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MCH Innovations Database Practice Summary & Implementation Guidance

Promises of Parenting Program

The Promises of Parenting Program improves the maternal-infant relational health of incarcerated mothers and their co-residing children residing on the Officer Breann Leath Memorial Maternal-Child Health Unit at the Indiana Women’s Prison by providing evidence-based parenting education and support.



Location

Indiana



Topic Area

Birth Outcomes, Data Assessment & Evaluation, Family & Youth Engagement, Health Promotion & Communication, Mental Health & Hospitalization



Setting

Women’s prison nursery unit



Population Focus

Children, Families & Caregivers, Infant, Life Course, Women & Maternal



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Section 1: Practice Summary

PRACTICE DESCRIPTION

Incarcerated mothers represent a rapidly growing inmate population in the United States prison system. The number of incarcerated women has increased by more than 700% since 1980 (Carlson, 2018) and continues to increase at an estimated annual rate of 4.3% (American Civil Liberties Union, 2022). Approximately 80% of incarcerated women are mothers (Stanton and Rose, 2020) and an estimated 6%-10% of women are pregnant at intake (Carlson, 2018). As mothers are more likely to serve as primary caregivers for their families, 75% of children of incarcerated mothers are displaced from their homes as a result of incarceration and are typically placed with other family members or within the foster care system (Carlson 2018).

Due to the sensitive, malleable nature of an infant's developing brain, caregiver separation is a particularly traumatic event in early childhood. A consistent and responsive caregiver is critical to an infant's development of secure attachment and sense of safety in the surrounding world (Byrne et. al, 2009). When a caregiver-child separation occurs due to incarceration, the development of secure attachment is disrupted, causing trauma and an increased risk of both short-term and long-term adverse outcomes for both the child and caregiver (Dallaire, 2006).

As a response to current research on the harmful impact of caregiver separation to the healthy growth and development of a young child, the Promises of Parenting Program was created for incarcerated mothers and their infants co-residing in the Officer Breann Leath Memorial Maternal-Child Health Unit at the Indiana Women's Prison in Indianapolis, Indiana. The goal of the Promises of Parenting program is to improve the maternal-infant relational health of incarcerated mothers and their children both when residing on the Leath Unit and after release.

CORE COMPONENTS & PRACTICE ACTIVITIES

The goal of the Promises of Parenting program is to improve the maternal-infant relational health of incarcerated mothers and their children both when residing on the Leath Unit and after release. We accomplish this by providing regular, evidence-based parenting education to mothers residing on the Unit. Parenting classes are facilitated by a Grassroots Maternal and Child Health (GMCHI) staff member who is certified in the Circle of Security Parenting program model. Each mother participates in the Circle of Security Parenting Curriculum (once per week for eight weeks), CDC Milestone Moments session to learn about infant developmental milestones (once per week for eight weeks) and weekly play and learn sessions with Grassroots MCH Initiative staff wherein the moms can apply what they have learned. In order to create an optimal learning environment for these trainings, we developed an infant play and learning and maternal attachment zone in the nursery unit day room so that moms and babies have access to a rich environment for infant development. In addition, The Promises of Parenting Program also distributes educational books and learning materials to women residing on the unit and their co-residing children, items are distributed at the onset of the learning experience (which they can use while in the unit and when at home) and another tub of items is provided on release to community.



Core Components & Practice Activities

Core Component	Activities	Operational Details
Parenting education	<p>Circle of Security parenting classes</p> <p>CDC Milestones Moment Education</p> <p>Play and Learn Sessions</p>	<p>The Circle of Security Parenting (COSP) model consists of eight sessions, or classes, that occur weekly in the Leath Unit for 1.5 hours. Classes focus on strengthening maternal reflection and understanding young children’s genuine relationship needs. COSP classes are facilitated by a certified COSP facilitator employed by the Promises of Parenting Program. In addition to weekly COSP parenting classes, the Promises of Parenting Program also includes a weekly facilitated child development class and a Play and Learn group. In addition, each participant engages in 8 weekly 60 minute sessions wherein they learn about infant development milestones and strategies to facilitate these. The same facilitator for the COSP sessions leads these sessions so as to link material across the two different curricula.</p>
Educational materials	Distribution of learning materials	<p>The program also distributes educational books to coordinate with COS classes, a foundational toy bundle once completing COS classes, and a discharge toy bundle once released from the Leath Unit.</p>

HEALTH EQUITY

Individuals involved in the justice system, particularly incarcerated individuals, often face discrimination and inequities both while incarcerated and when released out in the community. Programs to serve individuals involved in the justice system are chronically underfunded. The Promises of Parenting Program provides parenting education to a population of women who might otherwise receive no parenting education at all.

All program services were identified, created, and incorporated to address the social determinants of health for each program participant. Each participant enters the prison nursery with a unique childhood history and lifecourse, oftentimes including an array of trauma and barriers to healthy parenting. Each participant also begins parenting classes with their own parenting beliefs, experiences, and cultural influences. The Promises of Program respects and values these perspectives and life stories and believes meeting program participants where they are is a core tenant of building trust and increasing the impact of education in the prison nursery setting.



The program is also aware of the power dynamics between program participants and the local Department of Corrections. Upon starting parenting classes, the Program Manager reviews rights and confidentiality with each program participant. The manager ensures each program participant knows their participation in classes does not impact their sentence or length of time in the prison, nor does it impact their standing with the Department of Corrections in any way.

Program leadership is aware that discussing one's childhood and/or parenting experiences can sometimes be triggering for program participants. The Program Facilitator is trained to identify this trauma and to provide support and encouragement as needed to each participant. If needed, the Program Facilitator can refer a program participant to formal mental health services offered in the unit.

EVIDENCE OF EFFECTIVENESS

Data for the program is gathered using multiple methods. Program process data is gathered using a mix of electronic surveys and spreadsheets. The Program Facilitator takes attendance for all Promises of Parenting classes and submits this to the Program Manager, who then transfers attendance into a secure spreadsheet for tracking purposes. The manager analyzes trends in attendance, which women have completed which classes, and problem-solves any attendance issues with the facilitator. The Program Facilitator also completes electronic facilitator surveys weekly, providing information about class content discussed, successes and barriers, in addition to reflective questions on best practice. These surveys are submitted to the manager weekly and are also transferred into a secure spreadsheet. The facilitator surveys are used to guide discussion topics for weekly facilitator/manager meetings.

The distribution of learning materials are maintained and tracked by the Program Manager using sign-out sheets and secure electronic spreadsheets.

Outcome data are gathered only from participating women who consent to participate in the research study portion of the program and complete all Internal Review Board (IRB) research participant paperwork. If a woman consents to study participation, the Program Manager staff member reviews informed consent with each mother prior to starting the learning cohort. Each postpartum mother then completes a set of three pre-surveys before the first COS class – the Maternal Attachment Inventory (MAI), the Karitane Parenting Confidence Scale (KPCS), and the Knowledge of Infant Development Inventory (KIDI). Prenatal women only complete the KIDI. Upon completion of the 8-week curricula, each mother repeats the same surveys as post-surveys. A GMCHI staff member also interviews each consented mother after completing the educational programming to gain feedback and assess learning acquisition and retention.

The Program Manager analyzes all facilitator data, outcome and process data, and participant feedback to complete a cohort report after each 8-week learning cohort is completed. This report is reviewed internally and distributed to all stakeholders involved in the program.

Of the 5 postnatal women who have so far completed both pre- and post- KPCS and MAI inventories, parental confidence increased by 2.39% (KPCS). At post-intervention we saw a slight decrease in MAI scores. This is likely due to the mothers scoring at the ceiling level pre-intervention, and after learning about attachment, they score themselves a bit lower. We make sure that they understand that this is a normal process associated with learning more about a topic area. We just started using the KIDI assessment and do not have data yet from these cohorts. Of the 10 total women who completed exit interviews, 60% of the women reported lower stress levels as a parent, 80% reported an increase in understanding of their baby's communication, and 100% indicated an increase in confidence about playing with their baby.



Qualitative data gathered by program exit interviews also supported the outcomes of the gathered quantitative data. Women also reported an increase in feelings of empowerment and the ability to be a good mother to their baby, as well as liking both the class facilitator, content, and layout of program classes.

Due to being in a prison setting, program participants may provide survey or interview responses that they think evaluators or IDOC staff want to hear. Though the Program Manager clarifies at program enrollment that survey responses, research study consent, or class participation will not in any way impact a woman's standing with IDOC, it's possible that some women still respond favorably, even if this is not their true answer.

One positive outcome of the program is that others who sit in on classes or observe, like unit helpers or caretakers, have been learning things from parenting classes. These women are not required to attend classes but have voluntarily attended and expressed an increase in knowledge.

For more information about the Karitane Parenting Confidence Scale (KPCS), visit:

<https://efaidnbmnnnibpcajpcglclefindmkaj/https://plct.org.uk/wp-content/uploads/2019/01/karitane-parenting-confidence-scale-manual-copy.pdf>

For more information about the Maternal Attachment Inventory (MAI), visit:

<https://pubmed.ncbi.nlm.nih.gov/7780768/>

For more information about the Knowledge of Infant Development Inventory (KIDI), visit:

<https://pmc.ncbi.nlm.nih.gov/articles/PMC8371675/>

Section 2: Implementation Guidance

COLLABORATORS AND PARTNERS

The Promises of Parenting Program involves ongoing collaboration and partnership with a diverse range of multi-disciplinary stakeholders with both lived and professional experience in the justice system. Each collaborator is essential in the ongoing planning and implementation of the Promises of Parenting Program.

The women residing on the Leath Unit are involved in the decision-making process whenever possible. The women provide critical insight through their lived experience and firsthand involvement in the justice system. After completing an eight-week series of parenting classes, each willing program participant is interviewed to gain an understanding of their experiences in the program, what worked well, and what could be improved for the next cohort. This input is highly valued and used to guide the program's intervention and evaluation mechanisms.

Staff from the Indiana Department of Corrections are also essential to the development of the Promises of Parenting Program. Weekly check-ins occur with IDOC staff to collaborate and ensure the program is functioning smoothly within the prison environment. IDOC staff provide valuable insight into the functional and administrative aspects of working within the justice system.

Grassroots MCH staff are involved in every aspect of the Promises of Parenting Program, from the program administrator and lead researcher to the program facilitator. Meetings occur with each Grassroots MCH staff



member to ensure program model fidelity, monitoring and evaluation processes, and the timely and effective provision of program services.

Practice Collaborators and Partners			
Partner/ Collaborator	How are they involved in decision-making throughout practice processes?	How are you partnering with this group?	Does this stakeholder have lived experience/come from a community impacted by the practice?
Women in the Leath Unit	Women participate in parenting classes in the unit. Consenting women also complete pre- and post-class surveys and exit interviews. Their perspectives are used to inform program design.	Women in the unit are actively engaged in providing feedback about both program and evaluation design, as well as the needs of this population of learners.	Yes, women in the unit are incarcerated individuals residing in a women’s prison.
Indiana Dept. of Corrections staff	Regular meetings are held with Indiana Department of Corrections staff where programmatic updates are provided and any issues are worked through as a team.	All aspects of the program are discussed with IDOC staff, as the unit is their workplace and property. IDOC gives feedback on the implementation process in a prison setting on a regular basis.	Unknown – information about personal involvement in the justice system is not made aware to the team.
Grassroots MCH staff	Grassroots MCH staff are involved in every aspect and decision regarding the program, as staff are responsible for implementing, evaluating, and facilitating the program.	Team collaborations occur multiple times per week, as well as implementation and facilitation quality assurance	No



and technical assistance.

REPLICATION

The Promises of Parenting Program has not yet been replicated or adapted in an environment outside of a prison nursery setting or with a priority population outside of mothers who are incarcerated in a prison nursery setting.

INTERNAL CAPACITY

In order to support this practice, a Program Manager is needed to oversee every aspect of program administration and evaluation. The manager provides support to all staff involved in the practice. This individual must have management experience and program development and implementation experience. In addition to a specific Program Manager, because this practice is also part of a research study, a Lead Researcher is also needed to oversee the research. The Program Manager meets with the Lead Researcher at least weekly to update them on all aspects of program to ensure a seamless relationship between the implementation and research aspects of the program practice. In addition to these two positions, a Program Facilitator is necessary for the successful implementation of the practice. This individual is responsible for the facilitation of all program classes in the prison nursery setting. The Program Facilitator must have experience in child development and in effectively providing training to groups of people. The Program Manager oversees the Program Facilitator and meets at least weekly to plan and organize program classes, problem solve any issues, and to provide staff development and overall facilitator support.

PRACTICE TIMELINE

A minimum of one year is needed to ensure the proper time to research, plan, and implement all aspects of the practice. Within this year, formal Circle of Security International facilitator training must be completed by the entire planning team as soon as possible. For more information on this practice's timeline and specific practice activities, please contact Mackenzie Porter directly at mporter2@iu.edu.

PRACTICE COST

The general budget for this program is:

Project manager (50% effort): \$77,000

Lessons Facilitator: \$11,000 annually (10 hours weekly)

Training in Circle of Security: \$1500 per person

Materials and Supplies: \$15,000 annually



LESSONS LEARNED

The environment in a prison setting can sometimes be unpredictable, particularly around scheduling. There can be a typical schedule for incarcerated individuals throughout the day but deviations from this schedule are not uncommon. Any program in a prison setting will need to be flexible and adaptable and work within the schedules and requirements of the prison. One of the most important lessons learned has been the need for humility while working in a prison. The prison is a home to the women and children living there and should be treated with respect by all visitors. Any decisions made about the space must first be discussed with the women living there. A program with an evidence-based intervention does not automatically give that program the right to enter someone's home and tell them what's best. Trust-building, respect, and humility are critical in order to truly support the women. Additionally, another valuable lesson learned is to understand the capacity of the women to learn and take in new information, and to adjust one's expectations accordingly. Some women can take in more information than others, some are more ready for behavior change than others, etc. Most women in the unit have been through tremendous amounts of trauma throughout their lives and this can significantly impact an individual's ability to both learn new information and translate this information into behavior change. It's important to use every opportunity to build the confidence of the women and to praise the small, positive changes made.

In a prison setting, there are things outside of one's control that impact program implementation. Sometimes, the unit the women's prison is closed to all outsiders and volunteers due to illness, like the flu or COVID-19. Program facilitation cannot occur during these times, as facilitation must occur in-person. The prison does not have the ability to do virtual learning. We address these occurrences by developing materials to drop off to the unit for women to complete on their own on the weeks facilitation can't happen. As discussed above, another challenge is scheduling classes during times that work for the program and for the requirements of the women's prison schedule. When scheduling conflicts occur, we are flexible in the moment and if needed, change the times of classes long-term to accommodate new prison requirements.

Working in a prison setting is unique and nuanced. In order to be successful, someone working in this setting must have strong professional boundaries and be strongly aligned with what is a programmatic responsibility and what is not. Discussions about the importance of these qualities were discussed with the Program Facilitator, but only after beginning work in the unit. Looking back, discussions about the uniqueness of working in a prison setting should happen with all individuals before any work occurs in a prison setting.

NEXT STEPS

This program has funding continue for at least the next two years. The program intends to expand the current play space in the unit, as well as provide floor mats for each individual room in the unit so women and babies are able to have floor time in their own rooms.

The Knowledge of Infant Development Inventory (KIDI) is a newer tool added in to existing evaluation methods. The team intends to gather pre- and post-KIDI data to evaluate whether program participants' knowledge of child development changes at all after completing classes, or if the KIDI is the right evaluation tool to use in this setting with this population of learners.

RESOURCES PROVIDED

- Grassroots Maternal and Child Health Initiative
<https://medicine.iu.edu/pediatrics/specialties/health-services/grassroots-maternal-child-health>



- Circle of Security International
<https://www.circleofsecurityinternational.com/>
- Indiana Department of Corrections Officer Breann Leath Memorial Maternal-Child Health Unit
<https://www.in.gov/idoc/mchu/>

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