



United States: Addressing the Core Needs of Both Child and Mother with Dr. Lorie Goshin

In this episode, Paul Dosh sits down with Doctor Lorie Goshin, a nurse and associate professor at Hunter College Bellevue School of Nursing with a Ph.D. in nursing research. Dr. Goshin describes what prison nurseries look like in the United States and delves into the structure, operation, and conduct of such institutions. She specifically focuses on Bedford Hills Correctional Facility for Women in New York, which holds the nation's oldest prison nursery and is currently led by the nonprofit organization Hour Children. She also details her research with Columbia University professor Mary Byrne, which focuses on the effects prison nurseries have on early child development and attachment security. Dr. Goshin frames this discussion within the achievements and possible reforms of the prison nursery system in order to fulfill the best interests of not only the child, but the mother as well.

****Since 2022, Dr. Goshin has worked as a Psychiatric-Mental Health Nurse Practitioner through Project SHERO, a supportive housing jail alternative for women and gender-expansive people.****

Transcript:

[00:00] Dr. Lorie Goshin: ...Their babies were kicked out of the nursery for custody officer complaints about their parenting. So, for example, bottle propping or co-sleeping, things that many of us have done in the community. It's pretty normal, and some of it is quite cultural.

[00:26] Paul Dosh: Welcome to the Children of Incarcerated Caregivers International Prison Nursery Podcast. I'm Paul Dosh, associate professor of Political Science at Macalester College and advisory board member of Children of Incarcerated Caregivers. Our topic today is research on prison nurseries and alternatives to detention. My guest is Dr. Lorie Goshin, a nurse and associate professor at Hunter College Bellevue School of Nursing in New York City. Dr. Goshin has a Ph.D. in Nursing Research, and her scholarship focuses on Health Equity and Human

Rights for criminal justice-involved people and their families, nursing in correctional settings, and multi-system-involved families with minor children.

[01:11] Paul Dosh: Welcome, Dr. Goshin.

[01:13] Dr. Lorie Goshin: Thank you so much for having me on the podcast.

[01:15] Paul Dosh: Glad to have you here. To begin, can you tell us briefly about your research as it relates to mothers who are incarcerated and their children?

[01:24] Dr. Lorie Goshin: Sure, so I have done research with women who are pregnant and incarcerated—so before they are mothers—and research on programs that allow women to stay with their children, so women who are either incarcerated or facing incarceration. I've also looked at parenting stress in women who are on probation and parole.

[01:47] Paul Dosh: So, what are some of the key findings so far for your research for mothers who are separated from their children during incarceration?

[01:55] Dr. Lorie Goshin: Sure, well, I'll take this question chronologically. I began working with a researcher at Columbia by the name of Mary Byrne, working on her study of prison nurseries. And the major findings there were in the 100 dyads that we followed for five to seven years were that the children reached their expected developmental milestones while in the prison nursery setting for an average of about seven months and also into the toddler, preschool, and even early school-aged years. We also found in the dyads that we were able to bring into our lab and conduct a strange situation procedure with, that the children had levels of attachment security that we would expect in low-risk children in the community.

And I hate to use that word 'risk' and I apologize, but let me step back. So, children who are raised in stable homes, you know, in the community. And that is the opposite of what we would expect from the attachment security findings of their mothers, who had a mostly insecure attachment history themselves. We also found, when comparing the children in the preschool years to a non-equivalent sample of kids who had been separated from their mothers by incarceration, that the children who had spent time with their moms in the prison nursery had lower levels of internalizing behavior problems in the preschool year than the children who had been separated.

And then we also looked at the mother's recidivism—so return to prison—and we did that mostly because that was an important outcome for stakeholders in the criminal legal community, not that we necessarily thought that was an important outcome. Well, certainly, recidivism again separates mothers from their children, but the criminal legal system feeds itself, so people often



are re-incarcerated or receive technical violations of parole for very minor things that we would not consider to be, you know, problematic behavior on their part. However, I will say that we found that women in our study had very low levels of recidivism, especially for new crimes, and that the majority of recidivism was driven by technical violations of parole, which is not surprising, that's supported by all the research I've ever seen on recidivism.

[04:24] Paul Dosh: Tell me a little bit more about what that looks like, when developmental milestones are affected due to separation, due to incarceration, or attachment levels, [how] attachment security is affected. How does that actually manifest in children?

[04:41] Dr. Lorie Goshin: So that's a great question and I can call upon research by my colleagues, Julie Poehlmann, Rebecca Shlafer, there's a lot of people who've done research in this area. And their research suggests that young children who experienced the incarceration of their mother, as I shared, are more at risk for attachment insecurity both to their mother and to their alternate caregivers. So these kids are in distress because they don't have security with any of their caregivers, and children in those young ages manifest behavior problems. Of course, this is not all children who face separation because of incarceration, it's just more likely in this group of children than it is in children who have not faced that experience.

So, internalizing behavior problems in children can manifest as sadness, anxiety, and then externalizing behavior problems can manifest as aggression or conduct, you know, having trouble behaving in school, things like that. And then as the kids get older the research suggests that there are higher risks of school failure or school dropout, higher risks for contact with the criminal legal system themselves. And it's difficult to disentangle, you know, incarceration-related causes of any of these things versus other adverse childhood experiences that many children in this group have, for example, a parent with substance use disorder. That may have contributed to the mother's incarceration.

Oftentimes these children are also facing the incarceration of their other parent as well, so there's kind of additive effects there. Oftentimes, the mother will also have a serious mental illness and that's an adverse childhood experience. So, oftentimes, when a child faces the incarceration of their mother, they're facing a lot of different things. One thing I can say though is that if you look at all the literature on this together, it strongly suggests that incarceration does not help. So you'll hear people say, you know, 'Well, maybe it's for the safety of the child, maybe it's better this way.' And I've read as much as I could in this area over the past 15 years, and I can't find anything that suggests that the incarceration of mothers, the majority of the time, helps their children.

[07:08] Paul Dosh: That seems like a really important finding, broadly speaking. Maybe we could talk a little bit about prison nurseries, specifically, your own research but maybe starting



out at a more basic level. Many of our listeners have no knowledge of what a prison nursery is, and could we start maybe just describing, what is a prison nursery? What does a prison nursery look like in the United States?

[07:29] Dr. Lorie Goshin: Sure, so in the United States we have, I believe at this point, eight prison nurseries, and I'm always hearing from people in states considering them but it's been about eight for a little while. Most of my experiences with the prison nursery here in New York State, we have one, it's in our maximum-security prison, which is called Bedford Hills, and it's become the model for prison nurseries around the country. It's been around for, oh my gosh, like about 100 years, so it's quite old.

But the current model that they're using is what they would call a 'working woman model.' So, the prison nursery—once, you know, women have their babies and come home and have some postpartum healing time, the women go back to doing their programming or other, you know, maybe work during the day and the infants are cared for by other incarcerated women who are trained caregivers in a daycare. So it's very much like what I experienced as a mother where you get ready for work and someone else—you take your baby to a babysitter or someone comes over to take care of the baby, you do what you need to do and pick the baby up in the evening.

Here in New York, where the women and children live is set apart from the general population of incarcerated people, you know, in that prison. And it's more like a dorm, each mom and baby has their own room. Women are provided with the basic necessities in terms of clothing and diapers and formula, if they choose to feed their baby in that way. And my experience is that the women in the nursery here create quite a supportive community amongst themselves. And the people who run the nursery—it's a nonprofit, it's a community nonprofit—and so it's not run by the Department of Corrections itself. There's an organization brought in to do this work, and they celebrate women's pregnancies, the births, and the developmental milestones of the baby. Having said all of that, this all takes place in a prison.

There's nothing ideal in prison ever. They're scary, sad, difficult places that ideally no one would ever be in. And there are, you know, in the midst of the community of women and other incarcerated caregivers and the outside staff who are coming in to manage the nursery, there is custody staff and the whole custody apparatus. And certainly, when you have a newborn, that's one thing, newborns really only know their individual caregivers and that's their main concern. But as the children get a little older, especially as they're nearing toddlerhood—kids in the New York nursery can stay up until the age of 18 months if their mom is going to be released between the baby's age of 12 months to 18 months, and that's the case in a number of other nurseries in the country as well—it gets a little difficult because the developmental exploration and the normal things that kids are supposed to be doing just don't fit in that environment at all.



And I should mention too, even in the earlier stages, even if the baby doesn't realize where they are and they're able just to be with their mom in an unconstructed kind of way, the women's parenting is constantly being monitored by custody staff. And we did see in the research of Dr. Byrne's study that women were kicked out, like their babies were kicked out of the nursery for custody officer complaints about their parenting. So, for example, bottle propping or co-sleeping, things that many of us have done in the community. It's, like, pretty normal and some of it is quite cultural, like co-sleeping; I used to co-sleep with my grandmother when I was a kid, it was just like a normal thing. Their baby was removed from the nursery for that. It didn't happen often, but it did happen, and I think that that just speaks to the potential dangers of putting parenting programs in custody settings.

[11:48] Paul Dosh: Sure, my spouse and I both co-slept with both of our kids at many different intervals. I'm curious—you described how the community nonprofit is running the Bedford Hills nursery within a Department of Corrections facility. So there's nonprofit leadership and there's the Department of Corrections. What are the stated objectives of each of these two organizations and do they overlap? Or are there other, sort of, official stated objectives? Do they diverge in terms of why there is this prison nursery at Bedford Hills?

[12:18] Dr. Lorie Goshin: I think that's a great question and something I hadn't maybe thought enough about in the past, but if I could explore it a little bit. The Department of Corrections, I think their objective is to enact our corrections law here in New York State. So the prison nursery is enacted by law—it's Section 611 of our corrections code, which also includes our anti-shackling laws here in New York, which are some of the strongest in the country. And so they're charged with, as far as I can tell, you know, making sure that that law is implemented. Depending on the superintendent, and the research that we did was across a couple of different superintendents, there is a different appetite for this work.

Some people see this as a liability, you know, bringing people who are not sentenced to incarceration into a custody facility, and babies—they're so physically vulnerable—is scary for people in the custody world. It's not their bailiwick, you know, it's not their expertise. And then there are other superintendents who really see this as important, you know, maintaining family integrity and supporting the women's mothering as very important and healing work. And there can be two superintendents who are back to back temporally who have vastly different thoughts on this. And certainly, that affects how that support or lack of support from the top affects how the individual custody officers support or don't support the women individually.

And then in terms of the organization that runs the nursery, they are a truly and deeply lovely group of people, and they're called Hour Children, with 'hour' being like H-O-U-R. And what they've told me that that means to them is like, 'This is the hour,' you know, 'This is the hour to do something, this is the precious "hour" for these kids.' And they do work across the spectrum



of women's criminal legal involvement so I've been working with them as well on supportive housing as an alternative to detention. They do reentry housing, so many of the women who come out of the New York State prison nursery—which is not in New York City but we send many women here from the city there—will move into their housing when they come home. They have a ton of work training programs for women with criminal legal involvement. So they're committed to this issue across the board.

[14:48] Paul Dosh: Let me backup a little bit to just ask you a couple more questions about prison nurseries, and then I'm interested in hearing more about these other programs beyond prison nurseries. What are the most important standards that prison nurseries can uphold as they relate to the best interests of the child?

[15:04] Dr. Lorie Goshin: I think that having outside nonprofits who are experts in the care of children and families, and particularly people who have cultural sensitivity and ideally have directly impacted people involved in the work, which is the case with Hour Children. I think that's an important standard. I think that limited involvement to the extent that it's possible in these settings, I mean, our prison nursery here in New York is in a maximum-security prison, so, but to the extent possible that the Department of Corrections can have limited involvement—that's important. That women have support for their mothering and the other programming that they need to be released. Just because a woman has a baby during her term, it doesn't mean that she doesn't have all of these other legal considerations and that she doesn't need mental health treatment or substance use treatment or job training, or some of the other things that most humane prisons will provide. You know, the mothering isn't the only thing pretty much any woman is doing.

And so, you know, [the nursery programs should have] some capacity for women to also complete those things, you know? It's important to have health-related, pediatric health-related support and that includes nursing support—nurses are the most common healthcare providers in prison and jail settings. So there should be 24-hour nursing support with nurses who have some pediatric skills, and perinatal skills as well if you're going to incarcerate pregnant people. The ability to assess and manage preterm labor, or, you know, labor and obstetric and pediatric clinician support as well, which could be certainly a nurse-midwife or obstetrician-gynecologist. And then a pediatrician or pediatric nurse practitioner as well. Those are some of the top-line things.

[17:07] Paul Dosh: Yeah, that's really helpful. I'm hearing you often use words like 'limiting the role of the prison staff,' and 'interference.' It makes sense that the work of the nonprofit, of Hour Children, struggles to do their work in this context. What can you tell us about the effectiveness of prison nursery programs like Hour Children with respect to themes like nurturing, childhood



development, or even recidivism rates among mothers, given that they're doing the work in this very difficult context?

[17:39] Dr. Lorie Goshin: That's a hard question to answer because the research I've shared with you—which again, was led by Mary Byrne, and I was a co-investigator—is really the most comprehensive work in this area in the United States, if not in the world. So there's been some other small work, more like program evaluation and things like that in other states in the U.S., but ours was the most comprehensive and we used the strongest measures. Another challenge is that we've never compared prison nurseries to anything else. I would love to see all of the women currently in prison nurseries allowed to go to programs like supportive housing, or if they need it, residential substance use treatment instead. I don't, you know and this is as a researcher, I don't have an appetite, nor do I think that ethics would allow us to, certainly, like randomize a woman to a prison nursery versus separation from her baby versus an alternative sentencing mechanism. So it's hard to tell what the counterfactual would be.

So, all that being said, our research supports that babies who are given this opportunity to stay with their moms and the moms who are given that opportunity do quite well. And you know, I should say too—this is really important—when I speak to women who have been in these settings when they've come home and they say how important this was for them, and the advocates that I work with here in New York on the Justice for Women Task Force—which is led by directly impacted women, some of whom did experience being in the prison nursery with their children—they do not want the prison nursery closed. So, because their main concern is that the state would close the prison nursery and not institute anything else in its place. So I want to be super clear about that.

[19:44] Paul Dosh: So you've talked some about supportive housing. Let's talk a little bit more about other alternatives to incarceration for women who have children or are expecting. Some alternatives that have been mentioned are locked community co-residential programs, unlocked community alternatives, and home-based alternatives. What have you learned about the advantages or disadvantages to these different approaches?

[20:08] Dr. Lorie Goshin: I know that there are locked community programs in California, and I don't personally have experience with them, but my inclination is to lump them in with prison nurseries because they are locked and, as I understand it, there's custody staff on site. So, I guess we could look at them on a spectrum, right? From the prison nursery and the locked prison setting, the locked community programs—which sound to me just like mini prisons, don't sound like a whole heck of a lot of difference there—and then, you know, residential treatment that allows children to be with their moms. And an important connection between prison nurseries, locked programs, and residential treatment is that those programs only serve very young children. Prison nurseries only serve moms who give birth during their incarceration and their



children maybe up to age like 18 months. Same with these locked programs in California, they serve very young children. And residential treatment in general, as far as I can tell, programs generally serve women with children under the age of five. That is not all of the women and children who deserve to remain together, right?

And those programs also don't address—residential drug treatment could address the core need of substance use treatment if that's contributing to the mom's criminal legal involvement. But prison nurseries and locked community programs don't necessarily address the core needs that brought the woman into contact with the system, you know, such as poverty, homelessness, substance use, serious mental illness, things like that. So, you know, then we can talk about things like supportive housing, which I mentioned earlier, which can address those issues all in one with wraparound services and keep women with their children in the community. And the beauty of supportive housing as well is that it can serve pregnant people and women from the birth of their babies and women who have adolescent-aged children. So it can serve kind of this whole population of women.

And then, you know, if a mother does have a safe home environment, there are some states—I think Washington now has a law like this, and there was some experimentation with this here in New York, but the program didn't last very long—with home-based monitoring. So I don't know a lot about that, but home-based monitoring can have a lot of different flavors. Certainly, I would not support home-based electronic monitoring like home arrest, because how can you take care of children when you're on home arrest, you know? It's just, yes, you're with your children, but you can't even go out sometimes to the store to get food for them or pick them up at school. It can get very, very restrictive. So any of the home-based programs, I think it's important to dig in to see exactly if it's a custody program or if it's being run by a nonprofit that's less like home arrest and more like home-based support to keep the woman in her house with her children and provide the wraparound services that she may need, but just in, you know, in her own home.

[23:35] Paul Dosh: Yeah, I think discussions of prison nurseries are sometimes very narrowly-framed and your comments, very helpfully, broaden the conversation to a whole host of issues beyond this narrow question of prison nurseries. Could you help me understand how prison nurseries fit into a broader conversation about mass incarceration or even prison abolition? You mentioned advocates for incarcerated women who you said strongly feel that the prison nursery needs to be sustained. Could you help me think about how that fits into these broader conversations about mass incarceration and prison abolition?

[24:19] Dr. Lorie Goshin: You know, I started out as a prison reformer. I've worked in juvenile custody settings as a nurse, and then I came to the work on the study of prison nurseries because I had experience with people involved in the criminal legal system and had experience in family nursing, and I thought, 'Wow, this is great. I'm really gonna come in and help these families,



they're 'at risk,' and they really need this help, and isn't this wonderful?' And then, you know, as I've been in direct work, and on this journey over the past 15 years working and getting to know directly impacted women I feel horrible about thinking like that. It kind of opened my eyes to, 'Oh my god, this is happening in a prison,' and to not lose sight of that. Not to be like the white savior basically, you know? And so, I think that speaks to how this fits into the larger questions and issues of mass incarceration. That 'Oh my god, how—why are we even doing this? How did we get here?'

And it's something I haven't mentioned that I think is really important for people to understand if they're interested in prison nurseries. The rules around who gets accepted to these programs are extremely strict. So, for example, most states restrict out-of-hand the inclusion of women who have a violent charge or women who have a history of violent, you know, charges or convictions, and women who have a history of child welfare involvement. Some of them restrict women who are on any type of psychotropic medications, even if they're well-controlled and stable. Gosh, I mean, anyway there are so many restrictions, and when you look at them you're thinking, 'Well, if a woman fits all these restrictions, why is she in prison anyway?'

There's been some really great reporting by Victoria Law, she's a really interesting reporter who does a lot of work in this area, looking at the under-utilization of prison nurseries across the country. And she hypothesizes that wardens use these restrictions to not have to fill these beds and that there are many women who are giving birth across the country who could possibly use these prison nurseries because, you know, they're incarcerated and they're going to be separated from their babies. They're not being given a diversion sentence, but they're not being allowed into them. So, I would just argue that there are so many more people in prisons and jails than need to be there. And in particular, if you look at some low-hanging fruit, the women that are in these prison nurseries are the lowest-hanging probably of anyone.

[27:27] Paul Dosh: Yeah, I mean, it's interesting, your comments, I think, quite appropriately, lead us to think about what is in the best interests of the mother in this case. And it strikes me that conversations about prison nurseries are overwhelmingly framed exclusively in terms of what's in the best interests of children, as if it's not legitimate to think about what's in the best interest of the mother, as well. Is that an accurate observation in your work?

[27:53] Dr. Lorie Goshin: Oh, 100%, and I mean it's wrapped up in a lot of other conversations about 'child welfare' and 'child protection,' assuming that whatever brought women or pregnant people into the criminal legal system somehow made them unfit or dangerous to children everywhere, if not their own children. Something I haven't mentioned in terms of the rights of women themselves is that to get into the prison nursery, as I shared earlier, women have to give birth, or pregnant people have to give birth during their incarceration. And my own research suggests that—and it's no surprise—that there is a stigma, certainly in clinical care, that's given



to incarcerated women when they give birth. And that stigma may contribute to the continued use of shackling against pregnant people who give birth during their incarcerations.

And what I mean by that—so shackling is the use of non-medical restraints on people either throughout their pregnancy, or specifically during the birth, or postpartum when they're in the hospital, to prevent them from, purportedly to prevent them from hurting themselves or others or escaping. And the majority of states around the country have laws limiting the use of shackling. They're all quite different, so if you're interested, I highly suggest you read the particular law in your state, because they're all written a little bit differently. Some only cover the 'active pushing phase,' others cover the whole pregnancy and eight weeks after birth. But when we choose to incarcerate pregnant people, we're putting them at serious risk of injury during their pregnancy, during their birth, and postpartum by things like shackling, and what an incredibly traumatic experience that must be, right? And this is a group of women around—I mean a lot of research supports the estimate that around 90% of whom have experienced severe, persistent trauma in their lives.

So I think that's another important thing that we should mention is that the woman doesn't come to life after she has this baby, she's also spending some portion of her pregnancy in prison, probably with poor care. The care is highly variable across the country with some places, you know, doing a decent job and other places doing a horrifying job. And then at risk of shackling during the birth and postpartum. So I think those are really important considerations related to the rights of the mother.

[30:43] Paul Dosh: Yeah, I really appreciate your ability to talk about the nuances and tensions within this really difficult issue. CIC's mission aims to advocate for the best interests of children impacted by incarceration. So based on your work, what advice would you have for our organization as we navigate the topic of prison nurseries?

[31:04] Dr. Lorie Goshin: I would strongly encourage you to advocate for diversion at every single opportunity, and addressing the core needs of mothers involved in the criminal legal system. And by doing so, you are improving the lives of children because children don't exist by themselves, right? Children exist in dyadic, triadic or, you know, they exist in family relationships. So it's really important that we protect the rights, and the safety, and the dignity of mothers so that they can then protect the rights, safety, and dignity of their children. And some ways to do that, again, are diversion and some programs that I think are so incredibly promising but have been underutilized in women who are incarcerated or otherwise under criminal legal involvement are, in particular, supportive housing.

[32:02] Paul Dosh: That is very helpful guidance. To conclude, is there anything else you'd like to share with our listeners that is important that they take away from this conversation?



[32:12] Dr. Lorie Goshin: Well, I want to say how much I appreciate the opportunity to share my experience with everyone, and I want to say that what we should keep in our minds is that families belong together. And that women come into, and pregnant people come into criminal legal contact for many different reasons, and that doesn't mean that they can't provide safe, secure, stable, nurturing relationships with their babies who are to be born or their existing children. And it's really important that we see this as a family issue and not just an issue of children or just an issue of the mothers. So, I hope that everyone could see it in that way.

[33:02] Paul Dosh: Dr. Lorie Goshin, thank you so much for sharing your wisdom, advocacy, and scholarship with us this afternoon.

[33:09] Dr. Lorie Goshin: Thank you.

[33:15] Paul Dosh: Thank you for listening to the Children of Incarcerated Caregivers International Prison Nursery Podcast. We're your hosts, Paul Dosh and Barbara Frey, advisory board members of Children of Incarcerated Caregivers. To learn more about our organization and view additional materials, documents, and research from this episode, you can visit our website at cicmn.org.

This episode was recorded in July 2021 in collaboration with the University of Minnesota's Human Rights Program. This podcast was created with research from our student collaborators McKenna Haas, Olivia Hudson, and Jessy Rehmann. Episodes contain original music by David Smith and production by Brian Carnell. Don't forget to tune into the next episode! We hope to see you there.

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