Motherhood and Pregnancy Behind Bars

Texas Must Rethink How It’s Treating Mothers and Families

Texas Center for Justice & Equity
Solutions for Safe, Healthy, Just Communities

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Designed by Mandi Mobley

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Introduction

The incarceration of women – and, especially, mothers – fails to get the attention it deserves, even as the national spotlight continues to shine on over-policing, criminalization, and racial inequities. But women’s unique experiences and the consequences of female incarceration must be elevated in that narrative so we can collectively work towards reducing the rate of women going inside.

This is important for many reasons. The criminal legal system operates in ways that are racist and gendered – so while incarceration is brutal for every person caged in a cell, women face additional negative consequences, particularly women from communities of color and those in the LGBTQIA+ community.

This report explores how female incarceration, specifically in the context of motherhood and pregnancy, has ripple effects on their children and families, has long-term impacts on their own health, and is discriminatory – which, in turn, contributes to the narrative of “unfit motherhood” that extends beyond the criminal legal system and compounds existing inequalities.

This report also seeks to highlight the experiences of women, motherhood, and incarceration from a Black feminist and intersectional perspective. That is, Black feminist scholars emphasize the importance of understanding social problems with an intersectional approach that underscores the gendered and racialized experiences of Black women, which are often invisible in mainstream narratives. Incarcerated Black women face deeper hurdles related to structural inequities and institutionalized racism. This report will emphasize how the criminal legal system is especially punitive and silencing for Black women.

Disclaimers & Definitions

While research highlights the disparate and inhumane realities related to incarceration, those realities are often centered around the cisgender male experience. Cisgender women, transgender individuals, and non-binary individuals have uniquely negative experiences within the carceral system.

Although this report contains gendered language and focuses mostly on the experiences of women as mothers, trans and non-binary Texans face unique struggles when it comes to pregnancy and healthcare, parenthood, and incarceration. Because there is limited research on trans and non-binary individuals, the focus of this report will be skewed toward cisgender women. However, we honor the experiences of our trans and gender-nonconforming neighbors and their incredibly difficult and complex experiences in the criminal legal system and healthcare system at large.

This report does not aim to diminish the experiences of men, especially Black men who are routinely and disproportionately punished through the carceral system. Rather, we hope to elevate the experiences of women and women of color, which have been historically de-emphasized.
Let’s Talk About Women Behind Bars in the U.S.

» America is currently responsible for 30 percent of the world’s incarcerated female population (approximately 215,000 women), despite constituting only four percent of the global population of women.³

» Despite overall declining trends in crime and the fact that men are still incarcerated at disproportionate rates compared to women,⁴ the female incarceration rate has grown at a faster rate than men.⁵

» Women face structural barriers that drive them into incarceration – including poverty, homelessness, educational inequality, poor mental healthcare, and harsh drug prosecution.⁶

» Women who enter prison also report extensive trauma histories, which is only exacerbated while confined and without access to support networks or mental health services.⁷

» Women behind bars experience worse health outcomes than men, and many may experience monthly menstruation, pregnancy, birth, and motherhood – all of which compound the experience of incarceration in both the short and long term.⁸

» More than half of the incarcerated female population is women of color.⁹ Of the Black female incarcerated population, single Black mothers are the most likely to serve a sentence.¹⁰

» Estimates show between five and 10 percent of women in the U.S. report pregnancies upon entry to prison.¹¹
Now, Let’s Focus on Women Behind Bars in Texas

» As of February 2022, just over 8,700 women were incarcerated in the state corrections system.¹²

» While Black women comprise roughly 6.5 percent of Texas’ overall population,¹³ they make up 23 percent of the imprisoned female population,¹⁴ a severe overrepresentation.

» The large majority of incarcerated women are mothers.¹⁵

» More than 70 percent of women in Texas prisons have been sentenced to 5 years or more; nearly 45 percent of the incarcerated female population have been sentenced to 10 years or more.¹⁶

» In 2020, more than 120 women gave birth while in Texas prisons.¹⁷

“I would estimate that well over 90% of the women I knew in [Texas’ prison system] had experienced some form of trauma, whether it was domestic violence, sexual assault as a child or adult, or both. For these women, the very environment and culture in prison is traumatic, daily. The guards scream at you. The dorms are deafeningly loud. There are ways you can respond to this trauma, but it never really goes away.”

— Laurie Pherigo

PICTURE THIS

When a person is placed on probation, they must adhere to a wide variety of conditions or risk being “revoked” and sent to prison or jail. Not only are these conditions financial, but they also require significant time and coordination. For example, a person on probation must routinely check in with their probation officer and attend mandated meetings, which requires requesting time off work, finding childcare, finding transportation, and paying costly fines and fees. Especially for individuals who are the main or sole caretaker of a child, these requirements can snowball into something unachievable, which often leads to violations of their conditions and, in turn, incarceration. This is one common way in which inequality can drive incarceration in highly discriminatory ways.
What Does Women’s Incarceration Mean for Children?

Two-thirds of incarcerated mothers are the primary caregivers to young children, which means childhood outcomes are heavily affected by a parent’s incarceration.18

And given that Black women are over-represented in the incarcerated female population, that means a generation of Black children is especially impacted by their mother’s incarceration. In fact, Black children are over six times more likely to have experienced parental incarceration than white children.19

These are examples of the severe impacts of parental incarceration on children:

**Poor school performance.** Parental incarceration negatively affects a child’s school performance and mental health, potentially leading to suspension or expulsion from school.20 Children have also been shown to be punished and labeled in the classroom for their parents’ incarceration.21

**Poor health outcomes.** The consequences of losing a parent to incarceration can include serious mental, physical, emotional, and behavioral health problems,22 including psychological strain, depression, antisocial behavior, and, later, economic hardship and substance use23 that only perpetuate existing health impacts.

**Placement in foster care.** A mother’s incarceration is more associated with a child being placed into foster care than a father’s incarceration.24 In fact, incarcerated women are the most likely population to lose custody of their children,25 and empirical evidence has shown that, within the population of incarcerated mothers, approximately 70 percent of them has some parental rights taken away.26

Until 2021, when House Bill 2926 became law in Texas [see “Spotlight” on page 5], parents whose parental rights were terminated due to incarceration lost those rights permanently. The mother would be given an order forbidding contact their child(ren), often resulting in the child(ren) remaining in foster care until aging out of that system, or living without permanent guardianship and simply bouncing from one relative to another.

**Generational cycles of incarceration.** A parent’s incarceration can contribute to system involvement among their children. One study...
In 2021, the Texas Legislature passed House Bill 2926, which gives formerly incarcerated people a path to reinstate their parental rights. This is critical: Estimates show approximately 5,000 children in Texas are separated from parents whose rights have been terminated, and they are often left languishing in the state’s foster care system, called the Department of Family Protective Services (DFPS). But DFPS suffers from chronic crises – from hundreds of children sleeping in DFPS offices every night to staffing shortages.

And because many children do not have a family member or other caretaker to live with, they remain in the foster care system for the duration of their youth, until they ultimately age out of foster placement – all of which carries its own trauma.

HB 2926 provides an avenue for children to reunite with their parents, after those parents have taken steps to create a safe, loving home. While this legislation takes Texas in the right direction, more work must be done to improve outcomes for children of incarcerated parents.
This is What We’re Doing When We Lock Up Pregnant Women and Mothers

Normal challenges with pregnancy and motherhood are worsened behind bars, making incarceration uniquely detrimental to women.

**Long-lasting health impacts.** Incarceration is the most extreme and long-lasting example of a high-stress life event, which carries with it negative health outcomes – a factor that already disproportionately affects people of color and other marginalized populations.

And because mothers typically bear greater responsibility for child rearing than fathers, they are more likely to report negative mental health, substance abuse, and other adverse experiences related to parenthood and incarceration that could have lasting effects on them and their parenting abilities.

**Poor prenatal care and problems at birth.** Incarcerated women are less likely to receive proper medical care (sonograms and regular doctor’s appointments) while pregnant compared to their non-incarcerated counterparts. Incarcerated pregnant women are also more likely to have complications in birth that lead to cesareans and have babies born at a low birthweight.

**Separation at birth.** In Texas, an incarcerated woman can be separated from her infant as early as three days after she gives birth, unless she is participating in the state’s Baby and Mother Bonding Initiative (BAMBI) program, which allows an incarcerated mother and her infant to bond in a residential facility for up to 12 months, with longer stays considered on a case-by-case basis. However, the BAMBI program has strict requirements and limited capacity, so most new mothers in Texas prisons give birth and must surrender their newborns within a matter of hours or days. This prevents babies from receiving the critical benefits that accompany attachment to their mothers, affecting the social, emotional, and cognitive development that has long-term impacts on a child’s mental health, resilience, and independence.

**Lack of postpartum care and visitation.** Women who are escorted to hospitals for their births typically return to incarceration anywhere

“I didn’t know I was pregnant when I got arrested, and I was shocked when I found out. My first thought was, what is going to happen to my baby? You are a prisoner, a number, not a human, not a pregnant woman. What I was going through wasn’t important to them. Being separated from my daughter like that sent me into a deep depression. I know I committed a crime and had to serve my time, but I did the wrong, not my child.”

— Angelica Rangel
from 24 hours to two days later, where they have limited access to postnatal resources like pads and, outside of the BAMBI program, no access to breast pumps.\textsuperscript{37}

Additionally, many facilities heavily limit the physical access that women have with their children during visitations, including through militarized patrolling of visitation rooms, which can affect postpartum depression and bonding with their children.\textsuperscript{38}

**Lack of treatment, nutrition, and reentry planning to prepare for successful parenthood in the long term.** Corrections facilities provide limited access to physical and mental healthcare, nutritional meals, and sufficient resources and training programs that would allow women to prepare to make livable wages for their families following incarceration.\textsuperscript{39}

“Visitation was one of the hardest parts of my mom’s incarceration. I always had to find someone to take me to see her. Even then, I could only see her on the screen. There was no face-to-face visitation. I remember just looking at this fuzzy screen and crying. My mom was trying to console me, but she couldn’t even wipe the tears from my eyes. The visits themselves were traumatizing.”

— Destiny Harris

**PICTURE THIS**

A woman who has just given birth is placed in solitary confinement for crying because her baby was taken from her at the hospital, while she was returned to the prison unit. The woman wails for days and, within a week, tries to commit suicide while in solitary confinement. [Based on true events in 2018.] In a courtroom, a person can be sentenced to a harsher punishment if they do not show signs of remorse through emotion – especially the case for women. However, we punish women who have just given birth for being emotional, creating severe consequences for expressing that emotion. The stigma is embedded in prison culture that it is offensive to the staff for a woman to cry after losing her child.
“Fitness” for Motherhood: The Racial Implications are Real

Cultural norms about parenthood and “fitness” have negative repercussions for parents of color. For example, early pregnancy is often perceived as having negative moral implications for those of lower socioeconomic status and people of color, a perception rooted in racist and classist ideology. An incarcerated woman may hold several identities that place her into this box.

Although pregnancy and motherhood negatively affect incarcerated women, generally, these overlapping experiences are decidedly racialized. “Racialization” is a term used to describe the differences in experiences or occurrences of something across race. In this report, we use racialization to acknowledge that, although all mothers, pregnant persons, or individuals in the female carceral system experience unique hardships, not all experiences are the same. Rather, through discriminatory policies and practices, women of color experience further discrimination and endure unique hardships, distinct from white women.

Here are three specific examples of how incarceration makes pregnancy and motherhood harder – in turn reinforcing the narrative of “unfit motherhood” among women who have been imprisoned:

1. Women must advocate for themselves during their pregnancy to receive treatment.

2. Women must meet significant requirements before accessing in-prison programs that encourage the parent-child relationship to be nurtured.

3. There are few programs or facilities where mothers can stay with their infants or children.

Though women are not proactively provided opportunities to have the healthiest possible pregnancy and birth, and though most are refused substantive time to encourage parent-child bonding, they are typically held at fault for these deficiencies. And, again, given that Black women are over-represented in the incarcerated female population, that means that they are especially susceptible to carrying the “unfit mother” label – further devaluing their “womanhood” with detrimental effects on mental health.
Now here’s another example of how women of color are especially disadvantaged during incarceration:

While it can be difficult for women to convince guards that they are in labor or experiencing a problem with their pregnancy (or even that they think they may be pregnant and want to see a doctor for a test), this phenomenon is more common in Black women – with doctors failing to believe the pain of Black women during childbirth, stemming from both unconscious bias and overt racism.

The practice of disregarding women’s requests for help had occurred so often in Texas corrections facilities that, in 2019, the Legislature passed House Bill 1651, which required corrections officers to promptly respond when a woman was experiencing labor and take her to a medical facility. Even still, this legislation gives officers the discretion to determine if a woman’s reports of pain or labor are legitimate.

Young Black girls are “adultified” by society: In comparison to their white counterparts, they are attributed adult characteristics, found less innocent and less worthy of sympathy. This bleeds into our carceral system. Black women are not viewed with sympathy or concern when in pain, leaving their health and wellbeing outcomes worse than those of white women.

“They treated me like I was a horrible person instead of someone who had just encountered being beaten and raped. I was 4 months pregnant when I went to jail.”

— Annette Price
Getting a Law Passed Doesn’t Mean It Will Be Implemented – And That’s a Huge Problem

Advocates fight to get bills passed at the Texas Capitol every legislative session, and it feels like a significant win when the Governor signs one into law. But that’s not the end of the story. Next comes implementation of the bill, which requires agencies and other leaders to put the new law into practice.

Over the past few years, various pieces of Texas legislation have passed into law that aim to address larger concerns related to women’s healthcare, incarceration, and pregnancy or motherhood:

**This legislation required the Texas Department of Criminal Justice (TDCJ, the state’s prison system) to implement various policies that could improve outcomes for incarcerated women – related to things like supports and nutrition for pregnant women and new mothers, access to free feminine hygiene products, and a study on visitation.**

**This legislation requires TDCJ to implement policies that would increase women’s access to certain programs – including educational, vocational, substance use treatment, rehabilitation, life skills training, and prerelease programs that will help them successfully rejoin their families and live productively in the community.**

**This legislation requires both prisons and county jails to ensure that an obstetrician or gynecologist and a mental health professional promptly review the healthcare services provided to any woman who has had a miscarriage, then order additional healthcare services as appropriate.**

While these bills do take positive steps to assist incarcerated women, reports from TDCJ, as well as confidential reports made by incarcerated women to the Texas Center for Justice and Equity, show that practice often looks different than policy.

For instance, many treatment programs, as well as programs related to visitation and motherhood, have strict requirements and eligibility criteria. That is, they are often dependent on various factors, including: the perceived severity or nature of a woman’s charge (whether it is violent, whether it involves children or a sex crime, etc.); whether the woman is in a drug/substance abuse treatment program; or whether the woman is a U.S. citizen. And regarding programs that focus on the development of the parent-child relationship – like Best for Baby, and Parenting and Reunification – capacity is limited so
most women cannot access program slots. Furthermore, women report that there have been few accommodations for improved family visitation, even prior to the limitations caused by COVID-19. This is paired with a continued lack of mental health supports, even as a traumatic and dangerous public health crisis continues.

We have also heard that while TDCJ is required to have a cooler full of ice water during especially hot days, this is often not the case; both the extreme temperatures within TDCJ facilities and the lack of water pose challenges to pregnant women and new mothers who are trying to stay safe and hydrated. Additionally, unhealthy eating options and a lack of opportunity to exercise while in prison can impact pregnancy, mental health, and postpartum recovery. Already, we have heard that postpartum care remains insufficient, as does access to feminine hygiene products.

The designation of a charge as “violent” or “nonviolent” contributes to people being dehumanized by serving as a character analysis; it restricts their opportunities for programming and rehabilitative treatment; and it affects where they are housed during incarceration. A parent might be barred from parenting classes for a sentence completely unrelated to violence against children.

Given that the “violent” offense category is far too broad to accurately reflect the true nature of a conviction and often misrepresents the facts of a case, it is time to end our reliance on this inaccurate and harmful “nonviolent vs. violent” binary.
What Texas Must Do Next: 
A Set of Policy Recommendations

Prevention & Decarceration: Let’s Keep 
Women from Being Incarcerated

Texas remains a leading incarcerator. Instead of addressing the drivers of mass incarceration, the state continues to rely heavily on the reactive and costly responses of policing and confinement, cutting short people’s opportunities to find stability and support their families. But an over-reliance on corrections does not make Texans safer or healthier. Studies show that mass incarceration has marginal to zero impact on crime. What improves community wellbeing is education and employment, safe and stable housing, quality healthcare, and other community-based supports and services.

Texas must reverse the pipeline that is pushing people – especially women and mothers – into the criminal legal system.

1. Reallocate funding from Texas’ corrections system into 
community-based programs.

Texas should shrink the impact of the criminal legal system – including by closing aging and low-population prison facilities – and invest the savings into crime prevention and community resources. This specifically includes items like substance use and mental health treatment, Trauma Recovery Centers, housing and employment assistance, and childcare.

The state can do this by establishing state and local Justice and Community Reinvestment Funds. These strategies have already seen success in Texas. For instance, in 2007, the state was forecasting an increase in the prison population of 17,000 people; it invested $241 million in treatment and diversion programs rather than fund prison facility construction, saving more than $1.5 billion and preventing the projected population increase. And in 2021, Harris County (Houston) established the state’s first-ever Youth Justice Community Reinvestment Fund, which shifted money from the local juvenile system into neighborhoods most impacted by juvenile detention – with very low recidivism rates among impacted youth.

The Texas Legislature should re-up on its commitment to these types of initiatives to enhance public safety and save lives. With a fraction of the money it costs to incarcerate a mother, we can support her with tools to address underlying needs, as well as keep her with her children and in the community – in turn preventing trauma and loss for the entire family unit.
Phase out the use of state jails and Substance Abuse Felony Punishment (SAFP) programs.

Texas’ state jails and SAFP programs, which typically house people with drug offenses, pose another potential source for savings to support Justice and Community Reinvestment Funds, along with other models that promote wellness and family stability.

In 2019, Texas’ state jail system housed more than 15,000 people, approximately 43 percent of whom were serving time for possession of less than a gram of a controlled substance. The state jail system wastes money incarcerating people for possession of a personal-use amount of substances, while funding could instead be allocated to community efforts. In 2017, the Texas Legislature passed Senate Bill 292, which created a mental health matching grant program to reduce recidivism, arrests, and incarceration among people with mental illness and Substance Use Disorder. The Texas Legislature should expand this and other healthcare models to replace the state jail system and bolster local, evidence-based treatment programming.

Additionally, state lawmakers should rethink SAFP programs, where more than 6,000 people are sent every year. To help people get true rehabilitative support, leadership should begin eliminating beds and shift the savings to treatment options in the community, including dual-diagnosis programs at community treatment facilities, virtual outpatient programs for defendants in rural areas, or Oxford Housing and other individualized treatment centers that allow people to maintain autonomy.

Reduce the net-widening impact of probation.

Of all women under carceral control in Texas, 75 percent are on probation and must meet stringent, often excessive requirements in order to avoid probation revocation and incarceration. Wherever possible, Texas should divert women away from state surveillance and toward non-carceral support. This is vital for ensuring that families can remain together and that women have a fair chance at success in their lives and communities.
Require judges to consider whether a woman is the primary caretaker of a child, and identify opportunities for her to remain with her family rather than be incarcerated.

Women often serve as primary caregivers for their children. And yet, under Texas law, an individual’s sole responsibility to care for their child is not considered in their sentencing – despite research showing that the collateral consequences of primary caretaker incarceration are often worse for the community than the original crime.53

This means that, on top of the immense forces that penalize women and mothers – including structural oppressions like racism, sexism, and classism – there comes a double penalty on their families and communities when she is incarcerated.

Texas should identify, expand, and utilize programs and services that prevent a mother’s incarceration and put her on a path towards stability and wellness.

End criminal penalties and bookings for most drug offenses.

With about 70 percent of women in the Texas Department of Criminal Justice (TDCJ) suffering from Substance Use Disorder, and nearly half the women in TDCJ serving time on drug charges alone,54 it is imperative that Texas move to decriminalize drug use and possession so women have the freedom to access the evidence-based treatment they need to remain and thrive in their communities.

“Women are the backbone of our families. Women are the glue that holds families together. When the mother is not there, it has a snowball effect on kids. The support is broken. The dynamics of the family are shattered. There is no more bonding, no more nurturing. It collapses the family.”

— Annette Price
Support for Our Mothers, Sisters, Friends, and Loved Ones Still Inside

For women who are currently behind bars or who may be sentenced to incarceration, Texas must ensure their humane treatment – taking all steps to preserve their dignity, safety, and emotional wellbeing.

Provide mothers more time with their children in non-carceral settings.

Recently, there has been an increased call to allow long-term connection between an incarcerated mother and child post-birth. Texas should create healthy, non-carceral settings for mothers and their children to be able to bond, where women can have meaningful opportunities for breastfeeding, as well as access to programs and services that will provide them the best opportunity to reenter the community and successfully rejoin their families. It is also important for women to be able to access treatments that address post-partum depression and improve post-birth healthcare and wellness.

Note: The state and local communities must avoid investing in programs that surveil and punish a woman’s parenting style; different parenting styles are not inherently negative, harmful, or abusive.55

Require the Texas Department of Criminal Justice (TDCJ) to offer ALL mothers access to programming that nurtures the parent-child relationship.

A significant number of incarcerated parents are barred from parental classes and treatment programs due to restrictions based on their charge, regardless of the relevancy to parenthood. Others cannot access programming simply because the capacity of those programs is limited.

Texas should help all mothers, regardless of charge classification, access programming that will allow for parent-child bonding and better ensure they have tools for success. Research shows that, besides benefiting their children, maintenance of family ties can help women reduce their own recidivism; according to the Urban Institute, women reporting higher levels of family support were less likely to return to prison.56 Furthermore, women surveyed by the Urban Institute reported looking most forward to reuniting with their children upon release, leading the Urban Institute to call women’s relationships with their children a compelling motivator for reentry success.57
To make programming as accessible as possible for the greatest number of mothers, TDCJ should allow more nonprofit organizations that provide evidence-based programming to enter facilities and offer programs. This will relieve the state of the burden of funding any additional staff or having to secure additional funding to achieve the goals of promoting successful reentry.

*Note: We caution that new policies must consider constitutional implications when creating or expanding programs and resources that may affect women differently or contribute to widening inequality or discriminatory practices.*

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**Spotlight on Positive Parent-Child Programming in Texas**

As long as mothers are incarcerated, Texas must implement and expand programs that nurture the parent-child relationship. These are two examples of healthy programs:

**Girls Embracing Mothers (GEM)** was founded by attorney and author Brittany K. Barnett, whose own experiences with her incarcerated mother pushed her to raise awareness about the trauma and lack of supports for young girls with incarcerated mothers. GEM specifically nurtures the mother-daughter relationship by providing enhanced four-hour visitation sessions in Gatesville women’s prisons, introducing and encouraging facilitated discussions that are open, honest, and revolve around critical life issues. This one-of-a-kind program addresses trauma that results from infrequent communication between a mother and child, which only compounds the trauma experienced by mothers who are incarcerated.

**Giving Austin Labor Support (GALS)** assists currently incarcerated mothers in Travis County (Austin) by providing emotional, physical, and informational support before, during, and after birth. This includes providing information and support to a mother before birth to increase knowledge and empowerment, supplying prenatal and postnatal supplies, and bringing newborn babies to jail to be able to be fed by their mothers.
Require the Texas Department of Criminal Justice to make visitation rooms more family-friendly and trauma-informed.

According to the U.S. Department of Justice Bureau of Justice Assistance, “Preserving positive family connections can yield positive societal benefits in the form of reduced recidivism, less intergenerational criminal justice system involvement, and promotion of healthy child development. [Yet] the environment of correctional facilities can be intimidating and detrimental to child development.” In addition to ensuring regular, in-person visitation opportunities to help nurture the parent-child relationship, it is critical for corrections units to train staff on parent-child wellbeing and the importance of family-friendly, trauma-informed visiting spaces. Corrections units should also ensure that they offer age-appropriate visitation activities for children that enhance cognitive and motor skills. As any unit works to improve its visitation space, it should take into account the perspectives of caregivers, older children, and community support groups.

Preserve life by promoting humane prison conditions, including the provision of adequate nutritional foods and water, as well as climate controls.

It is dangerous both physically and mentally for pregnant women to be barred from nutritional freedom. Many women experience periods of nausea and vomiting at the beginning or even throughout the entire course of their pregnancy; in such cases, having limited access to food and water would exacerbate symptoms and lead to dehydration. Texas should ensure that pregnant women and new mothers have access to nutritional food and water in alignment with guidelines for maintaining a healthy and balanced diet. With specific regard to caloric intake, it should increase by approximately 300 kcal/day during pregnancy. This value is derived from an estimate of 80,000 kcal needed to support a full-term pregnancy and accounts not only for increased maternal and fetal metabolism but for fetal and placental growth.

Separately, the state must ensure that temperatures within prisons remain between 65 and 85 degrees, just as is required for Texas’ county jails. Those who live and work in prison facilities must endure extreme heat during the summer months, with temperatures in the triple digits; 70 of 97 units lack adequate air-conditioning and ventilation. This is detrimental to every incarcerated person’s physical and emotional well-being, and it is counterproductive to rehabilitation efforts.
Create an Office of Independent Oversight at the Texas Department of Criminal Justice (TDCJ) to provide much-needed transparency and protections throughout the system.

Unlike the Texas Juvenile Justice Department, TDCJ is not subject to external oversight, which promotes transparency, accountability, safety and wellbeing (both for people who work there and people who are housed there), and good government. Furthermore, external oversight ensures that facilities are better equipped to help incarcerated individuals prepare for reintegration into our communities.

The funding for independent oversight can be sourced from commissary profits as a total of 0.1% of TDCJ’s budget. The money is directly from incarcerated individuals’ family expenditures to TDCJ, creating no unnecessary funding challenge during this difficult budget cycle.

With COVID-19 continuing to threaten the welfare of people in facilities – and given its impact on access to visitation, rehabilitative programming, recreation and exercise, and sufficient meals – it is especially important for TDCJ to implement independent oversight. The dangerous lack of transparency impacts not only incarcerated individuals and their family members, but the Legislature, which is denied an independent monitor of prison operations and cannot make informed decisions regarding correctional policies.

Conclusion

We MUST rethink how we are treating mothers and families. When we incarcerate women – the majority of whom are mothers – we are not only failing them but failing our children and our communities. We are leaving unaddressed the issues that drive women into incarceration: poverty, educational inequality, trauma and mental health issues, substance use. We are perpetuating ruthless cycles of incarceration that have an oversized impact on communities and generations of color. It is long overdue that we reevaluate the impacts of this approach.

We urge state and local leaders to take real, viable steps to keep women out of incarceration altogether – including by removing funding from harmful carceral systems, and instead bolstering the community-based programs, services, and approaches that can address underlying issues and keep families together. And for our mothers, sisters, friends, and loved ones still inside, we urge leaders to ensure their safety, protect their dignity, and promote rehabilitation, including through meaningful access to programming, improvements in conditions of confinement and visitation, and facility oversight.

Motherhood must be uplifted and held in the highest regard. For the sake of our children, families, and communities, we must stop locking it up.
Citations


Motherhood and Pregnancy Behind Bars