FROM INCARCERATION TO SUCCESSFUL REINTEGRATION: AN ETHNOGRAHIC STUDY OF THE IMPACT OF A HALFWAY HOUSE ON RECIDIVISM AMONGST FEMALE EX-OFFENDERS

STEPHANIE ANNE VAN WYK

Thesis presented in fulfilment of the requirements for the degree of Masters Degree in the Faculty of Arts and Social Sciences in the Department of Psychology at Stellenbosch University

Supervisor: Dr. Jason Bantjes
April 2014
Declaration

By submitting this thesis electronically, I declare that the entirety of the work contained therein is my own, original work, that I am the sole author thereof (save to the extent explicitly otherwise stated), that reproduction and publication thereof by Stellenbosch University will not infringe any third party rights and that I have not previously in its entirety or in part submitted it for obtaining any qualification.

______________________  ________________________
Signature:                Date:
ACKNOWLEDGEMENTS AND DEDICATION

I would not have completed this thesis if it were not for the help of:

- Dr. Jason Bantjes – for his guidance, expertise, motivation and support and the capacity to always listen to me even when it was not about my thesis.
- My husband, Andre van Wyk – for all his motivation and moral support through the long and often difficult years of study.
- Dr. Madeleine Duncan, my friend and mentor who told me that a masters research project was the right thing for me to pursue – I thank her for her encouragement and the time that she gave to listen and help me manage the minor and not so minor crises in my life during this time.
- Darlene and Jeremy Cons – for all the kind words they have given on this journey and the fact that they always seemed to have time to listen when I needed to talk.
- Merle Hendricks and Una Goliath – the halfway house parents – for their sacrifice of time in running things at the halfway house when I was otherwise engaged with study.
- The Lord God Almighty – without whom I can do nothing.
ABSTRACT

This thesis examines the psychological and social reasons for recidivism among women offenders of the law and explores the impact halfway houses could have on reducing recidivism in SA.

Despite the problem of high crime and offender recidivism in SA there is a lack of research into projects within the country that are attempting to address the situation. This paper ascribes to be an authentic voice from one who has had the unique opportunity of observing the SA prison system from within, over a period of 15 years, and one who has sought to assist ex-offenders in their reintegration from prison to society by providing support once outside of prison over the past 10 years.

The thesis is auto-ethnographic in design and method. This research examines the reasons for criminal acts among women and seeks to investigate and determine the unique complexities surrounding women and crime. A high prevalence of sexual and physical abuse is corroborated as common precursors to conduct problems in female offenders, while mental ill health is found to be marked among women in prison. Recommendations are made for the establishment of halfway houses in SA and strategies are suggested for the development of such halfway houses.

KEY WORDS: recidivism, female crime, halfway house, sexual and physical abuse, mental health
Hierdie verhandeling ondersoek die sielkundige en sosiale redes vir residivisme onder vroue oortreders van die wet en ondersoek die impak wat halfweghuise kan hê op die verminding van residivisme in Suid-Afrika. Ten spyte van die probleem van hoë misdaad en residivisme in Suid-Afrika is daar nie baie geskryf oor projekte in die land wat probeer om die situasie aan te spreek nie.

Hierdie verhandeling is geskryf om ’n outentieke stem te wees van ’n persoon wat ’n unieke geleentheid het om die Suid-Afrikaanse gevangenis stelsel van binne af te sien oor ’n tydperk van 15 jaar, en wat poog om die probleem wat ex-oortreders vind met herintegrasie uit die tronk deur middel van ondersteuning buite die tronk vir die afgelope 10 jaar.

Die verhandeling is outo-etnografies in ontwerp en metode. Hierdie tesis neem die redes in ag van kriminele dade onder vroue en poog om die unieke kompleksiteit rondom vroue en misdaad te ondersoek. Die navorsing staaf ’n hoë voorkoms van seksuele en fisiese mishandeling as ’n gemeenskaplike voorloper probleem in vroulike oortreders. Geestesgesondheid is waar geneem onder vroue in die tronk. Die idee van halfweghuise in die Suid-Afrikaanse gemeenskap is op die been gebring. Die artikel stel verder strategie vir die ontwikkeling van die halfweghuise in Suid-Afrika voor.

**SLEUTELWOORDE**: residivisme, vroulike misdaad, halfweghuise, seksuele en fisiese mishandeling, geestelike gesondheid.
TABLE OF CONTENTS

Title page........................................................................................................... i.
Declaration........................................................................................................ ii.
Acknowledgements and Dedication................................................................... iii.
Abstract........................................................................................................... iv.
Opsomming....................................................................................................... v.
List of Tables.................................................................................................. xi.

CHAPTER 1: FROM INCARCERATION TO SUCCESSFUL REINTEGRATION

1.1 Introduction................................................................................................. 1
1.2 Motives for Writing this Research............................................................ 4
1.3 Structure of Chapters................................................................................ 6
1.4 Conclusion................................................................................................. 8

CHAPTER 2: CONTEXTUALISING THE PROBLEM OF RECIDIVISM AMONG WOMEN IN SA

2.1 Introduction................................................................................................. 9
2.2 Definition of Key Terms............................................................................ 9
2.3 Crime in SA.............................................................................................. 10
2.4 Psychosocial, Economic and Political factors that Contribute to Crime.................................................................................. 10
    2.4.1 Family and community influence on criminal activity........... 12
    2.4.2 Crime and education................................................................. 13
    2.4.3 Crime and substance abuse..................................................... 14
2.5 Reasons for high rates of recidivism in SA.............................................. 15
CHAPTER 3: RESEARCH METHODOLOGY

3.1 Introduction ....................................................................................... 26
3.2 Why Auto-ethnography as a Research Design? ................................. 26
3.3 Auto-ethnography as a Research Method ......................................... 28
3.4 The Epistemology of Auto-ethnography ............................................. 32
3.5 Research Design .................................................................................. 35
3.5.1 The research questions and aims ..................................................... 35
3.5.2 Data collection .................................................................................. 36
3.5.3 Participants ...................................................................................... 37
3.5.4 Data analysis ................................................................................... 39
3.5.5 Ethical considerations and permissions ......................................... 44
3.6 Reflexivity .......................................................................................... 44
3.7 Evaluating Auto-ethnography ............................................................ 46
3.8 Conclusion ......................................................................................... 47

CHAPTER 4: THE HALFWAY HOUSE AS A TRANSITIONAL SPACE

4.1 Introduction ....................................................................................... 49
<table>
<thead>
<tr>
<th>Section</th>
<th>Title</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>4.2</td>
<td>Theoretical Framework................................................................</td>
<td>51</td>
</tr>
<tr>
<td>4.2.1</td>
<td>Freud’s concept of repetition compulsion</td>
<td>51</td>
</tr>
<tr>
<td>4.2.2</td>
<td>Facilitating corrective emotional experiences</td>
<td>52</td>
</tr>
<tr>
<td>4.2.3</td>
<td>Winnicott’s concept of holding</td>
<td>53</td>
</tr>
<tr>
<td>4.2.4</td>
<td>Bion’s concept of containment</td>
<td>56</td>
</tr>
<tr>
<td>4.3</td>
<td>A Story that tell why Many Women Ex-offenders need a Transitional Space</td>
<td>58</td>
</tr>
<tr>
<td>4.4</td>
<td>Prison’s Failure to Rehabilitate the Offender</td>
<td>65</td>
</tr>
<tr>
<td>4.4.1</td>
<td>The belief that ‘nothing works’</td>
<td>66</td>
</tr>
<tr>
<td>4.4.2</td>
<td>The institution of prison</td>
<td>66</td>
</tr>
<tr>
<td>4.4.3</td>
<td>Lack of dealing with mental health illnesses</td>
<td>67</td>
</tr>
<tr>
<td>4.4.4</td>
<td>Corruption, drugs and alcohol in prison</td>
<td>70</td>
</tr>
<tr>
<td>4.5</td>
<td>Providing Holding and Facilitating Corrective Emotional Experiences</td>
<td>71</td>
</tr>
<tr>
<td>4.5.1</td>
<td>Meeting basic needs for food and shelter</td>
<td>72</td>
</tr>
<tr>
<td>4.5.2</td>
<td>Showing unconditional care</td>
<td>73</td>
</tr>
<tr>
<td>4.5.3</td>
<td>Improving education and skills</td>
<td>75</td>
</tr>
<tr>
<td>4.5.4</td>
<td>Structure, routine, rules and consequences</td>
<td>76</td>
</tr>
<tr>
<td>4.5.5</td>
<td>Providing opportunities for sincere and authentic relating with house parents</td>
<td>79</td>
</tr>
<tr>
<td>4.6</td>
<td>Some of the Challenges Providing Holding</td>
<td>83</td>
</tr>
<tr>
<td>4.6.1</td>
<td>Employing house parents</td>
<td>83</td>
</tr>
<tr>
<td>4.6.2</td>
<td>The potential for burnout</td>
<td>84</td>
</tr>
<tr>
<td>4.6.3</td>
<td>Securing sufficient funding</td>
<td>86</td>
</tr>
<tr>
<td>4.6.4</td>
<td>Relationship with Correctional Services and Community Corrections</td>
<td>86</td>
</tr>
<tr>
<td>4.7</td>
<td>Conclusion</td>
<td>87</td>
</tr>
</tbody>
</table>
CHAPTER 5: ABANDONMENT AND ATTACHMENT

5.1 Introduction........................................................................................................ 89
5.2 Moving beyond the diagnostic label of ‘Antisocial Personality Disorder’ ............................................................ 90
5.3 Psychodynamic understanding of the Antisocial Personality Structure ................................................................. 91
5.4 Conceptualising Antisocial Behaviour within Bowlby’s Theory of Attachment .......................................................... 94
5.5 Narrative: the Story of Ellen............................................................................... 97
5.6 Responding Therapeutically to Ellen................................................................. 105
5.7 Regression: a return to Earlier Patterns of Behaviour.................................. 108
5.8 Therapeutic Failure: an Inability to be Helpful.............................................. 110
5.9 Klein’s concepts of Envy and Gratitude......................................................... 112
5.10 Reflecting on Ellen’s journey........................................................................ 116
5.11 Discussion: Implications for the halfway house......................................... 119
5.12 Conclusion ..................................................................................................... 124

CHAPTER 6: THE FEMALE EX-OFFENDER AS PARENT

6.1 Introduction........................................................................................................ 126
6.2 Incarcerated Women as Estranged Parents..................................................... 128
6.3 Factors that Impede the Ex-offender’s Ability to be a ‘Good Enough’ Mother ................................................................................. 134
6.4 Narrative: the Story of Mary......................................................................... 137
6.5 Conclusion..................................................................................................... 148

CHAPTER 7: REFLECTIONS AND RECOMMENDATIONS

7.1 Introduction........................................................................................................ 150
7.2 Involvement with Offenders of the Law ....................................................... 151
<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>7.3 Practical and Theoretical Growth</td>
<td>152</td>
</tr>
<tr>
<td>7.4 Evaluating the Thesis as Auto Ethnographic</td>
<td>154</td>
</tr>
<tr>
<td>7.4.1 A substantial contribution</td>
<td>154</td>
</tr>
<tr>
<td>7.4.2 Aesthetic qualities</td>
<td>156</td>
</tr>
<tr>
<td>7.4.3 Reflexivity</td>
<td>157</td>
</tr>
<tr>
<td>7.4.4 Expression of living reality and impact</td>
<td>158</td>
</tr>
<tr>
<td>7.5 Unanswered Questions, Unresolved Issues</td>
<td>159</td>
</tr>
<tr>
<td>7.6 Recommendations and Further Research</td>
<td>160</td>
</tr>
<tr>
<td>7.7 Limitations of the Research</td>
<td>162</td>
</tr>
<tr>
<td>7.8 Concluding Remarks</td>
<td>163</td>
</tr>
<tr>
<td>References</td>
<td>166</td>
</tr>
<tr>
<td>Appendices</td>
<td>182</td>
</tr>
<tr>
<td>Appendix A – Questionnaire</td>
<td>182</td>
</tr>
<tr>
<td>Appendix B – REC Approval Notice</td>
<td>184</td>
</tr>
<tr>
<td>Appendix C – Approval Letter from NPO Board</td>
<td>185</td>
</tr>
</tbody>
</table>
LIST OF TABLES

Table 3.1  List of Ex-offender Participants........................................ 38
Table 3.2  Emerging Themes from Analysis........................................ 41
Table 4.3  A Story the Illustrates the Need for Tangible Support......... 64
Table 4.4  A Story that Demonstrates the Need for Psychological Therapy ................................................................. 69
CHAPTER 1

FROM INCARCERATION TO SUCCESSFUL REINTEGRATION:
AN ETHNOGRAHIC STUDY OF THE IMPACT OF A HALFWAY HOUSE ON RECIDIVISM AMONGST FEMALE EX-OFFENDERS

1.1. Introduction

This thesis is an auto-ethnographic enquiry into the psychological and social reasons for recidivism among women offenders of the law and an exploration of the impact halfway houses could have on reducing recidivism in South Africa (SA).

I have worked as a volunteer in a large state-run prison for the past 15 years. The prison houses 7,500 people and is situated in a large city in SA. Over this time I not only established good relationships with the authorities and many women offenders but also had a unique opportunity to observe the SA prison system from within. During the first few years of doing work in prison I noticed that within a period of three years most of those who had been released from prison were back behind bars. After investigating the circumstances surrounding reintegration for ex-offenders into society, I decided to look into how I could assist in addressing the problem. The organisation was developed for this purpose and was registered as a non-profit organisation and a halfway facility was opened for women on parole in a suburban house in July 2003. The aim was to address the problem of recidivism. To date the halfway house has accommodated 65 women, of whom 50 have succeeded in making the transition into a life free of crime.

The term ‘halfway house’ and ‘organisation’ are used synonymously throughout the thesis to refer to the Non-Profit Organisation (NPO) that I founded. The actual name of the organisation and its location has not been used in order to protect the
identity of the halfway facility, the prison involved and the women whose stories are
shared in this work.

My observations in the prison, as well as my experience of establishing and
running a halfway house, have given rise to this thesis that serves as both a record of
my experience and a critical reflection on the psychosocial factors that contribute to
helping women ex-offenders reintegrate into society. The study also draws heavily on
data collected from in-depth interviews with women recidivists who have resided in
the halfway house. It will investigate why some women recidivists find themselves
back in prison within a short period of being released and will examine the needs and
difficulties women recidivists confront once they leave prison. Furthermore, the
enquiry explores the role the halfway house has played in helping women recidivists
reintegrate successfully into society.

The narrative presented in this thesis does not attempt to tell the whole story of
the last 15 years of working with offenders of the law, but is an attempt to give the
reader deeper insight into the complexities of working with offenders who are having
difficulty abstaining from crime. It tries to communicate to the reader the many
unrevealed challenges the offender must confront in the process of rehabilitation. It
endeavours to inform those reading of the resources needed to help offenders of the
law, the personal, individual attention and particular involvement that are required; it
is an attempt to make a case for the silenced voice of the offender.

In particular I will focus on three areas that I believe to be integral to the
success of the halfway house. The first addresses the question of why ex-offenders
need a transitional space between prison and society. This is the focus of chapter four
which describes the reality of why many women are unable to return to their families
and communities and why they require material, practical and emotional support
while they reintegrate into society. The second area addresses the necessity of dealing with personality issues in the halfway house. I have learnt that it is not always possible (no matter how thorough the initial assessment or selection process is) to discern individual personality dynamics and the prevalence of personality disorder in this population. These dispositions arise and hence need to be dealt with. This is the focus of chapter five. The third area focuses on the ex-offender as parent. Statistics confirm that 70% of women offenders in SA prisons are mothers (Luyt, 2008) and part of their rehabilitation is reconnecting them to their role as ‘mother’ (Covington, 2001). This is an extremely complicated journey and in chapter six I attempt to present the typical journey many mothers walk as they try to parent children from whom they have often been alienated for years. This journey is difficult for the ex-offender who is a mother and who has limited emotional, parental and financial resource, but reclaiming their mothering role often serves as a preventative factor in further offending.

Essentially this thesis is an ethnography of caring. As Bochner (2001) rightly describes, “Ethnography is a social science directed purposefully toward empathy, caring, or identifying with the suffering of others” (p. 143). I want the narrative to prompt the reader to understand how much the ex-offender needs tangible and psychological support to enable her to abstain from crime. I remember the story of the woman for whom I advocated to be released into the custody of the halfway house. I remember the astounded magistrate who could not believe I would fight this hard for one woman offender who had 39 counts of shoplifting against her. The magistrate’s response indicated her wish that every offender could be given the time, the extra five minutes, to closely examine the case against them, to have someone who would care enough to survey their situation and needs so that individuals could receive the help
they required. I have realised that each person wants to be given time, to have someone hear their story, to know that their story matters so that they do not need to suffer in silence anymore.

1.2. Motivations for Writing this Narrative

Ellis (1995) writes that in telling her story of chronic illness she sought to raise her reader’s awareness and thus transform their response to the issue presented. This goal of raising awareness is central to the narrative presented here. As such, this thesis is an advocacy document that offers an argument for the kinds of support women offenders require in order to abandon their identity as ‘criminals’.

Richards (2012) writes of her experience as a kidney transplantee and how this changed her identity, the person she was before the transplant and the person she is after the transplant. In a similar manner being incarcerated changes a person’s identity and brands her as a criminal. When the offender leaves prison she has to live with this new identity, she must try to make sense of it and accept it as something she cannot change. They additionally have the pressure of having to piece back together a life in order to gain some control over her destiny. Resistance and struggle are part of this journey. The ex-offender often lives between the ‘now’ and the ‘then’, constantly reminded of their past. When they apply for a job, when they hear others speak of crime, when they try to make amends to their families and with their children, the presence of the past is there. They live in both the identity of a new person and the identity of the old. They look normal, act like everyone else, but their criminality and incarceration has changed them. They are afraid of marginalisation, of stereotypical branding, of stigma and of mistrust. If something goes missing they wonder if others will accuse them. Years behind bars can cause them to believe they do not belong in
society. As they start seeing themselves as ‘normal’ one person’s judgment can remind them of their ‘abnormality’.

In many aspects this thesis is an ethnography of human rights. It represents the marginalised ex-offender, and there is an activist element underlying much of the argument. I want my research story to personify the ex-offender as a human being (with a context, personal history and individual motives, thoughts and feelings), not someone ‘other’ to myself. Richards (2012) speaks of a ‘throw away’ remark that affected her very deeply. She believed herself to be doing very well after her kidney transplant but a doctor’s comment threw her confidence when he retorted, ‘You look very well for a transplant’. This statement contained an element of depersonalisation; it additionally filled her with doubt that perhaps she should not be doing that well (Richards, 2012). ‘Throw away’ remarks are damaging. South Africans make ‘throw away remarks’ such as: ‘Lock them (criminal offenders) up and throw away the key’; ‘Why are we still using animals for research when there are so many people behind bars?’ and ‘Why don’t we use the vacant goldmine shafts to house offenders?’ The naivety of these kinds of comments belies the reality that most criminals do return to society and do seek to be reintegrated and sometimes (albeit with struggle) they do assume a new identity as ‘law abiding’. The reality is that we encounter the ex-offender in shopping malls, at church, at our schools and at other recreational events all the time. The ex-offender is among us; they are not ‘other’ to us.

If we view the crime problem as a collective SA problem then the offender becomes part of who we are, like our family and our responsibility. Paying attention to how ex-offenders are reintegrated into society and helping them to create a new identity as ‘law abiding’ citizens is integral to any strategy to reduce crime. This attitude does not excuse criminal behaviour; it is taking the stance of trying to
understand and resolve some of the causes of the cyclical habit of criminal activity. By advocating this I do not exclude government authorities or the judicial system. They are included in the ‘us’ and have an obligation to play their role too.

1.3. Structure of Chapters

In chapter two I define recidivism and describe the context of this research by reviewing the literature on why recidivism rates are high among women in SA. This literature sets the scene for understanding some of the challenges faced when attempting to help reintegrate women into society on their release from prison.

Chapter three clarifies the qualitative auto-ethnographic research methodology I have employed in this study. In this chapter I identify the research questions and explain why auto-ethnography is an appropriate methodology for answering these questions. I discuss the epistemology of this research method and locate it within a postmodern paradigm. I describe in detail the methods of data collection and analysis and describe the participants in this study.

Chapter four describes how a therapeutic community is created within a halfway house and how the structures and practices support the ex-offender’s transition into society. Concepts borrowed from psychoanalytic theory will be employed as heuristic devices to explain how the halfway house works. The chapter includes discussion of the work of Winnicott and Bion. The chapter concludes by proposing how the halfway house can be understood as both a holding environment and a transitional space that provides containment and corrective emotional experience for the woman ex-offender, which supports their successful reintegration into society.
Chapter five illustrates the difficulties of dealing with the individual characters that come to live at the halfway house. Many women offenders meet the diagnostic criteria for antisocial personality disorder and/or borderline personality disorder. Likewise, many of the women who find themselves in prison have suffered early traumas and parental neglect that have given rise to attachment difficulties, problematic interpersonal styles and defensive ways of dealing with primitive emotions. This chapter demonstrates how these difficulties can arise by recounting the story of one woman. I draw on concepts described by Klein and Bowlby, as well as the work of McWilliams, to make sense of this experience.

In chapter six I narrate the story of how a women ex-offender, a mother who is also a drug addict, went through the process of trying to take back the responsibility of taking care of her children while staying at the halfway house. I describe some of the challenges and painful responses she had to endure in order to regain trust and build a relationship with her children and her family. I expound on the difficulties she faces while trying to parent her children from whom she has been alienated for many years and re-assume her role as an adult parent in society. The chapter further endeavours to justify why training and mentoring in parental skills is an essential component of successful rehabilitation for the ex-offender/drug addict/parent.

The final chapter concludes with a summary of what I have learned during the course of running a halfway house and working in the prison for the last 15 years. I share some of the challenges I faced and how this has caused me to grow as an individual. I clarify the limitations of the research, define some of the difficulties of participating in work of this nature and give some recommendations for further research.
1.4. Conclusion

This research project attempts to tell the story (or at least part of the story, for no narrative is ever complete) of the lives of recidivists; it explains the many reasons for criminal activity and highlights the reasons why criminals continue or stop committing crime. It tells the story of what support these women need. I, as narrator, have become embedded in the cultural context of a prison and in the halfway house where the ex-offender comes to stay once leaving prison. My story is a human story and as Richards (2012) so aptly describes, objective distance is never sustainable in human stories. For me this story is unique in that I know of no other organisation to date that has run a project for this long in SA with sustained success. This story highlights the success of a halfway house but probably not as many would define success. I was once asked if the women passing through our home acquired ‘meaningful’ work during their stay. I immediately replied by asking how ‘meaningful’ work could be defined? What I consider to be meaningful is not necessarily what the ex-offender considers to be meaningful. Likewise the ‘success’ I describe in this project may not denote success as it might be defined by others.
CHAPTER 2

CONTEXTUALISING THE PROBLEM OF RECIDIVISM AMONG WOMEN IN SA

2.1. Introduction

This chapter describes the context of the research undertaken in this thesis by reviewing the literature on crime and recidivism and the factors that contribute to this, particularly among women in SA. The chapter includes a presentation of the literature on women in prison and concludes with a discussion of the need for social integration upon their release. This literature is presented by way of offering an argument for the need for half-way houses for women ex-offenders, but it also serves to highlight some of the challenges that are present in helping women reintegrate into society on release from prison.

2.2. Definition of Key-Terms

The term ‘criminal recidivist’ is allied to the term ‘habitual offender’ and describes an individual who continues to engage in wrongdoing and misdemeanours after perpetual warning and corrective action has been taken. These repeated crimes result in the individual reappearing in the justice system and thus driving recidivism rates higher (Bartley, 2010).

The term ‘halfway house’ refers to a place of residence for parolees, probationers or ex-offenders (those not on parole or probation). The home, usually situated within a residential community, provides the parolee, probationer or ex-offender with structure in the form of a safe place to live, supervision and counselling, and essential rehabilitation programmes to help them reintegrate into community as effortlessly as possible (Mirriam-Webster’s Dictionary, n.d.). The purpose of these
homes is to promote successful reintegration into community that minimises the risk of re-offending and thereby ultimately contributes to a decrease in the country’s overall crime rate (Dunlap, 1981).

2.3. Crime in SA

Crime continues to be a serious, albeit difficult to quantify, social and economic problem in SA. According to the SA national crime statistics, there were 17,259 cases of murder in 2012 (an increase of 650 from the previous year) (SAPS Strategic Management, 2013). Patel (2013, 20 September) of the Daily Maverick comments that murder, as the most accurate of all crime categories, is an important indicator of the overall level of criminality and stability in the country. The minister of Correctional Services, Mr Sibusiso Ndebele, on World Tuberculosis day 2013, stated that there were 152,550 inmates in prison in SA (Department of Correctional Services (DCS), Office of the Minister, 2013). Currently in SA, 23,000 offenders exit prison while 25,000 are admitted on a monthly basis. To keep offenders in prison in 2013 costs the SA taxpayer R8000 per month per offender (DCS, Office of the Minister, 2013).

There are many psychosocial, economic and political reasons for the high crime rate in SA, which are discussed below. Recidivists are mostly responsible for the high rate of crime in the country (Muntingh, 2008). The reasons for these high recidivism rates will be presented in the latter half of this chapter.

2.4. Psychosocial, Economic and Political factors that Contribute to Crime

Criminal activity has its roots in a range of psychological, social, economic, political and historic factors (Bruce & Gould, 2009). Criminal behaviour is often understood to be a function of individual psychological factors, such as personality
traits, cognitive processes (Kjelsberg, Rustad, & Karnik, 2009) and neurobiological factors (Brewer-Smyth, 2004). For example, Kjelsberg, Rustad, and Karnik (2009) found that low internalised restraint and high distress predicted repeat criminal activity in young offenders. The Weinberger Adjustment Inventory’s 4-quadrant typology based on its restraint and distress dimensions was used. Distress and restraint are seen as dimensions of social-emotional adjustment. Distress indicates the individuals “tendencies to feel dissatisfied with themselves and their ability to achieve desired outcomes”, and restraint is related to “socialisation and self-control and refer(s) to suppression of egoistic desires in the interest of long-term goals and relations with others” (Kjelsberg et al., 2009, p. 299-300). Offenders with low restraint scores ran a three times higher risk of re-offending than those with high restraint scores (Kjelsberg et al., 2009). In the light of the above findings, shifting from an external locus of control to an internal locus of control becomes very important for the ex-offender. When people have an Internal Locus of Control they expect that the way they respond to everyday situations will make a difference to what happens, while others believe what happens to them is more a matter of chance and they thus expect to be ineffectual. The latter can be explained as having an External Locus of Control (Meyer, Moore, & Viljoen, 2002).

Although individual personality variables are associated with criminality, it has been well established that environmental influences also play a significant role in precipitating criminal activity (Kinnis, n.d.). This is particularly true in SA where political and historic factors have resulted in large sectors of the country’s population living in communities where social problems such as poverty, domestic violence, substance abuse and lawlessness have given rise to conditions which are conducive to precipitating criminal activity (Bruce & Gould, 2009). The discussion that follows
highlights the evidence that criminal activity is a function of environmental factors such as early family influences, exposure to childhood trauma and neglect, lack of education and substance abuse.

2.4.1. Community and family influence on criminal activity.

There is a high association between childhood exposure to trauma and crime; most imprisoned offenders have a history of some kind of severe physical, emotional or sexual abuse. It has been shown that children who are neglected or abused have a greater propensity to be violent, break the law and become addicted to substances later in life than others (Welfare & Hollin, 2012). Maschi, Bradley, and Morgen (2008) describe the relationship between criminality and environmental influences among children growing up in low-income inner-city environments in the USA. They found that the two pointers that predict the perpetration of violent acts are the experience of childhood trauma with resulting negative affect, and exposure to negative peers. Many had also been exposed to violence and direct victimisation when young (Maschi, Bradley, & Morgen 2008). There is also a weight of evidence indicating that childhood abuse is associated with later violence together with other information that suggests that the traumatic effects of abuse can lead to further criminal acts (Welfare & Hollin, 2012).

People who grow up with abuse or antisocial behaviour are more likely to mistreat their children, who in turn follow the same pattern (Welfare & Hollin, 2012). The cycle of abuse, crime and sociopathy thus keeps repeating itself. Support for this idea is offered by Maschi et al. (2008) who have shown that the family within which a child grows up will play an enormous role in the extent to which the peer group will influence them later in life. Young people who are exposed to violence and criminal role models, who do not cope academically, and who lack supportive and affectionate
parents, are more vulnerable to be influenced by anti-social peers (Holborn & Eddy, 2011).

Patterson, DeBaryshe, and Ramsey (1990) additionally state that a lack of basic training in the home breeds antisocial children. They highlight that ineffective discipline with little positive parental participation with the child as reasons for antisocial development in children. Patterson et al. (1990) cite harsh discipline and lack of supervision as causes of disruptive parent/child bonding. Poor bonding with parents results in a child failing to identify with parental and societal values and norms regarding conformity and work. This inadvertently causes the child to develop a lack of internal control that directly hinders academic learning and pro-social behaviour (Patterson, DeBaryshe, & Ramsey, 1990). Antisocial children show poor academic achievement because of uncontrolled behaviour that involuntarily can lead to rejection by the normal peer group. Rejection by the normal peer group, plus chaotic family management, result in the child entering a defiant peer group which increases the likelihood of engagement in crime (Patterson et al., 1990).

2.4.2. Crime and education.

Hesselink-Louw, Joubert, and Maree (2003) found a strong correlation between low literacy levels, unemployment, poverty and crime. This is supported by surveys of inmates in prison in the UK who have very low education levels (Muntingh, 2005). Although there are no official statistics regarding the average education level of SA imprisoned offenders, the ‘Trends in Education Macro-Indicator Report: SA’ (Department of Basic Education (DBE), 2009) disclosed the completion rate of Grade 12 by 24 year olds in 2007 to be as low as 44%. The later report of 2011 showed that this average had not changed (DBE, 2011). Dissel and Muntingh (2003) strongly affirm that raising the educational levels of offenders in SA prisons will have a
significant impact on employability and hence on reducing re-offending. There is also evidence that a person’s level of education increases her/his degree of social obligation and thus works towards encouraging pro-social behaviour (Wentzel, 1991).

Lochner and Moretti (2003), in their research of the link between crime and education in the USA, found that education increased better job opportunity; that education increased the return to legitimate work; and that it decreased the chance of illicit behaviour. Education further increased patience and risk aversion (Lochner & Moretti, 2003). In a survey done in a USA prison setting, 98% of respondents felt that taking a college course helped increase their self awareness, self confidence, and self esteem (Hoppe, 1995). Crime is an adverse activity with enormous social costs. If educating a prisoner does bring social benefits and a reduction in crime and recidivism, then it is economically important in the SA context to address this aspect seriously.

2.4.3. Crime and substance abuse.

Parsons and Warner-Robbins (2002) showed that substance abuse played a significant role in criminal activity, and that almost 40% or offenders in federal prison in the USA were daily drug users. In addition to this most imprisoned women had committed nonviolent crimes and were convicted for drug and drug-related offenses on more than two occasions. The Naked Truth (TNT) (2012) records that 60% of crime nationally in SA is related to substance abuse, with the Western Cape having the highest rate of almost 80%. Perpetrators of crime in SA are often under the influence of drugs. They frequently commit crime in order to obtain money for the next fix (The Naked Truth, 2012). SA drug abuse rates are double that of the world norm and the cost related to this is as high as R130 billion per year (Central Drug Authority, 2012). Stuart and Brice-Baker (2004) found that individuals arreste for
drug offences were likely to have higher numbers of arrests and higher rates of recidivism than other, even violent, offenders. A major determinate of successful rehabilitation would therefore need to deal with substance abuse problems.

2.5. Reasons for high rates of recidivism in SA

Recidivism rates in SA are estimated to be between 55% and 95% (Schoeman, 2003). There are many reasons for these high rates, including the lack of rehabilitation while in prison; premature release from prison prior to any meaningful rehabilitation; the fact that the prison system is a harsh and damaging environment that fails to prepare individuals adequately for reintegration into society; and the lack of appropriate support for reintegration upon release from prison.

According to Dissel (2008) recidivism in SA will remain high because the type of rehabilitation available in the country’s prisons is not effective and is almost non-existent. This is confirmed by the Gaum, Hoffman, and Venter (2006) study of women incarcerated in Pollsmoor Prison in the Western Cape, SA, that demonstrated that the type of rehabilitation administered in prisons is having little positive outcome. Albertus (2010) highlights the fact that offender reintegration should begin from the moment an offender is sentenced to imprisonment but notes that this is sadly not the case in local prisons. Gaum et al. (2006) further note that making prisons a harsh environment with long prison sentencing and severe punitive punishment does not better the chances of rehabilitation for the offender. This is because inmates themselves have often been victims of crime and abuse, and eliciting the same treatment toward them can in fact have an even more detrimental impact on their behaviour.

Research confirms that imprisonment does not rehabilitate people, and neither
does it facilitate reintegration (Mbete, 2001). Mbete (2001) writes that there seems to be an assumption by society that spending time in prison of itself rehabilitates offenders, which is sadly not the case. Rehabilitation requires much effort and it should not be assumed that the offenders have the ability to transform themselves (Mbete, 2001).

As noted above there is a strong association between low literacy levels, unemployment, poverty and crime. Unfortunately overcrowding and resistance have often dulled initiatives to provide meaningful educational opportunities to those incarcerated in local prisons. Passive supervision (in which offenders are simply left locked up and un-stimulated in their cells) is often easier as the offender is locked up in a controlled area and safe. Active supervision (in which offenders are supervised while they engage in education, training or labour) requires constructive involvement by staff and others to facilitate programmes for offenders, which can be more difficult and has safety risks (Hesselink-Louw, 2009). One of the primary reasons why it is not possible to provide meaningful education and training to SA prisoners is because of resource constraints and the chronic over-crowding of local prisons (Muntingh, 2001). Currently there are 152,500 offenders in prison held in a space that was designated for 118,968 (DCS, Office of the Minister, 2013). Older prisons do not have extra room to house teaching and skills training programmes for the number of people who need them (Muntingh, 2001). Consequently many prisoners are released without the requisite skills for finding gainful employment; this severely hampers their reintegration into society and increases the likelihood of engaging in further criminal activity (Muntingh, 2001). Gaum et al. (2006) further explicate that rehabilitation programmes are often not effective because they continue to focus more on process than results. In other words there is a focus on offenders attending
programmes rather than on whether the programme has the desired effect of changing the individuals’ behaviour.

Ironically the authoritarian institutional setting of prisons can actually work against rehabilitation into society since it encourages apparent compliance and passivity without any real attempt to empower offenders to take responsibility for themselves and their lives. Gaum et al. (2006) have demonstrated that offenders will often adapt their behaviour behind bars (assuming a mantel of compliance in order to achieve early parole) but once they are freed from the restrictive environment will revert back to a life of crime. A prisoner’s behaviour while in prison does not therefore indicate that rehabilitation has taken place, but in SA prisons and with parole board decision makers, it remains a major reason many are released earlier than their projected time of sentence (Gaum, Hoffman, & Venter, 2006). Clark (1995) authenticates the Gaum et al. (2006) study and states that it is ironic that prison re-creates some of the dynamics of the dysfunctional background people come from in that it acts as ‘parent’ to the offender, imposing rules, sanctions and punishment. The institutional nature of the prison environment seems to undermine the type of autonomy, responsibility and healthy self-esteem that is needed to succeed outside of prison (Clark, 1995).

The prevailing rehabilitation norms are not the only contributor to high recidivism rates in SA. There is evidence to show that SA prisons, like those in many other countries, are harsh environments that have an adverse psychological and physiological impact on those who spend time in them (Muntingh, 2001). It has been shown that even a short-term sentence in a SA prison can have a dramatic effect on the emotional and psychological well-being of a person (Gaum et al., 2006). These findings are echoed by researchers in other countries (Abdullah, 2006; DeVeaux,
2013; Garcia, n.d.; & Haney, 2003). One graphic example of this is research conducted by Edwards and Potter (2004) in a medium security state prison in the USA, which explored how elements of the prison environment can affect a person psycho-pathologically and symptomologically. Although the study acknowledges that mental illness can be transitory and physiological, the investigation showed that offenders were affected upon entering the system and their levels of psychological distress definitely increased as a result of the environment (Edwards & Potter, 2004). Similarly, SA researchers have documented that the meaninglessness of time (the unoccupied and idle hours spent while in prison), is harmful to offenders and that 33% found their levels of concentration affected as a result of this, while 40% of offenders experienced sudden ‘mind voids’ and others complained that they could not control their memory after only one year in prison. Furthermore, many imprisoned individuals experience an acute deterioration of eyesight and hearing that results in hypersensitivity to noise (Muntingh, 2001). Patterns of behaviour learned in prison are generally not in line with those that are acceptable in society and for many offenders the exposure to very hardened criminals and gangs is hugely traumatising as many prisons do not separate offenders sentenced for serious crime from those who have committed less serious crime (Muntingh, 2001). These studies show that the hostile social experience of prison results in increased mental and psychological distress that leaves them ill prepared for healthy functioning and a smooth return to society. Many prisoners cope with these symptoms of psychological distress by abusing substances which further exacerbates the problem and predisposes them to re-engaging in criminal activity to support their substance use (Parsons & Warner-Robbins, 2002).
Not only are conditions in prison not conducive to rehabilitating inmates, but in SA the state has taken little responsibility for reintegrating individuals into society upon their release, contributing for the high recidivism rate (Muntingh, 2001). This has led Albertus (2010) to challenge the state’s budgetary allocation of 3.4% and 3.2% in 2009/2010 respectively for development and social reintegration, as this is insufficient to enable provision for adequate reintegration. Albertus (2010) has called on the DCS to take up the responsibility of facilitating and assisting offenders in their reintegration by actively addressing the inadequacy of the correctional system that has failed to prepare offenders for a crime-free life after they are released.

Albertus (2010) proposes that successful offender reintegration models need to take a holistic approach to addressing offenders problems and their involvement in crime by having a balance of group and private therapeutic sessions. She emphasises that this balance should be addressed on a need-basis during incarceration and after release. But this is sadly not the case in SA prisons because meaningful rehabilitation of offenders is impeded by a lack of suitably qualified and skilled rehabilitation workers (Gaum et al., 2006).

2.6. Women in Prison

Although there are some similarities between male and female offenders, the profile of imprisoned women in SA is significantly different from that of incarcerated men. Women represent only 2.3% of SA’s total prison population and in 2012, approximately 4000 women (including those awaiting trial) were being held in prisons countrywide (Artz, Hoffman-Wanderer, & Moult, 2012). Women’s imprisonment increased by 68% between 1995 and 2003 but this is in line with increases in men’s imprisonment by 69% during the same period. The length of sentences for women has also risen. The SA approach has been to increase the length
of sentencing for serious crime for both men and women criminals. This study also indicated that 37% of women in these three prisons in SA were arrested for committing violent crime related to domestic abuse (Haffejee, Vetten, & Greyling, 2006). Luyt’s (2008) research found this statistic to be as high as 50% overall in SA prisons that house women. This was mostly for assaulting or killing their partners in domestic violence disputes (Luyt, 2008).

An article in the Encyclopaedia of Crime and Punishment (2002) cites that women differ from men in their incentive for engaging in crime. Women are mostly arrested for involvement in minor property crimes, shoplifting, cheque fraud, and credit card fraud. Women offenders often justify their criminal behaviour of shoplifting as trying to provide supplies they could not afford. The article in Encyclopaedia of Crime and Punishment (2002) further explains that there is evidence that a feminisation of poverty, resulting from women’s discrimination into low-paid jobs and single parent status, increases their involvement in crimes of economic gain. Many women enter the sex trade to provide for themselves and their children when faced with no access to resources or lawful means of earning money (Encyclopaedia of Crime and Punishment, 2002).

There is a high incidence of psychological distress among women in SA prisons with many having experienced childhood neglect, childhood rape, physical abuse and violence in intimate relationships (Cauffman, 2008; Haffejee et al., 2006). Prison does not protect them, and often a continuance of violence and abuse occurs within the prison walls. They worry constantly about their children, they are often imprisoned far from where their families live, and when they do hear of a family member experiencing difficulty there is very little they can do (Haffejee et al., 2006).
Cauffman (2008) noted that the long-term consequences of female offending are more pronounced and could extend to the next generation since incarceration of women separates mothers from their children. Another reality is that anti-social women often produce offspring at a much younger age and most often with an anti-social mate (Cauffman, 2008).

“These mothers and children are left with inadequate social, emotional and financial support, increased risks of pregnancy complications, socioeconomic disadvantage, relationship violence, and compromised parenting skills. Particularly troubling is the data suggesting that mothers with a history of aggression or conduct disorder, or both, pass on these three risk factors to their offspring: antisocial biological fathers, prenatal exposure to nicotine (and drugs), and coercive hostile parenting styles. Female offenders tend to increase the odds that their children will follow in their footsteps” (Cauffman, 2008, p. 126). (Emphasis added).

Cauffman (2008) has shown that female offenders have a higher prevalence of mental health problems and a poorer physical health status than male offenders. A review of the adult lives of antisocial adolescent girls (in comparison to antisocial adolescent boys) showed that these adult women were in poorer physical health, had a higher mortality rate, had a variety of psychiatric problems, were more often in dysfunctional and violent relationships, were poorly educated and therefore had less stable work histories, and suffered more emotional disturbances and depression than adult male counterparts (Cauffman, 2008). The Brewer-Smyth (2004) study cites that neuropsychiatric conditions are common in female inmate populations. Research has found that physical and sexual abuse perpetrated against females before they ever
entered a life of crime could contribute neurobiologically to criminal behaviour (Brewer-Smyth, 2004).

2.7. Social Integration

Offenders once released from prison do not receive the assistance they need to reintegrate into society and as a result return to criminal actions and antisocial behaviour until they are rearrested and incarcerated once more (Muntingh, 2001). Dissel and Muntingh (2003) declare social reintegration to be the most challenging aspect of rehabilitation and that rehabilitation programmes should not be viewed merely as a strategy for preventing crime. They assert that a holistic reintegration and rehabilitation process that addresses social, moral, spiritual, physical, educational and psychological aspects will bring better results. The foundation on which they advocate that these programmes be established upon are: the confidence that the offender (when offered resources) is capable of change, and that once the offender is given an opportunity she/he will be able to succeed (Dissel & Muntingh, 2003).

Dissel and Muntingh (2003) further state that stable accommodation can make a 20% difference in terms of reducing re-offending and that homelessness and sleeping on the street increase the risk of re-offending. Gaum et al. (2006) promotes the idea of halfway houses being established in SA communities to facilitate inmate empowerment rather than punishment. The Gaum et al. (2006) study additionally suggests that programmes that deal with crime should be implemented within community and the community should be involved in the running of halfway houses and reintegration programmes for those who are released from prison. The Parsons and Warner-Robbins (2002) research done in Texas found that the role of support groups, chaplains and ‘sisters’ who visit in jail, and supportive friends (not former drug using friends) were key factors in successful reintegration into society after jail.
Research by Prison Fellowship (Prison Fellowship International (PFI), n.d.) has shown that providing a safe place for ex-offenders to stay, coupled with family outreach programmes, in the form of halfway houses that are managed by NPO’s, rather than government departments, significantly reduces the risk of re-offending.

Van der Westhuizen and Lombard (2005) advocate the establishment of alternative correction models in SA communities. They promote the formation of Community Correction Residential Centres (CCRCs) similar in foundation to the halfway house structure fostered throughout this paper. Van der Westhuizen and Lombard (2005) expound three community correction models. The first is the ‘diversion’ model that takes care of the non-violent, firsts, young and ‘petty crime’ offenders to keep them from entering the prison system. This model advocates treatment in the community structure. The second is an advocacy model that focuses on the community as opposed to the offender. This model promotes the case of improved resources in community that should be developed to help the offender (Van der Westhuizen & Lombard, 2005). The third model is a model of reintegration. This model postulates that resources within the community should be identified which aid the ex-offender in taking on new roles within that community. The model calls for intervention in community in the form of developing group homes, work programmes, study opportunities and skill development programmes specifically for offenders (Van der Westhuizen & Lombard, 2005). This model advocates that the whole community take responsibility in resolving the problem of crime and submits that change is more likely to take place in community than in an institution such as a prison. The CCRC model is embedded in the theory of community development and provides a holistic context for reintegration by helping the offender take control of
their individual development at a social, political, economical and spiritual level (Van der Westhuizen & Lombard, 2005).

Kinnes (n.d.) writes that the socio-economic conditions in communities in SA are relatively unfavourable for successful rehabilitation and reintegration. While the model seems to make good sense it fails to acknowledge that many criminals come from communities that are inadequately resourced and plagued by a host of social problems that contribute to criminal activity. It is thus not always appropriate to shift this responsibility back to the community. The sad reality is that many of the communities into which offenders will be reintegrated after prison are not healthy; in fact, they are quite toxic (Kinnes, n.d.). The Times Live article (South African Family in Crisis, 2011) stated that families in these communities are in crisis. The report, entitled “The first steps to healing the SA family” documents the extent of family breakdown in SA and the effect this is having on children and the youth. “. . . most children live in households with unemployed adults . . .” (para. 1).

2.8. Conclusion

This chapter sets the scene for the thesis by highlighting the psychological, social and emotional factors that contribute to crime and high recidivism rates in SA. The research collaborates how conditions in prison affect recidivism and furthermore provides insight into how the offender is affected both psychologically and physiologically by spending time in prison. The literature research confirms that the psychosocial and socioeconomic conditions of families and community often heighten criminal behaviour in those who have suffered trauma, inadequate education and poor resources. This thesis explores these reasons for criminal recidivism among women. It takes into consideration that the prison population of SA will be provided very little
assistance upon release, ultimately contributing to the current high recidivism rate, and examines how halfway houses could have an effect on reducing recidivism in SA.
3.1. Introduction

This research study is an auto-ethnographic enquiry into the psychological and social reasons for recidivism among women and an exploration of the impact halfway houses could have on reducing recidivism in SA. As the research design is auto-ethnographic it allows me to narrate my own experiences of the work I have engaged in and to record my own observations and reflections. This personal narrative is, however, presented against the backdrop of data collected from the narratives of the offenders themselves and their struggles both in prison and when they leave. In many ways the voices of these women represent the silent, suppressed voices of others within the penal system. I draw heavily on the personal narratives of some of the women I have worked with in an effort to provide thick descriptions of their experiences. My undertaking in writing this thesis is not to let the intellectual overshadow the raw, emotional side of their stories. This is an attempt to give the reader insight into the women’s context and lived experience beyond the wretchedness of their identity as a ‘criminal’. As an academic piece of work this thesis also attempts to present these narratives (both those of the women and my own) in a way that ensures trustworthiness of the data and enables meaning to be made of the experiences within a psychological theoretical framework.

3.2. Why Auto-ethnography as a Research Design?

Data-driven personal narrative research has been criticised by a number of scholars because it is perceived to go beyond the purity of sociological research methodology which rigorously uses standardised procedures and techniques to collect
and analyse data (Bochner, 2001). Atkinson (1997) is of the opinion that sociological research should contain social facts, structural analysis and moral neutrality and should not allow everyday moral concerns to interfere with detached sociological observation. Atkinson (1997) further states that narrative based studies often lack rigour and theoretical underpinning and therefore fall short of a thorough analytical approach in method. I return to some of these assertions later in this chapter.

Bochner’s (2001) contention with the critics of personal narrative research is based primarily on the premise that the task of research cannot be divorced from the lived life and motives of the researcher. It is for this reason that I chose auto-ethnographic design as the design of this paper. I identify with Bochner’s (2001) stance in that the project I have undertaken connects intensely to the meaning and values I am working through in my own life. The reason I find myself engaging in a project like this is deeply connected to my own personal and emotional frustration as a woman who sometimes feels disenfranchised by social, economic and political forces beyond my control. I thus feel connected to and moved by the women recidivists I have worked with and their experiences of being disempowered and marginalised, sometimes economically because of inadequate education, sometimes psychologically because of physical and sexual abuse, sometimes emotionally and physiologically because of childhood neglect. These experiences have trapped them in power relationships with very little way of escape. I identify to an extent. I am not a criminal but I do know about abuse as I have experienced abuse myself. I know about struggle and I have had experiences of being silenced and being misunderstood. This thesis is thus as much about me as it is about the women whose stories I narrate. I have come to understand that my motivation to do this work is in part driven by
powerful emotions such as exasperation on the one hand, and by compassion, sorrow and benevolence on the other.

This research paper combines two genres of writing: it is research writing based upon my stories and the stories of others (offenders); and it is a genre of theoretical discussion where psychological theory is used to try to make sense of these stories and understand the events in the light of pre-existing theory. The thesis draws on a range of theories but particularly on psychodynamic theories which attempt to locate criminal behaviour and reintegration into society on release from prison within the context of personality functioning, early childhood influences and the powerful influence of relationships in shaping behaviour. The specific psychodynamic concepts employed in this work are described in chapters four, five and six. While psychodynamic concepts are used as heuristic devices to make meaning of the narratives, the work does not ignore the powerful role of environmental circumstances and the overall milieu, culture and events of an individual’s life and how these also shape behaviour (Meyer et al., 2003).

3.3. Auto-ethnography as a Research Method

The study described in this thesis is located within a qualitative paradigm and employs auto-ethnographic research methodology. Auto-ethnographies of this nature are a specific form of ethnographic research and as such share many of the characteristics of ethnography. In this section I describe the features of ethnographic research and then go on to explain the specific nature of auto-ethnographic research.

Ethnography is a qualitative research methodology that analytically studies and compares culture (Merriam-Webster’s Medical Dictionary, 2007). The objective of ethnographic investigation is to produce a thick description of characteristics of a
specific group; as such, ethnography is literally writing about people (Ethnography, 2010). The intention behind ethnographic research is, “to understand another way of life from the native point of view” (Spradley, 1979, p. 3). Ethnographic research is not so much “studying people” as it is “learning from people”; it allows a researcher insight into how people see and understand their own lived experience (Spradley, 1979, p. 3).

Ethnographers engage in a number of different data collection methods. These include direct observation and participation in the culture (as participant-observers), interviews, questionnaires, documents, and any other medium that illuminates the culture being investigated. Ethnography in practice entails participant-observation on the part of the researcher. Participant observation focuses on “in-depth description and analysis of some phenomena . . . and is a strategy for gaining access to otherwise inaccessible dimensions of human life and experience” (Jorgensen, 1989, p. 23). The key feature of participant-observation is that it “focuses on human interaction and meaning viewed from the insider’s viewpoint in everyday life situations and settings” (Jorgensen, 1989, p. 23). Ethnographic research not only requires critical self-reflection but also reflexive praxis. Ethnographers need to be “self-consciously attentive to both the world researched and the researcher” (Gubrium & Holstein, 1997, p. 212).

Auto-ethnographic research is a transparent, reflexive methodology that tries to capture the complexity of a long-term experience. It allows one to understand and reflect upon lasting experiences; how this has not only shaped one’s own identity but how it has shaped and changed one’s perceptions and the identities of those one has been working with (Richards, 2012). This requires both observation and description while simultaneously a reflexive self-awareness and self-examination on the part of
the researcher (Gubrium & Holstein, 1997). “Auto-ethnography is telling A Story that involves the writer as a central character who narrates, or as a peripheral observer who is nonetheless involved in what unfolds” (Richards, 2012, p. 67). It allows the researcher to be transparent about the relationship regarding what is being studied but also allows the researcher to be the subject of the research as well as the researcher (Goodall, 2008). Auto-ethnography as a methodology allows one to write an academic and personal narrative together, it allows one to be both the “researcher and the researchee” (Richards, 2012, p. 67).

Auto-ethnography, furthermore, allows the researcher to work with their conscious awareness and “allows for considerations of the ironies, contradiction, tensions and paradoxes of the story” (Richards, 2012, p. 60). Auto-ethnography, as a specific type of research, “is not a matter of transcribing data or even really of representing it, but of interpreting it and synthesizing it” (Richards, 2012, p. 67). It involves looking again and examining – of re-searching – and is highly concerned with self-perception whether this is to empower the writer, or to empower others, to pursue identity or recognition or to simply relay facts and perceptions surrounding events that happened (Richards, 2012).

Lionnet (1989) describes auto-ethnography as being more self-oriented and based on personal experience, and ethnography as being more other-oriented and based on systematic participant observation. Ricci (2003) cites that auto-ethnography allows for the experience of something new. The writer learns from those they are writing about, they discover things they never knew and as a result new feelings and facts emerge from these discoveries. These are imparted to both the reader and writer. Ricci (2003) writes of auto-ethnography as a freeing process, bringing many
suppressed life occurrences and emotions to awareness. This process can be likened to psychological therapy (Ricci, 2003).

Auto-ethnographic research employs many different methods of data collection, and it allows the researcher to write about their experiences to assemble the relevant data. Auto-ethnography can therefore be “creative and flexible in its methodology and self constructed” (Richards, 2012, p. 63). It can blend with other research methodologies in different ways. Auto-ethnography is an “interdisciplinary, multidisciplinary, even transdisciplinary, methodology and different disciplines have different requirements of it” (Richards, 2012, p. 68).

This current enquiry employs the methodologies of phenomenological research in that it seeks to “gather deep information and perceptions through inductive, qualitative methods such as interviews, discussions and participant observation” (Lester, 1999, p. 1). Phenomenological research seeks to understand the subjective experience of people’s motivations and struggle in life by cutting through common speculative perceptions and postulation (Lester, 1999). Essentially it is the voice of the ‘other’. Phenomenology is the trademark of humanism and humanistic anthropology (Guest, MacQueen, & Namey, 1963).

This study is similarly data-driven (as opposed to being theory-driven). I have thus employed some of the principles of grounded theory in an effort to “discover theory from data systematically obtained from social research” (Glaser, & Strauss, 1967, p. 2). Glaser (1978) defines this type of research as “getting through and beyond conjecture and preconception to exactly the underlying processes of what is going on, so that professionals can intervene with confidence to help resolve the participant main causes” (p. 14). Crooks (2001) further describes grounded theory research as “ideal for exploring relationship and behaviour in groups where there has
been little exploration of contextual factors that affect individual’s lives” (p. 11). Grounded theory in effect produces a theory that develops from events.

Auto-ethnography, as a methodology, can help to create a non-linear aspect to a linear academic argument. In essence, as Richards (2012) writes, the researcher must produce an academic document that has intellectual worth in a specific context to be awarded a degree, but for it to be an auto-ethnographic thesis, the document produced should satisfy both as an academic thesis and an experiential supposition where neither dominates.

3.4. The Epistemology of Auto-ethnography

Auto-ethnographic research is grounded within a postmodern epistemology. Postmodernism in sociology embraces an eclectic variety of ideals, methods and practices (Klages, 2007). Examples of postmodernism include feminism and post-structuralism. Post modernism is seen as a departure from modernist approaches of realism, constructivism, scientific positivism, and metaphysics (Klages, 2007). Modernists see postmodernism as something very elusive and slippery. Postmodernism is connected to the changing factors of society today in philosophies of thought, achievement and reflection (Klages, 2007).

Modernism began with the ‘Enlightenment’ era between 1900 and 1930. Modernism was fundamentally about a “set of philosophical, political, and ethical ideas which provide the basis for the aesthetic aspect of modernism” (Klages, 2007, p. 166). In this way modernism distinguishes itself from the previous era labelled ‘antiquity’. Modernism essentially endorsed the thought that the world was governed by reason where there could be no conflict between what was true and what was right and good (Klages, 2007). Science was elevated to the paradigm of ultimate
knowledge during this era. Science was objective and neutral and to be a scientist one had to be unbiased and rational and follow the laws of reason. Language, as a mode of expression, was used to disseminate knowledge, and had to be rational too. Language functioned as a representation of the “real/perceivable world in which the rational mind observes and follows the laws of reason” (Klages, 2007, p. 168). Modernism is fundamentally about order, about rationalism and about bringing stability to chaos. Modernity endorsed the belief that creating more rationality would bring order in the world. The basic assumption was that a rationally ordered world would be a better functioning world (Klages, 2007). Much of the positivistic and empirical research undertaken in psychology is grounded within these ideals.

Postmodernism was born as a reaction to modernism. Postmodernism embodies skepticism towards the ideas and ideals of the modern era, particularly those of progress. Jean-Francois Lyotard (Sarup, 1993) talked of the notion of ‘grand narratives’. He stated that stability and order in society are maintained through ‘grand narratives’. He explained that Western society’s ‘grand narrative’, or universal global concept, could be the notion that democracy is the most enlightened rational form of government and one that will lead to universal happiness. Similarly he reasoned that Marxism’s ‘grand narrative’ might be that capitalism will eventually collapse in on itself leaving a utopian socialist world to evolve (Sarup, 1993).

Lyotard (Sarup, 1993) describes postmodernism as a critique of these types of ‘grand narrative’. Postmodernism submits that truth needs to be deconstructed and dominant ideas that people claim as truth should be challenged. Postmodernism uncovers the contradictions and instabilities of modernism and postulates that any attempt to create ‘order’ always demands an equal amount of ‘disorder so ‘order and disorder’ cannot be classified exclusively good or bad (Sarup, 1993). Postmodernism
favours ‘mini-narratives’ rather than universal global concepts. These ‘mini-
narratives’ do not make claims of universality, truth or reason but are situational, 
conditional and temporary (Sarup, 1993). In effect post-modernistic thought embraces 
the irony and parody of life. For the postmodernist there is no such thing as universal 
truth or permanent reality, only perceptions of these. The way postmodernists use 
language is different too. The writing of the postmodernist rejects rigid genre 
distinctions. It demonstrates this in its emphasis on pastiche, bricolage and 
playfulness (Klages, 2007).

Auto-ethnography (a postmodern research field) can therefore be controversial 
in its methodology. Postmodern researchers battle with epistemological dispute, 
paradigmatic weakness and methodological confusion (Stredwich, 2001). The image 
created of this type of research, because of its creative and flexible stance, can appear 
weak, unstructured, and unscientific. The type of auto-ethnographic research this 
study employs is driven by the key tenets of postmodernism in that the subjective 
stories of those taking part in the research provide the necessary insights that are 
examined in conjunction with the self-conscious awareness of the researcher’s, in this 
case, my values and authentic position (Stredwich, 2001). This creates a degree of 
“researcher reflexivity that is demanded by postmodernist orientations” (Stredwich, 
2001, p. 9). Postmodernism has no external or objective truth so I, as the researcher, 
do not become the final authority of the text or the truth. This is because something is 
always lost in translation between what is studied and the research product (Richards, 
2012). Even meanings are not fixed, because the text is a dialogue and an exchange of 
ideas that is multi layered with many obscurities. Auto-ethnography allows one the 
freedom to write as an insider with a local point of view, and allows one to embrace 
interdisciplinary methods to piece together information. “Movement from scientific
objectivity to radical subjectively is the natural progression in this type of research” (Richards, 2012, p. 63). Auto-ethnography allows theory to evolve, thus the research can academically begin to have meaning both epistemologically and ontologically (Richards, 2012).

3.5. Research Design

3.5.1. Research questions and aims

This research is an auto-ethnographic enquiry that aims to explore the psychological and social reasons for recidivism among women offenders of the law and an exploration of the impact halfway houses could have on reducing recidivism in SA. As such the study seeks to answer the following research questions:

1. What are the reasons many women ex-offenders find it difficult to reintegrate into society as law-abiding citizens on their release from prison?
2. What are the psychosocial needs of women ex-offenders on their release from prison?
3. How can these psychosocial needs be met by a halfway house in order to facilitate the transition into society upon release for offenders and reduce the likelihood of recidivism?

In order to address these research questions I draw upon records of my own personal experience and upon my observations from working with women recidivists and establishing the halfway house. I also draw heavily on interviews with women ex-offenders who resided in the halfway house. I reflect critically on these sources of data and the narrative to discern insights and interrogate them to establish the extent to which my experience is supported by psychological theory and findings. The relevant theory is presented in the chapters that follow.
3.5.2. Data collection.

Data was collected from a number of different sources. This included my own observations and notes, official documents from the board of the halfway house, and interviews with five women ex-offenders who lived at the halfway house together with some of their written life stories.

My personal observations included observation of the house parents in the halfway house, the prison authorities in the DCS, the women offenders and the board of the NPO that is responsible for the administration of the halfway house. During the time of writing this thesis I also completed an internship with the Cornerstone Institute where I worked with inmates in a maximum-security state-run prison and with ex-offenders at the halfway house to become a registered counsellor. I used detailed counselling notes resulting from the internship as a further source of data to give me insight into the experiences and life circumstance of women prisoners. During this time I also developed a booklet titled ‘Recommendations and guidelines for opening a halfway facility for ex-offenders’ and used this as an additional source of data. I have a complete chronicled narrative account of my journey over the past 15 years of participating in the culture of the prison and the 10 years of managing the halfway house, these serving as field notes and an additional source of data. I acquired the permission of the board of the organisation to use other chronicled data from documents accrued since the inception of the organisation such as reports of the house parents and reports of group intervention strategies to address maladaptive behaviour within the halfway house setting. Direct observation techniques were employed by reviewing my own personal notes, my own counselling records and reports written by myself to the board regarding progress of the halfway house and the people living there.
In-depth semi-structured interviews (using the interview schedule attached as Appendix A) were conducted with five women recidivists. These interviews were audio-taped and transcribed. The use of open-ended questions promotes conversational enquiry where the individual can talk about the topic in their own words, free of constraints (Merriam-Webster’s Dictionary, n.d.). These types of enquiries usually produce long transcripts, as was the case with some of the participants I interviewed. The advantage of open-ended questioning is that other questions evolve during the enquiry and more data is consequently uncovered, bringing more unknown and hidden issues to the surface. The enquiry covered basic questions regarding family background, social environment, the reasons for their imprisonment, and their understanding of their repeated imprisonment. The questions correspondingly sought to enquire around what they thought could have helped them not return to prison. Questions regarding their level of education and rehabilitation norms in prison were also asked.

3.5.3. Participants.

There are a number of research participants in this study, these include: the women who were interviewed, the house parents whom I observed, the DCS, the board of the NPO who runs the house and myself.

3.5.3.1. The women ex-offenders as participants.

The table below provides details of the ex-offenders whose interviews were used as data for this research project. All of them lived at the halfway house after leaving prison.
### Table 3.1.

**List of Ex-offender Participants**

<table>
<thead>
<tr>
<th>Name</th>
<th>Age</th>
<th>Race</th>
<th>History of substance abuse</th>
<th>Years of incarceration (entering and re-entering prison)</th>
<th>Criminal offense</th>
<th>Time spent at halfway house</th>
<th>Years out of prison</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ellen</td>
<td>33</td>
<td>White</td>
<td>Yes</td>
<td>11 years</td>
<td>Shoplifting, Theft, Drug offense, Prostitution</td>
<td>18 months</td>
<td>2 ½ years - back in prison</td>
</tr>
<tr>
<td>Jane</td>
<td>51</td>
<td>Coloured</td>
<td>No</td>
<td>4 years</td>
<td>Shoplifting</td>
<td>2 years</td>
<td>7 years</td>
</tr>
<tr>
<td>Brenda</td>
<td>45</td>
<td>Coloured</td>
<td>Yes</td>
<td>18 years</td>
<td>Shoplifting, Theft, Drug offense, Prostitution</td>
<td>1 year</td>
<td>6 years</td>
</tr>
<tr>
<td>Mary</td>
<td>34</td>
<td>Coloured</td>
<td>Yes</td>
<td>13 years</td>
<td>Shoplifting, Theft, Drug offense</td>
<td>1 year</td>
<td>18 months</td>
</tr>
<tr>
<td>Vuyo</td>
<td>28</td>
<td>Coloured</td>
<td>Yes</td>
<td>11 years</td>
<td>Theft, Breaking into houses, Drug offense, Prostitution</td>
<td>1 year</td>
<td>3 years</td>
</tr>
</tbody>
</table>

3.5.3.2. *House parents as participants.*

There are two women who live in the halfway house as house parents. These two women are between the ages of 50 and 55 years. Both women had been drug addicts in their past with one of them spending time in prison 25 years ago. Both do not have a matriculation qualification. They are women of integrity and have been with the house for the last eight years. Both came to the home without much skill but were trained by the organisation in health matters, basic counselling skills (which included anger management and addiction awareness), plus household buying and financial management. The two women have no children - one is a widow and the other has never been married.
3.5.3.3. The Department of Correctional Services (DCS) as a participant.

The DCS is a participant in the research as the agent with whom we work and without which we could not function.

3.5.3.4. The NPO board as a participant.

The board of the NPO has participated by enabling me to take time off to write this paper and permitting me to use the documents needed for this research study. Members of the board have engaged with the findings of this research thesis by reading and evaluating the results.

3.5.3.5. Myself as a participant.

I am also a participant of the research. As a married woman with two children, I make a unique contribution to the research project. I know what it is like to bring up children. I have been married for 38 years and have some understanding of what constitutes good relationship. I have worked in a state-run prison for 15 years and have run a halfway house for women ex-offenders for 10 years. I completed an honours degree in psychology during this time. The nature of the work I found myself engaged in was complex and this is what led me to study psychology. This has in turn led me to write this masters thesis.

3.5.4. Data analysis.

The starting point for data analysis was thematic content analysis of the interviews with the women offenders. Guest, MacQueen, and Namey (1963) describe thematic analysis as a probing tool that “moves beyond counting explicit words and phrases and focuses on identifying and describing both implicit (hidden) and explicit (obvious) ideas within the data” (p. 10). Qualitative techniques are used in thematic
Data analysis constituted reading the transcripts, transposing the transcripts onto an excel sheet, numbering the sentences, and identifying possible themes. By highlighting significant statements, sentences, and quotes, ‘clusters of meaning’ were developed from the transcripts (Creswell, 2004). A simple coding system was employed that would enable ‘themes and quotes’ to be accessed in the original interview material. Two coding systems were used: a participant code and the number of the sentence. The ten sub-themes identified in column 2 of Table 3.2 were identified through this process of coding. These themes were then organised into three over-arching (main) themes. The over-arching themes are identified in column 1 of Table 3.2 and discussed in the paragraph that follows.

These three themes are the focus of this thesis and are attended to in separate chapters in the thesis. The first main theme is the need for a safe place to stay where tangible, material and emotional needs are met; a holding environment that allows for emotional maturity and spiritual support. This theme is presented and explored in chapter four of the thesis. The second main theme deals with the role of personality traits in maintaining old patterns of relating and dealing with the women’s need to break old patterns of relating to others and the world together with the need to stop using substances. This theme is dealt with in chapter five that explores how personality traits (which are implicated in inter-personal styles of relating to others and the world, and substance abuse) need to be addressed. The third main theme concerns the necessity of being able to launch a new life for oneself by assuming the role of adult parent, by improving life skills (for example parental training) and
Emerging Themes from Analysis of Interviews with Women Offenders.

<table>
<thead>
<tr>
<th>Over-arching themes</th>
<th>Sub-themes</th>
<th>Illustrative quotes</th>
</tr>
</thead>
</table>
| The need for a holding environment | Tangible Support - real/concrete support once leaving prison. | “It was knowing that I’ve got a place to go to (when I leave prison)”.
| | Material Support - by means of clothing, food and a safe place to sleep. | “Because there was help for support, we did get clothes, we get…food”.
| | Emotional Maturing - Better decision-making, shifting from an external locus of control to an internal locus of control. | “All the programs I did, I could learn to set myself boundaries. To say no if I felt I couldn’t commit myself to something. I learnt not to let myself be pushed to do things I felt too tired to do”.
| | Emotional Support - Being accepted despite failure helped women feel valued and able to deal with issues honestly and openly. | “The difference that the halfway house makes in my life, the support I’m given and no matter how terrible or whatever I’m going through - they are not going to throw me away”.

| The role of personality traits in maintaining old patterns of relating and dealing with emotions. | Breaking old patterns of relating – Becoming aware of how past patterns of behaviour and ways of inter-relating are repeated. | “Then there was the psychologist I saw. She helped me to talk about things”.
| | Freedom from addiction - Drugs as a reason for crime and the need to break patterns of substance abuse | “Because in order for me not to use drugs I needed to ignore my past, people of my past I needed to ignore. Drugs did also play a big role in it” (crime).

| The need to assume the role of Adult/parent. | Economic Freedom to work and earn - the opportunity to earn and support oneself. | “Ja (yes) it goes like R200, like R300, and of that I can buy my toiletries and what I want so when I get money - and I got enough - I go there to the parade and I buy me something and so…”.
| | Educational Opportunity - opportunity to improve educational skill base. | “And I got 92% for other test which I’ve never studied in my whole life especially when I was at school – I would never get this marks… It made me feel good and it made me and I felt like umm I can do it – you know - and maybe there is something in here (pointed to head) which I thought there’s nothing”.
| | Need for reconnection with children. | “That’s the only people (her children) who are keeping me on the straight road ‘coz I keep thinking that I grew up without a mother and it was terrible and what is going to happen to my daughters if I must die … so I needed to change”.

Stellenbosch University  http://scholar.sun.ac.za
education, and securing employment so that one can take up the responsibilities of life and one’s children (dealt with in chapter six covering the ex-offender as parent).

Once the over-arching themes had been identified and the structure of the thesis determined, I then made use of the other sources of data (my own observations, field notes and documents) to augment the narratives of the women and provide a thick description.

It is important to note that the initial themes were identified from the interviews with the women and thus their narratives provide the foundation of what is explored in this thesis. Although my own observations and experiences are also central to this work these are organised around the themes identified by the women.

Guba (1981), in order to ensure the trustworthiness of research, proposes that researcher should attend to four criteria:

1. Credibility: assurance in the ‘truth’ of results, making it comparable to the concept of internal validity in quantitative research.

2. Transferability: demonstrating that the results are applicable in other contexts, making it comparable to the concept of generalizability/external validity in quantitative research.

3. Dependability: ensuring that the analysis is consistent, making it comparable to the concept of reliability in quantitative research.

4. Confirmability: showing that the generated theory is based on the reality of the participants and is not the result of researcher bias, thus making it comparable to the concept of objectivity in quantitative research.

The following paragraphs address these four criteria in the light of this research thesis.
The criteria to develop early familiarity with the culture of the participants to establish trust involves prolonged engagement in the field. I have spent 15 years contextually visiting women in prison, listening to stories, observing relationships and behaviour (of both offenders and others) at the prison. In addition, I spent a year with each of the participants of the group I interviewed and write about, as all lived at the halfway facility.

The criterion of triangulation, or ‘crystallisation’, the phrase Richardson (1991) prefers to use, employs the use of many forms of complementary data. This criterion is fulfilled in that observations, individual interviews, written stories, my own-chronicled narrative account, and other documents accrued since the inception of the organisation, are used in this enquiry. Offenders of different backgrounds and different education levels are used as participants. The only similarity is that they are repeat offenders (recidivists). The participants were also given the opportunity to refuse to participate or to withdraw at anytime should they feel the need to. Anonymity of the participants was assured and they were asked to answer the questions as honestly as possible without fear of reprisal. It was explained that all data collected would be coded in order to protect their identity. There would therefore be no way to connect them with the data. Any additional information they needed about the study was provided upon request.

During the writing of the thesis I met with my supervisor regularly. He served as a sounding board for my interpretations and ideas. He also was able to highlight flaws in my theoretical understanding. The coding of the transcripts were scrutinised by a colleague and compared to my results to assess if there were any discrepancies. This was to point out and prevent personal bias in the coding process. Constant journal writing and reflection of data analysis techniques were also used to ensure the
efficiency of methods during the collection and analysis of data. The study proposes to provide a thick description of the phenomena being studied.

The methods used to engage in this study are transferable to similar studies as the background and context of the study is clearly explicated. The study is dependable because the enquiry makes use of many complimentary forms of data collection. Reflection upon data analysis techniques and data analysis to ensure dependability is consistent. As far as confirmability is concerned, the collection of many different forms of data reduced bias, as did constant supervision.

3.5.5. Ethical considerations and permissions.

This proposed research gained approval from Research Ethics Committee of the University of Stellenbosch (Appendix B). An informed consent form was given to each participant and full disclosure of the purpose and nature of the research study explained totally. The welfare and dignity of all participants and those affected by the research was protected. Dialogue and exchange between participants and myself, the researcher, was honest and not misleading. The board of the organisation granted permission regarding the use of records and documents collected over the years for research purposes (Appendix C). To avoid and minimise the possibility of results being misleading, procedures and methods were used and reviewed through regular supervision. Efforts were taken to ensure that all data published was free of fabrication or falsification.

3.6. Reflexivity

Reflexivity, in essence, is the awareness of the researcher that his/her identity affects the design and process of the work he/she is involved in. In reflexive research the researcher must constantly be alert to the fact that their involvement in the process
of the research could have an effect on the outcomes of the research. Reflexivity acknowledges that it is impossible to remain outside the subject matter, and that the presence of the researcher, in whatever form, will have some kind of effect upon the research (Anderson, 2008). Creswell (2004) states that the researcher must realise that they bring their own unique paradigm to the research project and that the researcher’s background shapes their interpretation in research.

In the quest to be ethical I needed to be acutely aware of my social and public position as a person who has not been incarcerated, who has not been addicted to drugs, who has not suffered severe trauma and is also a significant and powerful player in the NPO. I have however experienced the devastation of crime in SA and this could influence the way I ask certain questions, the type of questions I ask and the interpretations I make. I should remember not to ‘lead’ towards answers I would prefer to hear because of my being in a position of power. I needed to set aside bias – the natural bias I have bred that is against criminals and their activity - in order to hear accurately. I must seek as much truth as an imbalance in power relations will allow.

I felt that in writing their stories I must remember that they have come to me with their stories in a hope that I will understand their lives. There was a need that I interpret these correctly. I should not merely view the person as a client or a patient that I ‘make’ a so-called diagnosis of. I must not bury them under psychological jargon. I must allow their stories to affect me, not shut me off because they are hard to hear. As the researcher I also needed to be aware that I might have covert interests in making the halfway house facility seem more successful than it truly is because of my own personal sacrifice and investment in this field.
3.7. Evaluating Auto-ethnography

Ethnography uses data collected from different sources and with different methods, with observation being one of the main methods (Richardson, 2000). Central to positivism is scientific method and the use of standardised procedures and techniques to collect and analyse data. Dominant in positivism is the incentive of the researcher to reduce reflexivity by using experimental techniques, while naturalists, on the other hand, propose that the researcher get totally immersed in the research situation (Mckenzie, 1994). Since ethnographies are not grounded in positivism, conventional standards cannot be meaningfully applied to evaluating them and alternative criteria need to be used to judge the rigour of an ethnographic research project. Richardson (2000) however states that “ethnography needs to be evaluated through two lenses: both science and arts”, as ethnography can be both scientific and literary (p. 253). Mckenzie (1994) furthermore expresses that “validity and reliability is a prerequisite for evaluation of ethnographic reports” despite the challenges of disciplinary rules (p. 774).

Richardson (2000) proposes five criteria that might be helpful in evaluating the work of an ethnographer. These are: does the work make a substantial contribution, does the work have aesthetic merit, is it reflexive, what type of impact has it had and does it express lived experience?

In the final chapter, I provide a complete analysis of the thesis in this regard. To briefly summarise here, I think the thesis contributes substantially by uncovering some of the background and ‘profile’ of the typical female offender in SA. Whether it contributes towards the solving of reintegration problems for offenders in SA is still to be evaluated. I do feel that the thesis contributes quite substantially in regard to understanding the different aspects of rehabilitation and reintegration that play a role
in successful or unsuccessful transition for the female ex-offender after prison, however. The writing of this thesis has also made a substantive contribution to my own understanding of what constitutes real rehabilitation and social reintegration.

I consider the thesis to be aesthetic in that it tells an interesting tale, one that has probably not been heard before. I think the writing has depth, uses imagery and wording that is descriptive, and has aesthetic value. The establishment of a ‘home’ that is not an institution, in a rather unique milieu, also contributes aesthetically to the successful integration of ex-offenders.

The thesis is consistently reflexive. I asked many questions of myself. I reflected constantly during the process of writing. These reflections concerned my reasons for writing the thesis, what I was wanting to achieve and relate to others who would read the thesis, my attitude towards those I worked with and how I could subliminally misinterpret their stories because I wanted to make a certain argument. I asked myself whether my conceptions and my assumptions were affecting the essence of the thesis. Constantly these thoughts went through my mind as I wrote. I had continual discussions with my supervisor regarding these matters.

The thesis describes the ‘reality’ of crime in SA, its causes and the enormous task of solving the high recidivism rate in the country. The stories told are the ‘lived experiences’ of women who have committed criminal offences. The narrative of this thesis includes my own story of working with offenders for many years.

3.8. Conclusion

As defined, this thesis is an auto-ethnographic enquiry into the psychological and social reasons for recidivism among women and an exploration of the impact halfway houses could have on reducing recidivism in SA. The study is located within
a qualitative paradigm and employs auto-ethnographic research methodology. As the research design is auto-ethnographic it allows me to narrate my personal experiences, observations and reflections over many years of work, both in the prison and at the halfway house.

The research methodology of auto-ethnography falls in the category of postmodern research. Auto-ethnography is a personal narrative research design and accepts the involvement of the researcher in the cultural context of those being researched. Auto-ethnography, as a research methodology, acknowledges that research cannot be divorced from the lived life and motives of the researcher. As in my case, I, as narrator, became embedded in the cultural context of a prison and at the halfway house where the ex-offender stays once they leave prison.

The thesis aims to represent the silenced voices of the female offender/ex-offender that has been part of the penal system. It tells their story and demonstrates noticeably how hearing someone’s story can heal wounds, produce self-esteem and impart value (Bochner, 2001). A contestation for this thesis is to have it to serve as a type of advocacy document that induces the reader, and others, to appreciate how much the ex-offender needs tangible support as an enablement to rehabilitation from crime. At the same time as attempting to make a case for the silenced voice of the offender, it reveals the kind of resources needed to help offenders of the law, as well as the personal and individual attention and involvement required by imprisoned individuals.
CHAPTER 4

THE HALFWAY HOUSE AS A HOLDING AND TRANSITIONAL SPACE

“Although imprisonment as a punishment for crimes and transgressions is well established throughout the world, less attention is paid to offender reintegration once prisoners are released back into society. It is argued that the successful re-entry into society after a period of incarceration is crucial if crime is to be curbed substantially in the near future.”

(Muntingh, 2001, p. 1)

4.1. Introduction

It has been established that offenders of the law require concrete support upon release from prison in order to reintegrate into society effectively (Muntingh, 2001). In addition to this tangible support, ex-offenders also require emotional and psychological support to make the transition and avoid re-engaging in criminal activity. As will be seen from the narratives presented in this chapter, many of the women who find themselves in SA prisons come from families and communities in which they experienced trauma, neglect, abandonment and a lack of holding. These early emotional experiences are often unprocessed and result in psychological defences that impede healthy interpersonal relationships and psychological functioning. Several of the women have no families to return to after prison or they find themselves in the position of not being welcomed back by their community. Furthermore many of the women have a long history of substance abuse (which is often exacerbated by being in prison) and very few of them have the skills they need to find gainful employment on release from prison. In the absence of support many women return to familiar but unhealthy ways of relating and behaving by joining
gangs, abusing substances or contravening the law. All of these factors work against successful reintegration into society.

Explicitly, the objective of the halfway house is to provide safe lodging to the women in a supportive environment to facilitate adjustment and the learning of skills. The intention is to create a home-like setting rather than another institution, and as such the halfway house was established within a residential area. This environment within the halfway house is essentially a kind of therapeutic community. The halfway house is symbolically akin to what Winnicott (1965) has described as a holding environment that provides security and containment while enabling psychological growth and corrective emotional experiences.

In this chapter I describe how a therapeutic community is created within the house and how the structures and practices support the women’s transition into society. Concepts borrowed from psychoanalytic theory will be employed as heuristic devices to explain how the halfway house functions. I begin this chapter with a discussion of the work of Sigmund Freud, Donald Winnicott and Wilfred Bion. I explain the concepts of repetition compulsion, corrective emotional experiences, holding and containment. In the second half of the chapter I elaborate on why many women released from prison require a transitional space and explain how the practices and structures within the halfway house create a therapeutic community that provides both holding and containment to the individuals who live there. I propose that the halfway house can be understood to be both a holding environment and transitional space which provides the containment and corrective emotional experiences that many women ex-prisoners need to enable their successful reintegration into society. I conclude by describing some of the challenges and difficulties I have experienced in
creating a holding environment that promotes psychological growth and provides containment.

**4.2. Theoretical Framework**

**4.2.1. Freud’s concept of repetition compulsion.**

It is my observation that on release from prison many women feel a strong pull to return to old unhealthy ways of relating and behaving. This tendency to want to go back to the familiar is complex and not easy to understand, but in many ways is analogous to the psychodynamic concept of the repetition compulsion. The repetition compulsion was first described by Freud in the 1914 article, “Remembering, Repeating and Working Through” (Lacan, 1994, p. 49). Russell (2006) defines this concept as the tendency to compulsively repeat old patterns of behaviour with the subconscious expectation of experiencing the same failed relationship negotiation that has happened in the past. Russell (2006) maintains that Freud was not incorrect when he identified the relationship between repetition compulsion and the death drive, since this attachment to the past “destroys the present and destroys the person” (p. 66).

Russell (2006) writes that it seems that the more painful an injury and hurt is, the more the person will compulsively repeat the experience. This repetition compulsion compels people to unconsciously recreate old patterns of inner relating and behaving, but it also provides the opportunity for a corrective emotional experience. A corrective emotional experience happens when the individual engages in the repetition but finds that their behaviour is met with a different and unexpected response.
4.2.2. Facilitating corrective emotional experiences.

A corrective emotional experience is a process by which a person is able to give up on old behaviour patterns (caused by early unresolved conflict with caregivers) through the experience of a trusting relationship where the trustworthy person responds differently and empathically, enabling healing (Bridges, 2006). Bridges (2006) maintains that in order for therapeutic change to occur and old patterns of relating to others and the world to be abandoned, it is important for those who have experienced painful emotional trauma in the past to find a safe relationship/place where they can begin to process, through acceptance and unconditional love and care, these feelings. Bridges (2006) clarifies that a corrective emotional experience that brings resolution happens through a “re-experiencing of the old unsettled conflict but with a new ending” (p. 551). Bridges (2006) further emphasises that a consistent and empathetic relationship, with a therapist or significant other, enables the working through of painful emotional conflict from the past. This can result in new and more adjusted feelings in the person and allows a different and more adaptive engagement with the world.

In order for a corrective emotional experience to occur the individual needs to feel the situation is safe enough because the other person involved (i.e. counsellor/house parent/therapist) is different from the original object and will be able to contain the ‘ugliness’ of the disclosure without harm. The risk involves the chance of being rejected or hurt once more (Russell, 2006). As will be seen in the discussion below, this corrective emotional experience takes root when the ex-offender realises that people at the halfway house really care about them and their collective well-being. This ‘realisation’ or ‘knowing’ is not divulged in as much as it is sensed and lived in the interactions that occur in the halfway house.
4.2.3. Winnicott’s concept of holding.

Winnicott (1965) defined a ‘holding environment’ as a therapeutic setting that permits the client to experience personal acceptance and safety. For Winnicott, a ‘holding environment’ of this type creates a space where the client is able to meet neglected ego needs in order to allow their true self to emerge. Winnicott believed that providing such a ‘holding environment’ was one of a therapist’s most important tasks and that it was this that facilitated successful psychotherapeutic work (Van Buskirk & McGrath, 1999).

It is the same kind of therapeutic environment that provides responsive nurturance and care to the newly born and developing child. Winnicott (1945) believed that there are three processes during the very early stages of life that the infant must transition through. These are integration, personalisation, and realisation. The process of integration essentially consists of how the infant is cared for (kept warm, handled, bathed, and soothed) and the instinctual experience gathered from this to form the basis of the infant’s personality (Winnicott, 1945). Holding for Winnicott was not just about physical holding, it also included environmental provision (Winnicott, 1960). It would be the caregiver’s (mother’s) ability to soothe, comfort and reduce tension in the small child that provides this holding environment. This setting is effectively shaped as the caregiver, the ‘good enough’ mother, responds appropriately to the child’s needs. This type of milieu is described as a place of physical holding and preoccupation with the child that reflects back the child’s worth and value (Winnicott, 1965). This process ultimately leads to what Winnicott described as integration. The ‘unorganised’ infant achieves unit status - the infant essentially becomes an ‘I am’ and begins to have a self. Empathic failure, causing un-integration, is the term used to refer to a lack of appropriate response to a small
child’s distress. This is what Winnicott referred to as the ‘not good enough’ mother (Winnicott, Shepherd, & Davis, 1986). A state of un-integration could be the basis for disintegration or psychopathology in later life (Parry, 2010). Winnicott further believed that the mind was not only governed by innate factors but very much by environmental provision or depravation (Parry, 2010).

The development of the strength of a small child’s self is dependent upon how the child copes with maternal failures and how he/she eventually comprehends and deals with a mother who is essentially reliable. Although Winnicott proclaimed that there was no such thing as a perfect mother, his research into ‘mothering’ found that the demanding, over anxious, and unavailable mother is far more likely to have a troublesome child (Chescheir, 1985). For Winnicott, a prerequisite for healthy development was the continuation of a dependable ‘holding environment’ that broadens through interaction with family, friends, school life and social contact. It is thus not only the mother that provides ‘holding’, institutions and communities can also provide holding which promotes or hinders psychological development. Healthy development for Winnicott includes three stages of development: unity (feeling connected to the mother), transition (slowly moving away from the mother using a transitional object), and independence (development of a healthy false self without betrayal of the true self) (Van Buskirk & McGrath, 1999).

Winnicott took the view that the varying interactions between the external environment, and caregivers/parental figures and the child influenced the development of the false self and the true self (Parry, 2010). Winnicott believes that the caregiver/parent acts as a ‘container’ for the small child’s bad objects; the small child projects these onto the caregiver/parent and it is critical that the caregiver/parent manages to cope and contains the child’s onslaught of projected frustration
(Chescheir, 1985). Should the caregiver/parent not contain the child’s onslaught but reflects rather their own defences onto the child, the false self is split off as an adaption to the caregiver/parents defences. Winnicott called this the ‘not good enough mother’ and determined that the ‘not good enough mother’ can lead to ‘false self disorders’ in the child (Chescheir, 1985).

Winnicott recognised a healthy false self. In society this functions as a compliancy to rules and regulations, the polite or socialised self, but without feeling like it has betrayed its true self. The true self, the personal private self, should be able to assert itself and function in a way that the false self does not dictate or win arguments against it. The self that feels it is forced into compliance rather than healthful adaption is harmed (Chescheir, 1985).

According to Winnicott, the development of an ‘unhealthy false self’, due to early inadequate ‘holding’, explains why people often act in dysfunctional ways (Chescheir, 1985). The concept of the true and false self helps to characterise forms of psychopathology in that problems can possibly be traced back to early deficit ‘holding’ and gives a therapist a notion of when and where the difficulties began (Parry, 2010). Winnicott advocated that therapy should not immediately unmask the vulnerable true self in a client, however, but rather work at helping the client to let go of unhealthy portions of the false self and build a healthy replacement (Chescheir, 1985). Psychotherapy helps the client to rework some early faulty aspects of caregiver-child relationships because it provides an opportunity for a corrective emotional experience; the therapist comes to represent the faulty caregiver as the client attempts to recreate their early dysfunctional relationship with the therapist through powerful transference reactions, to which the therapist responds empathetically and in a way that allows for a new way of relating (Chescheir, 1985).
Winnicott believed that the therapist’s ability to create a ‘holding environment’ opens a safe arena for self-discovery.

4.2.4. Bion’s concept of containment.

Bion’s (1962) model of normal development follows the route of the infant’s ability to project successfully its feelings of dying into the mother and to have these re-introjected through the breast, transmitting a message of ‘dying made tolerable’ to the infant’s psyche. He, however, believed that there is seldom a circumstance where the mother meets every need the infant has, or tries to project. He alleged that should the infant have the capacity to tolerate this frustration of not having all its needs met, the infant’s building blocks for thinking will be healthily developed (Parry, 2010).

Bion’s work on beta and alpha elements and the containing function are based on the theory of Klein (Segal, 1992). Bion used Klein’s concept of ‘projective identification’ to elucidate how beta elements of any trauma will evoke past beta elements which have not be worked through. Klein viewed projective identification to be the active conjuring up and projection into someone else characteristics of the self that one cannot bear (Segal, 1992). Bion described this as ‘unimaginable feelings of dying and disintegration’ (beta elements) that have not been modified into alpha elements by the mother’s containing reaction of the infant while young (Segal, 1992). These feelings are so deep that they cannot be located or named by the individual and therefore are denied as being true of the self. These, rather than being seen as part of the self, are projected into others as being true of them (Rustomjee, 2007).

Bion, in his therapy, believed that getting an individual to express these deep denied feelings in words (thereby converting them to alpha elements) impelled the individual towards healing. Bion felt that this could only happen with the help of a
good container, someone who can get the individual to verbalise the feeling so that the beta elements can be transformed into alpha elements (Rustomjee, 2007).

Rustomjee (2007) describes the concept of containment as:

“. . . embracing a wide range of emotions with passion, intensity, warmth and meaning without resorting to defence mechanisms such as denial, rationalization, disavowal (refutation), splitting, projective identification or aggression/violence etc.” (p. 523).

Bion’s concept of containment described two related workings. These are namely the container and the contained. An infant (the contained) seeks to be contained by the mother figure (the container) from birth and relies on the container to absorb and relay back to itself frightening feelings of dying and disintegration experiences in a rational manner (Rustomjee, 2007). The contained (the infant) seeks a container (the mother) to help process unprocessed thoughts (beta elements) so that these can be converted through alpha function to alpha elements that can be inferred in a meaningful way (Rustomjee, 2007). So in normal circumstances, the container (the mother) takes in negative beta element projections from the contained (the infant), modifies them into alpha elements, and projects these back to the infant in digestible form (Segal, 1992). Should the mother not be able to contain the reaction of her infant’s negative beta elements, the infant would be left with what Bion called ‘a nameless dread’. It is nameless because it has not been converted into something that can be named, thought about or dreamed (Segal, 1992).

Bion (1959), from his personal experience with a patient, explains how this process of containment functions in psychotherapy in the following way:
“When the patient strove to rid himself of fears of death which were felt to be too powerful for his personality to contain, he split off his fears and put them onto me, the idea apparently being that if they were allowed to repose there long enough they would undergo modification by my psyche and could then be safely re-introjected” (p. 96).

Bion believed that the most painful feelings could not be heard without the help of a loving ‘container’. To provide containment for a client the therapist can enable the client to name the feelings of ‘nameless dread’ (Segal, 1992). Bion believed that transformation would take place should the client be able to convert these feelings into thoughts or words. Bion did not believe that withholding feelings and emotions could lead to transformation. He felt it was important that individuals be able to experience the full range of emotions, i.e. loving (L), hating (H) and knowing (K) so as to arrive at containment (Rustomjee, 2007).

4.3. A Story that tells why many Women Ex-offenders need a Transitional Space

The term ‘transitional space’ can be defined as a temporary in-between space where a person has the opportunity to explore, sometimes together with others, changes they would like to make in their lives (Green, 2012). The halfway house seeks to be a ‘transitional space’. Literally, this transitional space provides a link between prison and society, but at a metaphoric level it is a space that provides psychological safety and growth by calming the subject, facilitating individual growth and enabling a revealing of the real self. This is a gradual process that eventually leads the particular woman to a place of independence (Van Buskirk & McGrath, 1999).
As the narratives below will show, there are two main reasons why women ex-offenders require a transitional space (that provides holding and containment) between prison and society. The first of these is that typically the ex-offender is unable to return to their families because: (1) they have no families to go to since they were abandoned as small children and grew up in foster care or state institutions; (2) they have relationships with family members and caregivers which are fraught with unresolved emotional issues; and (3) their family is impoverished and has no resources to support them. This lack of a family to return to makes it tempting for the ex-offender to find belonging in a gang and hence to be re-introduced to criminal activity. The second primary reason why many ex-offenders require a transitional space is because institutional life in prison has failed to restore their mental health, has exacerbated their substance abuse problem and has re-enforced their false self. These women need a space where their emotional and psychological needs can be met so that they can restore a sense of well-being and allow their true-self to emerge. Each of these factors is described in more detail and supported with observations and the narratives of ex-offenders in the subsequent paragraphs.

My experience has been that many offenders have spent many years in children’s homes or orphanages, juvenile detention centres or places of safety. My observation (which is supported by the literature cited in chapter two) is that, as small children, many women offenders have been abandoned and let down by their extended families. This experience is described by Ellen as follows:

“A lot of us didn’t grow up with a family – you know now – for a mom and dad to see us grow up. It is good to be part of a family. . . .yes, I think, umm, it would have been nice to know – there’s a mom and a dad – you can go to school for the day, they are going to wait for you when you
come home, they feel responsible for you, and they giving you support and they are interested in you. But if you don’t have that I think you somehow have no sense of belonging – a no sense of belonging - ag (slang for sigh).”

Many offenders, because they have nowhere else to go, attach themselves to those who will have them, namely the gangs. Gaum et al. (2006) write that joining a gang provides a sense of belonging and protection. The rejections by significant persons in the offender’s life makes involvement in gang activities attractive and can add meaning to an otherwise emotionally painful and barren existence.

It seems as if this early experience of being rejected and hurt is unconsciously re-created by engaging in criminal activity. Being sentenced to time in prison is a powerful enactment of rejection by society especially when the ‘institution of prison’ is unable to take care of the individual. As noted in chapter two the institutional structure of prison often encourages the prisoner to develop a ‘false-self’ which on the surface is compliant but which prevents the re-enforcement of a true self capable of autonomy. This recreation of rejection is aptly described by Jane when she says:

“And then I realised what it was like in prison and that my family were not going to come to see me . . . they said they couldn’t come and see me . . . when I realised that I was now in prison and I would need money and other things like food and stuff, I prayed to God and asked Him to send people across my path.”

She further explains:

“My brother did not want me back . . .” (after she left prison).

Another reason why offenders cannot return to family or community includes
the fact that many of the families that offenders belong to are impoverished due to
economic circumstances (Gaum et al., 2006). Offenders do not want to add to the
already strained conditions experienced by the family because they know the family
will not be able to additionally support them, and they also know they will not be able
to change anything about their lives should they go back because of lack of resources.
This link between poverty and crime which was discussed in chapter two is a complex
one for women ex-offenders because, on the one hand, poverty prevents them from
accessing tangible support from their families, and on the other hand crime provides a
means to access needed resources. This is demonstrated below in the words of Vuyo:

“Ummm, no – my brother always stayed with them (the extended family)
but not me . . . we were poor. . . . I just had to find my own way in life. . . .
I stayed by my own – I used to break into houses – then I would go and
sell it – I used to make a good living out of that. . . . ok, ummm, I grew up
poor – and it’s not nice being poor. It’s not nice not having stuff that you
need. And . . . ja (yes) . . . so I just had this mentality that I needed stuff
and that if my people can’t buy it for me then I must go get it on my own
and that is why I did steal from other people.”

Gaum et al. (2006) comment that relationships between the offender and
caregivers are often fraught with unresolved emotional issues. These include issues of
abandonment, of duplicity, of physical abuse and of harsh discipline. Vuyo expresses
her lack of relationship with her family and her feelings of rejection:

“I don’t have a relationship with my family. Because they were never
there for me so I don’t feel the urge of getting to know them any better – I
don’t want anything to do with them in any case . . . they (referring to her
family) just don’t worry – irrespective if you have changed, they don’t see
the change and that is, that is, all things that set you back that you just go in crime again . . . well, for instance, my people, they never trusted me, even though I didn’t steal from them, there’s always when you go into the house they would take their stuff and put it away.”

There is little emphasis placed upon the importance of helping the family or community understand how difficult it is for a newly released offender. My observation is that on many occasions the ex-offenders’ family expect them to find employment almost immediately, and take responsibility for children and other effects, and this sets the ex-offender up for failure. The ex-offender must be encouraged to firstly take responsibility for him/her self and then others (Gaum et al., 2006). Hesselink-Louw (2009) writes that helping others (family members and the community) to understand how the world looks from the offender’s point of view will go a long way to contribute to effective rehabilitation, reintegration and empowerment.

The Correctional Management Committee (CMC) at the prison frequently request my intervention with an offender who cannot return to their respective family because the family is not willing to have the ex-offender live with them while under correctional supervision or parole. Jane expresses her struggle with trying to understand why her brother did not want her back home when she says:

“It happened that my brother did not want me back in S. I understand, he was very cross with me and disappointed; in fact our whole family was disappointed. We (prisoners) don’t want to hear this but . . . my mother and sister-in-law told me. So it was that same day when I visited the Correctional office - they phoned the halfway house. The officials didn’t understand why my brother didn’t want me there.”
Women have also come to stay at the halfway house because they do not want to return to the family or the community as they want to cease their involvement in criminal activities and they realise that a change of environment is the only way to do this. Vuyo, after spending 13 years leaving and re-entering prison, was desperate not to return to her family because of their criminal activities. Her testimony demonstrates her need for another place to go on leaving prison:

“Well my dad has been in prison for 25 years so . . . it’s only him.” (Her father is now out of prison but still involved with drugs and crime).

Gaum et al. (2006) state that often the offender is placed under the authority of caregivers who should enforce parole conditions but are involved in the same criminal activity that caused the offender’s incarceration in the first place. Living in the home of a drug merchant opens the door to easy earning and drug use. Hesselink-Louw and Schoeman (2003) assert that it is important that the circumstances that played a role in shaping the offender as a unique individual be taken into consideration. Their family system, support structures, causes and motives for crime need to be investigated thoroughly before they are released (Hesselink-Louw & Schoeman, 2003). Investigations like these could prevent the offender from being placed in situations that could jeopardise their effective reintegration.
Table 4.3

*A Story that Illustrates the Need for Tangible Support*

<table>
<thead>
<tr>
<th>Brenda’s story</th>
</tr>
</thead>
</table>

Brenda is a woman of 42 years of age. This is her story and it illustrates her reasons for needing a transitional space between prison and society. Brenda’s parents died in a car crash when she was five and she entered an orphanage. Brenda describes her life in the orphanage as a very happy time. Brenda completed her matriculation certificate at the orphanage.

When she turned 18 she had to leave the orphanage and enter a foster home. Brenda says she felt rejected and abandoned and didn’t like her foster parents so she ran away and began to fend for herself. Brenda became a drug addict. She did dagga, heroine, mandrax, cocaine and methamphetamine (tik). She stole to support her habit and to stay alive. She joined a gang of men and became the ‘brain’ behind their mission. She began to steal more as her drug habit dictated and explains that drugs gave her the courage to steal. Being part of a gang also helped her feel safe but she, together with them, had to many times sleep on the street.

Although Brenda did work she says she never earned enough to support her habit. This lifestyle led to her spending 18 years entering, leaving and re-entering prison. Brenda struck a problem when she was due for parole five years ago. She felt tired of her lifestyle of drugging and criminality and didn’t want to go back to the neighbourhood where she had previously lived. She knew nothing would change for her there. Brenda entered the halfway house system and was enabled to pursue a nursing career. She now cares for a quadriplegic woman and earns well. Brenda has been free from crime and drugs for six years - the longest time in 18 years. Brenda got married to a wonderful man a year ago.
The narrative of Brenda’s story provided in Table 4.3 serves as an illustration of how some women require tangible support in the form of a safe place to sleep and food when they leave prison. She had nowhere to go except back to where she lived before. She knew that before dusk fell upon her release she would be back on drugs if she went back to this community. This made her extremely anxious. Brenda articulated this need to me in the following words:

“And then Mrs F (warden) - I went to her one day - my time to go see parole - I was supposed to - my date was given to go see parole - and I thought to myself - no man I don’t think I’m ready to go out and if I do go out I don’t want to go back to ER and that . . . that was like in my mind.”

Later, after four years of being out of prison, Brenda stated:

“I think if I had to go back to ER, I would’ve been in prison for these last four years that I was out; I would have been more or less in most of the time.”

Brenda did not want to go back into the environment where she had previously lived. Her primary need was for housing as she had no living family and needed an alternative place to stay. She wanted to abstain from drug abuse and crime and was exceptionally stressed at the prospect of having to go back to a place where she knew she would not survive her newfound conviction.

4.4. Prison’s Failure to Rehabilitate the Offender

As noted in chapter two, many SA prisons fail in their duty to provide meaningful rehabilitation. Correctional Services Minister, Mr Ben Skosana, commented in 2001 that the rehabilitation of offenders is difficult as there is little accountability to programmes inside prison and it was a challenge to change
programmes into something that would make a difference and have impact on the lives of offenders (DCS, Office of the Minister, 2001). Mr Justice Hattingh is quoted as saying that, from the outside, many regard the reform potential of imprisonment as a myth and totally impossible (Van Wyk, 2002).

4.4.1. The belief that ‘nothing works’.

The term ‘nothing works’ seems to be the prevailing myth surrounding rehabilitation in prison. Gaum et al. (2006) also write of the disturbing move by those in authority towards the belief that rehabilitation in prison does not work and offenders begin to be viewed as irredeemable and habitual criminals who cannot be helped and are treated accordingly. The ‘nothing works’ myth took root as far back as 1974 with what is known as the ‘Martinson report’. This report showed that treatment programmes in prison did not reduce recidivism. Hesselink-Louw (2009) writes that this belief has to be eradicated if things are going to change positively in prisons in SA. Attitudes towards offenders must alter as well. Correctional Services Minister, Mr Ben Skosana (DCS, Office of the Minister, 2001), said that no person should be judged as incapable of changing. He added that holistic reform methods are likely to be more effective and suggested that religious and moral instruction, mental quickening, and physical development should be focussed on as reform measures of the future.

4.4.2. The institution of prison.

Many times I have heard an offender say, “I just want to get out of prison and never come back.” I believe these intentions are sincere but there seems to be no conversion of these real intentions to not return to prison and related behavioural change once they leave prison. This sentiment is echoed in Brenda’s words:
“Inside of you, you’ve just got that “I’m never coming back to this place.” But the thing is this, you don’t think when you coming out – where you are going to –yes, and there is no plan. Then - because, as soon as you are out of prison you feel so happy, that “Here, ek is buite.” (Afrikaans for “God, I’m outside”) – that first day you are out you are going to do what you did the last day you were out.”

Gaum et al. (2006), in their research in a SA prison, write that many offenders are model prisoners who are released early due to good behaviour, but relapse back to crime once they are released. Gaum et al. (2006) assert that one of the reasons for this is the phenomenon called institutionalisation. It occurs under circumstances where any independent decision-making, or thinking, is viewed as rebellion and when offenders are coerced to comply with rules whether or not they agree or are conducive to good rehabilitation (Gaum et al., 2006. Haney, 2003). In order to survive prison life the offender is forced to subject herself to the authorities that control, whether this person is a fellow inmate or a warden. Offenders are treated like children and forced to conform in the interest of emotional survival. Institutionalisation can result in inmates losing interest in the outside world and beginning to view the prison as home. Once a person is institutionalised they find it difficult to assert themself, make good decisions, and take responsibility for their life. This learned behaviour is very problematic once they leave prison (Gaum et al., 2006. Haney, 2003) and leads to the creation of a false compliant self while compromising the individual’s true self. This idea is further elaborated in a subsequent section below.

4.4.3. Lack of dealing with mental health illnesses.

Coetzee (2003) proposes that after admission to prison a personality assessment should be done and a treatment programme prepared in the light of the knowledge
gained through the assessment of the offender’s need, capability and disposition.

Reasons why these treatment programmes sometimes fail include that staff/prisoner ratios are overtaxed. In 2002, 43 psychologists were employed by the DCS in SA for an estimated 173,998 offenders (a ratio of 4163 offenders per one psychologist) (Hesselink-Louw & Schoeman, 2003). Because of this the prison system is forced to operate on a crisis intervention method of offender treatment rather than individualised therapy (Hesselink-Louw & Schoeman, 2003). Offenders who have been recommended for treatment will often only see a psychologist just before the offender is due to be released on parole. This leaves insufficient time for adequate treatment (Gaum et al., 2006).

The narrative of Jane’s story provided in Table 4.4 serves as an illustration that many imprisoned individuals need therapy and psychological help to overcome their criminality. Jane tells of how the psychologist she saw helped her with her problem of stealing:

“Then there was the psychologist I saw. She helped me to talk about things (things of the past). . . . I had suppressed things and I didn’t communicate well with people. I think this is why. I didn’t need to shoplift. I did have work . . . yes, I began speaking about my life. She asked about my years as a child. I told her I always felt like I never got enough attention or love from my parents and I was a very introverted person”.

Table 4.4

A Story that Demonstrates the Need for Psychological Therapy

Jane’s story.

Jane is a woman of 51 years of age. She finished a four-year sentence seven years ago. She was involved in shoplifting since her early 30’s. She had 39 counts of shoplifting against her. She says she began shoplifting when things got difficult financially. She began taking food but then this led to shoplifting toiletries and other commodities too. She was caught, warned and issued suspended sentences many times before she finally was sentenced to prison. At one time, while on parole, she shoplifted again and her sentence was prolonged.

Jane did not understand why she continually returned to shoplifting. She shoplifted even though she was no longer financially needy. Her shoplifting habit had become entrenched as part of her life. Her family told her she needed to get professional help but she kept avoiding and denying she had a problem. The prison system also let her down as they did not evaluate her psychologically and she never received help for the obvious condition of Kleptomania.

Entering the halfway house system enabled Jane to address her Kleptomania by seeing a psychologist. Should Jane have seen a psychologist while in prison, after several counts of shoplifting were held against her, she could have been helped and she would have been prevented from entering and re-entering the prison system over many years. Jane had trained as a seamstress in the prison and acquired work when she left prison at a small fashion retail business concern that fulfilled contracts for larger retailers. Through this Jane obtained work at an upmarket fashion retailer, as a seamstress and she now earns well. She has been free of crime for seven years.
After procuring employment and learning to deal with her Kleptomania, Jane commented:

“I work out something for me – I’ve got a budget – I put something down and then I think what can I buy this week . . . and then I see, no, I can’t buy but I see what I can buy - what is more important that I need. . . . Now it is so nice that I work and I can buy. I told the psychologist that there were times when I could hear the “devil’s” voice telling me to steal, to go and fit clothing on, that no one would notice or to fold something up and put it in my bag. I did struggle with this a lot”.

4.4.4. Corruption, drugs and alcohol in prison.

A problem highlighted by the Hesselink-Louw et al. (2003) study is that corruption is hugely prevalent in prison with wardens and offenders taking part in any amount of bribery and exploitation. Most offenders fall into more crime while in prison than when they were outside. Drugs and alcohol are especially available in prison. In some prisons offenders have easier access to these commodities than in their communities outside (Hesselink-Louw et al., 2003). The unoccupied and idle hours spent in prison are conducive to a sense of emptiness and meaninglessness. This could influence a person to become drug dependent while in prison. Brenda articulates her experience of the proliferation of drug sales and smuggling within the prison:

“Umm, actually, no, they didn’t have – like in the beginning time when I started to go to prison (18 years ago) they didn’t have courses like “Restorative of Justice” and things like that – they used to have – yes, you could go to church – that’s all – and church was something very good for
me because like Ellen (another offender) said now the other day – you go smuggle when you go to church – either you going to go buy something to go sell – like I used to smuggle drugs and tobacco and cigarettes in prison and nobody ever knew where I got it from – because it was nobody’s business and the way I also got it – nobody knew how I got my stuff - but it was nobody’s business – by me it was “dis nie jou saak nie (Afrikaans for “it is not your business”). . . . no, while I was in prison I still used dagga but I never used anything stronger and that.”

Similarly Ellen shares her experience of the availability of drugs in prison by recounting:

“Ja, (yes) yes, you can get it by the men’s side. You know - we always have a way . . . even if you must drop the stuff in a bag full of laundry and then you just let that person know and the person come pick it up so . . .”

4.5. Providing Holding and Facilitating Corrective Emotional Experiences

Van Buskirk and McGrath (1999) researched welfare mothers who came from backgrounds where they were/are very poorly ‘held’. They found that poverty, unemployment, low education and job skills, plus societal abuse issues, all contributed to low community support for these women. As described, the prospect of ‘being dropped’ or ‘falling over’ is always immanent in these communities (Van Buskirk & McGrath, 1999). The inability of community to produce a ‘holding environment’ that can be maintained undermines the pursuit of a better life.

I have come to understand that the halfway house attempts to provide an environment similar to a ‘holding environment’ for women who essentially come from ‘being dropped’ communities and endeavours to give them the support they
need to pursue a better life. As a ‘transitional space’, the halfway house provides and facilitates growth in the individual enabling independence through trusting relationships where the true self is able to be revealed (Van Buskirk & McGrath, 1999). This holding environment is created by: meeting basic needs for food and shelter; showing unconditional care; improving education and skills; setting structural routines, rules and consequences; and providing opportunities for sincere and authentic relating with ‘house parents’. Each of these aspects of the holding environment is discussed below.

**4.5.1. Meeting basic needs for food and shelter.**

Just as Winnicott described the ‘good enough’ mother as a mother who completely adapts the surroundings to meet her infant’s needs, so the halfway house seeks to completely meet the ex-offender’s needs once they are living there. And, just as the ‘good enough’ mother would gradually withdraw, according to the infant’s growing ability to cope, so the halfway house endeavours to do the same. So the physical needs of the ex-offender for food, shelter, clothing and other essential commodities that women would need to feel well cared for and valued, are provided without the responsibility of meeting the costs incurred until they procure employment. Often the ex-offender will not have developed good housekeeping skills, cooking skills or basic hygiene practices. These fundamental skills would be taught at the halfway house by the house parents. In order to counteract the effects of institutionalisation, chores and responsibilities are worked out and decided upon together. The chores include cooking (and menu selection), cleaning, washing and gardening. The halfway house grows its own vegetables during the summer and women do the planting and maintaining of this garden. The women also participate
grocery shopping in order to learn about the economical purchasing of food and other commodities.

4.5.2. Showing unconditional care.

In order to create a holding environment the directors of the halfway house and the house parents need to show genuine unconditional care. The house parents are permanent residents at the home and it is a fundamental necessity that they, particularly, build a relationship of positive care with the resident and that they sincerely believe in the ex-offenders’ ability to change. For example, it has been found that if one or other of the house parents find a certain women difficult and responds to that women with disapproval, albeit unconscious disapproval, the prospect of this women’s successful reintegration is at risk. Initial interactions are therefore very important.

Winnicott (1960) posited that ‘holding’ was not just about physical holding but included environmental provision. The holding environment, and those in charge, need to replicate as much as possible the ‘good enough’ mother by responding suitably to the ex-offender’s needs in order to help them view themselves as persons of worth and value, an attribute foreign to most. Just as a mother would soothe, comfort and reduce tension in the small child (Winnicott, 1960), in the same manner the house parents need to emulate grace toward the ex-offender. Over the years ex-offenders have expressed over and over again that the halfway house provides a place that can be called home, a place where people care deeply and a place where they can overcome the temptation to go back to previous ways of living, for example, drug abuse and crime. Ellen describes her experience of this unconditional caring when she says:
“After being 11 years in a prison I honestly wish that I had, umm, would have come across the halfway house very much earlier in my life, and umm, and the difference that this halfway house makes in my life, the support I’m given. And no matter how terrible or whatever I’m going through - they are not going to throw me away - umm - they are there to help. I mean there’s, there’s, there is so much help around me it is just for me to grab it and, and I’m gonna grab it with both hands ‘coz I’ve never had this and ja (yes)”.

Bion did not believe that withholding feelings and emotions led to change. Bion believed that converting painful feelings into thoughts and words would bring change but that this could only happen if someone (a good container) could successfully encourage the individual to verbalise these feelings so that ‘beta elements’ can be transformed into ‘alpha elements’ (Rustomjee, 2007). House parents and counsellors at the halfway house have affected this kind of transformation in ex-offenders lives when trust, often brought about by responding unexpectedly and differently to a situation, has been built. Vuyo shares how she felt free to talk openly with Marie the house parent:

“I have always been able to talk to Marie (house parent) about who I am and what I feel and that has been more than enough for me . . .”

The halfway house also provides a physical separation from previous bad influence and friends. Ex-offenders express that the ‘warmness’ of the home itself, the atmosphere created in the home and the freedom - even though they are on parole - helps them settle and realise, sometimes for the first time, that there could be a brighter future for them. The value that the women place on this unconditional acceptance is captured in the testimony of Brenda when she says:
“I’ll never forget – Gugu was just so friendly – and then we came to the house – and then . . . and I felt very at ease and I felt at home, I don’t know - my insides that was knotted at the correctional centre - was actually, it wasn’t there”.

This sentiment is echoed by Vuyo when she says:

“The halfway house helped me a lot. Firstly I was welcomed, the people care a lot and I felt supported. I knew there were people who cared about me, that loved me because I was so used to people telling me that I just don’t want to come right”.

4.5.3. Improving education and skills.

Van Buskirk and McGrath (1999) contend that women from poorly ‘held’ communities are, for the most, poorly educated. Education has become an important component of addressing the needs of those who have been let down by their communities and families by being ‘poorly held’. The halfway house offers opportunities to women to improve their educational skill base. Increasing educational qualification has probably been one of the most important factors in improving self-belief and self-esteem and provides ‘holding’ in a very practical way. Education seems to birth the realisation of particular potentials and facilitates the emergence of the true self – a self who has hope for a brighter future. It also seems that providing educational opportunities allows many women to explore as yet unknown parts of themselves and achieve a sense of mastery that builds their self-worth. This is aptly illustrated in the words of Vuyo when she shares what improving her education did for her:
“I see myself in five years’ time working, earning money, I see myself with my children where they belong with me. I see myself in a place of my own”.

“I found out what I liked doing at the halfway house . . . It made me feel good and it made me . . . and I felt like, umm, I can do it – you know - and maybe there is something in here (pointing to her head) when I thought there’s nothing. And that was very special to me because they also saw something – a leadership skill that actually motivated me to study”.

I have often observed how personal gratification and a sense of pride and dignity were produced in those who attained sustainable work. Brenda testifies to how she felt when she did well in her exams and how it opened doors to responsibility:

“Nee (no), all the way I got 100 % (for her exams) - all the way. So they said to me no, no, this is the job you have to do now. They then made me the senior of the clinic - it’s actually the mini hospital - they made me a senior there”.

Together with the opportunity to study, train and learn comes the opportunity to earn. The fact that money could be earned in an honest way seems to give rise to vision being born in women’s lives. The comprehension that poverty is not inevitable and that economic freedom can be realised is obvious in those who find meaningful work. It would seem that by providing what her community or family could not do for her, the ex-offender counteracts the effects of a ‘poorly held’ individual and offers herself hope for a better future.

4.5.4. Structure, routine, rules and consequences.

There is a requirement to set strict boundaries and instil authority of non-deviation from residents at the halfway house. For example, women are not permitted under their parole conditions (and the house rules) to foster ‘old friend’ relationships
that could lead them back into crime. Should a woman break the rules by engaging in unsavoury relationship building outside of the parameters of the house (relating with previous drug merchants and/or friends), she will face consequences. Discipline usually takes the form of a curfew limitation and she could be restricted to not going anywhere on her own for a period of time. Should she continue with this behaviour, she would be asked to leave the house. Many times ‘old friends’, who are involved with lifestyles that can risk a women’s future, are difficult to ignore. Brenda shares why it is important that they are ignored and articulates her fear of relating with these ‘old friends’.

“I didn’t want that (to go and visit them) because, for someone who comes out of such a long life of drug use - drug abuse - drug use - I don’t think it’s easy to just go and sit there and watch people doing drugs and you will “dink nou wag, ek gaan ook ’n skyf vat“ (no wait, now I’m going to have a smoke too ) - no, no you mad - that’s never gonna happen - you are going to – and you are going to lie to yourself – but you are going to do it (smoke drugs) - and I didn’t go (to visit) for a very long time and I just like put that behind my mind”.

It was a resolution of the organisation in establishing the halfway house that it would take on the ambiance of a home rather than an institution. Traditional ‘institution type accommodation’ provides a safe and secure place for the resident, but most institutions have punitive rules and do not operate from the premise of the resident actively engaging in how the centre is run (Haney, 2003). The organisation did not want to create the type of residence where the ex-offender has no say regarding what is watched on television, on what should be eaten, or what should be worn and a place where there is no negotiation regarding house rules and norms. The
organisation does not believe that punitive rules aid people to address real problems of self-discipline and restraint. In creating a home, and not an institution, the aim was to give people a say in how the home is administrated.

This was never going to be an easy stance to take and it has taken some negotiation in attempting to achieve this. The reasoning behind this view was to aid healthy decision-making by individuals and, the organisation felt, that these individuals would be more likely to abide by rules they have personally negotiated and set. Within certain moral norms television watching is allowed and residents are able to decide what is appropriate to watch. The house parents monitor this and the board of the halfway house trusts their judgement. Women are encouraged to plan meals and to cook their favourite meals too. This all has to be executed within reason and cost.

There are rules that must be agreed to and signed by every resident. These rules are discussed with each resident before they agree to be a resident at the house. An attempt is made to ensure that these rules are not punitive or too restrictive. However, it is difficult to find the correct degree of restriction and freedom for all residents. Allowing too much freedom and autonomy can create risk, especially with women who have seldom had boundaries and who are skilled at manipulating the boundaries they do encounter. Women are asked to leave if they repeatedly break rules, take part in immoral activity or abuse substances without recourse. Despite the above precautionary rules, it is accepted that women entering the halfway facility will often have ulterior motives for coming to stay. These are the result of the backgrounds they come from. These attitudes often change as Ellen explains:

“Ok, I’ve been out of prison now for almost a year and a month - which is the longest I’ve been out of prison - which was really not easy
because when I came out I went to go stay at the halfway house. Umm – it’s a halfway house for ladies that comes out of prison that’s got nowhere else to go, and, umm, they help you to see your own true potential and so that you can also go back into society - but in anyway, so the first time when I came there I was still very rebelled. I went into the lady - to the house mother - I went into her room with one focus and that was for this house to help me get a job and as soon as I’m on my feet I’m moving out - umm - I didn’t still wanted to stay there long - I just wanted these people to really help me get a job and when I get a job I want to move on. Umm - but somehow things changed - I didn’t just think about this job and move on - I - umm - shared a lot of myself with the housemother . . .”

4.5.5. Providing opportunities for sincere and authentic relating with house parents.

The organisation utilises the services of psychologists, occupational therapists and doctors to assist women who need the extra care that a community counsellor or house parent cannot provide. Many of these professionals are willing to do pro bono work and this has helped the organisation tremendously as NPO’s, like ourselves, often have trouble getting funding. The organisation will utilise the services of other organisations like ‘Rape Crisis’, ‘The Women’s Legal Centre’ and drug rehabilitation centres within the neighbourhood of the halfway house should they be needed in aiding the ex-offender. Although this help is valuable and available, the role of the house parent is probably the most important function that facilitates healing within this often difficult context.

That residents at the halfway house have been able to embrace a new way of life is most likely due to the capacity of the women who are the current house parents to
empathise with the ex-offender in a very particular way. The current house parents were both drug addicts in their past, one of them having been imprisoned for an extensive time in her youth. Their disposition and approach does not come from a place of superiority, but rather they self-disclose very openly and share honestly about their own struggles and failures, and they also share of their success. This approach contributes positively to relationship building. Brenda, who valued that someone (a house parent) identified with her experience of being in prison explains:

“Without the halfway house I wouldn’t have made it. It has happened so often that I have told people that I have been in prison and they really don’t understand what that was like . . .”

Similarly, Ellen conveys her experience of the helpful relationship with the house parent who assisted her when she had a relapse in abusing substances:

“I was back onto drugs again and I don’t know what happened but every night I would fall asleep crying and I would feel guilty and ja (yes) . . . and I don’t want to go back to that life but I’ve got no control – I would go to Marie, the housemother – and did say to her – I’ve started to smoke tik again . . . ja (yes) and I’m scared because I’m starting to study and I’m scared this tik is gonna make me that I can’t, that I will lose the place I stay . . . I had, umm, a lot of support – I had the director from the organisation - I had others - so that I can just go to them during the day even though I’m actually disturbing them by sitting in their carpet while they must work and then I’m ordering them around - it’s fine . . . and they accepted me just as I am.”
The support Ellen received provided her with a ‘corrective emotional experience’ that helped her address her vulnerability at the time.

In a similar way Jane describes how her relationship with the house parents enabled a corrective emotional experience. Jane had been at the halfway house for one month when she was caught shoplifting. She expected to be sent away, as her brother had done. This is how she relates what happened:

“I didn’t know the halfway house people very well, I thought I would be on the street, I would have to sleep on the street. I didn’t know where to now. I thought I would go back to jail. But the housemother spoke to the director and I was called into the room. They got me a psychologist to counsel me. The director and her friend went with me to court and explained and pleaded with the prosecutor – in fact the director sounded like a prosecutor . . . they (prison authorities) didn’t take me back to prison, the director spoke to the prosecutor and explained and I explained that when I was in the prison they never gave me any help with my problem. I received no help with my problem.”

Jane was also never able to express her emotions freely, which had a negative impact on her interpersonal relationships. She describes how her relationship with the house parents and the other women in the house enabled her to improve her relationship building skills:

“We learnt a lot from each other, we learnt that we are different and that God made us so and that we can learn from each other. Our personalities also were different but we can always learn from what another person brings up. We did get on in the house but sometimes we also shouted at
one another and got cross with one another. But we could always ask
forgiveness of each other. I learnt to live together with other people that
are different to you.”

Similarly, Vuyo describes her experience of being fully accepted at the halfway
house:

“Firstly, they (the halfway house staff) are gifts from God. Ja (yes)
because I don’t think any right person in their right mind would take a
bunch of women that is so mixed up and screwed up and work with them
and give them chances, opportunities and all that and ja (yes) . . . I feel, I
feel like a whole new person, I have self-confidence, I feel respect for
myself again because I had no respect for myself. And it’s nice being
treated like a human being.”

Most of those coming to live at the halfway house show antisocial personality
traits. Because of repetition compulsion the women try to draw the house parents into
old dysfunctional ways of relating, with the unconscious expectation of being rejected
and harshly punished. With supervision, the house parents can provide a corrective
emotional experience by responding with empathy and kindness, thus facilitating
positive relationship skills. It needs to be remembered that those showing antisocial
personality traits will have an impact on others in the halfway house who will need to
be cared for and counselled. This aspect of the halfway house is explored more fully
in the chapter that follows.

House parents receive supervision and training in counselling, anger
management, mediation and other appropriate subjects. My role as the director is to
facilitate their training, supervision and frequent debriefing, with professionals
outside the organisation being called in to facilitate some of these sessions. Individual
and group meetings are used to manage volatile incidences in the house and I, as
director, usually take responsibility for running them. Should a situation arise that I
feel is not within my experience to manage, I contract in a suitably qualified person to
manage the situation. I, too, attend supervision and debriefing sessions on a regular
basis.

4.6. Some of the Challenges Providing Holding

Providing a holding environment is not without its challenges, particularly
because this environment has to be continuously maintained 24 hours a day for 365
days a year. These challenges include: the struggle to find suitable house parents; the
potential for burnout; securing sufficient funding; and maintaining a working
relationship with the DCS. Each of these challenges is discussed below.

4.6.1. Employing suitable house parents.

When I opened the halfway house I had to employ people who were willing to
work for minimal remuneration, and consequently I could not be as selective as I
should have been. Today I have a better understanding of what is required from house
parents and we are now able to offer better remuneration. This enables me to be more
discerning about who is employed as house parents. My experience has taught me that
to do the job effectively a house parent needs to demonstrate a ‘deep sense of calling’
to help people in these circumstances and should additionally have tenacity – a
resolve to persist and not give up. Extensive training, counselling, supervision and
time needs to be given to those who are house parents. As such house parents need to
be open to personal reflection and learning, with the capacity to be flexible in
complex situations. It is not always easy to find people with these capabilities.
4.6.2. The potential for burnout.

I regard burnout to be the greatest problem facing people involved in the social service industry. Work in a halfway house demands extensive hours throughout the year. Although I do not live at the house, I am available at short notice should there be a crisis, as is often the case. In order to avoid burnout, protective measures and structures, such as constant supervision and support, are required. The provision of these measures is labour intensive and brings with it the potential for burnout.

It is crucial to have realistic expectations of oneself and of others in the halfway house. A major factor that counteracts burnout is learning not to take responsibility for things that cannot be changed or things one cannot control. If an ex-offender breaks rules or parole conditions, or does something that jeopardises her future, I have had to learn, and teach the house parents, that this is her decision and we are not responsible for her bad decisions. Often we have spent hours counselling, advising, nurturing and loving a person and they endanger their future by doing something foolish. We can often feel we have failed if the person does not respond the way we think they should. Here we need to understand that we can only do our best and nothing more. We need to allow ourselves to be the ‘good enough’ director or house parent – not the perfect one.

The capacity to be able to think about and reflect upon a particular problem, without being drawn into the emotion of the situation, is a protective strategy against burnout. I have the innate ability to observe the situation and deliberate on events and circumstances from a separate stance, and only then engage in a solution or decision. Having a well-trained professional person as a supervisor, who deeply understands the difficulties and intricacies of working with sometimes very psychologically damaged people, has helped me tremendously. This person has helped me to gain
perspective many times when the proverbial ‘wheels were about to fall off’, and encouraged me to persevere, reaffirming my ability to execute whatever I needed to execute. I think my ability to be able to talk with her honestly about how I feel has helped me immensely.

My husband has been a ‘life line’ for me in many respects as he reminds me continually that ‘there is another world out there’, besides the halfway house and the problems that sometimes go along with running it. We have certain ritualistic activities we engage in on a regular basis, such as motorbike riding, going to dinner and movies, or taking a long hike or walk. These activities help me unwind and embrace the beauty of living once more without being over consumed with the halfway house and its difficulties. Another deep motivating and continued source has been my faith in God. I have always felt called to this work and I believe that God has sustained me for this reason.

Time out is needed for all of us and so it is an instituted practice with the house parents as well as myself and other staff. House parents have every second weekend off, and they have annual leave that must be spent away from the house. One of the biggest challenges is having enough staff to prevent burnout. The turnover of people who have volunteered or been employed by the organisation is high. This is because this is not easy work and people sometimes come into the house with high ideals. Very often this type of work attracts people whose psychological needs call for healing of their own. It is not possible to manage the ex-offender, supervise and train house parents, and deal with the personal issues of those the organisation employs. The difficulty remains in finding staff that are mature and professional enough to be of real service and value to the organisation.
4.6.3. Securing sufficient funding.

To provide the kind of holding described above is an expensive undertaking. The organisation relies on donations and grants to finance its work. Since the inception of this halfway house 10 years ago, the organisation has not had sustainable or committed regular finance. It has been difficult to convince business, the private sector and government of the value of the work we do. They view us as small, as not reaching enough people, and as unsustainable with no relevant track record. They therefore fob us off as unworthy of funding. If it were not for the National Lottery Distribution Trust Fund (NLDTF), trusted friends and family, and the local church, we would have had to close our doors a long time ago. Securing sufficient funding is a very stressful part of my role.

I was nominated for a significant women achievers award in 2011. I was told that the reason for not winning this award was that I had not built an organisation that had long-term sustainability. The fact that we had managed to sustain ourselves for almost 10 years up until this time was not considered. The judges’ decision was not cognisant of how difficult it is to convince potential funders of the value of our service. The award, and prize money, went to an organisation that was receiving funding from overseas agencies, business, and government.

4.6.4. Relationship with Correctional Services and Community Corrections.

In order to provide a holding environment in the house it is imperative to sustain a working relationship with the DCS and the Community Corrections office, which manage parolees.
One of the complexities that one has to manage is reporting to DCS the misdemeanours of ex-offenders. The Community Corrections office is obliged to respond ‘by law’ to the deliberate breaking of parole conditions. Should the offender be found guilty they will be sent back to prison. It is therefore incumbent upon the staff of the halfway house to evaluate whether a transgression is serious enough to report or not. This is not an easy decision. It is often dependent upon the misdemeanour and the person’s individual response.

A good relationship with the DCS Community Correctional Officers can be beneficial. These officers can be involved in helping with the ‘discipline’ of women. The officers carry authority into situations when, because we show empathy and care, women might think we will not take serious action should they break rules. By involving the DCS Community Correctional Officers in the daily running of the halfway facility, by asking their advice and explaining what we are trying to achieve, and our motives for doing so, we build a relationship of trust and respect for their authority. This involves advising the officials of the women’s schedules and programmes and being truthful regarding this.

4.7. Conclusion

The theory presented here illuminates the importance of the child’s relationship with the caregiver/mother to early child development. From experience, and the stories told, it is apparent that many offenders come from backgrounds where they were not ‘held’ as Winnicott would describe it, or were not ‘effectively contained’ as a young child, a term Bion would use. In addition to this, prisons have failed in rehabilitation efforts, further ‘dropping’ the offender.
The halfway house, as a ‘transitional space’, has given many women ex-offenders the opportunity of a secure holding environment that enables the requisite growth and development to enable the women who reside there to move toward a better and more secure future with visible and feasible alternatives to their familiar criminal lifestyle.
CHAPTER 5

ABANDONMENT AND ATTACHMENT:

THE PROBLEMS ASSOCIATED WITH ACCOMMODATING WOMEN IN THE HALFWAY HOUSE WHO EXHIBIT ANTISOCIAL PERSONALITY TRAITS

5.1. Introduction

One difficult aspect of running an effective halfway house is dealing with the individuals who inhabit the house, their personality traits and defensive patterns of relating. It is well established that many women prisoners meet the diagnostic criteria for antisocial personality disorder (Nevid, Rathus, & Green, 2005). Furthermore, many of the women who find themselves in prison have suffered early traumas and parental neglect that have given rise to attachment difficulties, problematic interpersonal styles and defensive ways of dealing with primitive emotions (Bowlby, 1944, McWilliams, 1994). It is thus inevitable that women who experience these difficulties and who require help gaining insight into their interpersonal behaviour and the way they deal with their emotions will inhabit the halfway house. This presents a particular challenge for anyone who works in a setting of this nature.

In this chapter I will demonstrate how these difficulties can arise by recounting the story of one woman, Ellen, who lived at the halfway house for 24 months. I will draw on concepts described by Klein and Bowlby, as well as the work of McWilliams, to make sense of my experience with Ellen. The utility of psychodynamic formulations of antisocial behaviour is also discussed, and the implications of these for institutions that seek to facilitate the reintegration of ex-offenders back into society are presented.
5.2. Moving beyond the diagnostic label of ‘Antisocial Personality Disorder’

Nevid, Rathus, and Greene (2005) describe people with antisocial personality disorder as being people who violate the rights of others and have a disregard for social norms. The trend in the past was to use terms such as *psychopath* or *sociopath* to refer to people who are antisocial and display amoral, asocial, and impulsive personality traits (Nevid, et al., 2005). These people often have a superficial form of charm and seem to impress with their colourful personality and good verbal skills (Sadock & Sadock, 2003). They lack the ability to feel real remorse or shame for actions, however, and they appear to lack conscience (Sadock & Sadock, 2003).

Sadock and Sadock (2003) cite that 75% of prison populations could be diagnosed with antisocial personality disorder. The chastisement of prison seems to have little effect on their antisocial behaviour though, and they persist in leading reckless and impulsive lives (Nevid et al., 2005).

As an explanation of the behaviour demonstrated by individuals classified as antisocial, McWilliams (1994) cites that research has shown that reactivity of the autonomic nervous system consistently tests lower in diagnosed antisocial psychopaths. Tendencies of selfishness, aggression and “dysfunction of empathic social responses” are typical of the psychopath (Colman, 2009, p. 620). It is customary for people to get emotional satisfaction from pleasurable activities but the psychopath tends to need a higher than average threshold for pleasurable excitement (McWilliams, 1994). It has been suggested that the antisocial psychopath’s pattern of relating to the world has a strong genetic component, and the disorder is believed to have a very poor prognosis with symptoms often only decreasing as the person grows older (Sadock & Sadock, 2003).
While many individuals in prison (particularly re-offenders) meet the diagnostic criteria for antisocial personality disorder this diagnosis in itself does not help to provide insight into why these individuals behave in this way. Furthermore the current diagnostic framework tends to group all repeat offenders into one diagnostic group (i.e. antisocial personality disorder) on the basis of their criminal behaviour without acknowledging that there are often subtle but important differences in both aetiology and presentation of this pattern of behaviour. Murphy and Vess (2003) have shown how personality variances are neglected among those who are diagnosed with antisocial personality disorder and they have argued that there are sub-types of this disorder that are overlooked in traditional diagnostic practices. Similarly, Cleckley (1976) has proposed a definition of antisocial personality disorder that attends more closely to personality structure rather than simply behavioural manifestations of lawlessness. McWilliams (1994) has also proposed that individuals who exhibit antisocial behaviour may be better understood by considering the psychodynamic processes that give rise to this pattern of relating to the world. Likewise the ideas of Bowlby can be utilised to understand antisocial behaviour within the framework of attachment theory. The discussion that follows describes how McWilliam’s and Bowlby’s ideas can be applied to understanding the antisocial pattern of behaviour typically observed among women in prison and what the implications of this are for their reintegration into society.

5.3. Psychodynamic understanding of the Antisocial Personality Structure

McWilliams (1994) explicates that the typological categories of personality organisation that fall into the grouping of psychopathic personalities are perhaps the most intimidating in mental health practice. These personality types include sociopathic, antisocial, histrionic, borderline and narcissistic categories of distinction.
McWilliams (1994) states that people whose personalities are structured along psychopathic lines range from extremely psychotic, disorganized, and impulsive to sadistic and cruelly aggressive. From a psychodynamic perspective this pattern of relating to the world is the consequence of inadequate human attachment during childhood that results in an over-reliance on very primitive defences (such as projective identification) to deal with uncomfortable emotions during adulthood (McWilliams, 1994). The role of attachment in this process will be explored more fully in the section below pertaining to the work of Bowlby.

McWilliams (1994) purports that the childhood background of antisocial people is often rife with insecurity and chaos. Normal protective family influences are virtually non-existent. The development of the strength of a small child’s self is dependent upon how the child copes with maternal failures and how he/she eventually comprehends and deals with a mother who is essentially reliable. Early volatile and terrifying experiences during the child’s developmental years undermine the development of a sense of power, attachment and identification with a caregiver that is sufficiently good. Internal identification with good objects needs to take place. The child who never takes love in (internalises love) is not able to reciprocate by giving love out (Chescheir, 1985).

People with antisocial tendencies find it difficult to articulate emotion so typically act out as a way of demonstrating to others how they feel (McWilliams, 1994). They actively conjure up the feeling they feel in the other person through a primitive psychological process called projective identification (Klein, 1952). This process of projective identification serves two useful functions for the individual; firstly it is a way of communicating how they feel, and secondly it serves as a way of disowning parts of the self that which difficult for them to hold. Thus projective
identification helps the individual to avoid a part of themselves that is too painful to confront by locating the disowned part in someone else. McWilliams (1994) contends that antisocial individuals utilise this process unconsciously and habitually which, even though it is adaptive in protecting them from confronting painful feelings and intolerable parts of the self, nonetheless causes interpersonal problems for them.

Projective identification is one of the defences the psyche employs to protect itself from the painful and terrifying experience of being inadequately contained by the caregiver. Klein’s (1952) view of projective identification was that it came from a very deep split in parts of the self. It is essentially the hated parts of the self that are projected into the other person but at the same time these projected parts of the self are deeply denied in the self (Klein, 1952). Within this framework it is understood that individuals who exhibit antisocial personality traits may violate the rights of others and show a disregard for appropriate boundaries and rules as a way of communicating to others their experience of childhood. Their antisocial behaviour is a way of literally eliciting in others the intolerable feelings which they have felt since childhood but which have never been contained.

Kleinians believe that by providing individuals who exhibit this pattern of behaviour with insight into the emotional impact they have on others, they can be helped to establish new ways of inter-relating (Segal, 1992). Because these individuals use projective identification to transfer onto others the difficult feelings they have about their parents/caregivers, they often elicit anger, hostility and rage in others. If they can be helped to identify how and why they do this, a channel is opened up for expressing these feelings more adaptively. In psychodynamic psychotherapy this is often achieved by offering the client counter-transference interpretations (Macedo & Dias, 2010).
McWilliams (1994) explains that the way a child usually attains self-esteem, and a sense of power, is by being consistently loved and adequately protected within a stable family environment. As previously stated, the backgrounds of antisocial people are rife with insecurity and chaos. This leaves the young child with extreme feelings of vulnerability and powerlessness. These ideas are echoed in the work of Bowlby.

5.4. Conceptualising Antisocial Behaviour within Bowlby’s Theory of Attachment

The British psychologist, psychiatrist and psychoanalyst, John Bowlby (26 February 1907 – 2 September 1990) was interested in how early family patterns of interaction influenced healthy child development. Bowlby (1971) observed that attachment behaviour is clearly present at six months of age and by nine months attachment to the mother (or a preferred figure) was consolidated. On the basis of his observations, Bowlby (1944) developed a theory premised on the assumption that child-caregiver attachment during the first five years was crucial for healthy personality development. Bowlby (1964) advocated that a warm, intimate and continuous relationship with a mother (or substitute mother) in which both the young child and mother find satisfaction and enjoyment is essential for the development of mental health and good character. The experience of feeling secure and safe teaches the child to tune his/her behaviour to the subtle cues of others, and in the long term this equips the maturing child for successful relationships of all kinds (Bowlby, 1964). Bowlby believed that a disruption of this vital and primary relationship was the cause of juvenile delinquency, emotional and education difficulties, and possible criminal involvement in later years. Experiences of loss (death, divorce or abandonment) interfered with the child’s capacity to form attachments unless a suitable mother substitute took the place of the one that was lost (Bowlby, 1944).
Bowlby (1944) investigated the home lives of 44 people accused of theft and came to the conclusion that too little attention in the past had been placed on the incidences of emotional trauma that these individuals had experienced during the first decade of life. Discussions with the mothers of these children revealed that a remarkable proportion had not lived securely in a home all their lives but had spent long periods away from home. Some had spent time in a tuberculosis sanatorium (Bowlby, 1944). Further investigation exposed that, although the mothers of these children showed apparent love for their child, this was only one aspect of their maternal feelings. Although the mothers of these children said they loved their children, Bowlby found evidence of underlying dislike and rejection of their children (Bowlby, 1944). Bowlby took this study as evidence that without secure childhood attachment to a significant other, a child is ill equipped to be able to relate, trust, form and retain relationships, and participate in society as a healthy adult. The findings of his study are important for understanding the needs of criminal offenders.

Bowlby (1944) also stated that early successful attachment lay at the core of later manifestations of reciprocity in perspective taking (i.e., empathy). Many offenders in prison show a lack of empathy for others, a characteristic of antisocial personality disorder. Bowlby (1960) writes that antisocial behavioural patterns were observed in older children who were deprived of secure attachment in infancy. The children were deceitful and stole from others, they seemed to have no real feeling or capacity to care for others, and they did not form close relationships (such as friendships) because they seemed unable to form stable relationships or demonstrate empathy to others (Bowlby, 1960). They also did not display appropriate emotional responses to situations and struggled scholastically (Bowlby, 1960).
Further evidence of the link between antisocial behaviour and poor attachment is offered by research into the aetiology of conduct disorder in childhood. Many children diagnosed with defiant or conduct disorder commonly display attachment difficulties (Cherry, n.d.). Although genetics and biological factors can play a part in the development of antisocial personality disorder, when people are exposed to traumatic life events, such as abuse or neglect (and the lack of secure attachment) from an early age, the risk of them developing an antisocial personality disorder is greater (Nevid et al., 2006).

Children who are securely attached seem to be naturally more independent, self-confident, do better scholastically and generally are happier, less depressed, and usually able to form good social relationships (Cherry, n.d.). Mary Ainsworth (Holmes, 1993) described four types of attachment styles in children. Ainsworth discovered that securely attached children have a sensitive and responsive primary caregiver, usually the mother. Insecure ambivalent attached children have inconsistent caregiver/mothers who meet their child’s needs sometimes and at other times ignore these needs. Insecure avoidant children have caregivers/mothers who are unresponsive to their children. The response in the child is that he/she comes to believe that communication of needs has no influence on their caregiver. Ainsworth’s fourth and later category, called insecure disorganised attachment style depicts a lack of clear attachment behaviour in the child. The child’s actions and responses to the caregiver/mother are often a mix of behaviours, including avoidance or resistance (Holmes, 1993).

Bowlby (1988) recommends several ideas for the treatment of adults who suffer insecure attachment styles. Bowlby’s treatment emphasis is on providing the insecurely attached adult with a ‘secure base’ from which they would feel safe. The
focus would be on building a trusting relationship in a secure and ‘holding’

environment. The halfway house forms such an environment where caregivers do
their best to remain consistent, reliable and responsive to the needs of the insecurely
attached. The implications of Bowlby’s ideas for treatment are discussed later in this
chapter in the section entitled Therapeutic Intervention.

5.5. Narrative: the Story of Ellen

I met Ellen when she was 33 years old and while she was still incarcerated. She
had been in and out of prison many times over the previous 11 years for drug related
offences. Prior to her release I was warned that accepting her at the halfway house
could prove to be very difficult. In her behaviour and interpersonal interaction, Ellen
demonstrated bullying and aggressive behaviour and was extremely rebellious
towards those in charge.

Ellen took part in drug smuggling while in prison. When she was last
imprisoned she found she was pregnant and gave birth to a baby girl. At two years of
age her daughter was taken from the prison by Social Services and placed in foster
care at her request. Ellen seemed really concerned about her little girl and appeared to
realise the consequences of a life of crime for the first time. The following excerpts
are taken from the written story of Ellen’s life as she recollects the birth of her child:

“My water broke. . . . I gave birth to a beautiful baby girl . . . the
member (warden) was sitting at the end of my bed. My one hand was
handcuffed to the bed and the baby lay next to me on the bed. In the
middle of the night I felt like smoking a cigarette, I couldn’t sleep at all; I
was too excited with this new born next to me. The member was fast
asleep. I slipped my hand out of the handcuff, I made sure that the baby
was lying safely and comfortable in the bed. I got up and climbed carefully over the member’s legs and out I was. I went downstairs with the lift looking for someone who might have a cigarette for me. When I was downstairs I realised that I actually could just walk out of this door and no one would know about it, I could escape and get away! My freedom was out of that door. I had three and half years to still sit in prison - a choice - my freedom and to abandon my child. Without a cigarette, I turned around, and took the lift back up again. I carefully climbed over the member’s legs, put my one hand back in the handcuff and lay next to the most beautiful princess in the world.”

In the extract below Ellen describes her recollection of feelings of intense sadness as she was driven back to the prison after giving birth to her little girl. She says she was crying and the driver asked her why. This was her answer:

“Other women, all, have the privilege to take their new born to a lovely home, here I am taking this beautiful baby to a prison.”

Ellen described to me her experience of how difficult it was to watch her daughter (Hannah) growing up in prison. The extract below, in which Ellen describes how unsuitable the prison environment is for children, serves as an example of her experience:

“Hannah was growing, the single cell was very, very small, she would sometimes hang on the gates when we were locked up, and I could see that she was wondering why it is locked. She started hearing things, seeing things, and understanding things . . . got scared of loud noises . . . she would cry her heart out when we have to come in from ‘binneplaas’
(Afrikaans for the outside courtyard), because we only got an hour
exercise a day . . . she never saw animals or could touch them, she never
touched a tree or felt grass under her feet (the courtyard is cemented).”

I suspect that concern for her daughter may have been partly what motivated Ellen to write to me asking if the organisation could accommodate her in the halfway house upon her release from prison. She had no family whom she felt were responsible enough for her to go to. She later described her situation to me as follows:

“I had no one responsible to go to. My half sister drinks a lot and, I
did not feel for that at all.”

Ellen never attended any of the courses the organisation ran in the prison. The only course she did attend was the Restorative Justice Course (this course is a restorative and holistic response to crime that emphasises the importance of the role of victims, families and community members by more actively involving them in the justice process (Hesselink-Louw, 2009). Later Ellen articulated her motives for doing this course and her experience of it by saying:

“I did Restorative Justice and through that group I was really set
free of a lot of cases (criminal cases against her). I admitted to them that
I’ve got outstanding cases that only I knew about. It was eighteen cases . . .
I only got two months extra on my sentence . . . a miracle performed by
God.”

Ellen did go to church sometimes on a Sunday but her motive was to smuggle drugs to women in other cells. As Ellen testifies:
“I even used the church to smuggle in. I would say I want to go to church. They let me go and I would sell my stuff and even give people less than they paid for.”

I later learned that Ellen had been brought up in a children’s home. Her parents divorced when she was two years old. Social services came to their home when Ellen was five years old and removed and placed both her and her brother in a children’s home. Ellen records that her mother was incapable of caring for her brother and her adequately. Ellen expresses in her narrative that they were poor and there was no food in the house. She relates how her mother had an alcohol and gambling problem and that every second day she would have a different man in her bed.

Ellen never saw or had any contact with her father after he and her mother divorced. Her mother visited her and her brother at the children’s home sporadically over the years. Ellen became exceptionally rebellious and was sent to several reform schools during her teen years. Her mother died when she was 16.

At the age of 18 Ellen had to leave the children’s home and her father agreed that she could live with him and his new wife. It did not work out. Ellen could not settle at her father’s home after such a long period in the children’s home. Not having had any relationship with her father, together with early abandonment and attachment issues, the reunion resulted in disaster. Ellen was not able to handle the ‘normal’ societal rules her father and stepmother viewed as standard values. She told me that she felt like a stranger. She had so many questions she wanted to ask but no one spoke to her, and she felt alone and unloved in her father’s house. Ellen had inherited a small amount of money from her mother’s estate. She did not want to stay at her father’s home any longer so she left and went to live with a young man who was her current boyfriend at the time.
Being raised in a children’s home (which was based upon a submissive/dominance model of operation) had a profound effect on Ellen’s emotional and social development and did not adequately equip her to cope with day-to-day life. As explained by Haney (2003), institutions result in residents becoming either too passive or too aggressive. Everything is outwardly regulated and self-choice and self-regulatory opportunities are minimal. The longer time a person spends in an institution the greater the person’s loss of agency and loss of individualism and the harder it is for the person to reintegrate into society once they leave (Haney, 2003). As a result of her institutional upbringing, Ellen failed to develop the capacity to make good decisions and exercise sound judgement. In addition it did not provide her with any opportunities to develop inter-personal conflict resolution skills because of its authoritarian mode of operation. As a result, Ellen was not furnished with the skills she needed to negotiate or resolve family conflict. She was not able to state her needs was non-existent. It is thus hardly surprising that Ellen decided to leave her father’s house without trying to resolve her problems with them and elected to go and live with her boyfriend. Ellen’s boyfriend introduced her to mandrax (a drug that is smoked) and within a month the money Ellen had inherited from her mother’s estate had been ‘smoked up’.

Ellen was exposed to much trauma during her growing years. A foster father that was ‘supposed’ to care for her had sexually abused her during her time at the children’s home. Ellen writes of this in her story:

”The dad (foster father) acted very funny around me, he would wait till we were alone, whether it was in the television room or in the swimming pool or in his daughter’s room, where I slept. He would start to touch my private parts. I was so confused, so young, so alone. He would
give me sweets and tell me to not tell anyone . . . every holiday these people would fetch me . . . I would tell the house mother (at the children’s home) but she never believed me, always thought I was being naughty . . . I got clever, I would at night climb in beside his daughter and sleep behind her back . . . I told my mom when she came to visit me and she totally freaked out . . . it was over, the touching of this man was finally over . . . I never went out for holiday anymore . . . I would stay at the children’s home."

Ellen was inclined towards being overweight and was teased about this in her youth. This led to Ellen becoming bulimic in her teenage years as she plunged herself into a routine of binge eating and purging. The entire trauma of Ellen’s life, until she entered the halfway facility, had resulted in Ellen having great difficulty in trusting those in authority. Our goal was to move her along a continuum of learning to trust through supplying a ‘safe holding environment’ with people who could be trusted.

While in prison, Ellen used aggressive and bullying acts to manipulate others and assert her power. In the extract below (written while staying in the halfway house) she reflects on how she used other inmates to garner a sense of potency and mask painful feelings of sadness and guilt. With time I came to understand how Ellen’s rebellious behaviour and grandiosity could be seen as an attempt to stabilise her sense of self and restore self-esteem and power in response to painful feelings of vulnerability. It was as if Ellen vacillated between the desired condition of personal omnipotence and her underlying fear of been seen as weak (McWilliams, 1994).

“The loss and hurt I felt of Hannah (daughter) leaving actually ‘rebelled’ me . . . at the section I used a lot of girls in our cell to do a lot of dirty jobs for me. They would sell my ‘twak’ (tobacco), they would hide
it away by ‘upping’ it in their vagina’s . . . I just didn’t care, I wasn’t sacred of anyone and anything . . . I would get the girls to push the gate (of the cell) by force open just so that I could run out . . . The members (wardens) got so tired of me, spoiling their day, everyday, that they just left me to do whatever I wanted to do. I enjoyed the power I had in prison, the name, and because I was white, I just took full advantage of the fact of coloured people cannot take me for a fool anymore . . . The members (wardens) did not know what else to do with me. They tried to frighten me with parole . . . I enjoyed the power I had as a white woman. I was respected and spoiled . . . not knowing I was only used . . . every second week I was taken out of the big cells and put in ‘room service’ (solitary) for a whole week . . . this only ‘rebelled’ me more and more."

This type of rebellion and bullying tactic is well documented of prison life (Archer, Ireland, & Power, 2007).

The wardens cautioned me that Ellen was ‘bad news’ and they warned me about taking her in at the halfway house. The prison officials thought she would definitely use us and abuse us. They felt that she would not conform to the rules and regulations of the halfway facility.

With full knowledge of this I interviewed her. As I spoke with her I asked her different questions about her life and her dreams. At this stage of getting to know Ellen, her life and her story, a deep sorrow came over me as I increasingly became aware that where Ellen was today was probably not entirely to do with her bad decision-making. I saw her as an individual who had never known much security and, in many respects, a victim of societal evil and parental failure. I have always felt receptive in my heart towards the vulnerable whose choices have been taken from
them together with their confidence to walk tall in life. Perhaps naively I wanted to enable Ellen to, at very least, experience some safe haven from which she could launch a better life for herself. I rebelled against the voices of warning cautioning that I should be careful of taking her in. I felt profound compassion for her and, after consultation with my colleagues, decided that she could come to the halfway house.

Ellen was released from prison and entered the halfway house. She was charming and friendly, she warmed particularly to the house parents. Within months she entered the ‘Home Based Nursing Care’ course. She did well; her examination marks always exceeded 70%.

Ellen, however, began to display inter-personal difficulties soon after entering the halfway house. She furtively and actively manipulated ‘trouble’ between the other women in the house. She would ‘spy’ on the women, and then report her findings to the house parents. One example was when she discovered that a woman at the house was viewing pornography sites via her cell phone. Ellen was happy to expose her to the house parents but could not comprehend their anger when they rebuked her for invading the privacy of someone else’s phone without permission.

She became particularly attached to one of the house parents, monopolising her time with all sorts of trivialities in an attempt to divert her attention away from the other women. She would often speak and act in a childlike manner and even began to call one of the house parents ‘mommy’ until this was prohibited.

It was becoming more and more difficult for the house parent to keep clear boundaries even though these were spoken of on a regular basis. She was relentless in exposing others to her advantage and evoked strong emotional reactions in others. She was devious and envious but accused others of being that. She would not accept that
others were not as devious as she was. She would often say, “we are criminals, we are not what we seem, we are all liars and we will never change.”

Ellen’s primitive emotional responses and extreme attachment issues are aptly demonstrated by an event that occurred shortly after she took up residence in the halfway house. Ellen had been out at her training course and arrived home to find the house parent she was ‘attached to’ chatting and laughing with two other residents. Mishearing what was being laughed at caused Ellen to become wildly angry. She stormed into the room and accused the house parent of laughing and mocking her and others behind their back. When the other residents defended the house parent, Ellen went into a total rage and started to belittle and swear at them without constraint. It seemed to me that her underlying feelings of extreme anxiety and the threatening belief that her relationship with the house parent was being compromised was the reason that Ellen responded to an innocuous situation in such an undeniably preposterous manner.

When I first heard of the outburst I felt intensely angry with Ellen and a powerful urge to protect the other women in the house. Similar incidents followed in which Ellen would respond impulsively and aggressively towards the other women, evoking in them feelings of fear and anger. I was unsure of how I should respond to and resolve these recurring unreasonable outbursts. The other women in the house were getting more and more agitated with Ellen.

5.6. Responding Therapeutically to Ellen

It would have been so easy to respond harshly and punitively to Ellen, her behaviour certainly evoked in me deep anger and thoughts of terminating her stay at the halfway house. It was difficult, but essential, to contain my anger in order to break
the cycle of what I understood to be Ellen’s compulsion to repeat her early patterns of relating to caregivers.

A group meeting was held in order to resolve the conflict. I hoped that this might provide a space where Ellen could receive feedback regarding her behaviour and the impact it had on others. Before the group meeting was held I was able to counsel Ellen and question some of her unreasonable responses. She was able to articulate that she felt jealousy and envy towards others. Ellen admitted to feeling a menacing jealousy especially towards new residents coming into the house. She confessed that she feared the house parent, or myself, would prefer others to her. She also revealed that when the house parent reprimanded her for anything, she suffered intense anxiety. In this state her behaviour bordered on psychotic as she appeared to be completely out of touch with reality and incapable of reality testing. She either became aggressive and abusive or took on the role of ‘sweetness personified’. I think that she did this to try to win the favour and approval of those she felt she was ‘losing’. At the group meeting Ellen seemed to realise the harm she had done and asked forgiveness.

Sable (1997) writes that an aspect of therapy is to inform clients that attachment behaviour is a natural part of life. Helping Ellen understand that her self-perpetuating behaviour, deeply hidden in her subconscious, was alienating people from her was a process that included explaining attachment theory to her. Fortunately Ellen was of relatively high intelligence and she was able to understand the theory.

When women come to the house they are encouraged, in the tradition of Narrative Therapy (White & Epston, 1990), to write the story of their lives in detail. I used narrative therapy as part of my counselling strategy with Ellen to make her more conscious of her attachment history and how she might be unconsciously recreating
this with others by re-enacting old patterns of relating. Every session Ellen would read a portion of her story to me and, as we progressively examined the material, we would talk about her feelings and try to reframe the past. The process of reframing helps in the sense that it defines where the problem lies. The person telling the problematic story is not the problem, the problem is the problem (White & Epston, 1990). An example of reframing in Ellen’s life was when she told me of how she solved the problem she was having with her foster father’s continual sexual advances by climbing into the daughters bed at night so that he could not approach her. Instead of being a victim, she became capable of protecting herself. Reframing took the bad elements of this disclosure and reframed them in the light of her ability to protect herself and overcome the foster father’s advances. She could look on herself with admiration and strength. Through the analysis of Ellen’s life story many of her interpersonal difficulties were illuminated. The goal was to help her understand that her past did not need to define her future.

My experience is that many women in the halfway house benefit from writing their life narrative and having the opportunity to have this witnessed in counselling with me. The narrative also typically provides many opportunities to explore old patterns of relating and how this might be currently recreated with others. Finally the narratives provide opportunities for reframing which seems to be helpful by putting the women in touch with more adaptive and capable parts of themselves.

I used cognitive-behavioural techniques in the counselling situation as well. Ellen’s beliefs and thoughts about herself, others and the world, were based upon her experience of rejection and hurt in her past. Aaron Beck’s cognitive therapy is based on the premise that abnormal behaviour is caused by abnormal thinking processes (McLeod, 2008). In essence, how people interpret the world around them is founded
on their personal observations and personal experience in life. These observations and experiences are internalised within and become the belief system through which people evaluate and perceive the world they live in. Very often these evaluations and perceptions have developed into negative ideas about self, about the world and about the future (McLeod, 2008). Distorted thoughts and beliefs are identified in cognitive therapy through a process of evaluation that helps people identify the faulty thoughts and thereby change them. A process of recognition and monitoring of thought patterns is taught. Ultimately cognitive therapy aims at changing thinking which cognitive therapists trust will have a direct effect on feelings and thereby modify behaviour (McLeod, 2008). Ellen’s impaired relating and behaviour was the living out of her belief system. I undertook to explain to her that as she began to reframe her story and replace dysfunctional beliefs with more adaptive ones, the way she felt and related with others would adapt accordingly.

I was to learn, however, that an understanding of the theory, a progressive reframing of her past and teaching her more adaptive thought techniques were never going to be enough for Ellen. It was becoming increasingly apparent that the extreme trauma of her youth had produced in her an inability to process negative emotions or affect appropriately.

5.7. Regression: a Return to Earlier Patterns of Behaviour

With time Ellen’s behaviour became increasingly maladaptive and self-destructive. Her obsession with her weight returned and she had begun purging after binging once more. This unfortunate turn of events happened after Ellen finished the Home Based Caring course. Ellen found a job caring for an elderly couple in an affluent area of the city. We (the board and house parents) had advised her not to agree to any job offer before her contract had been scrutinised. Ellen ignored our
request and accepted the job on the spot. Ellen was still determined to do things her way. She did not like advice and found it hard to accept any guidance, with disastrous consequences.

One day, without my knowledge, the house parent agreed that Ellen could visit a friend that she had been in prison with. This ‘friend’ re-introduced her to ‘methamphetamine’ (tik). We did not pick up any sign of the drug usage immediately. Her drug usage led her to steal from the elderly people she worked for. They did not lay criminal charges against her, thus she avoided re-imprisonment. She was, however, fired. She confessed to us and we realised that her drug habit needed serious attention. She needed regular counselling and accountability structures. This would include drug testing and attending Narcotics Anonymous.

Ellen stopped abusing drugs but she was extremely difficult to manage during the time she withdrew from the drugs. Her behaviour impacted negatively on everyone in the house. Ellen made a recommitment spiritually, reassessing her life direction, and saw a counsellor every week (sometimes more often) over the next months. During this time she applied for a bursary to study nursing from an organisation that supports ex-offenders in further studies. Ellen received the bursary and during the year that Ellen studied she was relatively stable and she did well, passing all her exams. Ellen had been at the halfway house for more than a year and was encouraged to move to the organisation’s secondary housing project in order that she could become more independent. It was after her graduation, and this move, that it came to our attention that Ellen was abusing drugs again. Her roommate found a ‘tik’ pipe in her bedroom.

This was so frustrating and disappointing. I began to feel like we would not be able to help Ellen make the transition from prison. This led me to examine my reasons
for doing this work and particularly, my own lack of power, adequacy and expertise to aid someone in their recovery. As a devoted Christian I do realise my mortality and the limitations of my power, but my naivety in believing that a person’s deepest needs could be straightforwardly met through enough love, grace, care, safety and plentiful prayer was being seriously challenged.

I began to realise, through reading and my studies, that the trauma experienced by some people in childhood leaves a lasting imprint on the brain; and especially the amygdala, the emotional brain. The amygdala stores emotional memories and alerts the neurochemical system of life-threatening emergencies (Kornfeld, 2006). Nonattachment and neglect have long lasting effects that result in the formation of primitive defences that seem to be hardwired into the brain (Kornfeld, 2006).

I also wondered if Ellen did not experience an unconscious anxiety regarding the actual reality of her imminent success. The anxiety of actually relating as a person of success was so foreign to her that she used the primitive defence of withdrawal (drugs) to escape. As I began to investigate the theory more thoroughly however, I began to get more clarity regarding Ellen and her struggle.

5.8. Therapeutic Failure: an Inability to be Helpful

Bowlby writes that insecurely attached antisocial or borderline personality disordered individuals are inclined to become over involved with authority figures paralleling a long repressive desire for a close relationship with their mother (Holmes, 1993). Bowlby further states that if the individual feels that the desired object is unobtainable they are overcome with feelings of deep emptiness. Substance abuse can be one way that the individual protects him or herself from these intolerable feelings of emptiness. This certainly seems true of Ellen and helped me to understand her
behaviour but it failed to provide me with sufficient guidance on how to respond to her constructively.

McWilliams (1994) records that primitive envy is often demonstrated by the wish to destroy that which one most desires. McWilliams (1994) further explicates that in some cases an antisocial person recognises the emotional investment of someone else in their life and will deliberately sabotage their efforts to prove to the other person that he/she is not omnipotent. This could be true of Ellen. When Ellen came to live at the house, Ellen expressed a few desires. She wanted to be reunited with her father and be a respected part of his and her stepmother’s family and life. She wanted to make them proud by working hard and passing her exams and she wanted to be a good mother to her small daughter. Ellen passed and received the prize for the most diligent and tenacious student in a class of 45 students. This was quite remarkable for an ex-offender whose last 11 years were spent living on drugs and entering and re-entering prison. Ellen reunited with her father, he attended her graduation and she was overjoyed. All of us at the organisation were totally ecstatic that Ellen had managed to do so well. We threw her a party to celebrate.

Unfortunately, as expressed already, very soon after the reunification with her family and the celebration, she started abusing drugs again. Her goals had been accomplished and yet she jeopardised these and went back to a lifestyle of drugs and living on the street. She even neglected to attend the concert of her little daughter at Christmas time.

At the time I found it difficult to make sense of Ellen’s behaviour and found it even harder to know how to respond to her. I subsequently encountered Melanie Klein’s writing about envy and gratitude and found these helpful in understanding some of the dynamics that seemed to drive Ellen’s behaviour.
5.9. Klein’s concepts of Envy and Gratitude

Klein (1957) writes that the early emotional life of an infant is characterised by a sense of losing and regaining the good object (mother’s breast). Klein (1957) determined that the breast, the good object, formed the core of the ego and is vital to growth. Klein (1957) claimed that the infant concretely internalises the breast and the milk it gives and that the breast is infused with potentials far beyond the nourishment it brings. For the infant, the breast becomes a prototype of maternal goodness, endless patience and generosity, as well as creativeness (Klein, 1957).

Klein (1957) claimed that a certain amount of frustration during the infant feeding stage is normal. Frustration followed by gratification can give the infant the feeling that he/she is able to cope with anxiety. The desires of the infant are essentially incapable of being fulfilled entirely and these unfulfilled desires play an important role in that they contribute to the infant’s sublimations and creative activities. A total absence of such conflict in the infant would deprive the infant of enrichment of personality and ego strength (Klein, 1957).

The first object to be envied is the feeding breast according to Klein (1957). If the infant is inadequately fed, excessive frustration sets in and greed and persecutory anxieties increase. Klein writes that envy is an oral-sadistic and anal-sadistic expression of destructive impulses, operative from the beginning of life (Klein, 1957). Envy can take root in the psyche if the infant is deprived. The breast becomes bad as it keeps the milk, love and care associated with the good breast to itself. The infant begins to hate and envy the grudging breast (Klein, 1957). It is characteristic of envy to rob the object of what it possesses, and spoil it. The breast is attacked and loses its value. It is bitten up. Excessive envy increases the intensity of such attacks and their duration. This makes it more difficult for the infant to regain the lost good object. The
breast that returns, despite attack, can be enjoyed because it is evidently not injured and is still good (Klein, 1957).

The infant who has been securely established with the good object usually finds compensations for loss and deprivation in adult life. If the relationship with the good object is well founded, the fear of losing the mother is less strong and the capacity to share her is greater (Klein, 1957). The infant now has the capacity to work through the depressive position more satisfactorily, and envy does not become excessive (Klein, 1957). If the good object is well established, the identification with it strengthens the capacity for love, constructive impulses, and gratitude. Temporary disturbances are withstood and the foundation for mental health, character formation, and successful ego development is laid down (Klein, 1957).

Envy, as defined by Klein (1957), can be understood as the angry feeling that another person possesses something one desires for oneself. It is the feeling that what one desires is being withheld. The envied person is seen as a reliable source for what is desired but is, at the same time, seen as withholding and keeping for itself that which is desired (Klein, 1957). The working out of envy is very destructive because it mobilises powerful defences of devaluation of the good object, or rigid idealisation of the good object. Envy is much more basic than jealousy and one of the most primitive and fundamental of emotions (Klein, 1957).

Klein (1957) goes on further to explain that gratitude is based in the full gratification of the breast. The infant feels within that they have received an exceptional gift to keep. Gratitude is closely linked with trust in good figures. The more often enjoyment and gratitude are experienced, the more the wish to return pleasure is felt. Gratitude is therefore closely linked to generosity. Strong envy
Klein (1957) writes that some people deal with their incapacity (derived from excessive envy) to possess a good object by idealising it. Idealisation becomes the characteristic of their love relationships and friendships. The envy directed toward the good object extends to its idealised characteristic (Klein, 1957). None can come up to these idealised expectations so these relationships tend to break down. Former idealised persons become the enemy or persecutor. Loved objects are frequently exchanged for others as well. Instability in relationships is the result. The destructive quality of envy interferes with the building up of secure relationships. It also undermines a sense of gratitude and blurs the distinction between good and bad. Character deterioration results (Klein, 1957).

Taking the above theory of Klein into consideration, it is not difficult to understand why Ellen behaves in a manner that continues to destroy her relations with those around her. It would seem that Ellen idealises the caregiver who is seen as a reliable source for what Ellen desires. Ellen’s internalised envy works itself out in a destructive manner in conflicting situations. It seeks to destroy and spoil. Ellen devalues the idealised person (caregiver) when Ellen believes that they are withholding, or giving to someone else, something she desires.

The envy Ellen feels probably took root early in infancy. Ellen does not share much of her infant life. Her story begins with the divorce of her parents at the age of two. She was removed from her mother at the age of five. Her written story illuminates some of the anguish of those days. The following excerpts from her story are in Afrikaans (English translation in brackets).
“Ek was twee jaar oud toe my ma en pa van mekaar skei, toe my mamma en papa besluit om hulle belange voor myne te sit.” (“I was two years old when my mom and dad divorced, when they decided to put their interests above mine.”)

“Ons was arm; daar was nie altyd kos in the huis nie. Ek en my boetie het ons toegemaak met die huis se gordyne om warm to kry, of ons het ons warm geblaas met my ma se haardroër. As die bure ‘n bord kos omstuur het my ma dit gedeel vir my en my boetie. Ek wonder somtyds wat het sy ge-eet? My pa het ons nooit gesien nie. Ek kan nie ‘n Kersfees of verjaarsdag onthou saam met my ma of pa nie.” (“We were poor; there was not always food in the house. My brother and I used to wrap ourselves in the curtains to get warm, or we used my mother’s hair dryer to warm ourselves. When the neighbours sent food to us my mother would share it between my brother and myself. I used to wonder what she ate. I never saw my father. I can’t remember a Christmas or birthday together with my mother or father.”)

Ellen told me during a counselling session that she remembers her mother being naked and that many men visited the house. These were probably reasons why social services removed her and her brother and had them placed in a children’s home.

The above provides some evidence to support the hypothesis that the good object (her mother’s breast) was not consistently present in Ellen’s early life. This has given rise to Ellen’s apparent poor capacity to feel and give love, to curb impulses and to show gratitude. Ellen’s unstable relations and idealised expectation of others fail repeatedly. As Klein (1957) reiterates, the destructive quality of envy interferes
with the building up of secure relationships and also undercuts a sense of gratitude. In
addition to this the difference between good and bad is distorted.

5.10. Reflecting on Ellen’s Journey

It is difficult to make sense of Ellen’s story. At the end of the day it would seem
that we failed in our task to help her make the transition from prison to society, but it
is not easy to understand what we might have done differently. At a theoretical level,
on the continuum of borderline-to-psychotic (McWilliams, 1994), Ellen appeared to
fall into the impulsive and emotionally unstable category displaying
borderline/antisocial characteristics. It is easy to trace this pattern back to her early
experience of inadequate attachment to a good enough mother. While living at the
halfway house Ellen showed remarkable improvement in many areas. She was able to
recognize some of her harmful emotions, like jealousy/envy, and she was able to
show empathy with the very sick people she worked with. While training to be an
auxiliary nurse she asked to work with those who were most ill and about to die. This
was quite revealing to me. She didn’t mind taking the risk of contracting
Tuberculosis, or working with those who were diagnosed with Human
Immunodeficiency Virus. She did not mind cleaning up the mess made by those who
were seriously ill, she seemed to thrive on this. She told me that she sat next to a
person’s bed throughout the night holding their hand and praying as the person
struggled to stay alive. She would tell these very sick people that Jesus loved them.
As much as she did this for the very ill, she would often tell me of how concerned she
was that she did not feel the same empathy towards those she lived with at the
halfway house. They irritated her constantly and she argued with them. Her way of
thinking and her reasoning often lacked empathy and was typically antisocial. An
example of this is when Ellen was bailed out of jail for stealing and for attacking a
Ellen wrote on her Facebook page that she was so grateful to be safe and sound and very thankful to God for delivering her from this ordeal. Her denial of the severity of what she had done was staggering. She had stolen, she had abused drugs, she had assaulted a policeman, and she still had to face the judge on a continuing charge for these misdemeanours for which she could be imprisoned again. She was in no way ‘safe’ and her thinking was certainly not ‘sound’.

Ellen’s behaviour is so contradictory that she does not fit neatly into a DSM category of personality disorder, although clearly there are aspects of her behaviour that might be defined as borderline, antisocial and perhaps even ‘narcotic’. These labels nonetheless have limited utility in the context of trying to understand how to respond to ex-offenders and help them make the transition into life outside of the prison. It is much more helpful, as the narrative presented here shows, to understand some of the intra-psychological dynamics underlying and maintaining this behaviour.

It would be easy to say we failed to help Ellen because she was ‘too damaged’ and that people like her are beyond help. As McWilliams notes (1994) we too often blame the deficient client rather than examine the limited techniques or resources we have in trying to help them. So, in the case of Ellen, I personally feel that we, as an organisation, were limited in helping her efficiently through her abandonment and attachment issues because we could not give her the length of time needed for these to be healed. We were not able to allow her to stay on at the home, we were not able to sacrifice the other people we were working with for her sake, and we did not have enough resources in terms of expertise, finance and personnel. I say this because there is evidence that Ellen’s behaviour improved tremendously during the time she lived at the halfway house despite being quite impossible at times. She had been out of prison for two and a half years, the longest time in 11 years; she had enough self-discipline
for a full year of studying and passing exams; she developed signs of empathy
towards others; and she was able to ask others to forgive her for past failings and
cruelty. Ellen demonstrated remorse when a woman she had bullied and intimidated
in prison came to live at the halfway house. After confessing to me, I arranged that a
session be held, at Ellen’s request, where Ellen asked this young woman to forgive
her for doing what she did to her in prison. It was a very moving experience. Maybe
given more time in the halfway house Ellen would have continued to make these
kinds of advancements. Or perhaps we were too forgiving and tolerant of her
behaviour.

I think it is possible that limitations of knowledge, expertise and resources
together with the sheer enormity of other work that was required of me, resulted in
my failure to detect the more subtle ambiguities that were emerging with Ellen.
Perhaps I focused too much on the positive signs because I wanted (and maybe
needed) to believe we were being successful. In many ways I could have been far
more strict and boundaried in response to Ellen’s manipulations. I did not follow up
on some of my instincts or suspicions and accepted the truth of Ellen’s accounts too
easily. I was possibly too emotionally involved in her recovery to assess situations
accurately. I also expected Ellen to be grateful for the help we had offered her and to
reciprocate with gratitude by becoming a worthy citizen. This was unrealistic
considering the realities of her personality dynamics. But this was a unique encounter
for me and I have learned from the experience.

Conversely, it may not be my or the organisation’s lack that caused Ellen to
regress. McWilliams (1994) cites that there is evidence that after a period of two to
three years of therapy the sociopathic client can enter a serious and often psychotic
depression. The reason for this is believed to be a change in the client’s affections
towards the therapist. The client has been cared for in a way that his/her opinion matters. The client has become accustomed to the relationship and a psychological dependency has developed. The client begins to worry about losing the relationship. Klein writes of the infant going through something similar during the second six months of life where the infant realizes that the mother is a separate person outside the baby’s control and this results in a painful reaction in the infant, giving rise to a move into the depressive position (Klein, 1957).

Following her exams, Ellen knew that she would be leaving the house and entering a new job, taking responsibility for her life and her decisions. The anxiety this caused could have resulted in depression and ultimately regression. This suggests that two years in the halfway house would not be sufficient to help Ellen.

5.11. Discussion: Implications for the Halfway House

The narrative of Ellen’s story, albeit dramatic and extreme, illustrates some of the challenges that we encounter in the halfway house. This narrative and the theory presented above serves to highlight some of the principles that govern how the house is run and how we try to respond to the women who reside in the house.

Bowlby (1988) advocated a number of interrelated tasks and provisos for treatment for those suffering attachment disorder. The first necessity would be a secure base (Bowlby, 1988). The model of relationship the halfway house has sought to embrace is one that displays affection, is consistent and has a reparative connection (Sable, 1997). The halfway house endeavours to be a setting where past and current attachment experiences and difficulties can be explored by the ex-offender in order to reassess and reform these into a more effective model of relating with themselves and others. The need to be aware of how the ex-offender feels, and that any of us could be
unconsciously compelled to repeat retaliatory experiences of intimacy, which the ex-offender has come to expect in all relationships, is a challenge (Holmes, 1993). The way the staff and management within the halfway house respond to the ex-offender can help a process of ‘internalisation’ to take place whereby past disappointments are mended, defences are adapted and a more tolerant view of self is developed (Sable, 1997). Winnicott (1965) called this relationship a ‘relationship of safety’ and compared this relationship to a reliable caregiver and a child. For most women this environment seems to be good enough and the time spent in the house seems to be sufficient to enable corrective emotional experiences and lasting change. But clearly for other women it is not enough.

Ex-offenders suffering with attachment disorders who come to live at the halfway house usually take one of two positions. They either try to attach themself to the house parent, myself or anyone who is an authority figure in a stifling, clinging manner as if they were trying to merge with us; or they resist any emotional involvement as a defence against being re-traumatised. Bowlby warns that oscillation between these two positions is common (Holmes, 1993). Often the ex-offender has expectations both of finding and being rejected by the parent/caregiver they never had and, then project these expectations onto those who care for them in the halfway house setting. Sable (1997) explains that this is because their demands for attention and gratification are unreasonable and caregivers of the past have found it impossible to provide what they need. Unfortunately maladaptive demands alienate these people from those they really need. A major challenge in counselling the ex-offender with these difficulties is to confront them about the way they engage with others in relationship (Bowlby, 1988). Sable (1997) writes that as the therapist uses transference to help the client see how their actions alienate them from others and the
person grows in seeing their actions from the perspective of others, crucial growth in overcoming egocentric thinking can be made. Should the person be enabled to take this vital step in understanding, relationships that are not too close or too distant can be formed (Sable, 1997). We try to facilitate this in the halfway house by enabling the ex-offender to see their behaviour as others see it. This is often achieved within group sessions, and usually after a serious confrontation. Here, through enactment and truthful sharing, from all who are present in the group, conduct is confronted and faced. Often tears flow and forgiveness is asked for actions and words spoken. These sessions do not always resolve all conflict however, but they do open the door to honest and safe communication.

Sable (1997) declares that the process of enabling a person to get perspective of how their behaviour is isolating them in relationship can take a very long time. With a client of his it took nearly 10 years. This is because of the fear of engaging. While they are pleading for attention and clinging on to the relationship, there is a tremendous fear of separation and abandonment that in turn cause feelings of helplessness, anger and anxiety (Sable, 1997). At the halfway house we have found that all these tensions need to be held and the focus must be on building a trusting relationship over time. The process cannot be rushed and some women seem to need more time than others to achieve this. Once the ex-offender feels safe enough to share deep emotions and feelings, change is foreseeable (Sable, 1997).

Another key element in helping therapeutically would be to look for and be aware of changes in the ex-offender. Any small sign of self or other awareness, or outside interest or hobby, are indications that they are beginning to feel more secure (Holmes, 1993). For many ex-offenders nursing unveils displays of empathy and care for others. Many who have come to live at the halfway house have entered the caring
and nursing profession and great improvements are noticed within a short period of time in areas of empathy and understanding the pain of others.

At the halfway house it is helpful to analyse the ex-offenders earliest relations and thereafter explore the person’s later ones. This is often done through narrative therapy where the ex-offender is encouraged to write their life story. This process can help to gain a fuller understanding of the dynamics involved in the ex-offender’s personality. Many ex-offenders have deep and conflicting feelings of love and hate – they will often share that they both love and hate certain significant others. In order to achieve a more integrated sense of self, the ex-offender needs to begin to integrate these fragmented perceptions. Klein (1957) writes that in order to help a person confront these deep conflicts is the most effective way to gain a more integrated sense of self. Klein (1957) writes that by means of transference, a more secure good object and a love for the good object can be gained. She warns of great resistance. The more complex the difficulties, the more resistance will be experienced.

Klein (1957) further explicates that this type of analysis is not for the faint hearted, as hostile feelings will be transferred onto the therapist. As the relationship with the therapist deepens, the person can begin to experience the therapist in the same way as significant others of the past. They begin to respond to the therapist in a negative way. Transference is used unconsciously as a way to transfer their negative attitudes, feelings and desires onto the therapist. Klein (1957) emphasises however, that perseverance, and working through transference, will help the person interject the therapist as a good object, providing an internal good object where one has been largely lacking (Klein, 1957). This is certainly my experience of working in the halfway house and I have found it difficult not to get caught in these enactments, but to respond consistently with kindness and understanding rather than punishment and
hostility. There is thus a great need to be aware of counter transference complications. I have found regular supervision absolutely vital in this regard.

Working in the realm of the halfway house has taught me many truths. An essential truth that is important to note is that people of this category can be helped, despite the difficulties. Many have launched themselves towards a more fruitful way of life. Consistent, affectionate and restorative connections with other people have provided the ex-offender with the tools for recovery. The environment of the halfway house accommodates and gives space for the ex-offender’s fluctuating anger, anxiety and panic as an imperfect but adequate holding environment. Many were able to grow and develop emotionally to the degree that they began to recognise that their actions were alienating them from those they really need. Many women, through study, have enhanced their self-esteem.

What I have learned most importantly, and the emphasis of this chapter, is that people who have experienced extreme abandonment and were not attached adequately to a good object early in life, are more likely to suffer mental health problems together with deficiencies in character. That most imprisoned people are classified antisocial indicates that many do have mental health problems. There is a link between abandonment and damaged attachment to the development of antisocial personality disorder and/or other personality disorders. Being aware that most imprisoned people suffer with these tendencies is realistic when preparing to work in this realm. That one is prepared and is adequately equipped with the knowledge of what one may encounter in this work is imperative if one is to have any measure of success.

Another lesson I learned is that helping people of this category takes an extreme amount of time, energy and perseverance. That individuals with antisocial personality
traits are difficult to work with and will, through projective identification, unconsciously transfer their negative attitudes, feelings and desires onto you as the therapist, counsellor or caregiver is inevitable and should be considered before engaging in this type of work.

I finally add that it is important to acknowledge that people showing antisocial disorder traits impact primarily negatively on those who live in close proximity. Effectual management of house parents and other residents is essential for success. Individuals with antisocial personality structures do not like or respect boundaries and will violate these constantly. Secure management of those who are responsible for the welfare of the home is therefore important. Regular supervision and debriefing of staff must take place in order to maintain the healthy functioning of the environment.

5.12. Conclusion

Reflecting on the progress Ellen made in many areas is encouraging. That she did not completely integrate into society as a fully functioning and participatory citizen is probably due to many of the complexities of her life that have already been mentioned in this chapter, together with limitations of resources to aid her restoration/recovery. What Ellen gained can never be taken from her though and perhaps she needed more time and more individual attention; time and input which we did not have the resources to give her. After her return to prison I received a letter from her in which she writes:

“Stephanie ek is jammer omdat ek weer op die verkeerde pad verdwaal geraak het . . . asseblief vergewe my en moet my asseblief nie eenkant stoot nie, maar bly asseblief deel van my lewe. Ek is baie, baie lief vir julle en julle is al opregte familie wat ek het en ken.” ("Stephanie,
I am sorry that I got lost on the wrong road . . . please forgive me and please do not push me to one side but stay part of my life. I love you very, very much, you are the only real family I have and know.

Perhaps, in years to come, these good and lasting experiences will come to fruition in her life, but for now she is back in prison.
CHAPTER 6

THE EX-OFFENDER AS PARENT

6.1. Introduction

As established earlier, the halfway house can be understood to be a ‘holding environment’ for women who have essentially come from communities that have dropped or rejected them. The halfway house seeks explicitly to provide the women with the support and containment they need to pursue what Van Buskirk & McGrath (1999) have called a ‘changed life’. Providing this support entails helping the women to re-integrate into society and re-establish relationships with their families. Many of the women entering the halfway facility are mothers themselves who unfortunately have often perpetuated their own story of dysfunction in the lives of their children.

The reality is that most women in prison worldwide are mothers. In the São Paulo prison in Brazil 87% of women offenders are mothers, in the USA 80 % of all women offenders are mothers, in UK prisons 66 % are mothers, while 70% of women imprisoned in SA are mothers (Luyt, 2008). My experience of women in prison concurs with Covington (2001) who cites that concern for the well-being of their children, and the resulting separation from them, is the most damaging effect of being incarcerated. Ultimately, the major consideration for many mothers in prison is to reunite with their children once released and sometimes a woman’s only source of hope and motivation to change is her children (Covington, 2001). Women suffer much guilt regarding their children. Wanting to take responsibility for one’s children once leaving prison is therefore a very healthy indication that needs to be nurtured and enabled.
Reunification is very important for both mother and child. The longing for a parent’s care and love is very deep and perpetual in a child’s life. One woman, who was fostered as a child and had spent time in prison, told me of how she longed for a connection with her real mother. When she did eventually meet with her real mother the experience was disappointing as her real mother was a psychologically dysfunctional individual. She acknowledges that her foster mother has been a better mother to her but she says that the yearning for a deeper connection with her own mother has never left her.

My experience of women offenders has been that many are estranged from their children long before they are incarcerated. Lifestyles of criminal activity, drug addiction and prostitution often are the reasons for the alienation. Family members and others are usually caring for the children. Some women have several children and different men have often fathered these children. Most have never been married to the father of their children and they have no, or irregular, contact with the fathers of their children. The fathers therefore have minimal or no involvement in the children’s lives and few pay maintenance. Incarceration further alienates women from their children and this forced separation often results in added estrangement between parent and child. All of these factors present particular challenges for re-establishing contact and enabling a functional relationship between the women at the halfway house and their children.

In this chapter I narrate the story of how an ex-offender mother, who is also a drug addict, went through the process of reclaiming the responsibility of taking care of her children while staying at the halfway house. I describe some of the challenges and painful responses she had to endure in order to regain trust and build a relationship with her children, and her family. I expound on the difficulties she faces
while trying to parent her children from whom she has been alienated for many years. The chapter attempts to explore a more complete picture of the problems faced by the ex-offender, drug addict parent who tries to essentially do the ‘right thing’ with very limited emotional, parental and financial resources. The chapter further endeavours to justify why training and mentoring in parental skills is an essential component of successful rehabilitation for women ex-offenders who are mothers.

6.2. Incarcerated Women as Estranged Mothers

Incarceration often forces women offenders who have children to abdicate their parental responsibilities. The responsibility of parenting thus falls on grandparents, other family members or friends. Research conducted in a Gauteng Prison in SA showed that 37% of children of those incarcerated were cared for by grandparents, 28% by other family members, 22% were in other care arrangements or foster care, and the least likely person to be involved with the care of the women’s children were their male partners (Vetten, 2008). Furthermore, being imprisoned alienates mothers from their children. The Gauteng prison study further found that: one in three mothers in prison had not seen their children since their imprisonment; one in 10 had seen their children less than once a year; 8% had seen their children twice a year; 16% saw their children every two to three months; and only one in 10 mothers had weekly contact with their children (Vetten, 2008). Visiting conditions at prisons are not conducive to mother-child bonding either and with a maximum of only 45 hours per year being allocated to mother–child visitations, the likelihood of sustaining a close relationship with all one’s children proved improbable (Vetten, 2008). Clark (1995) notes that the quality of the relationship between mother and child severely affects the well-being of children and that this relationship is impeded by the mother’s criminal activity.
Meagre attention has been given to the impact of imprisonment on children whose mothers are in SA correctional institutions; there has been little investigation into the impact of children separated from their mothers through imprisonment (Luyt, 2008). Clark (1995) highlights the concern that few are asking what happens to the children of incarcerated mothers. It is possible that these children are unseen victims who are socially stigmatised and economically marginalised by their mother’s incarceration. This is an area in need of further research in SA.

Luyt (2008) contends that children separated from their mothers could be deeply and enduringly impaired in the area of mental and behavioural development. It has been established that children need the affirmation of a loving parent or caregiver in an environment that both stimulates and provides opportunity for the development of good mental health and positive evolving of character (Bowlby, 1964).

The child that is separated from his/her mother because of imprisonment can suffer a similar feeling to that of bereavement, writes Luyt (2008). Having a parent in prison has an added stigma attached. Often the children of imprisoned mothers are housed with family members, foster parents or are placed in children’s homes while their parent are prison (Luyt, 2008). These households or institutions may not provide the necessary and appropriate understanding and support the child needs. These children can begin to exhibit aggressive and antisocial behaviour together with presentations of psychosocial difficulties such as hyperactivity, depression, truancy, poor school performance and delinquency (Luyt, 2008). Clark (1995) writes that this could result in their becoming the next generation of offenders.

Attempting to bring children to visit their mother in prisons in SA is fraught with difficulties. Luyt’s (2008) research found that visiting the prison was a very stressful experience for both the children and the mother. Many travel long distances
to come and visit; the children will face grey and depressing buildings where a stranger will search them. A major difficulty children face when deprived of their mother is the absence of physical contact that this brings. Heartbreakingly, many children who visit their mothers in prison will not even be able to touch, sit on the lap of, or be held by their mother (Luyt, 2008).

In my personal experience of a SA prison I have seen that some of this is true. Very often the visitor queues are long. Visits should last 40 minutes but because most visits take place on the weekend when the prison is half-staffed, these visits can be cut short to accommodate more people. The atmosphere once entering the prison is not friendly. There is often not enough space to accommodate the offenders and their visitors. In inclement weather visitation can only take place inside and not in the open courtyard. On one occasion when I visited with an offender we had to sit in a small corridor lined by three benches. Each bench accommodated an offender and their visitors. There was not even a gap of two meters between the benches. Privacy is non-existent and I remember the offender I was visiting covering her face and turning her back away to hide her tears as she spoke with me. She whispered in an attempt to prevent others hearing what she was saying. I noticed that the family opposite was also struggling. They had no privacy and were having great difficulty containing the small child that was with them. Their stress was considerable. Conversely private prisons in SA provide ample time for visitation but privilege is not available to women as private prisons in SA are for men only (Luyt, 2008).

The problem is not unique to SA as Poehlmann, Dallaire, Loper, and Shear (2010) found that conditions surrounding visitation in prisons in the USA correlate strongly with conditions in SA prisons. The Luyt (2008) research highlights that the stress experienced by both mother and child relating to visits result in many mothers
preferring their children not visit them in prison or children choosing not to visit their parent. The USA Poehlmann et al. (2010) research and the Luyt (2008) research correspondingly indicate that a major reason why their children do not visit is that it is too expensive for family or friends to bring them. The Poehlmann et al. (2010) research further established that lack of contact between mother and child can have damaging effects of increased alienation and could result in the child having negative feelings toward their mother. The Luyt (2008) survey of SA prison visitation conditions reveals that 95.52% of mothers in prison did not receive visits from their children at all. The survey also found that 73.13% of women in prison felt guilty about their children and felt that it was an added punishment that they were not able to look after their children, while 76.12% felt they had failed as a parent (Luyt, 2008).

The need for alternative sentencing has been highlighted as a necessity in SA by authors such as Van der Westhuizen & Lombard (2005). These arguments for alternative sentencing are particularly apt for women since incarceration has such a damaging impact on their ability to perform their role as mothers which results in social costs in the light of caring and nurturing their children and thereby contributing to a healthier society (Luyt, 2008). As discussed in chapter two, Van der Westhuizen and Lombard (2005) have proposed a number of alternative models of sentencing. The arguments for alternative sentencing of women criminals in SA rests on the fact that women are not as dangerous as men, and are either the sole or the primary caregivers of their children (Luyt, 2008). It is further argued that prisons fail to help women prisoners because they cannot provide the support women need to be rehabilitated. In support of this argument, Clark (1995) demonstrated that the ‘rehabilitation’ programmes women attend at the Bedford Hill Prison in New York had no discernable positive affects. This is a phenomenon that I have observed as
well. I have taught life skills programmes at a SA prison that I have engaged with for seven years. There are various programmes women can attend and many they have to attend as per instruction of the court before they can qualify for parole. Women attend substance abuse programmes; physical and sexual abuse programmes, violent crime programmes, fraud and money addiction programmes and several other programmes. Although they share deeply and openly of their problems within these group sessions, it seems this learning is discarded once they leave the group, or the prison, and they revert back to their old self-defeating habits. As Clark (1995) points out, many recidivists seem to be on ‘automatic pilot’; they attend their programmes, share their problems but it seems that none of this changes their life or behaviour permanently.

Vetten (2008) confirms the above and states that SA women in prison are on the losing end of corrections, this marginalised small group of women being neglected and offered fewer opportunities than that of men in SA prisons. Besides attending the group programmes referred to above, SA women in prison have usually one of three options: they either work in the laundry, the hair salon or in textiles where they learn to sew garments, reinforcing gender norms (Vetten, 2008). Men in SA prisons on the other hand are offered furniture making, timber, textile and steel enterprises. Women are offered fewer work, education and skill development opportunities (Vetten, 2008).

Correctional services will need to address this problem with deep insight into what women really need and what will enable change in their lives. From my point of view I have found that facilitating change in a person’s life is not as simple as enforcing attendance of programmes. Programmes that induce deep emotional self-reflection and a corrective emotional experience, as Clark (1995) advocates, are far better options and can affect lasting and enduring change in the lives of women in prison. To encourage such growth in women offenders requires a great deal of self-
reflection on the part of the prisoner, and is hard work for them and those who work with them (Clark, 1995). Any programme will be unsuccessful if the environment mimics the behaviour of the dysfunctional type of background women originate from (Covington, 2001). Unfortunately most prisons mirror an authoritarian, non-participatory, dictatorial approach to the delivery of programmes that are often content based. As Covington (2001) points out, developing a therapeutic community forum within prison where there is safety with oneself and others is paramount for real change; this goes well beyond what can be achieved by instructional programmes or psycho-education.

Clark (1995) argues that women in prison need programmes that practically enable consistent contact with their children in addition to interventions that help them to understand the social and psychological reasons that put them in prison. Clark (1995) emphasises the importance of children hearing the truth of their imprisoned mother’s life. Children have a host of questions and feelings about the crimes their mothers have committed and they need to resolve these. Mothers often feel unable and ill equipped to speak to their children of this and the circumstances surrounding the crimes they have committed (Clark, 1995). Part of rehabilitation should thus include developing the ability to speak honestly and openly with others (including one’s child) about oneself. Luyt (2008) echoes this idea by proposing that correctional services need to plan and render better and more comprehensive services to women in prison who have children.

I have noticed that one of the first indicators of change in an offender’s life is the rebirth of conscience and its accompanying guilt. This is very noticeable where the ex-offenders children are concerned. The women begin to develop a deep realisation of the effect their behaviour has had on their children and start to
experience profound regret for the way the children have had to suffer for their wrongdoing. They begin to have a desire to be a good parent to their children. Furthermore, I have observed the sad reality the ex-offender experiences as they are expected to take up the role of parenting once they leave prison, a role for which they have not been adequately prepared. Having left their children to be parented by others and having not been properly parented themselves, these women face huge challenges once they are released and are expected to take up this role. As a result of these inadequacies the staff of the halfway house is faced with a host of challenges once an offender, who is also a mother, comes to stay. The organisation has made the re-uniting and bonding of children to their mothers a priority. To this end, women are explicitly provided with resources, training and coaching in parenting skills to empower them to assume their parenting role. Inevitably this also entails helping the mother to reflect on the way she was parented and how she might unwittingly be recreating early dysfunctional patterns with her children.

6.3. Factors that Impede the Ex-offender’s Ability to be a ‘good enough’ Mother

There are a number of contextual factors that hamper an ex-offender’s ability to establish a healthy relationship with her child once released from prison. These factors include the mother’s own history of being inadequately parented, her substance abuse and poor mental health status, and the absence of fathers. These factors need to be adequately addressed as a prerequisite to enabling the ex-offender to effectively assume the role of mother.

As documented in chapter two, many ex-offenders have a history of childhood abuse (physical, sexual or emotional), parental neglect and abandonment (Clark, 1995; Maschi et al., 2008). Consequently many ex-offenders lack a sound internal working model of healthy parent-child attachment. They thus unconsciously get
drawn into recreating patterns of relating which mimic their own dysfunctional childhoods and attachment styles (Bowlby, 1973).

Etherington (2007) notes that the female ex-offender is further impeded in taking up her role as parent by the widely held belief that children are the exclusive responsibility of the mother. This cultural norm ignores the emotional, psychological and physical connection children should have with their fathers. It also exempts fathers from taking responsibility for their children. My unfortunate experience is that most female ex-offenders have to assume responsibility for their children without the support of the children’s father because he is either completely absent, is engaged in criminal activity and is himself in prison, or has substance abuse issues which make him an unreliable parent.

As noted in chapter two, many ex-offenders have a poor mental health status (Brewer-Smyth, 2004; Haffejee et al., 2006) and suffer from substance abuse problems (Cauffman, 2008), sometimes as a result of their traumatic past (Camp & Finkelstein, 1997; Marcenko, Kemp, & Larsen, 2000). Substance abuse has a profound effect on a mother’s ability to take care of her children for a number of reasons. Not only does substance abuse hamper a mother’s ability to bond with and take care of her children but research has also shown that community and/or family members are disinclined to offer financial or practical support to the addict-mother because they judge her and do not want to collude with her behaviour (Etherington, 2007). Mothers who abuse substances also frequently lack emotional stability that impedes their ability to offer their children emotional security or ensure their physical safety (Silva, Pires, Guerreiro, & Cardoso, 2013). Camp & Finkelstein (1997) note that as a consequence of this children whose parents have chemical dependency problems are at increased risk of some form of physical and emotional abuse.
Furthermore the mother’s substance abuse puts an added strain on the family’s financial resources. The problem is compounded by the fact that many of these children are difficult to parent because they exhibit emotional and behavioural problems as a result of their ‘in utero’ exposure to drugs (Camp & Finkelstein, 1997; Silva et al., 2013).

Although substance abuse can severely hamper a mother’s ability to be an effective parent, there is evidence to show that these mothers care deeply about their children and place a very high value on their parenting role (Marcenko et al., 2000). This research found that attachment between the mother and child is often very strong and that, in opposition to the common belief, women addicts have the capacity to be good parents. Mothers in this category were found to feel guilty when they did not meet their expectations or parental roles, and were often filled with hope for a better future for their children (Silva et al., 2013). The research additionally showed that women were motivated to adapting their lifestyle appropriately in order not to lose custody of their children. Furthermore, the research revealed that women addicts mourned the loss of their children into placement, but they expressed that although it was difficult for them to have their children placed they accepted that it was better for the children (Marcenko et al., 2000). These women acknowledged with sadness and regret that they could not provide for their children adequately while being addicted to drugs. The motivation for being rehabilitated was often driven by the fact that they wanted their children back with them (Marcenko et al., 2000). I have found that women in the prison context express very similar sentiments to the above. They often have no choice but to have their children placed with others when they are incarcerated but they mourn deeply the separation and loss. Teaching parenting skills in prison has enabled me to see the tears of mothers who are heart sore regarding their
children. Their children remain the motivation for rehabilitation.

As is self-evident in the above discussion, it becomes imperative to address the ex-offenders substance abuse. This is however complex since substance abuse problems have a notoriously poor prognosis and are resistant to treatment (Sadock & Sadock, 2003). There are many reasons why substance abuse is difficult to treat among ex-offenders, including the fact that (as noted in chapter two) many ex-offenders have a chronic history of poly-substance abuse which dates back to adolescence, and their pattern of use has often been exacerbated by their stay in prison. Furthermore, in addition to the chemical dependence that has been established, many ex-offenders are psychologically dependant on substances as a way of dealing with psychological distress, painful feelings (such as hurt, guilt and sadness), medicating their symptoms of trauma, and as a means to compensate for poor self-esteem (Camp & Finkelstein, 1997).

Many of the dynamics described above are clearly apparent in the narrative of Mary, presented below. This case is described in detail as an illustration of the challenges the ex-offender mother faces on being reunited with her children. The case also provides an example of the role of the halfway house in facilitating this process. While Mary’s narrative is unique it does serve to highlight common features that I have observed with many of the other mothers who have lived with us in the halfway house.

6.4. Narrative: the Story of Mary

Mary spent 13 years in and out of prison for drug related crime. She has three children, all of whom were fathered by different men whom Mary no longer has contact with. At the time of being released from prison the children were separated
from each other, living in different communities and being taken care of by different people. Mary came out of prison having made a spiritual commitment to change her life. The halfway house offered Mary a safe place to live and provided the finance for a course that could help her secure meaningful lawful employment. Her priority, she told us, was to repair the damage she had done to her children and to earn enough so as to have them come and stay with her permanently.

Upon leaving prison Mary re-established contact with the people that were caring for her children. She felt pressured to provide for her children once she ascertained the circumstances under which they were living. Her youngest son, Tim (four years of age), was living with a drug merchant. Mary had dealings with the drug merchant friend before she went to prison and had participated in the lifestyle perpetrated by the drug merchant before she was incarcerated. Mary’s problem concerned her parole conditions. Being released from prison under parole constitutes 24-hour house arrest stipulations. This means that her parole officer must know where she is 24 hours of a day. The parole conditions for those who are incarcerated for drug related crime prohibit the parolee from being in contact with, or near drug merchants; the conditions furthermore forbid the entering of a ‘shabeen’ (a township pub), a liquor store or a tavern.

Despite Mary explaining these prohibitions to her friend, her friend did not understand the requisites and was subsequently angry that she did not visit her or her son. Mary found herself in a dilemma, as she desperately wanted to visit Tim. The parole officers did not understand her position either.

Adding to Mary’s problems was her concern for her older son, Ben, who lived with her brother. Ben had told her that he was being bullied at school and, at the vulnerable age of 14, she feared he would enter the drug scene – as she did at that age
and for similar reasons. Her daughter of 11 years, Lisa, stayed with her niece and
Mary did not have too much concern about her as she was very happy living there.

Mary had experienced much trauma in her life. Her boyfriend raped her at the
age of 13. She laid a charge against him but withdrew this when the family of her
boyfriend pressurised her to. They did not want her boyfriend to go to prison, as he
was the main breadwinner in their family. He was much older than her – although she
doesn’t know his age – she thinks he was at least 20 years old. She experienced more
trauma after this incident when she entered high school for the first time. Mary had
dressed with a t-shirt under her white shirt for school that was not regulatory. Her
class teacher stripped her of the t-shirt in front of the entire class, including the boys.
Mary never returned to school after this. She told me that her mother went to the
school principal to complain of the treatment after she was persuaded by a friend to
tell her mother of the incident. The principal said he would talk to her teacher but the
teacher denied the whole story. Mary decided not to go back to school and her family
accepted this.

Mary told me she had always felt very stupid. This was another reason why she
dropped out of school. Mary subsequently became heavily involved in drugs. In her
years in prison she had access to all the drugs she needed. She smoked
methamphetamines (tik), mandrax and dagga.

The story of Mary highlights problems that would need to be addressed if she
was to be helped effectively. The first was her concern for her children and the need
she had to re-establish a relationship with them, plus the need to improve her
parenting skills. The second was the need to deal with past psychological wounds of
abuse, the guilt she felt for abandoning her children, and self-esteem issues. Finally,
Mary would need to be enabled to change her associations and friendships. She would
need to do as much as she could to re-connect with her family if she was to walk free of a life of substance abuse and crime.

Mary’s mind was constantly preoccupied with concerns for her children and the need to do something. We understood this need at the halfway house and took seriously our commitment to help mothers re-engage with their children. In discussion with Mary we jointly decided that this process should begin with her youngest son, Tim, who was living with the drug merchant. I felt very anxious about Tim’s safety but Mary seemed to have little comprehension of the type of danger she had allowed her child to live under. After some persuasion we visited the Social Services in the district Tim was living in an attempt to get this little boy moved to a safer place. Social services responded immediately and did not hesitate to insist that this young child be removed from the care of the drug merchant. They offered one of two solutions. Either a family member or a friend that Mary trusted should take him away from the drug merchant within the next few days, or they would forcibly remove him and place him in a foster care home. Social Services were very insistent because, as they explained, they experience too many very young children being severely hurt and even killed in situations like these. Mary was visibly angry. She could not perceive that her son was in danger. She tried to convince Social Services that Tim was perfectly safe. She did not want to remove him immediately. She told Social Services that she would do this when she was ready. Mary told me she was afraid of what the woman drug merchant might do should she know that Mary had involved Social Services. She also made it clear that she had no faith in Social Services.

The story of Mary highlights her suspicious view of Social Services and therefore her reason for not having her child placed under their care. She believed that once a child was in the system, one could not get them back. She did not trust the
system. It was strange that she could trust a drug merchant and not Social Services. I have found that many marginalised people have a suspicious view of governmental institutions and see them in a negative light and unhelpful towards them. Being incarcerated does not improve this image. Many who have been incarcerated take a view of ‘it’s them against us’ with government establishments. Part of helping Mary was assisting her to trust the judgement and motives of Social Services.

Social Services were very firm and insisted that Tim be moved immediately. Realizing this, Mary responded that she did have someone more reliable who could take care of Tim. The person, Vee, had promised Mary a place to stay when she had completed her training and secured employment.

Social Services insisted that she contact Vee that very day and persuade her to come to a meeting the following day so that action could be taken. Social Services also asked her to invite a family member that could be involved in the transition. Mary was doubtful that Vee would be able to come to Social Services the next day as Vee ran a care centre for children in the neighbourhood where she lived. Mary did not like the pressure but she realised that she did not have a choice. She got up, asked if we had finished, and getting affirmation, she marched out of the room leaving myself and my colleague with Social Services. Social Services responded by conveying that they were not concerned about her anger, what they were concerned about was the safety of her child. Their opinion was that too often mothers of children in these circumstances trust people they should never trust. Vee did agree to come the next day after Mary contacted her. Mary, however, did not make any contact with her extended family.

In that same week Ben, Mary’s son of fourteen, was kicked out of her brother’s home for apparent insolence. Mary went to visit Ben and photographed the marks on
his body where her brother had allegedly assaulted him. She immediately reported this to Social Services. The social worker suggested a family conference and undertook to contact the family and Mary was tasked with contacting the Principal of Ben’s school to arrange for the school social worker to assess his situation and problems at the school.

Mary’s two sisters, together with her son Ben, came to the family session, but not her brother. The family situation was not good. In the discussion members expressed their frustration with Mary over the years. One sister expressed that they were extremely fed up with Mary because she had never cared for, taken responsibility for, or looked after her children since their birth. Ben remained silent, tears running down his face.

We talked about the importance of family and although Social Services had found a place for Ben to stay in the interim, it was not a permanent solution for Ben. Mary had just finished her training and been offered work. I explained to the family that although Mary wanted Ben back with her permanently, it was not going to be easy for her or him, as she has never cared for him before. In order for Mary to fulfil her dream of having her children with her permanently she needed to acquire parenting and conflict resolution skills. She needed to implement a suitable disciplinary system that would assist them as a family to effectively live together in as much harmony as possible. Ben was already showing signs of impudence, and being harshly treated by Mary’s brother had ostensibly harmed him.

The social worker said he would enrol Ben in a programme that Social Services provided for boys who were vulnerable and at risk of becoming involved with drugs, gangs and crime. Even though Ben was not involved in drugs, gangs or crime at the time, it was important that everything be done to prevent this from happening in the
future. I explained to the family that Mary had progressed very well during the last six months and she was trying to put her life together but this was going to take time. I explained how much she needed her family to appreciate her progress and understand her difficulties. She needed her family to support her and encourage her and to be proud of her, as, in our eyes, she had done exceptionally well.

The family were reluctant to give Mary any credit for her accomplishments over the past months. This was understandable; as Mary had over years destroyed any confidence they had in her. They were also reluctant to commit to having Ben at their respective homes, even over weekends, despite the social worker’s attempts to encourage their commitment to Ben. This was very difficult for me to understand, as this young boy was not responsible for being in the situation he was in. I had expected that the wider family would realise that. We (the halfway house) committed to having Ben at least once a month so as to facilitate a relationship with his mother. Ben would be sponsored to attend the winter camp run by the local church in the area where the halfway house is located over the midyear winter holiday period.

Mary needed to be trained in parental skills. The organisation has developed a parenting programme and this is taught at the halfway facility as well as in prison. The focus of this psycho-educational programme is to empower parents by providing them with knowledge about children’s developmental needs. The emphasis is on providing information and skills needed by mothers to build relationships with their children and provide emotional security. Basic tasks such as spending time with one’s children and paying attention to them and learning to listen are stressed. The importance of routines, boundaries and limits are also discussed and the mothers are taught strategies for enforcing these without resorting to harsh punishment.

Results from parenting studies conducted by Camp and Finkelstein (1997)
established that training offered to women substance abusers in effective parenting significantly improved parenting skills and the mother’s self-esteem and sense of competence. The research found that many parents did not understand the sequential stages of child development and therefore had inappropriate expectations of their children. This bred an inability to understand the child’s feelings and state of mind that, in turn, increased the propensity for child maltreatment (Camp & Finkelstein, 1997). Defective parenting styles showed in many cases that role reversal was common between the mother and child too. Mothers often expected the child to fulfil their needs for comfort and emotional care instead of the other way around (Camp & Finkelstein, 1997). It was also found that most of the parents in the drug rehabilitation centre practise corporal punishment as a standard and normal way of discipline; many women felt that their children needed to be shown who was in charge (Camp & Finkelstein, 1997; Silva et al., 2013). The Marcenko et al. (2000) study verifies that women substance abusers use more threatening and authoritarian discipline measures with their children.

My experience of teaching in prison and at the halfway house has ascertained that most women offenders were either brought up being regularly beaten, often quite brutally, or they were brought up in an atmosphere of overall neglect. When questioned as to whether they thought their parents/ grandparents/ family were correct in metering out such severe punishment the primary response was that they had deserved to be beaten as they were naughty or bad. Enquiring whether they disciplined their children in the same manner the answer was mostly affirmative. Changing the concept of corporal punishment as a suitable way of discipline and introducing other more effective and constructive ways of disciplining has always been the greatest challenge in teaching parenting skills in prison and at the halfway
The results of the Camp and Finkelstein (1997) research showed that 81-100% of the women felt they had benefitted from the parenting programme and were doing better at parenting. Many had learned skills of anger management in order to avoid beating their children when frustrated or angry. Many women said their competency and self-esteem had grown as they began to recognise their strengths and weaknesses and become, not perfect mothers, but good mothers (Camp & Finkelstein, 1997). Marcenko et al. (2000) in their research of drug addicts and parental training recommend that assessment associated with services to families should carefully formulate appropriate programmes such as family therapy, parental training and psychological health treatment in community. Trying to get access to community parenting courses or free guidance for parents in SA is problematic. People like Mary would benefit exceedingly should they be able to confer with services that exclusively deal with parenting matters when they encounter problems with a child. Essentially mentoring programmes for parents, especially those who take on the task of ‘first time’ parenting, as Mary has, are needed in SA. In the future Mary is going to need immediate access to assistance, as she requires it. She is a ‘new’ parent and the lack of attachment to her children from birth has left her with significant parenting challenges. My experiences support the recommendation of Marcenko et al. (2000) that better resources and training be made available freely to men and women in communities as well as prisons and drug rehabilitation centres. This will significantly enable better parenting and prevent children from following the same path as their parents.

It is my experience that underlying the façade of bravado and grandiosity of many women in prison, are feelings of deep anger and hurt against parents and those
in authority for having mistreated, abused and neglected them. For me the challenge has always been to break through this façade and help the offender to honestly acknowledge and deal with these emotions. Clark (1995) states that a mother can hardly be expected to parent her child appropriately when she herself is defensive about her own ambivalence towards authority and is struggling to ‘find herself’, handle the rules of society and implement limits in her own life. It cannot be expected that mothers keep their children in line when they are struggling, and have often failed, to keep themselves in line (Clark, 1995). Bowlby (1973) professed that unprocessed childhood trauma, when carried into adulthood, can disrupt a person’s ability to form secure attachments, even with his or her own children.

With the above in mind, I understood that it was important for Mary that she process deeper matters of trauma, especially that she had experienced both sexual and physical abuse in her life. I wanted to help her see the relationship between her own childhood experiences, the abuse she suffered during adolescence, her subsequent substance abuse and her perpetual criminal activity. I believed it would be helpful for her to understand how all of these factors also exerted an influence on the way she responded to her children. This, however, did not prove to be a very easy task. The work was slow and difficult. It took time for Mary to develop a relationship of trust with me so that she could begin to talk about these experiences. It seemed as if she first had to release the emotions that were associated with these experiences before she could begin to make intellectual connections between these events and her behaviour.

I have frequently observed that the ex-offender, who has been a drug abuser, and who has ‘abandoned’ their children, usually carries a host of painful memories and difficult emotions. These emotions include guilt and grief especially as the ex-
offender becomes more conscious of what impact their behaviour has had on their children and what they have lost (Silva et al., 2013). As Clark (1995) explains, the grief they feel regarding their children is intensified by all the other losses in prison. Grief easily gives way to deep sadness and depression. The awful sense of having ‘messed up’ can prevent women seeking constructive ways to better themselves and thereby their children’s circumstances (Clark, 1995). Unfortunately many ex-offenders have to carry and process these feelings alone because (as noted in chapter two) they are estranged from their families and communities. This was certainly true of Mary.

As I learnt more about Mary’s background and her feelings of guilt and sadness, it became increasingly apparent that she was at risk of becoming involved in drugs and hence drug related crime. Mary had made a series of bad choices concerning partnerships. The men who had fathered her children were either drug dealers, or abusive and/or irresponsible and as a result of this did not meet their fathering commitments. Most of this had to do with the way Mary felt and believed about herself. It was remarkable to observe the change in Mary’s self-esteem as she engaged in active learning and progressively passed her exams. I will never forget her joy when she heard that she had secured employment. As I entered the halfway house she grabbed me, picked me up and swung me around shouting “Thank you, thank you, thank you!”

For Mary to be free of drug addiction and crime, she needed to change her associations and friendships. This was extremely difficult for her. Reflecting on Mary and the fact that she placed her small child to live with a drug merchant is disquieting. The two reasons Mary related for doing this were; one, she had nowhere else she could leave her child (especially that two of her other children were already living
with family members), and two, she felt that the women she had left her child with was a good woman who would love her child, look after him well, and would not let anything untoward happen to him – despite her drug dealing occupation. I have found that ex-offenders do not view their drug-involved friends as morally wrong, as they should. They have ‘a certain blindness’ as regards the illegality of the lifestyle of these individuals and the resulting dangerous criminal activity that they are often involved in.

The halfway house supported Mary and helped her to develop a relationship of trust with Social Services and to begin to see them as a viable source of aid. Furthermore the staff helped her to petition the Maintenance Court in order to obtain maintenance for her children. The other task that was carried out was to help Mary negotiate a better relationship with her family. Staff of the organisation, in this instance, emerged as a mediator between Mary and her family. This was slow, time consuming and labour intensive work.

6.5. Conclusion

This chapter has sought to draw attention to the importance of helping ex-offenders to take responsibility for their children and highlight some of the complexities implicit in this task. These mothers typically experience misgivings and feelings of guilt, sadness and inadequacy. Lack of social support, absent fathers, inadequate parental skills, on-going substance abuse and unemployment can impede the ex-offender’s ability to assume her role as mother. The story of Mary is an example of this struggle and focuses attention on the practical support ex-offenders need to re-establish relationships with their families, learn parenting skills, overcome their substance abuse issues, and find employment so that they can take care of their children. Mary’s story is, however, also A Story of hope as it reveals how, with
prolonged support, women ex-offenders can establish healthy relationships with their children, develop increased self-confidence and step into the role of parent. This chapter argues that supporting ex-offenders to become good enough mothers requires more than simply delivering content based psycho-education programmes; women need proper psychological care, practical help, on-going support and guidance which can be provided via halfway houses. Part of this solution lies in exploring appropriate alternative sentencing for women offenders so that they can be rehabilitated without being estranged from their children. Unfortunately, because women represent a very small proportion of those imprisoned in SA, they are often marginalised within the penal system. Thus they do not often get the parenting support and help they need which in turn has significant social costs that are often carried by their children.
CHAPTER 7

REFLECTIONS AND RECOMMENDATIONS

“Thought and theory must precede all salutary action; yet action is nobler in itself that either thought or theory”.

William Wordsworth.

7.1. Introduction

Thought and theory should be fundamental when taking action to address social problems such as female offender recidivism. In the research field of criminology, the causes and explanations for crime yield much insight, but it is a mystery to me why much of the research has not been translated into any real action – particularly in SA.

It is for this reason that I appreciate the words of William Wordsworth, quoted above. I remain grateful that I did obey the compulsion to take action when I did despite the fact that theoretically I knew little of the complexities surrounding crime, recidivism, rehabilitation and re-integration of offenders. I eventually had to confront the reality that I needed more academic, theoretical understanding of these aspects. Nonetheless, I am thankful that I did not gain this theoretical understanding before becoming involved in the work, as the temptation to theorise, deliberate and think about the problem rather than actually doing something might have been easier, knowing what I know today. This could be the reason why many bypass the ‘acting’ and rather pursue the ‘knowing’. I am glad that this is not my story. The theory did help, eventually, but learning ‘on the job’ provided me with invaluable perceptivity of the real and practical difficulties encountered in this work.
7.2. Involvement with Offenders of the Law

I came to the place I am today through entering a prison 15 years ago as part of a group that was running an eight week Christian-based course in a women’s prison. I was the guitarist. After the course ended I received permission to continue to visit the group of women on a weekly basis. I am unsure exactly what I thought I could achieve by visiting every week, but this I continued to do. I was fascinated by the stories of women behind bars. I wanted to understand more of their situation and reasons why they had ended up in prison.

As mentioned in the opening chapter, I noticed after visiting women in prison for a few years that many who had been released from prison returned to prison within a period of three years, sometimes sooner. I began investigating why this was the case. Most inquiry seemed to point towards the lack of re-integration support once offenders left prison. I was devastated when an ex-offender was murdered in the suburb because she returned to prostitution as a way of earning money. I had met with her in prison for more than six months and I knew that she despised the lifestyle of prostitution very much and was determined not to return to this way of life. This incident directly led to the opening of the halfway house in 2003. The intention was to provide some sort of tangible support for women ex-offenders on their release from prison and to circumvent unhealthy lifestyle patterns and the cycle of crime they seemed unable to escape.

This thesis endeavours to highlight the many problems offenders face once they leave prison and define the type of support they need; both in prison and after they leave. Underlying this main purpose is my own personal motivation concerning those who are marginalised in our society, expressly women, and in this case, the offender in particular. The thesis seeks to advocate support for the ex-offender.
My intention was to introduce the reader to the typical female offender in order that she can be viewed in a different light. I wanted to give a human face and voice to the offender as an actual person, not someone ‘other’ to us. In a sense this thesis also seeks to challenge the SA public to begin to view the problem of crime differently, as a SA problem, so that crime can be addressed collectively and more constructively.

The thesis propagates support for ‘supplementary’ re-integration strategies, such as halfway houses, that could enable successful re-integration into society for the ex-offender. I have heard it said that the essence of rehabilitation is re-integration into community. My thesis unpacks some of the complexities surrounding this statement as many view ‘community’ exclusively as the place where the offender has lived before they were incarcerated. Return to these places for most can be rife with difficulties. Halfway houses could resolve certain of these complications and provide women ex-offenders with a transitional space between prison and society.

7.3. Practical and Theoretical Growth

I realised very soon into the project that my knowledge was inadequate for the task I had undertaken and decided to return to school to study psychology. I felt I needed to be more adequately equipped. My study, and communication with those who worked in the field (clinical psychologists, occupational therapists and others), helped me understand that rehabilitation and successful re-integration of offenders would not be as easy or simple as I originally thought. I learned that success in this field would constitute very hard work, patience and time on my part and on the part of the individual offender and others (i.e., house parents) who would be involved in the process of re-integration.
The psychological theories of Klein, Winnicott and Bion clarified the importance of and need children have of a ‘good enough’ caregiver/mother during early developmental years (Klein, 1957, Rustomjee, 2007, Winnicott, 1965). These theories clarified how unresolved conflict from an early age is revealed in impairment of behaviour as an adult. I learned that abandonment and inadequate attachment to a secure object from an early age can result in deficiency of character as well as mental health problems in later life.

Involvement in the lives of offenders over the years has revealed extensive dysfunction in families and in the communities of SA. The families that most ex-offenders come from are not essentially ‘good enough holding environments’ to build adequate internal protection that serves as a buffer to entering a life of substance abuse, prostitution and crime (Van Buskirk & McGrath, 1999). The knowledge of the likelihood that women offenders would suffer more mental health problems than men helped me prepare more appropriate treatment plans at the halfway house.

I learned that supervision, especially to work through transference issues that present constantly within the halfway house facility, was a priority that needed regular attention and care. The house parents, who are not trained professionally, needed constant input and management. A particular challenge was helping the house parents understand transference and how ‘corrective emotional experiences’ can be effective in transforming a person’s life.

The process of the past years has taught me that, despite difficulties, even the most challenging of offenders can be helped. Many women have integrated back into society as fully functioning and participatory citizens. Many of these women had spent as much as eight to eighteen years leaving and re-entering prison. The organisation had provided for them an imperfect but seemingly ‘good enough holding
environment’ although we lacked resources at times. That some didn’t manage to re-integrate effectively does not mean that the project had failed for them. The complexities of each person’s individual life influenced many of the outcomes.

The one area I feel very strongly about arises out of helping ex-offender mothers re-connect with their children and endeavour to take responsibility for them. This particular problem accentuated for me the lack of resources mothers and families have within the community of SA. It was especially evident that our country had not made any real progress in establishing better support systems that provide training and education in areas of family therapy, parental training and psychological health treatment.

7.4. Evaluating the Thesis as Auto-ethnographic

As proposed by Richardson (2000), the evaluation of the work of an ethnographer can be appraised through ascertaining if the work makes a substantial contribution, if it has aesthetic merit, if it is reflexive, what type of impact it has had, and if it expresses lived experience.

7.4.1. A substantial contribution.

In respect to making a substantial contribution I think the thesis adds considerably to the understanding of the ‘social life’ a classic female offender would have experienced in her formative years and defines succinctly the profile of the typical female offender in SA. In a similar manner the thesis provides insight into ‘social life’ in prison. It also strengthens and confirms much of what is already known about risk factors that contribute to crime in SA. This work makes apparent that the backgrounds of many women ex-offenders could be defined as traumatic with insecure attachments to caregivers or parents.
Documenting 15 years of working with offenders both in prison and outside of prison makes a substantial and unique contribution. The stories transcribed for this thesis clarify the individuality of each ex-offender and tell of the unique dynamics of their life. These dynamics contribute towards the re-integration process, and individual progress, which is for some lengthier than others. An understanding of what constitutes effective rehabilitation and social re-integration has been studied and learned from real and actual experience, substantially contributing to further research and projects of this nature.

The thesis also contributes substantially in that it describes how halfway houses could play a part in the integration of ex-offenders into society after incarceration in a much more holistic way than was originally thought possible. The thesis not only shows how this particular halfway house served as a preventative factor in the primary objective of commitment of crime, but how secondary objectives of being cared for, being listened to and respected, being taught life skills, improving self-esteem and bettering relationships with ‘significant others’, are extremely important factors that influence whether the ex-offender continues to live a life without further criminal offence. The thesis furthermore displays how improving a person’s education level and helping to secure employment contributes significantly to self-esteem.

That this work involves many diverse obstacles and difficulties is clearly demonstrated in the stories of the few interviewed for this thesis. That many ex-offenders did benefit, had ‘cathartic experiences’, and grew more secure through ‘corrective emotional experiences’ is verified throughout the thesis, indicating that it is possible for ex-offenders to change even after many years of incarceration.
7.4.2. Aesthetic qualities.

The thesis is aesthetic in that it tells an interesting tale, one that has probably not been heard before. The writing has depth, uses imagery and wording that provide a thick description of people, situations and settings enhancing the aesthetic value of the text. The thesis shows how the establishment of a ‘home’, that is not an institution, in a rather unique milieu, contributes aesthetically to the successful integration of ex-offenders too. The home is near amenities that constitute good care for people who have limited resources. It is within walking distance of the train station, the taxi route, the bus route, the hospital, and the community centre where alcoholics and narcotics anonymous groups are held, and near the church. The church in the area runs a health clinic and counselling centre, plus a once a week group for marginalised women and their children. Literacy classes and computer classes are made available on the church premises as a service to those who were previously disadvantaged. The women find solace at the church, as the language of the church is one of forgiveness, acceptance and ‘the second chance’. Relationships built with church members have contributed significantly and ‘extended holding’ to people who have lived at the halfway house. Better relationships, friendships and mentorships have been formed replacing some unhealthy past associations.

The surrounding community and neighbours know the home as a place that accommodates ex-offenders and have acquainted themselves with the many women who have lived at the home over the eight years that the organisation has rented this particular property. They contribute often by donating bread, milk and other commodities. The women at the halfway house have adopted a ‘granny’ in the community who lives alone and every evening she is taken a plate of food as a gesture of ‘giving back’ to the community.
The thesis has the added aesthetic feature of describing a project that intentionally sought to establish a home instead of an institution. One of the descriptions of ‘home’ in the dictionary is an environment that offers security and happiness, and a place that can be regarded as a refuge, or a safe place, a place ‘where one would be held safely’ as Winnicott or Bowlby would describe it. It is also referred to as a place where something can be discovered, founded, developed and promoted (The Free Dictionary, Farlex, n.d.). I like these descriptions as they depict a little of what the organisation intended to create and which is evident of the environment described in this thesis. That the home is a place of refuge is made evident by the fact that even after women have left the halfway house, they return to visit, often to be encouraged or to be motivated to continue on the path of non-offense. Often they will visit and stay the weekend. Those that have done well give back by supplying small luxuries they know are not plentiful at the home. Many women who have moved on continue to attend the local church on a Sunday and visit the health clinic if they are ill.

7.4.3. Reflexivity.

Throughout the writing of the thesis I was consistently reflexive. Writing autoethnographically forces one to go back and forth, reconstructing memories that often uncover a lot of personal emotion. During the writing of this thesis I thought a lot about what I was writing, about how the writing was making me feel, and how this was affecting my beliefs. My enquiry debated whether I was describing something others will find unique and fascinating. I found myself questioning what I was actually contributing by writing this paper. Had my conceptions and my assumptions affected the essence of this paper? Had my attitude and writing respected the dignity of the offender, and others that I write about? Did I interpret their stories correctly and
meaningfully? Was I objective enough when I asked those questions in the interviews? There was constant questioning of the accuracies of diagnosis and the use of different psychological theories to make sense of the complex sufferings of the ex-offender. I interrogated my own motives, emotions and subjectivity during the process of writing too, and questioned whether I was over invested in the success of the project.

During the writing of this thesis I reflexively questioned why I continue to be involved in the work. I openly share my frustration, disappointment and anger at times. I seriously ask myself whether this is a worthwhile task and debate practically whether the project is a success or not. I question whether I have undertaken something that is far beyond my capability to accomplish. I openly tell of my feelings of inadequacy and of failure.

Rehabilitation and re-integration is a long journey for many and so I honestly question whether it is worth all the anxiety when progress is slow, fraught with problems (not only in terms of relationship, but in terms of funding), and that I have only the capacity to help a maximum of six individual offenders per year. I have had to delve deeply into my own feelings and emotions and this has forced me to examine my motives for doing what I do.

7.4.4. Impact and an expression of ‘lived’ experience.

Writing this thesis has made an incredible impact on my intellectual and philosophical understanding of the root of criminal behaviour and the recovery path for an individual who has not only committed crime but also whose circumstances of life have left them with personality dynamics that are very difficult to modify. Emotionally it has been therapeutic to write these accounts down. I had to dig deep
within to source wording that would express exactly what I was trying to convey. It was an intense undertaking to try to express what the project I had begun was all about. For me it became a significant therapeutic exercise. I had continual discussions with my supervisor regarding these matters.

The thesis furthermore testifies to the ‘reality’ of crime and criminal offence in SA society. It also traverses between the causes of crime and the very real challenges for solving crime in the country. The ‘lived experience’ of typical female offenders is heard. My own ‘lived experience’, over a long period of time, while working behind bars and running a halfway house is told.

7.5. Unanswered Questions, Unresolved Issues

Apart from wanting to drop the recidivism rate and ultimately the crime rate within SA, an important intention in the mission statement of the organisation is the development of a halfway house re-integration model that could be replicated in community for the purpose of promoting successful re-entry into society after prison for the ex-offender.

Although this research has shown that halfway houses can lower recidivism, unanswered questions regarding how these would be developed in the different communities of SA remain. As previously mentioned, the halfway house has been established within a specific type of community that augments its success. It is questionable whether other communities of SA would offer the type of therapeutic environment that is as conducive to healthy re-integration.

The acceptance of the surrounding neighbourhood regarding the establishment of homes like these in their area could be problematic. Permission must be attained from all the neighbours of the area for a rehabilitation home for ex-offenders to begin
operating. These consents are often not easily gained because the customary South African does not want a home like this in their locality. They fear that housing ex-offenders in the area will heighten the risk of criminal activity. I know organisations that have had to abandon their plans because neighbours have not consented to having a halfway house for ex-offenders in their area. Extensive education in society will need to take place in order to change people’s minds about this. Social development could change legislative laws so that permissions like these are not needed.

The other major problem is that the Department of Social Development (DSD) in SA does not supply funding for halfway houses unless they are zoned for this use particularly. Residential homes (which could be used as halfway houses), are not zoned appropriately according to the DSD. Using a residential property has therefore the added difficulty of accessing funding even if permission is gained from the neighbourhood. There is constant pressure to establish homes like these ‘outside’ of residential areas. One of the reasons that I think contributed towards the ‘success’ of the halfway house I founded is because it is within an actual community, and in an actual neighbourhood and in a small town. I believe that re-integration should take place within residential areas as this helps the offender feel received as part of society again.

The rented home used by us to house ex-offenders does not meet the zoning requirements of the DSD. The organisation has therefore been denied funding from the department even though the work has proved to be successful in many respects and over many years.

7.6. Recommendations and Further Research

The literature reviewed provided reasons why re-integration from prison to
society was troublesome for ex-offenders in SA. With rehabilitation in prison almost non-existent, thousands of offenders are released from prison each year after completing sentences that were served without any clear purpose. Offenders identify needs of housing, drug counselling, mental health counselling, financial aid, alcohol counselling, education and training, medical care and family support as priorities for successful re-integration (Parsons & Warner-Robbins, 2002).

The establishment of rehabilitation centres like halfway house facilities within community has been proposed by authors such as Gaum et al. (2006) and Parsons & Warner-Robbins (2002). As this thesis documents, my experience corroborates that effective support systems (i.e. halfway houses) can provide holistic reintegration strategies that address the offender’s problems with reintegration into society after prison on many different levels.

A recommendation would be that more investigation and research be done regarding the provision of a workable model of integration for offenders within the SA context taking into account the troubled communities many offenders come from. The research should be need/result based and engage the help of NGO’s, FBO’s, the private sector and churches. Programmes that are successful in countering recidivism should be studied as to why they are successful and these should become models for communities to replicate. A recommendation for the government of SA is to accept its legal and moral obligation to support offenders to reintegrate into mainstream society and to seek out and support organisations to help offenders identify and deal with their challenges (Albertus, 2010). A further recommendation would be legislative change to make it easier for halfway houses to be established in community and municipal/statutory change for obtaining funding from government institutions like the DSD.
An exciting development transpired for our organisation in 2011. The DCS, in an effort to find solutions for the escalating crime, recidivism and overcrowding in prisons, began researching already established halfway houses in the country to ascertain if they could be an answer to the dilemma (with the current overcrowding rate in the women’s prison where we are working cited at 157%, halfway houses could quantifiably lessen this rate because women could be released earlier on parole). During 2011 the DCS contacted me and asked me to present at the district regional office regarding the concept and model of the halfway house structure we had established locally. The DCS was suitably impressed and subsequently sent a delegation from Pretoria to visit the house. I was invited to Pretoria to present the model and our concept of rehabilitation and reintegration back into society after prison at a round table discussion of several ministerial delegates, dignitaries and other parties who were interested in establishing halfway houses all over SA. Following this meeting the organisation was also approached by the DCS to form a formal and legal partnership with the DCS in this regard. This partnership has taken two years to be developed and signed.

A partnership with DCS at this time is evidence that the state is serious about being more involved with the integration of ex-offenders and take some responsibility for this vital task that could ensure a drop in the current recidivism rate. Having a major body like the DCS recognise the significance of this work by partnering with our organisation, could help us secure funding from the department of social development, business and other parties.

7.7. Limitations of the Research

There are several limitations to the research. First, the recidivists interviewed were accommodated at the same halfway house albeit at different times. Other
halfway houses may not concede the same results as these were highly determined by the type of programme, particular intervention, the specific milieu in which the house is situated, and the method of reintegration expertise provided by this individual organisation. Second, the recidivists interviewed for the research project were female and the findings of the research may therefore not apply to males. Thirdly, the power differential between myself, as researcher and director of the NPO, and the ex-offender could have influenced the outcome of the findings of the research.

Another consideration would be to take into account that the sample was relatively small. It would also have been advantageous to interview recidivists currently in prison so as to ascertain their perspectives regarding the reasons they found themselves repeatedly incarcerated. Although the halfway house emerges as an imperfect but adequate holding environment for many ex-offenders, the project is experimental. It needs resources and expertise, and in order to make a real difference to recidivism in the country it will probably need to be duplicated.

7.8. Concluding Remarks

Over the years this work has not been easy. Being in the ‘situation’ (working in the prison and at the halfway house) and being able to move ‘out of it to write of it’ has, however, helped me therapeutically. Cathartically, writing this document has imparted meaning for the many years ceded in pursuance of the mission I felt was handed to me. Never would I have entered a prison on my own initiative. Never did I feel compassion for imprisoned offenders before I actually encountered them. Never before did I think I would be in the situation I am today. I never planned to go and study psychology and I never thought I would be writing this thesis as I am now and at the age I am now.
A journey of understanding has taken place in my life regarding the complexity of working in this field. I have grown both theoretically and philosophically. In some ways I feel that I have become ‘an expert’. I am changed after telling these stories; writing this research paper has altered my identity.

The value of having done this research is that it tells a ‘real’ story. The stories of a few special women offenders relate a struggle that acknowledges both renunciation and resistance. Renunciation and resistance where it pertains to a lifestyle of crime and drugs; and renunciation and resistance as the realisation sets in that relationships and friendships have to change too.

The research findings do not produce comfortable answers or easy solutions. The communities where many offenders of the law grew up are far from perfect and have influenced, in more than one way, the path each has trodden. Lack of social support, lack of skill and unemployment, and lack of parental skills have caused many to fail in their re-integration efforts after prison.

The path I have walked was not a ‘well-worn’ path. Theories and academic hypotheses regarding rehabilitation and re-integration of offenders were examined in my research and although helpful in contributing to understanding psychosocial reasons for crime, and sometimes offering solutions, many times they were shown as ‘mere recommendations’ and completely inadequate for resolving many of the ‘everyday’ matters that need to be tackled in the actual helping of ex-offenders in SA. One such ‘everyday’ matter concerns the development of free support systems that provide training and education in areas of family therapy, parental training and psychological health treatment in every community in the country. SA, in its endeavour to effectively address current substance abuse problems and crime, and the unbelievable high abuse of women and children, sexually and physically, must
declare this as an urgent objective. If anything, the findings of this research project have highlighted the importance of this matter.
References.


Department of Correctional Services (DCS), Office of the Minister (2001). *Address by the Minister, Mr. Ben M. Skosana, at the launch of the Restorative Justice approach*. Retrieved from


http://www.education.gov.za/LinkClick.aspx?fileticket=kKd2AHtjxYo=&..


From Incarceration to Successful Reintegration


APPENDICES

APPENDIX A

Questions that were asked to guide the interviews

1. Can you share with me a bit about yourself, where you come from, where you grew up?

2. Tell me about your family. What is your relationship with your father, mother, siblings, other family like? Do you have children?

3. Are there others in your family that have also spent time in prison?

4. Do you or other members of the family use drugs or alcohol?

5. Can you tell me how many times you have been in prison?

6. Was it always for the same reason?

7. Over how many years has this taken place?

a. When did your life of crime begin? i.e. Was there an event or incident that happened?

8. Where did you go to school? What standard of education did you complete?

9. Can you tell me why you dropped out of school (if they did)?

10. Why do you think you keep coming back to prison?

11. What is your greatest difficulty when you get out of prison?

12. How do you feel about the crime you have been involved in?

13. Why do you think you cannot get out of the cycle of crime?

14. What do you think the prison can do to help you not commit crime again?

15. How has been in prison helped you? Are you involved or have attended courses in prison that address your particular problem? If yes – explain more about course

Halfway House

1. You have spent many years returning to prison. How come this cycle has now stopped?
2. What personal and practical impact has the halfway house system had on you?

3. If you had to grade what was the most important from this list what would be most important and least important.

- Equipped so that you can find employment
- Been accepted and trusted
- Being able to deal with past hurts
- Having essential needs met (i.e. safe place with provisions to come to)
- Connecting spiritually with God (i.e. the church).
- Dealing with a substance abuse problem

4. Is there anything else you would add to this list?
Appendix B

Approval Notice

Response to Deferral
12-Nov-2012
VAN WYK, Stephanie Anne
Dear Ms Stephanie VAN WYK,
The Response to Deferral - (New Application) received on 16-Aug-2012, was reviewed by staff members of the REC office on 25-Oct-2012 and was approved.

Please note the following information about your approved research protocol:

Standard provisions

1. The researcher will remain within the procedures and protocols indicated in the proposal, particularly in terms of any undertakings made in terms of the confidentiality of the information gathered.
2. The research will again be submitted for ethical clearance if there is any substantial departure from the existing proposal.
3. The researcher will remain within the parameters of any applicable national legislation, institutional guidelines and scientific standards relevant to the specific field of research.
4. The researcher will consider and implement the foregoing suggestions to lower the ethical risk associated with the research.

You may commence with your research with strict adherence to the abovementioned provisions and stipulations.

Please remember to use your protocol number (HS852/2012) on any documents or correspondence with the REC concerning your research protocol.

After Ethical Review:

Please note that a progress report should be submitted to the Committee before the approval period has expired if a continuation is required.
The Committee will then consider the continuation of the project for a further year (if necessary). Annually a number of projects may be selected randomly for an external audit.

This committee abides by the ethical norms and principles for research, established by the Declaration of Helsinki, the South African Medical Research Council Guidelines as well as the Guidelines for Ethical Research: Principles Structures and Processes 2004 (Department of Health).

Provincial and City of Cape Town Approval

Please note that for research at a primary or secondary healthcare facility permission must be obtained from the relevant authorities (Western Cape Department of Health and/or City Health) to conduct the research as stated in the protocol.

Contact persons are Ms Claudette Abrahams at Western Cape Department of Health (healthres@pgwc.gov.za Tel: +27 21 483 9907) and Dr Helene Visser at City Health (Helene.Visser@capetown.gov.za Tel: +27 21 400 3981).

Research that will be conducted at any tertiary academic institution requires approval from the relevant parties. For approvals from the Western Cape Education Department, contact Dr AT Wyngaard (awyngaar@pgwc.gov.za, Tel: 0214769272, Fax: 0865902282, http://wced.wcape.gov.za).

Institutional permission from academic institutions for students, staff & alumni. This institutional permission should be obtained before submitting an application for ethics clearance to the REC.

We wish you the best as you conduct your research.

If you have any questions or need further help, please contact the REC office at 0218089003.

Protocol #: HS852/2012
Title: An auto ethnographic enquiry into the establishment of halfway houses to reduce criminal recidivism among women in South Africa.
Included Documents:
Consent Form
Sincerely,
Winston Beukes
APPENDIX C

P O BOX 14042,
Mowbray.
14 Sep 12

The Board of ___________ gives permission to Stephanie van Wyk (the founder member of the organisation) to use external data records that include official reports, interviews, and documents to conduct research that will examine the needs of women recidivists once they leave prison and do an enquiry to explore the role the ___________ halfway house has played in helping women recidivists reintegrate successfully into society and not return to prison. The Board understands that the research will also investigate how women recidivists understand and explain the reasons why they find themselves back behind bars within a short period of being released from prison.

The Board appreciates that strict confidentiality protections will be executed to protect the identities and accounts of those involved in the research. The Board believes that the insight gained through this research may help the on-going problem with recidivism among women in South Africa.

Yours truly,

[Signature]

Gill Frame (on behalf of the ___________ Board)
Chairperson