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MULTI-SITE FAMILY STUDY ON INCARCERATION, PARENTING AND PARTNERING

IMPACT OF COUPLES-BASED FAMILY STRENGTHENING SERVICES FOR INCARCERATED AND REENTERING FATHERS AND THEIR PARTNERS

SUMMARY

Prior research indicates that the family strain and parental absence associated with incarceration can have lingering, negative effects on children and adults. Recognizing the challenges families face in maintaining healthy relationships during and after an incarceration, the federal Office of Family Assistance (OFA) funded 12 grantees to support healthy relationships between incarcerated fathers, their partners, and children from 2006-2011. Each grantee developed its own service delivery model and selected its own target population. This report summarizes findings on the impact of couples-based services in four grantee programs.

- In one of the four grantee programs, the low-dosage healthy relationship retreat had sustained positive effects on multiple partnership and parenting relationship outcomes for a low-income, justice-involved population. In this program, implementation context, not just program content, was important. Services were delivered in the context of special prison housing units for individuals participating in a variety of character- and faith-based programs. Participants also cited specific contextual details of the healthy relationship retreat as highly memorable and meaningful. As a part of any replication strategy, additional research should test the relative importance of context and content.
- This evaluation attempted to isolate the impacts of relatively low-dosage couples programming. Considering the weak and non-significant findings in three of the four grantee sites, it may be that more robust and comprehensive interventions may be necessary to address the complex needs of low-income, justice involved families.

About This Research Brief

This brief presents findings on the impact of couples-based family strengthening services in four prison-based programs from the Multi-site Family Study on Incarceration, Parenting and Partnering (MFS-IP). The study includes implementation and impact evaluations and qualitative and quantitative analyses of participants in programs funded by the U.S. Department of Health and Human Services to provide services to incarcerated fathers and their families.

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BACKGROUND

As part of its efforts to foster family economic security and stability, from 2006-2011 the Office of Family Assistance (OFA) within the federal Department of Health and Human Services (HHS), Administration for Children and Families (ACF) funded family strengthening programs for incarcerated and reentering men and their families. As “first generation” demonstration grantees serving families affected by incarceration, these programs aimed to support healthy, stable couple relationships; positive parenting; and family economic well-being among the men, their partners, and children. This research brief presents study findings on the impact of the couples-based components of these programs and discusses implications for policy, programs, and future research.

INCARCERATION, REENTRY, AND THE FAMILY: CHALLENGES AND OPPORTUNITIES

Incarceration presents serious challenges in the family lives of justice-involved persons. The incarceration of a family member often compounds other forms of disadvantage, such as those associated with living in poverty (Murphey & Cooper, 2015; Wildeman, 2009). Parental incarceration also increases children’s risk of living in poverty or experiencing household instability (Phillips et al., 2006). These risks are borne disproportionately by families of color, particularly African American families (Wildeman, 2009).

Research suggests that supporting healthy family relationships could facilitate successful reentry into the community after incarceration. Various forms of support have shown promise in preliminary intervention studies, including family-friendly visitation accommodations, group parenting and relationship education classes, and assistance in maintaining contact with family members during incarceration (MacDonald & Kelly, 1980; Minnesota Department of Corrections, 2011; Eddy, Martinez, & Burraston, 2013; Dunn & Arbuckle, 2002; Einhorn et al., 2008).



Above: Participants in a family strengthening program run by the Indiana Department of Correction attend a relationship education class. (Photo courtesy of the Indiana Department of Correction, with expressed permission from the program participants pictured.)

SUPPORTING FAMILIES AFFECTED BY INCARCERATION

To help strengthen families affected by incarceration, OFA funded services to support healthy relationships and responsible fatherhood in heterosexual couples in which the male partner was incarcerated or recently released from incarceration. Building on other OFA-funded family strengthening initiatives, including Building Strong Families (BSF), Supporting Healthy Marriage (SHM), and the Community Healthy Marriage Initiative (CHMI), this initiative aimed to support healthier, more stable family relationships. However, it differed from earlier efforts in its focus on couples affected by involvement with the criminal justice system, in the need to offer family relationship supports with relevance to both prison and community settings, and in its emphasis on supporting healthy couple relationships and fatherhood.

From 2006-2011, grantees in 12 sites served justice-involved fathers¹, their committed partners, and in some sites, their children. Program models implemented by these pioneering grantees

¹ The terms “father” and “mother” are used in the remainder of the report even though a small number of study participants were not parents.

varied in their emphasis; the grantees were not required to adhere to an established program model, as program models and “best practices” in this area were and are still emerging.

The Multi-site Family Study on Incarceration, Parenting and Partnering (MFS-IP) documented program implementation in all 12 sites, and assessed the impact of couples-based program components in four of those sites: the Indiana Department of Correction, the RIDGE Project (Ohio), the New Jersey Department of Corrections, and the Osborne Association (New York). The impact findings presented in this report convey the effectiveness of the site-specific couples-based programming that was the focus of the impact evaluation. Grantees provided other services, including parenting and other family strengthening and reentry services, which were available to any eligible individual in the facility and were not evaluated in the impact evaluation. Many of the outcomes measured in the evaluation were not directly targeted by the couple-based component that was evaluated. However, past research has shown that having strong pro-social networks can influence important post-release outcomes such as recidivism and substance use (Visher et al., 2004; Bales & Mears, 2008; Barrick, Lattimore, & Visher, 2014; Cochran, 2014).

Key highlights of the MFS-IP study and methodology are summarized in this report. More detailed information about the impact study methodology and results, can be found on the HHS ASPE website: <http://aspe.hhs.gov/basic-report/evaluation-marriage-and-family-strengthening-grants-incarcerated-and-reentering-fathers-and-their-partners>.

Second and Third Generation OFA Programs for Formerly Incarcerated Fathers

Since the completion of the grants included as a part of this study, OFA has funded additional grantees to provide responsible fatherhood services for soon-to-be released and recently released fathers to strengthen families and promote the economic and social well-being of children, individuals, and communities. Second generation grantees operated from FY 2012 through FY 2015 under the Community-Centered Responsible Fatherhood Ex-Prisoner Reentry Pilot Projects. Similar to the first generation grantees, the subsequent initiative focused on providing healthy marriage, responsible parenting, and economic stability activities for formerly incarcerated parents and their families. However, whereas the first set of grantees tended to focus on the delivery of healthy relationship services, economic stability services were a major emphasis among the second generation grantees. The Ex-Prisoner Reentry Pilot Projects provided job skills and job readiness training pre-release, with post-release activities including assistance finding transitional jobs and permanent employment; provision of and assistance with public housing; help securing public benefits; legal assistance; GED-preparation assistance and tuition assistance and reimbursement; vocational school training; cognitive behavioral therapy; and assistance obtaining small business loans and individual development accounts. An implementation study was conducted on these pilot programs (Fontaine et al., 2015). Using the comprehensive services model developed under the Ex-Prisoner Reentry Pilots, five Responsible Fatherhood Opportunities for Reentry and Mobility grants--the third generation of re-entry grantees--were funded in September of FY 2015. These grantees are still in their initial implementation phase and are projected to operate through FY 2020.

MFS-IP Impact Study Design

The impact evaluation was designed to assess whether the different couples-based program components delivered in each of the four MFS-IP impact sites succeeded in fostering healthy relationships, strengthening families, and easing community reentry. The prison-based nature of these programs and the demonstration sites' relative freedom in designing site-specific program approaches required the development of site-specific impact study designs. The evaluation used a matched comparison group design in Indiana, New Jersey, and New York, and a wait-list design in Ohio. Treatment group couples (who enrolled in the couples-based OFA-funded program component being evaluated) and comparison group couples (who did not) were first interviewed during the father's incarceration, with baseline interviews taking place at the time of enrollment in OFA programming for treatment group couples and at the point of identification of the comparison group for comparison group couples. The father was interviewed first. During the interview, he identified his primary intimate or coparenting partner who was then recruited for her baseline interview (approximately 78% of partners in the treatment group and 72% of partners in the comparison group completed a baseline interview). A "focal child" was selected from among the father's children at his baseline interview, with priority given to children who were coparented by both members of the study couple and closest to the age of eight. Both members of the couple ("survey partners") were then approached for interviews again nine and 18 months later. In the two largest sites, Indiana and Ohio, an additional 34-month follow-up interview was conducted to assess longer-term program impacts.

The impact analysis employed standard statistical techniques to adjust for selection bias (the possibility that existing differences between treatment and comparison couples may influence outcomes separately from the treatment received) and attrition bias (the likelihood that missing follow-up data for some respondents is not random). Differences between treatment and comparison group members were examined at each follow-up wave, with significance tests conducted and analyses controlling for the baseline measure of each outcome. This report summarizes outcomes for fathers as a group, mothers as a group, and couples. All available interview data were used (i.e., we did not limit the analytic sample for fathers to men whose partners also completed an interview). The couples' analysis used a technique called latent growth curve modeling to measure how outcomes for couples changed over time (e.g., whether changes over time were, on average, more positive for treatment couples than comparison couples). All outcomes except recidivism, employment, and drug use were explored at the couple-level (in addition to analyses based on mothers as a group and, for recidivism, fathers as a group). Because all analyses were based on self-reported interview data, fathers and mothers could have provided different responses to the same survey question. As a result, findings for fathers, mothers, and couples may differ.

IMPACT OF COUPLES-BASED SERVICES IN FOUR SITES

Each of the four impact sites delivered a unique family strengthening program. The impact study assessed the impact of each-site's couples-based activities, which constituted only a portion of the OFA-funded activities that were implemented. The activities evaluated were:

- **Indiana:** one-time, weekend couples' healthy relationship retreat
- **Ohio:** 12-week relationship education course
- **New Jersey:** holistic, reentry-focused program, including relationship, parenting, and domestic violence education; substance use treatment; and reentry case management
- **New York:** one-time, weekend couples' healthy relationship seminar

In addition to differences in program models, the sites also varied in their specific implementation contexts, target populations, size of enrollment, and service intensity or dosage. A number of outcomes were assessed in each site. The specific program approaches and impacts are summarized in the sections that follow.

Selection of Outcomes for the MFS-IP Impact Study

The demonstration-oriented nature of these grants and the diversity in program models implemented by grantees meant that no well-established set of outcome measures was available to measure the effectiveness of the program components being evaluated. Based on the objectives specified in the funding mechanism and the commonalities in grantees' stated program goals, we examined outcomes in three domains:

- Intimate relationship status and quality;
- Parenting and coparenting; and
- Employment, substance abuse, and recidivism.

The intimate relationship status and quality outcomes that were selected are measures that could reasonably be expected to improve for the treatment group relative to the comparison group, based on the nature of the couples-based program components being evaluated in each of the four sites. The outcomes in the other domains were considered less likely to be directly affected by the programming but amenable to change through improvements in other, more directly-affected outcomes (e.g., relationship skills) or based on the "ancillary services" provided by the site (e.g., employment assistance). All outcomes were considered to be important and related to the programming being evaluated. However, not all outcomes explored were directly targeted by the couple-based program components being evaluated. In addition, when drawing conclusions about the effectiveness of a site's program, the outcomes are not necessarily of equal importance as some may be more directly tied to the intervention than others.

We used formally validated measures where available, and adapted many other outcome measures from (then ongoing) evaluations of ACF/HHS-funded healthy marriage initiatives for married and unmarried couples in low-income communities and prison reentry studies funded by the Department of Justice, Department of Labor, and HHS. (Efforts to test, refine and improve such measures are ongoing, including through the current study.)

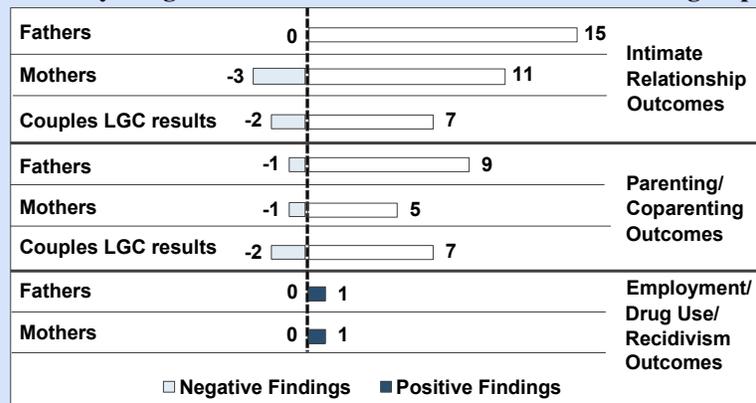
Several outcomes in each domain are dependent on the father's incarceration status. Some outcomes (e.g., partner violence) are only relevant to couples in which the father was released at some point during the follow-up period; others (e.g., in-prison contact between the study couple) are only relevant to couples in which the father remained incarcerated. The outcomes presented here are based exclusively on self-reported interview data. The full technical impact report and appendices include a description of all outcome measures that were analyzed.

Indiana

Key Findings for Indiana

- The healthy relationship seminars within the character- and faith-based housing prison units were associated with improvements in intimate relationship quality.
- After adjusting for the fact that the couples participating in the program started off in a better place than comparison couples, couples in the treatment group were more likely than comparison couples to stay together over time, remain in exclusive relationships, live together after the father's release, and do better on several other dimensions of relationship quality.
- The healthy relationship retreats were associated with positive treatment effects on several coparenting outcomes as well as on fathers' involvement with their focal children.
- When considering the magnitude of the positive treatment effects, the effect sizes were generally in the moderate range and, on average, were larger for men than women.

Summary of significant treatment effects across domains and groups



Note: The charts show the number of outcomes for which a significant treatment effect was found for fathers, mothers, and couples for at least one follow-up point. The specific number of outcomes explored varied by domain (up to 29 intimate relationship quality outcomes, 16 parenting/coparenting outcomes, and 4 employment, substance use, and recidivism outcomes were explored). LGC=latent growth curve model

Background and Context: The Indiana Department of Correction delivered its program in the context of character- and faith-based housing units offering extensive programming to men who were interested in personal development. Both treatment and comparison fathers who were selected for the impact study resided in these special housing units.² The program used a commercially available healthy relationship curriculum that was felt by program administrators to be consistent with the messages conveyed in the housing unit programming. The program emphasized group instruction rather than individualized services and focused its service delivery on the period of the father's incarceration. Because the program served large numbers of people in many correctional institutions, the sample size for the evaluation was large (686 fathers and 577 mothers were enrolled in the study). In this site, the impact evaluation focused on a **one-time, weekend healthy relationship retreat** delivered to fathers residing in the faith- and character-based housing units and their female partners, who had to participate for the father to be eligible.³ (The grantee also delivered men's-only healthy relationship classes and

² Fathers (and their partners) who received the weekend couples retreats were included in the treatment group. The comparison group consisted of fathers (and their partners) who, in a screening form administered to all men in the special housing units, reported being in a committed intimate relationship and indicated that they and their partner would like to participate in the retreat (but who had not already done it and did not end up doing it over the course of the baseline enrollment period). In the comparison group selection process, priority was given to fathers projected to be released before the next scheduled retreat (to maximize the likelihood that timing was a factor in nonparticipation rather than relationship commitment). Some IDOC administrative data was also used in the matching process to improve the comparability of the treatment and comparison groups on demographic characteristics.

³ Although the evaluation adjusted for baseline differences between treatment and comparison couples on many variables, we cannot rule out the possibility unmeasured differences between the groups.

parenting classes to all men in the housing units, that is both treatment and comparison group participants, but these components were not the focus of the evaluation.)

Results: Fathers who participated in the couples' healthy relationship retreat had more positive **intimate relationship quality** outcomes compared to fathers in the same housing units who did not participate in the retreats. Consistently across the 34-month follow-up period, fathers who participated in the retreat were more likely to remain in intimate relationships with their survey partners, have no other intimate partners, and report greater happiness and higher levels of dyadic adjustment and bonding in their relationships with their survey partners than fathers who did not participate. Among married fathers, those in the treatment group also expressed more commitment to staying married than those in the comparison group. After release, fathers in the treatment group were more likely to live with their survey partners and reported both providing and receiving higher levels of emotional support from their partners than comparison fathers. Among fathers who remained incarcerated, those in the treatment group were more likely to have telephone and in-person contact with their partners than those in the comparison group. No negative findings for intimate relationship quality outcomes were observed for fathers in Indiana.

Fathers in the treatment group also had more positive outcomes related to **parenting and coparenting**. Consistently across the 34-month follow-up period, treatment group fathers were more likely than comparisons to make decisions about their focal children jointly with their survey partners. Among fathers who were released from incarceration, those in the treatment group were more likely to financially support their focal children, do frequent activities with their focal children, and report that the couple and focal child did family-oriented activities and enjoyed time together. Additional positive parenting effects were evident at individual follow-up waves. Only one negative treatment effect was found in the parenting and coparenting domain for fathers in Indiana: those who participated in the seminars were less likely to live with any of their children at the 9-month interview wave than comparison fathers. Among the other outcomes examined, fathers who had participated in the seminars were **more likely to be employed** at the 34-month interview wave than those in the comparison group.

Mothers who participated in the seminars had more positive **intimate relationship quality** outcomes than mothers in the comparison group, but the findings were not as strong as those for fathers. Consistently across the 34-month follow-up period, treatment group mothers were more likely to remain in intimate relationships with their survey partners, have better conflict resolution skills and dyadic adjustment, and report higher levels of bonding and encouragement from their survey partners. Among married mothers, those in the treatment group also expressed more commitment to staying married than those in the comparison group. A few other positive treatment effects were evident at individual follow-up waves: at specific follow-up periods, mothers in the treatment group had better communication skills, reported greater happiness in their relationships with their survey partners, were more likely to live with their partners (for those whose partners got released), and had more in-prison personal visits with their partners (for those whose partners remained incarcerated) than mothers in the comparison group. Three negative treatment effects were found in this domain at the 34-month follow-up wave only: treatment group mothers who were unmarried expressed less commitment to getting and staying married than unmarried mothers in the comparison group, and treatment group mothers whose partners were released were more likely to report frequent emotional abuse victimization and frequent physical abuse victimization than comparison mothers.

With regard to **parenting and coparenting quality**, mothers who participated in the retreats were consistently more likely to report that the father provided financial support for the focal child (among those whose partners got released). Positive findings evident at individual follow-up waves were that mothers in the treatment group were more likely to report that the couple made decisions about the focal child jointly, that the father lived with the focal child (among those whose partners got released), and that the father sent mail to and received mail from the

focal child (among those whose partners remained incarcerated). One negative finding was evident for parenting and coparenting outcomes among mothers in Indiana: those in the treatment group expressed less warmth/affection toward their focal children than those in the comparison group at the 34-month interview wave. Among the other outcomes explored, mothers in the treatment group were **more likely to be employed** than mothers in the comparison group at all follow-up waves.

Couples-based analysis also found positive change for treatment couples in the **intimate relationship quality** domain. Over time, couples who participated in the retreat were more likely to remain in intimate relationships with their survey partners, have no other intimate partners, report higher levels of bonding and encouragement from their survey partners, and express more commitment to staying married (among married couples) than couples who did not.⁴ They were also more likely to live together and less likely to report frequent physical abuse perpetration after the father's release. However, among unmarried couples, those who participated in the retreats expressed less commitment to getting and staying married than those who did not, and among couples in which the father remained incarcerated, those who participated in the retreats had less frequent personal visits than couples who did not participate.

With regard to the **parenting and coparenting** domain, treatment couples did better on several outcomes. They were more likely than comparison couples to make joint decisions about their focal children and to perceive one another as fulfilling their parenting responsibilities. After the father's release, treatment couples were also more likely to report that he lived with, provided financial support for, and did frequent activities with his focal children, and that the couple and focal child did family-oriented activities and enjoyed time together. Two negative effects were found in this domain: treatment couples expressed less warmth/affection toward the focal child and were less likely to report that the father sent mail to the focal child (during incarceration) than comparison couples.

What Did Indiana Participants Remember about the MFS-IP Program?

"We went to a relationship class when he was incarcerated, and part of it was about, are you loving the person in the way that they need to be loved...It was amazing how on the spot on we were with that exercise. We've used those words to say, 'Here's what I need from you for the next three months, because I'm scared about this, right, I've made it bigger than it is.' I think we're really good at that, partly from that course. So that's great."

"We had, like, a breakthrough type of thing when we were on one of the visits after one of the classes. I think we kind of like were arguing a little bit maybe about something or whatever, and he just started bawling, crying. And I think I had, I had never seen him cry then. But yeah, he had a lot of frustration and talked about growing up and his family and his mom and dad and stuff. So he had like a big, major breakthrough where he got to let a lot of feelings and stuff out."

"We was together and there was no shackles, no nothing. We got to sit side-by-side at this table, and we got—we was talking about relationships, and we played games, and they asked us little questions, and he say—kiss and you get to give him a kiss and a hug, or the men gets to get up and give you a massage in front of the whole class and all this fun stuff...They got to eat some kind of good stuff versus jail food, it's fried and chips and at all that...It was really, really nice and helpful. The program really helped us out relationship-wise."

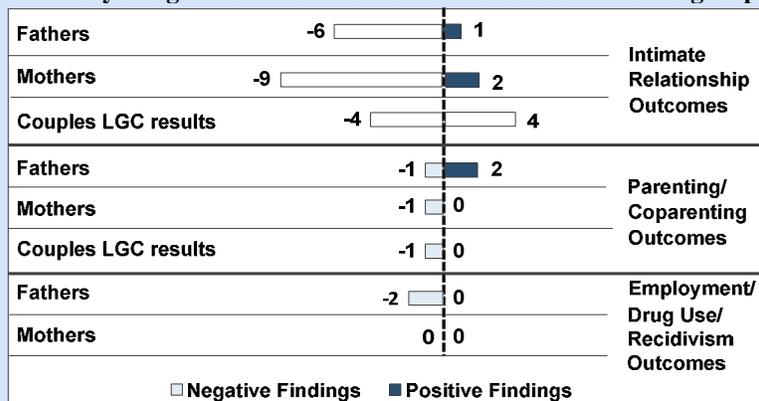
⁴ The findings from the couples' analysis are described in a simplified manner in this report. For some outcomes, the pattern for both treatment and comparison couples was actually *deterioration* in the outcome over time, such that positive treatment effects mean that treatment couples experienced less deterioration in the outcome (rather than improvements in the outcome) than comparison couples.

Ohio

- Enrollment in the couples' communication course was not associated with sustained positive treatment effects over the 34-month follow-up period.
- Scattered positive and negative effects emerged at individual follow-up waves based on comparisons between fathers and mothers who enrolled in the program and those who were wait listed (the comparison group).
- The couples' analyses found that couples who enrolled in the course did show improvements in communication skills and fidelity over time relative to comparison couples, despite the treatment couples' having lower relationship quality at baseline than comparison couples.

Key Findings for Ohio

Summary of significant treatment effects across domains and groups



Note: The charts show the number of outcomes for which a significant treatment effect was found for fathers, mothers, and couples for at least one follow-up point. The specific number of outcomes explored varied by analytic unit and domain (up to 29 intimate relationship quality outcomes, 16 parenting/coparenting outcomes, and 4 employment, substance use, and recidivism outcomes were explored). LGC= latent growth curve model

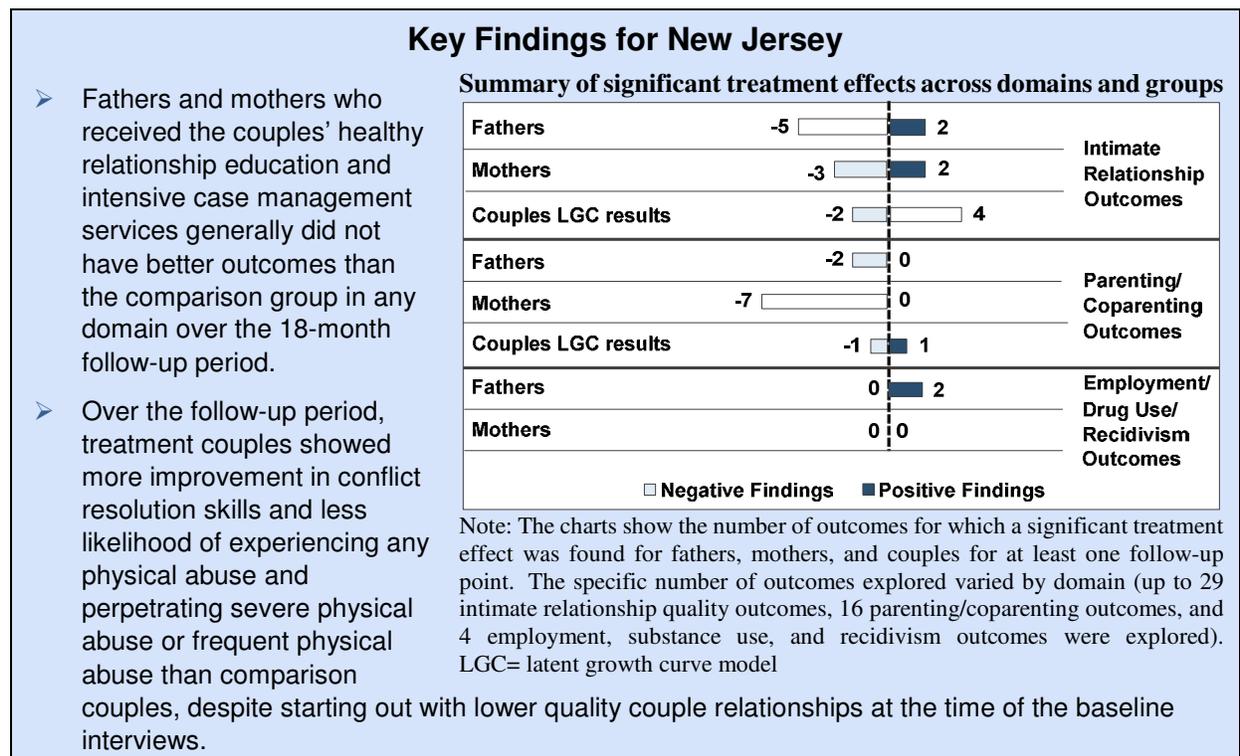
Background and Context: The Ohio Ridge Project, a community based non-profit organization, used both self-developed and commercially available curricula and a program model that emphasized group instruction rather than individualized services and focused service delivery on the period of the father's incarceration. Because the program served large numbers of people in many correctional institutions, the sample size for the evaluation was large (688 fathers and 527 mothers were enrolled in the study). In this site, the impact of a **12-week couple communication course**, the first in a series of four family relationship courses, was assessed. Mothers did not have to participate in the course for the fathers to be eligible, and treatment couples had access to the other courses in the series, as well as visitation support and referrals, offered by the grantee.

Results: In general, there were few sustained significant difference in outcomes between fathers who enrolled in the couple communication course and fathers who were on a waiting list for the program in the **intimate relationship quality** or **parenting and coparenting quality** domains. However, in at least one follow-up wave, fathers in the treatment group did report less perpetration of severe physical or sexual abuse toward their partners after release, expressed more parental warmth/affection toward their children, and, among those who remained incarcerated, were more likely to receive mail from their focal children. Some negative effects were also found, particularly at the 9-month follow-up wave, with fathers in the treatment group reporting lower levels of bonding with and encouragement from their survey partners, less commitment to staying married (among married men), less emotional support provided to their survey partners (among fathers who got released), less telephone contact with their survey partners (among fathers who remained incarcerated), and lower likelihood of sending mail to the focal child (among fathers who remained incarcerated). Among the other outcomes explored, two negative treatment effects were observed: at the 18 month follow-up wave, fathers in the treatment group were more likely to self-report having been **reincarcerated** in a jail or prison than fathers in the comparison group and, based on corrections administrative data, were more likely to have been reincarcerated in a state prison within 24 months of release.

As we saw with fathers, there were few sustained significant differences between outcomes for the treatment and comparison group mothers; however, a few positive treatment effects were found. At the 34-month follow-up wave, mothers in the treatment group whose partners had been released had better outcomes than those in the comparison group on two **intimate relationship quality** outcomes: they received more emotional support from their partners and were less likely to perpetrate severe physical or sexual abuse against their partners. Negative effects were found in one of three follow-up periods (typically the 9-month follow-up wave) in the intimate relationship quality and parenting and coparenting domains: relative to mothers in the comparison group, mothers in the treatment group scored lower on a healthy relationship beliefs scale, reported less encouragement from their partners, expressed less commitment to getting and staying married (among unmarried mothers), were less likely to perceive their partners as fulfilling their parenting responsibilities, reported fewer phone calls and personal visits with their partners (among those whose partners remained incarcerated), and were more likely to perpetrate physical and emotional abuse and experience emotional abuse and severe physical or sexual abuse victimization from their partners (among those whose partners were released).

Couples-based analyses yielded more promising results for **intimate relationship quality** outcomes. Treatment couples started out with lower quality relationships than comparison couples at the time of the baseline interviews, and over the follow-up period they showed more improvement in their communication skills in their relationships and a reduced likelihood of cheating on their partners, experiencing physical abuse victimization, or perpetrating severe physical abuse against their partners than comparison couples. Negative findings were evident for several outcomes in the intimate relationship quality and parenting and coparenting domains, with treatment couples expressing less commitment to staying married (among married couples), being less likely to perceive their partners as fulfilling their parenting responsibilities, and being more likely to perpetrate any physical abuse, any emotional abuse, or frequent emotional abuse than comparison couples.

New Jersey



Background and Context: The New Jersey Department of Corrections program served reentering fathers with addiction issues who were serving out their full sentences (as opposed to being released on parole). It was a fairly **holistic, case management-based program** that supported both members of the couple in the months before and after the father's release. In this site, the impact evaluation assessed the effect of the full program, which included couples-based relationship and parenting courses (including a short domestic violence education course), accompanied by intensive couples-based reentry case management and a substance abuse intervention. Fathers and mothers both participated in the programing but not necessarily in sessions that included both parents. Mothers who could not participate at the prison site were offered a self-directed study course based on the same materials. The sample size in New Jersey was small (309 fathers and 180 mothers were enrolled in the study) and follow-up interviews were only conducted at two time periods (9 and 18 months).

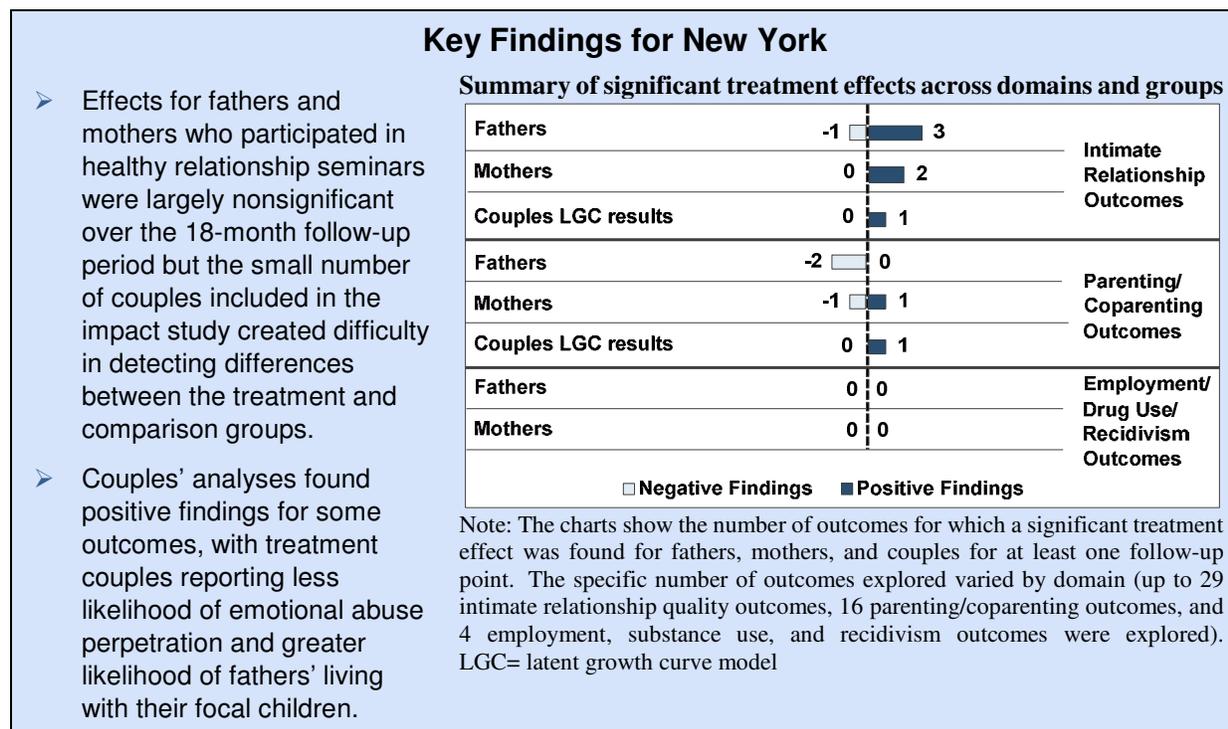
Results: In general, there were few sustained significant differences in outcomes between fathers who enrolled in the program and the matched comparison group of fathers in the **intimate relationship quality** or **parenting and coparenting quality** domains. Fathers in the treatment group were less likely to perpetrate severe physical or sexual abuse at both follow-up waves and less likely to perpetrate emotional abuse at the 18-month wave. Some negative findings were evident. At the 9-month wave, treatment fathers were less likely to report that the couple had remained in an intimate relationship. Among those who were released, treatment fathers were less likely than comparison fathers to live with their survey partners or any of their children. Not surprisingly, given the relationship dissolution and lack of coresidence, fathers in the treatment group also reported less encouragement from their partners, expressed less commitment to staying married (among married fathers), reported worse communication skills with their partners, and were less likely to perceive their partners as fulfilling parenting responsibilities than comparison fathers. When examining the other outcomes, fathers who enrolled in the program were less likely to self-report having experienced a **rearrest** at the 18 month follow-up interview than fathers in the comparison group and, based on administrative corrections data, were less likely than comparison men to have been reincarcerated in a state prison within 12 months of release.

Mothers in the treatment group whose partners had been released were less likely to perpetrate any emotional abuse or frequent emotional abuse against their partners at the 9-month follow-up wave. However, a number of negative effects in the **intimate relationship** and **parenting and coparenting quality** domains were evident. At the 9-month wave, mothers in the treatment group were less likely than comparison mothers to report that the couple was living together or that the father was living with the focal child after his release. In addition to being less likely to report coresidence, treatment group mothers reported less joint decision-making about the focal child, less expression of warmth/affection toward the child, less likelihood of perceiving the father as fulfilling his parenting responsibilities, less likelihood of reporting that the father was providing financial support for the child, less frequent family-oriented activities with the child, and less time enjoyed together as a family than comparison mothers. Contrary to the findings for fathers, mothers in the treatment group were more likely to report any severe physical or sexual abuse victimization and frequent emotional abuse victimization than mothers in the comparison group in one of the follow-up periods.

Treatment couples appeared to have started at a disadvantage relative to comparison couples in terms of their baseline intimate and parenting/coparenting relationship quality. Even so, the models showed that treatment couples did better over time for a few **intimate relationship and parenting and coparenting quality** outcomes: improved conflict resolution skills, less physical abuse victimization, less severe and frequent physical abuse perpetration and higher self-ratings as parents. However, they did worse over time with regard to their commitment to staying married (among married couples) and their likelihood of reporting that the couple had

any telephone contact or that the father had any personal visits with the focal child (among those in which the father remained incarcerated).

New York



Background and Context: In New York, the impact evaluation measured the effect of a **one-day, couples-based healthy relationship seminar** offered as a component of the programing provided by the Osborne Association, a community based, non-profit organization. The seminar used an adapted version of a commercially available curriculum and both members of the couple had to attend for the father to be eligible. The grantee invested substantial effort in additional program components including men's-only healthy relationship classes and parenting classes, child-friendly visitation, and relationship counseling. These additional program activities may or may not have been utilized by fathers included in the treatment group for the impact evaluation, and were not the focus of the evaluation. Because of the small sample size (201 fathers and 115 mothers were enrolled in the study) and the fact that not many fathers got released from incarceration over the follow-up period, several outcomes could not be assessed at the 9- or 18-month follow-up waves.⁵

Results: Overall, there were no sustained significant difference in outcomes in the **intimate relationship quality** and the **parenting and coparenting** domains. Fathers who participated in the seminars did better than comparison fathers on some outcomes at the 18-month follow-up wave: they were more likely to report not having any intimate partners other than their survey partner and to indicate that they had not cheated on their partners, and they expressed more commitment to staying married (among married fathers). Three negative effects were found at individual follow-up waves: unmarried fathers who participated in the seminars expressed less commitment to getting and staying married, and in the parenting and co-parenting domain

⁵ However, the latent growth curve models run for couples accommodate missing data at individual waves and have more statistical power. This is due to the fact that this approach uses available data from both fathers and mothers, which allows for some outcomes to be assessed for couples that could not be assessed for individuals.

treatment group fathers were less likely to send mail to or receive mail from the focal child than comparison fathers (among those who remained incarcerated).

Likewise there were no sustained significant difference in either intimate partner quality or parenting and co-parenting outcomes for mothers. Mothers in the treatment group had better outcomes than comparison mothers for one **intimate relationship quality** outcome: at the 9-month follow-up wave, they were more likely to report visiting their partners in person while incarcerated (and reported a greater frequency of visits) than comparison mothers. One positive treatment effect was found in the **parenting and coparenting** outcome: at the 9-month follow-up wave, mothers who received the treatment were more likely to report that the couple made decisions about the focal child jointly. However, they also provided a more negative rating of themselves as parents than comparison mothers—a negative treatment effect.

Couples-based analyses found positive findings for several outcomes and no negative ones. In the **intimate relationship quality** domain, couples who received the healthy relationship seminars were less likely than comparison couples to perpetrate any emotional abuse over time. In the **parenting and coparenting** domain, they were more likely to report that the father lived with the focal child after release.

MFS-IP Study Participants in the Four Impact Sites

Men and women in the MFS-IP impact study were racially and ethnically diverse, typically in their 30s, and most often in nonmarried intimate partnerships of longstanding duration. Most were parents of minor children (together and separately), with fathers reporting an average of about three children and mothers an average of about two children. The racial/ethnic composition of the samples varied by site, with Indiana having the largest proportion of White sample members, New Jersey the largest proportion of Black sample members, and New York the largest proportion of Hispanic/Latino sample members. The mothers' educational attainment tended to be somewhat higher than the fathers'.

Fathers had long histories of involvement with the justice system, and had been incarcerated for an average of three years at baseline. In each site, fathers had many prior arrests, with extensive histories of being incarcerated as adults and detained as youth. Less than a third of the mothers in the study reported ever being incarcerated.

IMPLICATIONS FOR FUTURE RESEARCH AND PRACTICE

The MFS-IP impact evaluation suggests it is possible that couples-based activities delivered in a prison setting can support family relationships. This study is unique among family strengthening intervention evaluations in demonstrating that a low-dosage activity (Indiana's one-time healthy relationship retreat) can have sustained positive effects on partnership and parenting relationships in a low-income, justice-involved population. Further, while the results in Ohio, New Jersey, and New York were largely non-significant, weak, positive findings for couples on some dimensions of intimate relationship quality suggest that these other program models might also facilitate improved couple relationships, but their designs would need to be strengthened and additional rigorous research would be needed to validate improvements in outcomes.

Future program design and evaluation efforts would benefit from careful attention to implementation context. Although each site had a distinct program model, the implementation context of the Indiana program distinguished it from other approaches in several ways. First, the program was delivered exclusively to residents of special character- and faith-based

housing units who may have been more ready for this type of support.⁶ Second, according to program administrators, there was a good fit between the message of the healthy relationship seminar and other program components available to the character- and faith-based housing residents, with the curriculum thought to reinforce and be reinforced by other programming. Third, the MFS-IP qualitative study findings⁷ indicate that very specific contextual aspects of the Indiana healthy relationship retreat itself (e.g., female partners staying in a hotel, couples being treated to experiences like having a special meal together) were highly salient for participants. Consistent healthy relationship program effects in Indiana suggest that programs may be more effective when design and implementation decisions take into account the total context in which the program will be operated. Any replication of the Indiana model should take into account that the evaluation design could not disentangle the effectiveness of the couple retreat from the overall prison programming and environment in which the retreat was offered. It may be that a couples retreat would only be effective within the context of comprehensive programming focused on personal transformation.

Different programming may be needed to address family circumstances during incarceration and after release. Though they showed some promising effects, the specific family strengthening models tested in the MFS-IP study, including Indiana, were not robust enough to have sustained impacts on family relationships during incarceration and after release. Across sites and follow-up waves, the couples-based activities studied did not produce a consistent pattern of improvement in communication skills, healthy marriage beliefs, or conflict resolution skills—three key components of most healthy relationship education programs. MFS-IP qualitative data suggest that many couples found it difficult to translate the skills they learned during the male partner's incarceration into improved relationships in the community upon his release. Such findings suggest that policymakers and practitioners give further consideration to understanding the distinct skills and resources required to support family relationships in the context of incarceration and in the context of reentry. Different approaches to services for justice-involved couples may need to be available during the pre- and post-reentry periods.

Higher-risk couples may also gain from relationship strengthening programs. The impact findings shed new light on a longstanding question of interest to program funders and designers alike—whether more stable or committed couples are more amenable to family strengthening intervention. Results in Ohio and New Jersey, although weak, suggest that interventions with couples in relatively more precarious relationships should not be ruled out. In both sites, treatment couples had more barriers or identified risks than the comparison couples. But over time, treatment couples improved more on some outcomes relative to their baseline status than did the comparison couples. Family strengthening programs should not discount serving diverse groups of justice-involved couples and rigorously evaluating the results.

Assessing the impact of family strengthening activities on couples over time, can provide insights on program impacts. In addition to the point-in-time impact on the individuals, the MFS-IP study approach enabled an assessment of impacts at the couple level and accounted for the variation in couples' baseline status with regard to the outcome. By routinely collecting information from both partners at baseline and over time, reports from fathers, mothers, and couples can be analyzed. Rather than only comparing outcomes for fathers as a group and mothers as a group at each follow-up time point, the analytic approach used in this study showed that couples can also be used as a unit of analysis. By measuring improvement or

⁶ As noted previously, both treatment and comparison fathers in Indiana resided in the character and faith-based housing units. Statistical tests showed no significant differences in self-reported spirituality between the two groups. However, both treatment and comparison fathers in Indiana had significantly higher levels of spirituality than the fathers in the other impact sites, confirming that the Indiana sample was distinct from the fathers in the other sites along this dimension.

⁷ Qualitative findings will be published in 2016.

deterioration from their varied starting points, couples' analysis can provide additional information for the development and evaluations of family strengthening programs.

MFS-IP Study Limitations

When interpreting the findings presented in this report, several limitations of the evaluation should be considered.

First, this study did not evaluate the impact of each grantee's overall OFA-funded programs but rather evaluated the impact of four site-specific couples-based interventions. In three sites, this intervention was limited to healthy relationship education only and in two of these sites, the effect of a one-time couples' seminar/retreat was the focus. Therefore, the positive program impacts in Indiana and the lack of program impacts found in Ohio, New Jersey, and New York should not be interpreted to mean that their overall programs were effective or ineffective. Importantly, the grantees included in the impact evaluation who received additional OFA funding under subsequent funding streams have made a number of modifications to their original programs and the results presented here do not reflect the second and third generation programmatic activities that they have put into place.

Second, as noted the evaluation was a series of site-specific evaluations rather than a cross-site evaluation of a single program model. The demonstration nature of the grantees and absence of a unifying program model across the funded sites necessitated this approach. However, the inability to pool data across sites (due to disparate program models and differences in target populations) limited the statistical power of the evaluation, making it more difficult to detect treatment effects.

Third, the small sample sizes in New York and New Jersey, and, to a lesser extent, the imbalance between the treatment and comparison groups in Ohio, further limited our ability to detect treatment effects in these sites. Sample sizes for the evaluation were directly related to the number of couples served by the programs, and New York and New Jersey enrolled smaller numbers of couples than Indiana and Ohio. The enrollment at the fifth impact site, Minnesota, was so small during the study enrollment window that it was dropped from the impact site analysis.

Finally, random assignment to the treatment or comparison conditions was not feasible, resulting in the use of quasi-experimental designs in all four sites. Although a number of post-hoc statistical adjustments were implemented to minimize differences in treatment and control group characteristics, thereby reducing the possible role of selection bias, we cannot rule out the possibility that the couples in the treatment and comparison groups were different in additional unmeasured ways. Therefore, some of the positive treatment effects in Indiana and the lack of significant effects in the remaining three sites may have been influenced by selection bias.

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About the MFS-IP Study

Funded by the HHS Office of the Assistant Secretary for Planning and Evaluation (ASPE) and the Office of Family Assistance (OFA), the Multi-site Family Study of Incarceration, Parenting and Partnering (MFS-IP) is focused on exploring the effectiveness of relationship and family-strengthening programming in correctional settings.

Implementation Study: Annual site visits entailing in-depth interviews and program observations were conducted with all 12 grantee programs through fall 2010. The implementation evaluation comprehensively documented program context, program design, target population and participants served, key challenges and strategies, and program sustainability.

Impact Study: From December 2008 through August 2011, couples participating in MFS-IP programming and a set of similar couples not participating in programming were enrolled in the national impact study conducted in five of the grantee program sites. Study couples completed up to four longitudinal, in-person interviews that collected information about relationship quality, family stability, and reentry outcomes.

Qualitative Study: A small qualitative study was added in 2014, in which in-depth interviews were conducted with about 60 impact study couples to capture detailed information about the families' experiences during the male partner's reentry.

Predictive Analytic Models: Using the impact study sample of more than 1,482 couples (from the 1,991 men who did baseline interviews), a series of analyses is being conducted to examine the trajectories of individual and family relationships and behaviors before, during, and after release from incarceration. A public use dataset will be released for further analysis at the completion of this project.

This brief and other publications related to the MFS-IP evaluation are available from the HHS ASPE website: <http://aspe.hhs.gov/basic-report/evaluation-marriage-and-family-strengthening-grants-incarcerated-and-reentering-fathers-and-their-partners>.

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