Case Study: Breastfeeding Facilitation and Initiation within one Prison Nursery Program

Jessica Wallace

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Case Study: Breastfeeding Facilitation and Initiation within one Prison Nursery Program

by

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Thesis

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Abstract
Breastfeeding rates of incarcerated women in the U.S. are unknown. As the female prison population rises, little to no data exists on breastfeeding initiation within prison nursery programs. The purpose of this case study was to assess breastfeeding facilitation and initiation within one prison nursery program. An interview was conducted with a nursery program administrator from one of nine active prison nurseries here in the U.S. Constructs from the Social Cognitive Theory including reciprocal determination, facilitation, observational learning, and incentive motivation were assessed. Through an administrative perspective, the results provided a better understanding of prison nursery programs and shed light on the realities of breastfeeding mothers caring for children while incarcerated. It is suggested that further research be conducted on breastfeeding initiation and duration within prison nursery programs. Additionally, research is warranted to assist in future breastfeeding initiatives within existing prison nurseries and to evaluate the needs of breastfeeding mothers.
# Table of Contents

Acknowledgments..............................................................................................................ii

Abstract............................................................................................................................iii

Chapter 1: Introduction....................................................................................................1
  Research Questions.........................................................................................................2
  Definitions......................................................................................................................2

Chapter 2: Review of Literature.....................................................................................3
  Pregnancy While Incarcerated.......................................................................................3
  Breastfeeding................................................................................................................4
  Prison Nursery Programs..............................................................................................5
  Theory...........................................................................................................................7

Chapter 3: Methods.........................................................................................................10
  Participants...................................................................................................................10
  Instruments..................................................................................................................10
  Procedures....................................................................................................................12
  Research Design...........................................................................................................12
  Data Analysis..............................................................................................................12

Chapter 4: Results.........................................................................................................14
  Questionnaire & Telephone Interview........................................................................15
  Social Cognitive Theory...............................................................................................20

Chapter 5: Summary......................................................................................................22
  Discussion.....................................................................................................................22
  Conclusion...................................................................................................................23
Chapter 1: Introduction

The implementation of prison nursery programs is one solution that addresses some of the major health risks faced by incarcerated pregnant women. As the female prison population continues to rise, more children are being born in state and federal prisons and later separated from their mother due to a separation policy enforced by most correctional facilities (Chambers, 2009). Maternal separation not only causes a host of mental and emotional problems for both the mother and child, but makes it impossible for an inmate mother to breastfeed (Carlson, 2001; Schroeder & Bell, 2005; Poehlmann, 2005).

Breastfeeding is beneficial in many ways and can help in improving maternal and infant health. Being that infants born to incarcerated women are at greater risk for low birth-weight, fetal alcohol syndrome, fetal and neonatal death and other medical conditions, encouraging mothers within prison nursery programs to breastfeed further promotes the health of this at risk population (Schroeder & Bell, 2005; Siefert & Pimlott, 2001).

The main focus of this research was to assess the facilitation and initiation of breastfeeding within a U.S. prison nursery program. Being that the breastfeeding rates of incarcerated women are unknown, and are likely to be low, this research allowed exploration into whether breastfeeding initiation occurs among such a guarded population. Up until now, only one study has been published regarding breastfeeding beliefs and incarcerated women. It is proposed that this case study will add to the current literature by shedding light on breastfeeding initiation within one prison nursery program. In addition, data collected as a result of this case study will be beneficial to health organizations and others studying in this field. Due to various limitations, obtaining data from an individual who works with this special population daily was sufficient for the present study. That person’s perceptions provided detailed information on a
single U.S. prison nursery program. The purpose of this case study was to assess breastfeeding facilitation and initiation within one prison nursery program.

**Research Questions**

- What percentage of prison nursery program participants are perceived to have initiated breastfeeding while in the program?
- What are the barriers to breastfeeding initiation within a prison nursery program?
- In what ways does the prison nursery program facilitate breastfeeding initiation among program participants?

**Definitions**

Correctional facilities--U.S. state and federal prisons.

Special Population--A group of individuals that is disadvantaged in some way, shape, or form.

Rehabilitation--To restore to useful life.

Recidivism --The act of a person repeating an undesirable behavior.
Chapter 2: Review of Literature

The female prison population within the U.S. has substantially increased throughout the years. According to the Bureau of Justice Statistics (BJS), between 1990 and 2014 the number of women under the jurisdiction of state and federal correctional facilities has increased by 182 percent (Stephen, 1997; Carson, 2015). In addition, the number of women in prison has been increasing at a rate 50 percent higher than men since 1980 (The Sentencing Project, 2015). With more women entering state and federal prisons, The U.S. justice system is left to answer the question of how to address the special needs of this growing population. The majority of women within U.S. correctional facilities are of child bearing age and typically come from backgrounds of destitution. Such backgrounds may involve drug and alcohol abuse, poverty, poor education, physical and sexual abuse, and prostitution (Schroeder & Bell, 2005). Furthermore, of the approximately 250,000 women and adolescent girls behind bars, as many as 10,000 may be pregnant and give birth at any given time while in custody (Clarke & Adashi, 2011).

Pregnancy While Incarcerated

Pregnancy behind bars poses a number of health risks for both the mother and the child. While some researchers may argue that incarceration is beneficial for pregnant inmates, other researchers reveal the detrimental health risks posed by the prison environment (Hotelling, 2008). From shackling to lack of medical care, pregnant inmates unfortunately have been subjected to physical, mental, and emotional abuse while in custody (Hotelling, 2008). In addition, numerous prison policies place a constraint on the health and welfare of this special population (Ferzt & Clarke, 2012). However, the health of pregnant inmates is not the only concern. The health and welfare of the children born to women in prison must also be considered.
With almost all state and federal correctional facilities enforcing a separation policy between the new mother and child, a woman giving birth to a child while in custody is a serious concern (Chamber, 2009). Questions of short-term and long-term health effects for both the infant and mother have emerged, moving some states to address this issue of separation. Current research has shown that separating a newborn infant from the mother can cause a host of mental and emotional problems for the child. Problems such as distress, trust and bonding, developmental regression, and relationship building, can all cause major disruptions in a child’s life (Carlson, 2001; Poehlmann, 2005). Furthermore, because of this separation policy, mothers are deprived of their choice to provide essential nutrients and antibodies to their child by breastfeeding.

**Breastfeeding**

The beginning stages of an infant’s life are vital and a newborn needs his/her mother’s breastmilk for healthy growth and development. Recommendations from the Centers for Disease Control and Prevention (CDC), Healthy People 2020, World Health Organization (WHO) and other national and international health organizations, advise that breastfeeding is an essential element for infant health and for improving the health of the mother and the child (Centers for Disease Control and Prevention [CDC], 2012; World Health Organization [WHO], 2015). Breastfeeding yields the benefits of increased sensitivity and attachment between mother and infant, healthy infant weight gain, and assistance in fighting off infections (Britton, Britton, & Gronwaldt, 2006; AWOHNN, 2015). Also, breastfeeding decreases a mother’s risk of depression and stress, diabetes, postpartum infection, cardiovascular disease, and certain cancers (AWHONN, 2015).
Considering that female inmates and their children are known to be a high-risk population, breastfeeding should be of upmost importance to the correctional facilities implementing these programs to inmate mothers. However, breastfeeding rates of incarcerated women are unknown. It is suggested that breastfeeding rates are likely to be low among this special population due to the various limitations mentioned previously, including lack of prison nursery programs, lack of education, socioeconomic status, and the prevalence of illicit drug use (Huang, Atlas, & Parvez, 2012).

Prison Nursery Programs

As of 2015, there are eight states (California, Ohio, Illinois, Indiana, Nebraska, New York, Washington, and West Virginia) with active prison nursery programs that allow infants to stay with their mothers for approximately 12 to 24 months during incarceration. There is only one prison nursery program located in each state. South Dakota also has an existing prison nursery program. However their program only allows for the infant to reside with the mother for 30 days while incarcerated (Carlson, 2009). These nine existing prison nursery programs with the exception of South Dakota have been proven to be beneficial in many ways. Researchers have found that prison nursery programs provide an opportunity for bonding and attachment, prenatal and infant health care, rehabilitation for the mother, and most importantly, a healthy start for the newborn child (Carlson, 1998; 2001).

Decorated with bright colors and baby toys, these nursery programs are developed to provide a safe and engaging environment for the new infants. Though each nursery program may be structured differently, they all serve the purpose of promoting the health of both the mother and the child. It is important for infants being born under these constraints to be given the same chance at a healthy start to life as those infants born outside of prison walls. Unfortunately, the
development of prison nurseries is a controversial issue in the U.S. Many individuals feel that prison is a form of punishment, and our prisons today are becoming too accommodating for prisoners (Porterfield, 2007; Carlson, 2009). Typically this opposition stems from those individuals who do not believe in rehabilitation while in prison (Carlson, 2009). These opposing beliefs may constitute the reasoning behind the scarcity of prison nursery programs today. Nebraska and New York have two of the longest running nursery programs in the U.S. and are two of the few prison nursery programs with published research.

Several studies have evaluated the impact prison nursery programs have on the health of both the mother and child. The majority of research conducted on these programs address questions of bonding and attachment, recidivism, separation and personal experiences (Cassidy et. al., 2010; Carlson, 1998; Chambers, 2009). However, to date, only one study has explored the significance of breastfeeding to incarcerated women. This study by Huang, Atlas, and Parvez (2012) was conducted in New York City jails in which incarcerated women were asked about their thoughts and knowledge of breastfeeding. The study revealed that breastfeeding was favored by incarcerated women, and many of the women connected breastfeeding with the renewing of motherhood.

In efforts to learn more about breastfeeding within prison nursery programs, interviewing a current administrator from an existing U.S. prison nursery program is viable in obtaining the sought after data. Conducting research involving incarcerated women can be somewhat of a challenge because of various regulations such as safety and security, ethics, population vulnerability, and policy. The rationale for choosing the administrator for this case study is that the administrator works with this special population daily. Furthermore, the administrator’s perceptions give a unique perspective on the institutional policies and structures that may
facilitate or hinder breastfeeding within the prison nursery program. The purpose of this case study was to assess breastfeeding facilitation and initiation within one prison nursery program.

As a result, this study sought to answer the following research questions: (1) What percentage of prison nursery program participants are perceived to have initiated breastfeeding while in the program? (2) What are the perceived barriers to breastfeeding initiation within this prison nursery program? (3) In what ways does the prison nursery program facilitate breastfeeding initiation among program participants?

**Theory**

The Social Cognitive Theory (SCT) was the health behavior theory that was utilized for the present case study. This theory served as a framework in the development of the interview questionnaire (Appendix A), which was emailed to the administrator. SCT developed by Albert Bandura in 1977, focuses on how individuals, their environment, and health behavior interact. This specific chain of interaction is known as reciprocal determination and is emphasized throughout this theory. Upholding its reciprocally deterministic viewpoint, SCT highlights that an individual’s or group’s environment has to change to support new behaviors (Glanz, Rimer, & Viswanath, 2008). Though this broad theory is rarely used in its entirety, many of the constructs are utilized from this theory to address health behavior change. For the present study, the theoretical constructs from SCT that were utilized are reciprocal determination, facilitation, observational learning, and incentive motivation.

Research by Edwards (2013), titled, “Confidence in Initiation of Breastfeeding,” utilized SCT to explore and help explain the expectations, knowledge, and experiences of women and midwives with regard to breastfeeding initiation. A systematic review of qualitative studies and focus groups were conducted to better understand the causes of continued breastfeeding and
breastfeeding initiation. The results of this study found that behavior interacts with emotions, perceived abilities, and the environment; this, in turn, affects people’s decisions, experiences, and abilities to enable the successful initiation of breastfeeding. The study also concluded that SCT could be used as a framework to develop strategies to enhance women’s confidence both in the antenatal and in the postnatal period (Edwards, 2013).

**Reciprocal determination.** The interaction between an individual and his or her environment resulting in behavior change is classified as reciprocal determination. The concept of reciprocal determination is extensively used within the Social Cognitive Theory. The support of an individual’s environment is very important when considering behavior change. Reciprocal determination combined with other constructs of SCT provides more of an understanding of many factors that may influence an individual’s behaviors and the process through which learning occurs (Glanz, et al., 2008). Reciprocal determination will be measured by whether the prison nursery program or correctional facility has policies or requirements that may impact breastfeeding initiation. Also, finding out ways the environment within the nursery program may influence or facilitate breastfeeding initiation will be significant.

**Facilitation.** Facilitation makes changing an individual’s behavior easier. Providing the resources and tools needed to change a specific behavior is the concept of facilitation. For this project, finding out whether program participants are supplied with breast pumps or provided breastfeeding education is important. Whether prison nursery programs provide such resources will have an impact on breastfeeding initiation among prison nursery program participants. Through facilitation various barriers can be identified and removed or overcome (Glanz, et al., 2008).
Observational learning. Theoretically, this construct encompasses learning a new behavior by exposure to interpersonal or media displays of them, particularly through peer modeling (Glanz, et al., 2008). Observational learning is governed by four processes: attention, retention, production, and motivation. Analyzing this construct will assist in obtaining the answers to how the environment within the prison nursery program encourages breastfeeding initiation among participants and the various institutional techniques utilized to promote breastfeeding.

Incentive motivation. Incentive motivation is used to change behavior by providing rewards or punishments for desired or undesired behaviors (Glanz, et al., 2008). This is a fairly easy concept to grasp, and a very common practice to use to promote behavior change. Measuring this construct may give insight to institutional policies that may or may not have an influence on breastfeeding within prison nursery programs as well as work cohesively with how the nursery program facilitates and encourages breastfeeding initiation.
Chapter 3: Methods

For the purpose of understanding breastfeeding facilitation and initiation within a prison nursery program, obtaining the perceptions of the individual who works with this special population is significant. To this end, this case study aimed to provide a detailed description of these aspects of a single prison nursery program.

Participant

An administrator from a Midwest prison nursery program was selected to participate in this case study. The administrator is a current employee of an existing prison nursery program implemented here in the U.S. The participant agreed to participate in the case study and provided informed consent (Appendix B) and approval to conduct research was granted by the participant’s institution (Appendix C). Human subjects approval was also granted to the researcher by Eastern Michigan University’s Institutional Review Board (Appendix D).

Instruments

The Social Cognitive Theory provided the framework for the development of the questions for the questionnaire. The questionnaire was used to collect necessary data for the case study and was emailed to the administrator, along with the informed consent. This questionnaire consisted of 10 questions addressing breastfeeding facilitation within the prison nursery program and breastfeeding initiation among nursery program participants. Several of the questions were designed to measure the constructs of reciprocal determination, facilitation, observational learning, and incentive motivation. The questions on the questionnaire are as follows:

1. Since March 2008, how many nursery program participants have been enrolled in your program?
2. Since March 2008, how many babies have been birthed to women within the nursery program?

3. What is the current number of nursery program participants, including babies?

4. Of the current nursery program participants how many have initiated breastfeeding? (facilitation, observational learning)

5. How do you think being in a correctional facility impacts breastfeeding initiation among nursery program participants? (reciprocal determination)

6. List all the ways in which the nursery program facilitates breastfeeding. (facilitation, observational learning)

7. Identify all the ways the environment within the nursery program supports/encourages breastfeeding initiation. (reciprocal determination, facilitation, observational learning)

8. In your opinion, what are the benefits provided by the institution for nursery program participants who initiate breastfeeding? (incentive motivation)

9. In your opinion, what are the barriers posed by the institution for nursery program participants who initiate breastfeeding? (reciprocal determination)

10. What current program requirements or institutional policies exist that may hinder breastfeeding initiation? (reciprocal determination)
Procedures

The interview questionnaire was developed by the researcher. The questionnaire was sent first via email to the participating administrator. Within the email (Appendix E) it was also requested that the questionnaire be completed within one week of the date it was sent. Once the questionnaire was completed and returned, a phone interview was scheduled and conducted to review the answers given to ensure clarity. The participant had the choice of scheduling a time with the researcher that was convenient for her to go over answers given in the questionnaire.

The questionnaire was estimated to take no longer than a half hour, and the follow-up phone interview with the researcher took no longer than an hour. The follow up telephone interview was not recorded; however, the researcher took notes of any additional information that was beneficial for the purpose of the study.

Research Design

A case study design was utilized for the purpose of this research. Because this case study only assessed breastfeeding facilitation and initiation within one prison nursery program, utilizing this design allowed for detailed information to be gathered. Through the questionnaire and follow up telephone interview, the researcher was able to collect a sufficient amount of data on the Midwest prison nursery program. The information obtained included both qualitative and quantitative data.

Data Analysis

All answers to each question from the questionnaire was thoroughly reviewed and analyzed. The researcher took into account the constructs being measured and analyzed the themes that developed from the data. The information provided was grouped together for the
purposes of answering the proposed research questions. All significant responses and electronic notes were included in the findings of the case study.
Chapter 4: Results

Implemented in March 2008, the Midwest prison nursery program assessed in the present case study has provided assistance to 228 incarcerated mothers throughout the years. Of the 228 eligible mothers who have enrolled in the program, 150 babies have returned to live with their mothers on the unit. While in the program, both mother and baby are able to receive proper medical attention and preventative health care. The mothers also receive the essentials they need to care for the baby, such as diapers, clothing, bottles, and hygiene products. The nursery program aims to provide an opportunity for mother-infant bonding and attachment to rebuild a sense of relationship for the mother. Also, parenting education and child development training is provided to the mothers in the nursery program.

The eligibility requirements for program participants include the following: (1) the offender must be pregnant when entering custody of the Department of Corrections; (2) the offender’s release date is not more than 18 months after the assumed delivery date; (3) the offender has never been convicted of a violent crime or any type of child abuse or endangerment; (4) the offender and her child must meet established mental health and medical criteria; (5) the offender must have custody of child and have an eighth grade reading level; and (6) the offender must have a conduct history free of any Class A findings of guilt for the past 12 months and free of any Class B findings of guilt for the past 6 months.

Each eligible mother participating in the program has her own private room. These rooms include a bed for the mother, crib, and dresser and small closet for the baby. With privacy, mothers are able to feed and care for their infant peacefully while living on the unit. The housing unit also has a day room and two nursery rooms where the mothers and babies can interact with
each other. The unit can accommodate up to ten mothers and their babies. However, if more room is needed arrangements can be made for eligible participants.

Additionally, within the same housing unit, there is a hall of women who are not in the program but are able to interact with the mothers and babies. These women fit into the same criteria as those who are in the program so safety is not a concern. All of the trained nannies are part of this population of women staying on the unit, and they mainly assist with childcare for the nursery program participants. Subsequently, this creates a more positive environment for the nursery program because these particular inmates want to be around the babies. They also find joy in being able to care and interact with the babies and nursery program participants.

**Questionnaire & Telephone Interview**

The responses provided by the administrator from the questionnaire and the follow up telephone interview gave clear indication that breastfeeding facilitation and initiation occurs within this prison nursery program. The importance of breastfeeding and the various ways the nursery program facilitates breastfeeding initiation was also expressed by the administrator throughout the follow up telephone interview. The following is a summary of the administrator responses to each of the survey questions.

*What is the current number of nursery program participants, including babies?*

Currently within the nursery program at this correctional facility, there are eight nursery program participants. Six of the eight women are pregnant and two have delivered. As previously mentioned, this Midwest nursery program has assisted 228 mothers and 150 babies since the start of the program. At any given time, the number of women in the program can change depending on an inmate’s time of release or new enrollees.

*Of the current nursery program participants how many have initiated breastfeeding?*
Of the two women who have delivered, one program participant initiated breastfeeding for a period of six weeks and afterwards did a combination of breastfeeding and formula feeding. After some time, however, she decided to stop breastfeeding. No reason of why she quit was given at the time of the interview. As for the other mother, the administrator did not go into detail as to why she chose not to initiate breastfeeding other than the reason of not wanting to do so.

Though breastfeeding is not mandatory in the nursery program, it is perceived by the administrator that many of the nursery program participants, since the start of the nursery program in 2008, have initiated breastfeeding. However, how long these women chose to breastfeed differed. The administrator explained, “Because the women’s time in the program may be different than others that may have an impact on breastfeeding initiation and how long they breastfeed while in the program.” While working with the nursery program participants, the administrator perceived that some women may have breastfed up to a year while others in the program breastfed for only a few months.

The administrator was unable to provide a number of how many women initiated breastfeeding since the start of the program or how many may initiated breastfeeding while in the nursery program but quit shortly thereafter. It was indicated that no physical record of breastfeeding initiation was kept of those program participants. However, it was found that their decision to quit was similar to that of women who are not incarcerated. As discussed with the administrator via the telephone, women in general may choose to not initiate breastfeeding or may quit due to discomfort.

*How do you think being in a correctional facility impacts breastfeeding initiation among nursery program participants?*
Breastfeeding is highly encouraged within the program, but as previously stated, it is not mandatory, so choosing to breastfeed is the choice of the program participant. When the administrator was asked via the questionnaire about what program requirements or institutional policies exist that may hinder breastfeeding initiation, she replied, “None. Mothers are free to breastfeed anywhere on the unit based on her level of comfort.” Also when asked how did she think being in a correctional facility impacts breastfeeding initiation among nursery program participants, she replied, “Mothers are afforded the same opportunities to breastfeed as the general population.” For more clarity these two questions were further discussed during the telephone interview.

During the discussion the administrator explained that most women who choose to breastfeed while in the program have breastfed before, prior to being incarcerated; so it is natural for them, and they are comfortable doing it. On the contrary, for some new mothers within the program, they might not be as comfortable breastfeeding simply because it is their first time. The trained nannies who stay in the unit or breastfeeding specialist are able to help in this instance. The feeling of discomfort during breastfeeding initiation can be experienced by any mother, whether incarcerated or not. Mothers being afforded the same opportunities to breastfeed anywhere in the unit as if they were in general population also help to increase the nursery program participants’ level of comfort while incarcerated. Having the opportunity to breastfeed whether in their room, class, or common area, further identifies how breastfeeding initiation is encouraged.

**List all the ways in which the nursery program facilitates breastfeeding.**

Breastfeeding facilitation within the program is very important. The administrator explained via the questionnaire that, “Mothers and expectant mothers are given breastfeeding
information in their prenatal classes, breastfeeding information in their meetings with WIC counselors, and have access to a lactation coach/specialist.” Through the nursery program’s partnership with the Women, Infants, and Children (WIC) program, the lactation specialist and counselors provide guidance to support breastfeeding initiation among program participants. In addition, once the mother is released from the correctional facility, they can follow up with their local WIC office and continue receiving the benefits from the WIC program and food vouchers.

**Identify all the ways the environment within the nursery program supports/encourages breastfeeding initiation.**

With grant funding and donations, the nursery program is able to provide breast pumps, breastmilk storage bags and other items needed to facilitate breastfeeding initiation. The administrator explained that, “Women who want to breastfeed are told they will be supported to encourage their decision.” This support may come from the WIC program, correctional staff, classes, or the trained nannies that work in the unit. Additionally, as previously stated, nursery program participants are free to breastfeed anywhere in the unit. Whether in designated nursery rooms, the day room, classes, or their private room, breastfeeding mothers are encouraged to breastfeed where they feel comfortable. In turn, this creates a supportive environment for breastfeeding mothers in the nursery program. Having such support also allows new mothers to build trust in those around them and assures the proper care for her child.

**In your opinion, what are the benefits provided by the institution for nursery program participants who initiate breastfeeding?**

The benefits of being a nursery program participant who breastfeeds or plans to breastfeed was discussed with the administrator via telephone. Through the facilities partnership with the WIC program, many of the mothers who plan to breastfeed or are currently
breastfeeding receive many benefits provided by the WIC program. The WIC program strongly encourages breastfeeding, so by providing access to breastfeeding counselors and lactation specialists, the mothers in the nursery program have the support they need to better their chances for breastfeeding initiation. Also, the infants born to mothers in the program receive food benefits through the WIC program.

In addition to the WIC benefits, all pregnant women within the correctional facility, whether in the nursery program or not, receive the same calorie meals. These meals help support those who are breastfeeding or plan to breastfeed and include milk and a pregnancy snack. Being that nursery program participants are provided three meals a day and a pregnancy snack during their stay, the mothers do not receive food benefits for themselves through the WIC program.

In your opinion, what are the barriers posed by the institution for nursery program participants who initiate breastfeeding?

Subsequently, the one barrier that was mentioned via the questionnaire was not an institutional barrier according to the administrator, but a timeframe barrier. The administrator stated, “Mothers are often transported back to the facility 24 hours after delivery if the delivery was vaginal and there were no complications for her, while the babies stay a minimum of 48 hours.” This indicates that breastfeeding initiation may not occur right after delivery but rather once the baby is reunited with the mother at the facility. Furthermore, during this time of separation, if the mother decides to breastfeed, the mother can choose to leave colostrum (early form of breastmilk) for the baby at the hospital. Unfortunately, if there is not enough colostrum produced for the purposes of feeding the baby, this can lead to supplementation. Supplementing breastmilk with formula can inhibit or delay the establishment of maternal milk supply, alter infant bowel flora, and interfere with maternal-infant bonding (Holmes, McLeod, & Bunik,
This could possibly shorten the window for optimal breastfeeding initiation among nursery program participants.

**Social Cognitive Theory**

The Social Cognitive (SCT) provided the framework for the questionnaire and was also used to assess the interaction between the prison nursery program, program participants, and breastfeeding initiation. The constructs of SCT that were measured include reciprocal determination, facilitation, observational learning, and incentive motivation.

**Facilitation.** Facilitation was a major construct that was supported by the results of this case study. The nursery program addressed breastfeeding facilitation by providing breastfeeding classes, counselors/specialist, pumps, milk storage bags, and specific places to store breast milk to support the mothers of the program. Also through grants and donations, nursery program participants are able to receive any additional items that will aid in breastfeeding initiation.

**Reciprocal determination.** This construct was measured by the correctional facility’s impact on breastfeeding facilitation and initiation. However, the questionnaire and the follow up telephone interview, revealed that no requirements or institutional policies exist that may hinder breastfeeding initiation. Nursery program participants are free to breastfeed anywhere in the unit that they feel comfortable. Being that the mothers have their own private rooms, access to lactation specialist, training classes, and peers who may breastfeed in the program, the nursery program’s environment may influence breastfeeding initiation. On the contrary, it is a personal decision of the nursery program participants who choose not to initiate breastfeeding.

**Observational learning & incentive motivation.** Both constructs were measured by how the prison nursery program further encourages/promotes breastfeeding initiation. For nursery program participants, observational learning is mainly established in their breastfeeding
and parenting classes. In these particular classes, videos and booklets are provided that give important information on breastfeeding and demonstrations on breastfeeding techniques.

Incentives for nursery program participants who are breastfeeding or plan to breastfeed is provided in calorie meals and via the WIC program. All pregnant women whether in the nursery program or not receive the same calorie meals, and, in addition, they are allowed a pregnancy snack and milk. Nursery program participants also are allowed to have the WIC items that are authorized for their infants. This may contain fruits and vegetable, juice, bread, and so forth.
Chapter 5: Summary

Discussion

The research questions presented in this case study include the following: (Q1) What percentage of prison nursery program participants are perceived to have initiated breastfeeding while in the program? (Q2) What are the perceived barriers to breastfeeding initiation within this prison nursery program? (Q3) In what ways does the prison nursery program facilitate breastfeeding initiation among program participants? The results obtained addressed two of the three research questions.

In what ways does the prison nursery program facilitate breastfeeding initiation among program participants?

The case study revealed a number of ways this single Midwest prison nursery program facilitates breastfeeding initiation among program participants. The prison nursery program allows for breastfeeding mothers to breastfeed anywhere in the unit. The mothers are able to breastfeed in the day room, within classes, and privately in their own rooms.

Grant money and donations gifted to the nursery program assist in providing the essentials for breastfeeding mothers, such as breast pumps, cover ups, breastmilk storage bag and other items for the mother and child. In addition, mothers and expecting mothers are provided breastfeeding information in their prenatal classes and from the lactation counselors/specialists. Through the partnership with the WIC program, the Midwest prison nursery program also further assist breastfeeding mothers in receiving the proper nutrients for their infant.

What are the perceived barriers to breastfeeding initiation within this prison nursery program?

Only one “timeframe” barrier to breastfeeding initiation was found as a result of this case study. Mothers are separated from their child 24 hours after child birth for approximately one
day or longer, depending on the circumstance. During this critical time period after delivery, any moment an infant is separated from his/her mother, can have a significant impact on breastfeeding initiation and duration (Holmes, McLeod, & Bunik, 2013). Though the mother may leave colostrum behind for the baby, separation can impact maternal milk supply, successful positioning and latching of the baby to the breast, and bonding and attachment.

What percentage of prison nursery program participants are perceived to have initiated breastfeeding while in the program?

Though 228 pregnant women have been enrolled in the selected Midwest prison nursery program, no record has been kept regarding how many of these women initiated breastfeeding during their stay. Because of this, the administrator was unable to provide the researcher with this information. Yet, there was indication that many of the women who were in the program have initiated breastfeeding. Some were perceived to have breastfed longer than others, but time in the program may have had some effect on the duration of breastfeeding.

On the other hand, of the two current nursery program participants who have delivered one mother initiated breastfeeding and continued to exclusively breastfeed for a period of six weeks. The other mother chose not to breastfeed, and six are waiting to deliver.

Conclusion

Assessing breastfeeding facilitation and initiation within one prison nursery program shed some light on the true reality of breastfeeding mothers caring for children during incarceration. Due to the lack of data on the topic of breastfeeding within prison nursery programs, the findings of this study will add to the current literature. The information provided by the administrator will also help society better understand prison nursery programs and the breastfeeding support offered to incarcerated mothers.
As the female prison population continues to rise, raising children behind bars may continue to be a controversial issue here in the U.S. However, prison nursery programs have been proven to be beneficial in many ways, and collectively, they have provided an opportunity for a renewing of motherhood. It is evident that separating a child from his/her mother at birth can cause detrimental health issues for both the mother and the child. The implementation of prison nursery programs is one answer to addressing this issue of separation.

Breastfeeding is highly encouraged within this Midwest prison nursery program, which can assist mothers in developing a healthy relationship with their child. Breastfeeding plays an important role when creating the bond between mother and infant and is essential for healthy growth and development. Though incarcerated, the mothers of the nursery program have the freedom to breastfeed and are encouraged to do so by the prison nursery program.

**Recommendations**

Being that the breastfeeding rates of incarcerated women within prison nursery programs are unknown, this study provides an opportunity for further research to be conducted. It is suggested that a long-term research study be implemented assessing breastfeeding initiation and duration among prison nursery program participants, from each existing U.S. prison nursery program. This information would be vital to national and international health organizations, whose goals are to support and encourage breastfeeding and breastfeeding initiation globally. In addition, the findings can be used to assist in the development of prison nursery programs that further promote breastfeeding or the implementation of breastfeeding initiatives within existing prison nursery programs. Lastly, it showed the need for existing prison nursery programs to implement an evaluation process to track how well they are providing for breastfeeding mothers and their babies.
Limitations

When drawing any conclusions from the results of this case study, there are some limitations. The results of this case study provided a detailed description of breastfeeding facilitation and initiation within one prison nursery program. These findings are specific to this Midwest prison nursery program and may not be generalized to other existing prison nurseries here in the U.S. From this case study, the various ways breastfeeding facilitation and initiation occurs within a single prison nursery program were identified. The results reported in this study were derived from the perception of one working administrator from the selected prison nursery program. The perceptions of the administrator cannot be generalized to the perceptions of the nursery program participants or others.
References


Appendix A: Questionnaire

Dear Administrator,

This questionnaire will help assess breastfeeding facilitation and initiation within a prison nursery program. Your insight will provide valuable information that will help society and others studying in this field to better understand the significance of prison nursery programs. The answers to this questionnaire will only be used for educational purposes. The results of this research will be published electronically as a master’s thesis and therefore available electronically. Identifiable information will not be used for these purposes.

Directions: Please answer ALL questions within this questionnaire. Type answers below each question listed. This questionnaire should take no longer than 30 minutes of your time.

Q1: Since March 2008, how many nursery program participants have been enrolled in your nursery program?

Q2: Since March 2008, how many babies have been birthed to women within the nursery program?

Q3: What is the current number of nursery program participants, including babies?
Q4: Of the current nursery program participants how many have initiated breastfeeding?

Q5: How do you think being in a correctional facility impacts breastfeeding initiation among nursery program participants?

Q6: List all the ways in which the nursery program facilitates breastfeeding?

Q7: Identify all the ways the nursery program supports/encourages breastfeeding initiation?

Q8: In your opinion, what are the benefits provided by the institution for nursery program participants who initiate breastfeeding?

Q9: In your opinion, what are the barriers posed by the institution for nursery program participants who initiate breastfeeding?

Q10: What current program requirements or institutional policies exist that may hinder breastfeeding initiation?
Appendix B: Informed Consent Form

Informed Consent Form

Eastern Michigan University
School of Health Promotion and Human Performance

Informed Consent Form for program Administrators of U.S. prison nursery programs. We are inviting you to participate in a research study, titled “Case Study: Breastfeeding Facilitation and Initiation within one Prison Nursery Program.”

Jessica Wallace is a student at Eastern Michigan University. Her faculty advisor is Dr. Joan Cowdery. Throughout this form, Ms. Wallace will be referred to as the “investigator.”

Description of the Study:

The purpose of this study is to assess breastfeeding facilitation and initiation within one prison nursery program. Specifically, the investigator is seeking to answer the following research questions: (1) What percentage of prison nursery program participants are perceived to have initiated breastfeeding while in the program? (2) What are the perceived barriers to breastfeeding initiation within a prison nursery program? (3) In what ways does the prison nursery program facilitate breastfeeding initiation among program participants? You can help by completing the questionnaire that should take no longer than a half an hour to complete.

This research is unfunded.

What will happen if I participate in this study?

Participation in this study involves:

- Completion of a 30-minute Questionnaire
- Approximately one hour follow-up telephone interview with investigator

Benefits and Risk:

As a participant in this study, you will not benefit personally. However, you will be helping society to better understand breastfeeding facilitation and initiation within a prison nursery program. In addition, you will be providing valuable information for national health organizations and others studying in this field. The primary risk of participation in this study is a potential loss of confidentiality.
What are the alternatives to participation?
The alternative is not to participate.

How will my information be kept confidential?
We will keep your information confidential by not collecting any identifiable data. Your information will be stored in a password protected computer, and the documents sent will also be password protected. We will make every effort to keep your information confidential, however, we cannot guarantee confidentiality. There may be instances where federal and state law requires disclosure of your records.

We may share your information with other researchers outside of Eastern Michigan University. If we share your information, we will remove any and all identifiable information so that you cannot reasonably be identified.

The results of this research will be published as a master’s thesis and therefore available electronically. The results may also be published in an academic journal or used for teaching. No identifiable information will be used for these purposes.

Storing study information for future use
We would like to store your information from this study for future use related to breastfeeding among prison nursery program participants. Your information will be labeled with a code and not your name. Your information will be stored in a password-protected file. Your de-identified information may also be shared with researchers outside of Eastern Michigan University. Please initial her or not you allow us to store your information:

\[
\begin{array}{cc}
\text{Yes} & \text{No} \\
\end{array}
\]

Study contact information
If you have any questions about the research, you can contact the Principal Investigator, Jessica (Clay) Wallace at (734)377-9127. You can also call Jessica's advisor, Dr. Joan Cowdery at (734)487-2811.

For questions about your rights as a research subject, contact the Eastern Michigan University Human Subjects Review Committee at (734)487-3090.
Voluntary Participation

Your participation is strictly voluntary. Feel free to ask questions at any time during the course of this study. You will not be credited or compensated in any way for your participation.

Right to Withdraw

You have the right to refuse participation and withdraw from the study at any time. You may refuse to answer any questions that are asked during the interview. No penalties or negative consequences will result from your withdraw or refusal.

Statement of Consent

I have read this form. I have had an opportunity to ask questions and am satisfied with the answers I received. I give my consent to participate in this research study.

Signatures

Name of Subject

Signature of Subject

Date

I have explained the research to the subject and answered all his/her questions. I will give a copy of the signed consent form to the investigator.

Name of Person Obtaining Consent

Signature of Person Obtaining Consent

Date

Please keep this copy for future reference
July 24, 2015

Jessica Wallace
1230 Stamford Rd.
Ypsilanti, MI 48198

RE: Research Application

Dear Ms. Wallace:

Your request to conduct a research project titled "Case Study: Breastfeeding Facilitation and Initiation among Prison Nursery Program Participants" has been reviewed by an internal review panel.

I am pleased to inform you that the application has been approved. Please contact Superintendent McCauley to proceed.

Sincerely,

Sarah Schelle
Research Analyst, Research & Technology

cc:

Aaron Garner, Executive Director of Research and Technology
Appendix D: Human Subjects Approval

RESEARCH @ EMU

UHSRC Determination: EXEMPT

DATE: August 28, 2015

TO: Jessica (Clay) Wallace
    Eastern Michigan University

Re: UHSRC: # 797323-1
    Category: Exempt category 2
    Approval Date: August 28, 2015

Title: Case Study: Breastfeeding Facilitation and Initiation within one Prison Nursery Program

Your research project, entitled Case Study: Breastfeeding Facilitation and Initiation within one Prison Nursery Program, has been determined Exempt in accordance with federal regulation 45 CFR 46.102. UHSRC policy states that you, as the Principal Investigator, are responsible for protecting the rights and welfare of your research subjects and conducting your research as described in your protocol.

Renewals: Exempt protocols do not need to be renewed. When the project is completed, please submit the Human Subjects Study Completion Form (access through IRBNet on the UHSRC website).

Modifications: You may make minor changes (e.g., study staff changes, sample size changes, contact information changes, etc.) without submitting for review. However, if you plan to make changes that alter study design or any study instruments, you must submit a Human Subjects Approval Request Form and obtain approval prior to implementation. The form is available through IRBNet on the UHSRC website.

Problems: All major deviations from the reviewed protocol, unanticipated problems, adverse events, subject complaints, or other problems that may increase the risk to human subjects or change the category of review must be reported to the UHSRC via an Event Report form, available through IRBNet on the UHSRC website.

Follow-up: If your Exempt project is not completed and closed after three years, the UHSRC office will contact you regarding the status of the project.

Please use the UHSRC number listed above on any forms submitted that relate to this project, or on any correspondence with the UHSRC office.

Good luck in your research. If we can be of further assistance, please contact us at 734-487-3060 or via e-mail at human.subjects@emich.edu. Thank you for your cooperation.

Sincerely,

Jennifer Kellman-Fritz, PhD
Chair
University Human Subjects Review Committee
Appendix E: Email Script

Ms. --------,

Good Morning. My name is Jessica (Clay) Wallace and I am a Health Education graduate student at Eastern Michigan University. The purpose of my research is to assess breastfeeding facilitation and initiation within a prison nursery program.

I have attached an Informed Consent form and questionnaire to this email. Please sign the consent form and complete all questions on the questionnaire. The questionnaire should take no longer than 30 minutes of your time to complete. Your participation is entirely voluntary and you can withdraw at any time. Both the signed consent form and completed questionnaire should be returned via email by 09/00/2015.

A follow up phone interview will be conducted once all documents are returned. Along with those documents, please indicate a time and date that is convenient for you to review any answers provided for the questionnaire. The follow up interview should take no longer than one hour.

Any personal information collected will be kept confidential. Your information will be stored on a password protected computer, and the documents sent will also be password protected. This case study is being done to fulfill an educational requirement for a graduate degree. The results of this case study may be published or used for teaching. If you have any questions you may reach me by email Jclay1@emich.edu or by phone at (734) 272-9127. Thank you for your participation in this case study.

Thank You,

Jessica (Clay) Wallace