

# A Pilot Program Evaluation of Extended Visiting at Minnesota Correctional Facility - Shakopee

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## Mother & Caregiver Experiences

Full Report

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## Evaluation of the Extended Visiting Program

The Extended Visiting (EV) program serves mothers incarcerated at the Minnesota Correctional Facility–Shakopee (MCF–Shakopee) and their minor children (infancy to age 17). Through EV, mothers and children are able to participate in highly structured, child-centered visits at MCF-Shakopee. The purpose of EV is:

**“To provide offenders participating in the MCF–Shakopee parenting programs additional visiting privileges in order to build and/or maintain a nurturing relationship with their own children during the extended visits.”<sup>1</sup>**

The program is only available to mothers residing in the Anthony Unit, a privileged living unit at MCF–Shakopee, with a focus on parenting. The Anthony Unit houses only those women who have demonstrated exemplary behavior for the duration of their incarceration (see *Appendix A* for full criteria for residency in the Anthony Unit and participation in EV). Women who meet all specific criteria for residency in the Anthony Unit must then submit a formal application for residency in the unit and participation in the parenting program. In addition to meeting eligibility criteria, women, their children, and their children’s caregivers must adhere to Minnesota Department of Corrections (MnDOC) policy and procedures regarding drop off and pick up of children, appropriate attire, physical contact, and healthcare for visiting children (see *Appendix B* for the MnDOC procedures and policies associated with EV).

Extended visits occur on Saturdays from 10:45am – 2:30pm. Mothers and children spend time in the Children’s Room and in the Gymnasium. The visit is highly structured, including time for lunch, play in the gym, and weekly activities (e.g., arts and crafts) organized by individual living wings in the Anthony Unit.

Mothers incarcerated at MCF–Shakopee but not housed in the Anthony Unit visit with their children and other loved ones in the context of regular visiting. These visits (henceforth referred to as “regular visits”) are held in the formal visiting room and last approximately 1 hour. The visits offered through the EV program differ from the regular visits in several important ways. Compared to regular visiting, EV differs on four key characteristics: length, location, structure, and permissible physical contact (see *Table 1*).

Table 1. *Differences between Extended Visiting and regular visiting*

	Extended Visiting	Regular Visiting
<b>Length</b>	3.75 hours	1 hour
<b>Location</b>	Children’s Room	Visiting Room
<b>Structure</b>	Planned, child-centered activities	None
<b>Physical Contact</b>	Physical contact allowed	Limited physical contact

## Evaluation Study

Anecdotally, mothers and their children report enjoying EV. MCF-Shakopee’s internal periodical, *The Reflector*, has published pieces written by both mothers and children who have participated in EV. One mother explained the benefit of EV saying, **“The Anthony parenting program extended visiting is priceless! The Anthony program does not just provide a visit. We are actually able to teach and mother our children, and during our time together, my daughter teaches me how to be a better person and mother.”** The teenage daughter of an inmate who

<sup>1</sup> [http://www.doc.state.mn.us/DocPolicy2/html/DPW\\_Display\\_TOC.asp?Opt=302.100.htm](http://www.doc.state.mn.us/DocPolicy2/html/DPW_Display_TOC.asp?Opt=302.100.htm)

participates in EV wrote another piece that was published in *The Reflector*. The girl discussed the benefits of EV from a child's perspective, saying, **"I appreciate the parenting program because the program allows me to spend one-on-one time with my mother. I've formed relationships with other teens, their parents, and not to mention other Anthony volunteers."** She goes on to add, **"I am glad that I am able to see for myself that Shakopee is not like the prisons that I see on TV."**

Despite these promising anecdotal reports, to date, MCF–Shakopee has been unable to formally evaluate the existing EV program. A formal and systematic assessment of the benefits of and barriers to participation in EV is needed to make informed decisions on program improvement or expansion.

The current study grew from the desire of MnDOC staff to know more about participants' perceptions of the benefits and barriers of participation in the EV program. The evaluation was conducted by members of Dr. Rebecca Schlafer's research group at the University of Minnesota, in collaboration with Ms. Lori Timlin, the coordinator of the parenting program in the Anthony Unit at MCF–Shakopee. Although University researchers and MnDOC staff originally wanted to include children's perspectives, in working with the MnDOC Human Subjects Review Board, it became clear that there were barriers to including children in the current study. Thus, the current study only examines mothers' and their children's caregivers' experiences with, and perceptions of, EV. The study's 3 research aims are described below.

## Study Aims

1. Describe mothers' and caregivers' perceptions of the benefits of their participation in Extended Visiting.
2. Describe mothers' and caregivers' perceptions of the barriers to their participation in Extended Visiting and potential areas for program improvement.
3. Compare mothers' and caregivers' experiences with Extended Visiting to their experiences with regular visits.

## Method

Mothers living in the Anthony Unit who had participated in EV with at least one of their minor children were eligible to participate in the current study. The caregivers of these mothers' children were also eligible to participate.

Mothers were recruited with the help of Ms. Lori Timlin, who introduced the research opportunity to women in the unit and scheduled interested women for a one-on-one interview with University research staff. The interviews were conducted at MCF–Shakopee in the Anthony Unit. During the interview, research staff followed a semi-structured interview script including questions regarding mothers' experiences with EV, perceived benefits and barriers to participation in the program, overall satisfaction with the program, and any suggestions for improvement. Mothers were also asked to provide basic demographic information about themselves and their children (e.g., level of education, number of children, children's ages). Interviews lasted approximately 30 minutes. Prior to conducting the interview, research staff obtained written, informed consent, taking particular caution to explain that mothers' participation (or lack thereof) would not affect their relationships with the University of Minnesota or the MnDOC.

Following mothers' consent to do so, Ms. Timlin provided research staff with their children's caregivers' contact information. Research staff recruited caregivers, obtained informed consent, and conducted interviews over the telephone. As caregivers do not participate directly in the EV, but instead participate indirectly (e.g., transporting the child to and from prison, financially supporting the visits, communicating with the incarcerated parent), caregivers were asked to reflect on their experiences in this regard. Caregivers were also asked about the children's behavior before and after visits.

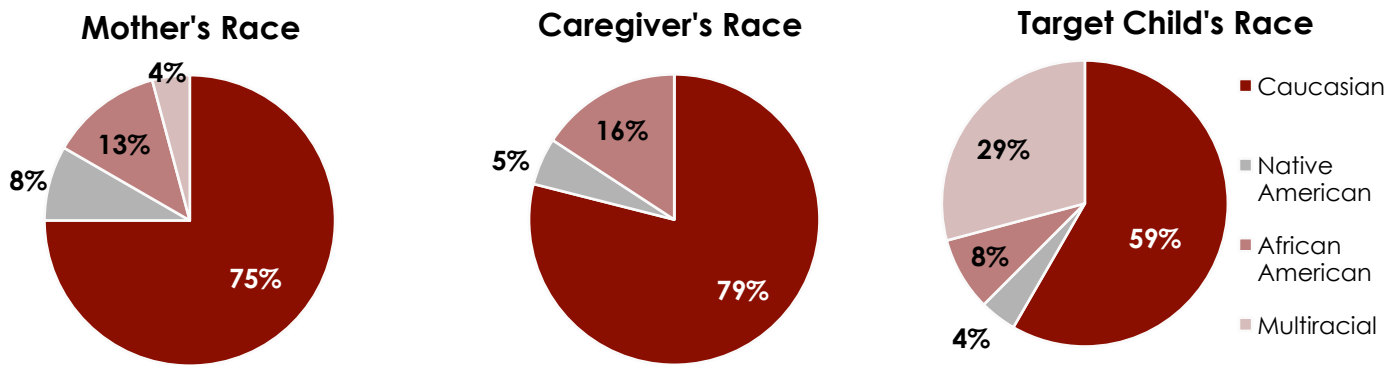
## Participant Characteristics

The final sample included 24 mothers and 19 caregivers.<sup>2</sup> Of the six caregivers who did not participate, three were not contacted at the mothers' request, one declined to participate when contacted, and two could not be contacted despite several attempts. Descriptive characteristics of mothers and caregivers are provided below.

### Mothers and Children

Participating mothers ranged in age from 26.4 to 54.4 years old, with an average age of 38.1 years old (SD = 7.3 years). Mothers were primarily Caucasian (18 women; 75%), while some were Native American (2, 8.3%), some African American (3; 12.5%), and one was multiracial (4.2%) (see *Figure 1* for additional information on participants' race and ethnicity). Women's educational status ranged from some high school to completing a post-graduate degree (MA, PhD, MD), with most women in the sample completing some college (14; 58.3%). Of the four women who reported having GEDs, three of them obtained that GED while incarcerated. The majority of women (11; 45.8%) were never married, six women (25%) were divorced, three (12.5%) were married, another three (12.5%) were partnered but not married, and one woman (4.2%) was widowed. Most women (15; 62.5%) reported earning less than \$25,000 in the year prior to their incarceration (see *Figure 2* for additional income information). Mothers were committed in a total of 18 counties both within and outside of the 7-county Metro area. See *Table 2* for additional summary descriptive characteristics of participants.

Figure 1. Race & Ethnicity of Mothers, Caregivers, and Target Children.



Mothers had an average of 3.1 (SD = 1.5) children each, with each woman having between one and seven children. In total, mothers had 148 children between them. When a mother had more than one minor child that had participated in EV, researchers chose one child at random as the subject of the interview (henceforth referred to as "target child"). Target children ranged in age from 4.1 months old to 17.4 years old, with an average age of 10.2 years old (SD = 5.3 years). Equal numbers of male (12; 50%) and female children were selected as target children. Children were more racially diverse than their mothers; 14 (58.3%) were Caucasian, seven (29.2%) were multiracial, two (8.3%) were African American, and one (4.2%) was Native American (see *Figure 3* for additional child race/ethnicity information). The majority (21; 87.5%) of target children were currently enrolled in school, ranging from preschool to 11<sup>th</sup> grade (see *Figure 3*). The remaining three children were too young to be enrolled in formal schooling.<sup>3</sup>

<sup>2</sup> Two caregivers were members of the same family, jointly providing care for a single mother's children.

<sup>3</sup> One infant under 12 months old, one infant over 12 months old, and one 3 year old child

Figure 2. Annual Income for Mothers and Caregivers

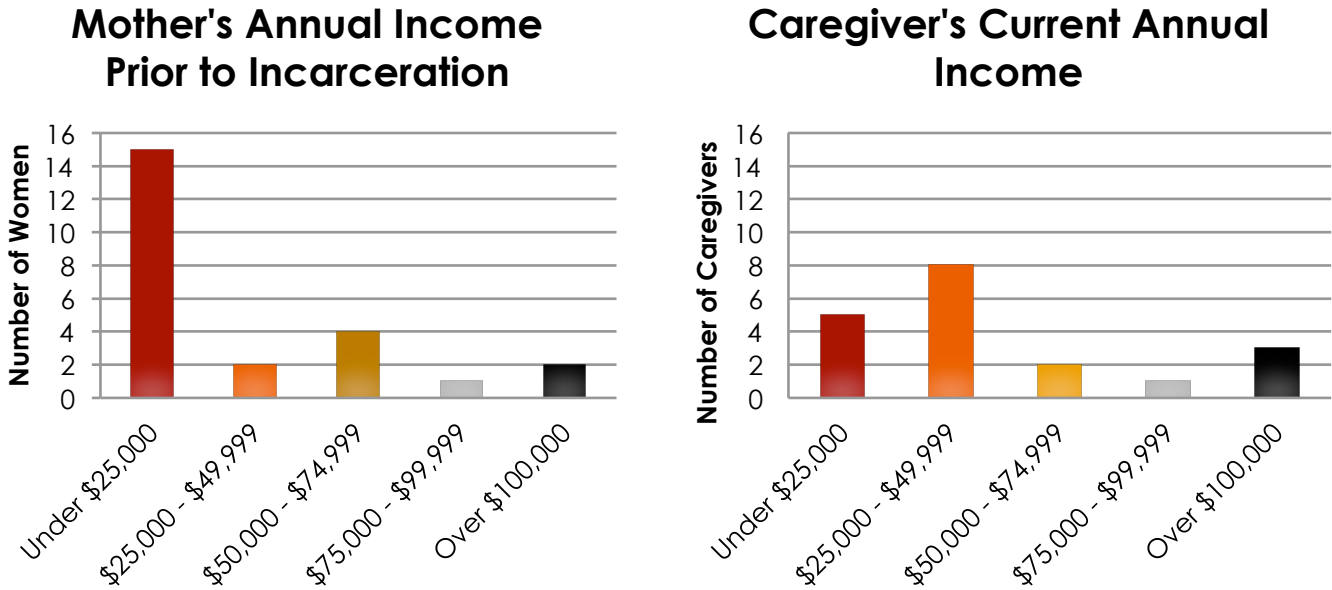


Figure 3. Target Child Grade in School

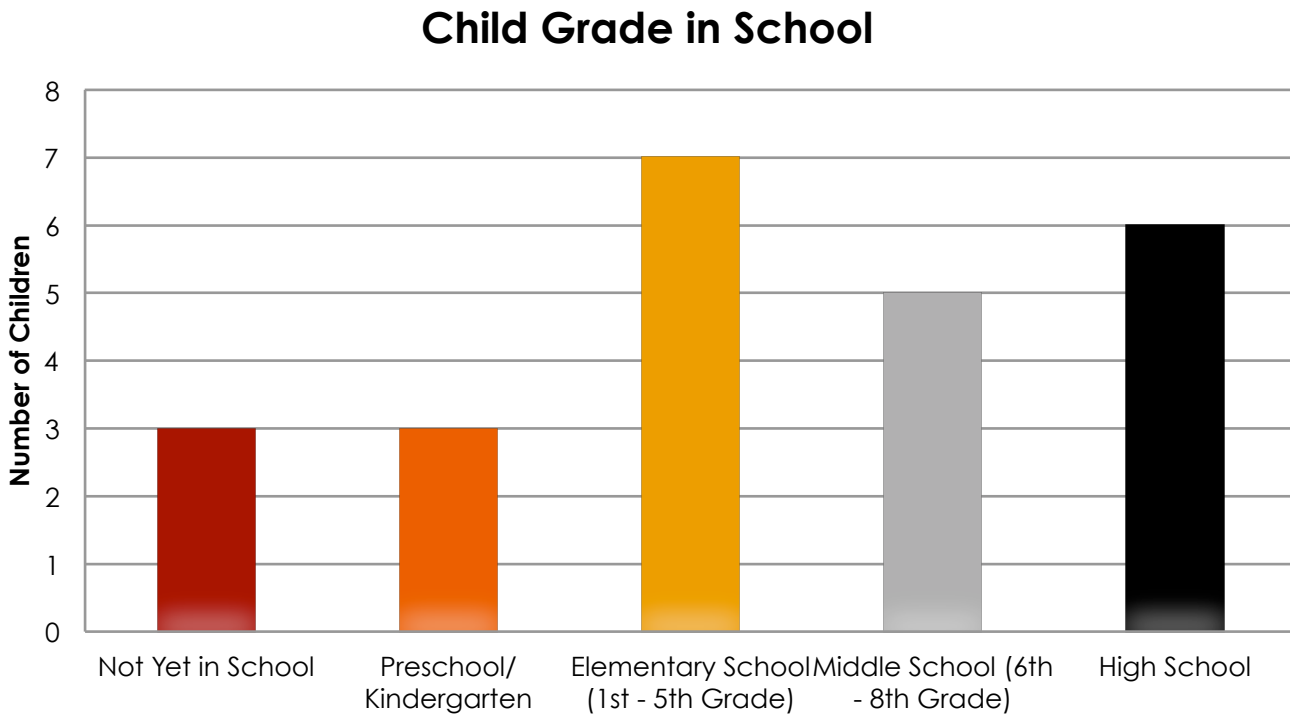


Table 2. Demographic Characteristics of Mothers, Caregivers, and Target Children

	Mothers	Caregivers	Target Children
<b>Sample Size</b>	24	19	24
<b>Female</b>	100%	73.7%	50%
<b>Age Range (in years)</b>	26 – 54 (M = 38)	27 – 68 (M = 62)	0 – 17 (M = 10)
<b>Education &lt; HS or GED</b>	4.2%	15.8%	-
<b>Employed</b>	50% <sup>4</sup>	68.4%	-
<b>Yearly Income &lt; \$25,000</b>	62.5% <sup>6</sup>	26.3%	-
<b>Avg. Sentence Length (in months)</b>	57.1	-	-
<b>Previously Arrested &gt; 5 Times</b>	41.7%	-	-
<b>Avg. Total Number of Children</b>	3.1	2.2 <sup>5</sup>	-

The vast majority (82.6%; 19 of 23<sup>6</sup>) of target children lived with their mothers prior to their mothers' incarceration. Target children had experienced anywhere from zero to eight moves since their mother was first incarcerated (for the current sentence), with an average of 1.4 moves (SD = 1.7). See Figure 4 for additional information on children's residential moves.

Figure 4. Child Moves Since Mother's Incarceration

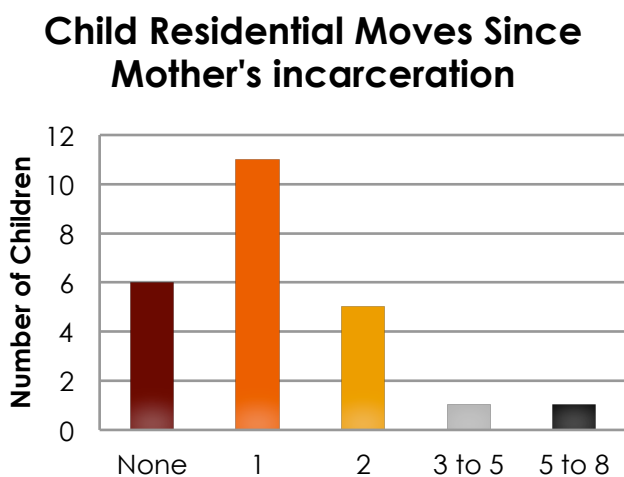
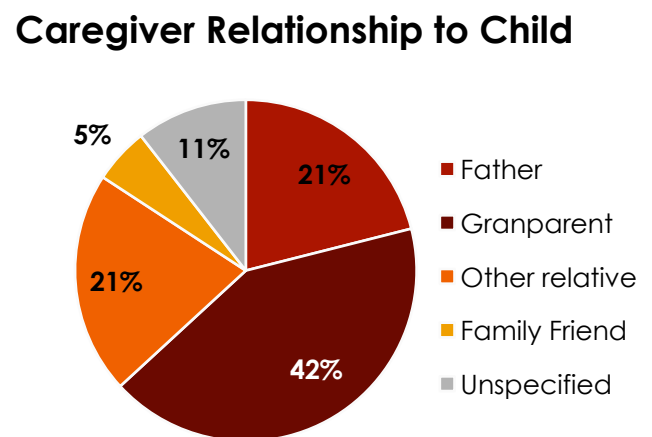


Figure 5. Caregiver Relationship to Child



<sup>4</sup> Prior to incarceration

<sup>5</sup> Total number of children in care (i.e., including biological children of caregiver and any other children in his/her care)

<sup>6</sup> Data on whether the child lived with his/her mother prior to incarceration was missing for one case.

Most mothers reported that their children visited an average of one time per month (14; 58.3%), four mothers (16.7%) reported that their children visited every other month, three (12.5%) mothers had visits every week, two (8.3%) received visits two or three times per month, and one (4.2%) mother reported visits three to five times a year. Women rated their satisfaction with how often they saw their children on a 1 – 7 scale from *extremely unsatisfied* (1) to *extremely satisfied* (7). Women reported an average satisfaction score of 5.3 (SD: 1.5, Range: 2 – 7). The vast majority of mothers (20; 83.3%) had also participated in regular visits with their children in addition to EV.

## Caregivers

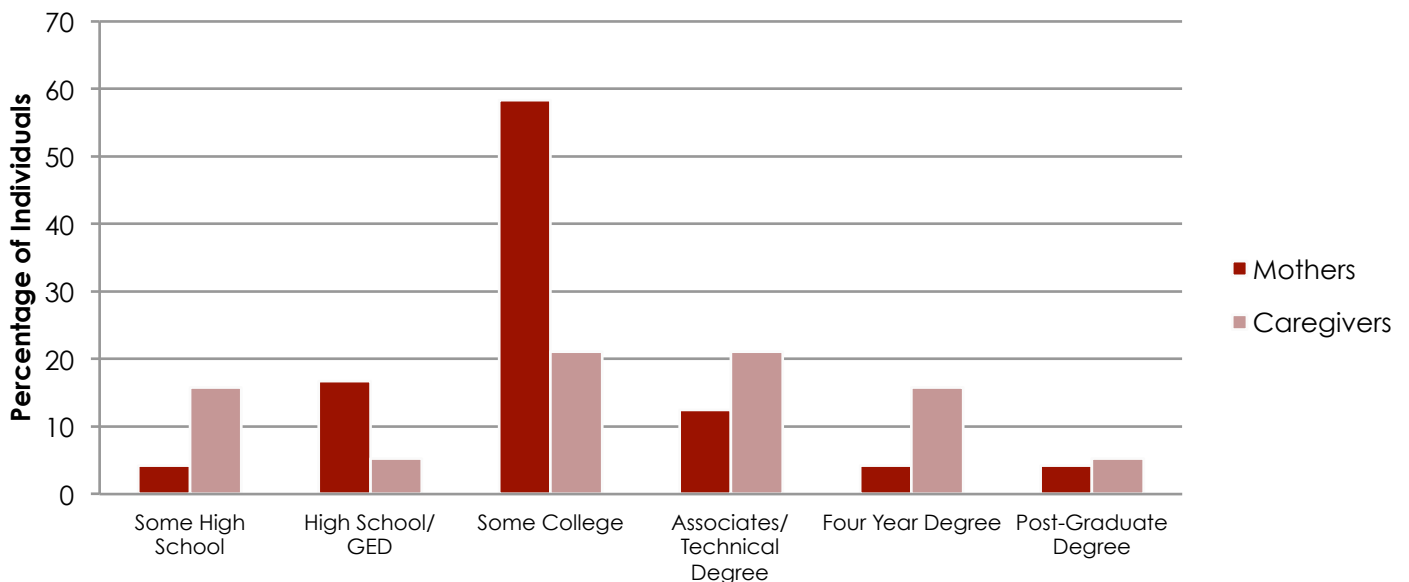
Caregivers were those individuals who were providing care for the incarcerated woman's child[ren] while she served her sentence at MCF-Shakopee. Caregivers had various relationships to the children including grandparent, father, other relative, and family friend. See *Figure 5* for additional caregiver relationship information.

Nearly three quarters (14; 73.7%) of caregivers were female. Caregivers ranged in age from 37.08 to 68.6 years old, with an average age of 52.9 years old (SD = 8.7 years). The majority (15; 78.9%) of caregivers were Caucasian, 1 (5.3%) was Native American, and 3 (15.8%) were African American. Caregivers reported providing care to an average of 2.2 (SD = 1.4) children, with each caregiver providing care for between 1 to 6 children. Over one third (7; 36.4%) of caregivers were also caring for one or more siblings of the target child. More than half (11; 57.9%) of caregivers were the sole adult living in their household. Of the remaining 8 caregivers living with other adults, 6 of those other adults were spouses of the caregiver whereas 2 were adults that nevertheless required care (i.e., an 18 year old child and an elderly parent). Most (13; 54.2%) caregivers reported a current annual income below \$50,000. Compared to mothers, caregivers were more varied in their educational attainment. See *Figure 6* for detailed educational attainment information.

Similar to maternal report of how often children visited, caregivers most often (12; 63.2%) reported that children visited their mother on average about one time per month. Likewise, about the same proportion of caregivers (15; 78.9%) and mothers (20; 83.3%) reported that the child had also participated in regular visiting.

Figure 6. Educational Attainment of Mothers and Caregivers

## Educational Attainment of Mothers & Caregivers



## Comparison to General Population

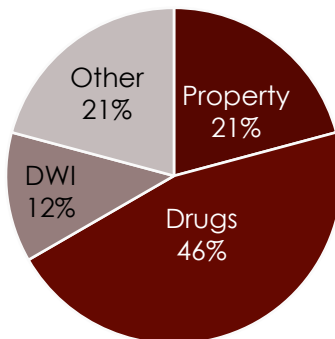
To assess the representativeness of the participants' data to women in MCF-Shakopee's general inmate population, we compared several characteristics of the participating mothers, including type of offense, age, race and ethnicity, education, and county of commit, to women in the MCF-Shakopee general population.<sup>7</sup>

### Type of Offense

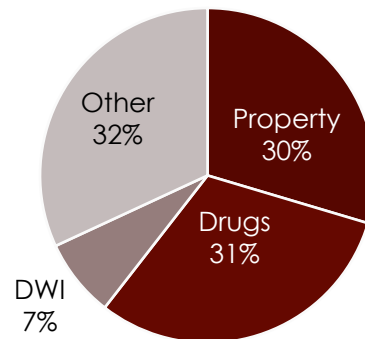
Women in the current sample were more likely to be serving a sentence for a drug related offense (46%) than women in the general population (31%). The same was true for DWI offenses, with 12% of the current sample serving a sentence for a DWI, but only 7% of the general population. Women in the current sample were less likely to be serving a sentence for a property crime (21%) than women in the general population (30%). See *Figure F* for additional information on the type of offense comparison.

Figure F. Type of offense: Extended Visiting Sample vs. General Offender Population

#### Extended Visiting



#### General Population



### Age

Women in our sample had a more restricted age range (26-54 years) than women in the general population (19-80 years). The restricted age range of the women in the current sample is expected considering the requirement that women must have a child aged 0- to 17-years old to be eligible to participate. Women on either extreme end of the general population age range (i.e., both very young and very old women) are less likely to have a child in that age range. Despite the restricted age range of our sample, women in our sample had an average age (38-years-old) that was very near women's average age (36-years-old) in the general offender population. See *Figure J* for additional information on the age comparison.

### Race/Ethnicity

Compared to women in the general population, women in the current sample were more likely to be Caucasian (59% vs. 75%). Additionally, some racial and ethnic groups (i.e., Asian and Hispanic) that were represented in small proportions (2% and 3%, respectively) in the general population were not represented at all in the current sample. See *Figure K* for additional information on the race and ethnicity comparison.

<sup>7</sup> General population data gathered from the daily inmate report on the MnDOC website (<http://www.doc.state.mn.us/>) on June 12<sup>th</sup>, 2014



Figure J. Age: Extended Visiting Sample vs. General Offender Population

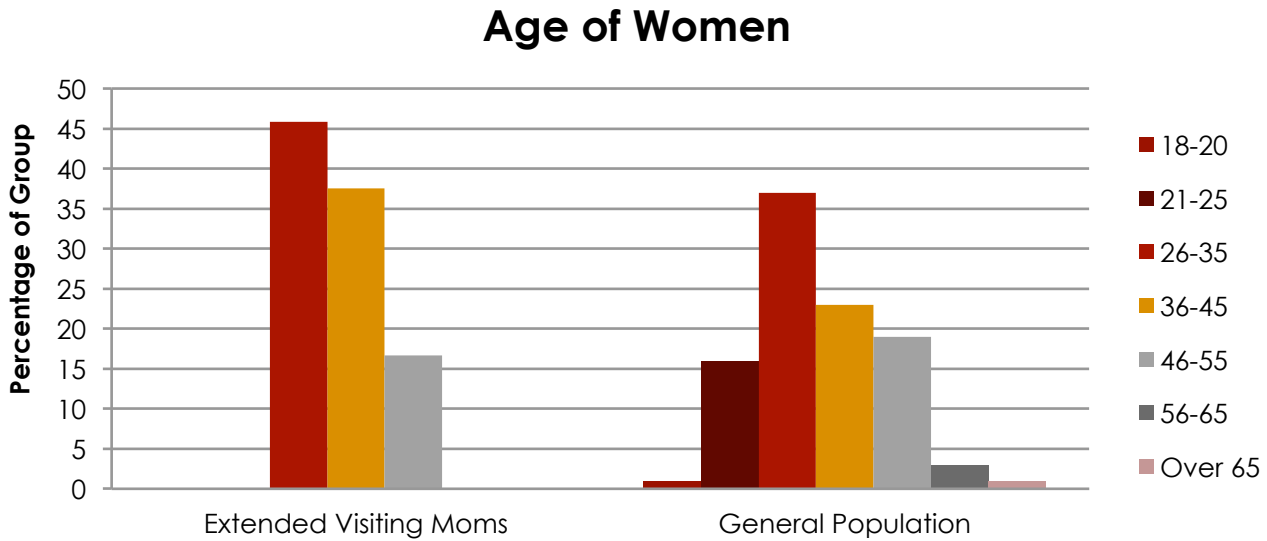
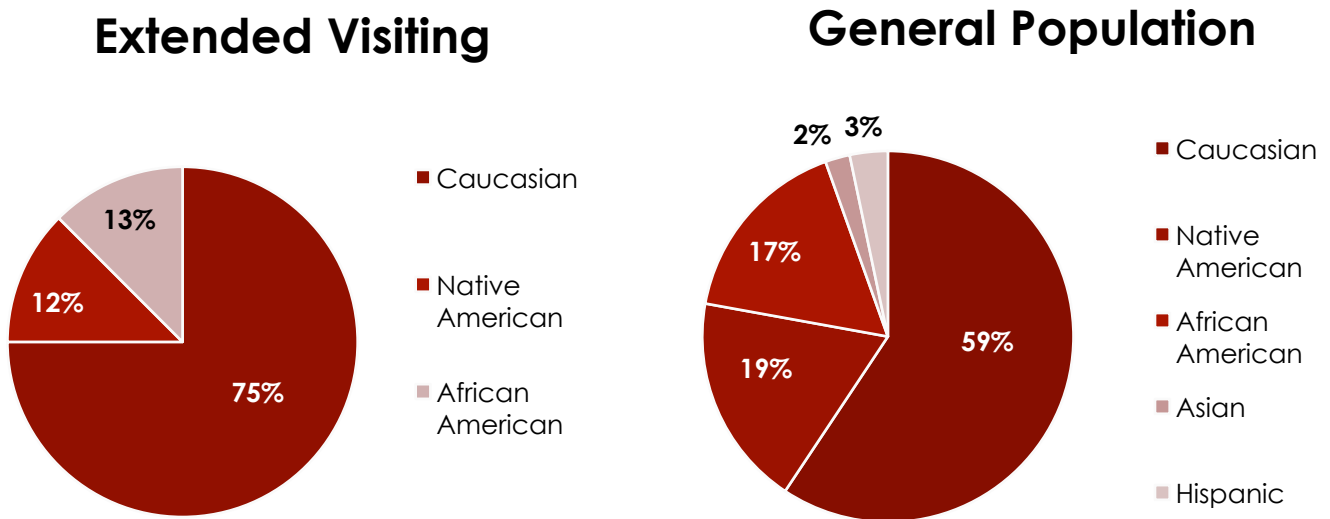


Figure K. Race & Ethnicity: Extended Visiting Sample vs. General Offender Population



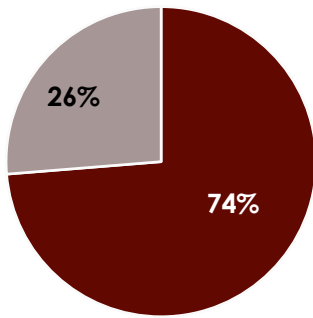
**Education**

Women in the current sample were more likely than women in MCF-Shakopee's general population to have obtained at least a high school diploma or GED (96% vs. 74%) (see Figure L).

Figure L. Education: Extended Visiting Sample vs. General Offender Population

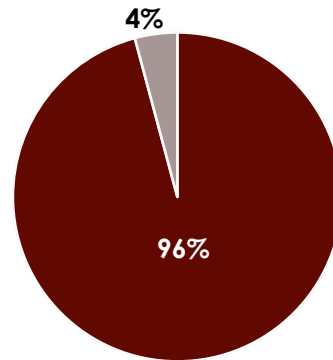
**General Population**

■ High School Diploma/GED ■ None



**Extended Visiting**

■ High School Diploma/ GED ■ None

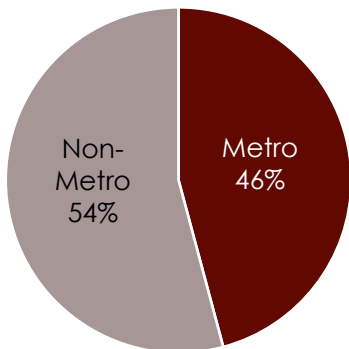


**County of Commit**

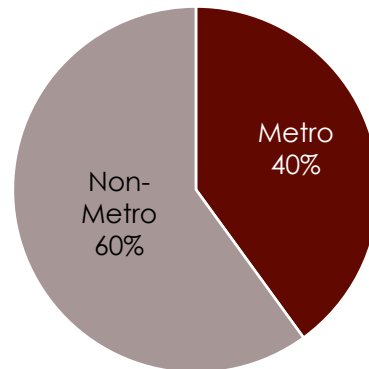
Women in the current sample were slightly less likely to have been committed in a Non-Metro county than women in the general population (54% vs. 60%). See Figure M for additional information on the county of commit comparison.

Figure M: County of Commit: Extended Visiting Sample vs. General Offender Population

**Extended Visiting**



**General Population**



## Open-ended Responses

Mothers and caregivers provided their thoughts about, and experiences with, EV in response to several open-ended interview questions. Responses to these questions were analyzed by three independent coders who grouped individual responses to each question according to qualitative themes. Following their independent grouping of responses according to theme, coders came together to compare the themes each had identified and their assignment of individual responses to those themes. Where there was disagreement, coders discussed the themes until consensus was reached. See Appendix C and D for mother and caregiver interview scripts.

The following sections of this report describe themes identified in mothers' and caregivers' answers to each open-ended interview question. Responses from a single individual for each question were often split and grouped under more than one theme. For instance, a mother's response mentioning that she enjoyed both the physical contact she was allowed to have in EV, as well as eating lunch with her children would represent two themes, one regarding physical contact and the other regarding sharing a meal. Themes for each question are discussed in order of frequency, with the most common responses listed first.

### Mothers

#### What parts of the extended visiting program do you enjoy most?

##### *Theme 1: Physical contact*

Nearly three-quarters (17 of 24; 70.8%)<sup>8</sup> of mothers mentioned enjoying the physical contact they were allowed to have with their children during EV. Women are allowed to hug, hold, kiss, and cuddle their children in EV as they would in mother-child interactions occurring outside of prison. Allowing physical contact and expression of affection between mothers and children is notably different from the restrictions on physical contact during regular visits, which includes only a brief hug and kiss on the cheek at the beginning and end of a visit.

##### *Theme 2: Provision of activities*

One-third (8 of 24; 33%) of women also mentioned enjoying the activities that are available during EV. When discussing these activities, the most frequently mentioned activities were sharing a meal with their children as well as activities available in the gym, such as being able to run around and play physical games (e.g., basketball).

##### *Theme 3: Privacy from children's caregivers and MnDOC staff*

During EV, mothers and children are afforded more privacy than during regular visits. Most notably, the children's caregivers do not participate in EV. Thus, the mother is interacting solely with her child[ren] rather than with her child[ren] and the caregiver simultaneously, a benefit that 29.2% (7 of 24) women mentioned explicitly. Given the contentious nature of some mother-caregiver relationships (e.g., ex-husbands, relatives upset with the mothers' past behavior), as well as the caregivers who are near strangers to the mother (e.g., foster parents), having the caregiver present for the entire duration of a visit, as occurs during regular visiting, can be uncomfortable and may prevent mothers and children from openly discussing certain issues. One mother noted that in EV she and her child were able to "share things more privately." Another mother noted the presence of the children's father made regular visits uncomfortable saying, "Their dad is there [during regular visits] whereas in extended visits, I'm able to read their body language and it's more open." In addition to appreciating privacy from children's caregivers, some mothers added that EV was also more intimate in terms of MnDOC staff involvement. One mother stated, "In the visiting room, I'm under surveillance and their dad is there. [In EV], it's more open."

<sup>8</sup> Percentages attached to qualitative codes for this and future questions do not always sum to 100% as codes were not mutually exclusive. Often participants' answers included more than one theme.

*Theme 4: General positivity about EV*

Many women (7 of 24; 33%) simply noted enjoying the experience of EV as a whole, stating that they enjoy, “the whole thing,” or “just having it all.”

*Theme 5: Feeling of normalcy and being a mom*

One quarter of the mothers (6 of 24) reported that during visits, they felt that they were able to reassume their roles as mothers. One mother reported that the visits make her, “still feel like their mom when they’re here.” Another mother stated that she felt, “normal again and am able to forget that I’m [in prison] for a bit.”

*Theme 6: Absence of difficult-to-follow rules in EV*

In addition to mentioning aspects of EV that they enjoyed, several women (5 of 24; 20.8%) also mentioned the difficult aspects of regular visiting that were different in EV. For instance, several mothers reported that in regular visits, young children must stay seated in chairs, a rule that is not developmentally appropriate for young children.

*Theme 7: Longer duration of visits*

A few (4 of 24; 16.7%) noted enjoying the longer duration of extended visits (i.e., over 3 hours), as opposed to the relatively short (i.e., 1 hour) regular visits.

*Theme 8: Children’s relationships with other visiting children*

Last, a few mothers (3 of 24; 12.5%) mentioned that their child has formed relationships with other children who participate in EV, and that this was a source of support for their children. Mothers appreciated that their children were able to befriend other children who could relate to the experience of having an incarcerated mother.

**Is there anything you would like to change about the extended visiting program?***Theme 1: More time with children, including a desire for overnight visits*

In suggesting potential changes to EV, mothers most frequently requested more time with their children, with many mothers expressing a desire for overnight visits with their children. In total, 15 of 24 (63%) women mentioned wanting more time with their children when asked what changes they would like to make to the EV program.

*Theme 2: More space*

A couple mothers (8.3%) mentioned the desire for more physical space. The gym was noted as sufficiently spacious, but the Children’s Room was described as cramped at times.

*Theme 3: Other suggestions*

Several other suggestions for changes that were offered only by a single participant are considered in this third category. Those suggestions included inmate access to a computer to add children to the visiting list, allowing caregivers to also participate in the EV if the mother elected to do so, lowering or eliminating the cost for photos, allowing for more unstructured time during visits, and the provision of a prison nursery for moms of infants.

**Does the day of the week that extended visits are offered (i.e., Saturday) work well for you and your children?**

Mothers unanimously agreed (100%) that Saturday visits work well for them, their children, and their children’s caregivers. Common reasons cited included caregivers’ work schedules, children’s school schedules, as well as visiting on Saturdays not causing mothers, caregivers, or children to miss religious worship services on Sundays.

**Does the time of day that extended visits occur (i.e., 10am – 2pm) work well for you and your children?**

All mothers agreed that the time of day of EV works well for them, their children, and their children's caregivers. Some mothers mentioned specifically that visits would not work if they started earlier, as an earlier start would mean that children and caregivers would need to wake up too early in morning to travel to MCF–Shakopee.

**Does the length of extended visits feel like too much time, too little time, or just the right amount of time?**

There were two distinct groups of answers regarding this question. Mothers either thought the visit was too short or that it was just the right amount of time. No mother said that 4 hours for the visit was too long.

*Theme 1: Too short*

Most mothers' responses (16 of 24; 66.7%) indicated that they felt the visit was too short. Many women noted that the time "goes by too fast," and expressed, "no mother can ever have enough time with her children."

*Theme 2: Just right*

A significant minority of mothers (8 of 24; 33.3%), on the other hand, felt that the length of EV was just right. Their explanations centered around their own preferences, as well as their perspectives of their children's preferences. Some mothers, especially those who did not live with their children prior to incarceration, felt that visits lasting longer than 4 hours would be overwhelming. One mother stated, "Being away from my kids for so long, it gets overwhelming because I'm not used to being with them that much." Other mothers noted that the length was just right, not because of their own preferences, but for reasons related to their children, such as young children's attention spans or older children's desire to also have weekend time to spend at home with friends.

**Are you satisfied with the range of activities available during extended visits or are there changes you'd like?**

More than half (14 of 24, 58%) of mothers indicated satisfaction with the activities available during EV. Some mothers offered specific suggestions for improvements. The following themes emerged in those suggestions:

*Theme 1: Desire for more unstructured time during visits*

The most common suggestion (7 of 19 suggestions for specific changes; 36.8%) for a change to the program was allowing for more unstructured time if the mother and child would rather not participate in the planned activities. Many mothers, especially those with teens, mentioned a desire for more time to "just talk" and to "spend time alone hanging out with [each other] rather than doing activities with the other moms and kids."

*Theme 2: Need for more age-appropriate activities*

Although mothers seemed satisfied with the activities provided for school-aged children, a couple mothers (8.3%) mentioned that the activities were sometimes inappropriate for teenagers or very young children (i.e., infants).

*Theme 3: Issues with photos*

While mothers were grateful to have the opportunity to take photographs with their children, a couple (8.3%) noted slight dissatisfaction around the price of photos, as well as the rules that apply to taking the photos (e.g., children are not able to sit on mother's lap for the picture).

*Theme 4: Suggestions around meal time*

A couple mothers (8.3%) suggested changes related to the meal that is provided, including allowing more time to eat, especially for younger children, as well as offering more food choices to children.

*Theme 5: Other suggestions*

Other suggestions offered by only one mother each included having the option to play outside (weather permitting) and having the opportunity to go to the library.

**How do you feel before your child[ren] come/s to visit?***Theme 1: Excited/Positive*

Most women (16 of 24; 66.7%) reported generally positive feelings in anticipation of a visit from their children, including feeling "excited," happy," and "giddy." One mother indicated her excitement by stating, "That's the only time I do my hair," while another stated that anticipating the visit "helps get me through the week."

*Theme 2: Anxious*

A fair number of mothers (15 of 24; 62.5%) also reported feeling anxious or generally worked up while anticipating a visit from their children, stating that their "heart races," that they "can't sleep," "feel antsy," and get "butterflies." Only five of these women (20.8%), however, reported feeling anxious without reporting simultaneous positive feelings.

*Theme 3: Nervous/Negative*

A smaller number of women (8 of 24; 33.3%) indicated negative feelings in anticipation of visits. For two of these women (8.3%), a negative emotion was their only reported response. The other six concurrently reported feeling other feelings (e.g., positive) in anticipation for a visit in addition to their negative emotions. Most of these negative feelings centered on uncertainty about whether or not the visit would occur as planned. One mother shared, "I try not to get excited because I never know if they'll walk through the door. I've been disappointed before." Another mother echoed these concerns stating, "You just get kind of numb because you don't know if they're going to make it."

**How do you feel during the visits, when your child[ren] is/are at the prison?***Theme 1: Happy/Positive*

The overwhelming majority (21 of 24, 88%) of mothers' answers referenced positive feelings (e.g., "happy," "awesome"). One mother stated that during visits, she is "happier than at any other time during my incarceration."

*Theme 2: Negative*

A much smaller portion of women (8 of 24, 33%) reported experiencing negative feelings during visits. Negative feelings centered on the desire to make the most efficient use of the limited time together, as well as the inevitable end of the visit. One mother said that she "feels rushed because there is a lot to cover in a visit to catch up on everyone's life." Another mother stated that she "felt sad because I know the time with them will end."

*Theme 3: Like a "normal mom"*

Several mothers (5 of 24; 20.8%) reported that during visits, they feel they are able to reassume their roles as mothers. One mom reported that the visits make her "still feel like Mom when they're here." Another mother said that, "just for that time, I feel like a regular mom. I can block everything else out and enjoy my time with them."

*Theme 4: Grateful*

Gratitude for the privilege of participating in EV was also present (3 of 24; 12.5%) in mothers' answers to this question and others throughout the interview. One mother stated that she was, "grateful for this program because I probably wouldn't be able to see [my daughter] without it."

**How do you feel after your child[ren] leave/s the visit?***Theme 1: Sad*

Half of mothers (12 of 24; 50%) reported experiencing feeling deep sadness when visits end saying they felt "heart broken," and like there is "a hole in my chest when they leave – like a part of me is missing." One particularly powerful response was: "It's awful. I've learned to brace myself or it will destroy me. We play a game where we say, 'I'm ok' 'You're ok,' and we pretend to be ok. But then they leave and you don't have to pretend anymore."

*Theme 2: Grateful*

A third of mothers (8 of 24; 33.3%) reported feeling grateful following visits, saying they were "happy I got to see my kids" and "glad for the time that we had." Several mothers indicated that although there is sadness in parting, there is also gratitude for the time they did have together. For instance, one mother said, "Of course you're like, 'Oh. They're gone,' and that's sad. But I'm just grateful that they can come at all."

*Theme 3: Neutral*

A portion of mothers (5 of 24; 20.8%) indicated neutral feelings, saying that they felt "fine" or "ok." Some of this neutrality was paired with prolonged experience of incarceration and the resultant separation from one's children. For instance, one mother said, "I've been doing this for so many years that it's just a normal thing."

*Theme 4: Exhausted*

Some mothers (5 of 24; 20.8%) indicated feelings of exhaustion, both physically and emotionally, following visits.

*Theme 5: Motivated*

Finally, a couple mothers (8.3%) reported feeling motivated following visits, saying, for instance, "I'm motivated. Like I'm not gonna do this no more. I need to get home to her."

**How do you think [child] feels during the visit?***Theme 1: Happy/Positive*

Nearly all mothers (22 of 24; 91.7%) reported that their children felt "happy," "excited," energized," and "giddy."

*Theme 2: Confused/Angry*

Some mothers (7 of 24; 29.1%) noted some negative feelings, such as confusion and anger, in their children.

*Theme 3: Sad*

A few mothers (4 of 24; 16.7%) reported that their children feel sad during the visits. All of these mothers, however, mentioned that the sadness surrounded the end of the visit, saying "she feels sad when she has to leave," and "she gets said because she wants her mom to come home with her."

### **In what ways has living in Anthony and participating in EV helped maintain or improve your ability to parent?**

#### *Theme 1: Building and sustaining a relationship with children*

Two-thirds (16 of 24; 66.7%) of mothers reported that EV allowed them to build and maintain strong relationships with their children. One mother said that because of EV, "I haven't lost the connection I have with [my daughter]." Mothers of infants were especially appreciative of the opportunity to bond with their children through their participation in the program. One mother stated, "it's the only way to have a relationship with your baby. Otherwise, they wouldn't know who you are... I had him in here." Mothers also mentioned other relationship-building benefits, such as "better," "more open", and "more honest" communication.

#### *Theme 2: Motivation to stay "on track"*

One-third of women (8 of 24; 33.3%) reported that the program and its associated benefits serve as a source of motivation. One mother shared that participating in EV is "making me a better person in controlling myself with the other offenders. In this unit, you have to be on your best behavior," while another stated that EV has, "kept me focused on what my purpose is when I leave here." A third mother claimed that EV has "kept me alive. I mean that with all sincerity. It has given me hope to hang on. I would do whatever the program asked to get the visits."

#### *Theme 3: Support from other moms*

One-third of women (8 of 24; 33.3%) stated that living in the Anthony Unit means that they are surrounded by other women focused on becoming better mothers. As one mother said, "we are all reaching for the same goals – our kids." Women are also able to get emotional support from one another, leading to less loneliness. One mother stated, "There are other parents around who we can connect with and know we aren't alone."

#### *Theme 4: Personal Growth*

Several mothers (5 of 24; 20.8%) mentioned personal growth through their residency in the Anthony Unit, including "forgiveness," "learning how to handle anger," increased patience," and "increased confidence" in parenting.

### **Do you have any other comments about extended visiting?**

#### *Theme 1: General positivity about the program*

Mothers were overwhelmingly positive in their comments about the program. One mother stated that she is, "100% supportive of it," while another emphasized that, "with [my daughter] coming such a long distance, [EV] has made the difference in us staying in contact. I'm still a part of her life. I went to prison when my youngest were 1 and 3, so I never raised them. This program is preventing that from happening again with my youngest."

#### *Theme 2: Appreciation for Ms. Timlin*

Throughout the interview, women expressed appreciation for Ms. Lori Timlin. Among the positive comments were the following: "Ms. Timlin is amazing. She does so much for us." "Thank God for Ms. Timlin. She's an advocate and voice for us." "Without her, we could have lost EV. Having a Parenting Coordinator makes all the difference."

#### *Theme 3: Specifying benefits to the children*

Many mothers concluded the interview by mentioning the benefits of the program for their children including better academic performance (e.g., "Prior to me moving to Anthony, my daughter was struggling with her grades. Since she began visiting, her grades and our relationship have improved."), reducing children's fear (e.g., "They see where I'm at and aren't scared anymore. They see mom is ok."), and allowing for children's emotionally



supportive relationships with other children they have met through EV (e.g., "My kids have made friends with other kids visiting. My daughter texts with the other girls she has met here. It's a sense of they're not alone in this.")

## Caregivers

### What are the challenges you face in bringing [child] to visit his/her mother?

Not all caregivers reported challenges, but in those who did, the following themes emerged:

#### *Theme 1: Travel time*

Most frequently (13 of 17 who reported challenges; 76.5%), caregivers noted that the long travel was a substantial challenge in bringing the child[ren] to participate in EV. This concern was especially pronounced for those who lived out of state, but was also significant for many in-state families, as many still had to drive long distances.

#### *Theme 2: Associated cost*

Traveling long distances to get to MCF–Shakopee has many associated costs including the price of gas, plane tickets, overnight accommodations (e.g., a hotel room if same day travel is impossible), and food. Additionally, as caregivers are not allowed to participate in the EV themselves, they must find something to do for the 4 hours that children are with their mothers, which was described as "difficult to do without spending money."

#### *Theme 3: Children's adverse reactions*

A few caregivers (3 of 17; 17.6%) mentioned that children's reactions to visiting posed a challenge. One caregiver shared, "a few days after, his anxiety level soared. He would get all stirred up." Another caregiver noted, "as much as she completely looks forward to seeing her mom, there was always a major behavioral issue before going."

#### *Theme 4: Strictness of drop-off rules*

A couple caregivers (11.8%) noted that the strictness of the rules surrounding the drop-off of children at MCF–Shakopee for EV was problematic, from rules surrounding appropriate clothing to issues with the Minor Escort paperwork. One caregiver explained that they were "frustrated with the check-in process," while another shared their "disappointment around a cancelled visit due to Minor Escort paperwork not being filed on time on MnDOC's end."

### How do you think [child] feels before the visit? What does he/she do that makes you think that?

#### *Theme 1: Excited/Positive*

The majority of caregivers (16 of 19; 84.2%) reported that the child was "excited," "happy," and generally positive in their anticipation of EV. Many caregivers reported that children talked excitedly about the upcoming visits. One caregiver noted that the children "get ready in the morning without me asking," the morning of the visit.

#### *Theme 2: Nervous/Anxious*

A few caregivers (4 of 19; 21.1%) reported that children feel "Nervous. Wondering how mom is going to react," and "a little anxious." All four of these caregivers, however, also reported that the child experienced some positive emotion in addition to the nervousness.

### How do you think [child] feels during the visit? What does he/she do that makes you think that?

Some caregivers (4 of 19, 21.1%) did not provide an answer to this question, as they didn't feel qualified to answer because they don't see the child during EV. Of those who did answer, the following themes emerged:

*Theme 1: Happy/Positive*

Nearly all (14 of 15; 93.3%) caregivers who did comment on the child's feelings during the visit reported that children felt happy or otherwise positive (e.g., excited) during the visit. Caregivers reported thinking children were happy during the visits because of "the way she shares stories about what they do together," and often had a "huge smile on his face."

*Theme 2: Negative*

Two caregivers (13.3%) reported negative affect in the child during the visit. Like the negative affect reported by mothers during the visit, these feelings were connected to the eventual end of the visit. For instance, one caregiver said the child was "frustrated with ending the visits."

**How do you think [child] feels after the visit? What does he/ she do that makes you think that?***Theme 1: Positive*

Following visits, many caregivers (8 of 19; 42.1%) reported that children were "happy," "looking forward to the next one," and "satisfied that they were able to go."

*Theme 2: Negative*

The same proportion of caregivers (8 of 19; 42.1%) reported negative feelings in children following the visits, including children feeling "bummed out," "depressed," "cranky," and "a little down because [mom] has to stay [in prison]"

*Theme 3: Neutral*

A third group of responses (6 of 19; 31.6%) were neither explicitly positive or negative, stating that children felt "ok," "accepting," or "used to it by now."

**In what ways, if any, do you think participating in the extended visiting program has benefitted [child]?***Theme 1: Building and maintaining a bond or relationship with mother*

Most (13 of 19, 68%) caregivers reported that the primary benefit of the program was building or maintaining the relationship between the mother and her child. One caregiver stated that because of EV, the mother and child were "still connected," while another said that the program helps the child "know her mom is in her life." Caregivers also expressed the special importance of this bonding between mothers and infants, stating that the baby "feels more secure now. The baby knows her mom. Without this program, they couldn't bond." Another caregiver shared that sentiment, adding "He was just 5 months old when she went in, without the program, he wouldn't know his mom at all."

*Theme 2: Allowing physical contact between mothers and children*

Like many mothers, several caregivers (4 of 19; 21.1%) also recognized the benefit children get from having natural physical contact with their mothers. One caregiver stated that "being able to hug [mom] as opposed to the normal visiting room where there is no contact" was a major benefit of EV. Another caregiver noted that the no contact in the regular visits "doesn't cut it."

*Theme 3: Increased communication with mom*

Lastly, some caregivers (2 of 19; 10.5%) mentioned that children benefitted from participating in EV because their communication with the mothers improved as a result. One caregiver shared, "In [EV] they get to talk about school and friends. It's much better than a 15 minute phone call. They get to really catch up."

**In what ways, if any, do you think participating in the extended visiting program has negatively affected [child]?***Theme 1: Not at all*

The majority of caregivers (11 of 19; 57.9%) responded saying that the child was not at all negatively affected by participating in the EV.

*Theme 2: Emotionally*

Of the caregivers who reported negative effects on the children, most (6 of 7 reporting negative effects; 85.7%) reported emotional difficulties such as the child being "stressed out because of the controlled environment" or, regarding the teen visits, "disturbing to their routine because they are so infrequent."

*Theme 3: Physically*

One caregiver stated that the child is physically affected, as he feels nauseous after the long car ride to MCF-Shakopee.

**Overall, do you feel like [child] has been positively or negatively affected by visiting his/her mom?**

All but one caregiver (18 of 19; 94.7%) stated that participating in EV has, overall, positively affected the child[ren]. Many caregivers enthusiastically endorsed their response, saying things like, "Definitely positive!" and "Positive. It's wonderful!"

**Do you have any other comments about extended visiting?***Theme 1: General positivity about the program*

Many caregivers (8 of 19; 42.1%) concluded the interview with positive comments in support of the program, including the following: "I really support the program and want to do anything I can to make sure it happens for other families." Other caregivers stated, "[The kids] really need those visits... It's a blessing, truly. It's like therapy for those little kids. They were so insecure when I got them, but now they're strong and happy because they see her." And, "It's good. I believe in it and hope it continues for the kids' sake. Maybe not for the parents because they are the ones who screwed up, but the kids don't deserve to suffer because of that."

*Theme 2: Desire to have all children visit simultaneously*

About one fifth (4 of 19; 21.1%) of caregivers mentioned the potential benefits of having all the children visit at the same time, especially for those caregivers providing care for children of disparate ages. For instance, one caregiver lamented the logistical and emotional challenge of the "older daughter not being able to go when her little sister can."

*Theme 3: Suggested adding more time or overnight visits*

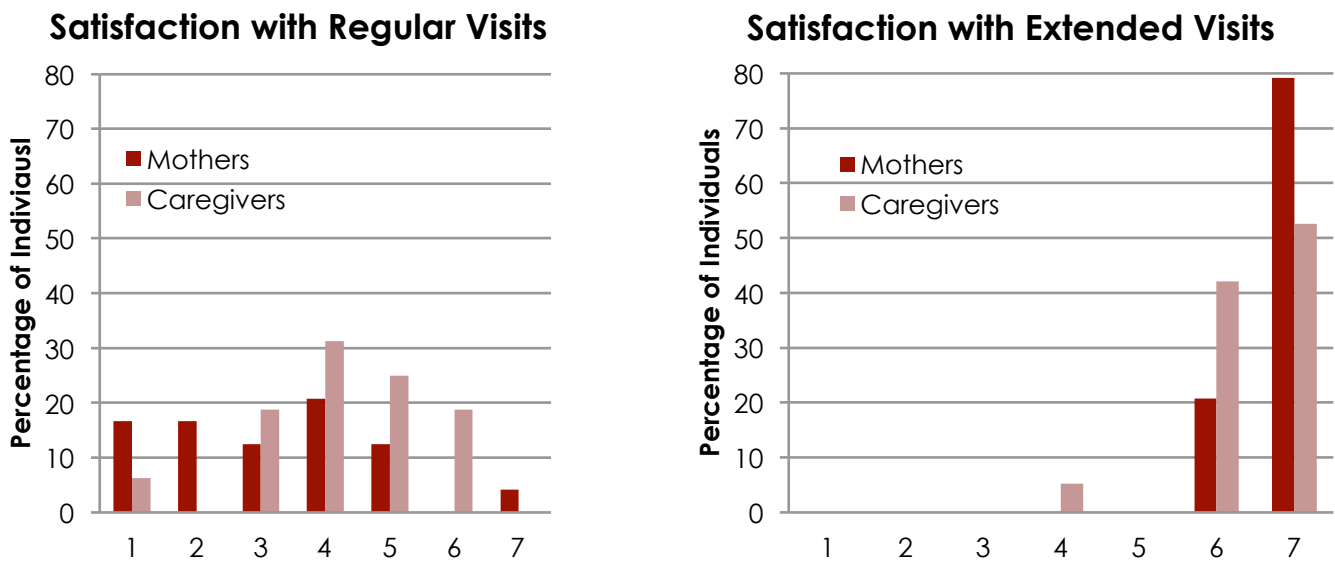
A few caregivers (3 of 19; 15.8%) echoed mothers' desires for more time visiting, including the provision of overnight visits, especially for infants. One caregiver shared, "I feel like the babies should stay overnight with their moms. This little baby is bonded to me and not his mom and there is nothing I can do about that."

## Comparison to Regular Visiting

For those families who had also participated in regular visiting in the formal visiting room (20 families), mothers and caregivers were asked to compare their experiences in EV to their experiences in regular visiting. Mothers unanimously preferred EV, with 100% of mothers reporting that they and their children preferred EV to regular visits. All but one caregiver reported the same preference (see Figure N).

"My kids didn't even want to come [to regular visits] when they couldn't touch me. It's too painful."

Figure N. Mother and Caregiver Reported Satisfaction with Regular and Extended Visits



In addition to their ratings of satisfaction with both types of visiting, those mothers and caregivers who had participated in both regular and EV were asked what type of visit they or their child preferred. Perhaps not surprisingly, all mothers who had participated in both types of visits indicated a preference for EV over regular visits. The reasons for the overwhelming preference for EV centered on the following themes:

- The physical contact allowed in EV
- The activities provided in EV
- The more comfortable and natural feeling of interactions in EV
- Privacy from the children's caregiver and from MnDOC staff
- The strictness of rules in regular visiting and the difficulty in following those rules, especially for young children.
- The extended length of time in EV

Similarly, all but one caregiver indicated that the child preferred EV to regular visits. The sole caregiver who did not indicate a preference for EV explained that the child was an infant (under 1 year old), and so they felt it was impossible to determine which type of visit the child actually preferred. Similar themes emerged in caregivers' responses when asked why children preferred EV over regular visits as had emerged in mothers' answers to the same question, including the following:

- The physical contact allowed in EV
- The strictness of rules in regular visiting and the difficulty in following those rules, especially for young children.

### Overarching Perceptions of Benefits and Barriers

Recognizing the potential importance of this program for both mothers and children, we also identified general themes running throughout mothers' and caregivers' answers to many of the interview questions in regards to benefits and barriers to participation in EV. Those themes are elaborated below.

	Mothers	Caregivers
<b>Benefits</b>	Building and maintaining a relationship with children	Building and maintaining a relationship with children
	Physical contact with children	Physical contact with children
	Motivation	General support and positivity
	Privacy from caregiver & DOC staff	
	Support of peers; both from other mothers and among the children	
	Personal growth	
<b>Barriers</b>	Desire for more time for visits, including overnight visits	Travel time
	Desire for more unstructured time during visits	Associated cost
	Need for more age-appropriate activities for infants and children	Children's adverse reactions
		Strictness of drop-off rules

## Sharing Preliminary Results

On Friday July 18<sup>th</sup>, 2014, the authors met with MnDOC staff at MCF-Shakopee to present preliminary results, discuss key findings, and consider implications of these findings. In attendance at that meeting were the following individuals: Dr. Rebecca Shlafer and graduate student Erin Casey of the University of Minnesota; Warden Tracy Beltz; Lori Timlin, Parenting Coordinator; Guy Bosch, Associate Warden of Operations; Scott Behrends, Volunteer Coordinator; Sargent Bruce Douglas; and Lieutenant Joyce Cassidy. Dr. Grant Duwe, Director of Research, appeared by phone.

At this meeting, the authors presented an executive summary of this report, as well as a presentation of the research methods, relevant findings, and implications. Given mothers' interest in learning about the results of this evaluation, those at the meeting agreed that disseminating the executive summary to the participants, as well as MnDOC staff was an appropriate and meaningful way to share the results.

Given the time that had elapsed between the completion of interviews and the release of the report (approximately 4 months), a few of the participants' concerns had already been addressed. For instance, mothers, especially those with teens, expressed a strong desire for more unstructured time during the visits. Ms. Timlin noted that unstructured time during teen visits has already been increased, a change that took place after the completion of the interviews.

The group discussed potential strategies for further supporting incarcerated mothers' relationships with their children. Several ideas were brainstormed and are summarized below.

- Enhancing the regular visiting environment to make the space more child-friendly for the many children and families that do not have the opportunity to participate in EV.
- Providing multi-media resources (e.g., a DVD describing the visiting process) to help prepare children for their visits to MnDOC facilities.
- Identifying ways to support overnight visits, while also recognizing the paramount priorities of safety and security.
- Developing a guide for caregivers with information about local resources and activities (e.g., directions to the local library) that can be utilized while they wait for children participating in EV.
- Examining recidivism rates of inmates participating in EV and comparing them to other inmates matched on key variables (e.g., age, race, parenting status, disciplinary referrals, sentence length).

## Conclusions & Future Directions

In conclusion, women and caregivers were both overwhelmingly positive about EV and preferred EV to regular visits. Mothers felt supported in the program, both through their interactions with other mothers and in their relationships with their children. This building and maintenance of strong mother-child relationships has implications for successful reintegration into the community following their release from MCF-Shakopee and directly supports the intended purpose of the EV program, as outlined in MnDOC policy.

In the original conceptualization of the project, we planned to include children's perspectives. While the current study did include mothers' and caregivers' reports on children's behavior and their interpretation of children's feelings about visitation, the current project does not include children's own perspectives of EV. Future research on EV at MCF-Shakopee, as well as research on visiting and parenting programs in general should directly assess the experiences of participating children.

## Acknowledgements

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7/29/2014

Minnesota Department of Corrections Policy Site



## Policies, Directives and Instructions M

## Minnesota Department of Corrections

<b>Instruction:</b>	300.010-1SHK	<b>Title:</b> Parenting Unit Eligibility
<b>Issue Date:</b>	11/9/10	
<b>Effective Date:</b>	11/16/10	

**AUTHORITY:** [Policy 300.010, "Correctional Facility Designation."](#)

**PURPOSE:** To provide instruction to staff and offenders regarding the criteria for living in the parenting program unit.

**APPLICABILITY:** Minnesota Correctional Facility-Shakopee (MCF-SHK)

**INSTRUCTION:** Offenders who want to participate in the parenting program unit must follow the procedures listed below.

**DEFINITIONS:** None

**PROCEDURES:**

- A. All offenders must meet the following criteria to be eligible for unit placement:
1. Offender must complete the reception and orientation (R & O) program.
  2. Offenders must be in the facility 60 days before applying for unit placement. They are eligible for transfer after 90 days in the facility. Offenders with less than 90 days remaining in the facility are ineligible for unit placement. Pregnant offenders may be placed in the unit without meeting these criteria.
  3. Offenders must be free from discipline according to the following criteria:
    - a) If the offender has received formal discipline loss of privileges, she is eligible to apply after 60 days from the date of violation.
    - b) If the offender receives a suspended segregation sentence, she must wait until the suspension time is completed to apply.
    - c) If the offender receives extended incarceration (EI), she must wait 6 months from the date of conviction before applying.
    - d) If the offender served segregation time, she must wait 6 months from the day she is released from segregation before applying.



7/29/2014

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<b>Instruction:</b>	302.100SHK	<b>Title:</b> Parenting Program Extended Visiting
<b>Issue Date:</b>	3/4/14	
<b>Effective Date:</b>	3/18/14	

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**AUTHORITY:** [Division Directive 302.100. "Visiting"](#)

**PURPOSE:** To provide offenders participating in the Minnesota Correctional Facility-Shakopee parenting programs additional visiting privileges in order to build and/or maintain relationship with their own children during the extended visits.

**APPLICABILITY:** Minnesota Correctional Facility-Shakopee (MCF-SHK)

**INSTRUCTION:** Offenders and their visiting children must follow the procedures outlined below. Offenders violating this instruction are subject to disciplinary action, visitation restrictions, and/or removal from the applicable parenting program.

**PROCEDURES:**

- A. Pick up and drop off of visiting children
  1. Process
    - a) Visiting children must be approved for the extended visit and authorized by the parenting staff on the visit request form or associated event letter.
    - b) Children must be dropped off and picked up by an approved adult, as listed on a Minor Escort form (attached) on file with the parenting coordinator. They must display valid identification during this process.
    - c) Offenders may have more than one Minor Escort form on file with the parenting coordinator for purposes of drop-offs and pick-ups only. This does not include visiting room privileges and escorts.
  2. Infant/toddler belongings may include:
    - a) One can of formula;
    - b) A pack of diapers;
    - c) A pack of baby wipes;
    - d) Over-the-counter or prescription medication (to be held by staff);
    - e) Pacifier; and
    - f) Baby bottle or sipper cup (empty).

### **Extended Visiting Shakopee: Mother Interview**

Hi [*mother's name*]. My name is \_\_\_\_\_ and I'm going to talk to you about the extended visiting program you and [*child*] participate in here at Shakopee. We won't share the answers you give us today with your child or with your child's caregiver. And, we won't give any of your individual answers to the prison staff, so you should feel free to be open and honest with us. If we find out that you seriously intend to harm yourself or your child; however, we are obligated to report this concern. If you'd rather skip a question, that is fine; just let me know and we can move to the next question. Do you have any questions before we get started?

#### **Demographic Information**

1. What is your birth date? Birthdate (MM/DD/YY): \_\_\_\_/\_\_\_\_/\_\_\_\_

2. What is your racial background [*check box for all that apply*]?

- Black/African American  
 African Native [born in Africa]  
 Asian or Pacific Islander  
 White or Caucasian  
 American Indian or Alaska native \* If yes, are you tribally enrolled?  Yes  No

**TRIBAL AFFILIATION:** \_\_\_\_\_

- Biracial or Multiracial **DESCRIBE:** \_\_\_\_\_  
 Other? **DESCRIBE:** \_\_\_\_\_  
 Don't know

3. Are you of Hispanic, Latino, or Chicano origin, for example, Mexican, Mexican American, Cuban, Puerto Rican?  Yes  No  Don't know

4. What is the highest level of education you have ever completed? \_\_\_\_\_

[*record answer and check box*]

- Elementary school  
 Middle school or junior high school grades  
 Some high school  
 High school equivalency [GED]  
 Did you earn your GED while you were incarcerated?  Yes  No  
 Graduated high school [High School diploma]  
 Some college  
 Associates/Vo-Tech Degree  
 Graduated College (B.S. or B.A.)  
 Some Graduate/Professional School

Completed Post-graduate Degree (M.A., Ph.D., MD)

5. What is your current marital status?

- Married
- Partnered, but not married
- Separated
- Divorced
- Widowed
- Never married

6. Were you employed before being incarcerated?

- Yes What was your most recent job title (be as specific as possible) \_\_\_\_\_
- No

7. In the year before you were incarcerated, what was your total household income (before taxes)?

- less than \$25,000
- \$25,000-\$49,999
- \$50,000-\$74,999
- \$75,000-\$99,999
- \$100,000 - \$124,999
- \$125,000-\$149,999
- \$150,000-\$174,999
- \$175,000-\$199,999
- Over \$200,000

8. When were you first incarcerated for this current sentence? Month: \_\_\_\_\_ Year: \_\_\_\_\_

9. How long is your current sentence? \_\_\_\_\_

10. *Anything other than life sentence:* When is your expected release date? Month: \_\_\_\_\_ Year: \_\_\_\_\_

11. How many times have you been arrested as an adult? \_\_\_\_\_

*[record answer and check box]*

- |                                       |                                      |
|---------------------------------------|--------------------------------------|
| <input type="checkbox"/> Never        | <input type="checkbox"/> Once        |
| <input type="checkbox"/> Twice        | <input type="checkbox"/> 3 - 5 times |
| <input type="checkbox"/> 5 - 10 times | <input type="checkbox"/> 10 + times  |

12. Before your current sentence at MCF-Shakopee, how many times had you previously been incarcerated in jail or prison? \_\_\_\_\_

*[record answer and check box]*

- |                                       |                                      |
|---------------------------------------|--------------------------------------|
| <input type="checkbox"/> Never        | <input type="checkbox"/> Once        |
| <input type="checkbox"/> Twice        | <input type="checkbox"/> 3 - 5 times |
| <input type="checkbox"/> 5 - 10 times | <input type="checkbox"/> 10 + times  |

13. I'd like to know a bit more about each of your children. Can you tell me the initials and age of each of your children? *[For each child, probe whether mother lived with child at the time of her incarceration, if the child has ever visited the mother at Shakopee, and if the child has ever participated in an extended visit.]*

Child Initials	Age	Lived with Before Incarceration?	Ever Visited?	Ever had an Extended Visit?
		Y N	Y N	Y N
		Y N	Y N	Y N
		Y N	Y N	Y N
		Y N	Y N	Y N
		Y N	Y N	Y N
		Y N	Y N	Y N
		Y N	Y N	Y N
		Y N	Y N	Y N

*\*Indicate on table which child is participating in the interview about extended visiting.*

The next set of questions is about *[name of target child who is participating in the interview about extended visiting]*.

14. What is *[child]*'s birth date? Birthdate (MM/DD/YY): \_\_\_\_/\_\_\_\_/\_\_\_\_

15. Is *[child]* a boy or a girl?  Boy  Girl

16. What is *[child]*'s racial background *[check box for all that apply]*?

- Black/African American
- African Native [born in Africa]
- Asian or Pacific Islander
- White or Caucasian
- American Indian or Alaska native \* If yes, is your child tribally enrolled?  Yes  No

**TRIBAL AFFILIATION:** \_\_\_\_\_

Biracial or Multiracial **DESCRIBE:** \_\_\_\_\_

Other? **DESCRIBE:** \_\_\_\_\_

Don't know

17. Is *[child]* of Hispanic, Latino, or Chicano origin, for example, Mexican, Mexican American, Cuban, Puerto Rican?  Yes  No  Don't know

18. What is *[child's]* current grade in school? \_\_\_\_\_

19. Did *[child]* change homes as a result of your current incarceration?  Yes  No

20. How many times has [child] moved homes since you've been in prison? \_\_\_\_\_

**Visit Information**

21. Before today, when was the last time [one of] your child[ren] visited you?

- Last week
- One month ago
- 4 - 5 months ago
- More than a year ago
- 2 - 3 weeks ago
- 2 - 3 months ago
- 6 - 12 months ago
- Never

a. Was that as part of the extended visiting program or a regular visit in the visiting room?

- Extended Visit
- Regular Visit

22. How often, on average, do your child(ren) visit you?

- Once a week
- Once a month
- 3 - 5 times per year
- Less than once a year
- 2 - 3 times per month
- Every other month
- 1 - 2 times per year
- Never

23. How satisfied do you feel with how often you see your (children)?

1	2	3	4	5	6	7
Extremely unsatisfied	Quite unsatisfied	Slightly unsatisfied	Neither satisfied nor unsatisfied	Slightly satisfied	Quite satisfied	Extremely satisfied

24. What parts of the extended visiting program do you enjoy most?

25. Is there anything you would like to change about the extended visiting program?

26. Can you talk specifically about the day of the week extended visits are offered on? Do Saturdays work well for you and your child[ren]? [*Probe - why or why not?*]

27. How about the time during the day that the extended visits occur? Does 10am – 2pm work well for you and your child[ren]? [*Probe – why or why not?*]
28. Can you talk specifically about the length of the visits? Does 4 hours feel like too much, too little, or just the right amount of time? [*Probe – in what way does it feel like...*]
29. Can you talk specifically about the activities available to you and your child[ren] during extended visiting? Are you satisfied with the range of activities or would you like to make changes?
30. How do you feel *before* your child comes to visit?
31. How do you feel *during* the visit, when you're child is at the prison?
32. How do you feel *after* your child leaves the visit?
33. How do you think [*child*] feels during the visit?

34. Have you also participated in regular visits in the visiting room with [child] or any of your other children?

Yes  No

a. *If yes:* Which type of visiting do you prefer?  Extended visits  Regular visits

i. *If extended visits:* What do you like better about the extended visits?

ii. *If regular visits:* What do you like better about the regular visits?

35. In what ways has living in the Anthony Unit and participating in extended visiting helped maintain or improve your ability to parent?

36. What other things could the Anthony Unit, the extended visiting program, or MCF-Shakopee do to help maintain or improve your ability to parent?

37. Rate your overall satisfaction with regular visiting in the visiting rooms.

1	2	3	4	5	6	7
Extremely unsatisfied	Quite unsatisfied	Slightly unsatisfied	Neither satisfied nor unsatisfied	Slightly satisfied	Quite satisfied	Extremely satisfied

38. Rate your overall satisfaction with extended visiting in the Anthony Unit.

1	2	3	4	5	6	7
Extremely unsatisfied	Quite unsatisfied	Slightly unsatisfied	Neither satisfied nor unsatisfied	Slightly satisfied	Quite satisfied	Extremely satisfied

39. Do you have any other comments or things you'd like us to know about extended visiting?

**Thank you for your time. We appreciate you telling us about your experience.**

### **Extended Visiting Shakopee: Caregiver Interview**

Hi [*caregiver*]. My name is \_\_\_\_\_ and I'm going to talk to you about the extended visiting program [*child*] and his/her mother participate in here at Shakopee. We won't share the answers you give us today with [*child*] or with [*child*]'s mother. And we won't give any of your individual answers to the prison staff, so you should feel free to be open and honest with us. If we find out that you seriously intend to harm yourself or [*child*]; however, we are obligated to report this concern. If you'd rather skip a question, that is fine; just let me know and we can move to the next question. Do you have any questions before we get started?

#### **Demographic Information**

1. What is your birth date? Birthdate (MM/DD/YY): \_\_\_\_/\_\_\_\_/\_\_\_\_

2. Gender of caregiver: Female --- Male (*circle one*)

3. What is your racial background [*check box for all that apply*]?

Black/African American

African Native [born in Africa]

Asian or Pacific Islander

White or Caucasian

American Indian or Alaska native \* If yes, are you tribally enrolled?  Yes  No

**TRIBAL AFFILIATION:** \_\_\_\_\_

Biracial or Multiracial **DESCRIBE:** \_\_\_\_\_

Other? **DESCRIBE:** \_\_\_\_\_

Don't know

4. Are you of Hispanic, Latino, or Chicano origin, for example, Mexican, Mexican American, Cuban, Puerto Rican?  Yes  No  Don't know

5. What is the highest level of education you have ever completed? \_\_\_\_\_

[*record answer and check box*]

Elementary school

Middle school or junior high school grades

Some high school

High school equivalency [GED]

Graduated high school [High School diploma]

Some college

Associates/Vo-Tech Degree

Graduated College (B.S. or B.A.)

Some Graduate/Professional School

Completed Post-graduate Degree (M.A., Ph.D., MD)



6. What is your current marital status?

- Married
- Partnered, but not married
- Separated
- Divorced
- Widowed
- Never married

7. Are there other adults living in the same house? *Check all that apply.*

- no other adults
- husband/wife                       boyfriend/girlfriend (romantic partner)
- child's grandparent               aunt or uncle
- other : \_\_\_\_\_

Total number of **other** adults (not including you) living with your family: \_\_\_\_\_

8. Are there other children living with you?

- no other children                       foster children
- my own children                       [child]'s siblings
- Friend's children                       [child]'s relatives (not my own children)
- other : \_\_\_\_\_

Total number of **other** children (not including *child*) living with your family: \_\_\_\_\_

9. What is your relationship to [child]?

- Biological mother                       Biological father
- Stepmother                               Stepfather
- Adoptive mother                       Adoptive father
- Foster mother                           Foster father
- Grandmother                           Grandfather
- Aunt                                       Uncle
- Older sister                               Older brother
- Romantic partner of parent               Other (specify): \_\_\_\_\_

10. Are you currently employed? This includes temporary work and self-employment.

- Yes...Current job title (be as specific as possible) \_\_\_\_\_
- No

11. What was your total household income in 2012 (before taxes)?

- less than \$25,000
- \$25,000-\$49,999
- \$50,000-\$74,999
- \$75,000-\$99,999
- \$100,000 - \$124,999
- \$125,000-\$149,999
- \$150,000-\$174,999
- \$175,000-\$199,999
- Over \$200,000

The next set of questions is about [*name of target child who is participating in the interview about extended visiting*].

12. What is [*child*]'s birth date? Birthdate (MM/DD/YY): \_\_\_\_/\_\_\_\_/\_\_\_\_

13. Child's gender:  Boy  Girl

14. What is [*child*]'s racial background [*check box for all that apply*]?

- Black/African American
- African Native [born in Africa]
- Asian or Pacific Islander
- White or Caucasian
- American Indian or Alaska native \* If yes, is your child tribally enrolled?  Yes  No

**TRIBAL AFFILIATION:** \_\_\_\_\_

Biracial or Multiracial **DESCRIBE:** \_\_\_\_\_

Other? **DESCRIBE:** \_\_\_\_\_

Don't know

15. Is [*child*] of Hispanic, Latino, or Chicano origin, for example, Mexican, Mexican American, Cuban, Puerto Rican?  Yes  No  Don't know

16. What is [*child's*] current grade in school? \_\_\_\_\_

17. How many times has [*child*] moves home since his/her mother has been in prison? \_\_\_\_\_

### **Visit Information**

18. Before today, when was the last time [*child*] visited his/ her mother?

- Last week
- One month ago
- 4 - 5 months ago
- More than a year ago
- 2 - 3 weeks ago
- 2 - 3 months ago
- 6 - 12 months ago
- Never

- a. Was that as part of the extended visiting program or a regular visit in the visiting room?  
 Extended Visit       Regular Visit

19. How often, on average, do you bring [*child*] to visit his/ her mother?

- |  |  |
|--|--|
| <input type="checkbox"/> Once a week           | <input type="checkbox"/> 2 – 3 times per month |
| <input type="checkbox"/> Once a month          | <input type="checkbox"/> Every other month     |
| <input type="checkbox"/> 3 – 5 times per year  | <input type="checkbox"/> 1 – 2 times per year  |
| <input type="checkbox"/> Less than once a year | <input type="checkbox"/> Never                 |

20. What are the challenges you face in bringing [*child*] to visit his/ her mother?

*[Allow free response then probe the issues listed below]*

a. Travel Time

b. Cost incurred

c. [*child*]'s reaction

21. How do you think [*child*] feels before the visit?

*[Allow free response and then probe for concrete behaviors by asking what the child does that makes the caregiver think he or she feels a certain way (e.g., excited or nervous because the child paces around)]*

a. What does s/he do that makes you think that?

22. How do you think [*child*] feels during the visit?

*[Allow free response and then probe for concrete behaviors]*

a. What does s/he do that makes you think that?

23. How do you think [*child*] feels after the visit?

*[Allow free response and then probe for concrete behaviors]*

a. What does s/he do that makes you think that?

24. In what ways, if any, do you think participating in the extended visiting program has benefitted [*child*]?

25. In what ways, if any, do you think participating in the extended visiting program has negatively affected [*child*]?

26. Overall, do you feel like [*child*] has been positively or negatively affected by visiting his/ her mom?

27. Have you also brought [child] to participate in normal visits in the large visiting room?

Yes  No

a. *If yes*: Which type of visits do you think [child] prefers?  Extended visits  Regular visits

i. *If extended visits*: What do you think he/she likes better about the extended visits?

ii. *If regular visits*: What do you think he/she like better about the regular visits?

28. Rate [child]'s overall satisfaction with regular visiting in the visiting rooms (*if applicable*).

1	2	3	4	5	6	7
Extremely unsatisfied	Quite unsatisfied	Slightly unsatisfied	Neither satisfied nor unsatisfied	Slightly satisfied	Quite satisfied	Extremely satisfied

29. Rate [child]'s overall satisfaction with extended visiting in the Anthony Unit.

1	2	3	4	5	6	7
Extremely unsatisfied	Quite unsatisfied	Slightly unsatisfied	Neither satisfied nor unsatisfied	Slightly satisfied	Quite satisfied	Extremely satisfied

30. Do you have any other comments or things you'd like us to know about extended visiting?

**Thank you for your time. We appreciate you telling us about your experience.**