

**LIVED EXPERIENCES OF MOTHERHOOD IN CORRECTIONAL  
FACILITIES**

by

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## DECLARATION

I declare that, “Lived experiences of motherhood in correctional facilities” is my own work and that all sources that has been used has been indicated and acknowledged by means of references.



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S. Pillay

January 2019

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Date

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## **SUMMARY**

A comprehensive literature review indicated that there is a dearth of knowledge focusing on the experiences of female incarceration in South African correctional facilities. Even less is known about the lived experiences of maternal incarceration, especially those who reside in correctional facilities with their infants.

Therefore, due to the dearth of research on maternal incarceration an exploratory analysis was conducted with the aim of gaining an in-depth understanding on the individualised everyday lived experiences of incarcerated mothers. Feminist theory served to guide this research. Through purposive sampling six incarcerated mothers who were residing with their infants in two correctional facilities in South Africa were included in the study as participants. Based on the literature, an interview schedule was developed that explored the multiple experiences of maternal incarceration. Each participant was viewed as an individual case study.

The empirical findings of the study confirmed that separation from children and family is one of the most traumatic aspects of maternal incarceration. Intrusive thoughts about family became prominent therefore coping with negative thoughts and emotions were part of the everyday lived experience of incarceration. Mothers used their infants as a coping mechanism during incarceration. The overall conditions of the correctional facilities were found to be of an acceptable standard according to the experiences of mothers. Their incarceration experiences were related directly to overcrowding, hygiene, and the needs of mother and infant. Inmates experienced their diet as unsatisfactory while the diet of infants were of an acceptable standard according to the mothers. The participants experienced the correctional environment as not conducive to the developmental needs of the infant, and infants lacked the appropriate developmental stimuli such as age appropriate toys. The study found that while overall conditions of Mother-and-Child Care Units were up to standard according to the White Paper on Corrections (2005) the experience was still unpleasant. Therefore the findings of this study indicate the need to further critically evaluate the appropriateness of the incarceration of mothers with their infants, as this population is particularly vulnerable due to their unique situation.

Recommendations for further research were formulated focusing on the plight of the incarcerated mother. More longitudinal research focusing on policy and practice is emphasised as the long-term impact of maternal incarceration on infant and mother are unknown.

## **KEY TERMS**

Correctional conditions, Correctional facilities, Feminism, Infant, Lived experiences, Maternal incarceration, Motherhood, Recidivism

# **CHAPTER 1 GENERAL ORIENTATION AND PROBLEM FORMULATION**

To explore the experiences of mothers incarcerated with their infants in correctional facilities within a feminist framework, it is vital to begin the study with an understanding of the key concepts as orientation. A discussion of the historical perspective, current legislation and policies regarding incarcerated mothers residing with infants serves as the contextual basis for the presentation of the problem formulation. This foundation forms the rationale for the research, and in it, the primary objectives of the study are highlighted.

## **1.1 INTRODUCTION**

While there are a number of definitions of motherhood, the term is not usually associated with incarceration. Currently South Africa has approximately 70 women who live in correctional facilities with their infants (Department of Correctional Services, 2018/2019). These inmates – most of whom have little education and come from underprivileged backgrounds – experience motherhood in a vastly different manner.

According to Covington (1998:1), female inmates are often neglected, misunderstood and remain unseen in the eyes of the criminal justice system. While limited research has allowed academics to identify some of the causational factors playing a role in women committing crime – and what incarceration entails for this particular offender population – it is still largely generalised (Dastile, 2013:5297; Du Preez, 2008). Perhaps the most serious disadvantage is that these generalisations do not allow for an in-depth understanding of what a mother experiences while residing with her infant in a correctional facility in South Africa. Therefore, this study aims to explore motherhood within a correctional facility, where it is atypical for an infant to be found.

## **1.2 CONCEPTUALISATION**

It is therefore necessary to clarify a few concepts, and provide the context in which these terms are used for the purpose of the study.

### **1.2.1 Lived Experiences**

When one shares a narrative about one's lived experiences, it allows an aspect of one's life to unfold before the listener, which would otherwise have remained hidden. When these stories are revealed, it allows us to make new discoveries and to learn about groups of people that we would otherwise not have understood (Farrant, 2014). The concept of 'lived experiences' is grounded in qualitative phenomenological research; a notion that reality is based on the meanings that people assign to different life experiences. Understanding different realities is usually circumscribed by gender, language, ethnicity, socioeconomic status, ideas and values (Johnston & Swanson, 2006; Shamai, 2003).

As a result, lived experiences in this context are informed by the incarcerated mothers and the reality they assign to their specific context, which is motherhood within a correctional facility. This allows each participant to give an in-depth account of her daily reality from her very own perspective. Lived experiences describe a first-hand account that evolves from a minority offender population's values, beliefs and circumstances (Kornbluh, 2015: 397; Schlosser, 2008: 1500).

For the purpose of this research, the sharing of lived experiences fully depends on the mothers' narratives. It seeks to develop a greater understanding of motherhood in correctional facilities by exploring the ways in which incarcerated women experience motherhood, perceive their specific environment, and how they make sense of their lives and those of their infants.

### **1.2.2 The Social Construction of Motherhood**

The term "motherhood" can be defined as "a historically and culturally variable relationship in which one individual nurtures and cares for another" (Glenn, 1994:3). This definition, however, has changed over the years, as an increasingly vast number of mothers no longer fit into this static definition of motherhood. Scholars have challenged the original idea of motherhood as restricting mothers' identities as well as their individualism (Glenn, 1994:3); therefore, this excludes a variety of mothers such as those who are adolescents (Bailey, Brown, Letherby & Wilson, 2002:102), older, single, lesbian (Lewin, 1994:3), or racially diverse (Glenn, 1994:4). The mention of incarcerated mothers



with regard to identity development as a mother is almost nowhere to be found, which only exacerbates the vulnerability of this type of mother.

A mothering ideology is shaped by the circumstances in which a mother might find herself; it is not an objective reality, but rather subjective. In this particular context, motherhood will be explored in the setting of a correctional facility, and influence the roles that these particular mothers assign to motherhood (Johnston & Swanson, 2006:509).

The concept of motherhood has received considerable attention over the years, attributable to the notion of motherhood changing over time (Fouquier, 2011:146; Leskošek, 2011:2), and is generally considered to be a natural occurrence universally.

Motherhood is intertwined with femininity, and is a socially constructed concept (Litzke, 2008:1). While feminist theorists have defended the right of women to define motherhood according to their own standards, it has not yet reached this phase of progression (Allan, 2004:57). This is due to the mothering ideology, which has largely been shaped and influenced by society and does not present the opportunity for women to define motherhood by their unique and individual experiences and standards, especially when these experiences deviate from the traditional mothering roles commonly known to society.

Roles associated with motherhood and identity have been a dominant feature of femininity throughout history (Barnes & Stringer, 2014:3). Not only do women shape their ideologies prior to motherhood, but these ideologies can also change once motherhood is adopted according to the circumstances in which a mother might find herself (Lockwood, 2013:11; Reger, 2001:86). The lived experiences of an individual will ultimately determine the way in which motherhood is perceived and how this role is carried out. Therefore, a single, clear-cut definition is simply not sufficient to understand the concept of motherhood.

The typical mothering experience does not take into account a mother who is incarcerated with her infant, especially those who are faced with socioeconomic and political disadvantages, or having being previously disadvantaged in South Africa. Therefore, for incarcerated mothers, achieving a standard of mothering is hindered by the circumstances in which they find themselves; constitutional constraints such as only being

permitted to keep children with them until the age of two, on condition that there is no other suitable accommodation for the infant. Additionally, policy informs these particular mothers as to what they can and cannot do, as well as how they can engage with their infants, which influences the traditional way of mothering. Incarcerated mothers might feel deprived when they try to mother in a traditional way, because it cannot apply to them (Easterling, 2012:13).

Therefore, incarcerated mothers often have to overcome stereotypes as these can hinder the decisions made by the criminal justice system with regard to whether or not they are permitted to keep their infants with them while incarcerated. These mothers are often at risk of having their children taken out of their care prior to sentencing or during incarceration, because the common notion is that if you have committed a crime you must be a “bad” mother. This is essentially due to the way society has positioned or stereotyped motherhood as being a concept that does not change.

A critical feminist approach to such a predicament requires many aspects of the situation to become “unhidden”, and social, legal and political spheres need to address the issue in order to avoid unfairly stereotyping an incarcerated mother (Kennedy, 2011:12).

The traditional notions of motherhood were not constructed for those from marginalised groups. Feminist theories have shifted their view of this type of mother to one that is more complex by nature and embraces the idea that no mother is the same. When women perceive themselves as not being able to reach the standard of mothering that is expected of them, this can result in shame and guilt (Allan, 2004:57) ultimately damaging motherchild relationships. Mothering, while being incarcerated, could bring about further feelings of shame and guilt as the guilt of being incarcerated is exacerbated by the guilt of having to raise an infant in a correctional facility.

The stigmatisation of being a “bad mother” appears to be gendered, because fathers who are incarcerated are not necessarily perceived in the same way. This is attributed to changes such as living arrangements, as these changes are more substantial when mothers are incarcerated, because they are typically the primary caregiver (Habecker, 2013:16; Purvis, 2013:11).

Mothering seems to be an entity on its own, and the presence of a father is not necessarily related to the role of mothering. When fathers are incarcerated, it does not necessarily have the same impact. This is often due to mothers that are seen as more nurturing by nature, and once they deviate from this role, they deviate from their “role in society” (Berry & Eigenberg, 2003:104; Easterling, 2012:29).

This places unrealistic expectations on mothers, especially those who are already marginalised. According to the experts, this is oppressive, as this is only the expected norm required from one gender but not from the other. Gender-focused interpretations of the “good mother” have their roots in patriarchal societies and, due to the continued obedience to patriarchal power, some men and women still believe in these genderfocused prescripts. These influences have perpetuated the “good mother” versus “bad mother” dualism (Allan, 2004:58; Fouquier, 2011:145).

Those who are underprivileged, not well educated and have limited access to resources are already put under pressure prior to incarceration and are further marginalised. Once a woman is incarcerated, she is largely unable to fulfil her traditional role of being a mother. Thus, an incarcerated mother’s own sense of individualism is stripped away along with her identity as a mother.

### **1.2.3 Incarceration**

The terms associated with incarceration have developed and progressed considerably in the South African setting over the years. During the 1990s, South African correctional centres became demilitarised and transformed towards a rehabilitation-focused penal system (Luyt & Du Preez, 2010:88). The term “prison” has changed to “correctional facility” and the term “prisoner” has become “inmate”. Incarceration, a recently designated term, is the state of being confined in a correctional facility (Luyt & Du Preez, 2010).

The term “incarceration” entails a process that involves the admission, confinement and detention of a person in a prescribed place for the duration of their sentence. In this study, incarceration will refer to an ordinary prison sentence (Peacock, 2006:5).

#### **1.2.4 Children and infants**

The Department of Correctional Services (DCS) defines an infant as “a person from birth to two years of age, who is dependent on [his or her] mother’s care while the mother is in custody” (Schoeman & Basson, 2009:8). The *Children's Act 38 of 2005* considers a child to be any person under the age of 18 years. However, only infants are permitted to reside in correctional facilities with their mother. For the purposes of this research, an infant will be any person under the age of two who currently resides with their mother in a South African correctional facility.

### **1.3 HISTORICAL PERSPECTIVE**

To gain a better understanding of female incarceration in South Africa, one has to take into consideration the various developments over the years in order to evaluate the position we are now in terms of female incarceration critically.

During apartheid, the most important legislation for female inmates was the *Prison's Act 8 of 1959*. This Act ensured inmates were separated by gender and race; however, all correctional facilities became “closed” institutions, and therefore did not permit outside inspection or scrutiny by the public, which included the prohibition of media coverage (Griffard 1997:16; Oswald, 2007:4). Due to these prohibitions, formal research information on prison conditions during apartheid is extremely limited; consequently, personal writings and accounts of prisoners during that time are highly valued and appreciated by scholars (Dick, 2008:2). Therefore, the literature regarding a concise and specific timeline of female incarceration and infants in correctional facilities is not well documented.

During this time, female inmates were largely treated inhumanly; especially black female inmates were treated the worst due to the colour of their skin. At the time, there was a considerable lack of essential necessities such as clean clothing and toiletries, as they were often viewed as the “leftover” category. Female inmates were subjected to many injustices, including gender-based violence such as rape. Many female inmates would often not resist this abuse, as it would allow them to use it as a bargaining chip in return for something of comfort such as better or extra food and access to illegal substances such as drugs. During this time, the penal system was excruciatingly discriminatory and

harsh towards the black population. Especially black women bore the brunt of it, because they were considerably more vulnerable than men were. Menstruation and pregnancy made them an easier target for the system to abuse them. Often women were not supplied sanitary pads which allowed for humiliation and degradation from officials. Therefore, female inmates had to protect their bodies, gender and sexual identity because it was taken away so easily by the atrociously discriminatory system in place at the time. Female inmates recalled being physically abused to such an extent that they were unable to conceive due to the toll it took on their bodies. In addition, their mental and physical well-being deteriorated immensely within this incarceration population as female inmates endured long periods in confinement if they disobeyed any instruction given to them, which ultimately led to complete loneliness and limited interaction with other people (Bernstein, 1985:51; Graybill, 2001:2-4; Mandela, 2013:10).

Internationally, Mother-and-Child Care Units date back to the early 1800s, when female inmates were permitted to reside with their babies while being incarcerated. However, the prison conditions were horrendous and often these women were crammed into very small spaces supervised by men and, ultimately, no dignity was afforded to this prison population. It was only in the 1990s in South Africa that correctional facilities began to centre policy on the needs of both mother and child, and since then, policy has been constantly developing in order to produce the best environment for the incarcerated mother and child (Craig, 2009).

Prior to 1994, South African infants who resided with their mothers in correctional facilities (prisons) were not separated from the general female-offender population by means of a separate housing facility. They would share a single cell with their incarcerated mother. During 1996, the need for specialised care of this particular offender population and their infants was recognised. It was then that the need for a separate Mother-and-Child Care Unit was established with the aim of catering to the specific needs of mother and infant. Until 2008, incarcerated mothers were able to keep their children with them until the age of five (Schoeman & Basson, 2009:35).

However, this was later amended to the age of two (Schoeman, 2011:80), due to the long term negative psychological and emotional impact that residing in a correctional facility

would have on an infant. In 2011, the Department of Correctional Services (DCS) opened the first specialised Mother-and-Child Care Unit at Pollsmoor Correctional Facility in the Western Cape, which could house up to 15 mothers and babies.

#### **1.4 LEGISLATIVE FRAMEWORK**

Over the past two decades, the correctional system in South Africa has been transformed from a segregated penal system to a system that is consistent with democratic values, and which aims to protect the basic rights of all citizens as expressed in the 1996 South African *Constitution*. This process of transformation has been guided by the Department of Correctional Services, and new legislation, in particular the *Correctional Services Act 111 of 1998* (amended). Under this Act, the correctional system is understood as serving the primary purposes of ensuring that incarceration and serving one's sentence is done under conditions of safety and the protection of human dignity; and "promoting social responsibility and human development of all sentenced offenders" as stated in section 2 of the *Correctional Services Act 111 of 1998* (amended).

This is further mentioned in the White Paper on Corrections in South Africa (Department of Correctional Services, 2005), which places rehabilitation at the centre of the Department's goal. After apartheid, this system changed dramatically, and new legislation found in the *Correctional Services Act 111 of 1998* (amended) now outlines the correct procedures to be followed in correctional facilities, unlike those that were highlighted in the previous section, which dealt with historical perspectives.

The legal framework pertaining to incarcerated mothers with infants is outlined in the *Correctional Services Act 111 of 1998* as amended by the *Correctional Services Amendment Act 25 of 2008*. The Act maintains that a child may be permitted into a correctional facility to reside with his/her mother under certain conditions when no other suitable care is available. A mother has to apply in writing, and the child may only be permitted to do so until reaching two years of age. There are unclear aspects regarding the legislation around the definition of the word "mother", since it is unclear as to whether this is applicable to adoptive and foster mothers as well. The legislation does not indicate to what forms of "suitable care" it refers; therefore, it is unclear as to what constitutes

“suitable care” in comparison with a correctional facility. It is also unclear as to how “suitable care” is established and whether it involves an investigation or whether the mother’s statement is sufficient to determine this (Couzens & Mazoue, 2013:431).

#### **1.4.1 International Legislative Framework**

The European Committee for the Prevention of Torture and Inhuman Punishment (CPT), as well as the Standard Minimum Rules for the Treatment of Prisoners (Mandela Rules) 1957, make recommendations for improvements in correctional facilities, if necessary. Rule 23 stipulates that female correctional centres should have the facilities required for all the necessary prenatal and postnatal treatment and care. The rule also states that the necessary arrangements must be made for children to be born in a hospital outside the correctional facility, where practical. The CPT is especially concerned with vulnerable groups in correctional centres, such as incarcerated mothers and their children. One of its primary foci is related to health issues affecting pregnant female inmates, such as their diet and general healthcare. The CPT strongly opposes the practice of shackling pregnant women during gynaecological examinations and labour. It recommends that babies should not be born in a correctional facility and that mother and baby should be allowed some time together before they are separated. Mother-and-baby facilities should include staff trained in postnatal care and infant nursing. Decisions in terms of a child’s long-term care should be carefully considered and the best interest of the child should remain the highest priority (Ackermann, 2015; Council of Europe, 2009).

The United Nations Rules for the Treatment of Women Prisoners and Non-custodial measures for women inmates, also known as the Bangkok Rules, were implemented in order to rectify the lack of attention to the gender-sensitive needs of female inmates. However, in 2008, the United Nations announced that there were no adequate safeguards in terms of women in prison and that not enough consideration had been given to those women with childcare responsibilities, or to the infants who resided with them in prison (Limsira, 2011:5).

Moreover, it declared that little consideration had been given to healthcare and substance-abuse problems. The guidelines recognise incarcerated women as a vulnerable group

within the criminal justice system and addresses those problems that affect them. Furthermore, it highlights the link between incarceration and prior victimisation, as well as the importance of the family unit and rights to parental care. It has therefore stipulated that female inmates should be given the specialised psychological support for past trauma and trauma experienced while incarcerated, gender-specific healthcare when requested and open contact when children visit, as well as gender-specific rehabilitation and services. Therefore, in 2009, the Bangkok Rules were to be adopted internationally (Ackermann, 2015:11; Limsira, 2011:13). However, knowledge regarding these rules and the progress of their implementation in correctional facilities is limited, particularly in South Africa.

#### **1.4.2 Domestic Legal Framework and Policy**

The decision to place an infant with his/her mother in a correctional facility has proven difficult. Many concerns have been raised, both in favour of and against it. Although the determining factor is always that which is in the best interests of the child, South Africa has legislative safeguards and policies in place enabling mothers to apply to have their infants reside with them in prison under certain conditions for a specific period of time. According to the *Correctional Services Amendment Act of 2008*, incarcerated mothers in South Africa may keep their children with them in prison until the child reaches two years of age. The Act also maintains that a special unit should exist where these mothers and children can live together. In 2011, the Department of Correctional Services (DCS) opened the first model Mother-and-Child Unit attached to the Pollsmoor correctional facility in the Western Cape. The new unit addresses issues with regard to the deprivation of children who are imprisoned with their mothers, and attempts to eliminate the negative effects of life in a correctional facility. It comprises a medical facility, a kitchen so that mothers can prepare baby-friendly meals, a nursery, and an outdoor play area. This unit is the first of its kind in South Africa, and the DCS plans to establish many more of these facilities in the coming years (Department of Correctional Services, 2011).

One of the aims of the DCS in South Africa is to provide separate accommodation for all mothers who have young children with them, as well as a crèche facility within "a mother and child unit" at each prison (Department of Correctional Services, 2005:164) where



mothers are accommodated with their children. The focus is on normalising the environment, which would help to promote the child's physical and emotional development while in prison with his/her mother. During this period, the DCS has to take responsibility for the child's food, clothing, healthcare and other necessities. The Department of Correctional Services has a detailed policy framework outlining the protocol for the care of infants and their inmate mothers. According to the policy, an infant and mother residing together is only permitted when no other suitable accommodation and care are available for the child at the time of the mother's imprisonment. The Department of Correctional Services defines an infant as "a person from birth to two years of age, who is dependent on his or her mother's care while the mother is in custody" (Schoeman & Basson, 2009:8). A child "admitted" to prison with his/her mother, where possible, must be housed in a special Mother-and-Child Care Unit.

According to Schoeman and Basson (2009:9), the Mother-and-Child Care Units should ideally have a crèche facility where professional childcare and social workers provide services to mothers and their children. The policy states that if a correctional centre does not have a mother-and-child unit, the correctional centre is responsible for providing alternative suitable accommodation that will cater for the needs of the imprisoned mother and her child. According to the DCS, the aim of the Mother-and-Child Care Unit should create as many opportunities as possible for the mother's personal development, as well as the development of parental responsibilities and skills to enable the mother to look after her child, both when in and out of prison. In order to achieve this, the Mother-and-Child Care Units should provide a physically safe environment for an infant and his/her mother. In addition, it should encourage the mother to be personally responsible for the care of her infant and the area in which they stay, provide an environment with facilities that are conducive to proper childcare and development, and provide counselling opportunities, guidance and training to improve the parenting skills of the mother.

Despite the seemingly low numbers of women who are in DCS facilities (46 326) which make up 2.6% of the prison population the challenges faced by women are unique and require a special approach (World Prison Brief, 2018). These approaches need to take into consideration gender-sensitive challenges faced by women in a correctional facility. One of these unique approaches appears in the *Correctional Services Amendment Act of*

2005, section 20, which establishes an obligation on the part of the DCS to incarcerate female inmates as close to their homes as possible, “especially if they are mothers”. The DCS maintains that women inmates is a vulnerable group requiring increased access to psychological treatment, as well as programmes that specialise in life skills, and family and marriage counselling, which are said to be as being on the same standard of similar programmes run in correctional centres in the United States and Britain.

In an environment where the minority population group includes female inmates, legislation plays a crucial role in the protection of this vulnerable group's rights. In many instances, this is not enough. Despite the large number of legislative safeguards that exist on national and international levels, the reality of the situation is, these policies are not always implemented strictly; therefore, resulting in a lapse between policy and practice. The lapse arising from this involves a lack of resources, including inadequate monetary or human resources, which impedes ensuring that every female correctional facility is functionally equipped with basic Mother-and-Child Care Unit (Parliamentary Monitoring Group, 2014). In practice, it would take South Africa a number of years to reach a stage of progression where we would produce up-to standard Mother-and-Child Care Units for sentenced mothers as well as those mothers awaiting sentencing. The challenge is the specialised form of care which female inmates require.

Therefore, the challenge lies in the implementation of the policy and not the policy itself. Internationally recognised legislative frameworks and policy are of little value if they are not put into practice effectively and efficiently. It is also imperative that policy implementation is evaluated on a continuous basis to ensure its relevance to the particular situation and specific population it intended to help.

## **1.5 PROBLEM FORMULATION**

This section outlines the specific challenges related to motherhood in South African correctional facilities, thus providing a background to female inmates, which is essential to understand the rationale and importance of the research. It also highlights how the research will be grounded in the available literature.

Over the past few decades, the number of women in correctional facilities has appeared to have increased dramatically worldwide (Celinska & Siegel, 2010:48; Chambers, 2009:204; Schoeman & Basson, 2009:3; Shamai & Kochal, 2008:324; Travis, McBride & Solomon, 2003:1; Women's Prison Association, 2009:8). Incarcerated women often experience a different set of difficulties than men do in the prison system, particularly women who reside with their infants in correctional facilities (Anaraki & Boostani, 2014:3094). The steady increase can be attributed to policy changes worldwide, an increased willingness to incarcerate women for non-violent crimes and overall female criminality (Allen, Flaherty & Ely, 2010:162; Agboola, 2014:2; Barnes & Stringer, 2014:4; Goshin, 2010:110; Lo, 2004:400).

Internationally, a large number of countries permit the placement of infants with their mothers in correctional facilities, a trend that dates back to over a century. For years, the history of Mother-and-Child Care Units has been overwhelmed by a negative image, as many programmes try to regulate and control the decisions made by these particular mothers (Craig, 2009). The exact number of incarcerated mothers and children internationally is unknown due to the recording of inaccurate information or inadequate information in many countries, predominantly in developing countries (Alejos, Brett & Zermatten, 2005:30; Robertson, 2008:6; Schoeman, 2011:77; Tracy, 2010:9).

In Sub-Saharan Africa, female incarceration research is seriously lacking. Empirical research about this population and knowledge on gender challenges in female correctional facilities are almost non-existent, and this is commonly due to the misconception that the smaller inmate population do not require as much research as the other groups. However, male inmate research cannot be generalised to female inmates, as this population requires different specialised care specific to gender needs (Topp *et al.*, 2016:157; Dixey *et al.*, 2015:95).

Shaw, Downe and Kingdon (2015:1451) argue that incarcerated women who are pregnant are particularly vulnerable and a scant amount of research exists in which special attention has been paid to their needs, experiences and outcomes. Egelund (2014:20) and Dixey *et al.* (2015:96) reiterate these sentiments, noting that while masculinity is used as a framework to explain and understand male criminality and experiences of

incarceration in Africa, the same cannot be said of femininity concerning female experiences of incarceration. Therefore, viewing incarcerated mothers just as a subcategory of inmates in general does not capture the needs and experiences of this particular inmate population.

In South Africa, according to the DCS as of the 2018/2019 second quarter report approximately 70 women live in correctional facilities with their infants, as was mentioned earlier. According to the policy set out by the Department of Correctional Services, correctional facilities should be equipped with Mother-and-Child Care Units. However, this has not been put into practice at every correctional facility (Children and People with Disabilities, 2014).

Multiple aspects influence as well as accompany maternal incarceration. A few of these aspects will be discussed below to get a clearer picture with regard to what surrounds motherhood in correctional facilities.

### **1.5.1 Physiological Relevance**

Physiology refers to normalcy with regard to the functioning of the body. A number of factors can lead to one's physiological state becoming abnormal, which includes incarceration. Incarceration can often lead to a physical manifestation of the experiences one goes through, because female inmates are prone to a higher vulnerability to symptoms of anxiety and depression, which can be aggravated by pregnancy and childbirth, leading to somatic symptoms (Dixey *et al.*, 2015:97).

These symptoms can include hypertension, sleeping disorders, loss of general interest in life, weight loss and loss of appetite, ultimately having a negative impact on the quality of life of a female offender; the body uses the stress reaction as a defence mechanism resulting in these symptoms. Thus, these reactions take on a psychological dimension resulting in changes in cognition and behaviour (Pinese, Furegato & Santos, 2010; Adams, 1992:7).

Dixey *et al.* (2015:97) argue that evidence shows conditions in African female correctional facilities are harmful to health, largely due to a lack of access to healthcare facilities, and

lack of qualified personnel – all which contribute to the many challenges within the system. Services for female inmates such as screening for cervical, breast and ovarian cancer are almost non-existent and many diseases go untreated because they are undetected. Therefore, considerable attention to gender sensitivity concerning healthcare needs is required at African female correctional facilities.

Incarceration also increases the risk for pregnant women and their unborn babies as prison-induced stress can cause complications before, during and after childbirth. Although not statistically significant due to lack of research, incarcerated women have been shown to have babies with a lower birth weight, and are at greater risk of giving birth before full term. However, this is fully dependant on the age and health of an expectant mother. An interesting fact is that some women who come from poverty-stricken backgrounds, who are often found in South African female correctional facilities, find shelter in the prison environment and receive better care than they would if they had been outside of a correctional facility. If pregnant incarcerated mothers receive the necessary care as set out in the White Paper on Corrections (2005), then both mother and child can be physically healthy (Bell *et al.*, 2004:631; Martin *et al.*, 1997).

### **1.5.2 Psychological Relevance**

Inmates are forced to adapt to the harsh conditions of incarceration as a means of coping. Incarcerated mothers not only have to adapt to harsh conditions but also have to learn how to be a good mother in what is often considered a psychologically taxing environment. In this specific situation, the psychological impact is twofold, as it affects both mother and infant. Therefore, policy has to consider both parties.

The consensus, according to Haney (2003:79), is that incarceration does not make individuals “crazy”. In fact, most of the time, the psychological impact can be reversed through rehabilitative and counselling processes. However, it is important to note that female offenders are denied the right to privacy. Luyt and Du Preez (2010:89) note that usually in a female correctional facility six women shared a single cell and one toilet. These factors led to a decrease in personal value and low self-worth due to the invasion of privacy and space. Ultimately, it is the stigma of being an offender, coupled with feelings

of low self-worth, which leads to psychological turmoil and a disposition towards unstable behaviour. Being labelled as the “outcast population” can lead to identity development, which is consistent with this label and leads to depreciation, which can cause permanent harm and influence future behaviour (Peacock, 2006:51).

Consequently, female inmates have a poorer state of mental health in comparison to women in the general population (Dixey *et al.*, 2015:95; Steyn & Hall, 2015:82). Incarceration is considered a highly stressful environment in which many aspects can trigger maladaptive responses like emotional and personality disorders (Adams, 1992). The experience of violence, overcrowding, lack of resources and unrest between inmates and different social groups within the correctional facility can be psychologically taxing (Fraser, Gatherer & Hayton, 2009:412; Peacock, 2006:53). These stress levels are also increased when dependants are left behind, such as when mothers are incarcerated.

In the case of mother-child bonding, Eloff and Moen (2003:711) suggest that it is important for a child to form a bond with a primary caregiver in his/her first year of life; this bond provides a sense of security and trust. Similarly, Byrne, Goshin and Joestl (2010:150) believe that the primary caregiver should consistently be present and always responsive to the child’s needs, as this is critical in early childhood. In a correctional facility, the bonding process between mother and child is affected negatively by the environment they are in, due to this environment being relatively hostile and often far from the norm. The bonding process is influenced negatively, because mothers often struggle with the consequences of their crimes.

During pregnancy, incarcerated woman may experience a variety of emotions due to factors such as being separated from family and the stress from the eventual separation from the unborn child; therefore, the risk of depression is increased (Birmingham *et al.*, 2006:402; Powell, Marzano & Ciclitira, 2017:275). As a result, rather than being a “typical” inmate, a mother in a correctional facility has to cope with a larger set of psychological obstacles, such as having to balance the role of mother and inmate in an environment initially not designed for mothering.

Due to the psychological distress and the very nature of the situation, there may be limited opportunity to develop a positive attachment to her infant while incarcerated (Schoeman

& Basson, 2009:23). Evidence suggests that specialised programmes addressing parent-infant relationships need to be implemented, and not doing so can be detrimental to infant development as well as the psychological well-being of the mother (Baradon *et al.*, 2008:361).

The prevalence of mental disorders among inmates is much higher than amongst those found in other groups within the general population, with the highest rates being found among female inmates (Steyn & Hall, 2015:85). Over the past few years, incarcerated mothers have often been separated forcibly from their babies after birth. There is little, if any, time for bonding in a scenario such as this, and as a result, mothers often experience depression (Chambers, 2009:204).

The major drawback of infants residing with incarcerated mothers is the inevitable separation that takes place between mother and child after an attachment has developed. Furthermore, research by Anaraki and Boostani (2014), Celinska and Siegel (2010) and Du Preez (2008) has described this as the most difficult part of incarceration, and is said to be psychologically and emotionally strenuous on both mother and infant. Many mothers have to cope with being incarcerated without their children when it is decided that it is in the best interests of the child to remain out of the mother's care or if the child is over the age of two. This separation can last for several years, much like the psychological and emotional impact (see 3.3.2).

South Africa, unlike other African countries, is the only African state that is making strides to move towards health-promoting correctional facilities. It recognises that healthcare cannot stop at only addressing physical ailments, but must go a step further and provide an environment that creates a sense of well-being among female inmates (Dixey *et al.*, 2015:99). However, Artz, Hoffman-Wanderer and Moulton (2012:236) argue that these guidelines are not followed in terms of healthcare and its promotion thereof, often due to a lack of oversight. Accountability policy is not always implemented effectively.

### **1.5.3 Recidivism**

Recidivism can be described as a pattern of repeated sentencing and subsequent incarceration (Gaum, Hoffman & Venter, 2006:407). The White Paper on Corrections

(2005) shifted the focus from a penal system to that of rehabilitation and restoration. It encourages all sectors of society and the community to become involved and contribute to encouraging change in inmates permanently. The exact cause of the phenomenon of repeat offender behaviour has not been isolated, but it has been linked with varying degrees to multiple individual, environmental and historical factors. Studies have also focused more on male recidivism than on female recidivism (Prinsloo, 2016:204; Taylor, 2015:170).

Although women inmates constitute 2.6% of the inmate population in South Africa, it is vital to understand why women engage in criminal activity in order to try to prevent it (Steyn & Booyens, 2017:34). In South Africa, the female incarceration rate has risen by 68% over the past decade (Prinsloo & Hesselink, 2015:67). If this trend is not critically evaluated, it is likely that it will manifest in a mother-child relationship, which could have an adverse impact on the way in which a child views criminal activity later on in life (see 3.2.4). In South Africa, the negative effects are further complicated by social marginalisation and extreme poverty, which are often the driving force behind female criminal activity, and children of incarcerated mothers often feel the effects of this in a much more challenging and complex way (see 3.2.2) (Jules-Macquet, 2015:3; Botha, Louw & Loots, 2016:4).

It has been suggested that offenders are often blamed for re-offending and are regarded as unable to change. However, Herbig and Hesselink (2012:29) argue that a more accurate and relevant assessment of criminogenic risk factors needs to be carried out as to decide the best option for female inmates as with regards to rehabilitation programmes. This includes having programmes that are gender-specific, which address mothering in correctional facilities as well as post-incarceration. It has been found that inmates who maintain close contact with their families, especially in the case of mothers and their children while incarcerated, have better post-release outcomes and lower recidivism rates (Charkoudian, Cosgrove, Ferrell & Flower, 2012; Travis *et al.*, 2003; Powell *et al.*, 2017:275).

This suggests that children form a critical component in assisting incarcerated mothers through rehabilitation programmes because children and family provide both social



control and social support (Travis *et al.*, 2003:6). Therefore, it is of vital importance that female inmates are incarcerated as close to home as possible to assist family and children to maintain contact. Incarcerated mothers and infants should also be able to bond in an environment that is conducive to the cultivation of a long-lasting bond that could eventually develop outside the correctional setting.

#### **1.5.4 Societal Relevance**

Although female criminality is under-researched in South Africa (Prinsloo & Hesselink, 2015:67), it is imperative to explore the contributing factors that influence the increase in the female incarceration rate, which also means that the number of infants in correctional facilities will increase. The following will highlight some of the societal factors contributing to female incarceration.

South Africa has one of the highest crime rates in the world. Although it is widely accepted that crime is a complex and multifaceted social phenomenon, it is linked to South Africa's history and current socio-political circumstances, poverty and unemployment, as well as difficult and unstable relationships (Herbig & Hesselink, 2012).

The relationship between poverty and crime has been noted in international literature as well as research by local researchers. Crime and poverty are based on the notion of deprivation; deprivation reduces economic opportunity such as employment; therefore, one often commits a crime as a means of survival due to financial pressures and responsibilities (Breetzke, 2010:2).

Dastile (2013:5298) and Du Preez (2008:1) suggest a trend of unemployment is reflected among female inmates, as a significant number of women are unable to find employment due to their underprivileged backgrounds and lack of education, resulting in poor skills set. In addition, many reside in rural areas and have limited access to resources and support services. Women offenders are also more likely to assume the role of sole financial provider for their families, as many are single mothers. A large majority of female inmates are convicted for crimes related to theft and fraud, which are economic crimes; therefore, this can be directly linked to deprivation, especially when poverty and unemployment are prevalent throughout South Africa, giving rise to a relatively large

female inmate population (Hesselink & Mostert, 2014:338; Jules-Macquet, 2015:11; Prinsloo, 2016:207).

Unemployment, a lack of education and patriarchy play a significant role in understanding why women turn to a life of crime. Often grandparents and other caregivers are given the responsibility of taking care of the children of incarcerated parents. However, the caregivers themselves are often challenged by socioeconomic difficulties, including reliance on government grants, low or no income, caring for many dependents, relatively poor health, and lack of employment. Children who once stayed with an incarcerated mother are often placed in the care of a family member, which contributes to further financial pressures. If family members are unable to take care of the infant, then foster care becomes the next option (Lunga, 2009:28).

Substance abuse, early exposure to alcohol and drugs, and prior victimisation are significant contributing factors to female incarceration. Women commit a crime because either they are under the influence of drugs and alcohol, or they engage in criminal activity as a means survival – not only their own survival, but also often many individuals for whom they are responsible. All these societal factors contribute towards female criminality, and in the event that these factors culminate, there is a significantly higher probability of a female engaging in a variety of criminal activities (Artz *et al.*, 2012:228; Lo, 2004:400).

### **1.5.5 Victimological Perspective**

A large majority of incarcerated mothers are marginalised by their class, gender and race, thus the increasing probability of victimisation. Although each has her own unique story, one aspect that the majority of incarcerated women share is their “invisibility”. This invisibility is a result of being part of a smaller inmate population than that of males; therefore, less attention is given, because it is often seen as less of a concern.

Therefore, the combination of multiple marginality and stigmatisation, coupled with the shame of incarceration, places this inmate population in a vulnerable position, as it is often seen as being “disposable” to society (Allen *et al.*, 2010). This is linked to South Africa having one of the highest intimate-partner violence rates in the world. Violence against women is a global concern and approximately one in five women has experienced

some form of violence. South Africa has one of the highest rates of violence against women, which includes both sexual and general violence (Isaacs, 2016:492). The victims of abuse are seldom aware of their constitutional right to be free from all types of abuse and violence and to be treated as an equal (Artz *et al.*, 2012:149).

Therefore, female inmates frequently experience victimisation prior to imprisonment, including childhood rape, intimate-partner violence, self-harm and mental health problems. In addition, they may also have witnessed violence in their own families at some point in their lives while growing up (Haffejee, Vetten & Greyling, 2006). This leads to significant challenges regarding their adjustment to a correctional facility setting.

A large majority of female offenders are both victims and offenders. Research suggests that coping mechanisms used by these females in order to “get away” from the victimisation are often illegal, which leads to the “victim-turned-offender” cycle. Therefore, evidence of a possible link between prior victimisation and female incarceration exists (Belknap, 2007:4; Dastile, 2013:30). Thus, the increased number of mothers in correctional facilities is possibly due to retaliation to victim blaming, leading to infants joining their mothers in correctional facilities (Hesselink & Mostert, 2014).

Over the past few years, South Africa has become notorious for the high rates of police brutality because of a lack of leadership, supervision and accountability. This brutality is seen at various stages, such as being in police custody, awaiting trial and while being incarcerated (Hesselink & Häefele, 2015:324).

Sexual victimisation as well as other forms of violence is often perceived as a “normal” aspect of being incarcerated and it is well established that correctional facilities are violent institutions. Female inmates are highly susceptible to various forms of victimisation and abuse due to the vulnerability that accompanies the incarceration process, which is due to the lack of supervision and accountability (Lahm, 2015:273). This culture of inmate-on inmate victimisation, which is often used as a means of survival and dominance as well as correctional officers victimising inmates, is one that has been cultivated over many years.

Prison gangs have a profound influence on inmate behaviour and culture and often the sexual victimisation of inmates by other inmates are overlooked. Officials often feel helpless, as it is such a widespread challenge, however prison gangs are more likely to occur in male correctional facilities. Female inmates are also less likely to come forward, as there is a feeling of shame and guilt as well as the fear of being victimised further. Abuse of female inmates is also perpetrated by officials and volunteers; this is often set up by officials themselves who in return get a bribe or get the opportunity to “punish” an inmate by setting up these “visits” (Department of Correctional Services, 2011:4).

Correctional facilities also tend to become overcrowded, which leads to victimisation between inmates, due the close proximity in which they find themselves; therefore, making acts of violence easier to perform. However, the DCS has claimed responsibility for this, citing these events as “poor correctional management and a lack of effective monitoring” (Department of Correctional Services, 2011:5). Therefore, mothers and infants require their own unit to make the environment normal as possible.

Various forms of discrimination against female inmates have become a considerable challenge in the correctional setting, especially because incarcerated females are in the minority. Some correctional staff have become involved in these discriminatory acts, and one can attribute this to the racial and gendered violence prominent in the larger society, which is then exacerbated in the correctional environments. Luyt and Du Preez (2010) and Isaacs (2016) state that the female inmate population is neglected, because females have minority status in the larger male-dominated society.

Therefore, femininity is still largely constructed along the lines of patriarchal dominance that exists within society. It is from the above information that one can deduce that the challenge lies not only within the DCS, but also within the larger society. Therefore, the challenge of gender-based and minority status found in our society permeates correctional facilities.

## **1.6 DEARTH OF RESEARCH**

There is a lack of literature and empirical research as a whole in Southern and Sub-Saharan Africa on female incarceration focusing on gendered experiences, particularly

the experiences of mothers in correctional facilities. Research on female criminality, in comparison with male criminality in Southern Africa, is almost ignored and has not been covered substantially (Dastile, 2010:97; Topp *et al.*, 2016:157).

The number of female offenders remains significantly lower than that of male offenders, and is often the reason for this population being neglected in terms of research. However, the number of female offenders has fluctuated in South Africa. Therefore, research is imperative as a means of understanding female criminality and the reasons for these numbers being on the rise (Dastile, 2010; Noblet, 2008; Prinsloo & Hesselink, 2015).

It was observed by Haffejee *et al.* (2006) that female inmates in South Africa are a forgotten population in terms of research and public debate. Their voices are hardly ever heard, as in much of the research the incarcerated infant is of greater interest, and the mother's needs and experiences are often inconsequential in comparison to those of the infant's.

Two similar studies in terms of sample population have been done on incarcerated females residing with infants in South Africa. The research of Du Preez (2008) and Gowland (2011) are relatively outdated, which is why there is a need for new, more relevant information. The reason for this is that various policies have been implemented since 2011.

The study of Du Preez (2008) was qualitative by nature and was limited to black female inmates as participants. However, this study was conducted at eight female incarceration facilities, which allowed for a range of female inmates to be "observed" throughout the country; however, the study was conducted before specialised Mother-and-Child Care Units were available in female correctional facilities.

Gowland's (2011:45) study was only conducted in one female correctional facility and was qualitative by nature; thus, the limitation to this study was that while at the time there were specialised Mother-and-Child Care Units the researcher "was only able to look at one unit and speak to one mother". Therefore, and since then, each mother residing with her infant has her own mother-baby unit, as prescribed by the DCS (Schoeman & Basson, 2009:9).

While Schoeman & Basson (2009) conducted an in-depth study in association with the South African National Institute for Crime Prevention and the Reintegration of Offenders NICRO, the study lacked a qualitative component. The focus of the study was on the impact of incarceration on the infant and shed no light on the incarcerated mother's experiences. This was also the case in a study done by Mazoue (2012) which focused on the current age based approach to the separation of infants from their mothers. Shoko (2012) did a study which shed light on the rights of children who are born in correctional facilities and living with a mother in a facility. Therefore all studies mentioned above focused mainly on the impact on children and little focus was given to the experiences of these particular inmates.

To date, research on female inmates, especially those residing with infants is largely limited because it does not give them an opportunity or a platform to provide insight into their lived experiences, life histories or socio-cultural circumstances. Consequently, the limited number of studies originating from South Africa renders the female African inmate silent and even more so motherhood in correctional facilities. Because of limited research, experiences are not rooted in African experiences and the research is not focused on the individual's experience (Dastile, 2013; Artz *et al.*, 2012). There is particularly limited research on the experiences of mothers in incarceration facilities in South Africa; their individual experiences are unknown and under-researched (Celinska & Siegel, 2010; Du Preez, 2008).

## **1.7 AIMS OF THE STUDY**

The primary objective of this study is to explore the experience of motherhood while being incarcerated with an infant in a South African correctional facility. To achieve the objective, the following aims have been formulated:

- i. To gain a better understanding of the nature of mother-child interaction/meaning of motherhood within a correctional facility;
- ii. To explore whether the Mother-and-Child Care Units are conducive to the needs of both mother and infant; and

- iii. To highlight an incarcerated mother's experience of recidivism.

## **1.8 CONCLUSION**

Many scholars emphasise that female offenders are often invisible in the many facets of the correctional system and it seems South Africa is no exception. Today, the country grapples with female offenders who are neglected and misunderstood. These women emerge from an underprivileged background with little or no education and are potential candidates with a proclivity for recidivism. The voices of these female offenders are rarely heard. The primary aim of this study is to explore the issue of motherhood while being incarcerated with an infant by giving female offenders the opportunity to provide some insight into their lived experiences, in order to gain a better understanding of incarceration and motherhood.

## **CHAPTER 2 THEORETICAL PERSPECTIVE**

To understand gender equality, as well as the nature and role of motherhood, it is important to look at feminist perspectives solely as well as within criminology. These perspectives seek to highlight issues of gender and criminal justice in the public domain.

Feminist theorists argue that for many years, crime and criminality have been discussed by men, for men, and with very little reference to women. Therefore, feminists are committed to understanding the experiences from women's perspectives, which should be in their own language and on their own terms, regarding how they view themselves (Rasool, 2012:147).

Most of the analyses regarding the committing of crimes and the experience thereafter are primarily from a male perspective. This can also be attributed to male incarceration dating back further than female incarceration (Bloom & Covington, 1998; Medlicott, 2007; Tripathi, 2014). Therefore, the traditional incarceration model often did not consider female offenders and it was constructed with the needs of male offenders in mind. This has ultimately led to the oppression of women in the criminal justice system. Due to this, most feminist theorists argue, little attention has been given to gender-specific concerns (Covington, 2002:1; Flower, 2010:2).

This chapter introduces the focus of feminism and incarcerated mothers. It begins with presenting a theoretical framework underlying the research including the construction of motherhood within feminism and other paradigms.

### **2.1 PATRIARCHY**

Over the years, scholars have raised questions regarding gender and the importance thereof in the criminal justice system. This has been done in an attempt to understand the differences in needs between the genders, to bring gender relations and social order to the forefront, and to address issues of inequality between male and female offenders in the criminal justice system. Frenkel (2008: 1) maintains that, within a South African perspective, there are many differences that shape the lives of women from different races, "but patriarchy has been the one constant profoundly non-racial institution".



Patriarchy is fundamentally the dominance of males over females and can refer to an entire system that benefits men. Therefore, patriarchy grants power and privilege to men because of their masculine sex role because society looks up to the masculine identity (Warnock, 1982:28). This discrimination is found in wider society and not only within the criminal justice system.

While sex differences are biologically determined, gender differences are socially constructed, and the roles that are ascribed to the genders are done so by society. Sex differences have enabled society to assign specific roles to the genders. Irrespective of race or class, the majority of women are expected to live up to these gender-based norms in their lives. Patriarchy is therefore able to take advantage of these societal genderbased norms by keeping men and women separate from each other while allowing one to be more superior to the other, due to gender-assigned roles (Covington, 2002:2).

Patriarchy is perpetuated when violence against women and misogyny (women hating) is combined. It works by dividing society into smaller groups such as mothers, wives, offenders, etc. Therefore, these groups are then more easily controlled through hierarchy and domination. Under patriarchy, every woman's identity is linked to a man through institutions like heterosexuality and marriage (Warnock, 1982:29). Therefore, the driver of patriarchy is a dynamic relationship between control and fear (Becker, 1999:25). While patriarchy is an overall umbrella term, this idea has come about through feminist perspectives, encompassing much more than male supremacy and present in almost every aspect of some women's lives.

## **2.2 FEMINISM**

Feminism and its relentless pursuit of gender equality has proven to be complex and multifaceted, and has come under much scrutiny throughout history. The term *feminisme* was first coined in 1837 by French philosopher Charles Fourier. Fourier believed that women have been placed in a disadvantaged position within society and therefore society should be reconstructed to correct this unfairness. Although feminism is considered a concise theory regarding gender equality, there is no single definition of it. Rather, multiple definitions are used to accommodate the large array of different feminist perspectives.

The paradigm incorporates different assumptions and at its core, it is concerned with gender inequality and women's oppression in multiple spheres of life (Burgess-Proctor, 2006:28; Phillips & Cree, 2014:930).

Thompson (2001:6) maintains that one should not define feminism precisely as the concept is too vast to have only one definition. Instead, it can be described as an ideological framework that is concerned with reforming social wrongs against women.

Various aspects need to be examined when viewing society through the theoretical lens of feminism, since it is such a vast, ever-evolving theoretical framework. The movement has evolved for various reasons, such as changes within society itself. This means different women experience different oppressions, which are often because of various social roles and norms that are dependent on the type of society in which they find themselves. Therefore, the treatment of women is heavily dependent on the culture and the current societal norms. Furthermore, respecting one's culture has often become a euphemism for restricting the rights of women in many countries. Cultural practices are often claimed when regarding human rights issues such as the 'legislation' of child marriages, issues of sexuality and issues of reproduction (Frenkel, 2008:4; Okin, 1998:35).

Therefore, the discrepancies in women's rights are still extremely unequal worldwide. While many countries have made notable progress over the years, other countries are still not as concerned with the liberation of women's rights, one of the reasons why feminism is an evolving movement that is still relevant today.

This movement has been perceived to liberate the female gender from the different oppressions that are faced by women all over the world. Women have been viewed as the 'weaker' gender for quite some time, which often places them in a vulnerable position. This is more so for female inmates and incarcerated mothers with infants.

The movement has been developed through waves; these waves include the first wave, the second wave, the third wave and various developments from the third wave. The waves refer to a period that was extended through the century as regards feminist activity.

These waves have been divided into different topics, ranging from liberal feminism to radical feminism and finally to postmodern feminism.

Discussed below are short historical perspectives of each feminist movement together with its main proponents and an evaluation of each.

## **2.3 LIBERAL FEMINISM (18<sup>TH</sup> AND 19<sup>TH</sup> CENTURY)**

The first wave of feminism started in the early eighteenth century and focused on women gaining equal opportunities, such as opportunities for education and voting rights. Economic equality and opportunities were severely unequal between men and women. The movement during the early nineteenth century also sought to oppose the chattel and ownership of women and their children during marriages by their husbands. The movement saw the rise of different feminist groups. Later this wave spread across to many countries and led to the rise of multiple feminist groups advocating the rights of women.

### **2.3.1 Eighteenth-century thought**

In the early eighteenth century (1799), Mary Wollstonecraft wrote about why women at the time should be as educated as their male counterparts in her book, *A Vindication of the Rights of Women*. Throughout her work, she encouraged women to become autonomous thinkers that should be able to make decisions for themselves. She insisted the only way this would happen was if women were educated. She was criticised for believing that women did not need to be economically or politically independent. Wollstonecraft presented a representation of a woman as a person and not as an object, which is what she wanted to achieve. Like a man, a woman is a person and not a 'toy' of a man. She was therefore instrumental in starting a discussion about women's position in society (Tong, 1998:15).

Almost a hundred years later, John Stuart Mill and Harriet Taylor continued the discussion, arguing that men and women could attain the same degree of knowledge, but because of a man's position in society and his privilege, he is automatically at an advantage. Unlike Taylor, who held the intellectual abilities of women high, Mill believed women would still

choose to rear children and maintain a household if they were given opportunities for education (Tong, 1998:21).

During this time, limited action took place regarding the rights of women. However, much debate took place through thought-provoking writings of scholars.

### **2.3.2 Nineteenth-century action**

During this period, Elizabeth Cady Stanton, together with Susan Anthony, was instrumental in advocating for a woman's right to vote. They believed if women had the right to vote as men did they would be able to express their own views and contribute to a positive change in women's oppression. Women in Britain and America began to protest for the right to vote. In 1910, this was partially achieved, since women over the age of 40 who owned a house were allowed to vote. However, this still disadvantaged women of lower class who were mostly women of colour. The right to vote for all women was achieved in 1920 and the constitution of America was amended. Therefore, during this time, gender oppression was a key feature of a capitalist society and power and privilege was a characteristic of gender difference (Tong, 1998:21).

During this time, South Africa was still under apartheid rule. Women of colour were unable to vote and had very little access to formal jobs. Therefore, South African women of colour would only experience this liberation much later on, after 1994, in a democratic society (Agboola, 2014:28). South Africa's social construction had to be fundamentally broken down and rebuilt to construct a society of cohesion and equality to which the feminist movement in South Africa was a contributing factor.

This feminist movement had to be particularly sensitive to the diversities in cultures and race that is found in our complex society. The struggle during apartheid affected women in many ways, especially women of colour, and there was hardly any room for opportunity and growth. Women often had the responsibility to look after the home first, while men had the responsibility to look for work. This work was often far from home and contributed to the breakdown of family bonds, increasing the pressure and strain on women, especially those who were mothers. Therefore, in South Africa, women's rights were

intertwined with apartheid. This often gave women of colour no option but to deviate from these traditional roles, which led to oppression (Frenkel, 2008:4; Steyn, 1998:46).

Liberal feminists argued that if a woman stayed at home to care for children, she was dependent on a man to provide for her and her children. If a woman worked outside of the house, she was still expected to fulfil her duties at home and therefore actually worked twice as hard as a man but for less pay. Therefore, the family was a source of oppression and exploitation (Lorber, 1997:11).

Liberal feminists called for women's equality and freedom of choice. The liberal feminist thought was that gender inequality emerged from the creation of separate spheres within society for men and women and this then determined the appropriate roles of men and women. Liberals do not believe that discrimination is systematic, but rather that men and women must work together to create a society where roles can be androgenised, meaning both men and women should have a blend of male and female characteristics (Simpson, 1989:607).

Ultimately, liberal feminists fought to eradicate gender roles, they wanted both women and men to be able to do and achieve the same things without perceived gender roles obstructing opportunity.

### **2.3.3 Critiques of liberal feminism**

One of the main critiques of liberal feminism is that the movement was overly optimistic, simplistic. It ignored the deep-seated structural causes of women's oppression at the time and it was more complex than simply giving women equal opportunities. The movement did not offer explanations about the overall structures that were in place, which allowed society to function in the way it did. The movement assumed by that, changing law and policy, women's lives would be changed and oppression would be a thing of the past. They did not take into consideration the structural root causes (Tong, 1998:39).

It is important to note, however, that liberal feminism did lay the foundation for other feminist movements and became the substance that sparked a discourse of radicalism.

Liberal feminism was prominent in examining the way society functioned and how this functioning oppressed women.

## **2.4 RADICAL FEMINISM (1960-1980)**

The second wave of feminism, known as radical feminism, focused particularly on the ways men and women are different from each in terms of biology, the experiences of women as a group, and the consequences of these differences. In 1963, Betty Friedan published her book, *The Feminine Mystique*, which addressed women's dissatisfaction with societal standards. She raised concerns that while marriage and motherhood was valued, overwhelmingly two overvalued institutions left women with no room to be anything other than a wife and a mother, and for some women these two institutions were simply not enough. This thought gave rise to radical feminism.

Radical feminism began as a small, women only, leaderless, consciousness-raising group in which women would share their personal experience with one another other, so as not to feel alone in their struggles. These discussions allowed women to go further than discussions about gender discrimination and gave rise to debate about gender politics and patriarchy. Radical feminists believed that patriarchy was difficult to eradicate, as the belief that women were inferior to men was embedded in most men's consciousness. The movement believed men could also learn 'traits' associated with women and mothering. These traits, such as warmth, caring and sharing is often developed through everyday experiences, but since few men 'mother', it is a lot more prevalent in women. Therefore, they believed men would also be 'flawed' if they were placed in the same position as a woman, which was inherently the role of mother and wife (Lorber, 1997:17).

The movement identified patriarchy as the fundamental source of women's oppression and at its core blamed men for the oppression of women. During this time, the concept of 'personal as political' came to the forefront, which challenged the traditional understanding of politics. The movement argued that personal experience was linked to political structures and that personal experiences should be a political concern. This was a concern because often a woman's home was a threatening environment and a source of her abuse. Her "rights" were often controlled by the head of the household; therefore,

there would be power differentials between households and the law, which enabled violence against women to occur in the “non- governmental space” (Okin, 1998:36).

This movement criticised governments for not being concerned enough with the inequalities that women faced, especially those that were disadvantaged in terms of education, housing, employment, freedom of expression and reproductive rights. It argued that men were inherently more aggressive than women are, and due to this, women were subordinate to men (Beasley, 1999:51; Schram & Tibbetts, 2013:289).

Radical feminists often proposed the idea that the oppression of women was more of a concern than any other types of oppression. However, this statement is difficult to explain, as there is no concise idea or reasoning as to why this statement was made. According to Jaggar and Rothenberg (in Tong, 1998:71), the statement can be ascribed to any one of the following reasons:

1. Historically, women were the first oppressed group.
2. Women’s oppression is the most widespread, existing in virtually every known society.
3. Women’s oppression is the hardest form of oppression to eradicate and cannot be removed by other social changes such as the abolition of a classist society.
4. Women’s oppression causes the most suffering to its victims, qualitatively as well as quantitatively, although the suffering may often go unrecognised because of the sexist prejudices of both the oppressors and the victims.
5. Women’s oppression provides a conceptual model for understanding all other forms of oppression.

Due to this, radical feminists believed women’s oppression was the only type of oppression that should centre the political debate.

#### **2.4.1 Sameness versus difference**

During this time, one main question emerged from radical feminism: Are women and men the same? Therefore, is gender equality best achieved by focusing on women and men as the same with different societal roles or should men and women be treated differently

because biologically they are indeed different? If men and women were treated differently, to what extent should this difference go in order not to perpetuate gender discrimination? If they were to be treated the same, in what ways would they be treated the same, considering biological differences? To this day, these questions reshape the political debate. The sameness-difference debate spilled over into the criminal justice system, arguing that sentencing laws were constructed around the male offender and failed to acknowledge the difference in characteristics of a female offender (Burgess-Proctor, 2006:32; Tong, 1998:27).

The sameness approach argued that, in terms of sentencing and law, men and women should be seen as equal, which would ensure gender equality (Bloom & Covington, 2003). However, this meant that women would be seen as men in the criminal justice system. Radical feminists opposed this view and argued that women should be seen separate from men but not be oppressed by them.

This debate was criticised for focusing too much on what made men and women the same or different from each other and by doing so lost sight of what should be done in order to eradicate oppression. It also ignored the differences between women themselves and assumed all women were on an equal playing field. The sameness-versus-difference debate failed to provide any substantial solutions to oppression (Williams, 1991:300).

#### **2.4.2 Critique of radical feminism**

Radical feminism was criticised for viewing women as one homogenous group. While this gave women a universal standing and a sense of 'sisterhood', the movement did not take into consideration the differences between women themselves. Therefore, the movement was blind to class, colour and sexual orientation. This type of movement only catered for those women in the West because it placed white, middleclass women at the forefront, without being inclusive (Tong, 1998:88).

Therefore, radical feminists generalised experience and invalidated the experiences of women as individuals; rather, they viewed all women as going through the same experience. However, the idea of sisterhood did propagate the movement and allowed women to feel less alone in their everyday struggles as well as within the larger patriarchal



system in place. The movement was also faulted for offering blanket statements such as “all men oppress women” which many women disagreed with. Therefore, these feminists often blamed all men for structural issues (Mandell, 1995:34).

Overall, radical feminists did not provide a cohesive way to eliminate women’s oppression. They believed the root cause of oppression was patriarchy and therefore biological, suggesting that there needed to be a way that women could bear children outside of the womb. They also considered lesbianism to be a solution not only as a personal preference, but also as a political statement. This, however, was criticised for not allowing women to be individualistic in their decisions, which is also oppressive by nature (Sears, 1988:26). Therefore, radical feminism failed to acknowledge a comprehensive solution to patriarchy, but rather provided overbearing idealist political strategies.

Radical feminism focused on the biological differences of men and women, as well as how this placed women in an adverse situation. In relation to the study, one can expect the experience of incarceration of males and females to be vastly different, based on biological differences alone. Experiences of menstruation, pregnancy and motherhood place female offenders at a particular disadvantage in the correctional environment, as these experiences can be used to abuse women.

## **2.5 FEMINIST CRIMINOLOGY (1970s)**

The notion of a male centric society later emerged in the criminal justice system; the idea that, fundamentally, the issue of inequality is a political concern and should not be limited to a few spheres of society gave rise to the development of feminist criminology.

Feminist criminology dates back to 1976 when the work of Carol Smart was published. Her book, *Women, Crime and Criminology*, was a critical turning point for criminology as she argued criminology needed to develop to include a female perspective (Gelsthorpe & Morris, 1988). In the 1970s and 1980s, feminist criminology started addressing the two concerns with the criminological thought of that era: the sheer neglect of women in the study of crime, and the one-dimensional account of women's experience before, during and after incarceration, which in turn produced a mismanagement of women in the

criminal justice system (Gelsthorpe & Morris, 1988; Mason & Stubbs, 2010:3; Van Gundy & Baumann-Grau, 2013:6).

According to Fontebo (2013: 46), feminist criminology “emphasises the context of women’s lives and examines this context with an awareness of patriarchy and its impact on the oppression of women in prison just as the lives of women in prison are gendered, so is the study of these worlds”.

Both Simon (1975:3) and Adler (1975:252) foresaw that with women’s increased participation in the labour force, there would be more room for illegal activities to take place, such as fraud and white-collar crimes. Therefore, women's traditional roles would change. Earlier feminists (liberal) believed that women commit fewer crimes because society provided them with fewer opportunities to engage in crime. This view regards the source of women's oppression stemming from gender roles; therefore, men are seen as competitive and violent whereas women are seen as passive and nurturing which was also an argument of radical feminists (Burgess-Proctor, 2006:29).

### **2.5.1 The development of feminist criminology**

Feminist criminology contributed to addressing the gap in research, and examined the theoretical frameworks of criminology, as well as how it did not apply to females, as it had a male-centred approach. It somewhat examined women as victims and offenders; however, more attention was paid to women as victims due to the high rates of sexual and domestic abuse against women. It also explored the treatment of female inmates within the criminal justice system (Fontebo, 2013:39; Tripathi, 2014; Mason & Stubbs, 2010:8).

Adler (1975:87) pointed out that men and women had to be examined as different from each other in the criminal justice system, because if they were the same, then they should have the same crime patterns, which they do not. Therefore, biological determinants cannot explain female criminality, but rather social influences as well as other variables may be able to explain female criminal behaviour. Furthermore, there was a generalisability problem in the criminal justice system at this time, as it failed to account for women, especially concerning theories of crime and deviance.

Flower (1987) invoked the notion of chivalry by stating that women receive less harsh sanctions than men do. In contrast, Chesey-Lind (1988) argued that women actually get harsher sentences than men to ensure that they remain subservient and confined to their gender role, contributing to the upholding of patriarchy. Smart (1976:42) labelled this argument as “equality with vengeance”. This brought about a debate in the criminal justice system about the discrepancies in sentencing based upon gender.

Carlen (1985) argues that there is not a typical female criminal and that there is no single, exclusive way in which to evaluate female criminality, given that female criminals have a wide range of characteristics. This notion therefore adopts a strong feminist view and is essentially against a pathways approach to female criminality, which assumes that females follow a specific route to crime and specific factors should be present.

Therefore, one of the emerging themes coming out of feminist criminology is the treatment of female offenders within the criminal justice system (Britton, 2000:58; Covington, 2002:15; Gelsthorpe & Morris, 1998:97). Heidenson (1985:44) is of the view that new theoretical perspectives need to be developed to understand female crime. She argues that mothers are treated worse than male offenders are treated in the criminal justice system, since they have deviated from their femininity and their assigned gender roles. Due to this, the system feels they are disposable to society.

According to Burgess-Proctor (2006), feminist criminology will only be of use if it embraces a theoretical framework that incorporates multiple inequalities in order to gain an understanding of gender, criminality, and the criminal justice system. It is against this backdrop that Potter (2006) argues that feminist criminology requires more than just the exploration of gender because, while it is fundamentally important, it should be accompanied by factors such as race and other inequalities. Motherhood is no different since, just as race and class, it may also be to the detriment of incarcerated females in the criminal justice system.

For example, when considering parenthood, infants are able to reside with their mothers in correctional facilities throughout much of the world for a certain period; however, the same cannot be said for fathers. This is because women and men cannot be seen as the same, especially in the criminal justice system. Therefore, in this particular situation, this

difference should not oppress and disadvantage female inmates who are mothers through stigmatisation and the belief that one has deviated from their societal norm, but rather be used to acknowledge that female and male inmates are different from each other, which requires a different theoretical and practical approach.

## **2.6 POSTMODERN FEMINISM (1980s – PRESENT)**

The third wave of feminism focused on aspects such as race, sexual orientation and religion and individuality among women themselves. This has evolved into advocating the personal experiences of all women since experience is not synonymous (Agboola, 2014:25; Beasley, 1999:51; Schram & Tibbetts, 2013:289). This view is relevant for this study as it brings the experience of motherhood in correctional facilities to the forefront. Mallicoat (2012:8) contends that this type of feminism has given women a voice in spaces, such as in the criminal justice system, where the narrative is primarily dominated by men.

Daly and Chesney-Lind (1988:504) pinpoint the guiding principles of postmodern feminist inquiry as the following:

- a. “Gender is not a natural fact, but a complex social, historical, and cultural product; it is related to, but not simply derived from, biological sex difference and reproductive capacities.
- b. Gender and gender relations order social life and social institutions in fundamental ways.
- c. Gender relations and constructs of masculinity and femininity are not just symmetrical, but are based on an organising principle of men’s superiority, including social, political and economic dominance over women.
- d. Systems of knowledge reflect men’s view of the natural and social world; the production of knowledge is gendered.
- e. Women should be at the centre of intellectual inquiry, not peripheral, invisible, or appendages of men.”

### **2.6.1 Postmodern feminism in South Africa**

Mainstream feminism, which has its roots in liberal feminism, has been criticised for not considering marginalised women's voices. In South Africa, black women's voices were previously not heard as white middleclass women dominated the feminist debate. Black women also required acknowledgement since their concerns were different to that of white women. In South Africa, the oppression against black women was on three levels – gender, race and class (Steyn, 1998:42). Due to the focus being on white middleclass women, feminism had not yet reached the point where it stood for all women and not just one type of women.

Stander (2016:88) contends that power relations are complex; men in general benefit from a patriarchal society. Despite not all men using their power to exploit women, men confer power by just being male. Most men benefit from this cultural norm seen in South Africa, and are influenced to take on this social identity through societal pressure, which is often why very little is done about the disadvantaged position of women.

Therefore, liberal and radical feminist perspectives were critiqued for being too basic and not addressing the core of the problem. Over time, postmodern feminist perspectives delved into complex engagements with gender relations. It is no longer focused only on patriarchy, but rather on an understanding of power relations in society. Slowly women in South Africa were establishing a framework in accordance with the national agenda. Because apartheid ended, it was time to include everyone, therefore creating an inclusive society of all voices and feminism was an integral part of shaping a new society in order to make a difference in all South African women's lives. These women were often part of organisations such as the African National Congress Women's League and the Women's National Coalition (De la Rey, 1997:8; Steyn, 1998:44).

### **2.6.2 Postmodern feminism and gendered experience**

Contemporary feminists analyse power across multiple levels such as the individual and the structural, as well as where these powers intersect (Willison & O'Brien, 2017:38). When an experience is examined, it happens at the micro-level; however, this experience

is guided by gendered power relations at the macro-level. What happens at the macrolevel influences the individual experience.

This can be illustrated by notable differences in incarceration experiences and prison conditions, depending on the political stability of different countries, especially so in Africa (Mason & Stubbs, 2010:8). For example, female inmates in conflict countries such as South Sudan and the Democratic Republic of Congo will experience their incarceration vastly differently to mothers incarcerated in South Africa and Namibia. This is attributed to the political climate in these countries, which often influence the experience of incarceration.

Therefore, an analysis is needed regarding the kind of experience produced when individual power (female offender), which is very limited, collides with structural power (criminal justice system). This collision of power can be expected when mothers are no longer able to make decisions for their infants, such as the question of the child's placement after reaching the age of two. In this scenario, incarcerated mothers fully rely on the criminal justice system to make the best decision on their behalf. Mothers in correctional facilities ultimately have no power in this regard, which places them in a vulnerable position. They are completely reliant on the criminal justice system to provide adequate care for them and their infants while incarcerated. However, if this does not happen, they will find it very difficult to contest the system as macro power relations influence the individual gendered experiences.

## **2.7 INTERSECTIONALITY**

Intersectionality can be described within an integrated perspective where it is reflective of experience, relations of power, and the intersection of gender, race, ethnicity and class. It is when multiple facets meet to influence the complexity of an experience (Mason & Stubbs, 2010:14).

In 1991, Kimberlé Crenshaw coined the term when describing the oppression of AfricanAmerican women. She used it as a lens through which to see where power intersects and interlocks, and criticised politics for ignoring intra-group differences. This is evident as male inmates in general are a widely researched topic, while female inmates

are generally more overlooked, and once race, class and motherhood are included, this group is overlooked even more. When differences within a group are ignored, the risk of generalising individual experiences is increased (Crenshaw, 1991:1242).

In this research, intersectionality will include motherhood as an added aspect that influences the individual experience of incarceration. This aspect is somewhat overlooked in the South African context (Celinska & Siegel, 2010:447; Mignon & Ransford, 2012:85).

Burgess-Proctor (2006:37) explains intersectionality as associations that are “dynamic, historically grounded, socially constructed power relationships that simultaneously operate at both micro-structural and macro-structural levels”. Potter (2013:305) defines intersectional criminology “as a theoretical approach that necessitates a critical reflection on the interconnected identities and statuses of individuals and groups in relation to their experiences of crime, the social control of crime and any crime related issues”. Understanding women's social positions and the experience of the individual is vital to any study concerning marginalised inmate populations.

Contemporary feminist criminologists therefore try to examine gender, race, social class, age, inequality simultaneously when relating it to crime and deviance, and why female offenders deviate from societal norms (Burgess-Proctor, 2006). Through this lens, they examine the links between multiple variables and understandings of the mother offender instead of offering generalised explanations. It is important to understand women's incarceration within a context that includes their experiences of victimisation and marginalisation.

Similarly, feminist theorist Daly (1992) contends that adverse experiences prior to incarceration are embedded in patriarchal social structures and that this is carried over into the justice system. This is magnified in the justice system, because the system often concentrates on overlapping gendered factors and not on individual specific interpersonal factors of female offenders. This has ramifications for how the mother offender is treated within different spheres of the criminal justice system, for instance social services may automatically regard her as a “bad mother” while the correctional department might assign stereotypes to her. Therefore, marginalising identities such as class, race, gender and

motherhood must be understood as intersecting oppressions within the criminal justice system (Willison & O'Brien, 2017:32).

### **2.7.1 Feminisation of poverty**

While examining race and gender one cannot ignore class. The feminisation of poverty is a relatively new term, which addresses the difference in the level of poverty among men and women. Moghadam (2005:1) suggests this feminisation of poverty occurs because there is a growth in female-headed households; there are intra-household inequalities and bias against women; and there are structural constraints hindering women. It contends that one of the reasons more women are living in poverty in post-apartheid South Africa is the lack of a male income in the household, which could be for a number of reasons, including the inability to find work or the complete absence of a male. Another reason is that women have more dependents relative to men, causing extra financial strain, which leads to multidimensional poverty. Therefore, females in the post-apartheid South Africa are more likely to be living in poverty than males do (Rogan, 2016:988).

Due to South Africa's high unemployment rate and increased competition for economic resources after 1994, many argue that a large majority of women take part in crime as a means of survival and not necessarily due to an increase of participation in the labour force. This is attributed to the feminisation of poverty, and it highlights women's difficulties and vulnerabilities due to their position in society. In addition, incarcerated mothers are often the primary provider for their children, which will be discussed in Chapter 3 (Hesselink & Mostert, 2014; Ebeniro, 2011:29; Willison & O'Brien, 2017:40).

Carlen (1998) suggests this comes from the notion of the gender deal, which contends that a fulfilling family life is the result of a man and women providing as they should for the family, with a male being the primary breadwinner. However, this gender deal is broken down when the relationship is unsuccessful and there is no male breadwinner, or women are abused by their partner. Therefore, this deal is compromised and it is harder to attain financial stability, leading women to engage in criminal activity.

In South Africa, women are more likely to be the breadwinner in disadvantaged families therefore breaking down the gender deal. Although this is an interesting standpoint,



feminists would argue that a woman's identity and survival cannot solely be dependent upon class and gender and other significant factors are surely at play (Bernard, 2013:8). If society relied on the gender deal it would contribute to a patriarchal system in which women are always more disadvantaged than men and more reliant on men, because of having to conform to society's roles and expectations more so than men, therefore placing more strain on women.

### **2.7.2 Intersectionality and general strain theory**

Intersectionality is closely linked to general strain theory; strain theory suggests that when individuals are unable to meet positive goals through legitimate means it leads to frustration. This ultimately leads to deviant behaviour and crime, because individuals find illegitimate means to reach their goals (Agnew, 1992:49).

The intersectional paradigm suggests that women of colour, those who are economically disadvantaged and those who are oppressed by power structures, both presently and previously (apartheid), are unable to meet their goals legitimately and succumb to the pressures of life experiences and vulnerabilities; therefore engaging in crime. However, not all marginalised women engage in crime in order to meet their goals; many women live in poverty, surviving throughout their entire lives. This is an adaptive response in which women conform to this identity and do not see a need to find a way out (Agboola, 2014:21; Bernard, 2013:8). Therefore, general strain theory suggests strain is often gendered and influenced by intersectionality; the way in which women reacts to her strain can influence her pathway to criminality.

The collateral consequences of not taking into consideration intersecting oppressions are varied and wide. This has a ripple effect on children of the incarcerated mothers, their families and communities. Maternal incarceration often results in disrupted lives for many. A better understanding of mothering while being incarcerated will shed more light on this experience in the South African context, while hopefully reducing the stereotypes that accompany being an inmate and mother.

### 2.7.3 Intersectionality and motherhood

Originally, intersectionality did not include motherhood; however, for the purpose of this research, motherhood will be an added component to gender, race and class. Motherhood and particularly those who experience maternal incarceration can be added as a component because according to Choo and Ferree (2010:131), the following elements guide intersectionality and social research: inclusions of perspectives of multiply marginalised groups; the focus of how different facets of inequality intersect; and the problem of power relationships for unmarked categories such as masculinity.

Feminist scholars have argued that the notion of motherhood is westernised and does not take into consideration those groups that are stigmatised by race and social class, especially those who are incarcerated (Barnes & Stringer, 2014:8; Bachman *et al.*, 2016; Fouquier, 2011:146). This creates the misconception that all women experience motherhood in the same way. It makes the assumption that one mother is better than another based on the notion that they mother in a different way because of different circumstances. A “good mother”, according to Western standards, is someone who stays at home to raise children and nurture their development continuously.

However, no dominant theoretical framework underpins the concept of mothering in a correctional facility. Thus far, no single theoretical framework has been developed to examine the way in which mothering roles would have to adapt and change during incarceration. Once this role change occurs, mothering would also have to be different, and the experience thereof would no longer be the same prior to incarceration.

Veazey (2015:6) argues that motherhood has to be a facet of intersectionality because by its very nature it changes the identity of women. She argues that an analysis is needed of different types of experiences of motherhood; for an exploration of how intersecting factors can influence motherhood such as race and in this particular case incarceration; and for how the transition into motherhood can either be an advantage or a disadvantage. Therefore, motherhood is a noteworthy social location with race and class. It is often during motherhood where gendered stereotypes come to the forefront and allow further discrimination, such as in the criminal justice system.

Daly (2006) emphasises that these interconnected variables of gender, race and class benefits one group while disadvantaging the other. For example, motherhood experienced by an upper middleclass woman outside a correctional facility will be mostly praised by society, and the experience will be dramatically different to that of a mother residing with her infant in a correctional facility. She will most likely not be praised, but rather marginalised further by the criminal justice system. McGrath (2014) argues that this leads to severe stigmatisation as the incarceration disqualifies her from social acceptance, often simply being identified as a criminal is a cause of stigmatisation.

Similarly, Letherby (2003) notes feminism is politically devoted to transform women's lives through social and individual transformation by allowing women to reflect upon their experiences of motherhood. This reflection is an opportunity for motherhood myths that have been produced over many years by cultural and social contexts to be exposed. Allowing mothers to provide individual accounts of their experiences challenges the traditional frameworks of motherhood that was produced by earlier liberal and radical feminists. Therefore, feminists like Chodorow (1978) believe an examination of gender perceptions and roles constructed by society is required when viewing motherhood in any context.

Therefore, intersections of race, class, gender and now incarceration can play a significant role in the way one experiences motherhood. However, a lot more research needs to be done as to understand these multiple factors and the way in which it collides, because if not carefully understood, these intersections become oppressive.

## **2.8 CONCLUSION**

When considering the information presented in this chapter, the inequalities in society regarding gender as well as in the criminal justice system and the possibility of unfair treatment of female offenders based on perceived gender roles become apparent.

The case made by multiple feminist theorists over the years demonstrates that, while the unequal treatment of females is by no means a new trend, it is finally time to address the issues and implement solutions. Using different theories, feminist criminologists have laid the foundation in terms of observing and gaining a deeper understanding of female

incarceration, revealing that underlying issues such as race, class and motherhood are pertinent factors when looking at the larger picture.

## CHAPTER 3 AN EMPIRICAL PERSPECTIVE

Whereas the focus of the previous chapter was primarily on feminism and the development throughout the centuries, the aim in this chapter is to provide an exposition of some of the most pertinent challenges that are encountered when maternal incarceration occurs. Firstly, attention will be given to the nature of female incarceration and the challenges found within the criminal justice system. Thereafter, the impact of maternal incarceration on the individual and others will be discussed.

### 3.1 THE NATURE OF FEMALE INCARCERATION

The following is a brief description of some available research that identifies the variables that influence female incarceration to gain an overall perspective.

#### 3.1.1 Demographic variables

Demographic variables can be categorised into two groups: those that are static and not susceptible to change, such as age of first involvement in crime, gender and race and those that are dynamic and have the ability to change over time, such as marital and economic status.

The age of first involvement in crime has been a strong indicator for future offences; the younger a female engages in crime, the more likely she is to repeat the behaviour (Benda, Corwyn & Toombs, 2001:604). Women who interact with crime at an early age normally do so due to a number of factors, including exposure to the normalcy of crime, lack of parental support and guidance, breakdown of family bonds, and a means of survival. These factors lead to instability and isolation. Females in South Africa are more likely to engage in crime later on in life due to deprivation (Artz *et al.*, 2012:13; Steyn & Hall, 2015:83).

A study by Artz *et al.* (2012) has found that 45% of incarcerated women had their first child between 16 and 20 years of age while 7% had them between the ages of 10 and 15. This indicated a lack of parental control, which contributed to deviant behaviour.

Gender differences have been linked to the first engagements in crime and reoffending. There are both notable differences and similarities in the way one's gender influences one's involvement in crime. Generally, more men engage in serious crime and more frequently than women do (Steffensmeier & Allan, 1996:460). According to Jules-Macquet (2015:8), on average there are 109 804 (98%) sentenced males and 2 663 (2%) sentenced female offenders at any given time in South Africa.

With regard to race, the offender population is as follows; black sentenced offenders constitute 79%, coloured 18%, white 2% and Asian 1% (Department of Correctional Services Annual Report, 2016/17). A possible explanation for these findings is that disadvantaged black women often remained disadvantaged post-apartheid. However one must also take into consideration the racial composition of South Africa; this may be the reason for the high number of black women in the criminal justice system. Consequently, there are often distinctive differences for poor black female mothers and poor white female mothers to engage in criminal behaviour, seeing that they do not share the same attributes in terms of race and (often) class. For example, poor black women are often trying to escape generations of poverty through criminal behaviour while poor white women, who may also endure poverty, do not experience the same type of extreme disadvantages. This is mainly due to the deepening of inequalities that marginalised populations still find themselves in in post-apartheid South Africa (Jonck, Goujon, Testa, & Kandala, 2015:141).

Females who have stable, quality marriages are less likely to engage in crime; however, both parties in the marriage need to be committed to a conventional lifestyle, which does not involve criminal behaviour. In a relationship where one partner engages in criminal behaviour, it increases the chances of the other also engaging in criminal behaviour. According to Siddique (2016:2), married women are often hindered by structural constraints such as responsibilities to their family – even in their free time, leisure activities with the family takes priority. Individuals who are married at the time of incarceration often end up divorcing due to the hardship of the separation (Agboola, 2016:42).

Single women do not experience these types of constraints and often socialise with acquaintances outside of the household. Therefore, they are more likely to be drawn into

illegal activities due to coming into contact with a wider variety of individuals. It has been found that women are also mainly introduced to illegal substances by intimate partners; the same partners then also supply them with these illegal drugs. These relationships are negative and provide a space where attachment and dependency are formed; these are often abusive and provide an opening to other illegal activities (Denno, 1994:91; Chesney-Lind, 1989).

It is important to note that being single does not necessarily mean childless. In the study done by Artz *et al.* (2012) it was found that while only 35% of female inmates were married or in a long-term relationship, 75% of the women had children. Therefore even though these women had children, which is normally viewed as a structural constraint to offending, they still chose to engage in criminal behaviour.

Once criminal behaviour takes place, incarceration often follows. While many female offenders experience hardships prior to incarceration, once incarcerated a different set of hardships are experienced, which will be discussed below.

## **3.2 THE CONDITIONS IN CORRECTIONAL FACILITIES**

The following part of this chapter moves on to describe the conditions in South African correctional facilities in more detail. The literature will focus primarily on female inmates as the experience of maternal incarceration is dependent on the conditions in which these women find themselves.

### **3.2.1 Overcrowding**

Overcrowding in correctional facilities creates a ripple effect resulting in conflict over necessities such as showers, toilets and bedding. This leads to inmates being forced to sleep on the floor or shower together; heightening tension in an already tense environment. Female inmates lose a sense of dignity, as their right to privacy is often stripped away by these conditions.

The women's correctional facility in Durban, South Africa was reported to be at a 242% capacity in 2005. By the end of March 2016, correctional facilities (male and female) in South Africa had 119 134 beds available for 161 198 inmates (a deficit of 42 064 beds),

resulting in severe overcrowding throughout much of the country. The most severe overcrowding was seen in correctional facilities from urban areas, such as Johannesburg, Durban and Cape Town. To this day, Pollsmoor Correctional Facility (Cape Town) remains one of the most overcrowded in South Africa. The female section of the facility was at 198% capacity, including the area that housed mothers and infants (Judicial Inspectorate for Correctional Services [JICS], 2016:47-49). According to Dissel (1996:7), his impression of correctional centres was “large warehouses where people are stored until their sentences have expired”.

The sentiments above are echoed by Artz *et al.* (2012:54). In this study, participants reported that the overcrowding of a communal cell would cause many issues among inmates. The sheer volume of inmates in such close contact would result in cultural conflict, indecency (nudity) would cause fights, and excessive noise would promote agitation/aggression. It was found that inmates who had short sentences (less than 30 days) would not adhere to the common rules made by cell mates and provoke other offenders; this is often done to antagonise inmates with longer sentences and “mess with” the headspace of those long-term offenders. It was thus recommended that shorterterm inmates should not be housed with longer-term offenders.

Overcrowding is not limited to South Africa; many other developing countries are faced with similar challenges. In Nigeria, overcrowding of female correctional centres is attributed to the slow judicial system. Therefore 70% of the facility is occupied by detainees awaiting trial (Solomon, Nwankwoala & Ushi, 2014:152). A study in Zambia found that inmates slept in shifts, with up to five on a mattress. One participant described the situation, as “we are not able to lie down. We have to spend the entire night sitting up. We sit back against the wall with others in front of us. Some manage to sleep, but the arrangement is very difficult. We are arranged like firewood” (Todrys, Amon, Malembeka & Clayton, 2011:7).

One result of overcrowding is often a breakdown of control of the inmates since supervision is limited due to less staff per inmate. According to the JICS (2016:50), overcrowding severely affects and compromises the safety of inmates and staff. This breakdown causes staff to be overworked leading to irritation and a lack of morale, which



will have a negative impact on rehabilitation programmes. Overcrowding also tends to look at all inmates as heterogeneous and can cause a misclassification of offenders based on the space available rather than programmes most suitable (Carranza, 2001:31; Reid, 1981:171).

Correctional facility overcrowding jeopardises the physical health of inmates. Inmates are in constant close proximity, which allows diseases to spread exponentially and unchecked. This in turn places additional strain on already limited healthcare resources. Overcrowding increases frustrations between inmates due to close physical proximity and can result in violence. Therefore overcrowding can influence multiple aspects of incarceration.

### **3.2.2 Healthcare, sanitation and pregnancy**

According to the Human Rights Watch Prison Project (2005:4), the leading causes of the death of inmates while in custody can be attributed to inadequate sanitation, poor hygiene and a lack of clean water.

Diseases like Tuberculosis (TB) and Human Immunodeficiency Virus (HIV) have become endemic in correctional facilities and they present a significant challenge to overcome. The spread of TB is a direct result of overcrowding as well as neglect of diagnosis in sufficient time. Other African countries such as Zambia experience similar problems of delayed diagnoses and drug-resistant TB. Often inmates are responsible for self-diagnoses due to shortages of trained staff (Du Preez, 2008:4; Telisinghe *et al.*, 2014:1; Todrys *et al.*, 2011:5). According to the United Nations Organisation on Drugs and Crime (UNODC) “the appalling physical conditions of African prisons, along with inadequate food and nutrition and almost non-existent health services, seriously exacerbate the prevalence of HIV inside prisons” (UNODC, 2006:17).

This is evident in the case of Agboola (2016), where qualitative methods were used to interview 10 female ex-inmates from the Pretoria correctional facility. Participants reported that healthcare facilities were not sufficient for the number of inmates and that hardly any doctors were available. Pregnant inmates would go months without visiting a doctor, often endangering the health of mothers and unborn babies. Correctional facilities

were severely understaffed as regards specialised staff such as doctors, nurses and psychologists. The stigma of visiting hospitals in chains also played a role in inmates rather using self-medication than reporting illness. The lack of cleanliness affected the health of inmates; it was reported that there was a lack of cleaning products and regular maintenance. Often inmates would get ill from using the same unclean toilet and showers. This increased the presence of pests and the spread of diseases.

Although pregnant women should receive specialised care, many of them do not. Pregnancy during incarceration raises a number of concerns for policy, including special diets and abortion rights. Furthermore, Solomon *et al.* (2014:154) contend that in Nigeria it is not uncommon for female offenders to find out they are HIV positive and pregnant. Some inmates become pregnant while incarcerated due to abuse at the hands of officials; many of these women give birth while in a correctional facility and not in a hospital.

A study done in Zambia found that the correctional facility employed 14 healthcare professionals for a population of 16 666 inmates. Out of 86, only 15 correctional facilities included health clinics. If offenders required medical treatment that is more advanced, untrained medical staff evaluated whether it was necessary or not. Therefore the majority of inmates remained undiagnosed and untreated (Todrys *et al.*, 2011:6).

According to Finkel (2011:225), although female inmates constitute the smaller population, their healthcare needs are much higher than male inmates, and they use medical facilities more frequently. This is often due to women entering the system with histories of physical abuse and prior reproductive complications. The challenge of meals not being served on time (see 3.4.3) has severe consequences for those inmates who are on chronic medication that require medication to be taken prior or after a meal. This can often lead to more medical complications.

South African cells in correctional facilities where inmates spend a large majority of their day have been described as dark without windows or adequate ventilation. Due to the lack of maintenance, many taps and showers leak, resulting in dampness. These conditions are ideal for the transmission of diseases and for the rapid growth of pathogens (Peacock, 2006:56).

According to Artz *et al.* (2012:4), inmates reported sharing two showers, two sinks and two toilets (which almost never worked) between 30 inmates. Women would have to wake up as early as 2am in order to have a shower and be ready for a parade at 6:30am. According to Fontebo (2013:63), female inmates tend to value privacy far more than male inmates and experience greater challenges when adjusting to communal living.

To add to the humiliation and invasion of privacy which female inmates are often subjected to it was found that some inmates had to use alternatives to sanitary towels such as newspaper and tissue since the two sanitary towels provided per day by the DCS are insufficient. This situation was exacerbated in a South African correctional facility, when staff refused to issue new sanitary towels before seeing the soiled sanitary towel. It was found that inmates were rarely supplied with painkillers for menstrual cramps by healthcare professionals. The DCS is, however, required to provide sanitary towels, soap, toothpaste, and a toothbrush to inmates on a monthly basis (Fontebo, 2013:67; The Gender Health and Justice Research Unit, 2012:5).

According to The Gender Health and Justice Research Unit (2012:5), opportunities for exercise and fresh air are far more limited to female inmates than to male inmates, and there is a lack of outdoor exercise equipment. This is due to limited financial resources and shortages of staff to oversee the inmates while in the large communal area. Often courtyards have little to offer in terms of recreational activities and inmates get an hour of outside time once a day.

Many policies, both domestic and international, emphasise the importance of the humane treatment of offenders while in correctional facilities. While the DCS is making strides in certain areas, many areas remain neglected. From the above studies, the picture painted is one of concern and in need of dire attention.

### **3.2.3 Food**

The issue of nutrition in correctional facilities has been researched by many scholars. It is a requirement by law (section 8 of the CSA) that all inmates are served with three meals per day. This must be done at an interval of not less than four and a half hours, and not more than six and a half hours. However, according to the JICS (2016:52), 16 correctional

centres offered two meals per day to inmates, and at 36 centres, meals were served together (lunch and supper). The DCS indicated this was due to severe overcrowding and a shortage of staff; therefore, making it challenging to adhere to the act. It was found that 17% of centres served only two meals per day; 46% served three meals per day but not in the allocated time frame; and 37% of centres served three meals per day within the prescribed time frame. Therefore, only 37% of correctional centres are adhering to the law.

The DCS reports that they provide inmates with food as prescribed by the World Health Organisation and American Nutritional Council; therefore, it is expected that the food provided to inmates would be of an acceptable standard. It has, however, been reported that food is not always nutritionally balanced and is prepared under unhygienic conditions. Pregnant female offenders and lactating mothers have special dietary requirements that should be prescribed by a doctor; however, this is not always the case (Fontebo, 2013:64).

In a study done by Agboola (2016) on incarceration experiences, one participant recalled not eating anything except for fruit for nearly the first month of her incarceration. This was since she did not eat boiled eggs or pap, which was the only food being served. However, this was her choice. After a while, she discovered that family members were permitted to bring food during visitation. She recalled this being the only time (once a week) when she would eat a decent meal. Other participants said the food was off (bad) at least four times a week.

The same sentiments were recorded earlier in Artz *et al.* (2012:63), in which inmates complained that the food was often “smelly and rotten”; this indicates that four years later inmates were still subjected to the same conditions. As a result, inmates would often rather go hungry than eat, or lie about their dietary requirements. For instance, inmates would demand halaal food, as special dietary requirement foods were usually of a better quality. It was also found that inmates who were diabetic or HIV positive would receive fruit daily and get a glass of milk. Women in the Worcester correctional facility complained of the very poor quality of food that consisted mainly of skin and fat. This was due to food being prepared in the men’s kitchen by the male offenders; they would therefore select

what to keep for themselves leaving the undesirable food to be taken to the female section of the centre.

South African correctional facilities do, however, have clean drinking water, which is available to inmates, unlike some African countries which have been found to have a scarce supply of water that is often undrinkable (Fontebo, 2013:64; Todrys *et al.*, 2011:7).

Therefore, much of the food served to inmates contribute to sickness they experience, this results in medical resources being utilised for something that can be avoided. The condition of the food is also due to the severe overcrowding; therefore, a vicious cycle of overcrowding, unhygienic conditions and inadequate food plagues South African correctional facilities.

### **3.2.4 Violence**

Violence in correctional facilities can range from minor to serious, both verbal and physical. It is difficult to determine the exact extent of violence in correctional centres, since many cases are not reported for fear of retaliation from inmates, which leads to further victimisation (Peacock, 2006:57).

According to Edgar and Martin (2000:4) racial differences between inmates perpetuate the violence in correctional centres; this causes inmates to defend possessions with force, also showcasing 'toughness'. Often other inmates witness this violence and experience psychological turmoil as they are threatened not to report the crime. Female correctional centres are becoming increasingly more violent due to the increase of female offenders, which in turn means there are a larger number of violent offenders (Booyens & Bezuidenhout, 2014:387).

It is a greater challenge for staff to intervene when there are many inmates in a cell as they are often outnumbered. Vulnerability to violence in centres depends largely on age, race, gender and sexuality. Those who are weaker in physical appearance and younger or much older are more likely to be victims. There is more inmate on inmate violence in male correctional facilities than in female facilities, as more males are coerced into

nonconsenting sexual relationships and gang structures are more prevalent (Muntingh, 2009:15).

In the study done by Agboola (2014:164), a participant recalled telling another inmate who wanted a sexual relationship that she was HIV positive. Due to this, no other inmates asked her for sexual favours and this saved her from sexual abuse. According to Haffejee *et al.* (2006:3), it was found that one in every three female inmates experience victimisation and in most cases this was perpetrated by another inmate. Emotional abuse (taunting, and name-calling) was the greatest (37%), followed by physical abuse (27%) and lastly sexual abuse (3%).

It is clear from the above that overcrowding influences violence in correctional facilities since violence is more likely to occur in communal cells. Therefore, single cells would greatly reduce violence in correctional centres. However, this would have many cost implications.

### **3.2.5 Mother-and-Child Care Units**

As previously stated in Chapter 1, the *Correctional Services Amendment Act of 2008* stipulates that incarcerated mothers in South Africa may keep their children with them in a correctional facility until the child reaches two years of age. The Act also maintains that a special unit should exist where these mothers and children can live together. It is the responsibility of the DCS to provide, food, clothing and other necessities for the infant to live a 'normal' life. It is important to note that the Mother-and-Child Care Units must be registered with the Early Childhood Development (ECD) Centres with the Department of Social Development.

Schoeman and Basson (2006:6) state that many inmates in South Africa choose to have their infants with them because offenders with infants receive more privileges than the general offender population. Often being incarcerated is better than being outside of the centre. In a study done by Hesselink and Dastile (2010:66), one mother admitted to keeping her infant with her because she knew she would receive medical attention and her baby would be provided clothes and food. She also knew the chances of her sentence being reduced would be greater if she could prove she was a good mother.

According to the DCS (2010:24), there were 129 infants incarcerated with their mothers in South African correctional facilities. It is stated by Luyt and Du Preez (2010:107) that this number is attributed to mothers not having other options of suitable care outside of the centre while Du Preez (2008:2) attributes this to most imprisoned mothers preferring their infants to stay out of this kind of an environment. Therefore, there are conflicting reports as to why mothers choose to keep their infants with them, of course, ideally, the best interests of the child is considered when making this decision.

In a study done by Gowland (2011), Mother-and-Child Care Units were investigated in the Eshowe correctional facility in KwaZulu-Natal. The majority of participants were pleased with the centre concerning their support of the mothers and the infants. This specific correctional facility houses mothers and babies separate from the rest of the inmates, as it should be according to policy. However, it was found that, despite the DCS (2005:164) stating the environment should be as normal as possible, the units were lacking. Therefore, although there was a unit, the Mother-and-Child Care Unit was severely lacking regarding toys, books or a playroom with stimulating objects for infants. The paint was also dull and contributed to an unfriendly environment.

It is further mentioned by Schoeman (2011:84) that infants who accompany their mothers are deprived of exposure to male figures and while the units attempt to create a normal environment, infants have limited exposure to everyday activities and the normal outside world. Bastick and Townhead (2008:44) suggest that infants should have regular opportunities to leave the correctional centre to experience the outside world and cultural practices.

Although the first Mother-and-Child Care Unit was opened in Pollsmoor correctional facility in 2011 as the standard for what all units should be like, there have been no studies on each of the Mother-and-Child Care Units in South Africa. Therefore, it is very difficult to gauge an overall picture as to what the situation is at these units in correctional facilities around the country and whether policy is being implemented.

### **3.2.6 Correctional staff and administration**

Often correctional staff do not act in the best interests of inmates and could exacerbate existing problems in this environment. Due to the shortage and overcrowding, correctional officials often resort to stereotypes and become hostile, unsympathetic and unwilling to control inmates (Peacock, 2006:65). Agboola (2014:146) maintains that female inmates are often subjected to torture at the hands of the correctional officials, either physically or psychologically. When inmates are in solitary confinement, correctional officials only provide them with water and very little leftover food. It was found that while some correctional officials do not abuse inmates, many of them are aware of the abuse and turn a blind eye.

According to Sykes (in Peacock, 2006:65), correctional officials often refuse to explain regulations and in turn get angry when inmates do not comply with rules; however, this can be limited if correctional officials explained regulations to prevent unwitting non-compliance. Staff have been accused of having 'favourites' by giving special treatment to some inmates in return for information on the other inmates. Staff often regulate some activities such as sex and the use of drugs, which allows them to remain in "control". According to the JICS (2016:84), in 2016, 811 complaints were received about assaults by officials on inmates, and 218 of these remained unresolved.

Poor management of correctional facilities has also been linked to shortages of staff. The current correctional officer to inmate is 1:5 (1:9 if management and administrative personnel are excluded). According to international standards this figure should be 1:3. (Report of The National Prisons Project of the South African Human Rights Commission, 1998:11). Inadequate training and the mismanagement of finances often place correctional facilities in dire conditions. Corruption plays a significant role in the mismanagement of resources, it has been found that corruption is associated with food provisioning due to unethical tenders as well as the movement of illegal substances in correctional facilities (Report of The National Prisons Project of the South African Human Rights Commission, 1998:15/44). Ideally a calculated ratio for every correctional official to inmate should be implemented for the correctional environment to serve its purpose and be sufficient and successful (Fontebo, 2013:62).



Therefore, it is essential that staff are selected carefully and trained adequately as to conduct themselves in a manner that is proper, as well as to be a positive influence on offenders.

### **3.2.7 Education**

This section examines the opportunities as regards education and work that are available to inmates while incarcerated.

The United Nations Office on Drugs and Crime (UNODC) emphasises the importance of facilitating adequate education and vocational training and work in correctional facilities. This is aimed at inmates having a greater chance of finding employment after release. According to the DCS, inmates have equal opportunities to education and training in correctional facilities (Artz *et al.*, 2012:243). However, it was found by Agboola (2014:123) that inmates would often be denied the opportunity to enrol for formal courses because staff would simply not allow them. This was due to favouritism or being told that the length of their sentence was too short. Reading material was also insufficient for the number of inmates and this led to boredom and idleness of inmates. One participant recalled the library being closed for quite a while due to a shortage of staff.

Jules-Macquet (2014:14) found that during the years 2008-2013, an average of 20% of incarcerated offenders accessed formal education. This formal education refers to:

- Adult Basic Education and Training (ABET)
- Further Education and Training (FET)
- Ordinary secondary education (youths in secure care centres)
- Skills development courses

This average is extremely low and can be attributed to shortages of staff, limited resources and unwilling or biased staff members. Artz *et al.* (2012:244) contend the DCS cannot solely rely on qualified offenders as instructors but the DCS should hire qualified teachers, because there are times where there are not enough qualified offenders. Many offenders choose to take part in some type of work while incarcerated. This often keeps them occupied and their minds busy and allows them to pass the time. Most of the time, this work is unpaid; however, sometimes a small stipend is paid.

Agboola (2014:128) is of the opinion that some female offenders choose not to take part in vocational training because they do not see the link between the acquisition of these skills and financial independency. If the DCS is able to translate these skills into meaningful employment, many more inmates will perhaps be interested. It is important to ensure these inmates are given a portion of the money from the sales of what they make to motivate inmates to do the same once released from correctional facilities.

### **3.2.8 Treatment programmes**

The *Correctional Services Act, 1998* (Act 111 of 1998) emphasises that individualised assessments of offenders are vital in determining their specific needs in terms of specialised treatment programmes. According to the study by Steyn and Hall (2015), this is not always practised and currently a one-size-fits-all model is used. Therefore, despite the White Paper on Corrections emphasising that more individualised interventions should be implemented, the DCS faces a challenge in this regard due to the overwhelming amount of inmates and the lack of professional staff (Department of Correctional Services, 2005).

Steyn and Hall (2015:97) recommend that female inmates be screened for mental illness as soon as possible during incarceration, and that stress-inducing situations should be identified and managed adequately. Due to a relatively small sample taken, the study was limited in terms of providing generalisations for other female correctional facilities. It recommended a long-term study from the time of incarceration to the end of serving one's sentence to be able to determine a baseline for mental illness among females in the correctional setting.

This recommendation is in line with the Bangkok Rules, Rule 12 which speaks to mental health and states that,

individualised, gender-sensitive, trauma-informed and comprehensive mental healthcare and rehabilitation programmes shall be made available for women prisoners with mental healthcare needs in prison or in non-custodial settings. (The Gender Health and Justice Reproach Unit, 2012:4)

Artz *et al.* (2012:59) contend that, even though the DCS offers a variety of rehabilitation programmes, it is not consistently offered at all correctional facilities throughout the country. Although it was found that programmes are not sufficient in terms of variety, it did, however, appear to play a positive role in the experience of incarceration. It is important to note that the DCS contends that rehabilitation and treatment programmes are not primarily focused on crime prevention but an all-encompassing process. Steyn and Booyens (2017:49) state that it is important to offer programmes that will strengthen the mother-child relationship during incarceration. The DCS, in collaboration with the Department of Basic Education, offers early childhood development programmes to all mothers incarcerated with their infants. The programmes are focused on strengthening the attachment between mother and child. Therefore promoting rehabilitation and providing child care education to the mother.

Therefore, treatment programmes in South African female correctional facilities can play a significant role in the rehabilitation process; however, these programmes should cater to the individual. Core rehabilitation and treatment programmes should be implemented across the country, while other programmes should be implemented depending on the type of offender in a specific centres. However, this can only be done once the challenge of staff shortages and overcrowding is addressed. From the above it is clear that overcrowding and staff shortages impede the effectiveness of the criminal justice system.

### **3.3 THE IMPACT OF MATERNAL INCARCERATION ON THE INDIVIDUAL**

While the conditions in incarceration facilities play a significant role in the experience of incarceration, there are also those experiences that are not necessarily as visible. Incarcerated mothers find themselves in a challenging position as they cope with a completely new way of living. This involves a life separate from their children or only a short time with children during incarceration, resulting in an array of mental and emotional challenges.

#### **3.3.1 Separation from family and children**

Children often constitute the main aspect of mothers' lives; when mothers are incarcerated, devastating consequences can be seen throughout children's lives.

However, the incarceration has as many, if not more, challenges for the offender. In some instances, mothers are dishonest with their children regarding their whereabouts – this is done to spare children and mothers from the emotional consequences of having to say goodbye (Du Preez, 2008).

Parenting from a distance can be problematic, but continuous contact is said to help maintain a relationship, even if the relationship is strained. The main challenges of visiting mothers in correctional facilities are transport, finances, schedules of children and the visiting policies of the incarceration facility. Schedules of children are dependent on school; therefore, normally only leaving the weekend as an option for visitation. According to the visitation process as set out by the DCS, visitation times of an offender of minimum/medium security can range from 45–60 minutes. For C-max to super maximum-security inmates, visitation times range from 30–45 minutes. Therefore, depending on the security class of the offender, the visitation times will vary. Furthermore, with the maximum time of any visitation being an hour, personal contact is very limited, which affects the quality of the relationship between incarcerated mother and child negatively (Artz *et al.*, 2012:53; Genty, 2002-2003; Celinska & Siegel, 2010:450).

The above was proven in a study by Du Preez (2008) on women residing with their infants in South African correctional facilities, it was found that mothers found it difficult to maintain a relationship with their children once separated from them. This was due to visiting times being too short, because it did not enable quality conversations, but rather led to a rushed catch-up. The conditions of the visiting rooms were also poor; the atmosphere was often cold and dull because there was no colour on the walls and no natural light, which was not conducive to fostering a safe space. Mothers found that there was a loss of authority because of their absence from the home; consequently, children would not necessarily want to listen to mothers who tried to be encouraging or involved in their lives. Mothers expressed emotions of loss and ambiguity in terms of their relationships with their children, which meant they were no longer sure of their position in their children's lives, resulting in feelings of frustration.

In further studies by Enos (2001) and Gilham (2012), incarcerated mothers mentioned the possible negative effects of their incarceration on children, but did not address their

behaviour prior to incarceration and the negative impact that that behaviour could have had on their upbringing. These mothers seemed to think their mothering performance was up to standard prior to incarceration. This was found to be a way to cope with the guilt of being incarcerated and not being there physically for their children; therefore, possibly a defence mechanism against their own actions. Furthermore, mothers detached their motherhood from their incarceration experience. This was done to maintain a relationship with their children without having to deal with the enormous guilt that they felt regarding the loss of their relationship with their children. Therefore, the separation from children is a central theme in the way mothers experience incarceration and the way in which this affects them. One of the effects of this separation is on mental wellbeing, which will be discussed below by presenting previous studies and the findings.

### **3.3.2 Mental health**

Research on incarcerated mothers have consistently reiterated that separation from children is the most stressful and psychologically draining aspect of incarceration (Muftić, Bouffard & Armstrong, 2015:95; Celinska & Siegel, 2010:451). The maternal inmate population is considered a high-risk category in terms of attachment disorders when compared to those who are not mothers (Baradon *et al.*, 2008:241). Separation from children causes anxiety and depression that can manifest in physical and behavioural problems such as a loss of appetite, weight loss and bursts of anger as well (Stanley & Byrne, 2000:3). This stress is significantly different to other prison populations; for instance, female inmates have a higher risk of prior trauma such as domestic abuse and sexual victimisation such as rape.

Fogel *et al.* (1992) have found that, while stress levels were high in both groups of inmates, the stress levels of mothers remained high throughout incarceration, while the levels in those who were not mothers decreased over time. This stress was attributed to the separation from their children; mothers often worry about the health, whereabouts and living conditions of children, especially if they are in non-familial care. Incarcerated women who are not mothers often do not have the same concerns and worries.

Poehlmann (2005b) found that all the depressive symptoms noticed among incarcerated mothers were related to the relationship disconnectedness from children. This study highlights the importance of mothers' face-to-face contact with children and psychological well-being. The psychological well-being of mothers seemed to improve if mothers were able to have observed children growing up due to constant regular contact.

Barnes and Stringer (2014) confirm the findings of Poehlmann (2003) and indicate that incarcerated mothers potentially experience role strain as their roles as mother and inmate are often conflicting. This influences incarcerated mothers to perceive themselves as 'good' or 'bad' mothers, affecting their psychological well-being.

Any diminished mental health of female offenders has many negative consequences. Many female offenders are unable to follow rules, disciplinary problems occur and many attempt suicide. Suicide attempts are higher amongst females than male offenders are. Unfortunately, many of the mental health issues of female offenders go undiagnosed, mainly due to overcrowding and the DCS having insufficient resources in terms of psychologists, social workers and medical physicians. This is especially so for females who are isolated from their families; however, offenders who have children are less likely to use self-harm. The overall stressful environment of a correctional facility exacerbates the problem (DCS Annual Report, 2013:27, 70; Du Preez, Steyn & Booyens, 2015:128; Steyn & Hall, 2015:85).

In a study conducted by Steyn and Hall (2015) at Gauteng female correctional centres, they used a quantitative methodology to determine levels of stress, anxiety and depression among 64 female inmates. These inmates were all relatively young, single and had children outside of the centres. It was found that 69.8% of respondents presented symptoms of depression, 68.3% of anxiety and 74.2% of stress. However, these offenders displayed hopefulness and were motivated to cope, despite having these symptoms. It found offenders who engaged in meaningful activities, often education related, had lower levels of stress. Female offenders who had longer sentences experienced less stress, which indicated that stress levels decrease over time, as long as offenders could connect with others through daily activities or visits from children and family.

As stated above the DCS has a responsibility to address female inmates' mental health issues, where possible, through rehabilitation and sufficient treatment programmes specific to their individualised needs. It is evident that the correctional setting and separation from children can have many negative outcomes.

### **3.4 THE IMPACT OF MATERNAL INCARCERATION ON OTHERS**

The effects of maternal incarceration can be extensive and often influences the lives of many others and not only the individual being incarcerated. One of the most obvious is the way in which it breaks down family structures and the negative influence it can have on children. There are also those effects that are not that obvious, such as the trauma experienced by some members of the family brought about by the additional pressures that are placed on them. When studying the effects of maternal incarceration, one also has to examine family and children.

Perhaps the most profound challenge to female incarceration is the separation and distance it causes. This can often bring on consequences for family members, especially for children that are left behind by the separation (Robertson, 2007; Artz *et al.*, 2012).

#### **3.4.1 The impact on children**

The relationship between incarcerated parents and children have far more devastating consequences when mothers, compared to fathers, are incarcerated (Bhana & Hochfeld, 2001; Murray & Farrington, 2008:135; Stanley & Byrne, 2000:2; Mignon & Ransford, 2012:85). This type of separation is uniquely different to other forms of separation from a parent, such as divorce or death (Habecker, 2013:1). As mentioned in the White Paper on Corrections, mothers are meant to be placed in correctional facilities close to the family, especially if there are children involved, to maintain the relationships. However, this is not always possible due to overcrowded facilities (Department of Correctional Services, 2005).

Maternal incarceration is of particular concern in many countries, as most female offenders are often the sole providers and have children under the age of 18 years old. Therefore children have to be placed either with mothers in correctional facilities,

depending on the age and best interests of the child, or with suitable alternatives such as family members; if not, cases are handled by social development.

These children of incarcerated mothers are considered to be in a high-risk category; therefore maternal incarceration becomes a catalyst for various risk factors for them (Dallaire *et al.*, 2015:110). A risk factor can be defined as “those characteristics, variables, or hazards that, if present for a given individual, make it more likely that this individual, rather than someone selected from the general population, will develop a disorder” (Haggerty & Mrazek, 1994:127).

These risk factors are associated with negative academic performances, criminal behaviours, and emotional and behavioural maladaptations. They are a result of having to cope with the sudden loss of a mother due to incarceration and adjusting to a new way of life. It thus places children in a unique position very abruptly. Just as incarcerated mothers experience social stigma for being a ‘bad mother’, children also experience social stigma for having an incarcerated mother, which isolates them from their peers (Dallaire, 2007; Heinecke & Karlsson, 2017:1; Poehlmann, 2005a).

School performance is affected because emotional stress has a direct impact on school performance. Children's concentration levels are often low and in some situations, their main concern is basic survival, meaning that schooling is not seen as important because there are greater concerns such as food and shelter. According to Habecker (2013), parental incarceration lowers the chances of a child completing high school by up to 50%. The possibility of finishing school is further decreased when a mother, compared to a father, is incarcerated, as mothers are usually more concerned with a child's education. This is intensified when children are between the ages of 11 to 14; at that age the attachment relationship between a mother and child has already developed and a sudden detachment can cause children to form negative coping mechanisms.

Children of incarcerated parents are at a higher risk of substance abuse, attachment disorders and delinquency. Children with incarcerated mothers are at a higher risk of delinquent behaviour and have a higher chance of experiencing some sort of mental illness, unless the correct measures are put in place to ensure adequate care and support. This is often attributed to children not being able to understand the situation fully. To deal



with the psychological impact they use coping mechanisms such as anger, denial and avoidance of the current predicament. This is because they are often unaware of healthy coping mechanisms and because the necessary support is not always made available (Bhana & Hochfeld, 2001; Murray & Farrington, 2008; Dallaire, 2007).

Delinquent behaviour such as aggression is often released in unhealthy ways towards other individuals, including classmates, teachers and caregivers (Murray & Farrington, 2008:135; Gilham, 2012:90; Mignon & Ransford, 2012:72). These children are also more likely to use illegal substances and alcohol if their mothers used drugs prior to incarceration. This is due to children mimicking the behaviour of their mother (Dallaire, 2007; Murray & Farrington, 2008:140; Huebner & Gustafson, 2007).

Nevertheless, Heinecke and Karlsson (2017) have found that coping strategies varied depending on the age and relationship with the incarcerated mother. It was found that children cope better when they used distraction techniques such as sport, schooling and mingling with positive peers. A consistent finding from the study is that children cope better when the incarceration is discussed openly and adults are honest about the reason for incarceration and everything it entails.

However, the behaviour displayed by children of incarcerated mothers is largely based on the type of environment that a child is placed in and the relationship with the incarcerated mother. If the child grows up in an environment that is nurturing and supportive, these negative effects can be counteracted as it fosters different cognitive and behavioural outcomes in children (Heinecke & Karlsson, 2017:4; Poehlmann, 2005a:1275).

The study of Heinecke and Karlsson (2017) reiterates the findings from the studies of Knudsen (2016) and of Murray, Farrington and Sekol (2012) in suggesting that the way children experience maternal incarceration is not homogenous. Therefore, the studies argue that the consequences of maternal incarceration depend on the individual child. This does not mean that maternal incarceration is not a disadvantage to children, but other variables must also be considered, such as poverty, witnessing maternal incarceration and positive contact with their mother as these variables influence the way in which a child will view the incarceration. Therefore, if a child's situation and environment is vastly negative after maternal incarceration, they will view the current situation as the

fault of the mothers. However, if it is a transition that is default but not negative, for example, no poverty and abuse, etc., they are more likely to be able to cope.

Despite the valuable contributions from the studies mentioned above, none of them are specifically South African. This is alarming, given the rising number of female inmates in this country and in Africa. Studies specific to South Africa are needed as children from developing countries will often experience maternal incarceration differently to those from developed countries with more resources.

### **3.4.2 The impact on the family**

When maternal incarceration takes place, family bonds are broken. Often there is no one to take sufficient care of the children, and living arrangements are disrupted dramatically. However, when fathers are incarcerated, mothers usually remain the primary caregiver (Dallaire, Zeman & Thrash, 2015). Children of incarcerated mothers are likely to be placed into the non-familial care of the foster care system, or the responsibilities are passed on to grandparents and other family members (Lunga, 2009:1; Poehlmann, 2005a:679; Habecker, 2013:4; Glaze & Maruschak, 2008:5; Stanley & Byrne, 2000:2; Gilham, 2012:90; Barnes & Stringer, 2014:5).

In South Africa, Bhana and Hochfeld (2001) interviewed 16 children whose mothers had been incarcerated for killing their abusive partners. The study found that children of maternal incarceration would be put into the care of the family, but siblings were often separated, because one family member was not always able to take care of all the children due to a lack of finances and other necessary resources. On average, children would be moved about five times before their mother was released from the correctional facility. This primary caregiver was found usually to be the maternal grandmother or an aunt. Once the incarcerated mother is released, the children often remained in the care of the caregiver as they have become accustomed to living in this environment. A recommendation from the study is that non-custodial sentences should be seen as a first option when women have retaliated against abusive partners, as long-term sentences damage the wider family.

Enos (2001) states that the role the caregiver plays to maintain the relationship between child and incarcerated mother is of immense importance. The way the caregiver perceives the incarcerated mother will influence the way in which the child will also grow to perceive his/her mother and either foster a relationship or decrease contact between child and mother. As discussed, when incarcerated mothers are viewed as 'bad mothers', this attitude can often influence how children perceive their mothers.

When mothers are incarcerated, an extra financial burden is placed on the family. However, if infants are incarcerated with mothers as in this study, the financial burden is less. Although this is only for two years or less, in families plagued with poverty this could be viewed as the better option.

Arditti, Lambert-Shute and Joest (2003) have found that over half of incarcerated mothers contributed financially to support their families, so once they are incarcerated, this support is lost. The same findings were reiterated in studies done by Foster and Hagan (2007) and Glaze and Maruschak (2008). Therefore, children who were old enough at the time of maternal incarceration had to find jobs to support the family. This increased pressure on children and caregivers, and the relationship between caregivers and children were affected negatively, as it influenced the way children would be treated. These caregivers are usually elderly and are even more economically marginalised when children are placed in their care (Poehlmann, 2003; Robertson, 2007:37).

Caregivers have the additional responsibility of having to deal with the negative emotional effects of the incarceration and subsequent changes in behaviour of children. However, these caregivers often do not have the required skills to cope with the emotional and behavioural changes, which in turn can cause tension between family members and the incarcerated mother (Lunga, 2009; Wildeman, 2010:285).

Agboola (2014:51) suggests that family instability almost always follows maternal incarceration, and that the absence of a mother has far-reaching consequences for the family at large.

### **3.5 REINTEGRATION AND RECIDIVISM**

A challenge that incarcerated females face after incarceration, is reintegration into society, especially given that their gender stereotype of 'good' mother has been tarnished by the incarceration. The family system and support are crucial in determining whether a convicted mother will revert to a life of crime after incarceration or not (Flower, 2010; Hagan & Dinovitzer, 1999:122).

Agboola (2017) interviewed 13 female ex-inmates about their lives after incarceration as well as about the reintegration process. Some participants indicated that the community stigmatised them for being incarcerated, stating people often treated them unfairly. This often extends to their family and not only the community. This stigmatisation strains interpersonal relationships and does not foster healthy relationships with children after incarceration. Not being accepted by family made ex-inmates prone to reverting to old friendships and bad habits. The main issue that the participants recounted was the challenge of employment, as all the respondents struggled to find permanent employment after incarceration. Discrimination from the community and the breakdown of the family only got worse after incarceration, and women felt as if their punishment were extended once they were released.

According to Conova (2006:2), mothers allowed to reside with their infants during incarceration reduces recidivism. This time in their life allows them to reflect on their decisions and often the hope of being later reunited with a child, influences good behaviour and reduces the chances of recidivism. Therefore, "recidivism is obviously an important factor in the child's well-being because if the mother returns to prison, her baby is separated from her again".

The DCS currently provides a pre-release programme to cope with these issues. The programme aims to achieve a number of things, namely to prepare offenders for reintegration, reduce recidivism, ensure support structures are available, restore relationships, encourage offenders to take ownership of their lives and choices, and build self-confidence. The programme also aims to assist in terms of financial matters, relationships, health education, finding employment and combatting substance abuse

(DCS, 2015:14). Ratshidi (2012), in a report on behalf of the Network on Reducing Reoffending, contends that this pre-release programme often only exists on paper, and that the implementation has not taken place at all the correctional facilities. Artz and Rotmann (2015:3) is of the opinion that little is known about the African female inmate and her experience of incarceration, the impact incarceration has on the family, or the offender's health and wellbeing. Therefore, a lot more needs to be done to ensure pre-release programmes are effective.

If a certain environment is created after incarceration, it provides a pathway for females to reoffend. Communities need to support these ex-inmates as far as possible to provide a space that does not produce recidivism. The reintegration of mothers back into the community is of vital importance when considering the impact on the community, family and individual.

### **3.6 CONCLUSION**

From the above one can deduce the nature and experiences of female incarceration and all these encompass are vast and complex, from the pathways to criminal behaviour to the conditions which female inmates are subjected to and lastly, the reintegration process back into society. Therefore, the preservation of motherhood would become a major task in the correctional setting while incarcerated with an infant.

## **CHAPTER 4 RESEARCH QUESTIONS AND RATIONALE**

In the previous chapter, the theoretical and empirical perspectives identified factors related to the experiences of maternal incarceration. This chapter aims to present research questions that will be used to fulfil the aims of the study outlined in Chapter 1 (see 1.7) for contributing to the existing knowledge on the experiences of maternal incarceration. Due to a dearth of knowledge on the experiences of motherhood, while incarcerated with an infant, a rationale derived from the literature is limited.

The following research questions are formulated:

### **4.1 RESEARCH QUESTION 1**

What is the nature of motherhood in a South African correctional facility?

#### **4.1.1 Rationale**

The rationale behind research question one is the sheer neglect of studies done in the South African context on the current topic of incarcerated mothers in correctional facilities (Dastile, 2013:5297; Du Preez, 2008). Limited studies have been done to highlight the day-to-day experiences incarcerated mothers undergo and the challenges that accompany being a mother in a South African correctional facility. The concept of motherhood is still progressing towards a position where it encompasses all which motherhood could entail and it is still largely viewed through a 'traditional' lens of expectations and experiences. This traditional lens has been challenged by the feminist movement as not being inclusive of all types of mothers, therefore stunting the voices of certain types of mothers such as those who are criminals. Traditionally, these mothers would be viewed as a 'bad' mother (Fouquier, 2011:146; Leskošek, 2011:2). Therefore it is imperative to highlight what 'non-traditional' mothering entails to ensure different categories types of motherhood are not neglected, especially those who are already seen as 'disposable' to society due to their offender status. Exploring this offender population will enable a better understanding of individualised experiences and potentially be of use to relevant stakeholders such as the DCS.

## **4.2 RESEARCH QUESTION 2**

Are the needs of mother and infant being met in correctional facilities?

### **4.2.1 Rationale**

The DCS has set out in the White Paper on Corrections guidelines for Mother-and-Child Care Units throughout correctional facilities in South Africa. These guidelines should be implemented at all mother-and-baby units. The new policy which stipulates mothers and infants should be housed separately from the general inmate population and the environment should be made as normal as possible for infants was implemented in 2011 (Department of Correctional Services, 2011). Since the implementation there have been only a few studies that have explored the experience of mother-and-baby units. The rationale behind this research question is to explore whether this policy is implemented according to the lived experiences of the mothers in the two correctional facilities in the Free State and Northern Cape. It is imperative that research begins to explore whether the needs of these mothers and infants are being met as policy stipulates. Although the focus of the study is not policy implementation, this will be done to draw attention to the experiences of policy being implemented or not. There is a need to explore the environment in which these infants grow up in as well as to explore whether genderspecific healthcare needs and mental healthcare needs are being taken care of. As the literature has indicated, female inmates often require much more specialised medical attention than male offenders do. This is even more so for an individual who is pregnant or who has given birth while incarcerated. Needs fulfilment also includes the basic level of comfort experienced. Infants need include basic needs such as a nutritional diet as well as developmental needs such as physical and intellectual stimulation, and emotional needs (Ackermann, 2015:11; Dixey *et al.*, 2015:95; Limsira, 2011:13; Schoeman & Basson, 2009:35; Topp *et al.*, 2016:157).

### **4.3 RESEARCH QUESTION 3**

What is the nature of correctional facility conditions that infants and mothers are exposed to?

#### **4.3.1 Rationale**

The rationale behind this research question is to explore the conditions of two correctional facilities in two provinces in South Africa. For many years, aspects such as hygiene, diet, overcrowding and violence have dominated criminal justice research due to the sheer neglect and unsatisfactory standards to which inmates have been exposed. These conditions are often said to be worse on the African continent in comparison to first-world nations, due to a lack of resources such as finances (Artz *et al.*, 2012:54; JICS, 2016:47-49). Therefore, by exploring the experiences of correctional conditions, insight will be gained about aspects such as hygiene, overcrowding and diet. This is essential, as these conditions highly influence the way in which mothers and infants would experience incarceration. Research is necessary on correctional facility conditions to draw attention to what more needs to be done to ensure there are no human rights violations as mentioned by the Mandela Rules (Limsira, 2011:5). The features of hygiene, diet and overcrowding have the ability to negatively influence mental and physical health and one's overall wellbeing. Therefore, these three factors should be examined separately as well as together, as they often intersect and produce an overall incarceration experience. Research needs to focus on these aspects because these conditions can be 'hidden' from the public due to the nature of a correctional facility. Therefore, by drawing attention to these conditions and individualised lived experiences, it forces stakeholders such as the DCS to become more accountable if conditions are not aligned to legislative frameworks.

### **4.4 RESEARCH QUESTION 4**

What opinions do incarcerated mothers have regarding recidivism?



#### **4.4.1 Rationale**

Exploring thoughts around recidivism and treatment programmes are essential, as it enables the research to explore another aspect of incarceration experienced by incarcerated mothers. For years, criminological research has thought of motherhood as a deterrent to crime (Anaraki & Boostani, 2014:2423; Conova, 2006:2; Travis *et al.*, 2003:6). However, in this study, motherhood was not a deterrent to crime. Therefore exploring the view of maternal recidivism during incarceration will be of interest to explore the way in which mothers view themselves as regards being rehabilitated or not. Previous research has indicated that the focus is more on male recidivism than on female recidivism (Prinsloo, 2016:204; Taylor, 2015:170). Therefore, it is imperative to explore the feelings, thoughts and experiences mothers have towards treatment/rehabilitative programmes to enable the focus to shift from male to female offenders. Programmes that the DCS offers aim to assist in terms of financial matters, relationships, health education, finding employment and combatting substance abuse (DCS, 2015:14). Therefore, exploring the experiences of these programmes will indicate the impact it has on the specific individual. Exploring whether these programmes have made an impact on the lives of incarcerated mothers can possibly aid future research and could be of value to relevant stakeholders such as the DCS.

## **CHAPTER 5 RESEARCH METHODOLOGY AND DESIGN**

Considering the information represented thus far, a number of factors associated with maternal incarceration and its empirical content should be quite apparent. These factors include, but not limited to, correctional conditions and the various impacts maternal incarceration has on the individual, family and children. The general lack of understanding pertaining to maternal incarceration contributes to the continued dearth of knowledge. It is due to the lack of understanding of individualised experiences that the following research aims were formulated for the purposes of the study;

- i. To gain a better understanding of the nature of mother-child interaction/meaning of motherhood within a correctional facility;
- ii. To explore whether the Mother-and-Child Care Units are conducive to the needs of both mother and infant; and
- iii. To highlight an incarcerated mothers' experience of recidivism.

Therefore, to fulfil the aims of the study, a qualitative research approach was chosen. A good research design adheres to scientific investigation and creativity, which allow the researcher to be flexible within the study (Bayens & Roberson, 2010:24). Below is a detailed discussion of the research methodology of the study considering the aims of the study.

### **5.1 METHODOLOGY**

This study employed research strategies that were of an exploratory and descriptive nature. The research methodology can be referred to as the blueprint of the study; it underlies the way in which the study will be conducted. The purpose of an exploratory methodology is to gain a better understanding of the research population, this was appropriate for this study as the sample population is under researched in the South African context. (Babbie & Mouton, 2007:74). Bayens and Roberson (2010:28) define descriptive research as seeking information of a relatively unknown research population or phenomenon.

### **5.1.1 Qualitative methodology**

In qualitative research, descriptiveness aims to paint a picture of a population's experience. Due to a similar study of this nature not being done, the study can be considered exploratory by nature. According to Mouton and Marais (1985:43), the aim of an exploratory study is to gain better insight into, and serves as a starting point for future studies.

Therefore, to fulfil the aims of the study, it was decided to adopt a qualitative approach with a case study design, as this would allow for both the exploratory and descriptive nature of the study. Qualitative research can be defined as “non-numerical explanation of one's examination and interpretation of observations, the purpose of which is to identify meanings” (Dantzker & Hunter, 2012:56). In addition to collecting descriptive data qualitative research, it is concerned with human beings in their surroundings with all their complexities. A qualitative approach was specifically chosen for this study, as the intention of the research was to delve into individualised experiences, thoughts, opinions and perceptions; this led to the richness and uniqueness of individualised experience, which the study aimed to capture which allowed a variety of themes and sub-themes to emerge from the data. The aim was to develop an understanding of how these particular mothers and inmates make sense of their lives, and the qualitative approach was ideal to understand the meaning these women ascribe to motherhood. Meaning is significantly influenced by the environment which one finds themselves in; thus, the experience of the correctional facility is of importance to be able to understand the everyday experience of motherhood. Therefore, a qualitative approach allows the research to take place in a setting where all contextual variables are present (Atieno, 2009:14).

Symbolic interactionism underpins many qualitative studies and emphasises the meanings that individuals and groups of people such as female inmates who are mothers assign to their lives. Its primary concern is with the experience of others, heard directly from the individual; this therefore eliminates generalisations and assumptions about specific groups of people. It is based on one's own subjective reality and the interpretation of that reality. Beyond this, the aim of symbolic interactionism is to describe the importance of social processes that contribute to identity construction during different

types of interactions (Carter & Fuller, 2015:9). For example, mothers in correctional facilities residing with their infants will each assign different meanings to their motherhood, depending on their interaction with their infants and their environment, the correctional facility.

One of the strengths of qualitative research is its ability to delve into complex descriptions of how people experience a given situation (Mack *et al.*, 2005:1). Furthermore, researchers who adopt this approach use a person centred holistic and humanistic perspective to understand lived experiences (Morse & Field, 1996:8). As with all research methodologies, qualitative studies have limitations. One of the limitations is that data analysis can be time consuming and tedious; therefore mistakes are likely to occur. However, the researcher gave herself enough time to go through the data multiple times and to become familiar with the nuances of the findings.

### **5.1.2 Research design: Case study approach**

According to Stake (1995:3), there are three types of case studies, namely instrumental, intrinsic and collective. Instrumental case studies are used to gain an appreciation of a certain issue using a single case. Intrinsic case studies are used to define the uniqueness of a phenomenon and it is the researcher's role to define this uniqueness. Collective case studies are used when a number of cases are investigated to understand a general phenomenon (Crowe *et al.*, 2011:2). Therefore, the collective case study research design was chosen, as it allows for an in-depth description of several cases appropriate to capture the thoughts, feelings and emotions of the incarcerated mothers. Its advantage is that it often gives marginalised groups such as inmate populations a platform to voice their experiences, which is often overlooked. A case study design is distinguished from other qualitative designs in that it allows for an intense, thick description of single units such as an individual or a specific group of people (Schurink, Fouché & De Vos, 2011:312).

According to Baxter and Jack (2008:545), a case study approach should be used when the focus of the research is on “how” and “why” questions; when you cannot manipulate the behaviour of those under investigation; and when you want to cover contextual

conditions because they are relevant to the phenomenon. For instance, the aim of this study is to understand lived experiences of incarcerated mothers better, but the case could not be considered without the context, a correctional facility. This setting influences the lived experience.

The case study can be defined as “a phenomenon of some sort occurring in a bounded context, the case is, in effect, your unit of analysis” (Miles & Huberman, 1994, in Baxter & Jack, 2008:545). Therefore, in this study, the units of analysis are incarcerated mothers. The purpose of the collective case study is to increase the overall understanding of the social issue and the population under investigation. The case study method was most appropriate, because it “allows the researcher to concentrate on a specific instance or situation” (Bell, 1993:8; Schurink *et al.*, 2011:312). Furthermore, the collective case study enables the researcher to draw comparisons and similarities between the cases. Once the cases were examined and compared, relevant themes that emerged assisted the researcher in understanding the experience of motherhood in correctional facilities. Therefore, at its core, the research consists of six in-depth descriptions of the lived experiences of motherhood while incarcerated in a South African female correctional facility.

It must be noted that, as with most research designs, the case study design is limited in that its findings cannot be generalised. Therefore, a common criticism of this method is that it is difficult to reach a generalising conclusion because of the relatively small sample size. However, this design was chosen because the researcher's intention was not to generalise, but rather to capture an in-depth understanding of the experience of motherhood in correctional facilities. Therefore, parameter establishment of the sample was more important than a large sample size to capture insightfulness (Zainal, 2007:5).

Zainal (2007:4) contends that the advantages of the case study method are that the data are collected in the context of its use; in this case, the data were collected in the correctional facilities. Another advantage is that the detailed account of experiences that is produced to describe the data in the real-life environment cannot be captured through experimental or survey research. Furthermore, case studies are considered useful, as it

enables researchers to examine experience at a micro-level, which helps to provide better insight, allowing in-depthness and uniqueness.

Therefore, if one evaluates the advantages and disadvantages of the case study method, in this particular research the disadvantages do not influence the research in such a way that it would hinder the research from reaching its aims. The advantages are the reason for why this particular method was chosen and is appropriate for this study.

## **5.2 SAMPLING PROCEDURE**

Sampling procedures can be categorised into two groups, probability sampling and non-probability sampling. Probability sampling is random and therefore everyone in the population has an equal chance of being selected. Non-probability sampling, however, is non-random. Non-probability sampling was adopted in the selection of an appropriate sample for this research to gain an in-depth understanding of the particular inmate population. Purposive sampling was applied by finding participants who matched the sampling criteria. Purposive sampling can be categorised under non-probability sampling and therefore allows the researcher to select the sample based on the aims of the study (Babbie, 2007:184; Bayens & Roberson, 2010:134). Researcher bias is a general possibility of non-probability sampling, whether conscious or unconscious (Terre Blanche & Durrheim, 2002:279). However, due to the nature of the required sample, mothers who were incarcerated at the time of the interview coupled with the aspect of voluntary participation the researcher had little influence over the selection of the participants, therefore reducing researcher bias.

### **5.2.1 Sample population**

Due to practical implications such as geography, financial implications and language as well as the chosen research method, the entire population of incarcerated mothers with infants in South Africa could not be used. Therefore, the sample population consisted of incarcerated mothers residing with their infants (at the time of the interview) at two correctional facilities in the Free State and Northern Cape of South Africa. Due to the small number of mothers incarcerated with their infants, all the research participants who were incarcerated at the time of the interview and willing to participate were included in

the study. The small number of participants can also be attributed to this population being a transit population, meaning that mothers are often placed closer to family, are in and out of hospital, and infants are continuously leaving and entering the facility. Therefore, the numbers fluctuate and this population is moved more readily to other correctional facilities. However, the data collected were sufficient for the study. The researcher is also unaware of any prior research at these particular Mother-and-Child Care Units. The sample population consisted of six participants in total (cases). The following sampling criteria were used:

- The participants were over the age of 18, due to ethical implications.
- The participants were able to speak English.
- The participants were currently residing with their infants.
- The participants had to be residing at the two chosen correctional facilities.

### **5.3 MEASURING INSTRUMENT**

Due to the qualitative nature of the study, it became imperative to capture the raw data in a manner that would allow for an explorative analysis, which could result in themes related to the research aims. Therefore, semi-structured interviews were conducted with the participants; questions were formulated around the aims of the study see Appendix A).

The interview schedule compromised four sections:

- 1. General and biographical data

Questions in this section served to capture data, which were essential to describe the sample. Other aspects of relevance such as nature of offence and age of infant were also captured under this section.

- 2. The nature of motherhood in a correctional facility

Questions in this section were formulated to understand the everyday experiences of motherhood while being incarcerated better. Questions were related to daily routines, thoughts and feelings associated with motherhood.

- 3. Correctional facility conditions

Questions in this section were developed to assess the quality of the mother baby units, as well as to understand better whether the needs of mother and infant are met in relation to policy.

- 4. Recidivism

Questions in this section related to the thoughts and feelings around motherhood and recidivism. These questions were formulated to understand better whether motherhood and incarceration has the ability for these particular inmates to view themselves as rehabilitated or not.

The interview questions were a combination of closed and open-ended, enough time was given to participants to gather their thoughts as well as express themselves throughout the process. The use of open-ended and close-ended questions gave structure to the interview, therefore allowing the interview to be replicated among all participants. The close-ended questions were asked to gain a better understanding of background information, while the purpose of the open-ended questions were to gather participants' thoughts, emotions, feelings and attitudes. Open-ended questions also provide room for probing, which often enabled the researcher to gather in-depth responses from participants (Babbie & Mouton, 2011:253) regarding motherhood within a correctional facility and the lived experiences.

The advantages of a semi-structured interview technique are that it enables participants to freely express emotions, thoughts and feelings, therefore allowing the uniqueness of each experience to come through in the data. This type of interview technique can also be prepared prior to the interviews therefore the researcher can be competent and aware (Cohen & Crabtree, 2006:1). Participants can influence the topic, which can allow unexpected themes to emerge that can provide more in-depth and invaluable information about the lived experiences of motherhood. This type of measuring instrument, being semi-structured interviews, enabled the aims of the study to be met as the focus was on gathering in-depth and rich data highlighting experience, uniqueness and the way in which this population creates meaning for themselves out of these experiences. The aims of the



study are all centred on understanding, an under-researched population, while this type of measuring instrument guided the research in a way that gave room for comprehensive exploration which a structured interview or survey would not have permitted.

#### 5.4 DATA COLLECTION

The study took place with the assistance of the DCS, as permission was obtained to conduct the study. An application was made via the DCS for access to the correctional facilities in the Free State and Northern Cape. Once the application was approved by the head office in Pretoria, the facilitation process began by means of contacting relevant correctional staff. Thereafter the DCS shared relevant documentation and information regarding mothers in the specific correctional facilities and the researcher was able to conduct the interviews. Data collected proceeded with one-on-one semi-structured narrative interviews guided by an interview schedule (see Appendix A) with the incarcerated mothers in the above-mentioned provinces. Interviews took place in the office of a correctional officer for those inmates who did not have to attend to their infant at the time as they were sleeping. Other interviews took place in the units if inmates were feeding/taking care of their infant at the time. The interviews were audio recorded with the consent of the participants (see Appendix B), which was obtained prior to the interviews. An explanation of the aims, purpose and the procedure of the study was highlighted to all participants to ensure they understood their part in the study. Below indicates the location and duration of each interview.

Participant	Duration of interview (minutes)	Location of interview
A	68	DCS official office
B	55	DCS official office
C	45	Mother-and Baby Care Unit
D	58	Mother-and Baby Care Unit
E	49	Mother-and Baby Care Unit

F	62	Mother-and Baby Care Unit
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### 5.4.1 Data analysis

Data analysis began with the digital voice recording being transcribed. The transcribed interviews were analysed for themes and sub-themes. Data analysis is conducted in order to bring structure, order and meaning to the collected data (Schurink *et al.*, 2011:397), therefore giving meaning to the themes and sub-themes that emerge. Once the data were collected using the semi- structured interview schedule, the data were analysed following the next steps (Bachman & Schutt, 2011:254);

- Transcribed interviews were read through several times to gain a better understanding of the information. This allowed themes to emerge through the data. Organised and detailed reading were key features of this process.
- Once themes emerged, they were categorised into relevant sections and a description of themes could drawn about each participant.
- The descriptions of the themes could be presented in a scientific and concise manner resulting in this information contributing to the body of knowledge. In other words, the analysed data were correlated in terms of similarities, differences and gaps of knowledge to the literature that were reviewed in chapters one to three.
- Lastly, data analysis includes the conclusions and recommendations, which will be presented in Chapter 6. Therefore, through this data analysis the aims of the study could be met. This is also helpful for future and further research.

### 5.4.2 Trustworthiness of the study

It is of vital importance that the researcher recorded all observations and data accurately to ensure reliability. Therefore, to ensure this, the researcher used an interview schedule while interviews took place to ensure consistency among questions asked of the six participants. Truthfulness and authenticity in participants are major components in qualitative research. In order for participants to give an accurate account of their lived experience, they have to be honest and fair (Neuman, 2006:196). Therefore, the

researcher ensured each participant that it was a safe space to be open and honest and there would be no negative consequences for sharing their experiences.

The potential lack of objectivity is viewed as a concern in qualitative research, often due to the researcher being so closely part of the process. Smaling (1989:307) has provided a practical approach on how to reduce researcher bias. The approach is referred to as Münchhausen Objectivity and “the essence of the Münchhausen objectivity is doing justice to the object of the study” (Babbie & Mouton, 2011:274). The Münchhausen objectivity stipulates the following assumptions and it was implemented for this study Smaling (1989:307);

- Recognising the point of view of the subject of the research, being incarcerated mothers, therefore allowing the subject to speak and to share their experiences.
- Acknowledging that the researcher’s experience is not necessarily a threat to objectivity, but can rather be viewed as learned subjectivity, which may have the ability to enhance the research process.
- Acknowledging that objectivity is often a state of mind or an attitude, therefore it requires active involvement and interest, which is the responsibility of the researcher. Therefore, the researcher was continuously mindful of this throughout the research process by always “allowing the object to speak”.

Further used to ensure trustworthiness and validity of the study, the following strategies were employed (Babbie & Mouton, 2011:277; Ryan, Coughlan & Cronin, 2007:743);

- Credibility refers to the consistency between participants’ views and the researcher representation; therefore, does it “ring true”? This was ensured by lengthy conversation with all the participants, detailed field notes and the use of a voice recorder.
- Transferability refers to the ability of the study being replicated by means of procedures; therefore, it ensures the study can be conducted on other respondents by means of following a process trail. Transferability was achieved by the interview schedule being made available (see Appendix A) and the data analysis process is

clearly detailed. Transferability is also enhanced when those not involved in the study find the results meaningful, such as policy developers.

- Dependability involves the researcher ensuring enough information is conveyed. This also requires proving a trail of evidence from start to finish of data collection. Therefore, if the study had to be repeated with the same respondents in the same environment the findings should be similar.
- Confirmability is described as the degree to which the findings are true to the inquiry and not based on the biases of the researcher. Therefore, this was achieved by demonstrating how conclusions and interpretations were achieved by providing detailed explanations in Chapter 5e. Clear communication of the findings were done by clearly presenting the findings in a thematic table and by encouraging further dialogue by revealing limitations of the study as well as recommendations for future research.

### 5.4.3 Pilot study

Before embarking on a full-scale research process, a pilot study was performed on two participants from the sample population. Conducting a pilot study has many benefits for the research. Pilot studies are useful for testing the feasibility of the research methodology and questions used in the data collection process. This allows for any problems and challenges to be identified and corrected before proceeding with the full-scale research project. This also improves the trustworthiness and ensures integrity of the data (Van Teijlingen & Hundley, 2001:1). The participants were welcomed and the aims and purpose of the study were explained. The participants were reminded that participation is voluntary. It was stressed that if there were any confusion regarding the questions being asked that further explanation would be provided. From the pilot study, one issue was identified and rectified; some statements and words used were not understood. The following indicates the statements before and after the pilot study;

How can the DCS improve your environment?	What can the DCS do to make this place better for you and your child?
-------------------------------------------	-----------------------------------------------------------------------

What was your decision making process, when deciding to keep your infant?	Was the decision to keep your baby easy or difficult to make?  What were your thoughts/feelings when making this decision?
Are the developmental needs of your child being met?	Do you think a correctional facility is good for your child's development?  Why do you say so?

Therefore, in order to rectify the issue, exploratory questions and statements were revised continually depending on the participants understanding. Furthermore, the researcher ensured words and statements were explained in detail to ensure questions were understood. Data from the pilot study were used, as the researcher was of the opinion that the data were of value, as questions were made clear to the participants.

## **5.5 ETHICAL CONSIDERATIONS**

As with any research, the safeguarding of the humanity of the participants is of vital importance. Due to the factors explored in the study being of a sensitive nature and rooted in personal experience, it became an integral part of the research process to ensure comfort and on the part of the participants.

### **5.5.1 Anonymity and confidentiality**

“The clearest concern in the protection of subjects’ interests and wellbeing is the protection of their identity.” (Babbie & Mouton, 2011:523) Therefore, all data and information obtained were treated with confidentiality and all information that linked participants to the study was omitted. Due to the sensitive nature of the study no names were used in the discussion of the research but rather Participant A-F and Infant A-F, confidentiality was strictly maintained. Interview recordings are password protected and only the researcher has access to the recordings. Interviews were conducted in a safe space without intimidation. All participants were asked where they would feel most comfortable doing the interviews, therefore interviews took place in the Mother-and- Child Care Units or office space. The researcher also decided not to mention the names of the

specific correctional facilities to enhance anonymity of participants. Due to the face-to-face interviews anonymity cannot be guaranteed.

### **5.5.2 Voluntary participation, informed consent and protection against harm**

All participation was voluntary and there was no material gain from participating in the study; however, participants were informed that their cooperation could influence future policy on mothers and infants in correctional facilities, and that this would be a platform to share their experiences freely. It was reiterated to participants that they could withdraw from the study at any time with no consequences. According to Strydom (2011:115), participants should be made completely aware of the aims and purpose of the study and informed consent in the form of a written agreement (see Appendix C) was achieved in the language in which the participant felt most comfortable. The avoidance of harm is not always entirely possible; however, the researcher should do everything possible to avoid physical and unnecessary emotional harm. The researcher did her best to ensure the protection and avoidance of harm throughout the interviews by informing participants that the content of the questions could bring about difficult emotions. Therefore they were free to decide if they wanted to answer certain questions or not. The researcher also enquired whether participants wanted to continue with the interview after difficult questions were asked and she ensured that tissues were available. All participants chose to answer all the questions throughout the interview.

Ethical clearance to conduct the study was obtained from the Humanities Ethics Committee, University of the Free State (see Appendix D) as well as the Department of Correctional Services (see Appendix E) and the specified ethical guidelines were adhered to throughout the research process.

### **5.5.3 Researcher competency**

As this study focuses on a sensitive topic, being motherhood in correctional facilities, the researcher had to ensure that all ethical guidelines set out by the University of the Free State and the DCS were followed. The researcher ensured honesty, competency and responsibility in the way in which she spoke to the participants and the overall conduct of the study. Value judgements about the decisions and actions of the participants were

refrained from, therefore each participant was shown respect and were told how grateful the researcher was for their openness and willingness to participate. Additionally, the research was conducted under the guidance of a supervisor from the Department of Criminology at the University of the Free State.

#### **5.5.4 Debriefing of participants**

The researcher debriefed each participant once the interview was concluded; this was done by concluding the interviews with an open platform to allow the participant to share anything else about their experiences of motherhood in correctional facilities. The case management committee also provided a social worker for the researcher to assist if there were any concerns about the participants or if clarity was needed. None of the participants needed to confide in the social worker afterwards; in fact, some participants mentioned that they were happy to have the platform to share their experiences and stories with someone not associated with the DCS. This is due to participants feeling not judged as well as not being intimidated that their opinions might have potential consequences.

## **CHAPTER 6 DISCUSSION OF FINDINGS**

### **6.1 DESCRIPTION OF THE TRANSCRIBED DATA**

The following will outline the process that was followed after data collection. Once the interviews were conducted, the digital recordings were transcribed – the questions and the participants' answers were typed up for the purpose of analysis. Throughout the chapter, certain excerpts from the interviews will be used and presented verbatim, where necessary. To ensure confidentiality and in line with the ethical conduct as mentioned in Chapter 4, the participants of this research will be referred to as Participants A to F and the names of the infants will be referred to as Infants A to F. All other identifying characteristics of the participants will also be omitted to avoid participants being identified.

In this chapter, a summary of the relevant biographical information pertaining to the participants will be presented. In order to understand the experiences of these women, a biographical overview of each participant will be presented to explain the background that each participant comes from; this is done to understand their lived experiences better.

Each theme and subtheme that were identified from the organised data will be tabulated per participant, with a summary of the relevant information pertaining to the subtheme. Thereafter each theme and subtheme will be elaborated on and correlations will be drawn between the theme, the participants' responses and the literature provided in Chapters 13, where possible. Furthermore, verbatim quotes will be used to substantiate the information and, for a better understanding of the themes, subthemes and individual experiences.



## 6.2 THEMES AND SUBTHEMES

The following is a list of tabulated themes and subthemes that became apparent through the application of the interview schedule and case study method:

**Table 1: Themes and subthemes**

<b>Section A</b>	
Demographic and background information	<ul style="list-style-type: none"> <li>• Age</li> <li>• Nationality</li> <li>• Race</li> <li>• Age of Infant</li> <li>• Nature of offence</li> </ul>
<b>Section B</b>	
<b>Themes</b>	<b>Sub-themes</b>
The nature of motherhood in a correctional facility	<ul style="list-style-type: none"> <li>• Decision making</li> <li>• Family</li> <li>• Pending separation</li> <li>• Thoughts on motherhood</li> </ul>
Needs of infant and mother	<ul style="list-style-type: none"> <li>• Correctional environment</li> <li>• General care of infants</li> <li>• Gender-specific healthcare</li> </ul>
Conditions of correctional facilities	<ul style="list-style-type: none"> <li>• Overcrowding</li> <li>• Hygiene</li> <li>• Diet</li> </ul>
Motherhood and recidivism	<ul style="list-style-type: none"> <li>• Treatment programmes</li> <li>• Motherhood as a deterrent to future offending</li> </ul>

## 6.3 BIOGRAPHIES OF PARTICIPANTS

The six participants' relevant demographic and background information, as well as a short biography, are summarised below:

**Table 2: Demographic and background information of participants**

Participants	Age	Nationality	Race	Age of Infant	Marital status	Nature of offence
Participant A	30	South African	Coloured	3 Months	Single	On trial for murder
Participant B	39	Zimbabwean	Black	2 months	Married	Shoplifting
Participant C	29	South African	Black	19 months	Single	Shoplifting
Participant D	37	South African	Black	1 year	Widow	Theft
Participant E	35	Lesotho	Black	20 months	Single	Murder

Participant F	42	South African	Black	18 months	Single	On trial for concealment of a birth
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### 6.3.1 Participant A

Participant A is a 30-year-old single mother of two children. Her three-month-old son resides with her in the correctional facility, while her eight-year-old daughter lives with her maternal grandmother. The children do not have the same father. Her highest level of education is Grade 11 and she has lived in the Northern Cape all her life. Participant A was employed at the time of incarceration; however, she mentioned that she worked from contract to contract. Sometimes there were no jobs available and she remained unemployed for long periods. She has been incarcerated for 11 months and has not been convicted, as she is still on trial. She has been accused of murder. When asked to explain why she had been arrested, she said the following,

*I am falsely accused of murder. People were fighting and at that moment I wasn't there. My friend was fighting with these people and I wasn't there. A father, daughter and mother were fighting. The father died. I wanted to light my cigarette on her stoep and this girl picked up stones and threw them at her house and me, because I am friends with the girl they fought with earlier. I got angry because I didn't do anything to her and also picked stones up and started throwing them on her. The first time I missed, the second time it hit her back and the third time she ran in the house and locked the door. I threw this Madala (old man) with the stone on his head. There were no other people that saw this; it was only me, the girl and the father.*

Participant A maintained she was innocent. Her lawyer was also optimistic, as the state did not have a strong case against her. She said that bail had been denied due to community members threatening her. Therefore, the judge felt it was best for her to remain in custody for her own safety.

### 6.3.2 Participant B

Participant B is a 39-year-old mother of five children. She is a Zimbabwean national and has been living in South Africa for the past few years with the hope of having access to economic opportunities. She has been married for 15 years. Her husband works in

Johannesburg and is an artist; he sells his work on the side of the road. She explained that her children live in Zimbabwe and Johannesburg, depending on who can take care of them, but mostly with their father. Her two-month-old daughter resides with her in the correctional facility. Her highest level of education is Grade 11. She was convicted of shoplifting; her sentence was six months, but she was on trial for three months. In total, she will spend nine months in the facility. When she was asked to explain why she shoplifted, she explained,

*I didn't have a job and I wanted to look after my children. My two sisters passed away so I am looking after their children too, so my circumstances led to me shoplifting. It is hard for my husband to look after the children alone. I regret it, but there is nothing I can do about it now, because I can't throw my siblings in the street.*

She said it was difficult to reach her children in Zimbabwe, because the phones did not work if one tried to make a phone call outside of South Africa. She explained that her sentence had nearly ended and she would be leaving in two weeks.

### **6.3.3 Participant C**

Participant C is 29 years old and has two children. She is a single mother and her highest level of education is matric. She was unemployed at the time of her arrest. Her 19-month-old infant resides with her, while her five-year-old daughter lives with her biological father. The children do not have the same father. She has been convicted of shoplifting. When asked to explain why she shoplifted, she said,

*I stole clothes for my other child and also to sell it and buy food. I don't have a mother or father to help me.*

She has been in the correctional facility for 25 months. According to her, she had completed half her sentence and was waiting for the parole board to get back to her. When asked if she knew when they would get back to her, she said she did not know, but she had to wait patiently as there was nothing else one could do.

### 6.3.4 Participant D

Participant D is 37 years old and is a widow. She has four other children outside of the facility who are 23 years old, 18 years old, 7 years old and 3 years old. Her one-year-old infant resides with her. She explained that the two youngest children lived with their aunty, the 18-year-old lives with the grandmother, and the 23-year-old lived alone. Participant D has been convicted of theft and when asked to explain why she had done so, she said,

*The father of my child passed away and I had no money to take care of them, so I had to steal. It wasn't the first time I committed an offence, but it was the first time I got caught.*

She explained that her sentence was 18 months, of which she had served 6 months. She was waiting to be paroled, as she thought would release her early, because she had many children relying on her.

### 6.3.5 Participant E

Participant E is 35 years old. She was born in Lesotho, where she lived most of her life. She is a single (never legally married) mother of three children, she has two sons who are 18 and 12 years old, while her 20-month-old infant resides with her. She explained that her sons are living with individuals who are not family and is therefore in foster care. She is currently uncertain about where they are living as it changes continuously; however, the social worker does let her know from time to time. She was also unemployed at the time of arrest and her children do not have the same father. When asked why she was in the correctional facility, she said she had been sentenced to five years for murdering her husband. She explained that she came from Lesotho to South Africa and found out that her husband had another wife. Out of anger, she then proceeded to stab him in his side, close to his ribs. She said,

*I came to South Africa and found my husband has another wife, so I pulled my knife and I killed him.*

She has already served half of her five-year sentence.

### 6.3.6 Participant F

Participant F is 42 years old, was living with her partner (they are not married) and she was not permanently employed at the time of incarceration. Her highest level of education is Grade 6. Her children are 17 years old, 14 years old and 5 years old, with her 18-monthold infant residing with her. Her children are living between their fathers and other family members while she is incarcerated. She is still awaiting trial and has been charged with the concealment of a birth. She has already been in the centre for seven months. When asked why she had been arrested, she explained,

*I believed that my daughter was on a medication and that one of its side effects was that she would not get her period now and again. I then would give her this medication called new essence, then she started bleeding and eventually a baby came out. We were surprised, because it meant that she was pregnant. We then dug a hole in the back yard and buried the baby there. Someone in the neighbourhood saw us and reported us.*

She explained that it was not her intention to cause any harm to the baby or her daughter, and that she thought she was helping. She wished she could have done things differently, because she had never committed a crime before. Therefore, she felt it was unfair that she was there and had to raise her infant in that environment.

The following section will highlight the themes and subthemes that emerged from the interview schedule. The findings will be discussed in respect of the previous literature that has directed the study thus far.

## 6.4 THE NATURE OF MOTHERHOOD IN A CORRECTIONAL FACILITY

**Table 3: The nature of motherhood in a correctional facility**

	Decision-making	Family	Pending separation	Thoughts on motherhood
Participant A	Participant A decided to keep her child with her because he is breast-feeding. The social worker also thought it was best to keep the baby. The other option was for the participant's mother to take care of the infant; however,	Participant A finds it difficult to sleep because she thinks about whether her other child is hungry and concentrating at school.  She misses her daughter very much and cries herself to sleep. She has faith in God that her child is ok.	Participant A does not think about being separated from her child. She focuses her attention on the trial and thinks about not being convicted, if she has to think about the separation, she gets depressed.	She thinks she is a good mother, because when she gets out she will find a job and look after her children.
	she is financially unable to.	Her daughter visits her in the school holidays because there is no one to bring her child to see her during the week.  Due to her incarceration, her mother is taking care of her other child and works six days a week.		

Participant B	Participant B says that there is no one to care for her child therefore the correctional centre is the only option.	<p>She misses her other children a lot and says they need their mother that is why she has to get out.</p> <p>Her five other children stay in Zimbabwe and with their father in Johannesburg but she does not know whether her other children are surviving financially.</p> <p>Her children do not visit her but her husband visits twice a month.</p>	She will not be separated from her child because she would have served her sentence by the time the baby reaches the age of two.	She say she is a good mother because she provides for her children even if that means committing a crime. She does it to be able to send her children to school. She has built them a house in Zimbabwe and herself and her husband do the best with the situation they are in.
Participant C	<p>Participant C says she does not want her baby with her.</p> <p>She wants her child to stay with his father. The social worker and doctor insist the baby stays with her because he is still breast-feeding.</p>	<p>Participant C does not get to see her other children because her husband is angry with her for being incarcerated.</p> <p>They do not come to visit. She has only memories, it hurts when she thinks about them.</p>	She does not want to acknowledge the possibility of separation. She insists her child will always stay with her.	She says she is a bad mother because her baby was born in a correctional centre. She acknowledges that her decisions have made her a bad mother but she hopes one day to make up for it.
Participant D	Participant D has feelings of guilt because she decided to keep her	She is stressed all the time thinking about her other children. When her	She feels sick when she thinks about being separated from her child. She	She says she is a good mother because she is trying to help her
	baby with her while her other children are left suffering alone.	<p>3-year-old comes to visit, he cries the entire time, because he misses her so much and does not want to leave.</p> <p>They only get to spend 2 hours together every few months.</p>	has served her half sentence and is waiting for the parole board. If she gets to leave, she will not have to be separated from her child.	children. She is trying to provide the best life she can for her children. It is very difficult because they are poor and do not have much.

Participant E	Participant E had no other choice but to keep her infant with her. There are no family members willing to take care of the infant.	She thinks about when she will get out how she will sit her children down and apologise to them. She feels terrible for leaving them; she wants her children to forgive her.	She worries about who will look after her child when he turns two years. She lives one day at a time and prays that a miracle will happen.	She says she is a good mother because when she gets out she will apologise. It was not her intention to come to a correctional facility.
Participant F	Participant F thought it was best to keep her child with her because her other children are still too young to look after an infant.	Participant F does not get to see her children at all. She thinks about how much she is missing all the milestones she is not there to see. It keeps her up at night crying and praying.	Because she is still on trial, she hopes that the separation will not come but sometimes she thinks about it.  She maintains she deserves a second chance because she made a mistake. She does not want to think about losing another child.	She says she is a good mother because she was only trying to help her daughter when they buried the baby.  It was not her intention for her daughter to miscarry her baby. She gave her daughter medication for her to feel better; however, the medication caused her daughter to miscarry; they then buried the baby in the back yard.

As previously mentioned in Chapter 2, in recent years, the theory of intersectionality (see 2.7) has come to the fore. It can be defined as the converging of multiple aspects – such as gender, race, social class and motherhood – that influences an experience. It has been used as a theory to explain the complexity of an experience (Mason & Stubbs, 2010:14).

The research found that the majority of participants were single mothers and solely responsible for the financial wellbeing of the households. These findings can possibly be attributed to intersectionality as well as the feminisation of poverty. The feminisation of poverty suggests that one of the primary reasons women are living in poverty is the lack of male income in the household. Women also have more dependants than men, leading to multidimensional poverty (Moghadam, 2005:1; Rogan, 2016:988). As seen from participant biographies, the majority of participants articulated that their financial



challenges had a direct impact on their decisions to commit crimes. Their poverty-stricken backgrounds had an influence on their decisions. Participant B articulated the following,

*I want to take them (her children) to the next level, give them an education. If I have enough money, I will stop (committing crimes).*

All participants indicated that prior to incarceration they were unemployed and relied on government grants to provide for themselves and their children. These findings are similar to those of Ebeniro (2011), Hesselink and Mostert (2014) and Willison and O'Brien (2017) in which it is highlighted that women's difficulties and vulnerabilities are due to their societal position. Therefore, the increased economic competition in South Africa forces women to take part in crime as a means of survival. These findings may help one to understand the theory of the feminisation of poverty better in a South African context. It can thus be suggested that many women become the sole providers for the family and have to conform to societal roles and norms, while limited expectations are placed on fathers. This contributes to the pressure put on women.

Veazey (2015:6) argues that in situations described above, motherhood becomes a disadvantage and a position where gendered stereotypes come to the fore. This allows for further discrimination, as found often within the criminal justice setting. Participant A had an incident, which could be considered as discrimination; she mentioned that her case has been postponed several times since she was unable to take her baby into the court room as it is not permitted. However, the DCS did not provide a caretaker for her child during the court proceedings. Therefore, if a family member is not present to look after the child, the case is postponed. Due to their financial situation, her family is unable to attend all court proceedings. She also mentioned once leaving her child with a stranger (who happened to be a police officer) so that court proceedings could continue. Due to the delays, she has been on trial for nine months. This situation directly places this inmate at a disadvantage since no other inmate population would be placed in this particular situation, which could be viewed as discrimination. This type of disadvantage can be described in terms of the argument of Daly (1992) in which she states that the criminal justice system concentrates on overlapping gendered experiences and not on individual specific interpersonal factors of female offenders. Therefore, the value of this finding

suggests that a weak link may exist between the policies of the DCS and the criminal justice system.

#### **6.4.1 Decision-making**

The legal framework that governs incarcerated mothers and infants in correctional facilities is outlined in the *Correctional Services Act 111 of 1998*, as amended by the *Correctional Amendment Act 25 of 2008*. The Act states that a child may be permitted into a correctional centre under certain conditions, when no other suitable care is available. The Act is, however, unclear as to what suitable care is. The research found that the participants did not play a significant role in deciding where their child could stay. The decision was highly dependent on whether the child was nursing. While some participants would have chosen other 'suitable care' for their infants, the department was of the opinion that it would be best for mother and child not to be separated. Therefore, this decision-making process remained unclear. The following is articulated by some participants:

Participant A would have preferred that her mother take care of her baby; however, the choices she was given were to either place her child into the care of a social worker or to keep her child in the correctional facility. The researcher is of the opinion that this was due to the participant's mother being financially unable to take care of the infant. This was because Participant A mentioned that her mother was the sole provider for many individuals.

*In prison you have the choice to send your child to the social worker, but sometimes the child is too small. They usually send them out when they are two years old. I asked my mother to look after him, but he is still young and I am breastfeeding him. It was best to keep him here with me.*

Another noteworthy example of this was articulated by Participant F,

*I would prefer that the child being placed outside (of the correctional facility), but she is still nursing and the doctor prescribed that she needs to be nursed until two years. So the baby needs to be with me.*

Participant C said the following about the decision to keep her baby,

*I have no one else to take care of my child. If I had a mother, I would ask her to look after him, but I have no one else. My other child lives with her father.*

Post-modern feminists analyse power relations across multiple levels, such as individual and structural power, as well as where these powers meet (Willison & O'Brien, 2017:38). The above can be attributed to a possible collision of power between the individual (female offender), which is very limited, and structural power (criminal justice system). This collision of power can be expected since mothers are no longer able to make autonomous decisions for their infants, such as the child's placement. Mothers in correctional facilities have limited power in this regard, which places them in a vulnerable position. They are completely reliant on the criminal justice system to make the best choice regarding their infants.

The research found that fathers do not play a significant role in the decision-making process regarding the best interests of the child. None of the participants, except Participant B who is married, mentioned the biological father of their children as an option for alternative care. Throughout the interviews, fathers were hardly mentioned as a source of decision-making. This finding is consistent with that of Allan (2004:58) and Fouquier (2011:145) where it was found that fathers often play an insignificant role whilst mothers are incarcerated; this contributes to a patriarchal society in which unrealistic expectations are placed on incarcerated mothers. More research is thus required to establish the way in which the DCS and inmates make the decision for an infant to reside in a correctional facility.

#### **6.4.2 Family system**

As stated in the literature, the separation from family is one of the most challenging aspects for incarcerated mothers (3.3.1) and issues such as mental health are influenced by the way in which inmates handle this separation. Previous literature contends that multiple aspects, such as other family members are influenced when mothers are incarcerated. Often other family members are given the responsibility to care for the children. Incarcerated mothers are often placed far away from their homes, which has a

devastating impact on relationships. Although the DCS has set out recommendations in the White Paper on Corrections that mothers should be placed close to home to remain in contact with children, this is not always the case. Family instability, as well as stress and trauma experienced by the incarcerated mother usually follow incarceration (Agboola, 2014:51; Murray & Farrington, 2008:135; Wildeman, 2010:285).

The study found that the majority of participants came from financially strained homes where a 'typical' family structure was not present. Participant A's other child lives with her grandmother, but this grandmother is also responsible for another grandchild, which places financial strain on her. Participant B is married, but not all her children live with their father. Additionally, Participant B was the only participant whose children all had the same father. Some children lived in South Africa while others lived in Zimbabwe with their maternal aunty. Participant C mentioned that her other children lived with their father; however, he was not their biological father. Participant D's other children are in foster care while she is incarcerated. Participants E and F mentioned that their children stayed with various other family members, and it depended on which family members were willing to care for them.

These findings confirm the findings of previous studies by Agboola (2014), Barnes and Stringer (2014), Dallaire *et al.* (2015) and Lunga (2009) that when mothers are incarcerated the living arrangements of children are severely disrupted due to mothers being the sole caretakers. Siblings also tend to be separated to ease the financial burden on family members. Children of incarcerated mothers are typically placed with grandmothers and maternal family. Participant A's interview revealed the following regarding the financial burden placed on alternative care for her child while she is incarcerated,

*My mother is at work for six days per week. Like now, when school is closed I am stressed about my daughter, because my mother works every day except on a Sunday. Sometimes she even has to work on Sundays too, from 7am to 6pm. It would be too hard on my mother because she is the only breadwinner in the family; my father is dead. She looks after my daughter and my sister's son. When I see my mother struggling, it breaks me.*

All participants mentioned the longing to go home and to be reunited with their other children and family. It was found that participants found it difficult to maintain a relationship with their children once incarcerated. Some participants received visits from children and family while the majority did not due to finances, far travelling distances, an inconvenience due to school and a strained relationship. Furthermore, the study found that some participants found that their children missed them and wanted to visit, while other participants mentioned that family members were angry at their decisions regarding crime and they did not wish to visit them while they are incarcerated. This finding was also reported by Heinecke and Karlsson (2017) and Knudsen (2016), who found that the way in which families experience maternal incarceration is not homogenous. One can conclude that there is no single reason why family wish to stay in contact or not, and multiple factors can influence this decision. Those who did get visitors described the visits as short and sad, and during which quality interaction was often hindered due to the glass window separating family or due to the time spent together being too short. These findings correlate with literature and previous findings by Artz *et al.* (2012:53) and Robertson (2007:37), where visiting rooms were found to be cold and not conducive to a quality conversation. This correlation can be attributed to the fact that many correctional facilities in South Africa are built in the same way and therefore structurally, many of them have the same challenges. Therefore, the research can conclude, together with previous findings, that quality spaces in correctional facilities are required depending on the inmate population to enhance the quality of the relationships between inmates and their loved ones during visiting times.

Participant A described her eight-year-old daughter as well as her child's father coming to visit her,

*Yes, she comes and visits me and then we sit in the visitor's room with the glass between us. She would sit on the one side and I would sit on this side of the glass. Yes, he comes to visit, but I am not allowed to play with him, because I am still on trial. We have to sit on opposite sides of the glass. We can ask the social worker if he wants to play with Infant A.*

Participant A is on trial, which does not allow her to have physical contact with her child during visitation. However, according to the Bangkok Rules that have been adopted by

South Africa, mothers should have open contact when children visit to facilitate the process of maintaining quality relationships (Ackermann, 2015:11; Limsira, 2011:13).

Participant A also mentioned that her daughter could only visit when the schools were closed as visiting days were on Tuesdays and Thursdays. Therefore, these days were not practical for children who are at school as well as for those who work. Participant A was very emotional when interviewed about her daughter who was not with her. She constantly compares her two children – the one child who is always with her and the one who is left without her.

*It makes my heart sore that he (Infant A) has to grow up in this, but I need to be strong for my children and pray to God. I will get out and make up for this. I must just believe and be strong. I was here in prison when it was my daughter's birthday, when it was Christmas and even my own birthday. I was sad. I was crying the whole time [holding back tears].*

Participants B's children do not visit her since they live too far away. She has five other children whose ages range from five months to eleven years old. Therefore, only her husband visits her when he is able to. This places strain on her relationship with her children, and she relies on what her husband tells her about their progress at school and other aspects of their lives. The DCS, however, has an obligation to incarcerate inmates as close to their homes as possible, 'especially if they are mothers'. This is set out in the *Correctional Services Amendment Act of 2005*, section 20. According to Artz *et al.* (2012), one of the most profound challenges to incarceration is the distance it causes between inmates and families.

Participant C mentioned that the father of her child did not come to visit her, because he was angry at the situation they were in. He did not want his child in a correctional facility with her and would rather have the child with him. Her response to missing her family was the following,

*I am stressed every day. I miss my other children. I don't know if they go to school. The three-year-old was crying when they came to visit.*

Participant D has four other children, ranging in ages from 3 to 23 years old. She said her children visited her at least once a month, but that did not make the situation any

better. While she appreciated that they came and visited her, her stress about their wellbeing was overwhelming.

Participant E, who has two other sons, is not in contact with any of them. She revealed that they had been separated and were in foster care (and not in the care of her family). She does not see them and she does not know how to make contact with them.

Participant F has three other children whose ages range from 5 to 17 years old. She described the situation with her other children as follows,

*I accept that no one visits, and I also don't want to force anyone to come. I lose out on so much with the other children. I don't have contact with my children, so I cannot relate and explain properly.*

The research found that, within the South African context, there is a gap in the literature regarding incarcerated mothers' children left behind. This is alarming, considering the rising number of female inmates in South Africa. A further study with more focus on the children left behind, particularly those who are under the age of 18, is therefore suggested.

#### **6.4.3 Pending separation**

The pending separation from children has been viewed as a stressful thought for incarcerated mothers. Often the wellbeing of the child, once placed in alternative care is a concern, as well as the possibility of an inability to maintain a relationship. This can be difficult for mother and child, since an attachment would have formed. Separation from children has been viewed as one of the most difficult aspects of incarceration (Powell *et al.*, 2017:284; Muftić *et al.*, 2015:95). The stressful environment of correctional facilities exacerbates the anxiety and stresses that mothers experience. Mothers often use infants as a coping mechanism; once the infant is removed, the coping mechanism is also removed (Du Preez *et al.*, 2015:128; Steyn & Hall, 2015:85).

This study found that no participants, excluding one, could imagine being separated from their child, although they acknowledged the correctional environment was not suitable for an infant. Yet they did not want their children to be taken away. The researcher attributed this finding to mothers relying on their infants as a source of hope and comfort, and a

reminder of home. The above literature was confirmed by all participants where separation from their child was a possibility. For Participant B the pending separation had not been a concern, as she would have completed her sentence before her infant turned two years old.

Participant A described being separated from her infant,

*I don't even want to think about that. I just focus on now and pray to God that I would be able to go home. I don't think about being sentenced. So far, they said that there is not too much evidence against me. So, I hope that I would rather go home. Even when the other inmates tell me that the child must go, I tell them that both of us will go home. It's a risk, because my mother is at work, so who will be looking after Infant A? And he is still small. I need to breastfeed him. Sometimes it crosses my mind that he will have to leave, but then I ask God that we will go home together. It will be like I lose one arm or one leg. It is a part of me, so I will be very sad if that would happen.*

The researcher found that Participant C could not fathom that there was a possibility of her child leaving the correctional facility without her. When asked where her child would live once he turned two years old, she said,

*They will be staying with me.*

She did not acknowledge the possibility of separation.

The research found that the correctional facility does not provide counselling for mothers to prepare them for the eventual separation from their infants. The majority of participants recalled dealing with the stressful thoughts on their own in their own way, which often involved thoughts of just getting through their sentence one day at a time. The DCS, however, does have a responsibility to address the individual mental healthcare concerns of female inmates. The researcher attributed this lack of mental healthcare to insufficient medical professionals, owing to the fact that there are staff shortages in the DCS. This is found throughout the previous literature in studies done by Artz *et al.* (2012), Dixey *et al.* (2015), and Steyn and Hall (2015), which focused on the mental healthcare of female inmates. A study done by Powell *et al.* (2017) has found that, while it is acknowledged that separation is stressful and inmates require support thereafter, limited details of the



type of support and the way in which support will be implemented are lacking. Therefore, the findings can suggest an already vulnerable group in the inmate population can be left at a higher risk of mental needs if pending separation is not addressed.

#### **6.4.4 Thoughts about motherhood**

Participants were asked whether they thought they were good mothers and what their everyday thoughts on motherhood were, compared to what they are currently experiencing. Interestingly, the majority said that they were good mothers. They did not acknowledge that, due to their incarceration, they are unable to be there physically for their other children and that it has become someone else's responsibility. They also did not acknowledge the way in which their incarceration would affect their children who were with them. Similar results were found in Gilham (2012), the literature describes this way of thinking as a defence mechanism. Mothers detach their motherhood from their incarceration experience so that they do not feel guilty about their decisions. Celinska and Siegel (2010:460), Gilham (2012:96) and Anaraki and Boostani (2014:2452) found that incarcerated mothers dissociate themselves from their offender identity. Offenders would rather focus on the role of mother than the role of offender. Mothers adopt strategies, such as being a good mother and role redefinition. Therefore, focusing on the role of mother is easier to do when one is incarcerated with one's infant, as it is an adaptive strategy. This provides a sense of hope as well as the ability for mothers to view themselves as a good mother rather than a criminal.

All participants did display concern and sadness when asked about their experience of motherhood. They also described their situations as not being easy. The researcher attributed these findings to mothering situations that are not ideal, often due to intersecting disadvantages. This is in agreement with post-modern feminists in their argument of motherhood being complex by nature. For the majority of participants multiple disadvantages – their economic status, unemployment, being single mothers to multiple children, and incarceration – combine to form a mothering experience that is far from ideal.

Participant A's response on her everyday thoughts about motherhood while incarcerated and what her experience was like, was as follows,

*This experience was not nice. I don't see when the sun comes up or when it goes down. I never see rain. I would think ten times before I do something wrong, because this place is not for a woman and not for babies. They lock me up at four, then I am sad. I miss going to church, even if church comes here. I miss home so much. In court, the children aren't allowed. Sometimes the police officer must hold Infant A while I am in court. People get irritated, because they have to help me with Infant A. Then they postponed the trial date because of Infant A, because there was no one to look after him. This place it getting too much for me. I need to get up early before Infant A to bath and it is getting too much for me.*

Participant B's response when asked if she thought she was a good mother was the following,

*Of course. I know I take care of my children. They go to school and I built them a place to stay.*

When asked to compare her experience of being a mother on the outside in comparison with while in incarceration, she said,

*Outside you can do something.*

This means that there are not many decisions mothers are able to make for themselves or their infants once incarcerated. This relates to the findings under the subtheme 'decision-making' in which the autonomy of mothers and their mothering identity are severely affected because of structural constraints. She continued to say that there were rules that one had to abide by, which restricted the mothering process immensely. Everything was decided for these mothers, such as what time to nap and what time to play with their children. She continued to describe her experience as follows,

*It's not nice to stay in prison when you are a mother. You think a lot, especially when you eat, and think about my other children and wonder if they are okay and if they are hungry. They need their mother and miss me. This place gives too much time to think. Sometimes you share problems with others, but some people face serious charges. I have it better*

*than others; some people killed their own baby. I am here because I fought for my children to give them a better life.*

Participant C was the only mother to acknowledge being a bad mother – she attributed being a bad mother to her child being born in a correctional facility. Her response was the following,

*No, I am a bad mother. My baby is born in prison. It is difficult.*

When asked about her overall experience of motherhood while incarcerated, she could not answer the question; she smiled and shook her head. The researcher found her not wanting to answer the question; the researcher attributed this to being ashamed of the experience.

Participant D thought of herself as a good mother, and she thought of herself as a mother before she thought of herself as an offender. This is due to her attributing her decision to commit crime to doing what is best for her children.

*The father of my child passed away and I had no money to take care of them, so I had to steal. It wasn't the first time I committed an offence, but it was the first time I got caught.*

When asked about her experience of being a mother in a correctional facility, she responded with the following,

*It is not nice to stay in here. I am always stressed.*

Participants E and F also thought they were good mothers. They did not talk about their unlawful actions, but rather how they would make it up to their children later in life. They also did not have reasons why they thought they were good mothers. The above literature indicates this is due to the conflicting thoughts of guilt and shame, and also a coping mechanism, since it is easier to acknowledge oneself as a good mother rather than a bad one (Anaraki & Boostani, 2014:2452).

The research illuminated that the traditional notions of motherhood were not constructed for those from marginalised groups. Although each participant has her own thoughts and feelings regarding motherhood, and the 'good versus bad' mother dualism, one can

conclude that the overall experience and nature of motherhood in a correctional facility is one with multiple challenges. Feminist scholars have argued that the notion of motherhood is westernised and does not take into consideration those groups that are stigmatised by race and social class, especially those who are incarcerated (Barnes & Stringer, 2014:5; Bachman *et al.*, 2016). This creates the misconception that all women experience motherhood in the same way. It makes the assumption that one mother is better than another one, based on the notion that they mother in a different way because of different circumstances. A 'good mother', according to Western standards, is someone who stays at home to raise children and nurture their development continuously (Fouquier, 2011:146). Interestingly, the same pressure that is placed on mothers regarding the 'good versus bad' mother dualisms are not placed on men (Habecker, 2013:16; Purvis, 2013:11). This therefore has its roots in patriarchy, and these genderfocused prescripts remain largely intact in today's society. This has resulted in postmodern feminist theories having shifted their view of this traditional type of mother to one that is more complex by nature, which embraces the idea that no mother is the same (Allan, 2004:57).

The researcher is of the opinion that there is a gap in literature regarding post-separation thoughts and feelings regarding mothers and infants. Therefore, further research should be undertaken to explore post separation experiences, and the ways in which mothers cope. This would give a more holistic representation of the phenomenon.

## 6.5 THE NEEDS OF MOTHER AND INFANT

**Table 4: The needs of mother and infant**

	Correctional environment	General care of infants	Gender-specific healthcare
Participant A	<p>She states that this environment is not good for her baby. He has no toys and there is no play area for him. All he does the entire day is play with her. Every day is the same routine, nothing changes.</p> <p>She mentions that the DCS members are nice enough to play with him sometimes.</p>	<p>She reports that there are enough supplies for her baby such as nappies, clothes and purity.</p> <p>She says the food they give the baby is nice. They give carrots and other vegetables.</p>	<p>Participant A gave birth while she was incarcerated and reported that it was a terrible experience. She was not sure whether she could call for help or not. She and her baby were in hospital for only six hours because she had a normal birth.</p> <p>She reports that her baby goes for his routine check-ups to the doctor which is located just outside of the correctional centre.</p> <p>However, when her baby gets sick the nurse only gives Panado syrup and they are not allowed to get medication form outside the correctional centre.</p>
Participant B	<p>This participant says that this is a good place for her baby because they supply everything that her baby needs. She says that while there is a small play area with a jungle gym her baby is too small to use it.</p>	<p>There are enough supplies but her husband also brings extra clothes for the baby.</p>	<p>Participant B did not know she was pregnant when she was incarcerated. The doctors had informed her she was two months pregnant. They provided her with check-ups and prenatal vitamins.</p>
	<p>She reports that the DCS members treat and speak to her well.</p>		<p>She gave birth while incarcerated but it was a difficult birth. Two months later, she is still in pain and remains in bed at the centre. The other inmates help her with her baby because she cannot stand for long. The nurse is aware she is in a lot of pain but she is given Panado.</p>

Participant C	<p>She reports that this environment is not healthy for her baby. He gets scared of cars and when he sees males. He is only familiar with the people around him and the things around him, anything other than that scares him.</p> <p>She reported that she has learnt that there are a lot of different people you come into contact with in the centre. Some are her friends and others not. She mentioned the DCS members love our babies and you can trust them. Some inmates can't be trusted.</p>	<p>This mother reports that while they are provided with nappies they are reliant on donations. If no donations come in sometimes there isn't enough.</p>	<p>Participant C reports that she gave birth while incarcerated. She only stayed in hospital for a day after giving birth because there were no complications. She went for regular check-ups but the pain medication was not strong enough.</p> <p>Her baby came with her to the centre the day after giving birth.</p>
Participant D	<p>This mother reports that it is not nice for her baby. He gets sick all the time and cries throughout the entire night, she thinks it is because he is cold. She sometimes does not know what to do and it gets very difficult for her.</p> <p>The DCS members treat them well on the side that they are on (Mother-and-Child Care Units) and she has nothing to complain about.</p>	<p>She reports that it is cold and there are not enough blankets. Sometimes she needs more nappies. She waits for her husband to visit to bring pampers because it gets hard to wash the cloth nappies in winter.</p>	<p>Participant D did not give birth while incarcerated. She says that when she is sick she gets Panado. Sometimes she doesn't tell the officers she is sick because she knows it doesn't make a difference.</p>
Participant E	<p>This mother reports that it is too cold for her baby. Sometimes the other inmates and DCS members play with her</p>	<p>This mother reports that there is a need for more blankets in winter. She said a heater would be nice. They give her baby</p>	<p>Participant E did not give birth while incarcerated. Her baby was 3 months old when he came to the centre.</p> <p>She says when she gets sick she is able to see a doctor.</p>
	<p>baby and it gives her a break.</p>	<p>warm clothes but she is very cold at night.</p>	

Participant F	This mother reports that the centre supplies everything for her baby. She said she is in the correctional centre because of her mistakes therefore she feels she cannot complain about the conditions.	She says she cannot complain she is an inmate therefore she takes what they give her. She will not complain about it. Her baby is fed and that is what is important.	Participants F did not give birth while incarcerated.
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### 6.5.1 The correctional environment

According to Louw, Van Ede and Louw (in Schoeman and Basson, 2009:14), infants' environments play a significant role in their social, cognitive and psychological development. This is strongly influenced by the environment in which they grow up in. Certain skills should be acquired during this vital stage of development, and these skills are acquired through the interaction with their environment. The correctional environment can hinder bonding between infant and mother as it does not foster feelings of safety and security. These feelings are aspects that are necessary for an infant and mother to form a lasting relationship (Byrne *et al.*, 2010:150; Eloff & Moen, 2001:717; Gowland, 2011:39).

It was found that the majority of participants did not appreciate that their infant was residing in a correctional environment. They thought the routines were too rigid and that their infants were not exposed to multiple aspects of 'normal' everyday occurrences such as cars, grass, toys and the opposite sex (males). All participants acknowledged that a correctional centre was not an environment that is developmentally conducive to an infant's well-being.

When Participant A was asked about the daily routine of her and her child, her response was the following,

*I wake up at five o'clock in the morning, fix my bed and bathe myself and Infant A. At 7:00 we must be ready, because all of us need to be counted. From eight o'clock we parade and eat; after that we go back to the cells. I sometimes sleep during this time. At two o'clock we eat lunch. He's with me all the time. There are no toys or anything for him to play with. There is no play area also.*

It was observed by the researcher that this particular correctional facility did not have a play area for the infants and there were no toys for the babies to play with. There was

only a television set in the mother-and-baby unit. It was clear that the mothers and babies followed the same routine every day and there was no variation. There was no grass or stimulating objects that infants could interact with. The only interaction was with their mothers, the DCS members and other inmates.

Atwool (in Schoeman & Basson, 2009:22) contends that in terms of forming an attachment and bond to one's infant in a correctional facility the emphasis should be placed on the quality of interaction rather than the quantity. The attachment between mother and child develops gradually with time. Therefore, this finding, while preliminary, suggests that the correctional facility environment does not foster a quality environment that offers a variety of experiences and interactions. Thus, the interaction between mother and child is strained. This limits the opportunities for exploration for the infant, and impacts on a 'normal' community environment.

Participant C described her routine as follows,

*In the morning I would wake up, go to the kitchen to get food for my child and feed him. I would bath him, read to him and play with him. I wake up at 4am. Parade is at six. They switch lights out at ten at night.*

The researcher observed that at this particular correctional facility there was a play area with grass and swings, and a colourfully painted jungle gym. However, many of the infants were physically too small to engage with this play area on their own. The researcher is of the opinion that more age-appropriate facilities and toys are needed for infants in both the correctional facilities.

Schoeman (2011:84) argues that infants who accompany their mothers are deprived of exposure to male figures and while the units attempt to create a normal environment, infants have limited exposure to everyday activities and the normal outside world. These findings were confirmed by the majority of the mothers when asked if they thought this was a healthy developmental environment for their infants.

Participant C said the following regarding whether she thought this was a healthy developmental environment for an infant,



*No, he is scared of things like cars or males, because he doesn't see any of those things. I am not feeling good to stay here with my baby. It is cold here and it's not right for the baby.*

Participant D said her infant interacts with male correctional officials occasionally, but other than that he was scared of most people. She had similar sentiments about the correctional environment for her baby,

*No. It is cold here – he gets sick and cries at night.*

Schoeman and Basson (2006:5) and Sloth-Nielson (2005:8) contribute the above to correctional facilities not initially being built with the intention to house infants, which is the reason for the multiple challenges faced by the DCS to ensure an environment conducive to mothering. Therefore, the research found that, while both correctional facilities subscribe to the policy regarding mothers and infants being separated from the general inmate population and residing in a Mother-and-Child Care Unit, the units are still severely lacking in fundamental necessities that an infant of a prime developmental age should be exposed to. There is also a discrepancy between the two correctional facilities in terms of what is available for infants. The reason for this is not clear but it may have something to do with financial resources. As one participant mentioned, mothers relied on donations for many necessities. Feminist criminologists would attribute this to the neglect of the smaller inmate populations. It can thus be suggested that, because mothers and infants are arguably one of the smallest inmate populations, their needs are often over-shadowed by the needs of larger inmate populations.

### **6.5.2 General care of infants**

Correctional facilities are responsible for all the needs of infants while under their care. These include toiletries, nappies, food and clothing. The environment of the Mother-and-Child Care Units are also meant to create an environment that is nurturing and stimulating. In previous literature, it was found that women's correctional facilities did not have sufficient space for mothers and infants, and that the space was too confined. Mothers and infants would be required to share a single cell, and the routines of infants and mothers were the same as the general inmate population (Hesselink & Dastile, 2010:73;

Schoeman & Basson, 2009:9). However, what the research found here differs from that which was found in the previous studies. All participants reported enough space in the Mother-and-Child Care Units, with each having her own bed that is situated next to a cot for her infant. The difference in findings is due to the policy implemented in 2011; therefore, since then mothers and infants should be housed separately from the general inmate population in their own mother-baby-unit. Therefore the research can conclude that policy is being adhered to in the following respect. As stated above, the similarity between this study and previous studies is that mothers and infants follow the same routine as the general inmate population.

All participants responded positively when asked whether they thought the needs of their infants were being taken care of in the best possible way. They reported that toiletries, clothes and nappies were given to them. They did report that the facility relied heavily on donations and infants got new clothes or disposable napkins (diapers) when donations came in; if not, mothers were required to use cloth napkins. They also reported that the infants were given enough fresh food. The DCS also provides specific baby food (Purity), but if infants are able to eat solid foods, they are given steamed vegetables. The researcher attributed these findings to the background of the participants. As stated previously, all participants come from poverty-stricken backgrounds in which concern about hunger is an issue. Therefore, since infants are given food daily and hunger is not a concern, mothers would be satisfied with what the DCS has to offer. These results therefore need to be interpreted with caution.

Participants were asked to explain their experience of the DCS officers, and their treatment by the officials. The majority of participants reported that they were treated well and the officials took time to play with the babies. Participant A responded as follows,

*I don't have complaints about them, because they do not do anything wrong. They treat me well and speak to me in a good way. Sometimes they give me sugar, bread or milk when I ask them. They treat my baby nice also. Sometimes they play with him or sit with him.*

Participant C had mixed responses to her treatment and her experience with the correctional officers. However, interestingly enough, Participant C mentioned that mothers received more support,

*I experience different people in here and they do things differently. Today is nice and the next day will not be so nice. At least mothers get more support; they treat us well, they love our children.*

The research found that generally infants and mothers are well taken care of in terms of their treatment from DCS members. This outcome is contrary to that of Agboola (2014) and the JICS (2016) that found that female inmates were not treated with dignity and respect, and were often subjected to abuse. This inconsistency may be due to the sample population, since the previous sample consisted of female inmates without infants. The research can suggest that mothers and infants are perhaps treated better than the general female inmate population. Therefore, having infants reside with their mothers can be viewed as an advantage, given how one is then treated in a correctional facility. This finding, however, cannot be generalised to the rest of this inmate population due to the qualitative nature of the study. There is also currently a lack of research focusing on mothers in correctional facilities and therefore a comparison among multiple correctional facilities is unable to be made.

### **6.5.3 Gender-specific healthcare**

According to the literature, South African female correctional facilities are riddled with challenges regarding gender-specific healthcare. Most of the time a lack of qualified personnel and a general shortage of staff contribute to these challenges (Dixey *et al.*, 2015:97). The White Paper on Corrections has detailed guidelines on the treatment that pregnant inmates should receive as well as post-natal treatment and care of mothers and infants. Various international guides, such as the CPT focus on the general healthcare of female inmates, especially those who are pregnant.

The research found that three out of the six participants gave birth while incarcerated. All three participants recounted difficult experiences; however, their medical treatment was up to standard in their opinion and they were not shackled during birth, which is in line

with CPT recommendations (see 1.4.1). The other three mothers gave birth prior to incarceration and they were later reunited with their infants. Participants were asked to describe their experience of giving birth while in a correctional facility as well as the general healthcare of infants and mothers. Participant A described her experience as follows,

*It was a terrible experience. I got the pain and didn't know if I can shout so I kept quiet. When the baby was almost here, then the sister came to help me. From there they took me to hospital. I was in a lot of pain. I was praying to God that He would keep my baby safe and keep me safe also. I was in hospital for only for six hours (after giving birth), because I gave normal birth. If you have a caesarean or the baby is premature they keep you in hospital for longer, but I gave a normal birth.*

Participant A explained she would have liked to stay in hospital for longer after giving birth since she was in a great deal of pain, but she did not have a choice. Six hours after giving birth, she and the baby were transported back to the correctional facility. She explained she was given all the necessary postnatal medication, and that she and her son went for regular check-ups. A concern that she did have was that, when her baby was not well, there was only a nurse on call and she was only able to give her baby Panado syrup (mild pain medication) as no other medication was allowed.

Participant B also gave birth while in the correctional facility. She found out she was two months pregnant when she was sentenced. She described her experience in the following way,

*It was difficult, when I was pregnant. You need things to eat that we can't get in prison. They admitted me for a few days. They induced me and I gave birth. The day after that I came back to prison. Yes, they give (medication), but if they don't have, they get by the clinic. There was something wrong with my womb and they take me to see the doctor. I was there yesterday to see the doctor also. I was sick while I was pregnant. There were complications and I think it was because of stress.*

Participant C gave birth while in a different correctional facility to Participants A and B, but her experience was similar to that of Participants A and B. Therefore, the standard of care at both correctional facilities are similar – one is not necessarily better or worse than the

other. This would be expected as there should be the same standard of care throughout the country; however, it must be noted that both of the correctional facilities fall under the same region. Her response when asked about her experience was as follows,

*When you in prison, you don't always get what you want while you pregnant. They take you to hospital and then after they bring me back to prison after giving birth. They give me ten days, then I go back to following the daily routine. I was a day in hospital. There weren't any complications, so I didn't stay long in hospital. If there were complications they keep you in hospital for longer. If you not feeling right they take you to the doctor and take you for check-ups.*

Generally, all participants reported that their healthcare needs were taken care of, although there was no doctor on site and medication was limited. If participants had serious health concerns, they would be taken to a hospital. One concern expressed by all the participants is that both the infants and the mothers are only given Panado syrup when they are ill or in pain. No other medication is given to them and medication from visitors is not permitted. In relation to previous studies in Africa regarding healthcare it can be said that South Africa is in a better position. While there are challenges, it is not as great as in the rest of Africa. The findings in this study are in contrast to those of Agboola (2016) that found that inmates would go unattended for months before receiving medical attention. However, it is important to note the difference in the sample population between this study and that of Agboola, which focused on the general female inmate population.

## 6.6 CONDITIONS OF CORRECTIONAL FACILITIES

**Table 5: Conditions of correctional facilities**

	<b>Overcrowding</b>	<b>Hygiene</b>	<b>Diet</b>
Participant A	She confirmed that in the Mother-and-Child Care Unit section it is not overcrowded. There are two mothers, one and one pregnant inmate. There are seven beds in this centre.	<p>She says where they are in the Mother-and-Child Care Unit it is clean. They give them disinfectant to clean the bathroom and toilet.</p> <p>She mentioned that there had been no hot water for three days because the geyser is broken. Currently they are using a kettle from the staff kitchen to make water hot to bath.</p>	The food is alright, but it doesn't taste nice. They eat a lot of cabbage, carrots, beetroot, chicken, pork and stew. Sometimes the correctional officials give her extra food when there is left overs. They also bring her sugar and milk for the baby and her.
Participant B	There is enough space at the moment. The beds are very close together but because there is only two of them right now there is space.	People come and clean often, the mothers also keep everything neat and clean. The facility provides them with soap to wash the baby clothes.	Participant B says they eat a lot of stamp. She is from Zimbabwe and they do not eat this there, therefore it took her a long time to get accustomed to it. She still does not enjoy it and they give it to the inmates very often.
Participant C	Participant C says that it is too crowded. She says a lot of inmates are on their half sentence but the parole board takes very long that is why the centre is overcrowded.	She say they are provided with disinfectant to clean the bathroom and kitchen. Sometimes some mothers are not clean and leave bread lying around. This causes ants to come.	Participant C complained that the food is not nice and she does not eat stamp. She also does not get the boiled eggs. Sometimes the food smells rotten and then she does not eat it.
Participant D	Participant D agrees that the facility is overcrowded and there is not enough space. She has to wake up very early in the morning to bath herself and her baby and to make it on time for the parade.	Most of the time it is clean. If it is not clean then we must clean it. There are sinks here with water and soap that they use.	Participant D does not eat pork. She does not like the taste of the food. Sometimes she gets diarrhoea from the food but she doesn't complain. She can't complain because

			there is no point in complaining.
Participant E	The centre is very overcrowded. She knows of inmates where they have completed their sentence but they are still in the correctional centre.	She does not think it is clean enough. It gets dirty quickly because the mothers walk in and out.	The food is really not nice. She often gets sick from the food because she has a sensitive stomach. There are times where she doesn't eat.
Participant F	The centre is overcrowded; there are too many women all the time. There isn't enough space for everyone and sometimes it gets worse than this.	The centre is clean but mothers drop food when they are feeding their babies. If they don't pick up the food cockroaches come out for the food.	The food is not nice but she does not want to complain. She says she came here to finish her sentence; there is nothing she can do about the food. Sometimes she eats it depending on what it is, sometime she just eats bread.

#### **6.6.1 Overcrowding, hygiene and diet**

In this section overcrowding, hygiene and diet will be discussed together as participants were asked about their general experience of the conditions in the respective correctional centres pertaining to these three aspects. These three aspects often overlap and influence one another.

As seen in previous literature (Artz *et al.*, 2012:54; Eloff & Moen, 2003:717; Finkel; 2011:225) many women in the criminal justice system are often neglected and ignored regarding their specific needs as well as the conditions in which they are forced to live in. Complaints of limited healthcare, overcrowding and poor hygiene have been found especially on the African continent. Female offenders often face multiple challenges in correctional facilities, most of which often stem from overcrowding. Women are forced to share very small spaces, which have an impact on their privacy. Due to the small living space and close physical proximity, infectious diseases are spread from inmate to inmate more easily. Female inmates in South Africa are often given poor-quality food, which often also results in illness (Fontebo, 2013:67; Gowland, 2011:38; The Gender Health and Justice Research Unit, 2012:5).

All participants were asked to share their experiences regarding the conditions of the correctional facility they found themselves in. These questions were focused on the physical space they shared, hygiene, and the quality of the food. This research found that, in contrast to much of the South African literature, mothers in correctional facilities are not an overcrowded inmate population in comparison to the general female inmate population. The majority of participants did not express dissatisfaction about the physical space they shared with their infant, and there was enough space for the two to reside in comfort. The Mother-and-Child Care Units were equipped with a kitchen and bathroom, and one even had a lounge area. All participants did, however complain about the cold; they reported that they were not warm enough and required more blankets and a heater for the severely cold space in winter. Participants mentioned that illnesses were often a result of the cold conditions. Violence in both correctional facilities was not recorded, this was attributed to the correctional facility not being overcrowded and the absence of prison gangs. Therefore mothers and infants had sufficient space and inmates had some level of privacy.

Participant A reported that the correctional facility had not had hot water for three days because the geyser was broken. Participant A reported the following experience,

*No, it is not good for Infant A; it is very cold here, even the food we eat is not nice and he gets sick.*

Participant C had similar sentiments and said the following,

*It is cold here, he gets sick and cries at night.*

The research found that the majority of participants did not enjoy the food that they received. Many participants did not eat the food they were given and chose not to eat at all. This finding broadly supports the work of other studies done by the JICS (2016), Fontebo (2013) and Agboola (2016). All these studies found that the food in female correctional centres was of an appalling nature. The research found that food had a ripple effect in correctional facilities. As it is often not prepared well, it leads to illnesses that impact on the healthcare of the inmates. When asked if the food was ever spoilt, one participant agreed that it had been. Participant E reported the following,



*It is not nice. I get a running stomach or I throw up. It is really not nice food.*

Regarding hygiene, the majority of participants agreed that the facility was kept clean. Complaints of other inmates not keeping living spaces tidy was mentioned as it can sometimes strain relationships between inmates. It was noted that the DCS provides mothers with disinfectant to clean the Mother-and-Child Care Units, and they are responsible for the majority of the cleanliness. Overall, the Mother-and-Child Care Units were well maintained. Respondents mentioned they were also provided soap to wash the infants' clothes with. The negative experiences all centred on the food they were given and the cold temperature of the units.

The researcher attributed the fairly good conditions to the small number of mothers and babies in the units at the time, as well as their separation from the general inmate population. Interestingly, the food is the only common factor between mothers and the general inmate population in these correctional facilities. Therefore, the researcher is of the opinion that because the food is prepared in large quantities, the result is poor quality food. Furthermore, the research can conclude that the findings pertaining to correctional conditions – excluding the condition of food – are different to those of the studies of JICS (2016), Fontebo (2013) and Agboola (2016). Once again, this can be attributed to the sample population of the previous studies in comparison to this sample population. The similarities between all the studies are the findings pertaining to the quality of the food.

## 6.7 MOTHERHOOD AND RECIDIVISM

**Table 6: Recidivism**

	Treatment programmes	Motherhood as a deterrent to future offending
Participant A	Participant A cannot attend any programmes because she is still on trial. Only sentenced offenders are permitted to attend rehabilitation programmes. She only attends church. She gets bored because she has been in the facility for 11 months.	<p>This experience has completely changed her. She needs to think and act like a mother. A correctional facility is a horrible place to be and she never wants to come here again.</p> <p>She has asked God to help her think like a mother. When she gets out of the centre, she will make her second chance count.</p> <p>She reports that the first thing she wants to do is look for a job because then she won't get herself into trouble. The people in the community get into fights because they are bored. If she finds a job she can look after her children and her mother. She will not be bored if she gets a job</p>
Participant B	She reported that she attended some programmes but because she was pregnant for most of her sentence she was unwell therefore there were a lot of sessions she did not attend.	<p>Participant B admitted that she is only a little changed. She says her situation is still the same. She still has to provide for her children and if that means she has to steal again that is what she will have to do. She has to send her children to school and sometimes the only way to do that is to steal. She knows it is wrong and a crime but she goes to church and asks for forgiveness.</p> <p>She reported that wants to find a job but she knows it is hard. She has to do what she can for her children. She left Zimbabwe because there are no jobs there and now there are no jobs here.</p>
Participant C	Participant C enjoys going to as many programmes as she can. She attends Bible study, economics and new beginnings. She always feels better after she attends something because it makes her feel good. When she leaves she knows she will be a	Participant C said now she knows if she wants something she must get a job. The correctional centre is not a nice place to be there is too much time to think. She is changed and will not commit crime again. She reported that when she gets out she wants her children to bond because her oldest children have not met the child that

	<p>better mum because of these programmes.</p> <p>The economics programme has taught her how to sell fruit and vegetables.</p>	<p>is with her. She will put them in a crèche and she will find a job</p>
Participant D	<p>Participant D was not able to take part in any programmes because her sentence is short term. She wishes she could go because she gets very bored.</p>	<p>Participant D said she hates the correctional centre. It has changed her a lot, she is always stressed here but on the outside she can be happy.</p> <p>She reported that the premier came and visited the mothers in this centre and promised her a job. When she gets out she will have a job and change her life.</p>
Participant E	<p>Participant E does Bible study, she has already completed the new beginnings programme and her certificate is next to her bed. She is very proud of completing the course.</p>	<p>Participant E says she will not commit crime again. She will think very carefully before she does anything because she does not want to come back to the correctional facility. When she sleeps at night she thinks of what jobs she can do when she is out because crime is not an option anymore.</p> <p>She wants to use the economics programme that she completed and be an entrepreneur and sell fruits and vegetables. She wants to be able to look after her children.</p>
Participant F	<p>Participant F is not sentenced as yet therefore she is only allowed to attend church even though she has already been there for 7 months.</p>	<p>Participant F says she has learnt a lot in the correctional centre about different situations and what can get her into trouble. Even when she thinks she is not in the wrong in future she will have to think about her actions and her children. The first thing she plans to do when she gets out is to tell her children about her experience and how horrible it is. Teach them about the things that can get them in trouble. She wants them to fear being incarcerated and teach them never to commit crime.</p>

### 6.7.1 Treatment programmes

According to much of the feminist criminology literature, treatment programmes were initially drawn up with the needs of male offenders in mind. Therefore, many of these programmes are merely adapted for female inmates without specialised gender concerns being met. Baradon *et al.* (2008:361) are of the opinion that specialised treatment programmes are required for mothers in correctional facilities to ensure the psychological wellbeing of mother and child, and that these programmes should be completely different from those of male inmates. However, due to staff shortages in multiple areas of the DCS, many specialised programmes are often unable to be implemented in female correctional facilities. According to the Department of Correctional Services Strategic Plan 2013–2017, rehabilitation in South Africa should comprise the following: “Correctional programs, offender development, and psychological, social and spiritual services. These subprograms provide educational and skills programmes, correctional sentence programmes, and psychological, social work and spiritual services. (Department of Correctional Services Strategic Plan, 2013-2017:17)

The research found that two out of the six participants took part in rehabilitative and treatment programmes. This was due to two mothers being on trial – inmates who are on trial are not permitted to take part in treatment programmes until sentenced. When Participant A was asked whether she thought this should be the case, she strongly opposed it. She explained that even though she was on trial, she had been so for eleven months. In this time, she would have been able to complete or at least take part in a programme. Participants B and E were sentenced, but they did not take part in any treatment programmes, as they were told their sentences were too short. These participants displayed enthusiasm to participate in programmes, but could not do so. The research found that there are no mother and infant programmes or classes specifically designed to address challenges experienced by these inmates, or focused on developing mothering skills. As mentioned, the DCS also does not prepare mothers for the eventual separation from infants through any programmes. Therefore, the researcher is of the opinion that a specialised programme is needed to address this pending trauma.

Programmes to address infants' developmental needs should also be considered, an important issue for future research. Although it was mentioned earlier that the DCS in collaboration with the Department of Basic Education offers mothers early childhood development programmes, all participants in this study were not taking part in these programmes.

When Participant C was asked about her experience regarding the programmes she attended, she said,

*I go to Bible study, economic crime and new beginning. There are only programmes for me and not the baby. Yes, I do attend that programme (specifically for mothers). I enjoy it every day. After attending it I always feel better.*

Participant E had already completed two rehabilitative programmes, which she said she enjoyed very much, and was currently attending Bible study. However, because she had completed most of her programmes, she was now bored. Bible study was the only programme anyone could attend all the time; the other treatment programmes have specific timeframes.

Therefore, the research found that, regarding treatment programmes, all participants would have liked the opportunity to be involved in some sort of programme. Short-term sentenced respondents expressed their need to feel a part of something that could make a difference in their lives. The researcher is of the opinion that treatment programmes should cater for the individual and should include short-term sentenced offenders. However, this can only be done once all programmes are consistently offered at all correctional centres. Artz *et al.* (2012:59) have found that the challenge facing treatment programmes is a lack of implementation.

### **6.7.2 Motherhood as a deterrent to crime**

Mothers who reside with their infants during incarceration are considered less likely to repeat the criminal behaviour once released. The period spent with their infant provides an opportunity to reflect on past decisions and actions. The hope of being later reunited with a child influences good behaviour and reduces the chances of recidivism (Conova, 2006:2; Anaraki & Boostani, 2014:2423). Celinska and Siegel (2010:460) have found that

mothers use this as a means of self-transformation; motherhood is viewed as a motive to change. Hoffman, Byrd and Kightlinger (in Gowland, 2011:44) have found that mothers who participate in treatment programmes that teach offenders parenting while incarcerated, reduces recidivism because offenders are equipped with the tools to focus on motherhood.

Participants were asked whether the experience of motherhood in a correctional facility has changed them and their outlook on crime after this experience.

Participant A reported that the experience has changed her, because she felt she had not made decisions as a mother, but rather as an individual prior to incarceration. The experience taught her she was also responsible for her children and not only herself. She explained the following,

*It's not nice inside here. I ask myself how I got in this place. I am smiling outside, but inside I don't want to be here. It's easy to come in here, but difficult to get out. You must always go with the flow. It has changed me a lot. I told myself that when I get out I need to think like a mother and act like a mother. My first priority is my children. If I want to do something I will always think of this year in prison and that is wasn't nice. I asked God to help me think like mother. I need to look for a job and keep me busy. Being here taught me so much, not gossip about others, treat everyone with respect even smile often. Greet people and be nice to each other. I never want to come back here. I will always avoid trouble. I want to look for a job to keep myself busy. I must have plans for my future and for my children's future. I will job hunt until I find a job. I will be a good mother for my children.*

Participant B was asked whether she thought she would commit crime again or whether this situation had taught her acting unlawful was not worth the consequences of incarceration. She was the only participant who admitted she would commit crime again if her situation of poverty continued once she was released. Her response differed from the literature regarding motherhood and incarceration as being transformative and a deterrent to crime (Conova, 2006:2). However, her response correlated with literature found as regards intersectionality and the general strain theory, which postulates that strain is often gendered and the way women react to strain can influence their pathways to criminality. She said,

*It changed me, but the situation is still the same. I don't want to lie. Of course, I would (commit crime again), because I want to help my kids. It helps me. I know it's a crime but there is nothing else I can do. If I manage to get a job, I will stop with this. I would go back to Zimbabwe, because there I have a place to stay. I hope and pray that everything works out for me.*

Participant C reported that her experience of a correctional facility was terrible and that she would never want to be in a situation again where she could come back. When asked whether she thought she had changed, she reported the following,

*I've changed too much. I know now that if I want something I need to get a job and money to buy what I want. I won't commit crime again. It is not nice to be in here. What about my child outside of prison? I must take care of him as well. I learn through my mistakes. I have matric and I studied accounting also. I want a job now.*

Participant D, E and F had similar sentiments.

*Yes, it changed me so much. It is not nice to stay in here. I am always stressed. I will find a job. I will be happy. The premier was here and she said she will help me with a job.*

*I don't know what to say. I won't do it again. Prison is not nice, it changed me. I wouldn't commit any other crime again. I will look for a job. Or I will buy something to start my paving business.*

*I changed a lot. I learned so much since I came here. I learned about things that can get me in trouble and to rather stay away from such situations.*

Participant F was the only participant that did not mention wanting to find employment once she left the correctional facility. The experience of incarceration had made her fearful that her children might make the same mistakes; therefore, she responded to her future plans in the following way,

*The first thing is that I would call my children together and tell them about the experience I had in prison. I would teach them to have respect and that they must always do the right thing and fear to come to prison.*

All participants had hopes for the future, despite the current situation they found themselves in. The majority of the participants found hope in being reunited with their children. All participants mentioned that they would like to make up for lost time by being better mothers. Therefore, given the above quotes, it is clear that the majority of offenders viewed themselves as changed and rehabilitated. Most participants said they would not want to be in this situation again and that this particular experience of motherhood had deterred them from crime in the future. This correlates with findings in Gowland (2011) where inmates in KwaZulu-Natal also reiterated that, due to the experience of being a mother in a correctional facility, they would not commit crime again. It is important to note Participant B did not share the same feelings as the rest of the participants. She acknowledged that when she was released her circumstances would not have changed; therefore, her children would still be without food if she did not provide for them through illegal means. These sentiments can be linked to the above literature in which multiple disadvantages often cause women to engage in crime as a means of survival (see 5.4). This participant also did not attend any treatment programmes due to her short sentence. Therefore, one is unable to evaluate whether a treatment programme would have given her the tools to deter her from criminal activities.

## **6.8 CONCLUSION**

This chapter comprised a detailed description of the collected data and a discussion of the findings of the study. The findings were related to theory and literature, where applicable, and an account of the individual lived experiences of the participants was recorded and observed. The final chapter will include the conclusions and the recommendations that will be based on the findings described in this chapter.



## **CHAPTER 7 RECOMMENDATIONS AND CONCLUSION**

As a result of the exploratory analysis of the factors associated with the lived experiences of motherhood in the previous chapter, it is now possible to ascertain whether the aims of the study (see 1.7) have been realised. Since there is a dearth of research focusing on the experiences of incarcerated mothers residing with their infants in South Africa, the data produced present a foundation for future research.

### **7.1 CONCLUSIONS PERTAINING TO THE AIMS AND KEY THEMES OF THE STUDY**

Below is a summary of the key themes that emerged from the data, which will be discussed in conjunction with the aims of the study (see 1.7).

#### **7.1.1 Theme 1: The nature of motherhood in a correctional facility**

The first aim of the study was to gain a better understanding of motherhood within a correctional facility, as well as how mothers and infants interact in this specific environment. In the previous chapter, a detailed discussion focusing on various factors such as decision-making, family factors, the pending separation of mother and infant and general thoughts and feelings regarding motherhood within a correctional facility emerged. The exploration and discussion of these factors in the previous chapter painted a vivid picture of the nature of motherhood within a correctional facility, providing a better understanding of the everyday experience. In addition, the empirical findings of the study discussed in the previous chapter and the literature reviewed confirm that separation from children and family is one of the most traumatic aspects of maternal incarceration. Other aspects such as intrusive thoughts about family were also found to be traumatic, as these thoughts were prominent in the everyday experience of incarceration. Mothers have to cope with many stressful thoughts and emotions, which include coming to terms with the reason for their incarceration. This concurs with the research of Muftić *et al.* (2015:95) and Powell *et al.* (2017:284). The study found that offenders are more likely to be from lower socio-economic backgrounds. Often they are also the primary source of income for the family prior to incarceration. Furthermore, economic offences such as shoplifting and theft are the most common causes of incarceration among the participants. Therefore, it

is suggested that when mothers are incarcerated it has a far-reaching impact on the family structure. Once maternal incarceration occurs, much of the family responsibility is transferred to the maternal grandmother. This finding provides support for similarly held views by Lunga (2009:28). Thus, motherhood is often not only confined to the correctional facility, but the mothers are still largely concerned with the well-being of children outside the facility. The study has found that, although mothers admitted to an incarcerated facility is not ideal for their infants, possibly hampering their development due to a lack of stimuli conducive to the development of an infant, they are nevertheless eager to have their infants with them. The infants' presence make the day-to-day incarceration experience easier to handle. However, it was found that mother-child interaction is strenuous at times due to the rigid environment and the lack of the mothers' autonomy. Mothers confirmed that the experience of incarceration as a whole is psychologically and emotionally depriving, due the pain of being absent from other children and their families. One is never able to adjust fully to incarceration. Therefore, being able to mother physically while incarcerated often enables mothers to cope better with the overall incarceration experience, as this provides a sense of purpose to their lives. On the other hand, the eventual separation and painful feelings also accompany the experience of motherhood while incarcerated.

Considering the combination of variables presented above, it can be said that there is no single ideal scenario for incarcerated mothers. In addition, the experience and nature of motherhood within a correctional facility can often be challenging in a number of ways. Therefore, it is suggested that the DCS provides the necessary support to mothers, especially in preparation for the imminent separation between mother and infant.

### **7.1.2 Theme 2: Needs of infant and mother**

Through this theme the study found that factors such as the correctional environment, the general care of infants and gender-specific healthcare contributed towards the way mothers viewed their needs being taken care of or not and the experience of this care. The theme of the needs of infant and mother is related to the aim of exploring whether or not the Mother-and-Child Care Units are conducive to the needs of both mother and infant. The study found that the mothers expressed concerns over the developmental care and

needs of their infants. The correctional environment was found to be rigid and did not expose infants to the many aspects that a 'normal' two-year-old would be exposed to, such as male figures, grass, open spaces and recreational facilities. Mothers were unsure whether their infants would be able to adapt to their environment once they left the correctional facility and many mothers feared the possible consequences. Therefore, while the DCS aims to provide a 'normal' environment, more steps should be taken to expose infants to more stimuli specific to their developmental needs. The expertise of an occupational therapist would therefore be suggested to ensure that infants develop at a 'normal' pace. This would also assist mothers in ensuring they provide the necessary emotional support to infants while they are together. Numerous studies have found that the first 1 000 days of life (conception to two years of age) is crucial to the development of the brain. Malnutrition, the lack of stimuli and sincere affection can contribute to the stunting of the brain, which can often not be reversed later on in life (Belfort *et al.*, 2016; Christian *et al.*, 2015). Regarding basic needs such as food and clothing, it was found that the DCS provides what is stipulated by policy and that it is the responsibility of the mother to provide extras, if required. Mothers were pleased with the quality of the food their infants were given, and infants who did not eat solid foods were given Purity (pre-packaged baby food). However, further studies would have to determine whether the solid food given to infants in correctional facilities is of the recommended nutritional value for healthy brain development. Mothers also expressed their gratitude when communicating about the interaction of DCS members and their babies and the adequate care they provide towards them. This made mothers feel as if they were not alone while raising their infants and some support system was present.

The study found that in terms of gender-specific healthcare, the inmates were pleased with their standard of care and although medication for mother and infant was generally in short supply, their healthcare needs were attended to when the need arose. Mothers were also well taken care of prior to giving birth. They were provided with the necessary prenatal vitamins, as well as sent for regular check-ups to a nearby hospital. However, participants who gave birth while incarcerated articulated that the experience was not pleasant and they would have liked to stay in hospital for a longer period as a precautionary measure due to immense pain experienced. One mother was still

experiencing severe pain two months after giving birth and was unable to walk comfortably, despite the medical doctor giving permission for her to be placed back in the correctional facility. The study found that participants were given enough supplies such as sanitary towels, toothpaste and soap and there was never a need to use alternatives to sanitary towels, as found in previous studies done by Fontebo (2013:67) and The Gender Health and Justice Research Unit (2012:5).

### **7.1.3 Theme 3: Conditions of correctional facilities**

Theme 3 also addressed the second aim of exploring conduciveness of the units, and conditions of the correctional facilities were explored. Factors influencing conduciveness such as possible overcrowding of the correctional facility, hygiene and diet emerged from the data. These findings differ from previous studies pertaining to overcrowding and hygiene. While other South African studies such as by Agboola (2014) Fontebo (2013) and Gowland (2011) have found that female correctional facilities are in an unacceptable state regarding these two factors, this study has found that overcrowding was not an issue at the time; however, the number of inmates did fluctuate. Hygiene was of a satisfactory standard, according to the participants of the study. Mothers reported that their bathrooms and living spaces were kept clean and neat and most inmates kept to a habit of cleaning up after themselves and their infants. Their experiences were mostly pleasant regarding hygiene and they were given sufficient toiletries to wash their clothes and to ensure the upkeep of their living space.

Previous studies by the JICS (2016:50) and the Human Rights Watch Prison Project (2005:4) have found that overcrowded and unclean correctional facilities could contribute to sickness and disease, while the morale of inmates as well as correctional staff is influenced negatively by these conditions. The two specific correctional facilities investigated in the research, however, were found to be in good condition and well taken care of. These findings were attributed to the Mother-and-Child Care Units being separated from the rest of the general inmate population and, due to their smaller numbers, overcrowding was not a concern; therefore, conditions of hygiene was more manageable.

However, the study corroborated the findings of Agboola (2016), Fontebo (2013) and JICS (2016) with regard to the diet of the mother. Much like these previous studies, this study corroborates the findings where the condition of the food provided to inmates was of a dissatisfactory nature, often even inedible and unpalatable. Participants felt that care and thought did not go into their diet and dry bread would sometimes be provided for lunch. Many participants chose not to eat when the food was dissatisfactory. It is vital to keep in mind that this was the same food provided throughout the correctional facility; therefore, produced in large quantities at a time. The researcher is of the opinion that it is due to large numbers that certain aspects of a correctional facility such as diet become challenging to manage. Nevertheless, the Mother-and-Child Care Units are easier to manage because of the smaller numbers, compared to the general inmate population. Therefore, one can deduce that although overcrowding is not an issue in the Mother-and-Child Care Units, it is an issue in the remainder of the correctional facility and this challenge of diet, being the only overlapping factor, becomes an issue in the Mother-and-Child Care Units.

#### **7.1.4 Theme 4: Motherhood and recidivism**

The third aim of the study was to gain a better understanding of incarcerated mothers and their thoughts regarding recidivism. Factors such as the experience of treatment/rehabilitative programmes and motherhood as a deterrent to future offending were explored. The study found that most participants did not take part in treatment programmes, due to being on trial or having a short sentence. Despite these findings, all participants expressed that they would have liked to take part in a programme, as they would often experience boredom and idleness. They also wished for the opportunity to become better caregivers and mothers through these programmes. According to Van Tilburg (2011:15), it is imperative for people to view their life as meaningful, as it produces a state of happiness and fulfilment, whereas boredom or feelings of meaninglessness could lead to depression and anxiety. As mentioned in the literature, the maternal incarceration population is often vulnerable with regard to mental health issues, due to trauma experienced in many inmates prior to incarceration (Steyn & Booyens, 2015:128; Steyn & Hall, 2015:85). Therefore, boredom can exacerbate problems such as anxiety

and depression if inmates are not mentally stimulated in a sufficient manner. The DCS contends that rehabilitation and treatment programmes are not primarily focused on crime prevention, but is an all-encompassing process. Therefore, one is likely to ask, if it is an all-encompassing process, why are all offenders not afforded the opportunity to take part in such programmes, despite their short sentences? Therefore, it is recommended that more study be undertaken regarding the consequences of not permitting all offenders to take part in rehabilitation programmes, as well as the availability of these programmes at all female correctional facilities in South Africa.

Participants expressed concerns over the repetitive nature of their daily activities when they were not involved in treatment programmes. Mothers would wake up, take care of their infants, repeating this every day with no variation. The study also found that no specific programmes focused on mothering; thus, their individualised treatment needs were not fully met. Therefore, the study corroborated that of Ratshidi (2012), where it was found that many programmes often only exist on paper, and that the implementation does not take place at all the correctional facilities.

The majority of participants viewed motherhood as a deterrent to crime once they were incarcerated. However, it did not serve as a deterrent prior to incarceration. In some cases, motherhood and the need to provide for children became a motive to commit a crime. The participants also acknowledged that the experience of incarceration is extremely unpleasant. The culmination of factors such as being confined, longing to see family and the monotonous days contributed to this unpleasantness. The majority of participants expressed remorse and regret for the decision to commit a crime and ultimately their infant having to share in their incarceration experience resulting from their bad decisions. The study found that while overall conditions of Mother-and-Child Care Units were up to standard according to the White Paper on Corrections, the experience was still unpleasant enough to be a possible deterrent to committing crime in the future.

Therefore, it is the researcher's opinion that both motherhood and incarceration collectively could be considered a deterrent to future offences.

Based on the findings, it can be concluded that the aims of the study have been adhered to, namely;

- To gain a better understanding of the nature of mother-child interaction/meaning of motherhood within a correctional facility;
- To explore whether the Mother-and-Child Care Units are conducive to the needs of both mother and infant; and
- To highlight an incarcerated mother's experience of recidivism.

## **7.2 LIMITATIONS OF THE STUDY**

However, as with any research, there are often limitations. According to Babbie (2015:39), "the researcher should be more familiar than anyone else with the study's technical limitations and failures. Researchers have an obligation to make such shortcomings known to their readers". The following limitations were identified during the study:

- Due to the relatively small national inmate population under investigation, only a small sample of participants was available. However, the aim of the study was an in-depth investigation of a select group of participants, which did not require a large number.
- Limited resources were available, such as previous literature within the South African and African context.
- Only participants who could speak English were used.

## **7.3 RECOMMENDATIONS FOR FUTURE RESEARCH**

Based on the empirical findings of the study and due to the explorative nature of the research, recommendations for future research are presented below.

### **7.3.1 Longitudinal research**

Longitudinal research could assist to assess whether treatment programmes are successful, as well as to evaluate the long-term effects of maternal incarceration. Longitudinal research can assess whether relationships with children and family remain strained post incarceration and to what degree. In addition, it could explore whether the two-year period that infants reside in correctional facilities has a developmental impact later on in life. Longitudinal research will allow for the exploration of the two-year period

of incarcerated mothers, following through to post-separation to determine how mothers cope after they are separated from their infants.

### **7.3.2 Triangulation**

Triangulation can be used in a similar study to this one with a larger sample size from a wider range of provinces at more correctional facilities; therefore, being both qualitative and quantitative by nature. The quantitative aspect of the study would allow for generalisations of the findings. Other stakeholders should also be part of the study, such as DCS members, social workers and the families of the incarcerated to get a broader perspective from all involved in the maternal incarceration process. Focus groups can be used for a wider variety of stakeholders. This should include fathers for better insight into maternal incarceration as a whole, as the relationship between infant and father is also influenced by infants residing with mothers in a correctional facility. During the qualitative stage, items for the development of research hypotheses could be generalised to be tested in the quantitative stage with a larger sample.

### **7.3.3 Policy development and practice**

A national study should be undertaken to assess whether the current DCS policy as found in the White Paper on Corrections regarding Mother-and-Child Care Units are implemented across South Africa at all Mother-and-Child Care Units. Once an evaluation of policy is done countrywide, it will enable relevant stakeholders to realise and address the gaps in practice.

## **7.4 CONCLUDING REMARKS**

The researcher is of the opinion that this research has contributed to knowledge of the female inmate population and, more specifically, those mothers who reside with their infants in correctional facilities. Although the sample population was relatively small, this phenomenon is seen throughout the country; therefore, it is believed that the study has the potential to assist the DCS, policy makers and professionals in engaging more effectively with this inmate population. The feminist theoretical approach, guided this study in establishing a link between the historical experiences and subsequent



offending behaviour and current lived experiences of the participants in the study. The possible pathways into criminal offending of the participants were identified as poverty, opportunistic crime, relationship difficulties, and pressure to fulfil perceived familial responsibilities and attain goals associated with this. Finally, it is believed that the current study has provided new insights into the multiple experiences of incarcerated mothers with their infants in correctional facilities. The study has highlighted that there is a dire need for more research, particularly within the local context, which takes into account the changing nature of motherhood and its ideologies, since the experience of motherhood can now be found within a variety of contexts, including in the criminal justice system, as discussed. It is envisaged that this study will encourage future research on what is often regarded as a forgotten inmate population in order to explore methods of assisting incarcerated mothers through effective rehabilitation and alternatives to incarceration, ultimately to address the needs of a very marginalised and vulnerable population while protecting their rights.

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## **Appendix A: Interview schedule**

### **1. Biographical information**

1.3 How old are you?

1.4 What is your highest level of education?

1.5 What is your marital status?

- Single/Married/Widow

1.6 Were you employed before incarceration?

- If yes, what was your occupation?

1.7 How old is your child?

1.8 Is this your only child?

- If no, who do your other children live with?

1.9 How long have you been in prison?

- What is the length of your sentence?
- When will you be eligible for parole?
- Is this something you think about often?

1.10 Can you tell me about why you are in this correctional facility?

1.11 What kind of support do you get from the CMC?

### **2. The nature of motherhood within a correctional facility**

2.1 Do you think a correctional facility is good for your child's development?

- Why do you say so?

2.2 Describe a normal day

- What time do you do wake up?
- What happens after that?

- What activities do you and your baby take part in?
- What time do you sleep?

2.3 Was the decision to keep your baby easy or difficult to make?

- What were your thoughts/ feelings when making this decision?

2.4 Do you think you are a good mother?

- How do you experience motherhood in prison?

2.5 Does having your baby with you make prison easier or harder?

- Can you explain?

2.6 Where is your child going to stay after here?

2.7 Will you remain in contact with your child once they leave?

2.8 Do you get visitors from family/ the babies father?

- How does that make you feel?
- Does that make it harder or easier?

2.8 When you think about, when your baby has to leave, what do you feel?

### 3. Conditions of facilities/ needs of mother and infant

3.1 Did you give birth in prison?

- If yes please explain your experience

3.2 Does the prison provide adequate health care (postnatal visits, vitamins, medication if needed etc.)?

3.3 Do you think this prison is overcrowded?

- If yes, how does the overcrowding affect you?

3.4 Is there enough space for you and your baby in the cell/unit?

- Can you describe your unit/cell?
- Is it warm/cold?

3.5 Is the prison hygienic for you and your baby?

- Tell me about the conditions of your cell, bathroom and toilet.
- How do the conditions make you feel?

3.6 Do you think there are enough supplies here for you and your baby?

- Can you tell me what you are provided with?

3.7 Do you enjoy the food you receive?

- Can you describe the food they give you and your baby to eat?

3.8 Do the correctional officers treat you and your baby well?

- How does this make you feel?

3.9 Is your baby exposed to male figures?

3.10 What would you like the prison to add to make this experience better for you and your child?

#### 4. Recidivism

4.1 Are there mothering programmes available to you?

- If yes, how do you experience it?

4.2 Do you think of yourself as a mother or offender?

- Please explain why you think of yourself as that

4.3 Has this experience of being a mother in a correctional facility changed you?

- If so how?

4.4. What are your plans once you leave here?



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VRYSTAAT  
YUNIBESITHI YA  
FREISTATA



## **APPENDIX B: INFORMED CONSENT FORM FOR PARTICIPANTS**

Lived experiences of motherhood in correctional facilities  
University of the Free State

**PLEASE READ THIS DOCUMENT CAREFULLY AS YOUR SIGNATURE IS REQUIRED TO PARTICIPATE IN THIS STUDY. THE MINIMUM AGE REQUIREMENT TO PARTICIPATE IS 18 YEARS OLD.**

This research is completely voluntary and you may withdraw at any point in time if you object to the nature of this research. For the duration of your participation in this study you may ask questions and answers will be provided at the end of your participation.

### **Description of study:**

This to gain knowledge and understanding of what you as a mother go through on a daily basis in the correctional facility and your interpretation of motherhood while residing with your infant.

### **Nature of participation**

You will participate in one session. In this session you will be required to answer questions that the researcher will ask. The duration of the session will be a maximum of 60 minutes and the interview will involve questions about your experiences of motherhood while being in a correctional facility with your infant. This process will not interrupt other activities that you might be scheduled to take part in at the correctional facility.

### **Purpose of the study**

To gain a better understanding of motherhood in a South African correctional facility while being incarcerated with your infant, by focusing on the individual experiences of the mother.

**Possible risks:**

- a) Certain questions that the researcher will pose might make you feel uncomfortable, upsetting or might have a negative emotional consequence.
- b) You will be asked to provide confidential information about yourself.
- c) Under the framework of the Department of Correctional Services, the case management committee (CMC) who are responsible for your general health care will refer a mental health practitioner or social worker should you experience any emotional distress and need to talk to a professional.

**Possible benefits:**

- a) You will have an opportunity to contribute to criminological research.
- b) It is hoped that the research will benefit future researchers and various departments involved with mothers who reside in correctional facilities with their infants in the future.

**Compensation for your time:**

There will not be any form of compensation for your time spent answering these questions.

**Confidentiality:**

You will be assigned a code number which will protect your identity. All data will be kept in secured files, in a locked safe in accord with the University. No one will be able to identify you throughout the research.

**Opportunities to question:**

Any technical questions about this research may be directed to:

**Researcher :** Semira Pillay

**Email:** [semirapillay19@yahoo.com](mailto:semirapillay19@yahoo.com)

**Supervisor :** Prof. Robert Peacock

**Email:** [peacockr@ufs.ac.za](mailto:peacockr@ufs.ac.za)

**Ethics committee:** Charne Vercueil

**Email:** [vercuelcc@ufs.ac.za](mailto:vercuelcc@ufs.ac.za)



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## APPENDIX C: PARTICIPANT INFORMATION SHEET

Title: *Lived experiences of motherhood in correctional facilities*

### **Dear Prospective Participant**

My name is Semira Pillay and I am doing research in the Department of Criminology towards a Masters degree at the University of the Free State. We are inviting you to participate in a study entitled: Lived experiences of motherhood in correctional facilities.

### **WHAT IS THE AIM OF THE STUDY?**

The aim of this study is to gain knowledge and understanding of what you as a mother go through on a daily basis in the correctional facility and your interpretation of motherhood.

### **WHY AM I BEING INVITED TO PARTICIPATE?**

You have been chosen to participate because you fit the criteria I am looking for women in correctional facilities who live with their infants.

### **WHAT IS THE NATURE OF MY PARTICIPATION IN THIS STUDY / WHAT DOES THE RESEARCH INVOLVE?**

If you agree to participate in my research, I will conduct an interview with you at the correctional facility you reside in. The interview will involve questions about your experiences of motherhood while being in a correctional facility with your infant. I expect to conduct only one interview.

### **CAN I WITHDRAW FROM THIS STUDY?**

Being in this study is voluntary and you are under no obligation to consent to participation. If you do decide to take part, you will be given this information sheet to keep and be asked to sign a

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written consent form. You are free to withdraw at any time during the interview and without any consequence.

**WHAT ARE THE POTENTIAL BENEFITS OF TAKING PART IN THIS STUDY?**

There is no direct benefit to you from taking part in this study. It is hoped that the research will benefit future researchers and various departments involved with mothers who reside in correctional facilities with their infants in the future.

**WHAT IS THE ANTICIPATED INCONVENIENCE OF TAKING PART IN THIS STUDY?**

Some of the research questions may make you uncomfortable or upset. You are free to decline to answer any questions you don't wish to, or to stop the interview at any time. The social worker or psychologist may also stop the interview at any time. You can also speak to a social worker after the interview if you feel the need to talk to someone.

**WILL WHAT I SAY BE KEPT CONFIDENTIAL?**

Your study data will be handled as confidentially as possible. If results of this study are published or presented, individual names and other personally identifiable information will not be used a number will be used to identify you. When the research is completed, I may save the notes for use in future research done by myself or others however your name will not be used.

Your answers may be reviewed by people responsible for making sure that research is done properly, including the transcriber, external coder, and members of the Research Ethics Committee. Otherwise, records that identify you will be available only to people working on the study. A report of the study may be submitted for publication, but individual participants will not be identifiable in such a report.

**HOW WILL INFORMATION BE STORED AND ULTIMATELY DESTROYED?**

Hard copies of your answers will be stored by the researcher for a period of five years in a locked cupboard/filing cabinet at the University of the Free State for future research or academic purposes; electronic information will be stored on a password protected computer. Future use of

the stored data will be subject to further Research Ethics Review and approval if applicable.  
Data recorded on paper will be shredded and disposed of.

**WILL I RECEIVE PAYMENT OR ANY INCENTIVES FOR PARTICIPATING IN THIS STUDY?**

There will be no compensation given to ensure the safety of the participants.

**HAS THE STUDY RECEIVED ETHICAL APPROVAL?**

This study has received written approval from the Research Ethics Committee of the Humanities Department, University of the Free State. A copy of the approval letter can be obtained from the researcher if you so wish.

Thank you for taking time to read this information sheet and for participating in this study.

Thank you.

Semira Pillay



**Faculty of the Humanites**

06-Apr-2018

Dear Miss Pillay

Ethics Clearance: **Lived experiences of motherhood in correctional facilities**

Principal Investigator: Miss Semira Pillay

Department: **Criminology (Bloemfontein Campus)**

**APPLICATION FOR EXTENSION APPROVED**

With reference to your application for extension for ethical clearance with the Faculty of the Humanities, I am pleased to inform you on behalf of the Research Ethics Committee of the faculty that you have been granted extension from **06-Apr-2018 to 06-Apr-2019** with the assumption that there are no major changes with regards to the study.

Your ethical clearance number, to be used in all correspondence is: **UFS-HSD2016/1162**

**Should you require more time to complete this research, please apply for an extension again.**

We request that any changes that may take place during the course of your research project be submitted to the ethics office to ensure we are kept up to date with your progress and any ethical implications that may arise.

Thank you for submitting the application for extension. We wish you every success with your research.

Yours Sincerely



Dr. Asta Rau

Chair: Research Ethics Committee

Faculty of the Humanities





## correctional services

Department:  
Correctional Services  
REPUBLIC OF SOUTH AFRICA

Private Bag X136, PRETORIA, 0001 Poyntons Building, C/O WF Nikomo and Sophie De Bruyn Street, PRETORIA  
Tel (012) 307 2770, Fax 086 539 2693

**Ms SP Pillay**  
**119 Koos van Dewalt Street**  
**Bloemfontein**  
**9301**

Dear Ms SP Pillay

**RE: APPLICATION TO CONDUCT RESEARCH IN THE DEPARTMENT OF  
CORRECTIONAL SERVICES ON: "LIVED EXPERIENCES OF MOTHERHOOD IN  
CORRECTIONAL FACILITIES"**

It is with pleasure to inform you that your request to conduct research in the Department of Correctional Services on the above topic has been approved.

Your attention is drawn to the following:

- The relevant Regional and Area Commissioners where the research will be conducted will be informed of your proposed research project.
- Your internal guide will be **Mr GE Wilson: Regional Head Development and Care, Free State and Northern Cape Region.**
- You are requested to contact him at telephone number (051) 404 0285 before the commencement of your research.
- It is your responsibility to make arrangements for your interviewing times.
- Your identity document/passport and this approval letter should be in your possession when visiting the correctional centres.
- You are required to use the terminology used in the White Paper on Corrections in South Africa (February 2005) e.g. "Offenders" not "Prisoners" and "Correctional Centres" not "Prisons".
- You are not allowed to use photographic or video equipment during your visits, however the audio recorder is allowed.
- You are required to submit your final report to the Department for approval by the Commissioner of Correctional Services before publication (including presentation at workshops, conferences, seminars, etc) of the report.
- Should you have any enquiries regarding this process, please contact the Directorate Research for assistance at telephone number (012) 307 2770 / (012) 305 8554.

Thank you for your application and interest to conduct research in the Department of Correctional Services.

Yours faithfully

**ND SIBHAZANA**  
**DC: POLICY COORDINATION & RESEARCH**  
**DATE: 20/12/2017**

