It has also been used to involve families in prisoner “re-integration” in Canada, Australia, and New Zealand (where FGM originated), and it is an approach that is receiving growing attention from many different types of human services practitioners in the U.S. See Olson (2009) and the [National Center on Family Group Decision Making](www.americanhumane.org) for additional information.

**Use mentoring to broaden the family’s circle of social support**

Research-based mentoring programs have been shown to have a positive impact on both the children of prisoners and prisoners themselves. Preliminary studies of mentoring programs for adult prisoners suggest that mentors or “lifecoaches” can play a valuable role in the offender reentry process – offering formerly incarcerated individuals critical emotional support and access to new resources, professional networks, and social capital (Baudry et al., 2009).

The research in support of mentoring children is even stronger. A large body of research indicates that mentoring slows the onset of risky behaviors among youth. Mentored youth also demonstrate better attitudes toward positive behaviors and activities, such as school,
college, and avoidance of substance use and aggressive behavior. Mentoring, while providing only modest benefits for youth in general, is associated with significant gains for “high risk” children. Thus, a mentoring approach for youth with parents in prison or parents reentering family life after a period of incarceration, holds particular promise (Bilchik, 2007). “The overarching need is for meaningful relationships with individuals committed to a lasting connection (Adalist-Estrin and Lee, 2004)” (Bilchik, 10).

In his report on promising approaches for mentoring children of incarcerated parents, Bilchik highlights the work of Johnston (2002) and Rhodes (2002) regarding the particular relevance of a mentoring model for the unique needs of this population:

> When successfully implemented, it is expected that mentoring programs for children of prisoners have the potential to improve children’s socio-emotional skills, increase their capacity for attachments, and produce stronger, healthier relationships between children and significant others, leading to better outcomes in social and academic competence (p.9).

However, it is extremely important that the mentoring relationships be strong and reliable. Mentoring relationships that last less than six months have been hypothesized to actually create more problems than benefits, especially among children who have experienced unreliable and unstable relationships with adults in the past – a particularly relevant issue for children of incarcerated parents. Any emergent program aiming to provide family-focused mentoring should plan for longer-term relationships by carefully screening both mentors and mentees, and should focus a good deal of effort on establishing a strong, compatible initial match. If possible, mentors and mentees should also begin their relationship prior to the incarcerated parent’s release. By establishing mentoring partnerships with the family during incarceration, the mentors will better understand the family’s needs during the process of reintegration and will have already begun aiding the family in planning for reentry and connecting to services (Bilchik, 2007).

**Upon release, be prepared to provide prisoners and families with comprehensive “wraparound” support services**

Following incarceration, families often face immense challenges stemming from poverty, stigmatization, and a lack of access to key resources. For offenders in particular, research shows that accessing housing, emotional support and employment are the most immediate needs upon release from prison. While families of offenders are frequently forthcoming with needed resources, the addition of a household member often puts significant strain on already inadequate supplies of money, emotional support and social ties. Over time, prisoners and family members may also struggle with complex substance abuse issues, healthcare issues, and family conflicts generated by the prisoner’s return.
For example, one key gap in services for the recently released is attachment to health care and mental health support. Prisoners leave incarceration with rates of mental illness, communicable diseases such as hepatitis C, tuberculosis and HIV/AIDS that are far higher than the general population (Travis and Waul, 2003, p. 9). Additionally, rates of substance abuse (and the corresponding need for intensive addiction treatment) are especially high among prisoners and, unfortunately, they are unlikely to be sufficiently treated during incarceration. The treatment of these illnesses is of vital importance not only for the wellbeing of the offender, but also for the success of the family as a whole.

To address these needs, a successful family support program should be prepared to provide ex-offenders with a truly comprehensive and well-coordinated continuum of support services. Corrections officials and other support service providers have traditionally struggled to create such a continuum because of funding silos, the rigid bureaucratic and legal requirements of many public agencies and competing organizational agendas. However, it is essential to develop a genuinely collaborative framework for service delivery if programs want to succeed in providing families with the support they need.

One potentially useful approach for coordinating multiple services and agencies may be found within the family court and mental health systems, where officials are increasingly using “a wraparound services approach” with high-needs juvenile offenders and their families. While one of the central features of the wraparound approach is individual case management, wraparound interventions should not be confused with traditional case management programs.

According to the Office of Juvenile Justice and Delinquency Prevention’s Model Programs Guide, a true wraparound services approach must include the following components for juvenile offenders and their families:

- **A collaborative, community-based interagency team** that is responsible for designing, implementing, and overseeing the wraparound initiative in a given jurisdiction. This team usually consists of representatives from the juvenile justice system, the public education system, and local mental health and social service agencies. In most cases, one specific agency is designated the lead agency in coordinating the wraparound effort.

- A formal interagency agreement that records the proposed design of the wraparound initiative and spells out exactly how the wraparound effort will work. At a minimum, this agreement should specify who the target population for the initiative is; how they will be enrolled in the program; how services will be delivered and paid for; what roles different agencies and individuals will play; and what resources will be committed
by various groups. The comprehensive integrated service delivery system that emerges from these agreements is often referred to as “a system of care.”

- **Care coordinators** who are responsible for helping participants create a customized treatment program and for guiding youth and their families through the system of care. In most wraparound programs, these care coordinators are employees of the designated lead agency, which may be a public program or a private nonprofit agency.

- **Child and family teams** consisting of family members, paid service providers, and community members (such as teachers and mentors), who know the youth under treatment and are familiar with his or her changing needs. Assembled and led by the care coordinator, these teams work together to ensure that the individual child’s needs are being met across all domains – in the home, the educational sphere, and the broader community at large.

- **A unified plan of care** developed and updated collectively by all members of the child and family team. This plan of care identifies the child’s specific strengths and weaknesses in different areas, targets specific goals for them, and outlines the steps necessary to achieve those goals. It also spells out the role each team member (including the child and family) will have in carrying out the plan. Ideally, the plan is updated constantly to reflect the child’s changing needs and progress.

- **Systematic, outcomes-based services.** Almost all wraparound programs require clearly defined performance measures, which are used to track the progress of the wraparound initiative and guide its evolution over time.

Recent literature on the wraparound approach also emphasizes the importance of recruiting committed and persistent staff and creating programs that are culturally competent and strengths-based. Juvenile justice and mental health programs involving these basic elements have been endorsed by numerous agencies and organizations, including the Office of Juvenile Justice and Delinquency Prevention, the Substance Abuse and Mental Health Services Administration, the National Institutes of Health, and the Child Welfare League of America. As a result, wraparound services programs have become increasingly popular since the inception of the wraparound model in the 1980s. Some recent studies estimate that as many as 200,000 youth and their families may now be enrolled in comprehensive wraparound efforts.

While the wraparound approach has not been well researched with adult offenders, it is currently being employed (in a variety of forms) by a number of drug courts, reentry courts, and family-oriented “problem-solving” courts. The influence of the wraparound concept can also clearly be seen in some of the evidence-based programs cited here,
including the FamilyWorks program, the Family Justice Model, and the work of the Rhode Island Family Life Center.

**Draw from the localized resources of faith-based and community organizations**

Faith-based and community organizations can serve as valuable partners in reentry initiatives. But it is important to recognize their strengths and limitations. It is not realistic to expect congregations and congregational volunteers to play the same roles that have traditionally been played by trained human services professionals. Instead, most of the evidence-based reentry interventions that have successfully utilized faith partners have used them in more informal capacities (such as mentors or life coaches).

In some cases, involving faith and community organizations can also offer valuable opportunities to shape and localize programming by tapping into the unique assets and opportunities of each community (VanDeCarr, March 2007). One example of this can be found in the success of Operation New Hope, a small community development corporation whose work inspired the national Ready4Work Initiative (see Public/Private Ventures January 2007 report). Operation New Hope began by identifying a need for rehabilitating dilapidated houses in local Jacksonville, Florida neighborhoods. The program hired newly released offenders, offering them a livable wage and the chance to develop marketable skills while they performed a valuable community service. Participants were also connected to social and spiritual support through the help of a team of local ministers (Goldsmith and Eimicke, March 2008 and Van De Carr, March 2007).

As this example demonstrates, faith and community partnerships for reentry work best when the role of the faith or community partner is closely tied to their original mission and strengths. By drawing on the local skills and expertise of such organizations, correctional programs and other human service agencies can capitalize on the passion and commitment of their staff and volunteers, while successfully augmenting the range of services they offer to prisoners and their families.
Promising research-based programs serving the needs of families affected by incarceration

The work of supporting prisoners and their families is still in its early stages; as a result, the research about the long-term effects of various approaches is quite limited. For this reason, few of the programs reviewed here have been subjected to rigorous, experimental study (i.e., few of them have demonstrated their results in clinical trials against comparison or control groups). However, each has either demonstrated significant promise through participant reports of success or benefit, draws from the recommendations of scholarly research, or has measured some form of positive outcomes for participants. In general, we have chosen approaches and examples that have been legitimized through, a) extensive application or replication, b) reports of efficacy by prominent scholars and practitioners, and c) a strong presence throughout the body of literature related to prisoner reentry and family support.

Prisoner reentry programs that incorporate family support

Center for Employment Opportunities (New York): The Center for Employment Opportunities (CEO) focuses on rapid job attachment and offers training, support, waged labor, and intensive, daily performance evaluations that are focused on developing the “soft” skills necessary for successful employment. “CEO also offers support programs to help participants meet the economic demands posed by an entry-level job.” While the Center serves both men and women, it has placed a special emphasis on fatherhood programs. It runs the complimentary Responsible Fatherhood and Rapid Rewards Programs, which help ex-offenders restructure child support payments and earn family-friendly rewards for reaching employment benchmarks. Events are held to help foster the father-child bond and develop participants’ parenting skills. The organization’s website can be found at: http://www.ceoworks.org/

FamilyWorks (New York): Created in 1987, FamilyWorks is one of the nation’s oldest and most comprehensive family-focused reentry programs. The program offers parenting courses and one-on-one counseling to imprisoned fathers at three New York State prisons. It also operates children’s centers in two prisons, where incarcerated parents can meet with their children in a safe and cheerful environment. In addition, Family Works provides family-centered discharge planning services, including family mediation. After release, prisoners and their families receive ongoing case management at the Osborne Association’s community-based family resource center. For more information see http://www.osborneny.org/FamilyWorks.htm
**John Inmann Work and Family Center** (Colorado): The Work and Family Center (WFC) is a multi-agency collaboration designed to facilitate the successful reintegration of individuals released from Colorado prisons and to help prevent recidivism. It provides incarcerated men and women with employment assistance, advises on child support issues and, at prisoners’ request, supports the process of family reintegration. It was the first corrections program in the United States to include child-support assistance as part of its regular services, and it now offers three types of family reintegration services to its participants: professional mediation services, consultation with a family law attorney, and facilitation of supervised visits. The WFC also runs a job resource room and a pre-employment workshop, and offers referrals to numerous service providers and agencies as needed. Participants assessed as high-risk also receive intensive case management. A 2001 evaluation conducted by Colorado’s Center for Policy Research found that participants in the WFC’s programs were significantly less likely to return to prison than comparable members of a control group. *For more information see http://reentrypolicy.org/program_examples/john_inmann_work_family_center_wfc*

**La Bodega/Family Justice Model** (Multiple sites): Originally developed in a small storefront on the Lower East Side of Manhattan (“La Bodega de la Familia”), the Family Justice model integrates the families of ex-offenders in post-release supervision efforts. The Family Justice Model emphasizes using “supportive inquiry” techniques to identify the ex-offender’s strengths, the strengths of his or her family, and other potential sources of support that may be available to help the ex-offender and his or her family through the reentry process. The strengths and supports identified are then used to develop and implement a family-centered case management plan. A year-long evaluation of the original La Bodega de La Familia program conducted by the Vera Institute of Justice found that the program, which served recovering drug addicts and their families, produced positive outcomes for all participants, including significant reductions in drug use, decreased recidivism rates, and improved access to (and need for) family support services. The La Bodega Model has now been developed into a set of formal tools and curricula by the non-profit organization, Family Justice, and the program is being implemented at a number of sites across the nation. For example, Family Justice and the American Probation and Parole Association are currently piloting a new curriculum for probation officers and community corrections professionals through the Oklahoma Family Justice Project. *For more information see http://www.familyjustice.org/*.

**Family Life Center** (Rhode Island): Founded in 2002, the Family Life Center provides family-focused, holistic reentry support to families affected by incarceration, starting six months prior to reentry. The center’s work includes three main components: employment assistance, a “one-stop service center” for ex-offenders and their families to utilize after release, and case management services to help monitor and support ex-offenders and their families throughout reintegration. The center serves both men and women, and works
with community organizations, faith groups, the Department of Corrections and local police. The program has received considerable attention and support from state and local authorities and has been cited as an example of family-focused reentry in several influential publications. However, the program is a relatively new one, and it has not yet been formally evaluated. More information can be found at: www.riflc.org

Programs that improve parenting skills and strengthen family relationships during the period of incarceration

Aid to Children of Imprisoned Mothers (Georgia): Atlanta Georgia’s Aid to Children of Imprisoned Mothers has been providing support to incarcerated mothers, their children, and the children’s caregivers since 1987. The program offers an after school program for children ages 6-12, a teen leadership program, and a week-long summer camp. It also provides transportation for children and families to the local women’s prison, produces parenting and self-help manuals for the incarcerated mothers, and runs a support group and other supportive services for caregivers. A 2001 evaluation by the Southern Research Institute found that children involved in the program experienced increased contact with their mothers, increased self-esteem, and increased school-bonding.

The Center for Children of Incarcerated Parents (CCIP) Prison Parent Education Project (multiple sites): CCIP is a nonprofit organization devoted to preventing repeat incarceration among families. It provides four types of services to families affected by incarceration: parent-family education services, family reunification services, therapeutic services, and general information. The center is perhaps best known for its Prison Parent Education Project which has produced 16 different parenting curricula for incarcerated mothers, fathers, and caregivers since 1991. While most of CCIP’s curricula have not been rigorously evaluated using a control group, the Center regularly involves leading research scholars and academicians in the design of its programs, and its curricula are widely used in the reentry field. CCIP also operates a comprehensive clearinghouse of information for families affected by incarceration. The center’s website, while somewhat out-of-date, does provide useful information about their approach, products, and services. It is located at: http://www.e-ccip.org/

Girl Scouts Beyond Bars (multiple sites): Girl Scouts Beyond Bars (GSBB) was created over 14 years ago through a partnership between the Girl Scout Council of Central Maryland and the National Institute of Justice. There are now almost 40 GSBB programs across the country serving approximately 800 girls and 600 mothers annually. Though each program varies in focus and content, they all work to achieve increased parent-child bond, self-awareness and leadership development. To accomplish these goals, the program is structured around three primary components: Mother/daughter troop meetings...
held at the mother’s correctional facility; girl-only troop meetings held in the community; and onsite enrichment activities for incarcerated mothers. Some GSBB programs also offer referrals for other types of family support services. A 2008 national evaluation of the program at 16 sites found generally positive outcomes for both mothers and daughters. However, the level of formal parenting education offered to participating mothers seems to vary significantly from site to site, and most GSBB programs do not appear to incorporate any supportive services or activities for caregivers. See the full evaluation report at http://www.girlscouts.org/research/pdf/gsbb_report.pdf

Living Interactive Family Education (Missouri): The 4-H Living Interactive Family Education (LIFE) program is an enhanced visitation program at the Potosi Correctional Center (PCC), a maximum security prison in Mineral Point, Missouri. The LIFE program was developed jointly by the incarcerated fathers and local 4-H staff to address the needs of children of incarcerated parents. Like the Girl Scouts Beyond Bars program, LIFE consists of two main components: monthly parent-child meetings held at the correctional facility and parenting training modules. The parent-child meetings combine traditional 4-H activities (e.g., arts and crafts projects) with structured lessons on topics such as conflict resolution, substance abuse resistance, teamwork, and character development. All fathers who participate in the LIFE program also attend monthly parenting skills classes. The parenting training component seeks to help fathers learn to be a positive influence in their children's lives. Classes focus on areas such as communication, anger management, teamwork, and positive discipline. The overall objective of the LIFE program is to promote a strong, healthy, and nurturing family environment for children of incarcerated parents, while helping incarcerated parents become positive role models and mentors. Prisoners and children participating in the program consistently report improved self-esteem, improved social competencies, and (in the case of the fathers) improved knowledge of parenting. For more information on the LIFE program, see their website at: http://extension.missouri.edu/fcrp/lifeevaluation/

National Fatherhood Initiative (multiple sites): The National Fatherhood Initiative provides a variety of parenting program “kits” including “Inside Out Dad,” a program that seeks to develop fatherhood skills among incarcerated men while they are confined and after release. The model includes 12 one-hour sessions and 24 additional optional sessions, which enables this model to be used in a flexible format, for longer- and shorter- durations. Inside Out Dad programs in Maryland and Ohio have been evaluated, and participants have been found to demonstrate significant positive change in their knowledge about fathering and engagement with their children. For more information go to: www.fatherhood.org
Nurturing Parenting Programs (multiple sites): Originally developed in 1979 under the auspices of the National Institute of Mental Health, the Nurturing Parenting Programs (NPP) are a series of research-based, family-centered parenting programs specifically intended for use with families at risk of child abuse or neglect. The programs emphasize involving all family members in changing the family system and the importance of empathy, structure, and non-violent discipline in parenting. The 13 different NPP curricula that have been developed over the last 30 years have all been rigorously evaluated in a variety of settings (including group settings such as prisons), and with a variety of special populations (e.g., African-Americans, other minority groups, children of different ages, families affected by substance abuse), and they have consistently produced positive outcomes for both children and parents. The program’s founder, Dr. Stephen J. Bavolek is also the creator of the widely used Adult Adolescent Parenting Inventory or AAPI.

For additional information see: http://www.nurturingparenting.com/research_validation/index.php

Purdue University Parenting and Child Development Curricula (multiple sites): Purdue University’s parenting and child development program offers a number of research-based curricula for incarcerated parents, including an eight-session curriculum targeting potentially abusive parents (“Parenting Piece by Piece”) and the "It's My Child Too" curriculum, which helps young, noncustodial fathers learn how to participate in the healthy development of their children. All of the Purdue curricula are based on significant academic research in child development and most have demonstrated at least some positive impact on participants’ parenting knowledge in evaluation studies. They are currently used in at least 22 states. For more information, including a complete list of Purdue’s parenting curricula, see: http://www.extension.purdue.edu/cfs/topics/HD/Parenting.htm

Strengthening Families Program (multiple sites): This program, which serves elementary school children and their families, combines family systems and cognitive behavioral approaches to increase families’ skills related to conflict resolution, problem solving, communication, positive family interaction and support, responsibilities, discipline and avoiding substance abuse. The program consists of 14 sessions in which parents (including incarcerated mothers and fathers) and their children are engaged in group training and support. Following completion of the series, families receive “booster” therapy and monitoring at 6- and 12- months. This program has been rated as “exemplary” by the OJJDP’s model programs guide, and has been rigorously and frequently evaluated in a variety of settings. More information can be found at: http://www.dsgonline.com/mpg2.5/TitleV_MPG_Table_Ind_Rec.asp?id=429
Mentoring approaches for offenders and their children

Administration on Children and Families (ACF) Mentoring Children of Prisoners Grant Program (multiple sites): This nationwide grant was authorized by Congress and began awarding grants, administered by ACF’s Family and Youth Services Bureau (FYSB) in 2003. Grant recipients are required to provide services, both directly and in collaboration with other local agencies, to strengthen and support children of incarcerated parents and their families. This includes preserving families and connecting the children with their imprisoned parent when appropriate. Grant recipients are also required to adopt research-based “best practices” in youth mentoring, including requiring mentors to spend at least one hour per week with grantees, conducting extensive screening of potential mentors, providing structured orientation and training to program participants, and routinely monitoring mentor matches. In addition, programs are expected to incorporate elements of a positive youth development approach into their work. This approach emphasizes giving young people the chance to exercise leadership, build skills, and become involved in their communities. In FY 2007, FYSB awarded $45.6 million in funding to support 220 mentoring programs. A national evaluation of the grant program is still pending, but the program’s technical assistance center has assembled an extensive bibliography and resource library for program participants. See http://ncfy.acf.hhs.gov/mcp/ for more information.

Amachi Mentoring Program (multiple sites): A national program developed under the auspices of Public/Private Ventures, Amachi pairs traditional mentoring organizations (such as Big Brothers/Big Sisters) with members of religious congregations to provide mentors for children with incarcerated parents. The Amachi model invests heavily in the matching process, requires that mentors and mentees spend at least four hours together every month, and tries to maintain the mentor/mentee relationship for one year. Participants who remain in the program for the required amount of time generally report positive outcomes, and Amachi has been widely lauded for its ability to recruit large numbers of mentors from the faith-based community. However, some critics have questioned the program’s one-year timeframe (most mentoring research suggests that major impacts occur in longer-term relationships) and its decision to exclude family members from any meaningful involvement in the mentoring relationship. Once a parent/caregiver has given their permission for their child to participate in the program, they have no further role in the Amachi model. This aspect of Amachi may limit its value as a model for emergent family-centered programming, but the program still offers valuable insight about the logistics of establishing partnerships with the faith community and other public and private sector organizations. For more information visit: http://www.amachimentoring.org/. Many of Amachi’s basic techniques and tools have also been summarized in the manual People of Faith Mentoring Children of Promise,
Caregivers Choice Program (multiple sites): A new ACF-funded program being overseen by the National Mentoring Partnership (MENTOR), the Caregiver’s Choice is program is designed to provide families affected by incarceration with greater access to high quality, research-based mentoring services. Under the program, caregivers of children of incarcerated parents are given $1,000 vouchers which can be redeemed for a year’s worth of mentoring services at pre-approved mentoring programs. Participating programs are carefully screened by MENTOR and they must demonstrate that they utilize effective, research-based mentoring practices (such as those outlined in MENTOR’s influential handbook, *The Elements of Effective Practice*). The program is actively recruiting caregivers and incarcerated parents in several targeted locations including the metropolitan areas of Atlanta, Chicago, and Philadelphia; and the states of Arizona, Connecticut, Idaho, Massachusetts, North Carolina, and Washington, but caregivers and programs from other areas of the country are also welcome to apply. Detailed information about eligibility requirements is available at: http://www.mentoring.org/find_resources/caregiverschoice/

Circles of Support and Accountability (Canada): This model, utilized throughout Canada, connects male ex-offenders with “circles” of individuals upon release. These clusters of four to seven trained volunteers “commit themselves to support and hold accountable a person who has been detained to the end of sentence because of a sexual offence history who is returning to the community….Volunteers are professionally supported and work in conjunction with community agencies, treatment providers like psychologists, sometimes parole or probation officers, the police, and the courts.” For more information, go to: http://www.cosacanada.org/node/1

Family and Corrections Network (FCN) Mentoring Children of Prisoners Curricula (multiple sites): The Family and Corrections Network offers numerous research-based training materials on the topic of mentoring children of prisoners, including telephone-based training programs and training CDs. The organization’s most extensive offering is a two-day training of trainers (TOT) program originally developed by the Child Welfare League of America. The 10-session TOT curriculum offers a comprehensive overview of the latest research-based approaches to mentoring children affected by incarceration, including strategies for dealing with families in crisis and for reaching out to parents and caregivers. A detailed description of the curriculum is available online at http://www.fcnenetwork.org/training/MentoringIssues/CWLA-curriculum.pdf.
Ready4Work (multiple sites): This 11-site national demonstration project, co-sponsored by Public/Private Ventures and The Department of Labor, utilizes a “rapid attachment” model to connect male and female ex-offenders with employment within 90 days of release. Although the main focus of the program is securing employment for ex-offenders, Ready4Work also offers all participants the opportunity to have a mentor or “lifecoach,” to support them for the duration of the program. Faith-based organizations have been the lead agencies at seven of the sites, and many of the mentors were drawn from local congregations. A recent evaluation of the mentoring component of Ready4Work found that individuals who participated in mentoring relationships were more likely to remain in the reentry program, more likely to receive additional supportive services, and more likely to find and keep a job than their non-mentored counterparts. *The complete evaluation report can be found at: http://www.ppv.org/ppv/publications/assets/265_publication.pdf*

Research-based programs that support caregivers

Annie E. Casey Foundation’s Kinship Navigator Pilot Project (Washington State): The Kinship Navigator Program employs “Navigators” to assist kinship caregivers with understanding, navigating and accessing the system of out-of-home care supports and services for children. The program was originally piloted by the Casey Foundation in Washington State in 2004 where four full-time Navigators provided supportive services to families in the Yakima and Seattle regions. A 2005 evaluation of the pilot’s first 16 months suggests that the program is promising. In the period covered by that evaluation report, 637 kinship caregivers received either information or support from Navigators. Of those, 443 adults (305 in Yakima and 138 in Seattle) caring for 1,148 children (767 of whom were children of kin) received documented navigator services. An additional 194 caregivers received brief informational services over the telephone. Survey respondents and focus group participants unanimously endorsed the program as deserving continuation. Because of the initial success of the program, Casey Family Services has developed a replication manual for organizations interested in implementing their own navigator project. *The manual is available online at: http://www1.dshs.wa.gov/pdf/ea/kinship/KinshipNavigatorReplicationManual.pdf*

Grandparents as Second Parents (multisite): Grandparents as Second Parents (GASP) is a national network of support groups for grandparents and other relatives (i.e., aunts, uncles, siblings) who are raising children other than their own as a result of incarceration or other environmental factors (such as abuse, neglect, alcohol and drug abuse, abandonment, or death). Originally developed in 1998 under the auspices of California’s Legal Services for Prisoners with Children (LSPC), the GASP approach incorporates both adult and children’s groups that meet at the same time. The adult group serves both supportive and educational roles. The children’s group allows children ages birth to thirteen to interact
A 2000 Robert Wood Johnson Foundation report on the program’s accomplishment can be found at http://www.rwjf.org/reports/grr/024619s.htm. GASP is also the creator of The Grandparent Manual, a comprehensive resource guide for grandparents raising their grandchildren. The Manual can be accessed online at: http://www.prisonerswithchildren.org/pubs/gpmanual/about.htm

Research-based programs with a strong faith-based component

Annie E. Casey Foundation’s Healing Communities Model: The Healing Communities Model was co-developed by the Progressive National Baptist Convention and the Annie E. Casey Foundation in an effort to transmit some of the lessons learned from various Casey Foundation-funded projects involving the faith community. The model outlines a set of very practical and concrete steps that faith leaders and congregational volunteers can take to support ex-offenders and their families during the reentry process. (For example, the model lays out 27 different steps involved in “guiding and helping the person arrested, incarcerated, or coming home.”) The various elements of the Healing Communities model are explained in a user-friendly manual entitled “Balancing justice with mercy: An interfaith guide for creating healing communities.” The guide can be accessed online at: http://www.aecf.org/KnowledgeCenter/Publications.aspx?pubguid={46FD04B9-D028-44B8-9D64-31FC972DAF24}

Community Chaplaincy (Canada): This Canadian program connects ex-offenders with a clergy member to advocate for their needs upon release. “Community Chaplains” assist ex-offenders in finding housing and employment using pre-existing informal social networks. The Community Chaplains also provide emotional support and offer emergency assistance as needed. One regional project, the Swanswea Community Chaplaincy project, has also developed the Spider Assessment Tool to assess the efficacy of networked support for ex-offenders. For more information about Chaplaincy services through the Correctional Service of Canada: http://www.csc-scc.gc.ca/text/prgrm/chap/leadership_community-eng.shtml and at: http://www.swansea.gov.uk/index.cfm?articleid=24532

As stated previously, Public/Private Ventures’ Amachi mentoring program and the Ready4Work Initiative also have strong faith-based components. In these programs, faith leaders and their congregations serve as mentors and role models for the participants. Many prisoner reentry programs also include an explicitly religious or spiritual component (e.g., religious services provided through a prison ministry). The value of such religious or spiritual programming has not been systematically evaluated in any program reviewed for this report, however it is well established that regular participation in organized religion is a “protective factor” that can reduce the likelihood of many risk behaviors.
Conclusion

The Annie E. Casey Foundation identifies two key recommendations related to planning programming for families affected by incarceration: 1) it is important to directly involve “those affected by this issue, especially children, youth, parents, family members and caregivers, representing as many different types of family structures as possible, and 2) “a critical need exists for better collaboration and communication among organizations serving this population” (Bouchet, 2008, p. 6). The practices and models presented here reinforce the importance of focusing on partnerships and integration at the family and organizational levels.

While the literature reveals a large body of emerging interest and programming for families facing reentry, the resources available remain insufficient to meet families’ needs. A principle challenge is to avoid the trap of trying to serve the entire universe of individuals who are in need of support. Instead, as VanDeCarr (March, 2007) and Wilson Goode, Sr. and Smith (2005) explain, emergent programs should be diligent about assessing their capacity and defining their target population. Services should be focused, localized, adaptive, and accessible.

Above all, an approach to reducing recidivism and lessening the impact of incarceration for families should focus on the family and build on strengths. In order to effectively meet this standard, programs should work to develop strong models that incorporate a good many partners from a variety of settings. Together, families, corrections, faith-based and community organizations and their intermediaries can thoughtfully identify goals and strategies that are meaningful and effective.
Bibliography


Bobbitt, Mike and Marta Nelson (September, 2004). The front line: Building programs that recognize families’ role in reentry. *Issues in Brief.* New York: Vera Institute of Justice.


Retrieved March 24, 2009 from:  


Fortuin, Betty (April 2007).  Maine’s female offenders are reentering – and succeeding.  
http://www.aca.org/publications/ctarchives0.asp

Baltimore, MD: Annie E. Casey Foundation.

Ghazal Read, Jen’nan and Mustafa M. Dohadwala (October 2003).  From the inside out: Coming home from prison to the Islamic faith.  *Research and Action Brief (1).*  
Baltimore, MD: Annie E. Casey Foundation.


New York: Manhattan Institute.

http://www.aca.org/publications/ctarchives0.asp


Scott, Philippa (June 2003). The invisible sentence project. Bathurst, New South Wales, Australia: Central West Women’s Health Centre.


