

Children of the Incarcerated Must Be Studied, And Responded to, Comprehensively

By Marilyn C. Moses

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 policy-makers, 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. The U.S. Department of Justice’s National Institute of Justice funded the team to conduct a systematic review

of studies that examined children’s anti-social behavior and mental health after parental incarceration.² Both U.S. and international studies, published and unpublished, from 1960 through 2008 were reviewed. More than 10,500 references were examined and 165 studies of children of prisoners were identified; 16 of these met the selection criteria for inclusion in the systematic examination. Murray and Farrington concluded that based on the scientific evidence we have to date, children of prisoners are twice as likely — not six times more likely as frequently reported — to be at risk for anti-social behavior and poor mental health outcomes when compared to children whose parents have not been incarcerated. But, perhaps more important than this assessment was the following finding:

... it was unclear whether parental imprisonment actually caused these problems. 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

to at least one child under age 18.³ Based on a survey of jail inmates conducted midyear 2002, BJS found that more than 6 in 10 reported regular use of alcohol. And, 69 percent said they used drugs regularly or at least once a week for a month.⁴ A survey of state and federal inmates conducted at midyear 2007, found that nearly 70 percent of incarcerated parents met the criteria of substance dependence or abuse.⁵

Seventy-one percent of jail inmates reported that they were employed in the month prior to incarceration. But, only 16 percent earned \$2,000 or more per month.⁶ Of parents in state or federal prisons, an estimated 80 percent were employed in the month prior to arrest. And between 27 and 33 percent earned between \$1,000 and \$4,999 per month — meaning that approximately 70 percent made less than this amount. Nearly 9 percent of parents in state prisons reported being homeless prior to arrest.⁷ Finally, more than 4 in 10 parents in state prisons reported having a mental health problem. Of those, nearly 31 percent received treatment after admission.⁸

As any correctional administrator can attest, and the BJS numbers demonstrate, people and more specifically parents, come to penal institutions with a wide variety of problems. Therefore, their offspring were often poverty stricken or children of substance using or mentally ill parents prior to their parents entering the criminal justice system. Therefore, they are the hidden victims of a variety of failed systems, such as public health and community mental health systems.

Children of Mentally Ill and Imprisoned Parents

Children of incarcerated parents share many of the same risk factors and needs as children of mentally ill parents. These children share stigma, shame, anti-social behavior, poor mental health, and sudden and many times repetitive parental absence due to institutionalization. It is not understood why some children do well despite it all and how to best help those who are suffering.

Secrets, lies, stigma and shame. No child wants to be different from his or her peers. Depending on the child's age and developmental stage, having a mentally ill or incarcerated parent can be a time of secrets, lies, stigma and shame. Adults may lie about the location of a parent who has been institutionalized. Given the taunting and teasing on the playground that a child will likely endure because it is known that his or her parent is a "jailbird" or "in the nut-house," a child may also lie about a parent's absence. Then there is the unjustified shame that children experience because of their parent's behavior.

Abrupt separation and recidivism. Children of the mentally ill, like children of incarcerated parents, may suffer sudden and repeated separations from their parent due to institutionalization. Recidivism is common in the criminal justice system, as is relapse for those with mental illness and those suffering from substance use disorders. But, the dynamics of parental care of these children prior to separation, during the absence, and post-release is still a mystery. Emerging evidence suggests that research to date on children of incarcerated parents, particularly incarcerated mothers, may be misleading. While an incarcerated

mother may not have officially lost custody of her children prior to arrest, family members are likely to step in if the mentally ill parent is in crisis, and assume an informal caretaking arrangement prior to institutionalization. Therefore, parent-child separation due to incarceration or institutionalization may not be as common as currently believed. The catalyst for separation more likely was diminished parental caretaking capacity due to mental illness, substance use disorder, or other debilitating circumstances resulting in partial or total loss of custody — not institutionalization, per se. Although many parents intend to resume care of their children after release, it is unclear in both populations 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.⁹ 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.¹⁰ 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.¹¹ In fact, programs for children of 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.¹²

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

¹ Nickel, Jessica, Crystal Garland and Leah Kane. 2009. *Children of incarcerated: An action plan for federal policymakers*. New York: Council of State Governments Justice Center.

² Murray, Joseph, David P. Farrington, Ivana Sekol and Rikke F. Olsen. 2009. *Effects of parental imprisonment on child antisocial behaviour and mental health: A systematic review*. Oslo, Norway: The Campbell Collaboration.

³ Glaze, Lauren E. and Laura M. Maruschak. 2008. *Parents in prison and their minor children*. Washington, D.C.: Bureau of Justice Statistics.

⁴ James, Doris L. 2004. *Profile of jail inmates, 2002*. Washington, D.C.: Bureau of Justice Statistics.

⁵ Glaze, Lauren E. and Laura M. Maruschak. 2008.

⁶ James, Doris L. 2004.

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

⁸ Ibid.

⁹ Heatherington, Rachel, Karen Baistow, Ilan Katz, Jeffrey Mesie and Judith Trowell. 2002. *The welfare of children with mentally ill parents: Learning from inter-country comparisons*. West Sussex, England: John Wiley & Sons, Ltd.

¹⁰ Johnson, Elizabeth Inez and Jane Waldfogel. 2002. *Children of incarcerated parents: Cumulative risk and children’s living arrangements*. New York: Columbia University, Joint Center for Poverty Research Working Paper.

¹¹ Nickel, Jessica, Crystal Garland and Leah Kane. 2009.

¹² Heatherington, Rachel, Karen Baistow, Ilan Katz, Jeffrey Mesie and Judith Trowell. 2002.

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