

Incarcerated and Pregnant: How Societal Attitudes Affect the Sentencing and Treatment of Pregnant Inmates in Rural Tennessee

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Abstract

This ethnographic case study examines how southern society's views on motherhood and criminal punishment when held by correctional staff and judges influence the sentencing and treatment of female inmates who are pregnant while incarcerated. The research was conducted at a county jail in rural Tennessee. Semi-structured interviews were conducted with a male and a female correctional officer, the jail administrator, the jail's nurse, a judge from the county, and three inmates. The interviews were then transcribed and analyzed for dominant themes. Nearly all the respondents held more traditional views on criminal punishment and motherhood. In addition, these views on motherhood, not the views on criminal punishment, had an impact on the sentencing of the pregnant inmates and how these inmate mothers were viewed by the staff. The inmates also appeared to internalize these views and to blame themselves for their incarceration. However, the inmates reported their prenatal care was good, so it did not appear to affect how they were treated. This study does have limitations, though, such as its small sample, the fact that housing pregnant inmates was a relatively new issue for this specific jail, and that the inmates' responses may have been influenced by the presence of a prison authority. It is also just a snapshot of this small, rural area at this time, and therefore the findings cannot be generalized to other areas. However, this research is important because it suggests that certain societal attitudes in small, rural, southern areas when held by correctional staff and judges can influence pregnant inmates' sentences and how they are viewed by the staff.

Over the past few decades, women have been one of the fastest growing populations under correctional supervision. Between 1980 and 2014, the number of incarcerated women rose by nearly 700 percent. There was a total of 26,378 female inmates in 1980 and the total rose to 215,332 female inmates in 2014 (The Sentencing Project, 2015). Specifically, in local jails, the female inmate population increased from 68,100 to 100,940 between 1999 and 2013, an increase of nearly 48 percent (Minton, Ginder, Brumbaugh, Smiley-McDonald, and Rohlof, 2015). The increase in the number of female inmates has led to another problem: the increase of inmates who are also mothers. Two-thirds of incarcerated women have minor children (Gilad and Gat, 2013, p. 372); it is estimated that annually there may be anywhere from 6,000 to 20,000 pregnant women in the nation's jails and prisons (Dignam and Adashi, 2014, p. 14). This increase in incarcerated and pregnant women presents many challenges that our correctional system and even society at large are often not suited to face, such as additional medical costs, an increase of children living with aging grandparents or in foster care, and problems with battling stigma and constructing identity related to mothering and motherhood.

Literature Review

Demographics of Incarcerated Mothers

For the most part, incarcerated women belong to minority racial groups. Many of these women have a low socioeconomic status, limited education, and are often under 40 years old. They have higher rates of substance abuse and mental health disorders than incarcerated men. They are also likely to have a history of abuse, specifically child abuse, sexual abuse, physical abuse and domestic violence (Laughlin, Arrigo, Blevins, and Coston, 2008; Vainik, 2008; Kennedy, 2012; Barnes and Stringer, 2014). Also, nearly 53 percent of female inmates in 2015 were incarcerated for property or drug crimes (Carson and Anderson, 2016). Incarcerated mothers share many of the same demographics as the general female inmate population. However, incarcerated mothers are more likely than other prisoners to be incarcerated for a non-violent drug or property crime. In addition, incarcerated mothers tend to have multiple children, with the majority having two to three children. Often, these mothers live with their children as the child's primary caregiver before being incarcerated: estimates indicate that 64.3 percent of state-level incarcerated

mothers lived with their children prior to arrest, and 31 percent of those mothers lived alone with their children prior to arrest (Laughlin et al., 2008; Kennedy, 2012).

The challenges of mothering while incarcerated

Being an incarcerated mother presents many challenges. One of the most researched challenges is how incarcerated women construct their identity as a “mother.” In this study, the majority of the research is interview-based, and findings revealed that even though the women were incarcerated, they still viewed themselves as mothers. Some respondents simply reflect an understanding that they are “bad” mothers and feel guilt or shame over their actions. However, most incarcerated mothers try to find new ways to construct their identity as a mother (Enos, 2001; Ferraro and Moe, 2003; Barnes and Stringer, 2013; Couvrette, Brochu, and Plourde, 2016; Aiello and McQueeney, 2016; Easterling and Feldmeyer, 2017). Maintaining contact with children, having a good relationship with the child’s caregiver, and making plans to reunite with their children after release were important ways to construct a “good” mother identity (Enos, 2001; Ferraro and Moe, 2003; Barnes and Stringer, 2014). In addition, Couvrette, Brochu, and Plourde (2016) found in their interviews with substance-abusing, incarcerated mothers that they had created a new identity of the “deviant good mother.” Though most of the women felt that “good” mothers do not use drugs, some felt that they could still be a “good” mother and use substances such as alcohol and drugs. Some even reported that their substance use made them more relaxed and open to their children. Enos (2001) found that incarcerated mothers believe substance use did not interfere with their ability to be a mother, and that crimes such as shoplifting or fraud were ways to gain resources for their children. Aiello and McQueeney (2016) reveal that incarcerated mothers also construct their identities by embracing and distancing themselves from stigma. To distance themselves, they separate their criminal acts from their identities of being a mother. In another attempt to distance themselves from the stigma, they used “defensive othering” to deflect the stigma onto other incarcerated mothers. This allowed them to claim that they were “better” at mothering than other incarcerated mothers, which is similar to what Enos (2001) found in her study. Finally, Easterling and Feldmeyer (2017) focused their research specifically on white inmate mothers in a rural area in Kentucky and found that living in a rural area may amplify

one's "spoiled identity." Since rural areas are smaller, when an individual becomes incarcerated, it can be widely known; therefore, incarcerated mothers are likely to be recognized and faced with informal sanctions and stigmas from their local communities.

Another challenge faced by incarcerated mothers is arranging care for their children. After becoming incarcerated, mothers have to arrange care for their children, especially if they were the primary caregiver. Often, they arrange for their children to live with friends or family members, specifically grandparents (Enos, 2001; Mignon and Ransford, 2012; Kennedy, 2012). Enos (2001) found that incarcerated mothers express concern over whether or not caregivers were suitable, and some inmate mothers even report that the caretakers are hostile towards them and work to limit the mother's contact with their child. Caregiver hostility can make it hard for incarcerated mothers to keep in contact with their children. Maintaining contact with children has been found to be an important way to maintain one's identity as a mother. The most common ways to keep in contact are writing letters and making phone calls. However, hostile caretakers, lack of money for phone calls or stamps, long travel times to facilities, and lack of interest from the children can all prevent women from keeping in contact with their children (Enos, 2001; Flavin, 2009; Mignon and Ransford, 2012).

Maintaining custody of their children can be a special challenge for incarcerated mothers. The Adoption and Safe Families Act (ASFA) of 1997 required termination of parental rights (TPR) proceedings to be brought forth if "the child has been in foster care for fifteen of the most recent twenty-two months" or "the court has determined that the child is 'an abandoned infant.'" (Lee, Genty, and Laver, 2010) After reviewing case files, Lee et al. (2010) found that "TPR was granted in 81.5 percent of the cases involving parents incarcerated due to drug-related offenses" and "TPR was granted in 92.9 percent of the cases in which the mother was incarcerated" (p. 81).

Pregnant inmates also face unique challenges: often, pregnant inmates are at an increased risk for a complicated pregnancy. Histories of health problems related to substance abuse, STDs, and psychiatric disorders are particularly impactful on their pregnancy. Low birth weight is more of a problem amongst babies born to

pregnant inmates than babies born to mothers living in the community (Mertens, 2001; Parker, 2005; Sufrin, Kolbi-Molinas and Roth, 2015). This is especially true for babies born to pregnant inmates who are in their 30s (Hollander, 2005). Pregnant inmates also need specialized care such as prenatal care or nutritional diets. However, they do not always receive this care, as there are no laws requiring it, and even in states that require incarcerated mothers to receive prenatal care, the care is not always adequate (Vainik, 2008; Parker, 2015).

Addressing the challenges of mothering while incarcerated

Recently, there has been more research on the programs and policies that can address the difficulties incarcerated mothers face. One program receiving attention is prison nurseries. Prison nurseries are programs that allow incarcerated mothers to live with their newborn babies for a set amount of time, on average 12 to 18 months, and the program is designed to strengthen the bond between mother and child. The nurseries are located in a separate area, away from the general prison population. Typically, mothers eligible for this program are those who have given birth while incarcerated, have committed a non-violent crime, and have a relatively short sentence. Research has shown that these programs can help both the baby and the mother because it allows them time to bond and become attached, which can be important for the baby's development. Additionally, the program improves the mothers' mental health and lowers their recidivism rates (Gilad and Gat, 2013; Elmalak, 2015). As of 2015, there were nine prison nurseries operating in California, Illinois, Indiana, Ohio, Nebraska, New York, South Dakota, Washington, and West Virginia (Elmalak, 2015).

Prison nurseries also allow inmates to spend time with their newborn babies before being separated, which can be very important for their mental and emotional health. Forced separation from their babies after giving birth can be damaging for some inmates. In a study by Chambers (2009), incarcerated mothers forcibly separated from their babies reported that they felt positive emotions up until the birth. After the birth, they reported feelings of loss and that a piece of them was missing. However, they tried to maintain a connection with the child even while he or she was not physically there by focusing on the positive emotions and experiences with their baby and thinking about the reunion they would someday have

with them. However, there is backlash against prison nurseries: opposing arguments suggest that prison is not a stable environment to raise a child and that when the child is taken away, it could be detrimental to the mother's mental health. Moreover, nursery programs are not applicable to children born while the mother was not incarcerated (Gilad and Gat, 2013; Elmalak, 2015). Campbell and Carlson (2012) interviewed correctional administrators in eight states that had prison nurseries and 20 states that did not. The authors found that of the correctional administrators in states that did not have a prison nursery program, receptiveness to the idea varied. Seventy-Five percent of correctional administrators in the South were unreceptive to the idea of prison nursery programs. The correctional administrators from the Northeast and West were generally more favorable of the idea.

Parenting classes have also been shown to help pregnant inmates. In their three-year evaluation of the Turning Points parenting curriculum at a correctional facility in Missouri, Urban and Burton (2015) found that the program was effective in improving the mothers' parenting knowledge and their parenting confidence. Loper and Tuerk (2011) gave an eight-session parenting class to incarcerated mothers that focused on parenting stress and improving communication with children and caregivers. While there was a significant dropout rate, they found that the mothers who participated in the program "reported reduced parenting stress, improved alliance with home caregivers, increased letter-writing, and reduction of mental distress symptoms" (p. 89). There are also programs specifically designed for pregnant inmates such as the doula birth support program (Schroeder and Bell, 2005) or the Women and Infants at Risk program which focuses on pregnant inmates who have substance abuse problems (Siefert and Pimlott, 2001).

Southern societal views on motherhood and punishment

A significant part of the research on incarcerated mothers focuses on correctional facilities in the North and Western parts of the United States (Siefert and Pimlott, 2001; Mignon and Ransford, 2012; Aiello and McQueeney, 2016). Southern prisons are not often found in the research, but they do represent an important region of the country because incarceration rates are higher in the southern U.S. In 2015, the average incarceration rate per 100,000 U.S. residents age 18 and older was 860. However, southern states including Georgia, Alabama, Arkansas, Louisiana,

and Mississippi had an incarceration rate of over 1,000, and states like Kentucky, Tennessee, and Florida had incarceration rates in the 900 range (Kaeble and Glaze, 2016). In addition, the Bureau of Justice reported that southern states, including the District of Columbia, accounted for 50% of the local jail inmate population (Minton et al., 2015). Moreover, the South has been found to have a distinct culture that is often more traditional in its views on a number of subject such as crime and punishment. Hurlbert (1989) analyzed General Social Survey data to determine if southerners held distinct, more traditional attitudes about certain subjects such as the use and approval of violence and force, politics, women, race, and moral/religious obligations. Southerners were more likely to hold more traditional, conservative views in regards to religion, politics, and racial issues. However, views on the use of violence and force, and views on women in the workplace were found to be somewhat less distinct when compared between southerners and non-southerners. In regard to women's gender roles, Rice and Coates (2005) found that while attitudes about women's gender roles have become more egalitarian over time, southerners were still somewhat more traditional in their view of women's gender roles than non-southerners. In addition, people living in rural areas were found to be more conservative on these views than people living in urban areas.

However, while views about women and politics or women in the workplace may vary, motherhood is viewed in a similar way in both the South and the non-south. Fulfilling one's role as a mother is seen as an important part of a woman's identity. "Good" mothers are caring, loving, and nurturing to their children. "Good" mothers are selfless, sacrificing everything they have for their children, and put their children's needs and wants above their own. They are also the primary caretaker of their children and they are always available for their children, both emotionally and physically. Finally, they refrain from actions that are associated with "bad" mothers, such as criminal activity, putting work above one's children, or not meeting their children's needs and wants (Roberts, 1995; Enos, 2001; Ferraro and Moe, 2003; Aiello and McQueeney, 2016). Yet, this definition of a "good" mother is shaped around the experiences of white, heterosexual, married, and economically advantaged women. Women with low socioeconomic status, women of color, uneducated women, single women, et cetera tend to fall into the category of a

“bad” mother because they do not meet the standards of what a “good” mother is (Roberts, 1995; Ferraro and Moe, 2003; Flavin, 2009; Kennedy, 2012).

Incarcerated mothers tend to fall into many of the categories associated with “bad” mothers, and this negative categorization can adversely affect their punishments. Mothers who commit crimes have broken both the law and the societal norms of good mothering. Mothers who commit crimes and belong to dominant group categories are believed to be more rehabilitative. Thus, these women are more likely to get lenient punishments that allow them to stay with their children, who are used as a form of social control. By contrast, mothers who commit crimes and do not fall into dominant group categories are more likely to receive harsher punishments. They are viewed as selfish, dangerous, unfit to be a mother, and less likely to be rehabilitative. Therefore, instead of receiving a punishment that allows for mothering options, women who are not members of dominant groups are more likely to end up incarcerated without the option to mother their children (Roberts, 1995; Kennedy, 2012).

The present study

The present study is a qualitative case study. Though it is not a true ethnography, it is ethnographic in nature because it examines how traditional southern societal views when held by members of a small, rural criminal justice system including correctional officers, jail administrators, nurses, and judges influence the sentencing and treatment of female inmates who are pregnant while incarcerated. It focuses mainly on southern society’s views on motherhood and criminal punishment. The purpose of the present study is to address gaps in previous research on incarcerated pregnant women. Interviews with correctional officers, jail administrators, nurses, and judges, rather than only inmates, are used to illustrate how southern societal views on motherhood and criminal punishment affect the sentencing and treatment of women who are pregnant while incarcerated. Moreover, this study focuses on a facility in the rural South, an area where there have been few studies on incarcerated pregnant women.

Methods

Research Site

This research was conducted at a county jail in rural Tennessee. As of the 2010

census, this county had a population of less than 20,000, and roughly 98 percent of the population identified as White. Around 10 percent of the population held a bachelor's degree or higher with nearly 75 percent of the population reporting being a high school graduate or higher. It was estimated that about 20-30 percent of the population lived in poverty (United States Census Bureau, 2016).

Respondents

The sample consisted of two inmates who were pregnant at the time of the interview, one inmate who had been pregnant during her incarceration and had recently given birth, the jail administrator, a female correctional officer, a male correctional officer, the jail's nurse, and a judge from the county. It is relevant to interview these selected members of the criminal justice system because they are important in making decisions and policies that affect the lives of inmates who are pregnant at the time of incarceration. The judge is responsible for the sentencing decisions, the jail administrator is responsible for creating institutional policies and running the jail, the nurse provides the inmates with medical care, and the correctional officers are constantly in contact with the inmates and are responsible for carrying out the institutional policies. It was relevant to interview the inmates because they could provide insight into how they viewed their punishment versus how these members of the criminal justice system viewed their punishment, and they could provide insight into the treatment they received from these various criminal justice employees. Housing pregnant inmates was a somewhat new issue for this jail, so specific programs for pregnant inmates were not yet in place. In addition, there were no parenting classes, or nursery programs. Therefore, I was unable to research further if southern societal attitudes had an influence on programs at the jail.

All the respondents were white and had lived in the southeast for nearly their whole lives. Most of the respondents described themselves as working or middle class. For education, most of the correctional staff had some college education while the inmates had their GED or were working on it. What is most important to note is that the correctional staff and the inmates had similar demographics. The judge, however, was older than most of the correctional staff and the inmates, had more education, and had been working in the criminal justice system for a longer time. As a noted limitation, this study had a very small sample, and the sample was

not very diverse. In addition, this study only looks at one small, rural area. Therefore, it is not representative of the larger society nor is it generalizable to other areas; however, that was not the goal of this study.

Procedures

Permission was obtained from both the university and the jail to do this study. Semi-structured interviews were used to collect the data. The interviews were voluntary, and the respondents received no compensation for agreeing to be interviewed. All respondents had to sign a written informed consent form before being interviewed or recorded. No one refused to be interviewed or recorded. It is possible that inmate responses may have been affected by the presence of an authority figure in the room. For example, when the inmates were being interviewed, the jail administrator was also in the room, and it may have affected their responses. They tended to look at her before answering questions about the facility or the staff, and even though she encouraged them to be honest, her presence may have affected their responses.

The interviews ranged from 10-25 minutes long and were audio-recorded. Notes were also taken during the interview. The interviews were then transcribed and read over in order to identify dominant themes. Significant statements were selected from each of the interview transcripts. Similar statements were then grouped into categories and read over again to find dominant themes. The respondents were informed that they would not be identified by name in order to keep their responses confidential. Therefore, in describing their responses, initials were assigned as identifiers for inmates. The initials do not correspond to respondents' real names.

Results

After reviewing and analyzing the interviews, a few dominant themes emerged. Each is discussed below.

Traditional Views on Motherhood

One of the dominant themes was that the views on motherhood held by the respondents were very similar to the traditional, dominant views on motherhood. There was a strong emphasis on being selfless, loving and caring for one's child, and being responsible for the child and providing for it. Inmate A.B. described being a "good" mother as "Being there, taking care of it, not being in jail." When asked if

she felt jail hindered her ability to mother, she replied, "It does because the child's not with you, but other than that no. You can still give your child love in jail." However, while she felt that one could still love her child while in jail, she did appear to recognize that being in jail was not associated with being a "good" mother. Inmate three held similar ideas of what a "good" mother was. She stated, "I guess to be a good mom you. . . you love your kids. You take care of them, you know. Just do whatever it is that they need." Inmate C.D. did not really elaborate on what being a "good" mother meant to her, but she did state, "A lot of times you don't know what being a mom is until you have to do something like this."

The correctional staff and judge held similar views on what makes a "good" mother. The female correctional officer stated, "My view of being a mother is being loving, nurturing, keeping a child safe, keeping stability with a child, and just teaching it the right thing about life, and loving it." The male correctional officer described "good" mothering as "being there till they're 18, feeding 'em, clothing 'em, bathing 'em, making sure they have the things that they need." The jail administrator and the nurse emphasized that motherhood was about being selfless and putting your child first. The nurse even stated, "I could not imagine putting myself first, let alone carrying a baby, and knowing [that I was using drugs]." Finally, after speaking about his own mother, the judge stated that a mother was someone who nurtures others.

These definitions of what a "good" mother is falls in line with our society's idealized vision of motherhood. There are many women, though, who cannot live up to this idea of what a good mother should be because this vision of motherhood is based on the experiences of mothers who belong to dominant groups in society. However, this has become the standard for all mothers, regardless of their differences.

The role of choice

Another dominant theme was the role of choice, which was heavily emphasized. Inmates were responsible for the choices that led to them going to jail, and because of their choices, they did not know what being a mother really was like. When talking about her thoughts on women being pregnant and incarcerated, the jail administrator replied, "I don't understand how someone can be so selfish."

She later explained that one of the inmates could possibly get out before her baby was born, and when discussing this, she noted, “And that late in the pregnancy I know—I mean not a hundred percent but given her history—that she’ll go back to using.” She also described an incident where one of the inmates felt the baby kick and thought she had broken a rib. The jail administrator attributed this to the inmate’s drug use. She stated, “I’m going to assume that with their history that they abused with the other pregnancies, so they don’t know what actually being pregnant feels like.” The nurse shared similar ideas. She said, “Obviously as soon as they do jail time, they’re gonna go right back out to do the same things.” She even noted that, while she had never experienced an addiction, “If I was to get a charge . . . I would learn my lesson now to one, stop drugs, or, two, get a hysterectomy, or my tubes tied.” This seemed to imply that she felt the women were not stopping their drug use out of choice rather than because of their addiction.

The female correctional officer was blunt with her answers. She replied, “It’s their choice when they chose to do that drug and were pregnant with that child.” She also stated that these women “don’t know how to be mothers.” She then discussed an incident where she was talking with one of the pregnant inmates, and when the inmate stated that she loved her children, the female correctional officer replied back that if the inmate loved her child, then why was she “feeding it meth?” She said that the inmate had no response to that question. The male correctional officer also noted that choice played a role, but his answers were less blunt than those of the female correctional officer. He stated, “I guess it’s just what you’re doing is what brings you to jail . . . ’cause obviously if they were doing the right things, they probably wouldn’t be here anyway.” In addition, while he did state that he was not sure the babies would receive everything they needed if the women were not in jail, he did not explicitly state that these women did not know how to be mothers. Finally, the judge stated that many, but not all, people addicted to drugs tended to care more about their addiction than other things. However, he did recognize that other factors may be contributing to the addiction instead of just choice.

Even the inmates themselves stated that it was their fault they were in the situation they were in. When asked about what she thought of her sentence, Inmate A.B. stated, “It’s my own fault too, so I can’t really say that it’s not fair when it is.” Inmate

E.F. noted, “Well, I don’t like it, but it’s my own fault I’m here.”

This way of thinking falls in line with our society’s emphasis on individualism. Instead of being products of their environment, people are seen as masters of their fate. Instead of looking at their circumstances or their environment, the correctional staff in particular were quick to blame the inmates. While it is true that they chose to take the drugs, the correctional staff failed to consider any underlying problems that may be contributing to that decision. These women are economically disadvantaged, have little education, and live in a poor, rural area where there are not many opportunities. In addition, one of the inmates stated that she had depression and anxiety, so mental health issues may be an influencing factor. The judge was the only one who noted the possibility of underlying mental health issues as a source of these women’s drugs use. He stated, “A lot of the folks I see in court are self-medicating some underlying mental health issue, mamas included.”

In addition, this reinforcement of individualistic ideas and ideas that the inmates are not fit to be mothers may be internalized by the inmates. They stated that they felt it was their own fault for being in jail, and Inmate A.B. and Inmate E.F. even reported that they felt looked down upon, though they did not state who they felt stigmatized by.

Harsher view on sentences

Overall, the inmates felt that the sentences were fair, while the correctional staff felt that they needed to be somewhat harsher, though there was mention of a need for rehabilitation. Two of the inmates had been sentenced, and they felt that considering all the circumstances, their sentences were “fair.” One of the inmates even described her sentence as “God’s way of telling me to sit still and listen” and that she “needed this.” The jail administrator stated, “Sometimes I feel [the sentence] isn’t harsh enough.” She went on to discuss one of the inmates who had violated her probation. Her sentence was to serve the remainder of her previous 11 months and 29 days sentence, and she could possibly be released before her baby was born. The jail administrator did not think this was harsh enough, because the inmate had been a repeat drug offender and used while she was pregnant.

When asked whether she felt the punitive sentences for pregnant inmates were sufficient, the female correctional officer replied, “Just put it this way, they

wouldn't want me to be the judge. Because I would lay them down probably longer than he does." However, she also felt that some kind of rehabilitation was needed. She said, "Let's get some help to get them ready for society, to get their minds reset, their hearts reset, a work ethic programmed." The nurse also felt sentences should be stricter, and specifically mentioned how one of the inmates had been a repeat drug user even while pregnant. When talking about sentences, the male correctional officer noted that "some's fair and some's not near enough," and that even though inmates were human, he felt that inmates, in general, had too many privileges, such as television. The judge did not call for stricter or lesser punishments. He recognized that the system did have flaws, but he called our criminal justice system "the fairest." He also noted that sentences could be beneficial "at some level," but being in jail or even being in rehab did not always fix the underlying problems.

Traditional attitudinal views toward criminal punishment and the tough-on-crime emphasis often found in the South could explain why most of the correctional staff felt that sentences should be harsher and why there was less emphasis on rehabilitation. However, as seen from the jail administrator's comments, the nurse's comments, and the female correctional officer's comments, this view of sentences needing to be harsher appears to be related more to the fact that the inmates did drugs while they were pregnant instead of simply that they did drugs. These women not only broke the law, but by using drugs while pregnant, they also broke societal norms of what a "good" mother should do. Using drugs while pregnant was seen as a selfish decision that unnecessarily endangered the child. This appears to be considered an even more serious offense than drug use alone, and thus, they deserved harsher punishments. For example, when she was asked about her view on criminal punishment in general, the nurse stated that she had a "harder time on dealing with the child abuse problems that they have and the drug abuse [and] trying to get them on the right path as opposed to them coming and being a repeat offender in jail."

Caring for the child

The care the pregnant inmates received at this facility included obstetrician (OB) appointments, prenatal vitamins, milk with each meal, an extra mat for comfort, a snack of a peanut butter sandwich, a banana, and a milk before bedtime, and emergency care if needed. The care and treatment that the pregnant inmates

received was described by Inmate A.B. as “real good.” Inmate C.D. also felt that she received good care and was treated fairly by the staff. However, Inmate E.F. indicated they were “treated like inmates.” The correctional staff all felt that the pregnant inmates received really good care, even stating that it was probably better than they would have received outside of jail. The male correctional officer stated, “I think they probably get better medical attention here than they do on the streets if they were, you know, doing for their selves.” Even the judge felt that being in jail was “the only real plausible possibility they have of staying clean during the course of their pregnancy, of getting the healthcare that they need during the course of their pregnancy, and of having a child that’s born without the impact and long-term, potentially, effects of being a drug addicted baby when it’s born.” It almost seemed like the correctional staff and the judge felt they were doing the pregnant inmates a favor by keeping them there. However, it appeared that this care was given more to benefit the child instead of the mother. While it also helps keep the mother healthy, the extra snack and milk, the vitamins, and the OB appointments all relate to the health and wellbeing of the child. Although the inmates are viewed as unfit mothers, this does not appear to affect the care they receive, despite the fact that the care is intended more for the child than the mother.

Child’s interests > The mother’s interests

Another dominant theme found was that the child’s interests were greater and more important than the mother’s interests. There seemed to be an emphasis on protecting the child and making sure the child was healthy. For the female correctional officer, “it’s about that child that’s growing inside of them that they’re wrecking. It didn’t even ask to be there. It doesn’t have a choice, so somebody has got to take care of those babies.” The female correctional officer considered children to be a “gift from God,” and she felt that by incarcerating the pregnant inmates “they’re saving the child’s life so that child can be healthy.” She also recommended taking some reactive approaches to protecting the children. Since the mothers were seen as unfit to have their children and the foster care system moved them around too much, the female correctional officer recommended building an orphanage and having “good people” run it. The jail administrator also felt that the child should come first. She said she was “very protective of children,” and she felt that an

inmate's baby would be safer if the inmate stayed in jail until she had it. While she recommended parenting classes to help the mothers, the emphasis seemed to be on protecting the child and its interests.

The nurse stated, "If you come here pregnant, it is probably better to stay here to finish out your pregnancy than to send them back out and continue doing the drug abuse and have a NAS [Neonatal Abstinence Syndrome] baby." She even spoke about a preventative measure to protect unborn children: the local health department had teamed with the jail to provide birth control rods to inmates who wanted one. Good for three years, this prevented the mother from potentially having another child in jail. The male correctional officer also felt that jail was the best place for pregnant drug users. He said, "That kid is probably gonna [sic] be born addicted and may or may not make it if she wasn't in here. I'm not saying that that's the right thing to do or the wrong thing to do. I think it's the best thing for them." The judge stated that he considered the impact that releasing the mother would have on the unborn child, and he felt that even though housing pregnant inmates increased costs, it was worth it if it helped the mother and the child.

The child was seen as innocent and the respondents felt that its interests should come before the mothers. The correctional staff and the judge felt like they were supposed to be protectors of this child since the mother was unfit to. Although there was some mention of actions that could be taken to help the mother like parenting classes or birth control, there was more of an emphasis of making sure the child was safe, healthy, and protected as seen from the quotes above. With the mother being considered unfit and a "bad" mother by societal standards, it was up to "good people" like the correctional staff and judge to ensure that the baby was cared for and protected from its mother's addiction.

Social location

Finally, there was a contrast found between the male respondents (the judge and male correctional officer) and the female respondents (the jail administrator, the nurse, and the female correctional officer). The male respondents tended to be more distant and less critical. They did not condone the actions of the inmates, but they were not as harsh as the female respondents in their criticisms of the inmates and the inmates' actions. The judge, for example, tried to weigh all sides in his responses

and explain both his thoughts as well as other possible explanations. The male correctional officer even stated, “We don’t care that they’re pregnant and they’re in jail and ‘oh, she’s a bad mom.’ I mean the kid can’t help it, and like I said, people make mistakes. I mean they’re still human.” He also tended to use phrases like “I guess” or stated that not everyone agreed with him, or that something may or may not be the right thing to do.

The female correctional staff respondents tended to be more blunt and harsher in their responses than the male respondents. They also appeared to be more critical of the pregnant inmate’s actions, such as when they stated it was the inmate’s choice and that they were not as fit to be mothers and when they stated that they believed the punishments should be harsher, specifically for the inmates who have repeatedly tested positive for drugs while pregnant. Also, they were more invested in the lives of the pregnant inmates and their children than the male respondents. The female correctional officer felt that she was a “counselor” and a “mother figure” to the female inmates. The jail administrator stated that she was “very protective” of children, and she was worried about what would happen to the baby if the inmate was to get released before it was born. The jail nurse was very emotional in her response about women who were incarcerated and pregnant, because her adopted daughter was born to an addicted mother. She wished that the inmates would “concentrate on being pregnant instead of drugs.”

The reason for these differences between the male respondents and the female correctional staff respondents may be due to their social location. The female correctional staff respondents have a social location that is more similar to the inmates’ social locations. First, all the female respondents were mothers. They may feel stronger about the inmate’s actions because they have children of their own, and they would not want their children to be exposed to drugs like the inmates’ children. In addition, the female respondents are white, have similar socioeconomic backgrounds, and have grown up in the Southeast all their lives, similar to the female inmates. They also interact more with the female inmates than the judge or the male correctional officer. They have a more developed relationship with the pregnant inmates which may have influenced their responses. In addition, they have conflicting roles. The female correctional staff have a professional side that has to be tough

and stoic and neutral, but they also have a mothering side that is concerned about the babies of these pregnant inmates. However, even though they may feel stronger about this issue, it does not affect how they treat the inmates, and they said they would not want to treat them any differently.

Conclusion

Overall, there were more traditional views on criminal punishment and motherhood were found among nearly all the respondents. In addition, the views on motherhood appeared to have an impact on the sentencing of the pregnant inmates and how these inmates were looked at by the staff. Though they had more traditional views on criminal punishment, these did not seem to have much of an effect on the sentences or how the inmates were viewed. However, these views on motherhood did not appear to negatively affect how they were treated by the staff because all three of the inmates reported that the care they received was “good.” These views also appeared to be internalized by the women and had an impact on their identity because they blamed themselves and even reported feeling stigmatized. This research is significant because it suggests that certain societal attitudes, when held by correctional staff and judges, can influence pregnant inmates’ sentences and how they are viewed by the staff. However, as stated already, these societal attitudes do not appear to have a “negative” impact on the mothers’ treatment, but this may have been because the child’s interests were considered more important than the mothers.’ What is especially interesting are the background similarities between the inmate mothers and the female correctional staff, and the stark differences in the constructions of drug-using, pregnant inmates as “bad mothers.” Given the reliance on “choice” as the only explanation for women’s drug use while pregnant, structural factors that constrained their choices were not considered. From the female correctional staffs’ perspectives, if they could be “good” non-drug using mothers, then any women like them could and should be able to do so. This suggests that attitudes toward inmate mothers (and perhaps fathers) hinder the offering of parental programming and rehabilitation goals/efforts.

To address the limitations of this study, future studies could include more research sites including county jails and state prisons in other Southern states. It could also look at both the rural South and the urban South to see if different

attitudes are prevalent that may affect the study. In addition, to make the study more representative, a larger sample could be gathered from each research site and include respondents who are more diverse in race, socioeconomic status, education level, and other factors. It is possible that with a larger, diverse sample collected from the urban South, future studies would produce different findings due to the possibility of the less traditional societal views being found in these areas and among a more diverse group of people.

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