Evaluation of a Family Wellness Course for Persons in Prison

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Abstract
This research supports the value of maintaining the family ties of persons in prison. Family healing work will likely affect multiple relationships within the family, especially for the children of prisoners, and increase the possibility of healthy and productive life choices for all family members. The Family Matters course is grounded in family systems and attachment theories. It is designed to be used with persons in prison. The overall focus of the course is on family as a system with unique history, roles, rules, strengths, and challenges. The course teaches participants communication skills and how to manage conflict, change destructive behavior patterns by strengthening action over reaction, and heal relationships. Included is a focus on connection with family members, particularly children, and parenting from prison. Participants are asked to focus on improving one or two family relationships as part of the work to be accomplished during the course. Experiential exercises, role-plays, letter writing, and telephone calls are utilized to support this work. The course was evaluated on six classes, four in a men’s prison (n = 47) and two in a women’s prison (n = 26). Results suggest that the participants had a better understanding of themselves and their families at the end of the course, and showed increases in self-competence and self-esteem. Many participants reported more contact with one or more family members and improvement in important relationships, particularly relationships with children. A three-month follow-up suggests that these changes were retained or improved with time.
There are over 1.5 million men and women incarcerated in U.S. state and federal institutions (U.S. Census Bureau, 2009), creating 2.7 million children with parents in prison (CNN Report, November 26, 2012). It is not just incarcerated individuals who suffer from incarceration; family members are also affected. Parents whose own parents were incarcerated report being more depressed and having worse physical health than parents in families without an incarceration history (Kjellstrand & Eddy, 2011). Adolescents with a history of parental incarceration consistently exhibit higher levels of problem behaviors (Kjellstrand & Eddy, 2011). But these outcomes are not inevitable. Incarceration may act as a barrier that breaks families, or it may also act as a boundary that allows them to connect (Dyer, Pleck, & McBride, 2012). Using a family process perspective can be a powerful way to bring about healing by assisting families to work through past difficulties and transitions due to incarceration (Dyer, Pleck, & McBride, 2012). Family work is most important for the children of prisoners, but any family healing will likely affect multiple relationships, both within the family and with others outside the family, and even those relationships in prison. The negative effects on children of incarcerated parents (increased academic and behavioral problems, increased substance abuse) can be mitigated by visits with incarcerated parents, particularly if the visits are in a child-friendly environment (Poehlmann, Dallaire, Loper, & Shear, 2010). And stronger ties between inmates and families and close friends during incarceration lead to positive post-release outcomes (Visher & Travis, 2003). These outcomes include decreased recidivism, improved mental health both for prisoners and their family members, and greater likelihood that the family will hold together after reentry. Researchers find that family acceptance and encouragement, as well as perceived emotional support from family, are related to post-release success. People with closer family ties, stronger family support, and fewer negative dynamics in relationships with intimate partners are more likely to be employed after release and less likely to use drugs (Urban Institute, 2011).

Method

Development of a Family Wellness Course

Family Matters: Family Wellness Education (Bell, Cornwell, Curran, & Gaston, 2011) is a family wellness course for the use with persons in prison to help them better understand, heal, and strengthen their family relationships while they are in prison. The Family Matters course was developed over a period of five years with input from various professionals, including those from family therapy, nursing, addictions recovery, and criminal justice. The primary theories
informing the course are family systems theory (Broderick, 1993; Guttman, 1991) and attachment theory (Bowlby, 1982; Karen, 1998; Mercer, 2006; Phyllis & Caffery, 2003; Wood, 2002). Both family systems theory and attachment theory are relationship based.

Family systems theory has a historical relationship with general systems theory (von Bertalanffy, 1968). In general systems theory, a system has the following properties: (1) parts, (2) relations, and (3) interdependence. Thus a family system includes (1) family members with their individual motivations and traits, (2) interpersonal relationships with their characteristic patterns, and (3) interdependence among these motivations, traits, and relationships. Families are viewed as self-organizing hierarchical interactive systems that regulate themselves and their members’ behaviors through rules, values, and worldviews (Constantine, 1986; Cox & Paley, 1997). When we talk about family system, we are usually talking about a multigenerational family. Family relationships can be characterized by concepts such as affect, support, mutual respect, flexibility, conflict, communication, and problem-solving skills. The family system is seen as organized at different levels, from the biological nature of family members to interactions with the larger social system. The individual is viewed from a biopsychosocial perspective (Engel, 1977), and individual behavior is understood, at least in part, by the role or place of that behavior in ongoing relationship patterns. By helping participants in the course understand something about how family systems function, and also about some of the family systems’ properties in their families of origin, they can develop a deeper understanding of themselves. It also helps them be more effective when trying to create healthier patterns in their family.

Attachment theory informs the course by helping participants learn about different attachment styles and methods for achieving more secure and healthy attachments with family members of all generations, grandparents, parents, spouses, and children. While Bowlby’s work originally focused on the mother-infant relationship, attachment has been found to be important in many relationships, particularly marriage. It’s also been found that through later life experiences, secure attachment can be “earned”; the attachment patterns developed earlier in life can be changed (Paley, Cox, Burchinal, & Payne, 1999).

The course is divided into four main units with two to three classes per unit: (1) Family Systems, (2) Action and Reaction, (3) Healing and Hope, and (4) Precious Child. Family Systems introduces the strengths and the challenges represented by the different family cultures and ethnicity. It explains the importance of family history, family life cycle including grief and loss, and
family roles and rules. The participant begins to understand the family as a complex system with special relationships and reoccurring behaviors that become a pattern over time. As part of the course the participants are asked to think about the family relationship they would like to focus on improving. *Action and Reaction* introduces the thinking and feeling brain and supports the concept of taking responsibility for positive action rather than being reactive to one’s environment. *Healing and Hope* offers ways to break destructive patterns as identified in the Family Systems unit using skills such as effective listening, gratitude, and forgiveness. *Precious Child* focuses on attachment patterns, how to nurture secure attachment, and the importance of staying connected with family while in prison. It includes an extensive section focused on parenting from prison.

As the course was being developed, it was taught to both men and women in prison, and to groups recently released from prison. By strengthening family relationships through an increased understanding of family patterns, more communication, and better parenting skills, it is likely that an individual will have more family support during reentry, thus increasing the possibility of success.

**Participants**

Forty-seven men and twenty-six women were included in the analyses reported here. All participants gave informed consent and completed the relevant questionnaires. Two-thirds (65%) of the sample were men. Seventy-one percent were white, 24% were African American, and 5% were other. These numbers are consistent with the Indiana prison population where 74% of the adult inmates are white (Bell, Cornwell, Curran, & Gaston, 2011). Men’s ages ranged from 24 to 60 with a mean age of 40; women’s ages ranged from 25 to 52 with a mean age of 36. Five percent of participants reported some high school education, 25% reported a high school diploma or GED, 39% reported some college or trade school education, and 31% reported being a college or trade school graduate. This sample represents a better than average education for prison populations: 41% of the U.S. prison population have less than a high school education (Educational Testing Service, 2006). Thirty-two percent of state prison inmates had at least a high school diploma and about 26% of state prison inmates said they had completed the GED while serving time in a correctional facility (Harlow, 2003). Our data might reflect a concern with social desirability on the part of participants, and/or those in our study may be an exceptionally well-educated group and thus more likely to be included in selective reentry and other educational programs.
**Course Leaders**

The course is designed to have two leaders facilitate each class, but in actuality (due to illness, change of employment, various responsibilities of prison work interfering) there were two facilitators in the room only about half the time. Minimal training (one hour of discussing the course) was provided to the leaders when they were teaching it for the first time and not co-leading with someone who had previously facilitated the course. This is because we wanted to create a course that could be led by interpersonally mature adults able to work from just the course workbook and the leader’s manual. Facilitators included a reentry specialist (two classes), a community relations administrator (two classes), a family therapist (one class), a psychologist (two classes), a corrections officer (two classes), two addiction recovery specialists (one class each), and an inmate who had taken the class (one class).

**Procedures**

**Informed consent.** Study procedures were approved by an Indiana University institutional review board. Forty-five minutes were devoted to the informed consent process. During this time the first author was the only noninmate in the room. Potential participants were told that taking the class was not dependent on their agreement to participate in the research. Confidentiality was explained in detail; no one in the prison would know who agreed or disagreed to participate.

**Organization of classes.** Each class lasted for 3 months and included 10 to 15 participants in 12 weekly meetings. The classes were taught in sequence so that participants in the second class served as wait-list controls. Data collection was scheduled at time A before class 1; time B at the end of class 1; and time C at the end of class 2. Participants were randomized into class 1 or class 2. This design gave us the ability to compare class effects with a wait-list group and also to look at changes between the end of the class (for the first group of classes) and a three-month follow-up.

**Measures**

The questionnaire included Likert scale items evaluating family and individual functioning. Items were taken primarily from the Systemic Therapy Inventory for Change (STIC, Pinsof, Mann, & Lebow, 1999), a measure of psychological well-being (Ryff, 1989, Ryff & Keyes, 1995), and the Authentic Happiness Scales (University of Pennsylvania, 2002). Based on factor analyses, item correlations,
and face validity, two scales were created. They are self-competence (\(\alpha = .82\)), and self-esteem (\(\alpha = .62\)). The correlation between self-competence and self-esteem was .55.

*Self-competence* items were as follows:

- I can be myself in every situation.
- I am comfortable with who I am.
- I tend to be influenced by people with strong opinions. (–)
- The demands of everyday life often get me down. (–)
- I can openly express my feelings.
- I can speak up for myself when the situation calls for it.
- When what I’m trying doesn’t work out, I can change my approach or my plans.
- When I get upset, I find healthy ways to make myself feel better.
- It’s tough for me to know what I’m feeling. (–)

*Self-esteem* items were as follows:

- I have sorrow in my life to I have much more joy than sorrow in my life.
- I am pessimistic about the future to I feel extraordinarily optimistic about the future.
- I am ashamed of myself to I am extraordinarily proud of myself.
- In many ways, I feel disappointed about my achievements in life. (–)

Participants were also asked at the end of the course if their understanding of themselves and their families had changed as a result of the course. Self-understanding was measured by an item, “How well do you understand yourself (your family) now, compared with three months ago?” It was scored on a 6-point scale from 1 (‘Never had a good understanding’) through 3 (‘Same understanding’) to 6 (‘Much better understanding’).

**Results**

Analysis is based on self-administered surveys by participants in the six 3-month courses. For each analysis a few individuals were lost because they were not present to complete the necessary questionnaires. A few individuals declined the informed consent. Also, 10 participants were omitted because there was apparently no room for improvement. For these individuals, an overall score (summarizing self-competence and self-esteem) before any class started was more than 1.5 standard deviation above the mean, which meant higher than
4.6 on a 5-point scale. Even with these individuals omitted, the initial mean scores for the three measurement scales seemed high: 3.9 for self-competence, and 3.3 for self-esteem. This led to a ceiling effect difficulty for the analyses; with little room to improve, improvement is harder to demonstrate.

**Course Effects**

**Understanding of self and family.** Eighty percent of the men and 100% of the women reported that they had a better understanding of themselves after the class (self-understanding score of 4 or better); 20% of the men and 38% of the women said they had a much better understanding of themselves. Seventy-seven percent of the men and 94% of the women reported a better understanding of their family; 20% of the men and 44% of the women said they had a much better understanding of their families. Testing against the null hypotheses of a score of 3 (same understanding), both men and women scored significantly higher on both self-understanding and family understanding ($p < .001$ for all t-tests).

**Self-competence and self-esteem.** Regressions to evaluate changes in self-competence and self-esteem included controls for age, gender, education, and race. All reported changes are in the positive direction. Results from the self-competence ($F = 2.52; p = .01$) and self-esteem ($F = 3.81; p = .001$) analyses were both significant overall. In each case the change from before to after the course was significant for particular groups. For self-competence, nonwhites scored higher overall ($p = .002$); women demonstrated positive change ($p = .02$). For self-esteem younger people scored higher overall ($p = .02$); women ($p = .02$) and older people ($p = .03$) demonstrated positive change form before to after the course.

**Course Versus Wait-List Control**

For each sequence of classes, comparisons of changes in scores between time 1 and time 2 were made for those who were in the first class compared with those on the wait-list who would be in the second class. The difference for the self-competence measure were not significant. For the self-esteem measure, the overall $F$ was 2.46 ($p = .03$) and the women in the class made more positive change than women not in the class ($p = .06$).

**Three-Month Follow-up**

At the three-month follow-up results showed no significant change from results at the end of the course. Positive changes were found in self-esteem, but
they did not reach statistical significance ($t = 1.10; p = .14$). Positive changes during the three months after the course could represent other personal growth experiences in the three months following the course. They might also represent a delayed response to the course. It is consistent with family systems interventions that once small change happens, it reverberates in the system in such a way as to support a continuing positive process.

**Relationship Changes Described by the Participants**

Participants could list up to two improved relationships and could offer comments to describe the change. The men mentioned 1.4 relationships on the average; women 1.7. Women made more comments (77% of relationships vs. 42% for men); the women’s comments also tended to be more detailed. The most mentioned improved relationships were with children: 85% of the relationships mentioned by women and 57% of those mentioned by men. These comments were sometimes about young children; sometimes about adult children. Relationships with parents were mentioned next. Eight percent of the women and 19% of the men mentioned a father. Thirty-five percent of the women and 28% of the men mentioned a mother. Fifteen percent of the women and 11% of the men mentioned a sibling, brothers and sisters equally. Eight percent of the women and 15% of the men mentioned a spouse or child’s parent. One man and two women listed God; two women said “myself.” The examples of change in particular family relationships of some course participants were poignant. People noted more contact, more or better communication, more understanding, more closeness.

A selection of comments follow, with the women’s comments in italics.

**Relationship with child:**

I have more rational thinking and a closer bond to my daughter.  
*My daughter is more open since I have learned to communicate better.*  
*My daughter has opened up her innermost feelings, fears, and goals, dreams to me. We both became more willing to be honest about our anger and I am excited to have such an open, loving and realistic relationship with my daughter.*  
*I understand his [son] actions better.*  
*They [children] open up and tell me how they are feeling, what’s going on with them even if it’s hurtful.*  
*Just more happy, respectful, loving and understanding [son].*  
*We [son] talk every week, more so now than for the past few years.*
Relationship with parent:

My mother comes to see me and we write each other. My father has contacted me and wants to come to visit. We [mother] talk more about different issues and share more. More communication and trust [mother]. We are more open with our feelings [mother].

She [mother] knows that I’ve changed and she’s proud of me. She [mother] gave me her address after not having it or a line of open communication for over a year.

When I first started this class my mom and I didn’t get along or communicate. Since being in this class, we are doing 100% better at everything in our mother and daughter relationship. My father has had no contact with me in many years but through the group my family has been talking to him about me and I’ve even been given his address. I just haven’t used it yet because I’m still a bit angry at his treatment of me.

Miraculously, this relationship has had a COMPLETE turnaround for the BETTER during the course of this class! My relationship with him [stepfather] became my [unexpected] focus to work on; these tools learned have helped immensely.

When I first started in this class my relationship with my mom was horrible. We had no forgiveness, no communication or showing of emotion. Since being in this class my mom and I have made a way to communicate more effectively. I finally feel like I can tell my mom how I am feeling or what I’m going through and she stops to really listen to me and be there. We both have asked for forgiveness from the other.

Relationship with spouse, partner, or child’s parent:

We value our love more. We appreciate our time together more. He [child’s parent] actually spoke to me on the phone.

Relationship with others:

I’ve learned to see things clearly [relationship with myself]. I’m opening up more [myself]. I have a more personal relationship than ever with God. We [grandfather] are close and have been able to communicate more openly.
We [brother] did not speak to each other at all for the last 10 years. Now we are mending our hurt feelings and lost time.
Me and my sister are now writing back and forth and I am currently hoping we can be more honest with each other.

**Discussion**

There is an inherent need for humans to have connection and to feel attached to at least one other human being; normally, the first attachment(s) are with a mother, father, grandmother, or primary caregiver(s). A primary value of the Family Matters course is that the focus is not just on the individual but on the individual in relationship to significant others. The course format lends itself to a unique process for enhancing the participants’ learning in this regard. The participant learns about family history and culture, family life stages, and healthy family processes. The emphasis is on family as a system where members effect and influence each other, thus helping the participant to see his or her connections within the larger family context. Participants early on choose one particular relationship to work on. With new knowledge and encouragement, each participant is supported in taking responsibility to heal relationships by breaking destructive patterns, seeking and giving forgiveness, learning how to use words that support reconciliation rather than provocation, etc. At the completion of the course, participants reported becoming aware of their ability to reach out and begin communicating with significant others, then taking responsibility for the actual act of communicating, and discovering their communication could lead to improvement in important relationships with children, parents, and spouses.

**Limitations**

Most limitations were a result of the prison context. Attendance of both the instructors and participants was good, but not very good, due to the normal complications and restrictions of prison life. The participants in the Family Matters course were on the average better educated than is generally the rule in state prisons. While the informed consent included very clear statements about confidentiality, there is still the important question of trust when working within the prison context. This could help explain the high initial scores on evaluative measures, thus making the demonstration of change in the positive direction more difficult.

**Strengths**

The Family Matters course has been created to be flexible, with the prison setting in mind. One benefit is that the course leaders do not have to be professional
teachers but need good interpersonal skills. Having a woman and a man co-lead the course is particularly helpful since prison participants are all of the same gender. In addition, when there are two leaders, one can be an inmate who has successfully completed the course, thus adding a sense of self-confidence, competency, and respect—not only for these inmates but for class members who see one of their own in a leadership position. The course results in an increased understanding of family patterns, and teaches effective skills for communication and parenting. By supporting greater understanding and healthier relationships with family members, with parents and grandparents, as well as with mates and children, the course increases family support for the released individual and thus supports healthy recovery and effective reentry into the community.

Family systems research leads us to also expect positive effects for the family members through the generations. Healthier relationships with one’s parents lead to better parenting of one’s own children and grandchildren. When people become better parents, it supports the character development of their children, thus increasing the probability that those children will be effective law-abiding members of society, and also better parents and more supportive of their own parents, grandparents, and grandchildren.

References


Biographical Sketches

**LINDA G. BELL** is a professor of communication studies in the School of Liberal Arts and professor of family health in the school of nursing at Indiana University–Purdue University Indianapolis and professor emerita of psychology and family therapy at the University of Houston–Clear Lake, where she founded an accredited program in family therapy in the late 1970s.

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Both authors have over 30 years’ experience teaching and supervising family systems therapy. Linda has 6 years’ experience teaching in the prison context, first in Texas, then in Indiana.
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