

MATERNAL INCARCERATION & CHILDREN

...giving children a voice, creating an agenda for action...

A joint project of.....



Council of
Elizabeth Fry
Societies
of Ontario



The federal government has funded us to learn more about the opinions and needs of mothers and children, before, during, and after a period of maternal incarceration in Ontario.

Hearing from you helps us improve our services, design new programs, and advocate on behalf of women and children.

Please take a few minutes to fill out a survey about your children, the arrangements you made for their care, any worries, and your hopes for the future.

This survey is **voluntary**, **anonymous** and **confidential**. Skip over any questions that make you feel uncomfortable. When finished, seal it in the attached envelope and give it to the woman who gave it to you.

Use the white envelope to write us about any issue not covered in this survey, or to ask for a copy of the final report. You can also add comments to the back of this form.

Thank you for helping us understand your situation.

[letter head]

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Principal Co-Investigators

IF YOU AGREE TO COMPLETE THIS SURVEY PLEASE READ AND SIGN THIS CONSENT FORM

I have read the previous page and understand that I am being asked to complete a questionnaire about my child or children. Some of the questions ask about me. I also understand that:

< my participation in this study is **voluntary** and I do not have to complete this survey

< I can **refuse** to answer any of the questions that I do not want to answer

< all my answers will be **confidential** and my participation in this study is **anonymous**

< this research is conducted by two non-profit agencies with the consent of the Ministry of Public Safety and Security but the project is **independent** of the Ministry

< accordingly, whether or not I complete this survey or any of my answers will have no bearing on any decision made about me by the Ministry or the administration of this institution

< whether or not I complete this survey will have no bearing on the services I receive from Elizabeth Fry

Signature

Today's date

Signature of Witness

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If you agree to complete this survey, sign the consent for and return it to the woman from Elizabeth Fry.

Complete as much of this survey as you can and seal it in the big envelope to keep your answer private.

How many children do you have **under** 18 years of age? _____ How many 18 or over? _____

We will be asking about the children who are **under** 18 years old.

Name of this institution: _____

About how far is that from where your children live? _____

Are you in contact with your children now? " No " Yes (some or all of them) by:

- " letters
- " video/audio tapes
- " telephone calls
- " by contact through others
- " visits
- " another way or ways, _____

If they have **not** paid you a visit here, why is that? Several reasons may apply so check all that do.

- " they live too far away
- " not enough money to make the trip
- " the current caregiver does not believe they should come to see me
- " I don't want my children coming here
- " I just got here recently
- " the visiting arrangements here are not nice for children
- " other reason, _____

Before entering custody, how much time did you have to arrange where your children would live?

- " no time at all
- " a day
- " a few days
- " a few weeks
- " a few months

Were you breast feeding a baby or had to ween a baby to start this sentence? " yes " no

What are your plans for release, where your children are concerned?

Are there things you worry about that could make that difficult?

These questions are about you. Please don't answer any that make you feel uncomfortable

How old are you? _____ When your first child was born, how old were you? _____

Do you describe yourself as one of Canada's indigenous/Aboriginal peoples? " yes " no

Do you describe yourself as a visible minority? " yes " no

Were you born in Canada? " yes " no, I was born in _____ and came to Canada in _____ (year)

Is English your first language? " yes " no, my first language is _____

What is your current status here? " detention " sentenced " I've been both

If applicable, how long is the sentence you are serving now? _____

If applicable, how long have you spent/did you spend under detention? _____

Are you now or have you been pregnant at any point during this stay in custody? " yes " no

In general, how is your health? " excellent " very good " good " fair " poor

Were you employed at the time you were arrested/charged? " no " full time " part time

At the time of your arrest/charge with the offences that brought you here, how were you supporting your family?
[several of these may apply to you]

" employment of myself and/or partner " disability pension " other type of pension " Ontario Works
" EI benefits " workers compensation " child support/alimony " own business
" other, _____

Before I was admitted to custody, I lived in a safe and stable residence that met my family's needs. Do you agree or disagree with that statement?

" strongly agree " agree " neither agree nor disagree " disagree " strongly disagree

Not including kindergarten, how many years of elementary and secondary school did you finish? _____

Any post-secondary? _____

When you were a child or teenager, were you separated from a parent because of incarceration?

" no " yes, father or father figure " yes, mother or mother figure " both

Will you be returning to a marital or common-law relationship when released? " no " yes " not sure

Being a mother is a very important role. Yet every woman faces some challenges to being the best mother she can be. Do any of these factors affect you in your role as a mother?

problems with my health	" does not apply to me	" a little bit	" this affects my parenting
not having family to help me	" does not apply to me	" a little bit	" this affects my parenting
having a special needs child	" does not apply to me	" a little bit	" this affects my parenting
an abusive partner or ex-partner	" does not apply to me	" a little bit	" this affects my parenting
my own abuse as a child	" does not apply to me	" a little bit	" this affects my parenting
not having enough money	" does not apply to me	" a little bit	" this affects my parenting
not being confident in my parenting	" does not apply to me	" a little bit	" this affects my parenting
spending too much time at work	" does not apply to me	" a little bit	" this affects my parenting
conflict with their father	" does not apply to me	" a little bit	" this affects my parenting
living in a bad neighbourhood	" does not apply to me	" a little bit	" this affects my parenting
too many other responsibilities	" does not apply to me	" a little bit	" this affects my parenting
my problems with substance abuse	" does not apply to me	" a little bit	" this affects my parenting
my problems with alcohol	" does not apply to me	" a little bit	" this affects my parenting
other, _____	" does not apply to me	" a little bit	" this affects my parenting
other, _____	" does not apply to me	" a little bit	" this affects my parenting

Which factors help you in your role as a mother?

I love my kids deeply	" does not apply to me	" a little bit	" this affects my parenting
I have supportive family & friends	" does not apply to me	" a little bit	" this affects my parenting
I have lots of practice with kids	" does not apply to me	" a little bit	" this affects my parenting
I have really good kids	" does not apply to me	" a little bit	" this affects my parenting
other, _____	" does not apply to me	" a little bit	" this affects my parenting
other, _____	" does not apply to me	" a little bit	" this affects my parenting

The next pages have questions about your child or children.

There is one page for each child.

Start with your eldest child under 18.

If you have more than six children, and you want to tell us about all of them, please ask for extra pages.

These questions are about your **eldest** child, your **only** child, or your **only child under 18**.

Is this child... female male How old is s/he? _____

What is your relationship to this child?

biological child step child adopted child child of a family member other _____

Was this child living with you when you were arrested? yes no, s/he was living with _____

What is the relationship right now between this child and his or her biological father?

live together regular visits occasional visits no contact other _____

How many different residences has this child had since your admission to custody? _____

Who is this child living with right now?

my mother/parents my sister/brother one of my older children other family member
 friend the child's father the child's step-father foster care
 other, _____

Do you feel your child is safe there? yes mixed feelings no

Is the Children's Aid Society involved with this living arrangement?

no CAS involvement supervision order wardship other, _____

Did this child have to change residences to live with that caregiver? yes no

Did this child have to change schools to live with that caregiver? yes no

Does this child know you two are separated because of a prison sentence? yes no

Have you discussed your incarceration directly with him or her? yes no

How do you think this child is most affected by the separation from you?

What are your biggest worries about this child right now?

Is this the first time this child has been separated from you because of incarceration? yes no

*If this is your **only** child, or your **only child under 18**, please turn to the back page of this form.*

These questions are about your **next** child, or your youngest if you have two children.

Is this child... female male How old is s/he? _____

What is your relationship to this child?

biological child step child adopted child child of a family member other _____

Was this child living with you when you were arrested? yes no, s/he was living with _____

What is the relationship right now between this child and his or her biological father?

live together regular visits occasional visits no contact other _____

How many different residences has this child had since your admission to custody? _____

Who is this child living with right now?

my mother/parents my sister/brother one of my older children other family member
 friend the child's father the child's step-father foster care
 other, _____

Do you feel your child is safe there? yes mixed feelings no

Is the Children's Aid Society involved with this living arrangement?

no CAS involvement supervision order wardship other, _____

Did this child have to change residences to live with that caregiver? yes no

Did this child have to change schools to live with this caregiver? yes no

Is this child now living apart from some or all brothers or sisters? yes no has no sibs

Does this child know you two are separated because of a prison sentence? yes no

Have you discussed your incarceration directly with him or her? yes no

How do you think this child is most affected by the separation from you?

What are your biggest worries about this child right now?

Is this the first time this child has been separated from you because of incarceration? yes no

*If you have **two children**, or two children under 18, please turn to the back page of this form..*

These questions are about your **next** child, or your youngest if you have three children.

Is this child... female male How old is s/he? _____

What is your relationship to this child?

biological child step child adopted child child of a family member other _____

Was this child living with you when you were arrested? yes no, s/he was living with _____

What is the relationship right now between this child and his or her biological father?

live together regular visits occasional visits no contact other _____

How many different residences has this child had since your admission to custody? _____

Who is this child living with right now?

my mother/parents my sister/brother one of my older children other family member
 friend the child's father the child's step-father foster care
 other, _____

Do you feel your child is safe there? yes mixed feelings no

Is the Children's Aid Society involved with this living arrangement?

no CAS involvement supervision order wardship other, _____

Did this child have to change residences to live with that caregiver? yes no

Did this child have to change schools to live with this caregiver? yes no

Is this child now living apart from some or all brothers or sisters? yes no has no sibs

Does this child know you two are separated because of a prison sentence? yes no

Have you discussed your incarceration directly with him or her? yes no

How do you think this child is most affected by the separation from you?

What are your biggest worries about this child right now?

Is this the first time this child has been separated from you because of incarceration? yes no

If you have **three children** under 18, please turn to the back page of this form.

These questions are about your **next** child, or your youngest if you have four children.

Is this child... female male How old is s/he? _____

What is your relationship to this child?

biological child step child adopted child child of a family member other _____

Was this child living with you when you were arrested? yes no, s/he was living with _____

What is the relationship right now between this child and his or her biological father?

live together regular visits occasional visits no contact other _____

How many different residences has this child had since your admission to custody? _____

Who is this child living with right now?

my mother/parents my sister/brother one of my older children other family member
 friend the child's father the child's step-father foster care
 other, _____

Do you feel your child is safe there? yes mixed feelings no

Is the Children's Aid Society involved with this living arrangement?

no CAS involvement supervision order wardship other, _____

Did this child have to change residences to live with that caregiver? yes no

Did this child have to change schools to live with this caregiver? yes no

Is this child now living apart from some or all brothers or sisters? yes no has no sibs

Does this child know you two are separated because of a prison sentence? yes no

Have you discussed your incarceration directly with him or her? yes no

How do you think this child is most affected by the separation from you?

What are your biggest worries about this child right now?

Is this the first time this child has been separated from you because of incarceration? yes no

*If you have **four children**, or four children under 18, please turn to the back page of this form.*

These questions are about your **next** child, or your youngest if you have five children.

Is this child... female male How old is s/he? _____

What is your relationship to this child?

biological child step child adopted child child of a family member other _____

Was this child living with you when you were arrested? yes no, s/he was living with _____

What is the relationship right now between this child and his or her biological father?

live together regular visits occasional visits no contact other _____

How many different residences has this child had since your admission to custody? _____

Who is this child living with right now?

my mother/parents my sister/brother one of my older children other family member
 friend the child's father the child's step-father foster care
 other, _____

Do you feel your child is safe there? yes mixed feelings no

Is the Children's Aid Society involved with this living arrangement?

no CAS involvement supervision order wardship other, _____

Did this child have to change residences to live with that caregiver? yes no

Did this child have to change schools to live with this caregiver? yes no

Is this child now living apart from some or all brothers or sisters? yes no has no sibs

Does this child know you two are separated because of a prison sentence? yes no

Have you discussed your incarceration directly with him or her? yes no

How do you think this child is most affected by the separation from you?

What are your biggest worries about this child right now?

Is this the first time this child has been separated from you because of incarceration? yes no

*If you have **five children**, or five children under 18, please turn to the back page of this form.*

These questions are about your **next** child, or your youngest if you have six children.

Is this child... female male How old is s/he? _____

What is your relationship to this child?

biological child step child adopted child child of a family member other _____

Was this child living with you when you were arrested? yes no, s/he was living with _____

What is the relationship right now between this child and his or her biological father?

live together regular visits occasional visits no contact other _____

How many different residences has this child had since your admission to custody? _____

Who is this child living with right now?

my mother/parents my sister/brother one of my older children other family member
 friend the child's father the child's step-father foster care
 other, _____

Do you feel your child is safe there? yes mixed feelings no

Is the Children's Aid Society involved with this living arrangement?

no CAS involvement supervision order wardship other, _____

Did this child have to change residences to live with that caregiver? yes no

Did this child have to change schools to live with this caregiver? yes no

Is this child now living apart from some or all brothers or sisters? yes no has no sibs

Does this child know you two are separated because of a prison sentence? yes no

Have you discussed your incarceration directly with him or her? yes no

How do you think this child is most affected by the separation from you?

What are your biggest worries about this child right now?

Is this the first time this child has been separated from you because of incarceration? yes no

If you have more than six children, and want to tell us about them, ask for more forms.

Has answering these questions made you feel anxious or upset?

" yes, quite a lot

" yes, a bit

" no, not at all

If yes, please tell the woman who gave you this form how you are feeling.

Is there anything else you want to tell us about you or your children?

Would you like a copy of the research report that comes out of this study?

If so, use the attached white envelope to tell us an address where we can mail you the report. We expect the report to be available by December 2002.