Empowering Parents Who Are Separated and/or Incarcerated AsChild Welfare Workers

Amanda Moses (00:06):

Hi everyone. My name's Amanda Moses. I am a student in the school of Social work at the University of Minnesota and the School of Public Health studying maternal and child health and clinical mental health. And I'm here today as a graduate assistant with both CEED and CASCW. And we're here to interview, Rebecca Schlafer, who is an associate professor in the Department of Pediatrics at the University of Minnesota's Medical School. And we will be discussingparental separation and incarceration, and how child welfare workers can support families who are dealing with those complex issues. So, welcome, Rebecca.

Rebecca Schlafer (00:47):

Thanks for having me.

Amanda Moses (00:48):

Yes, of course. Excited to have you. So, to get started, can you share with us what you're currently working on?

Rebecca Schlafer (00:57):

Sure. So I think the thing that's probably most relevant to today's conversation is I am currently leading a multi-site project looking at enhanced perinatal programs for pregnant and postpartum people in six state prisons. Um, and this work has, we call it the E4P project, so Enhanced Perinatal Programs for people in prison. This work really grew out of the now 10 plus year collaboration that I have with the Minnesota Prison Doula Project, uh, which aims to provide pregnancy and parenting support to people, um, initially at the Shakopee Women's Prison in Minnesota, but has expanded to county jails across the state over the last decade. Um, and of course has, has expanded to other states now in a way that we are supporting those programs across the country.

Amanda Moses (01:49):

Very cool. Thank you. What current policies are impacting parents and caregivers who are incarcerated?

Rebecca Schlafer (01:56):

Yeah, that's a great question. I think, I mean, there's policies that are real specific to pregnant people that I think are most relevant. Um, and I'll start there and then think about some of the things that arecoming down the pike potentially. So most relevant to pregnant and postpartum people is the Healthy Start Act that was passed, um, last legislative session and signed into law on Mother's Day last year in 2021. And, that gives the commissioner of corrections authority to release .pregnant and postpartum people from prison for up to one year into community-based alternatives to incarceration. So really the impetus behind this legislation was to prevent the unnecessary separation of moms and infants, so incarcerated moms and infants. Because what our data had shown us over the course of the last decade is that .the overwhelming majority of women who give birth in custody will be released from prison within the first year of their baby's life.

(02:58):

And so what this law permits is, is moms to basically be released into community-based alternatives so that they're not separated from their babies. Um, that's really specific to a real small population of people who are impacted by incarceration. But there are a number of other legislative proposals that are on the table that are bigger for families affected by incarceration more generally, including things

like, expanded access to free phone calls for incarcerated people in the Minnesota State prisons, which has implications of course for family connectedness and children staying, connected with their incarcerated parents. In addition tothings that we think about about primary prevention, like expanding family home visiting services for justice involved families. So those are things that are, you know, on the horizon. We'll see what happens. This is a big question. We think about policies, right? Are we talking about state laws? Are we talking about policies in the Department of Corrections or in jails across the state?

Amanda Moses (04:01):

So the policy that, what releases people, after they have their baby, is that new for the entire country as a policy or has that beenwritten into law in other states as well that you know of?

Rebecca Schlafer (04:16):

Yeah, that's a great question. I think the Healthy Start Act is really unique and probably the first of its kind legislation in the country in the way that it, that it really gives the commissioner authority to release pregnant and postpartum people. There are some states, Wisconsin is one where there is some legislation that permits some flexibility on the judicial sentencing side. So, so pre-sentencing, for judges to identify alternatives to incarceration for pregnant people before they're sentenced to prison. And there are a number of other states that think aboutcaregiving responsibilities, pre-sentencing, so that families who might be looking at a parent's incarceration, they, they may have opportunities for alternatives to that incarceration with the parenting context in mind. Um, and then I will say that in, you know, the Healthy Start Act is really unique in the sense that other states, a few other states, I think eight now have their policy solution to separating pregnant people from their babies after birth has been a prison nursery program.

(05:30):

And, that would be where moms can co-reside in prison with their babies. And I think there are about eight states that still have these prison nursery programs. And the one in New York, Bedford Hills Correctional Facility is the oldest one in the country, and is a very robust prison nursery program. Um, and is the one where I would say that we have the most evidence about sort of the impacts of moms and babies. For Minnesota, at least when we were looking at what is the policy solution for us to respond to not separating moms and babies for me. And I feel pretty strongly that, opportunities to have moms go into community versus bringing babies into prison was the better policy solution. So there are a couple of different sort of ways that states have addressed this, but I would say that ours is, is quite unique in that respect.

Amanda Moses (06:20):

Yeah, definitely. What would you say are the, the populations that are most disproportionately represented?

Rebecca Schlafer (06:30):

Yeah. So when we think about the criminal legal system broadly, we know that community, communities of color .are disproportionately impacted by the criminal legal system and in every phase of the criminal legal system, right? So black and brown people are more likely to be arrested than white people. They are, they have, uh, harsher sentences for the same crime. They end up doing longer periods of time in prison and jail, um, than than white folks even for the same or similar crimes. And then, um, for

pregnant people in particular, uh, really, really profound racial disparities in our state among Native American and Indigenous women. So while native women make up, you know, less than 1% of our state's population, they're about 25% of the, the pregnant people who are in our state prison. And I think that just speaks to, um, the real underlying systemic inequities in our state that are driving, Indigenous women into the prison system. And .really points to challenges around historical trauma and forced separation of, of Indigenous families.

Amanda Moses (07:39):

That's a huge gap. In thinking about the Indigenous community and communities of color, what concerns do you have when thinking aside from the fact that they're disproportionately affected when thinking about these populations, but particularly for children?

Rebecca Schlafer (07:57):

Yeah it's a great, another great question. I think that there are just so many aspects of intersecting marginalization, right? So these are families that are also more likely to be, families that have low income. They have often are housing insecure or are unemployed or underemployed if they have health insurance, it's often state health insurance, which may provide additional barriers to accessing preventative healthcare or substance use and mental health counseling. And so, again, I think about all of the ways in which these families experience marginalization, and there are systemic challenges that mean that their needs are not being met. Um, and so when I think then about their involvement in the criminal legal system, right? So they're disproportionately you know, impacted by the criminal legal system, but they also have all of these other challenges that preceded the incarceration, and then additional challenges at release. And I think what does this mean for their children, right? When we consider the intergenerational consequences, it just means a whole nother generation that has been negatively impacted by these, these systems which are replicating inequities across generations in this country.

Amanda Moses (09:14):

And I would imagine too with you know, people of color, the, it's more common for the head of household to be a mom that, you know, if they're then not present to be able to maintain that healthcare and be filling out that paperwork, that that leads to even more disruption.

Rebecca Schlafer (09:32):

Absolutely. And we know that there are really important differences in what happens to kids when moms go to jail or prison versus when dads go to jail or prison, right? So when dads are incarcerated, kids are most often living with their, their moms, right? And so there is not that same level of often necessarily that the kid has to move primary caregivers, which is not the case when moms are incarcerated, because when moms are incarcerated, they were more likely to be primary caregivers, and those kids end up in a variety of different caregiving arrangements. But we know that, that this incarceration can often set off a domino effect of other challenges in the family system, right? So, financial instability, housing instability. So there's what we talk about as collateral consequences for the family system, and some of those preceded the period of incarceration, right? Where the family was already on sort of precarious footing with their housing or their finances. And then the incarceration just sort of layers on a level of, of uncertainty and unpredictability that we know is really bad for kids.

Amanda Moses (10:39):

Wow. What are kinda, shifting gears here, common practices in prisons and jails for parents and parenting?

Rebecca Schlafer (10:48):

Yeah, I think probably the flip of this question is sort of there aren't really common practices, right? I think one of the things that is so been so startling to me over more than a decade of doing this work is just how different every prison is and how every jail is, and how I guess the, the common thread here is how little attention prisons and jails have paid to parents in particular. I have, you know, heard corrections administrators say things like, the only thing I need in this facility is officers and inmates. And the idea that incarcerated people are parents too is often an afterthought. And I think that is such a short sighted frame when we consider that most of the people who are in prisons and jails are parents with minor children. The overwhelming majority of people who are incarcerated are getting out and returning to community. And will will have relationships with their children and families, and we have done very little to support them during their period of incarceration or help to you know, promote positive parenting behaviors, promote supportive parent-child visitation. And, and so I think the common practice there, I would say sort of two themes. And what I've seen is really huge variation across facilities and very little attention paid to this issue in a way that I think we have a lot of work to do.

Amanda Moses (12:18):

Right. Yeah. I started to kind of poke around and look at, you know, what our practices around visitation or communicating and, you know, as you mentioned, there really aren't any, or it's vastly different. Have you noted any successes with any of the prisons or jails that you've worked with around extended visiting or,

Rebecca Schlafer (12:42):

Yeah, let's talk, I mean, generally first about sort of what does it look like right between prisons and jails? So jails are short-term facilities where people generally are their pre adjudication, meaning they haven't yet been sentenced, or they're short, they're sentenced, but they're sentenced for shorter sentences and jails. The visiting environments are almost uniformly non-contact visits, meaning that any visitors, minor children included would be, if they are permitted to come on site, they are visiting a parent through a closed circuit sort of television. A crummy FaceTime is the way I would describe it. Where they come on site and they're looking at a computer screen and they are picking up a telephone receiver and talking to their parent, who is somewhere else in the jail on the other side with, again, just a computer screen or in sort of the best, I'm putting best in air quote situation, air quotes here.

(13:43):

In the best circumstances for non-contact visits, families can come on site and they're seeing their loved one through plexiglass still picking up the phone, but at least it's not through this, this sort of crummy technology that exists in the facilities. Those are non-contact visits and pretty uniformly the case for jails. And I think that this is a common misconception that people have that somehow jails are you know, less risky, less secure or less .intense, and therefore families have more access. But actually, as my corrections colleagues have helped me understand over the years like that, because of the turnover, and because they're getting literally everyone from, you know, your sort of run of the mill DUI to the mass murderer coming through jail, the actually the security in there, the folks in that I worked with in corrections have said to me like, this is a, people in prison are a known quantity, meaning that they've had a chance, they've been sentenced, we have a sense to understand how long they're gonna be in the

prison, they've been classified, meaning that they're in the right, theoretically the right prison for their security level.

(<u>14:55</u>):

And so there's more known about that individual versus in jails where sort of this constant churn increases some of the challenges with regard to safety and security. And I give that context because I think that we see the jail environment for children and families being much more locked down. There are very few jails that offer any kind of meaningful visiting opportunity for children and families with a, with a parent in a jail that's different than in prison. I would say, again .these are not generally child-friendly, developmentally appropriate spaces, and very little thought has gone into making these environments .spaces that are not re-traumatizing or experiences that are not re-traumatizing for kids. That said, there are some really model practices where folks have done a lot of intentionality, done a lot of thinking and intentionality around making these experiences a bit more developmentally appropriate.

(15:56):

And by that I would mean things like making sure that there are rules in place that permit the child, the child to go to the bathroom if they need to and return to the visit, right? I mean, in, in many places, if you need to go to the bathroom during the middle of the visit, the visit is over, right? So kids have to go to the bathroom, and kids are not great at telling us when they're gonna need to go to the bathroom, right? And anybody who's a parent, of course, knows that anytime we're getting ready to do something, someone will say, Hey, should we, should we try going to the bathroom before we do X, Y, and Z? Right? Um, and so many, many folks have talked about the ways in which these practices can be altered to be more developmentally appropriate, as simple as visits don't get stopped if kids have to go to the bathroom, or allowing kids to bring in pre-packaged snacks so that they can eat during the visit, allowing longer periods of visits, and then policies and practices in these spaces that allow kids to get up and move around.

(16:52):

Many facilities require that kids sit on laps. They can't go back and forth between, you know, the caregiver who brought them and the incarcerated parent. They have to stay seated at all times. They can't move. And, you know, I can't, I have a hard time sitting still for any period of time at this point. The idea that we would expect a, a three year old to sit on a lap and, and sit there during any significant amount of time is really just inconsistent with what we know about kiddos. And, then really right opportunities for when we talk about extended visits. These are visiting environments where there's been a lot of thought and intentionality around making these spaces appropriate for kids, where kids can get on the floor with their parents, play games, do a puzzle, read a book together, they really have a much more natural environment, which in which they can interact with their parents, right? Their moms can braid their hair, their dads can play a game with them. And these kinds of visiting experiences are really few and far between.

Amanda Moses (17:55):

How would you say the pandemic has impacted these visiting, I'm putting this in air quotes too. Practices?

Rebecca Schlafer (18:02):

Yeah, oof. I mean, in all of the ways, right? In all of the ways that the pandemic impacted all of our lives, it's just been that magnified by, you know a really, really complicated setting in a carceral space. So for a significant period of time, prisons and jails really truly just shut down all visiting. Folks were on more or

less lockdown for a period of time, right? Meaning that there were not allowed to leave their living units. And I think that's really challenged, right? This, the availability of visiting at all. We've seen visiting come back online, meaning that individuals now can come back to prison and see their loved one at and and visit, but we've seen huge disruptions in that, right? So visiting opens, and then there's two Covid cases in the facility, and then visiting closes again.

(18:56):

And so really challenging for when we think about kids and their unpredictability about, you know, what will this look like? And as parents in the last year, we've all two years, we've all struggled with having to tell our kids that we don't know what's gonna happen, and maybe we'll go to school or maybe we won't. And this is just really layered on a lot. And then I, I think not, I don't wanna lose sight of the fact that one of the other real challenges that these environments are having, the prisons and jails like across the country and many sectors, is real challenges having enough staff. And so, even as we've seen the pandemic wane and fewer concerns about people being infected, we, they just, the facilities don't simply have enough staff to have visiting open and available. And so they don't have enough staff to do sort of standard operations, which means that even if it's safe from a Covid perspective to be visiting in person, we are still seeing all of these additional barriers that families are experienced to actually being able to have contact with their loved ones, which adds additional layers of complexity for these families, which I think are really unique and, and challenging.

Amanda Moses (20:07):

Yeah. Kind of on the flip side of that, regarding the pandemic, have you seen any kind of, I don't know, maybe preliminary positive results of, you know, a lot of the early release that has happened because of the pandemic and like, you know, if recidivism is gonna go up, what have you seen so far?

Rebecca Schlafer (20:28):

I think it remains to be seen really, we have seen tremendous reductions, at the state level and at the local level in jails, in the number of people who are incarcerated in the state and across the country, which I think speaks to kind of two things, right? We are not seeing people being processed through the Carceral system in the same way through the criminal legal system. So when courts were shut down, people weren't being processed in, in the same way. And you mentioned the idea of people being released, right? And so there were a number of mechanisms at the beginning of the pandemic to really get people that didn't need to be there out of prison. Um, and using some legal mechanisms to release folks from, from jails and prisons and not holding them, right? So if folks who are in jail, judges making decisions to try to get people out of jail, I think we're gonna see tremendous fluctuations, probably by judicial district and court to court, probably judge to judge and a little bit of variation within states and across states, right?

(21:37):

In terms of all of the things that get wrapped in here in terms of like, how will judges wanna process these cases moving forward? What is their own risk tolerance for bringing people back into their courtrooms? It's just so complex. And I'm not a criminologist or a big court watcher, so I really, I hesitate to say a much more in terms of like, what will we expect? I'd like to hope, that some many communities have seen the reductions in the jail populations and their communities and thought like, this gives us an opportunity to do something differently. You know, we've had this just major shock to the system, and is there a different way to be doing this than we have been? So I guess we'll see.

Amanda Moses (22:19):

Yeah. Yeah. Shifting again, I wanna talk more about pregnancy and kind of what that process looks like if you are pregnant and are incarcerated and know, you know, you're gonna have this baby while you are serving a sentence.

Rebecca Schlafer (22:36):

Yeah. So in Minnesota, what that looks like pre Covid and pre Healthy Start Act really was that, and everyone who comes to .the women's prison in Shakopee, Minnesota, so that's our state's only women's prison, everyone who comes to prison is who is between the ages, I think of 18 and maybe 55. I think that's the, the cap there is pregnancy tested upon admission. So there's a health screen and everyone is pregnancy tested. Anyone who is identified as pregnant is referred to the parenting coordinator at the facility who provides some additional information about resources and supports that are available at the women's prison, which at the women's prison here in Minnesota is the Minnesota Prison Doula Project, which provides weekly prenatal education and support, in addition to pairing any person who wants one, any pregnant person who wants one, a doula who will provide physical, emotional and informational support throughout pregnancy, labor, and birth, and the postpartum period.

(23:39)

So our pregnant folks at Shakopee have access to group-based education and support during their pregnancy. They get one-on-one, support during that time, and when they go into labor and are transferred to a local hospital for birth, the doula meets them at the hospital and provides continuous labor and, and birth support. And then is also there at the hospital, for what we call a separation visit. And that is about 48 hours after the mom has given birth, and she's gonna go back to the prison, and the baby will go with an elected caregiver in the community, and the doula is there to support her during that, that separation. And then when the mom is back at the prison, the doula is able to meet with her one-on-one postpartum and provide some additional, mostly emotional support about how that, how she's doing. COVID has really disrupted all of that. We had some gaps in our doula's ability to meet with their clients and be there. Our group-based support has really been on hold for a consistent period of time. And I think as the prison's open back up and there's more staffing, there's gonna be more capacity to get back in and resume the programming as it were, pre Covid. Um, but that's generally sort of what, what the experience is like for pregnant people at the facility.

Amanda Moses (24:56):

I mean, 48 hours. That's, you know, you've barely processed the fact that you've just given birth. At that point, how would you say that initial separation impacts, you know, their bonding and any sort of attachment that could, I mean, develop in that period?

Rebecca Schlafer (25:15):

Yeah, and I would say 48 hours is sort of, at least in Minnesota sort of average. We know that in other states across the country, that separation happens in an even shorter period of time. Here in Minnesota, it is pretty consistent with sort of standard hospital discharge. So when a person in the community would be discharged from the hospital, right? About 48 hours after a vaginal delivery shorter during Covid, right? The ideas of trying to get people out of hospital more quickly, and 72 hours with a Cesarean birth. But that has, you know, again, really challenging and thinking about even three days is not long enough with one's baby. And I think to your point, right? So, so many emotions, even for a

mom who is about to take a baby home, right? A lot of tremendous hormonal shifts that are happening in those periods of time, biological changes that are really challenging for the birthing person.

(26:15):

And then to layer on this separation from their baby, I think that we know this is just one of the, the most incredible periods of grief and pain that our clients experience. Not having been through that myself, I can only just reflect on what I have heard from them about just this, you know, excruciating loss and separation. And I think, again, you know, how they cope is just remarkable to me in terms of sort of the ways in which, and the differences in families, right? You know, I think one of the things that, uh, the prenatal education group really aims to do for pregnant people is, is help moms not try to disconnect from this pregnancy. Because you can imagine a real coping strategy as like, I'm just not gonna think about this pregnancy. I'm gonna be separated from this baby.

(27:08):

I don't wanna, I don't wanna think about it. I don't wanna bond with it, you know, in the prenatal period. I don't wanna make any plans and just like disconnect. And I think that's a, a totally reasonable coping strategy, right? That we could understand why a mom would feel that way. Um, and really trying to think about how we can help .moms in the pregnancy period, think about ways to connect with their, with their pregnancies and what they can do, to help be healthy for their, for their babies at that point in the postpartum period. You know, really tremendously depends on what that caregiving relationship is like, where the alternative caregiving relationship, where the baby goes. You know, we have a majority of the moms who give birth in our program end up, their babies go with maternal grandmothers. And, and so then it, then the question is, well, what is the relationship like with the maternal grandmother and the biological mom?

(28:06):

Right? Is there a strong relationship there? There is, you know, strong emotional connections bet across these three generations at this point. Um, are those grandparents in a capacity to being able to bring those babies in for visiting or provide updates to the mom? And it it in all of that, in the best circumstances, right? The mom and her baby are still physically separated. And so what it means in terms of parent-child attachment right, is really hard for moms to feel emotionally and physically connected to their babies in this period of time even if they're having regular visits. And, and I think that really when we think about sort of the developmental consequences of this, it really then shines the light on the critical importance of the caregiver child relationship and the importance of setting strong attachment foundations for the baby with that alternative caregiver so that when mom is released, that baby is able in a position, right, from a secure attachment standpoint to know like, yep, my needs will be met when I cry.

(29:13):

I have a caregiver who I can depend on and trust. And, and I think when we could think about this from the caregiver side of things too. Like, if you've taken a baby home from the hospital and you think, okay, gotta just like do this for the next six months, right? I gotta just wait till my daughter gets outta prison and I gotta just, and you're just going through the motions, <laugh>, those are sort of six critical months in that baby's life that it, it is desperately needing the foundation of a parent-child relationship and a secure attachment that's, that's setting this foundation for I can depend on my caregiver for love and support. I can have my needs met, right? I will get what I need from a caregiver when I'm crying, when I'm hungry, when I'm wet. And I think really challenging to think about the fact that these caregivers often are not getting any support for taking a newborn home from the hospital, and getting what they

need to be healthy and whole caregivers in this, again, unpredictable and temporary, often temporary situation,

Amanda Moses (30:14):

Right. And who knows, you know, if they know what updated, you know, information is out there around car seat safety or just, you know, it's like every generation, there's, you know, something new, to, or something that's different. Are incarcerated people who after they give birth, are they able to lactate or, you know, produce, pump milk? And if so, can they get it to their babies? And what does, what does that look like?

Rebecca Schlafer (30:43):

Great question. We've come a long way on this issue in Minnesota over the last 12 years, and we have a long way to go still. Other states are doing this, in a much, more robust way than we are. So, right. Naturally they will come back to prison and they, their bodies will be producing breast milk, right? These facilities, generally speaking, have done very little to respond to the biological processes of lactation for a long time, right? We would have clients who would tear up old socks and put them in their bras for breast pads, because the very basics weren't being met. Um, or moms who are trying to hand express their breast milk just to sort of release the pressure that comes with milk letting down. So we've come a long way in the sense that, um, uh, at Shakopee at the women's prison, uh, we are, our clients are able to pump their breast milk for a long time.

(31:40):

They didn't even have access to breast pumps. They do have access to breast pumps. And for a long time then the policy when we had breast pumps was, it was, it was more or less pump and dump. So they were allowed to express their br breast milk just to essentially discard the milk. Uh, in the last, gosh, six months to a year, there has been more active work around pumping and storing breast milk under the conditions under which someone was gonna be released into community over a short period of time. So I don't remember offhand sort of what the criteria are for that, but moms who will be released into community in a relatively short window are able to pump and store their breast milk. And we have a, a doula from our program who is able to come and pick up the breast milk and bring it to a caregiver in the community.

(32:32):

And I think we've been able to successfully do that now for two, two babies. Uh, so I say we have a long way to go because some other states have really beautiful rooms where moms can go, come and go at any point in the day in Alabama, our sister program down there, the Alabama Prison Birth project, they have this room that they've been able to create with and get donations for with these two rockers. There are storage where the moms can come and pick up their, the breast milk, or excuse me, the breast pump. They have their, the breast pump supplies there. They can get access to the room throughout the day, they can pump, they can store their milk, they label and freeze their milk, and then that milk is shipped to the caregiver frozen in the community and can go straight to baby.

(33:19):

So there is a way to do this better. Moms in Minnesota cannot chest feed if baby comes on site for visiting. So imagine, right. That you in the best of world, right, you could imagine a, a caregiver who could bring the baby on site for visits. Even then moms can't chest feed, and really unreasonable to think about the frequency with which babies need to eat. Being able to chest or breastfeed throughout

any regular period of time is, is essentially impossible for these moms, which is incredibly unfortunate. And, and exactly what we mean when we say we've got a long way to go on this issue.

Amanda Moses (34:00):

Yeah. And I would imagine if they did have the opportunity to .still be able to lactate, and then if they're not able to chest feed directly, but get the baby the milk, that that would really impact how they're framing this, how they're feeling about their baby, and feeling like I, I am participating and I am, I am able to do something really incredible for this baby.

Rebecca Schlafer (34:24):

I think that's exactly right. And I think, you know, our, in Alabama the incredible lactation consultant there, Chantel Norris is just like this amazing human being who helps moms understand the gift, this really incredible gift that, that moms can give their babies even despite these heartbreaking circumstances, right? That they, and I think our clients, who are pumping and storing their breast milk and that it's getting to their babies do really truly feel like this is something that they're doing from their baby and restorative in many ways, right? So many of our moms and clients just feel this tremendous amount of guilt around their actions that have led to this insult to their babies start to life, right? And I think for many, the capacity to store their breast milk and get it to their baby is one act of restoration. Trying to fix some of those harms that they carry a lot of guilt around and understandably so.

Amanda Moses (35:31):

Yeah. And I would imagine that guilt is just, and the separation, I mean, all, all of these risk factors for postpartum depression or anxiety or,

Rebecca Schlafer (35:40):

Right. And then think about how that feels when you do get out of prison and you don't feel connected to this baby, and that baby is potentially attached to an alternative caregiver. And, and one of the things that I think we have a still a lot of work to do to help caregivers and community and moms in prison is with some of that reunification, right? When babies, when moms come home, recognizing that it is a good thing actually, that that baby is attached to, to the alternative caregiver because that baby can now learn to dance with someone else, right? And, and actually being in a secure attachment relationship, even with an alternative caregiver, doesn't mean that that baby can't form an attachment with biological mom, but allows that baby to know, again, I will have my needs met. And sort of these really important foundational ways that attachment sets just this, this clear foundation for all future social and emotional development.

Amanda Moses (36:39):

Right. In kind of thinking maybe we could think about, since we're we're talking about attachment maybe older children, what concerns rise to the top for you with respect to older children and as it relates to their healthy development?

Rebecca Schlafer (36:56):

Yeahl mean, I think, I think across the board here, just we know that, again, incarceration causes so many disruptions to, to families and can compromise children's healthy development. And that's true if we're talking about infants separated from their moms. That's also true about teenagers who are

separated from their parents too. And I think one of the things that we talked about earlier is the sort of constellation of risks that these families often experience in terms of housing and parent mental health and parent substance use. And so I think those are the sort of things that surround the, the involvement in the criminal legal system that we know can compromise healthy child development. And so for me, when I think about concerns, broad concerns for children, I think about how do we think about primary prevention upfront for many of these issues, right? How do we make sure that we think about housing as a human right? How do we make sure that families have have enough food to eat? And for many of our families that are involved in the criminal legal system, they're just, there's so many, as we said earlier, a aspects of intersecting marginalization that can compromise healthy development.

Amanda Moses (38:10):

Yeah. It's really about those basic needs. And then going from there, what would you say child welfare workers can do to advocate for incarcerated parents?

Rebecca Schlafer (38:23):

Yeah, that's a great question. I mean, I think when you have a case with a currently incarcerated parent, it's really important to recognize that, you know, the state laws very clearly say that you just because the the parent is incarcerated doesn't mean they don't need to be .apprised of what's going on with the court case. In fact, they under statute need to be informed in timely ways about what's happening. They need to be considered .active participants and workers do need to work a little bit harder to make sure that that information gets into parents in a timely way. And that parents, incarcerated parents have the opportunity to participate in case plans regarding their children. And this is true. I mean, I think so often about, you know, hearing workers say things like, oh, well, dad's incarcerated so we don't have to worry about him.

(39:11):

And it's like recognizing that actually in that that incarcerated dad has a network too that may be wonderful resources for these children. Dad may be getting out soon, right? Thinking about what that means for the kids. So again, just thinking about not writing off incarcerated parents and, and being mindful of sort of the biases that often come with what, what folks think about parents who are incarcerated and recognizing the importance of engaging them throughout the process and thinking about parents in really robust case plans to be able to help sustain connections with children,

Amanda Moses (39:50):

Right? Yeah. They're the, you know, parents who are incarcerated. They're not on ice, they're still parents. What would you say child welfare workers can do to support a sustained connection with their children?

Rebecca Schlafer (40:05):

Yeah, one of the, I mean, most practical things I always say is find out where the parent is incarcerated and get a better sense of what the visiting and environment is like and what the rules around contact are. Because I think there is, you know, this sort of belief that somehow visitation would be harmful to kids. And I would say that not visiting can also be harmful to kids, right? But it really depends on the circumstance and so critically important for child welfare workers to understand the relationship between the parent and child pre incarceration. What was that relationship like? Um, and when it is really thinking about a sustained connection here, this was a parent who was actively involved in his

child's life, the separation, is really a hard one for that kid thinking about what are the creative ways in which moms and dads can stay connected, right?

(40:55):

So is that letter writing, is it video calls? Is it being able to support the incarcerated parent reading and recording a book to their child, but the worker can then, make sure it gets to the child? Um, and then being thoughtful about all of the ways in which these systems can be flexed, to support parent-child connection, if there's somebody advocating for that, and really when there is a court order that says parents and children, you know, need to be able to have contact. I think those are really important motivators for, for families to be able to, to stay connected with their kids and does force systems to be a bit bit more attentive to following those court orders as well.

Amanda Moses (41:36):

Yeah. What about sustaining .the connection for the incarcerated parent with their partner, with their co-parent, or maybe with whoever is providing care for their children?

Rebecca Schlafer (41:49):

Yeah, I think great opportunities there to encourage, like co-parenting support for one another, having conversations about, you know, developmental milestones or conversations about what's happened with the kid at school today and what, what, you know, if they're going to a doctor's appointment or if they had a parent-teacher conference and some counseling and support around co-parenting, right? A lot can happen between co-parents that that helps an incarcerated parent feel involved, right? And I think those are opportunities for workers to think about how can we help incarcerated parents stay connected to, to their, you know, alternative caregivers or their partners so that they can maintain solid relationships and then maintain access and, and supportive relationships with the kids.

Amanda Moses (42:35):

Yeah. I would imagine having that connection to both the child welfare worker and then whoever is providing care, those multiple avenues of communication are really important.

Rebecca Schlafer (42:45):

Yeah. And so hard in a system where incarcerated parents can't receive phone calls, right? And mail takes way, way, way longer to get to the incarcerated parent. And, um, the level of communication is, is not functionally bidirectional. That is incredibly challenging for incarcerated parents in these spaces. So I think that's a great way of thinking about, you know, child welfare workers can do a lot to connect with the prison case manager or the parenting coordinator at these facilities to make sure that they can have more, um, access to the incarcerated parent so that they can have more regular communication, while the parent's incarcerated, not necessarily relying on the incarcerated parent to have to try to make the phone calls or catch the worker during, you know, business hours.

Amanda Moses (43:31):

There's so much here and so much to dig through. So thank you for sharing all of this kind of maybe to try to, you know, tie this up, um, and encourage people to kind of continue thinking about how to maintain that involvement. What would you say are the things that are most important for child welfare workers to keep in mind when they're working with families who are dealing with separation incarceration?

Rebecca Schlafer (43:56):

Yeah, great question. I think first and foremost, really thinking about this is, um, an incredibly common issue that we don't think about, right? Many, many children in this state, millions of children in this country are impacted by a parent's incarceration, and there are no cookie cutter answers for this, right? Each family is unique and we really need to take time to think about the unique circumstances for what's gonna be in each child's best interest as it relates to their incarcerated parent and their family system. So I think really being mindful of the fact that this is, this is more common than we've given it credit for. I mean, something that I think is a tremendous stain on our United States sort of way of doing social problems, right? These are, this is not a, this is not a system that has done much to improve the challenges, the social challenges that our country faces. Um, and I don't think that we can incarcerate our way out of the complex social issues that we face. And so I think incredibly common issue that requires a real family centered, child centered approach to think through the unique needs for each of the families that we're working with. So those are sort of the two take homes that I would, would think through, just like the, how common it is and, how we really need to be mindful of centering kids' needs in these conversations.

Amanda Moses (45:24):

Yeah. Well, thank you so much, Rebecca. This was great.

Rebecca Schlafer (45:28):

Yeah. What a, what a great opportunity to talk about these issues. So thanks again for the invite.

Speaker 3 (<u>45:36</u>):

Thank you for listening to the early development and Child Welfare podcast series. This podcast was supported in part by the Minnesota Department of Human Service, Children and Family Services Division.