During the last two decades, considerable attention has been given to the plight of children of incarcerated parents — and deservedly so. Through the hard fought efforts of advocates, researchers, practitioners, family members and policymakers, these children have gained recognition as the “hidden victims” of the criminal justice system. Prior to this time, no one claimed them as their own. Children’s foundations and service providers either were not aware of this population or considered them within the purview of the criminal justice system and therefore beyond the scope of their mission. The same could be said for criminal justice funders and organizations. They too were generally unaware of the population and when called on to fund or provide services, their response was “we don’t do children.” The success of the last 20 years is that these children have gained a public face, and organizational silos are crumbling.¹ But, are these children truly the “hidden victims” of the criminal justice system?

Cambridge University professors Joseph Murray and David P. Farrington do not believe that there is enough evidence to blame corrections or the criminal justice system for the plight of children of incarcerated parents. They might have been caused by other disadvantages in children’s lives that existed before parental imprisonment occurred (emphasis added).

This makes sense when we consider the information that the Bureau of Justice Statistics has provided over the years. Of those in U.S. prisons, 52 percent of state and 63 percent of federal inmates reported being a parent...
tions how soon, how frequently, and under what circumstances that reunification takes place.

**Professional focus on the parent’s life.** In the past, criminal justice, social service, and mental health professionals have focused on the parent’s behavior and not its impact on the child. This is slowly changing. While some would criticize correctional administrators as slow to come to this recognition, others would say that they have been leaders. This is an important quandary to resolve because the parent’s behavior usually comes to a system’s attention first. If these professionals can determine the impact that parent behavior may have on the child, intervention could be delivered to the child sooner.

**Six or two times more likely?** Children of mentally ill and imprisoned parents have many things in common: stigma and shame, sudden and repeated parental separation, lack of professional recognition and few programmatic resources. The two groups of children also share something else in common — poor outcomes. Are children of incarcerated parents six or two times more likely than their peers to demonstrate anti-social behavior, including criminal behavior, or experience poor mental health outcomes than their peers without parental involvement in the criminal justice system? Research has not given us that answer. But based on the few sound studies that have been carried out to date, there is only evidence to support a calculation of two times the risk. If more sound studies existed with greater sample sizes, the assessed risk may have been calculated higher.

Researchers have also asserted that what may make children of incarcerated parents different is their cumulative risk. That is, the incarceration of the parent is likely to be just the latest in a long series of experiences and environmental circumstances that have been “deposited” into the child’s risk “bank account.” And risk is like compounding interest. With each deposit — being raised in poverty, having a mentally ill and/or drug addicted parent, having a parent incarcerated — risk increases.

**Resilience understudied.** With all the media attention on children of incarcerated parents as hidden victims of the criminal justice system, it is easy to lose sight of the fact that it is not known what proportion and under what circumstances they turn out well despite the odds against them. The same is true for children of the mentally ill. But what can be said is that under adverse circumstances many demonstrate resiliency and resourcefulness, and become productive citizens. Developing an ability to identify resilience in all high-risk children and understanding how to foster it would be valuable for all those providing child-centered services.
Research Has Not Informed Policy and Practice

Unfortunately, research has not informed the development of policies and practices for children of mentally ill parents or incarcerated parents. This is due, in part, to a lack of significant long-term investment in social science research. However, despite the lack of solid research and evaluation to guide practice and policy, advocates, service providers and family members have developed a number of programs during the past two decades that target the apparent needs of children whose parents are incarcerated in the U.S. In fact, programs for imprisoned parents have become comparatively widespread, while those for children of the mentally ill are practically nonexistent in the U.S. Programs addressing children of the mentally ill, while scarce in this country, are more pervasive in Europe and Australia.

Although programs for children with imprisoned parents have grown in number, these programs generally provide specialized services (such as prison visitation, tutoring or mentoring) versus comprehensive treatment. And, while funding has gotten somewhat easier in the past two decades, these programs almost always are in a financially precarious circumstance and are difficult to sustain due to the labor intensive nature of the services provided and the multiple needs of this population.

Researchers, practitioners and policymakers have gained little understanding in the past two decades as to “what works” for children whose parents are mentally ill or are in prison. There has been far more basic research on parental mental illness than on their children, and very little evaluation of effective programmatic responses. The reasons that people remain “in the dark” about the needs and effective responses for both groups of children are strikingly similar in their nature and complexity.

Institutionalized parents are accessible, and have been available for study. However, access to children of the mentally ill or incarcerated for study purposes has been extremely difficult and costly. One obvious barrier is gaining permission from parents or guardians to study these children; many institutionalized parents, or those under care, fear loss of child custody and either do not reveal their parental status or will not authorize access to their children. Persistent poverty (e.g., telephone cutoffs, lack of transportation, frequent residential moves) in both populations can also make locating and following up with these children a costly proposition.

Programs that provide services to these children can be a cost-effective means of access, though extracting useful knowledge within the context of such programs can be difficult. There is a patchwork of agencies, organizations, funders, and agency or funder mandates involved in these children’s lives. Providers have different goals, work to achieve different outcomes, have different funding mandates and, therefore, collect data in nonuniform ways. There is no standardized evaluation even across programs seeking to achieve the same or similar outcomes. Sound recommendations for best practice, based on direct evidence, have thus been impossible to achieve.

Correctional Administrators Must Continue to Lead

When the state of knowledge is poor, there are two things that can be done — advocate equally for research and programmatic funding and, while waiting for sound evidence, be resourceful. It is not about who is at fault, or which system deserves more blame for the difficult circumstances in which many of these children find themselves. Children of incarcerated parents are not well-served when correctional administrators and others in the criminal justice system “plead guilty” to knowing that parental incarceration plays the principal role in destroying children’s lives and causing negative outcomes. Rather, correctional administrators must continue to advance the cause of these children; breaking down organizational barriers to more effective outreach and service; and holding other social systems accountable. Public education, child welfare, public health and community mental health systems owe these children effective interventions and services.

ENDNOTES


6 James, Doris L. 2004.

7 Glaze, Lauren E. and Laura M. Maruschak.

8 Ibid.


Marilyn C. Moses is a social science analyst for the National Institute of Justice, U.S. Department of Justice. Moses is also chair of ACA’s Children’s Initiative Committee. Findings and conclusions reported in this article are those of the author and do not necessarily represent the official position or policies of the U.S. Department of Justice.