



Look Up and Hope

Third annual report: Executive summary

Over the past three years, Volunteers of America (VOA), with support from the Annie E. Casey Foundation, has implemented a strategic initiative to improve the lives of families impacted by maternal incarceration. This multi-site initiative, called Look Up and Hope (LUH), takes a comprehensive approach to working with families in which the mother is involved with the criminal justice system.

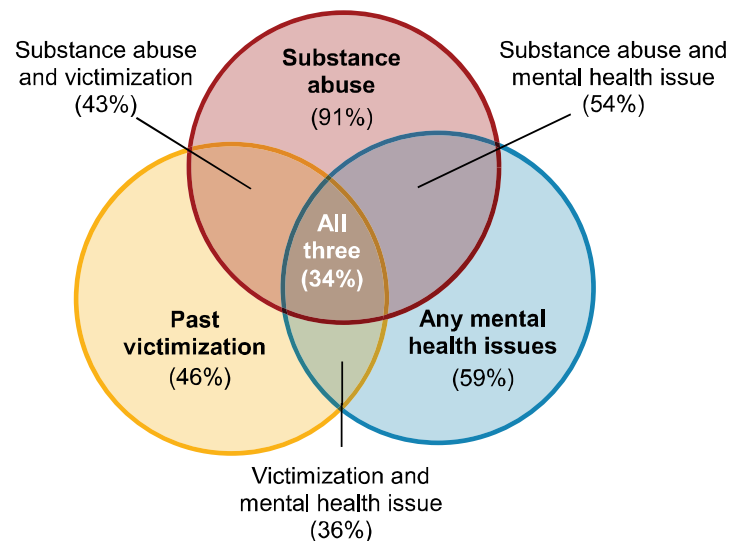
To evaluate the impact that LUH has on participating families, VOA contracted with Wilder Research, which has been providing research and evaluation support since the program began in 2009. Below is a summary of the third annual progress report, which provides information on the initiative's status from January to December 2012.

Who are Look Up and Hope families?

Incarcerated mothers

- To date, 131 incarcerated mothers have enrolled in the LUH initiative.
- 89% were under 40 years old when they enrolled, and 59% were women of color.
- Over half (53%) reported that, prior to incarceration, their household income was under \$25,000, including 39% with incomes less than \$15,000.
- 57% said they were employed prior to their most recent incarceration.
- 62% of mothers enrolled in LUH were serving time for drug-related crimes.
- The majority of mothers in the program (71%) had been incarcerated more than once.
- 34% reported a combination of past substance abuse issues, at least one mental health issue, and past trauma, such as domestic violence, sexual assault, or exploitation, a particularly high-risk profile.

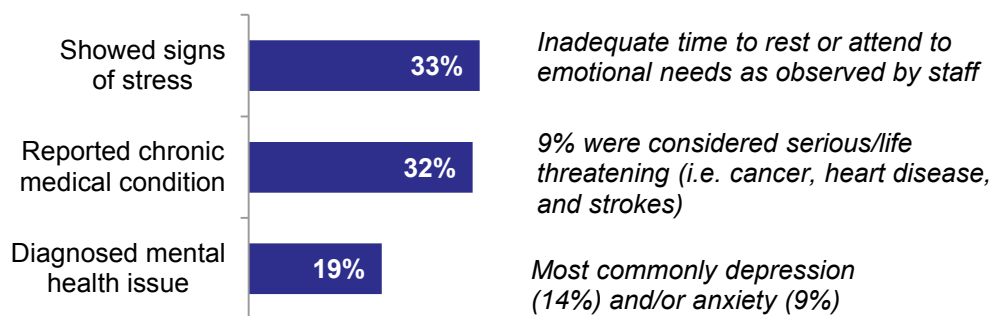
1. Substance abuse, trauma and mental health of mothers (N=131)



Caregivers

- 117 caregivers have enrolled in the LUH program since its beginning.
- Caregivers are mostly female (70%) and under 60 years old (86%).
- They are predominately White (47%) or Black (32%), with a slightly higher proportion of Latino participants compared to enrolled mothers (9% versus 4%).
- 19% did not complete high school, 39% earned their high school diploma or equivalency, and 27% completed some education beyond high school.
- 45% are no longer part of the labor force, and a large proportion of these report that they are not currently looking for work.
- 80% have received at least one public benefit; typically state or federally-funded medical insurance (59%) and food stamps (53%).
- 33% of caregivers showed signs of stress¹ (33%) or reported a chronic medical condition (32%) at intake, and 19% were diagnosed with a mental health issue (Figure 2).

2. Physical and mental health of caregivers (N=117)

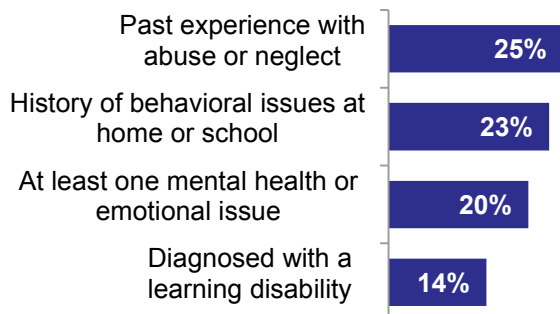


Children

- Since September 2009, 208 children have participated in LUH.
- Just over half (51%) are female, and most are under 9 years old (68%).
- According to their caregivers, 25% were subjected to abuse or neglect before they enrolled in the program, and 20% had been diagnosed with a mental or emotional health disorder (Figure 3), most commonly anxiety, depression, or autism.

¹ “Signs of stress” refers to a lack of emotional support, lack of time off or respite, poor health or well-being (as observed by program staff), or some combination of the three.

3. Selected indicators of emotional well-being of children at intake (N=208)



Family arrangements

- 61% of the children in LUH had weekly contact with their incarcerated mother at the time of intake and 18% had monthly contact. 12% of children had contact with their mother every two to six months, and 7% saw their mother once a year or less.
- When they began the program, 78% were in the care of a family member, most frequently their grandmother (39%), biological father or stepfather (22%), or another family member, such as an aunt, uncle, or an adult sibling (17%) (Figure 4).

4. Type of child-caregiver relationship (N=208)

	Percentage of children
Relative/kinship caregiver (besides mother)	78%
Grandmother	39%
Child's biological or stepfather	22%
Other family member	17%
Non-relative caregiver	5%
Child welfare system (adopted or in foster system)	6%
Juvenile Detention Center	1%
(Released) Incarcerated mother	9%
Unspecified	1%

How are Look Up and Hope families doing?

Based on the data analyzed for the third annual progress report, the Look Up and Hope program continues to make significant progress in achieving many of its key outcomes, but also has some challenges that need to be addressed.

Successes

- Overall, 86% of families (for whom follow-up information was available) experienced improvement in their relationships at follow-up.² (This is slightly higher than the last annual report, when 80% of families reported improved relationships.)
- Of the caregivers who had an unmet need at intake, and follow-up information available, nearly all (89%) reported no persistent needs at follow-up.
- 60% of mothers increased contact with both their children and their children's caregiver from intake to follow-up.
- One-third (32%) of eligible mothers were successfully reunified with their children.
- Three-quarters (76%) of incarcerated mothers received parent education or training; of those who received formal training, nearly all (96%, up from 90% last year) demonstrated an improved knowledge of parenting skills.
- 39% of women with improved parenting skills (who were eligible to reunify) were successfully reunited with their minor children.
- Nearly half (47%) of mothers had a positive employment outcome (either they maintained their employment or became employed) (Figure 5). The average reported wage increased between pre-incarceration (\$7.62) and post-incarceration (\$8.43).

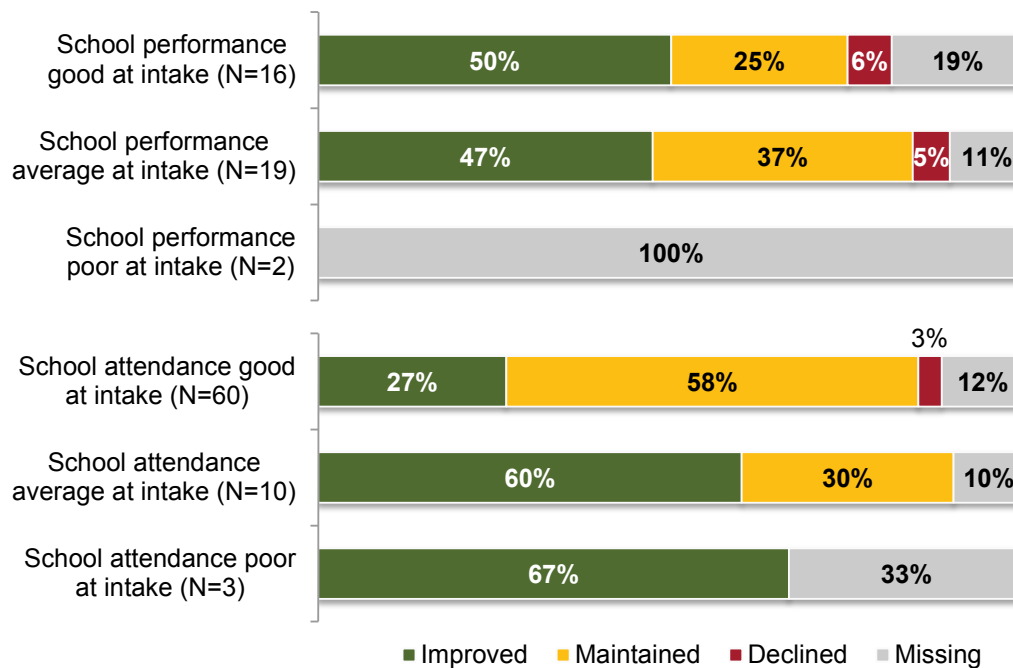
5. Changes in employment status for incarcerated mothers (N=122)

	Number and percentage of incarcerated mothers
Started the program employed...	35 (29%)
and maintained employment	16 (13%)
and experienced volatility, but ultimately employed at follow-up	11 (9%)
and lost job, reported no job at follow-up	7 (6%)
no information at follow-up	1 (1%)
Started the program unemployed...	64 (52%)
and became employed	30 (25%)
and became employed but later lost job	9 (7%)
and stayed unemployed	25 (20%)
No employment information	23 (19%)

² "Improvement" means there was either increased contact between mothers and children or reunification occurred, or there were positive changes in the emotional relationship between family members (as reported by family coaches).

- Elementary school-aged children had particularly positive school-related outcomes: of those who had “good” school performance at intake, half continued to improve, while one-quarter maintained their good performance. Of those who had “good” attendance at intake, one-quarter (27%) continued to improve and 58% maintained their good attendance (Figure 6).

6. School-based outcomes for children 6-12 years old



Note: “Good”, “fair”, and “poor” performance categories were based on the GPA reported on the child’s intake assessment. Attendance categories were selected by family coaches based on their conversations with child and child’s caregiver.

- In addition, over half (53%) of elementary school-aged children increased their participation in extracurricular activities (up from 33% at the last annual report), and 39% increased their educational enrichment activities.
- Of those children who were reported as having “no behavioral issues” at intake, 81% either maintained or improved their good behavior while enrolled in the program.
- Nearly half (46%) of all children increased their positive relationships with adults, and a similar number (44%) reportedly connected with peers in a positive way.

Challenges

- Caregivers continue to struggle with stress and relationship challenges. As previously reported, 33% showed signs of stress at intake. This was true even of caregivers who had been receiving informal support from family members or friends.
- 19% of families reported decreased contact between caregivers and incarcerated mothers over the course of the program, and 16% of incarcerated mothers reported complete estrangement from family members.
- Out of 35 caregivers who said they did not receive assistance from family or friends at intake, only four (11%) reported new sources of informal support at follow-up.
- 71% of incarcerated mothers were reported to have a formal plan at follow-up, which is relatively low considering that formal, family-based reentry programming is a core tenant of LUH. It is important to note, however, that this is an increase from last year, in which only 33% had a formal, written plan.
- Older children (13-17 years old) had less positive school-related outcomes than their younger counterparts. Of those who had “good” school performance at intake, 80% improved or maintained their work; however, 20% declined. Of those who were reported as “average” at intake, 44% remained the same and 11% declined.

Program recommendations

Despite the fact that LUH families continue to face challenges, they have seen many important successes throughout their time in the program. Wilder recommends the following specific program improvements, which will help maintain the good work VOA is doing and strengthen areas that need further attention.

- **Provide more emotional supports for caregivers, many of whom suffer from exhaustion or stress-related issues.** Sites should continue to link caregivers to faith-based and community-based organizations (which may help to combat isolation) and provide them with respite care, caregiver support groups, and caregiver appreciation events. It is especially important for sites to focus efforts on caregivers who do not report any informal assistance at intake, as they are less likely to find new sources of support at follow-up. VOA may want to begin looking at measures of social isolation and target services towards the most isolated of caregivers.
- **Focus specifically on rebuilding the relationship between parents and caregivers, which is often a great source of stress among families.** VOA staff may be able to develop co-parenting strategies that can be sustained after the mother is released.

- **Continue to put resources and energy into reentry planning and supporting incarcerated mothers and their families post-release.** Sites are beginning to see progress in terms of the overall number of plans made, as well as key areas discussed in reentry planning. However, there are still fewer reentry plans than desired, so sites must continue their hard work and look towards longer-term interventions.
- **Consider collecting more concrete substance abuse data, such as drug test results and reports of usage within the last 30 days.** At the moment, substance-abuse related outcomes are tracked largely through the self-reported progress of mothers at follow-up.
- **Provide more targeted, age-appropriate services to participating children.** Since the beginning of the program, the data have shown that older children lag behind elementary school students in increasing their connections to adults and peers outside the family and involvement in educational and extracurricular activities. Having actual school performance data available will be helpful in determining how children are progressing and in identifying possible steps to improve academic performance.
- **Point caregivers towards Head Start services, since they are free to families.** Very few caregivers are currently taking advantage of Head Start.
- **Begin thinking about interventions for children who exhibit extreme behavioral issues.** Even though children with serious behavioral problems are in the minority, they tend to show very little improvement throughout the program. This suggests that more or different services are needed for these children.

With these recommended program improvements and expansions, the Look Up and Hope program will continue to build upon the impressive short-term results it has already achieved with many clients, making it possible for incarcerated women, their children, and their families to flourish and succeed not just for a few months or years, but for generations to come.

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For more information

This summary presents highlights of the *Look Up and Hope third annual progress report*. For more information about this report, contact Stephanie Nelson-Dusek at Wilder Research, 651-280-2675.

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