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Social-Ecological and Protective Factor Approach to Managing Parental Incarceration

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Social-Ecological and Protective Factor Approach to Managing Parental Incarceration

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A Clinical Research Project submitted to the Faculty of the Florida School of Professional Psychology at National Louis University in partial fulfillment of the requirements for the degree of Doctor of Psychology in Clinical Psychology.

Tampa, Florida
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The Doctorate Program in Clinical Psychology
Florida School of Professional Psychology
at National Louis University

CERTIFICATE OF APPROVAL

Clinical Research Project

This is to certify that the Clinical Research Project of

Jacquelyn Harris

has been approved by the
CRP Committee on November 11, 2019
as satisfactory for the CRP requirement
for the Doctorate of Psychology degree
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Abstract

Mass imprisonment does not only impact the incarcerated individual; it also affects approximately five million children in the United States. Researchers identified and compare the impact of parental incarceration on child development. They acknowledged the protective factors across the lifecycle from a social-ecological perspective and specifically related to parental incarceration. The comprehensive literature review inspired an innovative model, the social-ecological and protective factor approach to managing parental incarceration. The primary goal of this model is to combat the detrimental effects of parental incarceration by identifying protective factors across the lifecycle and throughout the microsystem, mesosystem, and exosystem. This model is to be implemented by adults in the ecosystem of a child with an incarcerated parent. It is especially useful for parents, teachers, mental health professionals, and the child welfare system.

Dedication

To my parents, Iracema and Richard, and my husband, Justin: thank you for loving me, supporting me, and encouraging me to pursue and achieve my dreams. To my supervisors and mentors, Dr. Dixon, Dr. Howell, and Dr. Lavelle: thank you for training me and inspiring me to be a culturally competent clinician. You are all appreciated.

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CHAPTER I: INTRODUCTION

Background

In the United States, there are approximately 1.6 million individuals in prison, 800,000 in jail, 4 million on probation, and 65 million with a criminal record (Arditti, 2016). Turney and Goodsell (2018) identified demographic trends of incarceration in the United States and reported that in 1970, around 161 per 100,000 were incarcerated. In 2007, there were 767 per 100,000, and in 2018, there were 670 per 100,000. The numbers have varied; however, there are still a significant number of individuals incarcerated, and it is continuing to have a detrimental impact on society decades later.

Mass imprisonment does not only impact the incarcerated individual, but it also affects his or her children and family system. In 2010, 52% of state inmates and 63% of federal inmates were parents to approximately 1.7 million minor children, which accounts for 2.3% of the U.S. population under age 18 (Glaze & Maruschak, 2010). Additionally, the Bureau of Justice Statistics identified 1.9 million children younger than 19 who had a parent incarcerated in their lifetime. It is clear that incarceration impacts a significant number of people and continues to be a familial, community, and systemic issue.

More recent estimates indicate about 5 million minor children (7%) in the United States have experienced parental incarceration during their lives (Arditti, 2016; Wakefield & Wildeman, 2016). The number of children impacted has significantly increased compared to those reported in 2010, which should be cause for concern. Additionally, about half of all inmates are parents to at least one child (Turney & Goodsell, 2018). This information is significant for mental health professionals, especially those employed in a correctional setting because it implies that around 50% of their clients have a child who is also impacted by their

incarceration. This information is also useful for teachers and educators because it brings awareness to the possibility that their students have an incarcerated parent.

Hairston (2009) discovered that children of all ages have been impacted by parental incarceration: younger than age 5 (22%), age 5 to 10 (28%), age 10 to 14 (34%), and age 15 to 18 (16%). According to the Fragile Families and Child Wellbeing Study, approximately one-third of children have experienced maternal incarceration by age nine, and one-tenth have experienced paternal incarceration by age nine (Turney & Goodsell, 2018). Parental incarceration (maternal and paternal) impacts all age ranges, which is essential for clinicians and educators to be aware of because those children are all in different developmental processes. Therefore, depending on the child's age and developmental level, the internalizing and externalizing behavioral consequences vary. Also, age and development guide treatment and intervention for the children and family members.

Imprisonment does not only impact children of all ages; it disproportionately affects racial minorities. Racial inequality spans the entire criminal justice process starting from the moment someone is arrested, remanded in custody, convicted, and imprisoned. In 2015 the U.S. Bureau of Justice Statistics reported that Black Americans constitute 29% of the U.S. population, however, encompass 57% of the prison population. These statistics alone highlight the racial discrepancy that exists in the correctional system. Youths of color make up 66% of children who have incarcerated parents. Of those children, 45% were Black, 21% were Hispanic, and 28% were White.

Additionally, Black children are 7.5 times more likely than White children to have a parent in prison, and Hispanic children are 2.5 times more likely than White children to have a parent in prison (Glaze & Maruschak, 2010). In 2014, Sykes and Pettit found that by age 17,

24.2% of non-Hispanic Black children, 10.7% of Hispanic children, and 3.9% of non-Hispanic White children experience parental incarceration. Research has highlighted the discrepancy in race and ethnicity in the judicial system. Because racial minorities are overrepresented in the system, their children are placed in vulnerable circumstances and are at higher risk for lifelong adverse consequences.

Research has focused on and identified many risk factors, static and dynamic, for parental incarceration. Race itself is one of the primary risk factors for incarceration, as it is a deep-rooted societal issue. Overall, racial minorities have more exposure to parental incarceration; therefore, the potential consequences and risk factors are far more significant for these individuals. Wakefield and Wildeman (2011) indicated that minorities are more likely to have multiple incarcerated relatives and a much higher risk of mental health and behavioral problems. Education level is also a significant risk factor. In 2014, Sykes and Pettit found that 62.1% of non-Hispanic Black parents, 17.4% of Hispanic parents, and 14.6% of non-Hispanic White parents did not have a high school diploma. This study highlighted the compounding effects of risk factors, such as race and low educational achievement. While race is an important factor, the gender of the incarcerated parent is also significant, and research suggests the consequences to the family system are different. The rate of female incarceration has significantly increased in the United States. Between 1991 and 2007, the number of U.S. children with an incarcerated mother increased by 131%, which has, in turn, impacted over one million children (Glaze & Maruschak, 2008). Generally, children who live in rural areas, disadvantaged neighborhoods, and have low socioeconomic status tend to have increased risk for adverse consequences. Additionally, children whose parents are not married, have been previously incarcerated, or have a history of substance abuse or violence are also at higher risk of experiencing parental incarceration and the

negative consequences that arise (Sampson, Morenoff, & Raudenbush, 2005; Wakefield & Wildeman, 2016).

Problem Statement

Research has identified an abundance of issues related to parental incarceration spanning the entire ecosystem to include the individual, microsystem, mesosystem, exosystem, macrosystem, and chronosystem. There is also a wealth of literature on risk factors in these individuals' lives; however, static risk factors cannot be altered or improved with treatment. Therefore, merely identifying the risk factors and current problems is not sufficient and does not provide a promising direction for treatment.

It is evident that parental incarceration is a problem and continues to have negative consequences on all individuals involved; however, limitations remain in the literature. There are not enough empirical studies, longitudinal studies, or studies that gather information from these families during and after parental incarceration. Additionally, research is primarily focused on paternal incarceration and does not thoroughly differentiate the effects of maternal incarceration. Furthermore, research tends to focus on identifying static and dynamic risk factors rather than identifying effective intervention and treatment approaches. Also, for those studies currently published, the interventions tend to focus on one individual (i.e., child or parent). In contrast, a comprehensive approach would reach more individuals in the ecosystem and would intend to decrease dynamic risk and increase protective factors. It also appears that research on treatment interventions does not contain enough racial diversity, therefore, limiting the applicability.

Purpose of the Study

This research intended to develop a social-ecological and protective factor approach to managing parental incarceration. The primary goal of this model is to combat the detrimental

effects of parental incarceration; this was achieved by identifying protective factors across the lifecycle and throughout the microsystem, mesosystem, and exosystem. This innovative model was developed by reviewing and integrating the available literature.

This critical literature review identified any differences in typical child development versus child development alongside parental incarceration. Researchers hypothesized that children with an incarcerated parent have significant delays in achieving expected developmental milestones. Additionally, they review and identify the overall impact of parental incarceration on children. Researchers hypothesized that children with an incarcerated parent have significantly more academic, emotional, and behavioral consequences compared to children who do not have an incarcerated parent. Last, protective factors across the lifecycle, from a social-ecological perspective and specifically related to parental incarceration, were identified and reviewed. Researchers hypothesized that the more protective factors present in a child's ecosystem, the more likely the child achieves healthy development regardless of parental incarceration.

With this information, a comprehensive treatment model can be developed and implemented into the individual's ecosystem. This model is to be utilized by adults in the ecosystem of a child who has an incarcerated parent. It is intended to be especially useful for parents (non-incarcerated and incarcerated) to educate them on their children's development and provide suggestions for keeping their children as healthy as possible through adversity. This model provides recommendations for teachers and educators on how to respond to and address a child experiencing parental incarceration while enhancing academic achievement. It guides mentors and provides them with tools to enrich a child's social and emotional development. It can also be a valuable resource for the child welfare and criminal justice system. Last, it can be

utilized by mental health professionals, as it provides recommendations on effective individual, family, and group interventions.

CHAPTER II: CHILD DEVELOPMENT

Bronfenbrenner's Ecological Systems Theory of Development

Urie Bronfenbrenner, a psychologist, developed an ecological systems theory of development in 1979. His theory intended to explain how the intrinsic qualities of children and their interactions with their environment influence how they develop and function in the world. According to Dr. Bronfenbrenner, a child is enmeshed in different ecosystems, and each system interacts and affects every aspect of the child's life. Dr. Bronfenbrenner identified five levels of external influence; microsystem, mesosystem, exosystem, macrosystem, and chronosystem.

The microsystem is the most immediate environment in which the child is developing. It consists of the activities, roles, and interpersonal relationships experienced by the child in given settings. These relationships are in immediate environments and are typical with family members, classmates, teachers, and caregivers. How these individuals treat the child determines how the child develops in many aspects of life, including attachment, interpersonal patterns, and ability to regulate emotions.

The mesosystem comprises the interactions among two or more settings in which the child is an active participant. Additionally, the mesosystem can be described as the links between the immediate settings in which they are involved (i.e., home and school, peers, and family). Dr. Bronfenbrenner proposed four types of links that can occur within the mesosystem; multisetting, indirect, intersetting communication, and intersetting knowledge. Multisetting participation occurs when the child engages in activities in more than one setting (i.e., child attending daycare and spending time at home). An indirect linkage occurs when the child is not an active participant in both settings; instead, a connection is established through a third party who is labeled the intermediate link between the child and both settings. Intersetting communications

are messages distributed from one setting to another to provide information to others. This communication can occur face to face, or through telephone, handwritten notices, announcements, or chains in the social networks. Last, intersetting knowledge is the information that exists in one setting regarding another setting. Generally, the information at this level is shared through intersetting communication or an external source.

The exosystem consists of one or more settings that do not involve the child as an active participant; instead, the events that occur in that system can affect or are affected by what happens in the setting containing the child. Dr. Bronfenbrenner suggested there is a fundamental sequence that involves two steps. First, there is an event in an external setting that is connected to the child's microsystem; then, the microsystem is linked to the developmental changes in the child. Examples of such people and places may include neighbors, the parents' support system, parents' workplace, child welfare services, or the criminal justice system.

The macrosystem refers to a distant collection of people and places that still have a substantial influence on a child. More specifically, this system consists of the cultural patterns, values, beliefs, ideas, politics, and economics that surround the child. The final level of this system is the chronosystem. According to Dr. Bronfenbrenner, this system encompasses the influence of time on change and constancy in the child's environment.

Bronfenbrenner's ecological theory emphasizes the importance of observing and considering all of the ecological systems that impact child development. As outlined, each system plays a vital role in the child's life and can aid or interfere with their development. Therefore, when conceptualizing a child's functioning, it is imperative to consider these elements and how they continually influence their social, emotional, and behavioral interactions with the world.

Ecological Framework of Development

Research has proposed several theories on the impact of parental incarceration on the family system, including developmental, ecological, sociological, and intergenerational. In 2005, Arditti proposed an ecological framework that emphasized the context of parental incarceration and the impact it has on families and their children. Arditti (2005) explained the impact of parental incarceration on families and children while utilizing Bronfenbrenner's ecological systems theory. The framework she developed provides an overview of systemic levels, constructs of interest, and protective factors for the children and families impacted by parental incarceration.

Constructs. The microsystem, which is the immediate setting of the developing child, includes relationships between parents and children, disenfranchised grief, and ambiguous loss. The parent-child relationship encompasses the non-incarcerated parent and the incarcerated parent. Therefore, the quality of these relationships influences the development of the child. Additionally, disenfranchised grief can be experienced by the child when a parent is incarcerated. This particular grief occurs when a person experiences a loss that cannot be openly acknowledged, publicly mourned, or socially supported, all of which complicates the process of grief or loss even further. Another construct within the microsystem involves two types of ambiguous loss that are experienced by the child and family. Boss (1999) suggested the first type of loss in this situation is when the incarcerated parent is perceived as physically absent yet psychologically present. The second type of loss is when the incarcerated parent is perceived as physically present but psychologically absent. It is suggested that the children and family members likely alternate between these perceptions, which can interfere with emotional functioning and healing.

The mesosystem encompasses the link between the child's home and the criminal justice setting (jail or prison) and visitation within these settings. When linking the child to the incarcerated parent, there are many complicating factors. Ambivalence over visitation exists among this population and can lead to tension, anxiety, and agony. Specifically, families must decide if the benefits outweigh the consequences of visiting the incarcerated parent. In addition to ambivalence, the actual visitation can be detrimental to the child, as it can exacerbate the ambiguous loss the child was already experiencing. Additionally, the visit can be psychologically and physically demanding because the children are subjected to treatment similar to that of the inmates (i.e., their parents). Circumstances of the visit can include distant travel, long waiting periods, metal detectors, locked doors, plexiglass walls, and rude treatment by correctional officers, all of which can be stress-inducing.

The exosystem consists of the conditions of the correctional setting, the institutional practices, and the community's response to the reentry of the incarcerated parent into society. The conditions of the correctional setting can impede the parent's ability to reintegrate into society or can provide the appropriate resources and set the parent up for a smooth reintegration. The institutional practices specifically related to the lack of family preservation significantly impact the family system. Additionally, the stigma associated with the incarcerated parent upon release is experienced by all members of the family. It can occur in multiple settings (i.e., child's school, neighborhood, community, and work). This stigma can lead to violence, bullying, or exclusion, all of which can interfere with healthy child development.

The macrosystem involves institutional and cultural patterns, including social, educational, legal, and political systems. Arditti (2005) referenced the deep-break policy, which is the belief that prisons are focused on custodial containment rather than reentry preparation.

This approach reinforces and enhances the deprivations experienced by the incarcerated parents and the likelihood of marginalization. Due to this policy, prisoners who are released from incarceration are labeled and stigmatized, which interferes with their ability to reintegrate into society, gain viable employment, and achieve familial expectations (e.g., active parent and partner, financial provider).

Protective factors. Arditti (2005) also identified protective factors on a systemic level. Within the microsystem, social support is essential for the families to tolerate the incarceration. Social support can be received at home, school, support groups, church, or in any setting that may be significant for the child. The more avenues from which a child can receive positive support, the more likely the child develops resiliency. Another important factor includes the preexisting resiliency for the child and family members. Provided the non-incarcerated parent or caregiver is equipped with healthy coping skills and parenting skills, then the child will be better equipped to handle the parent's incarceration. Overall, the level of resiliency can impact the family's functioning, ability to adapt to the incarceration, and ability to reintegrate the incarcerated parent when and if this is applicable. Additionally, Arditti (2005) described the significance of an ecologically sensitive casework. She discussed the importance of providing strength-based interventions within a therapeutic realm, having support during family visitation that is conducive to children, and receiving community support to mitigate the stigma and adverse effects of incarceration.

Protective factors within the mesosystem include family-friendly visitation and child-centered collaboration between the criminal justice system and the child welfare system. Research discusses the importance of the environment created during visitation. This process can be beneficial or harmful to the child. Therefore, having an environment that is family-friendly,

less restrictive, and more flexible for the family can be helpful. Another aspect of visitation involves treatment received by correctional staff. If the children and families are treated with respect and equality, regardless of the incarcerated parent's crime, then the visit has higher probabilities of being a positive experience.

Additionally, if a child is ever removed from the custody of the non-incarcerated parent or incarcerated parent, then collaboration between the criminal justice system and the child welfare system is beneficial. With this collaboration, the child's interests and needs are more likely to be addressed. Therefore, if there are any outstanding issues within the family, then rehabilitation or programs can be recommended or provided. Appropriate communication between the two systems can also promote a positive reunification of the children with their parents upon release.

Within the exosystem, many factors can serve as protection for these children and their families. Specifically, rehabilitation for the parent should be considered to decrease recidivism and increase the chances the parent will make healthy choices. Another factor would be providing an alternative to incarceration, such as substance abuse or mental health treatment, community service, or probation. Last, community partnerships can be helpful for this population, as it can be an avenue that provides support to these families, whether it be social, economic, housing, or employment. Any positive community support contributes to the successful reintegration of the incarcerated parent into society. Within the macrosystem, restorative justice and criminal justice reform are essential. Reform and change would begin with sentencing and include harm reduction policies. Another important factor for reform would be to attend to the need created by the criminal offense and attending to the issues related to the cause of the offense, such as poverty, addiction, and moral and ethical difficulties (Claassen, 1996).

Family Stress Proximal Process (FSPP)

In 2016, Arditti proposed the FSPP, which is a developmental and sociological method of examining the impact of parental incarceration on the family system. FSPP is a model of how parental incarceration affects non-incarcerated caregivers and their children (Arditti, 2016). In this model, Arditti conceptualizes parental incarceration as an ongoing stressor that impacts the family processes, which are linked to the child's ability to adjust and adapt. Elements of the model include contextual variables, psychological distress, proximal processes involving the children, youth protective factors, and child adjustment.

Within this model, imprisonment or incarceration is viewed as a result of and contributor to social inequality. Most individuals who are incarcerated have a history of victimization, low education, neighborhood disadvantage, mental health issues, substance abuse or addiction, and intergenerational crime (Arditti, 2012). Families in this situation tend to come from a lower socioeconomic status and are at an economic disadvantage. As a result of the incarceration, the dual-income home changes to a single income home; yet, the expenses remain the same. For those individuals who are sent to prison or jail, the cost of the commissary and visitation is an additional expense for the family. Also, if a parent who was responsible for child support payments is incarcerated, this source of income will likely cease for the duration of the incarceration, which then impacts the children. Because of the combination of this preexisting disadvantage and the stressors produced by the incarceration, the family's ability to function and maintain existential needs is placed at risk.

Psychological distress encompasses parenting stress and the ambiguous loss experienced by the family. The ambiguous loss is the perception that the incarcerated parent is either physically or psychologically absent from the family. The children and non-incarcerated parent

tend to alternate between these perspectives, depending on setting and circumstance. Within the ambiguous loss, there is also a layer of stigma that comes with imprisonment, which makes grieving this loss socially unacceptable. In this model, parenting stress has three primary origins: child characteristics that were present prior to parental incarceration or behavioral symptoms associated with the incarceration, characteristics or vulnerabilities in the caregivers, or stigmatized attitudes toward families. Research has identified an increase in problematic behaviors at home and at school, such as fighting with siblings, arguing, defiance, detention, suspension, crying, withdrawal, and fatigue (Arditti, Lambert-Shute, & Joest, 2003; Shlafer & Poehlmann, 2010).

Concerning the caregivers, the potential for being overwhelmed physically, emotionally, and financially increases. These stressors can lead to role strain and caregiver distress, which directly impact the quality of care that the children receive. An additional stressor that these families struggle with involves the stigmatized attitude that society has toward those who have been incarcerated. Because the incarcerated parent is not present, the stigma tends to fall onto the family members. Some families experience disapproval and blame for their incarcerated parent's crime. Additionally, people tend to make assumptions about the family's values and beliefs, resulting in social isolation and disruption of interpersonal relationships.

Within the model, the primary proximal process is parenting, and this applies to both the incarcerated parent and the non-incarcerated parent. Upon incarceration, the entire family structure, process, and dynamics have the potential to shift. Due to these changes, the non-incarcerated caregiver is placed at risk for mental health problems, stress, substance abuse, and health issues (Arditti, 2016). Additionally, the caregiver may resort to harsher discipline, have less ability to provide supervision, and may be subject to family victimization (Aaron & Dallaire,

2010; Phillips, Burns, Wagner, & Barth, 2004; Phillips, Erkanli, Keeler, Costello, & Angold, 2006). All of these stressors placed onto the non-incarcerated parent have the potential to impact the quality of parenting they can provide, which is the most prominent protective factor for children in these situations. There are many challenges present in the relationship that children have with their incarcerated parents. Research suggests that to create or maintain a positive relationship between incarcerated parents and their children, several factors need to be considered, including; the visitation setting, developmental status of the child, quality of interactions during the visit, and level of distress experienced with the institutional constraints (Comfort, 2008; Poehlmann, Dallaire, Loper, & Shear, 2010). Visitation has been identified as a “developmental paradox” because it can be a source of connection between the child and parent, or it can increase the emotional pain and trauma that the child experiences (Arditti & Savla, 2015; Parke & Clarke-Stewart, 2001; Pynoos, 1993).

According to the FSPP model, the most significant protective factors for the children and their families include coping skills, resilience, and social support. Researchers have identified coping skills that have been useful for some children including a positive outlook on life, connection to prosocial activities, de-identifying and distancing themselves emotionally from their incarcerated parent, desensitization, finding meaning in the experience, helping others, and empowering oneself to communicate honestly with the incarcerated parent (Johnson & Easterling, 2015; Nesmith & Ruhland, 2008; Sands, Goldberg-Glen, & Shin, 2009). In addition to coping skills, social support is an essential aspect of functioning, as it provides access to prosocial activities, helps children envision a better life, encourages positive changes, and provides the ability to engage in new opportunities (Luther, 2015).

CHAPTER III: IMPACT OF PARENTAL INCARCERATION ON CHILDREN

Attachment and Development

Attachment theory was identified in the 1960s by John Bowlby, and he suggested that the early caregiving experiences between a mother and child create an internalized working model (IWM) within the child, which then serves as a prototype for behavior in future relationships. Additionally, those experiences provide unwritten rules for how a child perceives, expresses, and copes with emotions. Overall, attachment theory suggests the IWM is a framework for an individual's beliefs about self-worth, how much he or she can rely on others and contributes to a person's emotion regulation, defense mechanisms, and interpersonal behaviors. Second, the IWMs are related to that individual's lived experiences, especially within the first three to five years of life.

Mary Ainsworth furthered Bowlby's research and identified specific attachment styles that developed from these experiences. (Bretherton, 1992). Presently, there are four attachment styles: secure, anxious-avoidant, anxious-resistant, and disorganized. A child with a secure attachment generally perceives the environment as supportive, has self-respect, and has strong relational abilities. Children with an anxious-avoidant attachment tend to struggle with stressful situations, tend to withdraw, resist seeking help from others, and do not form satisfying relationships with others. An anxious-resistant child tends to lack self-confidence, displays exaggerated emotional reactions, keeps at a distance from peers, and remains close to primary caregivers. A child with a disorganized attachment does not have a predictable strategy for coping with stress, sees relationships as threatening, and may withdraw or behave aggressively toward others. Research suggests that these attachment styles develop in infancy and then are

reinforced throughout the lifespan. Thus, these styles continue to impact an individual's personality development and interpersonal relationships.

The impact of parental incarceration varies by age group; however, empirical research is limited to the interaction between attachment development and parental incarceration.

Poehlmann (2005) conducted a study with 54 children, ages 2-7, who were separated from their incarcerated mothers. He found that 63% of those children had an insecure attachment with their incarcerated mother and current caregivers. His findings also suggested that very young children were significantly vulnerable to the relationship disruption and hypothesized that this was because of their developing cognitive and communication abilities. Additional researchers explored the relationship between attachment style and psychopathology. They found associations between anxious attachment and anxiety, avoidant attachment and conduct problems, and disorganized attachment and dissociative symptoms (Carlson, Sampson, & Sroufe, 2003; Sroufe, 2005). These results suggest that attachment prior to parental incarceration has an impact on the child once the parent is removed and can continue to interfere with the child's functioning and progression throughout life.

To be mindful of attachment theory, research suggests that children can cope better with parent-child separation by discussing upcoming separations and planning for reunions in a manner that reassures the child that the parent is available and responsive to their needs (Kobak & Madsen, 2008). Additionally, Poehlmann (2005) suggested that children who received emotionally open and developmentally appropriate information about their incarcerated mother's absence were found to have healthier secure attachments with their current caregivers compared to those who did not receive this information. Another critical aspect to address is the stigma that follows parental incarceration. Children and parents need to have open dialogue about the stigma

and the impact it has on relationships in other settings such as school and work. Poehlmann (2005) found the most significant predictor of the quality of the relationship between caregiver and child is the stability of placement. Those children who remained with one caregiver continuously while separated from their mother were more likely to form secure attachments compared to those children who experienced more than one placement.

Education

When a child endures social, emotional, and financial consequences related to parental incarceration, it can be detrimental to development, including cognitive and non-cognitive abilities. Prior to entering school, children begin to learn how to process information, apply knowledge, solve problems, behave socially, cooperate, and utilize emotional regulation. However, when a child experiences a disruption in his or her environment, development is also disrupted, which can then interfere with the transition into formal schooling. Consequently, educational achievement, attainment, and labor market outcomes can be significantly impacted (Blair, 2002; Knudsen, Heckman, Cameron, & Shonkoff, 2006). Research suggests that regardless of the timing of parental incarceration, it interferes with these individuals; however, the effects vary from child to child.

Haskins (2014) analyzed the Fragile Families Study to highlight gender and racial disparities in children who experienced parental incarceration. This study revealed that on average Black children were less school-ready than White children, Black and White boys were less behaviorally ready, and children who experienced parental incarceration prior to age five had the lowest cognitive and non-cognitive readiness scores. Haskins also found that Black boys were especially disadvantaged and experiencing behavioral challenges and lower academic achievement. This research suggested the importance of making educational decisions within the

first few years of school, including placement into special education and alternative learning accommodations. It also highlighted the need to intervene as soon as possible, as the lack of proper accommodations can have long-lasting effects on a child's ability to engage, learn, and excel in academia.

In addition to gender and racial disparities, there are also differences in child outcomes depending on which parent was incarcerated and removed from the home. Paternal incarceration during early or middle childhood has been associated with poorer cognitive outcomes. Specifically, in elementary school, children with incarcerated fathers are more likely to be held back a grade, placed in special education, or suspended from school. Older children with incarcerated fathers continue to experience a disruption in school, as they have been found to have lower educational attainment, poorer academic performance, and more school absences (Turney & Goodsell, 2018). While paternal incarceration has a significant impact on early and middle childhood, maternal incarceration has been associated with a lower chance of college graduation, which is yet again placing these children at a disadvantage compared to their peers (Hagan & Foster, 2012).

In addition to academic difficulties, the stigma associated with their parents' incarceration can also impact their relationship with teachers, influence academic motivation and achievement, and interfere with behaviors that promote school completion (Shlafer & Poehlmann, 2010). According to research, parental incarceration during middle childhood or early adolescence placed children at the highest risk of drop out, contributing to the failure to graduate high school altogether. The children in these circumstances were also more likely to drop out while their parent was incarcerated, which could make it difficult for the parent or family member to have a positive influence on the child's life (Cho, 2010, 2011; Murray &

Farrington, 2008a). Murray and Farrington (2008b) conducted a study comparing boys ages 14 to 18 who were separated from their parents for various reasons (i.e., hospitalization, death, parental incarceration before birth, and never separated from their parents) and found that the boys who experienced parental incarceration had significantly poorer educational outcomes at ages 14 and 18. This research demonstrates the significance that parental incarceration has on a child's life in that it is comparable to experiencing a death in the family.

Psychopathology

Research has identified significant interactions between parental incarceration and mental and behavioral health difficulties among the children within these families. Mental health issues reach all ages and are diverse in presentation across the Diagnostic and Statistical Manual of Mental Disorders (5th ed.; American Psychiatric Association, 2013). There are many theories about how a mental health disorder develops. Regardless of how a disorder develops, several studies have provided empirical evidence linking parental incarceration to specific mental health disorders.

Theory of psychopathology. In 1992, Agnew developed general strain theory (GST), a dominant criminological theory suggesting if young people are treated poorly, they become upset and respond with aggression, crime, or other deviant behaviors. According to GST, strain refers to the negative relationships in which these children are being mistreated and have been categorized as objective, subjective, vicarious, and anticipated (Agnew, 2002). Generally, strain can occur when others prevent or threaten individuals from achieving their positively valued goals, remove or threaten the positive stimuli that the individual possesses, or threaten individuals with harmful or negatively valued stimuli (Froggio, 2007). Overall, Agnew proposed that each strain increases the likelihood that a person will experience negative emotions and

affect, which then pressures the person into delinquency. According to Agnew, the primary emotions experienced in relation to strain include disappointment, depression, and fear. However, anger is the most distinct emotion experienced and can stem from blaming others for one's adversity; it can increase the level of perceived injury; and can create a desire for revenge, motivate action, and lower inhibitions, all placing these children at risk of engaging in criminal behaviors.

Greenberg (1999) believed that child psychopathology is caused by an interaction of four domains: insecure attachment, child characteristics (i.e., temperament, biological vulnerability, and neurocognitive function), ineffective parenting, and family adversity. Greenberg did not suspect that one of these factors alone could cause psychopathology; however, the combination of these factors predicts severity. Murray and Murray (2010) suspected there were multiple processes by which parental incarceration could place children at risk for long-term psychopathology. It is suspected that any combination of what happens before and during the incarceration interferes with the child's functioning and resilience. Some of the risk factors include attachment style prior to incarceration, parent-child separation, confusion and anger regarding parental absence, and lack of contact with the incarcerated parent. Additionally, children often experience inconsistent or unstable living arrangements, economic difficulty, decreased supervision by caregivers, home and school moves, the stigma of incarceration, social strain, hostility toward authority figures, coupled with daily life stressors, all of which can lead to unhealthy and maladaptive psychopathology.

Empirical support for psychopathology. Overall, research suggests that children in these families are at higher risk for psychopathology and continue to experience internalizing and externalizing difficulties throughout their lifespan. Research suggests that parental

incarceration can be a traumatic experience for the children due to the initial shock of a parent being removed. Following the removal and absence of a parent, the child is left with the burden of understanding the parent's absence and the circumstances around it (Murray & Farrington, 2008a). While these children are attempting to navigate these stressors, they are also at risk of feeling shamed, and experiencing isolation, hostility, and rejection by neighbors, teachers, peers, and other family members due to the stigma related to their incarcerated parents' behaviors (Braman, 2004; Condry, 2007). Another layer of trauma and stress involves the experience the child has while visiting the incarcerated parent or not having the ability to visit, both potentially increasing anxiety and emotional turmoil. Last, when the incarcerated parent is released, the child is met with the challenge of reintegrating the parent into his or her life while dealing with the uncertainty that the parent will disappear yet again (Murray & Farrington, 2008).

Data from the Fragile Families and Child Wellbeing Study (FFCW) suggested that paternal incarceration was associated with physical aggression and temper tantrums for children as young as age three (Geller, Garfinkel, Cooper, & Mincy, 2009; Wildeman, 2010). Wakefield and Wildeman (2011) used data from the Project on Human Development in Chicago Neighborhoods (PHDCN) and FFCW. This study found that children with incarcerated parents experienced increased internalizing symptoms related to depression, anxiety, and somatic disorders. Of those children in the PHDCN study, 50% who had a father incarcerated required professional intervention due to internalizing problems (Wakefield & Wildeman, 2011). According to the National Longitudinal Study of Adolescent to Adult Health, maternal incarceration was also associated with depressive symptoms in young adults (Wildeman & Turney, 2014). Overall, children who had an incarcerated father had higher rates of internalizing and externalizing behaviors and early juvenile delinquency compared to children without an

incarcerated father (Turney, 2017a). According to Murray, Farrington, Sekol, and Olsen (2009), children with incarcerated parents were two times as likely as their peers to express antisocial behavior problems, including aggression, noncompliance, and stealing. The research has been evolving, yet, consistently shows that children suffer from many mental health difficulties regardless of which parent is incarcerated.

Researchers examined mental health outcomes during adulthood for individuals who experienced parental incarceration during their childhood (Gaston, 2016; Lee, Fang, & Luo, 2013; Murray & Farrington, 2008a). Murray and Farrington (2008a) assessed whether parental incarceration between birth and age 10 predicted internalizing problems for males ages 14 to 48. This study controlled for childhood risk factors and parental criminality and found that boys who experienced parental incarceration had increased internalizing problems during adulthood. Lee et al. (2013) examined the relationship between parental incarceration and mental health outcomes among young adults ages 24 to 34. This study found that paternal incarceration was significantly associated with depression, anxiety, posttraumatic stress disorder, and maternal incarceration was significantly associated with depression. Gaston (2016) used data from Add Health to determine if parental incarceration during childhood or adolescence predicted depressive symptoms in adulthood. This study found that individuals who had an incarcerated parent before birth or age 1 scored 26% higher on the depressive symptoms scale compared to those individuals who did not experience parental incarceration. Additionally, they found that those children with a history of emotional, physical, or sexual abuse went on to have higher depressive symptoms in adulthood.

Intergenerational Crime

Children continue to be impacted by their parents' behaviors, and research suggests that a parent's criminal behavior increases the risk that their children will be involved in criminal activities. In 1979, the National Longitudinal Survey of Youth (NLSY79) was created to be a nationally representative sample of civilian non-institutionalized individuals. Huebner and Gustafson (2007) used data from the NLSY79 and found that adults who had mothers who were incarcerated during their childhood were three times more likely to be convicted of a crime and four times more likely to be on probation. Huebner and Gustafson (2007) did not find race to be significant; however, they found that men were more likely to be on probation than women were. Gius (2016) used data from the National Longitudinal Survey of Youth, 1997 (NLSY97), which was a second survey with a different cohort. For the 2016 study, he used data from the years 2006-2011 and 2013. He discovered that the incarceration of either parent (mother or father) increased the likelihood that the child would be arrested in adulthood.

Researchers conducted a systematic review and meta-analysis of the intergenerational transmission of criminal behaviors (Besemer, Ahmad, Hinshaw, & Farrington, 2017). They concluded that children with parents convicted of crimes were at higher risk for criminal behavior compared to those with parents who had not been convicted. Studies also highlighted a significance in the transmission of crime being the strongest from mother to daughter, mother to son, father to daughter, and last, father to son.

Besemer, Farrington, and Bijleveld (2017) offered another perspective on criminal behavior among parent and child. They researched the interaction between labeling theory and the intergenerational transmission of crime. This study showed that children with a convicted parent had an increase in offending behavior after being associated with or labeled by their

parents' crimes. This result supports the idea that intergenerational crime is much more complex and cannot be merely explained by a parent offender; instead, it can be due to many other mechanisms including genetic risk, social learning, official bias, and environmental risk factors (Besemer, Farrington, & Bijleveld, 2017).

Physical Health

Current literature has found that children impacted by incarceration also experience disadvantages concerning physical health. Turney (2017b) found that children exposed to parental incarceration were 26% more likely to have unmet health care needs including, medical, dental, optometry, and mental health care compared to those who did not have exposure to parental incarceration. As a consequence of not receiving medical care, these children are placed at a higher risk of developing conditions or disorders that are not treated effectively. The U.S. Department of Health and Human Services (2014) published the National Survey of Children's Health for 2011 to 2012, which found that children who had experienced parental incarceration had more physical problems including asthma (14% versus 8%) and obesity (21% versus 15%). Roettger and Boardman (2012) confirmed through longitudinal data that parental incarceration is associated with a higher body mass index among women. Children exposed to parental incarceration compared to those who did not have a parent incarcerated also had a greater likelihood of infant mortality, poor overall health, high cholesterol, asthma, sexually transmitted infections, and migraines (Turney, 2017b). As these children get older, their parent's incarceration continues to impact them and is associated with a later risk of high cholesterol, asthma, migraines, HIV/AIDS, and overall fair to poor health (Turney & Goodsell, 2018).

Hardship and Deprivation

The nature of the hardship experienced varies depending on the circumstances of the incarceration, including who the child was living with, who was the primary caregiver, and the overall quality of life prior to incarceration. Research has identified significant differences in the experience that children have when their mother is incarcerated versus when their father is incarcerated. According to Turney (2017a), fathers who were incarcerated contributed less to the family in terms of formal or informal child support, which impacts the financial security of the family. Because of this change, these children were more likely to experience food insecurity, homelessness, material hardship, and poverty. Additionally, paternal incarceration has been associated with a greater likelihood of unmet health care needs, which can be due to a lack of financial resources or access to care (Turney, 2017b).

In addition to financial hardship, there are usually structural changes experienced when a parent is incarcerated, such as a change in living arrangements, the dynamics between family in the home, and caregiving. According to the Bureau of Justice Statistics (2015) Survey of Inmates in State and Federal Correctional Facilities, mothers in a state prison were three times more likely than fathers in a state prison to report being responsible for the daily care of their children prior to incarceration. This information alone speaks to the difference experienced, depending on which caregiver is incarcerated. When fathers are imprisoned, their children remain with the biological mother 84% of the time. However, when mothers are imprisoned, children are more likely to live in someone else's household, such as their grandparents (42%) or other relatives (23%). Furthermore, children with imprisoned mothers are 5.5 times more likely to live in foster care compared to children with imprisoned fathers (Glaze & Maruschak, 2010).

Denby (2012) researched the impact of parental incarceration on caregiver experiences and child well-being. The caregiver sample in this study, on average, consisted of 50-year-old, unmarried, African American grandmothers, who were employed but considered low wage earners. They identified the top 10 service needs for their children as medical insurance, monthly subsidy, dental care, more living space, information and referrals, emergency funds, recreation opportunities, food assistance, assistance with school supplies, and accessing health care. However, the ability to access and need for services were not consistent; therefore, the child's quality of life and development are likely to be impacted.

Racial Inequalities

Mass imprisonment disproportionately affects racial minorities, which then causes a domino effect of consequences within those families, spanning from the children to their caregivers. African American women represent around 30% of all women incarcerated at the federal and state levels, and Hispanic women represent 16% of all women (Ruiz & Kopak, 2014). Concerning lifetime imprisonment, 1 in 19 Black women and 1 in 45 Hispanic women in the United States spend time in prison compared to 1 in 118 White women.

According to the Bureau of Justice Statistics (2015), 55% of male and female African American inmates reported having at least 1 child under age 18. Demographic data from this study also revealed high levels of unemployment (41%), a single relationship household (67%), and a lack of high school or equivalent education (60%). As a whole, incarcerated African American mothers are the poorest, least educated, and socially stigmatized people in the United States (Roberts, 2012), further highlighting the significant injustice within the legal system that has impacted racial minorities for decades and continues to do so today.

According to the United States Department of Justice (DOJ) Bureau of Justice Statistics (2015), on average, African American mothers were sentenced to spend 7.6 years in prison for drug-related offenses, meaning they would be separated from their children during crucial developmental years. On average, those children were age 10.2 upon maternal imprisonment; therefore, by the time their mothers were released or reintegrated into society, they would be nearly legal adults. In addition to being away from their mothers, 42% of these children were placed with a grandparent during their parent's incarceration. Ruiz (2008) conducted a study concerning African American grandmothers providing extensive care to their grandchildren and found there were major concerns including inadequate financial support, poor health, need for respite care, responsibility for permanent childcare, and inadequate housing. When these children are removed from their parents and then placed into an environment filled with risk factors and concerns, it likely impacts their development and functioning.

Another factor that is unjustly impacted by race and gender is the children's living arrangements upon parental incarceration. Foster (2011) found that children of African American and Hispanic women were less likely to live with the other parent compared to children of non-Hispanic White women. Also, racial minorities (i.e., African Americans and Hispanics) had significantly lower income, which led to considerable interruptions in their living arrangements.

Kaufman, Rebellon, Thaxton, and Agnew (2008) researched and attempted to explain the race-crime relationship by referencing the GST. Areas of strain included economic, family, educational, community, criminal victimization, and discrimination. According to GST, African Americans experience a greater variety of strain than Whites do, which can lead to more severe consequences and negative emotions. Additionally, African Americans are more likely to cope with strain through crime, leading to higher rates of incarceration. Because African Americans

are at higher risk for strain, it can exacerbate the effects on their children, especially during incarceration.

Research has also identified geographic variation in the cumulative risk of imprisonment and parental imprisonment. Muller and Wildeman (2016) found the cumulative risk of imprisonment and parental imprisonment to be significantly higher for African Americans and Latinos compared to Whites. Specifically, when comparing the risk of parental imprisonment, African American children had the highest range (9.9 to 20.7), followed by Latinos (3.8 to 11.6), and then Whites (1.0 to 4.1). African American children also faced the highest cumulative risk in the Midwest, Northeast, Florida, and Texas, and Latino children faced the greatest risk in the West. These findings highlight the significant and detrimental racial disparity that exists across the United States.

Maternal Incarceration

According to the Bureau of Justice Statistics (2012), the female prison population is the fastest-growing sector of the criminal justice system. Of note, most women also happen to be mothers to minor children. Research suggests the impact of maternal incarceration differs from that of paternal incarceration. According to Glaze and Maruschak (2008), mothers in state prison were two times more likely than fathers to report homelessness in the year prior to arrest, four times more likely to report physical and sexual abuse, and one and half times more likely to have a current medical or mental health problem. Therefore, the children in these families are already exposed to significant environmental risk factors that can impact their development.

Overall, maternal incarceration is more likely to disrupt childcare arrangements, as 61% of incarcerated mothers reported their children were living with them prior to arrest, and 77% were responsible for the daily care of their children (Glaze & Maruschak, 2008). When mothers

are incarcerated, children typically receive care from a grandmother or are placed in the child welfare system. Challenges arise for both circumstances, as grandmothers can be facing health issues, financial struggles, and unemployment, and the child welfare system tends to have unstable caregiving arrangements, all of which can negatively impact child development (Hairston, 2007).

In addition to experiencing an unstable caregiving arrangement, a child's education and labor market outcomes can be impacted. Brown (2016) utilized data from the National Longitudinal Survey of Youth (NLSY79) and found that children ages 0 to 4 with incarcerated mothers tended to experience grade retention. Those children ages 5 to 10 tended to have higher high school drop-out rates. Additionally, adolescents ages 15 to 17 had significantly less overall earned wages upon entering the labor market.

Researchers have also documented the relationship between maternal incarceration and children's involvement in the criminal justice system. Dallaire (2007) found that adult children with incarcerated mothers were two and a half times more likely to be incarcerated compared to children with incarcerated fathers. Huebner and Gustafson (2007) reported that children with incarcerated mothers were significantly more likely to be involved in the criminal justice system. Specifically, adult children were three times as likely to have been convicted of a crime and four times as likely to have been on probation. Because they are involved in the legal system, it prevents them from engaging in positive and healthy development, further contributing to the societal issue of maternal incarceration.

Paternal Incarceration

Western and Wildeman (2009) found the number of children with an incarcerated father had increased from 350,000 in 1980 to 2.1 million in 2000. Additionally, most men who are

incarcerated also happen to be fathers (Mumola, 2000). Overall, incarcerated fathers experience less contact and involvement with their children, higher levels of parenting stress, higher rates of relationship dissolution with their children's mothers, and a poorer alliance with their children's caregivers (Loper, Carlson, Levitt, & Scheffel, 2009) further highlighting the impact this tragedy can have on a family. Research suggests four mechanisms link paternal incarceration to a children's well-being; the strain imposed on the family's economic resources, the disruption of parental relationships, the impairment of parenting behaviors, and the weakening of maternal mental health. Any combination of these can impact the family and should be identified and addressed to best serve these children and their families (Turney, 2017b).

Behaviorally, children with incarcerated fathers tend to exhibit more aggression, delinquency, or antisocial tendencies. Concerning education, children also tend to have difficulty progressing. Paternal incarceration during elementary years increases the chances the child will be held back, placed in special education, or suspended. For those children who experience paternal incarceration during early or middle childhood, they are more likely to have lower cognitive outcomes in math comprehension, reading comprehension, and memory. Children with incarcerated fathers also endure hardship and deprivation in the form of higher rates of poverty, homelessness, food insecurity, and unmet health care needs (Turney & Goodsell, 2018). It is clear that paternal incarceration has detrimental effects on children and continues to be a significant societal issue.

CHAPTER IV: PROTECTIVE FACTORS

Protective factors can be defined as “a characteristic at the biological, psychological, family, or community level that is associated with a lower likelihood of problem outcomes or that reduces the negative impact of a risk factor on problem outcomes” (O’Connell, Boat, & Warner, 2009, p.xxvii). Another relevant definition is “conditions or attributes of individuals, families, communities, or the larger society that promote the well-being and reduce the risk for negative outcomes” (Child Welfare Information Gateway, 2014, p. 1). Protective factors are identified across the lifecycle from a social-ecological perspective and directly related to parental incarceration. Each view provides diverse and comprehensive information that informs treatment options for these families.

Protective Factors Across the Life Cycle

O’Connell et al. (2009) identified risk and protective factors for mental, emotional, and behavioral disorders across the lifecycle. Protective factors have been categorized by age and development (i.e., infancy and early childhood, middle childhood, adolescence, and early adulthood) and source (i.e., individual, family, and school/community).

Infancy and early childhood. Protective factors within the individual include the ability to self-regulate, acquire language skills, and engage in appropriate communication. Additionally, it is beneficial when a child has developed a secure attachment to a parent or caregiver and is capable of making friends and getting along with peers. Protective factors within the family system include reliable support and discipline from caregivers while also protecting them from harm and fear. Additionally, a parent or caregiver needs to be responsive to the child’s needs, provide opportunities to resolve conflict, and have adequate socioeconomic resources. Protective factors within the school or community include support for early learning and access to

supplemental services such as nutrition and medical care. It is also crucial for children to have a stable and secure attachment with their childcare providers.

Middle childhood. Protective factors within the individual include proficiency in academic skills, including math, reading, and writing. In addition to academic achievement, children need to have the ability to follow rules and behave appropriately in multiple settings (i.e., home, school, and public). Other protective factors include the ability to make friends and maintain healthy and positive peer relationships. On the familial level, parents need to provide consistent language-based discipline rather than physical punishment. It is also beneficial for the family to have extended support such as healthy adult peers and additional family members. On the community level, it is helpful when academic settings have high educational standards, positive teacher expectations, and school policies that reduce bullying and maladaptive behaviors. Also, within the school system, it is helpful to have effective classroom management strategies and a positive relationship between educators and family members in hopes of promoting the highest academic achievement.

Adolescence. On an individual level, it is beneficial for adolescents to have positive physical development, high self-esteem, and the ability to self-regulate challenging emotions. Other protective factors include those adolescents who experience academic achievement, intellectual development, and those who are engaged in two or more contexts (i.e., school, athletics, employment, religion, and culture). It is also vital for adolescents to develop and utilize critical thinking, problem-solving, and coping skills. Within the family, it is helpful to have structure, boundaries, rules, monitoring, and predictability. It is also a protective factor when there are supportive relationships between each family dynamic (e.g., parent to parent, parent to sibling, sibling to sibling). On a community level, adolescents need to have the opportunity to

engage with others and be in the presence of mentors who support the development of their interests and skills. Furthermore, it is necessary that adolescents have clear and realistic behavior expectations, understand positive and healthy norms, and experience physical and psychological safety.

Early adulthood. Protective factors within early adulthood include healthy identity development and exploration of love, relationships, career, and worldview. Additionally, individuals need to develop self-sufficiency, the ability and confidence to make independent decisions, and they need to obtain information on financial independence. Other protective factors include being future-oriented and being motivated to set and achieve goals. Among the family, it is vital to have a balance between autonomy (behavioral and emotional) and support and reliance on family. Within the community, these individuals need to explore academic or career goals and develop connections to adults outside of the family network.

Protective Factors from a Social-Ecological Perspective

The Child Welfare Information Gateway (2014) connects the child welfare system and professionals to resources that are meant to protect children and strengthen families. In 2014, they provided a protective factor approach to the prevention and treatment of child abuse and neglect. In this approach, they combined research from the Center for the Study of Social Policy, including Strengthening Families and Youth Thrive. They also included the Essentials for Childhood approach developed by the Centers for Disease Control and Prevention (CDC) and research from the Administration on Children, Youth, and Families. The findings have been combined into a social-ecological approach meaning the protective factors are differentiated at the individual, relational, and community or societal level.

Individual. Overall, researchers agreed that to increase the likelihood of positive outcomes, each individual should have the ability to regulate emotions and actions, the ability to connect and interact with others, and the ability to respond and plan for challenging circumstances. Interpersonally, the individual needs to have empathy toward others, the ability to engage in positive communication and conflict resolution, and be an active participant in social groups. Concerning self, the individual should have a positive self-concept, self-efficacy, and the inner strength or resilience to meet challenges and adversities. Additionally, the individual should possess problem-solving, decision making, and adaptive functioning skills.

Relational. In general, relationships are crucial for positive outcomes, and the quality of those relationships is a significant factor in the individual's ability to thrive and succeed. More importantly, parents need to be equipped with competencies in child development and focus on developing a nurturing and loving relationship with their children. It is helpful when parents possess the knowledge and understanding of the appropriate discipline, boundaries, and developmentally appropriate limits and know how to implement these practices best. Parents should also be able to provide a safe, stable, and nurturing relationship with their children and engage in positive and supportive interactions. There should also be substantial support for parents in times of hardship, such as a positive network of support (e.g., friends, family) or access to resources (e.g., housing, food, and transportation). Although the quality of the relationship between parent and child is crucial, children are also impacted by other adults in their lives, including teachers, mentors, family members, and community members. These adults should be people who provide comfort, support, guidance, and high expectations. Also, the child needs to have peer relationships that promote growth, positive norms, and connection. Overall, it

is ideal for children to receive and obtain support from peers, parents, and other adults, as it enhances their development and promotes resiliency.

Community and society. Researchers identified a few protective factors in the community and society. On a basic level, children must perceive safety in their home and neighborhood, as it sets the tone for their ability to engage in higher-level tasks. Additionally, the community must contain positive and healthy norms along with social cohesion, as this outlines and shapes the child's behaviors and interactions with the world. Within the community, it is useful to have a variety of supportive programs (e.g., academic, athletic, religious), as this can keep children engaged in activities while also teaching them different skill sets. On a more existential level, the family needs to have adequate income and resources to provide fundamental needs for their children. Overall, researchers suspect that safe, stable, nurturing relationships and evidence-based programs supporting the well-being of children serve as most effective in promoting healthy growth and development.

Protective Factors for Parental Incarceration

Microsystem: Child. Research has identified protective factors that foster resilience in children and their families. Overall, children who have a realistic and positive sense of self, the ability to regulate their emotions and behaviors, the ability to form friendships, educational aspirations, and cognitive abilities have the ability to adapt and cope with adversities (Alvord & Grados, 2005). However, empirical research is limited on protective factors among children who experience parental incarceration. Parke and Clarke-Stewart (2001) found that individual qualities such as easy temperaments, high self-esteem, and intelligence all contribute to a person's ability to adapt to stress.

Microsystem: Relationships. According to attachment theory, safety and security are achieved when a child perceives a caregiver to be available. Availability is defined as having open lines of communication, physical accessibility, and responsiveness if called upon to help. Poehlmann (2005) assessed attachment relationships in 54 children ages 2.5 to 7.5 whose mothers were currently incarcerated. She found that secure attachments were more likely to form when children lived in a stable caregiving situation, when they reacted to their mother's incarceration with sadness rather than anger, and when they were older.

Additionally, the strongest predictor of a secure attachment was when the child lived with one stable caregiver throughout his or her mother's incarceration. Furthermore, those children who were given emotionally open and developmentally appropriate explanations about their mother's whereabouts were able to develop healthy attachment representations with their current caregivers. Kobak and Madsen (2008) agreed that being open and honest about the parent's whereabouts made it easier for children to cope with the separation and experience warmth and comfort in their current situation. Overall, it appears that when a child remains with one caregiver and is provided open and honest communication about the incarcerated parent, it can serve as a protective factor for development.

In addition to having a consistent and supportive caregiver, it is also helpful to have high quality, supportive friendships because this can serve as a buffer for stressful experiences, such as parental incarceration (Ladd, Kochenderfer, & Coleman, 1996). Dallaire and Zeman (2013) discovered that children's self-reported empathy served as a protective factor against aggressive peer relations. Therefore, emotional maturity, paired with perspective-taking, can improve behavior and promote connection. Children who did not believe that they belonged or connected with their peers tended to achieve less academically (Maddox & Prinz, 2003), further

highlighting the importance of interpersonal relationships. Research suggests that positive peer relationships can impact emotional, behavioral, and academic performance and consequently are a significant feature of healthy development.

In addition to the relationship these children have with their caregivers and peers, it is crucial to consider a child's relationships with others in his or her microsystem. Luther (2015) conducted qualitative interviews with adults who experienced parental incarceration during their childhood. He found that social support from caring adults (i.e., incarcerated parents, grandparents, older siblings, teachers, and coaches) helped facilitate success and healthy development. These relationships were especially useful in promoting resilience when adults provided access to conventional activities, supported a vision for a better life, and encouraged turning points for these children. Overall, relational support comes from many individuals and can include peers, caregivers, mentors, teachers, religious leaders, and extended family.

Microsystem: Youth mentoring. Dubois, Portillo, Rhodes, Silverthorn, and Valentine (2011) conducted a meta-analysis on the effectiveness of mentoring programs for youth. They concluded that mentoring programs have a positive impact on youth across stages of development and domains (i.e., behavioral, social, emotional, and academic). The effectiveness of the mentoring programs increased when children had preexisting difficulties or had been exposed to environmental risk, if there was a good fit between mentor and child, if they had similar interests, and if the mentors assumed teaching or advocacy roles. Generally, the relationship between a mentor and a child can serve as a protective factor through adversity.

Jucovy (2003) developed a specific program for children of incarcerated parents from the Amachi program, inner-city congregations, and Big Brothers/Big Sisters. Within the program, about 500 mentor-mentee matches were made, and after a year of involvement, several variables

were measured. After one year, those children who were paired with a mentor felt more confident doing schoolwork, skipped fewer days of school, had higher overall grades, and were less likely to start using drugs and alcohol. Data were also collected from the mentors, parents, and caregivers. Overall, they agreed the children had increased self-confidence, an improved sense of the future, higher academic performance, and better behavior (Jucovy, 2003). Although the program is relatively new, it highlights the value of a community-based mentoring program and the positive impact it can have on children and their families.

Bruster and Foreman (2012) also examined the impact of mentoring programs on children and conducted a qualitative evaluation of a mentoring program in Virginia Beach. They found that 80% of the children agreed that their mentor challenged them to succeed, provided them guidance, invested time and effort into their learning process, helped them feel good about themselves, and discussed future problems with them. Laakso and Nygaard (2012) obtained qualitative data from incarcerated parents, non-incarcerated parents, children, and Big Brother/Big Sister mentors to evaluate the impact of mentoring programs. They identified essential factors within the mentor/mentee relationship. They found that the duration and frequency of the relationship influenced developmental gains (e.g., cognitive, social, identity, emotional). It also provided companionship for fun and diversion, subsequently leading to positive outcomes. Overall, they identified six positive outcomes, including increased self-confidence, more sociability, greater openness, evidence of trust, improved school performance, and signs of happiness, all of which can lead to a positive self-concept. The results from this study demonstrated that the poor socioemotional environment that these children face could be mediated by a mentoring relationship.

Microsystem: Therapy. Currently, there is limited research on therapy with children of incarcerated parents. In 1998, Landreth and Lobaugh examined outcomes of filial therapy with incarcerated fathers and their children. Essentially, incarcerated fathers were taught empathy, acceptance, appropriate boundaries, and play strategies to strengthen their relationships with their children. Within the study, 16 children (ages 3 to 7) participated in structured/supervised filial play sessions for 10 weeks. Results suggested a significant increase in their children's self-concept. In 2000, Springer, Lynch, and Rubin examined a solution-focused group therapy approach for Hispanic elementary-aged children of incarcerated parents. Compared to their matched-comparison group, the students had higher self-esteem scores. Although there is limited research specifically with children of incarcerated parents, it is evident that some form of intervention can have a positive impact on their lives.

Mesosystem. Regarding the mesosystem, there is limited empirical research. However, Arditti (2005) highlighted the importance of family-friendly visitation that is less restrictive, more flexible, and consists of fair treatment by correctional staff. Visitation is an essential aspect of children's lives and can have many positive effects, including reassurance that their parents are emotionally well, reduced negative feelings around the separation, and helping them overcome issues related to the separation. Arditti (2005) also noted the importance of having open communication with the child welfare system for those children who were removed from the home. This better ensures the child's needs are met during and after their parent's incarceration.

Exosystem: Programs for incarcerated parents. Eddy, Martinez, and Burraston (2013) examined the impact of parent management training on incarcerated parents and their families. Generally, elements of the program included family management skills of positive involvement,

encouragement, non-coercive and non-aversive discipline, monitoring and supervision, and problem-solving. After completing the program, incarcerated parents reported experiencing significantly less stress, less depression, and more positive interactions with their children. These results highlighted the positive impact that participation can have on the family system.

Loper and Tuerk (2006) reviewed parenting programs for incarcerated mothers and fathers and identified features that increased effectiveness. Generally, it was concluded that parents needed to develop an understanding of child development, form meaningful attachments with their children, and use appropriate child management techniques. Other notable features included peer support among parents in prison and understanding how to communicate with their children appropriately (i.e., in-person, mail, and telephone). It is also essential to address mental health concerns among parents and implement effective coping strategies. Another major feature of programming includes the relationship the incarcerated parent has with the non-incarcerated caregiver. The incarcerated parent should receive information on caregiver stress, realistic expectations, communication, and interpersonal skills, as this enhances the quality of relationships with non-incarcerated caregivers and their children. Another consideration for any program within the prison system is ensuring the parent's education level matches the learning materials provided so that the information can be understood and retained. In addition to program-specific features, it is also useful to consider the parents' gender, culture, length of sentence, and level of institutional security when identifying program needs.

More recently, Stauss, Sparks, Thomas, and Grant (2018) presented findings from a program designed to help incarcerated mothers develop their ability to communicate and bond with their children via a letter-writing process. Results from the 16 incarcerated mothers revealed they gained insight into personal emotions and parenting strengths, improved positive parenting

strategies, developed a greater ability to empathize with their children, and gained tools to enhance communication. Additionally, there was a significant improvement in self-efficacy as a parent and decreased anxiety around parenting issues.

Exosystem: Policy recommendations. Nickel, Garland, and Kane (2009) provided federal policymakers with recommendations to assist children of incarcerated parents and promote positive outcomes. Of the recommendations, the areas of focus included: addressing risk factors of children; increasing coordination between systems to better deliver services to children, caregivers, and incarcerated parents; improving policies, practices, and programs in the criminal justice system (i.e., arrest, incarceration, and visitation) to minimize traumatic effects on children; addressing the needs of the non-incarcerated caregivers; encouraging permanent housing or placement for children; providing treatment and parent services to incarcerated parents; and developing approaches that help incarcerated parents meet their financial obligations to their children. These changes address the needs of the entire family system, which promotes comprehensive treatment for this population.

CHAPTER V: SOCIAL-ECOLOGICAL AND PROTECTIVE FACTOR APPROACH TO MANAGING PARENTAL INCARCERATION

The literature has made it clear that parental incarceration significantly impacts the entire family system. The children in these families are especially vulnerable and at risk of mental, emotional, physical, educational, and financial hardship at no fault of their own. However, there are not sufficient resources or interventions being provided to these families, as evidenced by rising recidivism rates, intergenerational crime, and persistent mental health challenges. This model has been created to prevent these children from suffering any further. Research has identified numerous individuals who can have a positive impact on these children. Therefore, it is essential to provide these individuals with the resources to support, protect, and promote healthy child development through the adversities of parental incarceration.

The social-ecological and protective factor approach to managing parental incarceration has been designed to combat the detrimental effects of parental incarceration by identifying protective factors across the lifecycle and throughout the microsystem, mesosystem, and exosystem. The model is meant to be utilized by any adult who is in the ecosystem of a child with an incarcerated parent. It is especially useful for parents, teachers, mental health professionals, and the child welfare system.

Bronfenbrenner's ecological systems theory of development, in combination with protective factors identified throughout the literature, was utilized to develop a best practice model for managing parental incarceration. According to ecological systems theory, a child is enmeshed in different ecosystems, and each system influences every aspect of life. Within this model, the microsystem is the most immediate environment where the child is developing and can include the non-incarcerated parent, incarcerated parent, caregiver, other family members,

peers, teachers, and youth mentors. The mesosystem consists of the interactions and links between two or more settings, such as a child's home, school, the child welfare system, and prison. The exosystem includes parameters that are not directly related to the child; yet, the events that occur within them can directly impact the child. In this model, the exosystem includes programs offered to incarcerated parents and policy changes within the criminal justice system. The model, outlined in Figure 1, concentrates on protective factors within the child and the microsystem, mesosystem, and exosystem.

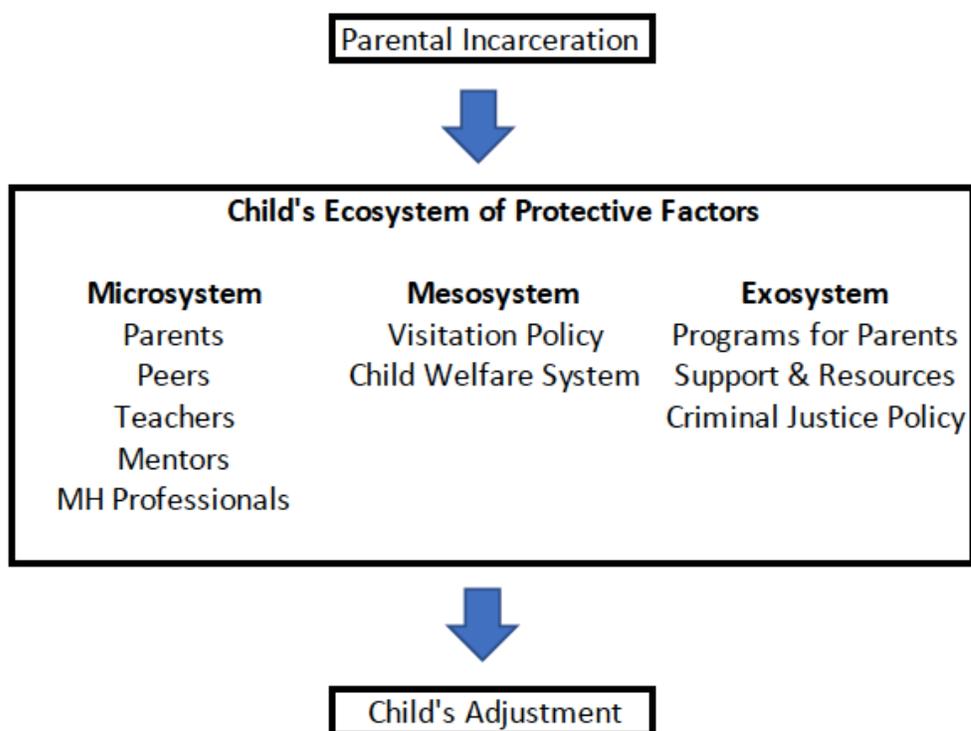


Figure 1. A social-ecological and protective factor model for managing parental incarceration.

Microsystem

In this model, the microsystem includes the child, non-incarcerated parent, incarcerated parent, teachers and educators, peers, mentors, and mental health professionals. Protective factors were identified for each individual within the system. The primary purpose of identifying

protective factors across the system is to ensure that parental incarceration has negligible effects on child development.

Child. Erik Erikson (1963, 1968) developed eight stages of psychosocial development. At each stage, a crisis or task needs to be resolved, and successful completion of that task results in healthy personality development. The protective factors identified in this model were based on Erikson's developmental model. Children from age 0 to 24 months are considered infants. At this stage, typical developmental tasks include sensory, perceptual, and motor development, which refers to the accurate utilization of their senses to provide them with information about their environment. Infants are also developing sensorimotor intelligence, which is the ability to process, organize, and use the information presented to them. At this stage, children also begin to perceive language and communicate with people in their environment.

Additionally, children start to form an attachment or positive emotional bond with their caregivers, which then determines the interactions they have with others in their lives. Infants are also learning emotional development, which can be hindered or encouraged depending on the attachment with their caregiver. Overall, the goal is to achieve all developmental milestones promptly; however, if there is a disruption in development, identification of the delay and intervention are necessary.

To optimize an infant's development, it is recommended that caregivers spend time with their children, remain predictable, provide warmth and affection, and express positive emotions through touching, hugging, and playful interactions. Additionally, it is helpful if the caregiver frequently communicates with the child, encourages the child to explore and engage with the environment, and helps the child engage in problem-solving. It is also crucial for a caregiver to guide language development, find effective ways to soothe and comfort the child when in

distress, help the child engage in distress tolerance, and monitor and influence their emotional expressions. Last, it is essential for the caregiver to minimize any negative influences in their life and be mindful of any auditory or visual cues that can impact them.

Toddlerhood encompasses children age's two to four. At this stage in development, children are becoming more mobile (e.g., walking, running, jumping, hopping, throwing, catching, pedaling, steering) and developing motor skills. Caregivers are responsible for encouraging exploration while ensuring safety. Toddlers are also gaining competence in communication and achieving language milestones such as producing sounds, understanding words, rules for sentence formation, increasing vocabulary, pragmatics, and expressing thoughts. In addition to mobility and language development, toddlers are learning about fantasy play. They are also beginning to develop self-control, direct actions toward goals, express and inhibit emotion expression, and resist temptation. It is the parent's responsibility to be aware of these developmental tasks and ensure their children are achieving them at appropriate times.

Early school-aged children are between the years of four and six. At this stage in their lives, they are beginning to understand the concept of gender, gender role standards and stereotypes, identifying with the same-sex parent, and establishing a gender role preference. This process can prompt confusion for a child; therefore, these children must have stable interactions with their caregivers to help navigate these challenges. At this stage, children are also developing moral judgment along with the ability to experience empathy, care for others, and the ability to take perspective. Along with gaining skills in moral judgment, children are also gaining an understanding of how they are supposed to interact with the world and understanding cultural expectations and differences. Children are also learning how to play with their peers in ways that promote cooperation and connection. Overall, children need to achieve all of these

developmental tasks prior to moving forward in their lives. Provided they reach these milestones, they serve as protective factors as they grow and interact with others.

Middle childhood includes those ages 6 to 12. At this stage in the lifespan, children are learning the importance of friendship and gaining social competence. These skills serve as protective factors throughout their life, as these connections can keep them involved in activities that promote growth such as religion, sports, and after-school activities. In addition to gaining interpersonal abilities, children are learning how to be part of a team. With this skill, they discover aspects of interdependence, division of labor, goal setting, and competition. Also, at this age, children develop concrete mental operations, including conservation, classification, and computational abilities. In addition to mental processes, children are expanding their intellectual competence and gaining different skill sets. Children are also learning how to evaluate themselves, which then determines their level of self-efficacy. Children need to have significant positive influences at this stage including parents, teachers, and mentors so that their self-efficacy is a positive reflection of who they genuinely are.

The final stage included in this model is early adolescence, which consists of those who are between 12 and 18 years old. At this stage, adolescents are experiencing physical maturation, which can have psychological and social consequences if an adolescent does not have adequate support. In addition to physical changes, these adolescents are also beginning to engage in romantic and sexual relationships. Caregivers need to communicate openly with their children about these changes to prevent any adverse or unexpected consequences. Also, because adolescents are continually modeling and watching their parents, the parental relationship can serve as a protective factor as long as it displays positive and healthy values. In addition to romantic relationships, the concept of belonging to a peer group is essential to development, as it

can influence the trajectory of a person's actions. Therefore, if an adolescent's peer group has positive values that align with society's expectations, then the adolescent will likely continue down a positive path. At this stage, brain development is also extremely significant. Adolescents are learning how to manipulate more than two categories mentally, think about changes that come with time, hypothesize logical sequences of events, understand consequences to behaviors, determine logical consistency or inconsistency in statements, and think in relativistic ways about themselves, others, and the world. To promote formal operational thought, it is useful for adolescents to be involved in a variety of relationships, participate in heterogeneous peer groups, and engage in a diverse and complex high school curriculum with creative components. At this stage, adolescents are also experiencing emotional development. They are gaining the ability to empathize with others and gaining an understanding of their own emotions along with the ability to self-regulate. All of these skills can protect them from the adverse impacts of parental incarceration.

Overall, individuals are expected to achieve developmental tasks throughout their life. Provided they accomplish these tasks, it is likely they will become healthy individuals who can face adversity. Each stage has been outlined because it is important for those involved in a child's life to know where they are supposed to be developmentally to determine if any intervention is necessary. Additionally, if a parent is incarcerated at a specific developmental stage, it is useful for caregivers, teachers, and mentors to be mindful of the expected developmental tasks and to do their best to keep that child on track.

Incarcerated parent and non-incarcerated parent. In general, the parent-child relationship is a crucial protective factor in child development. However, relationship dynamics are complicated when one parent has been removed from the home. To protect and promote child

development, parents (incarcerated or not) need to understand where their child is in the lifespan, along with the developmental tasks expected for that age. If they are aware of what to expect from their child, they can create an environment that is conducive to learning and growing. In addition to understanding basic child development, parents need to maintain a nurturing and loving relationship with their children. Research suggests that attachment style influences all future relationships; therefore, it is necessary for children to feel safe, comfortable, and loved in their homes. They need to witness and receive positive and supportive interactions within their families. Additionally, parents must understand appropriate discipline strategies, boundaries, and developmentally appropriate limits. Moreover, they need to know how to implement these strategies consistently.

It is also crucial for parents to establish their support system so that they can effectively cope with an incarcerated parent. Social support can be received at home, school, support groups, church, or in any setting that may be significant for the child. The more avenues where a family can receive positive support, the more likely the family develops resiliency and the ability to tolerate adversity (i.e., parental incarceration). In addition to a healthy support system, parents need to have access to resources that assist them during incarceration. There are numerous resources for families impacted by incarceration. Of the many, the following appear to be useful; the National Resource Center on Children and Families of the Incarcerated, the Child Welfare Information Gateway, Sesame Street in Communities, Saving Kids of Incarcerated Parent (SKIP, Inc.), and the Osborne Association, and Children of Incarcerated Parents on Youth.gov.

Regarding the incarcerated parent, the dynamics are different because the child is not with him or her daily. Communication and bonding occur through visitation, telephone calls, or letters; therefore, it is important to make these experiences as positive as possible. The

incarcerated parent should become familiar with the institution's visitation policy so he or she can share this with the family. It is also essential for the incarcerated parent to have empathy for the experiences the children have during visitation and find ways to prepare the child better for this. During the visit, it can be helpful to be patient, flexible, ask questions about the child's day to day life, and accomplishments. Before the visit ends, give the child a warning so he or she can mentally prepare for the emotional process of leaving the parent behind. Additionally, the incarcerated parent should provide stability, consistency, honesty, and affection, similar to the non-incarcerated parent.

Peers. Throughout the lifespan, the ability to connect and bond with others is a crucial developmental task. Research suggests that high quality and supportive friendships can serve as a buffer for stressful experiences (i.e., parental incarceration; Ladd et al., 1996). A positive peer relationship is one that abides by healthy societal norms and rules and promotes prosocial behavior. Those children who possess these interpersonal skills tend to have greater emotional maturity, fewer behavioral issues, are less likely to be bullied or victimized, and have higher academic performance. Therefore, connection to positive peers is a significant protective factor for children with incarcerated parents.

Teachers and educators. Children spend a significant amount of time in academic settings; therefore, teachers and educators influence their healthy development. Foremost, educators have a responsibility to be knowledgeable about parental incarceration and the impact it has on their students. Research has demonstrated that children with an incarcerated parent can experience emotional, economic, and social strains, all of which can impact their academic performance. Additionally, children are at risk of being negatively stereotyped or bullied, which can have detrimental effects on their academic achievement. Another factor to consider is the

“conspiracy of silence,” which refers to the decision that caregivers have made not to tell their children their parent is incarcerated. Teachers should be mindful and respectful of this decision and respond appropriately. Overall, teachers need to be informed about parental incarceration because it impacts the children in their classroom, and they can either contribute to the healthy development of a child or hinder it (Dapson, 2018).

Generally, teachers should collaborate with the child’s parent or caregiver by sharing relevant updates on emotional, behavioral, and academic issues/successes. It can also be beneficial to research community organizations that can meet the specialized needs of children with an incarcerated parent. If information is made available from these organizations, it could be beneficial to provide those resources to all students as a means of educating them while supporting the student who is experiencing it directly.

It is recommended that teachers make an effort to form a positive and open relationship with their students. Two suggestions for building relationships with children include the 3H Strategy, which stands for “hello,” “handshake,” or “high five” when greeting children in the morning and the 2 by 10 strategy, which consists of 2-minute conversations for 10 consecutive days. Teachers can also assist children by implementing behavioral and academic supports that enhance the teaching-learning process and increase competencies in emotional and behavioral self-regulation. Additionally, they can establish a safe and structured classroom while having high, yet clear, expectations and procedures. Other effective strategies include the use of empowerment, providing children with choices or options, and facilitating problem-solving skills.

It is evident that teachers provide support within the classroom, but they also can impact children outside of the classroom. For instance, teachers can encourage participation in after-

school activities such as athletics, social clubs, and youth groups, which can expand a child's positive peer group. Teachers can also serve as mentors and role models to assist children with prosocial behaviors, goal setting, and future planning. They can also help combat the stigma and shame associated with parental incarceration and ensure peers or other staff are not mistreating their students. It can also be useful for teachers to collaborate with other school-based professionals (e.g., support staff, mental health, guidance counselors) to ensure comprehensive treatment.

Mentors. Research suggests that mentoring programs are effective and provide a positive impact on children across stages of development with incarcerated parents. Having an adult mentor can provide a role model, fulfillment of friendship, guidance, and an opportunity for growth. However, certain qualities in a relationship have proven effective. These qualities have been identified, and recommendations have been provided to ensure the highest quality relationship between adult mentor and child.

According to Dubois et al. (2011), mentoring relationships were successful when children had preexisting difficulties or had been exposed to environmental risk if there was a good fit between mentor and child, if they had similar interests, and if the mentors assumed teaching or advocacy roles. Additionally, the duration and frequency of the relationship can influence developmental gains (e.g., cognitive, social, identity, emotional). It is recommended that mentors and mentees have weekly contact and continue to see each other for up to 12 months. It is also crucial to focus on the quality and intensity of the relationship by enhancing social and emotional development. Mentors should provide social, cultural, and recreational enrichment. They should strive for being a companion of fun and diversion while also providing emotional closeness. Among many other ways, this relationship can be achieved by talking, hanging out, being

available, teaching or exposing them to new activities, and supporting them through difficult situations.

General suggestions for mentors include striving to build and maintain a relationship with the child by being reliable, trustworthy, and nonjudgmental. Obtain information on the impact of incarceration and gather collateral information from family on how it may be impacting that specific child. Learn about the child, get to know him or her, do not make assumptions about the child and do not pressure him or her to share information. While the relationship is forming, gather the child's hopes and dreams, help him or her grow, spend time doing activities the child enjoys, and expose the child to new places and activities. Depending on the family dynamics, the mentor can also help connect the child with the incarcerated parent. This can be accomplished by discussing the relationship the child has with the incarcerated parent, helping him or her communicate with the parent via letters or cards, and being available to support the child before, during, or after a visit, as it can heighten emotions. Mentors can also help children cope with an incarcerated parent by providing the child with resources, whether it is connecting them with other children in similar situations, providing relevant reading materials, or professional connections.

Additionally, mentors can support and help children prepare for the reintegration of the incarcerated parent. Potential sources of conversation can include understanding and dealing with different parenting practices and the adjustment to co-parenting. Another consideration is the current placement of the child (e.g., child welfare, foster care, grandparent), as there could be an abrupt termination to the mentor/mentee relationship depending on the location of the child. It is helpful to have a conversation about separation to protect the attachment style and perception of interpersonal relationships.

Mental health professionals. If a family with an incarcerated parent is seeking assistance from a mental health professional, several clinically relevant strategies can serve as protective factors for the entire family system (Alvord & Grados, 2005). It can be useful to teach children and families problem-solving skills, so they can better identify circumstances and adversities that are controllable versus those that are uncontrollable. When teaching a child, it can also be useful to incorporate role-playing, modeling, and asking questions to determine any necessary adjustments. Additionally, children must be allowed the opportunity to express and experience their emotions without critique. Parental incarceration can be incredibly frustrating, confusing, and scary, especially for younger children; therefore, children must have a safe environment where they can identify, express, and regulate their emotions. Another intervention for families can include identifying and discussing strengths and positive family experiences among each other. These interactions can promote relaxation, healing, connection, and are a means of coping during stressful times. It is also beneficial to foster self-worth and self-esteem in children and this can be addressed by parents, teachers, and other influential adults. Self-esteem can be increased by providing children with opportunities for nurturing their talents, assigning them tasks, and teaching them that mistakes are acceptable and a chance for growth. In addition to self-esteem, it can be helpful to teach children optimistic thinking and perspective-taking. Children should be taught cognitive restructuring and thought stopping so they become aware of their thoughts, assess how realistic they are, generate more accurate explanations, and deescalate negative thoughts. It is also beneficial for the home that the child resides in to maintain order, consistency, and warmth because this encourages their development. In using these clinically relevant strategies, the hope is that these children learn to persevere through adversity and come out more resilient on the other side.

Alvord and Grados (2005) developed the Alvord-Baker social skills group as a practical, proactive, resilience-based model for clinicians to use as a group intervention. The model is based on protective factors in children and contains a five-section curriculum: interactive didactic, free play, relaxation and self-regulation, generalization, and parental. Throughout the group process, children are taught to think, offer ideas, learn new skills, negotiate and interact with others, and practice stress reduction and self-regulation. Once they have gained these skills, they are challenged to practice what they have learned outside of the group with others. Parents are also informed of the skills being taught to their children so that they can provide opportunities for practice. Alvord and Grados suspected that active participation in this group by parent and child either develops or enhances resiliency.

Mesosystem

In this model, the mesosystem could include the child's experience while visiting the incarcerated parent, and it could include the child's involvement in the welfare system due to the incarcerated parent's behaviors. Protective factors will be identified within the criminal justice system and the child welfare system.

Visitation policies. Correctional workers play a significant role in the quality of visitation between an incarcerated parent and child. They have the opportunity to prevent additional traumatization by taking minor considerations while still abiding by their institutional policies. Throughout the research, family-friendly visitation has been emphasized as a protective factor for the child's well-being. Prior to visitation, the rules and process should be clearly and consistently communicated to the children and families. While arriving at the facility, the security procedures can be intimidating and anxiety-provoking; therefore, finding small ways to make this process better can be useful. If possible, decrease the amount of time the child has to

stay in the waiting area, as he or she can become irritable or anxious. Other suggestions for interacting with children include providing small rewards (i.e., stickers) for going through security, offering positive non-verbal and verbal interactions (e.g., smiling, nodding, complementing, speaking in a soft and positive tone).

Most importantly, treat them with respect and equality, regardless of the incarcerated parent's crime. Overall, if the visitation process is less restrictive and more flexible, this can be helpful for the interaction between incarcerated parent and child, for example, allowing the parent and child to hug, hold hands, or simply touch each other, and providing them with as much privacy as possible without interfering with policy. Also, it is crucial to understand that they are children and to use age-appropriate language to correct the behavior if they break a rule. Last, it can be helpful to provide families with a reminder on time limits, so children have the opportunity to say goodbye to their parent appropriately. All of these suggestions are minor, yet can have a significant impact on the quality of interaction between a child, the incarcerated parent, and the criminal justice system.

Child welfare system. If a child is ever removed from the custody of the parent, collaboration between the criminal justice system and the child welfare system is crucial. The abrupt removal of a child from his or her home is traumatic and can be worsened when coupled with parental incarceration. With this collaboration, the child's interests and needs are more likely to be addressed, and if there are any outstanding issues within the family, intervention can be recommended or provided. It is evident that appropriate communication between the two systems is crucial to the healthy development of the child and the positive reunification of the child with his or her parents.

The U.S. Department of Health and Human Services, Office of the Assistant Secretary for Planning and Evaluation, Administration for Children and Families (ACF), U.S. DOJ, and Federal Bureau of Prisons collaborated and developed a guide for incarcerated parents who have children in the welfare system. This resource helps parents stay involved in their children's lives while they are incarcerated and keeps them informed on the reunification process. The Child Welfare Information Gateway (2015) published a bulletin on Child Welfare Practice with Families Affected by Parental Incarceration, which provides information on the intersection between child welfare and parental incarceration. Both of these resources are informative and have the children's health, safety, and well-being at their center. If utilized, it can serve as a protective factor within the mesosystem.

Exosystem

Within the exosystem, there are many protective factors specifically for children and their families. In this model, the focus is on programs for incarcerated parents and policy improvements. Numerous programs exist for incarcerated parents; however, active participation and application are what serves as a protective factor for the family. Loper and Tuerk (2006) reviewed parenting programs for incarcerated mothers and fathers and identified features of the programs that increased effectiveness. Overall, they concluded that parents need to gain an understanding of child development, form meaningful attachments with their children, and use appropriate communication and child management techniques. In addition to focusing on bettering themselves as parents, they need to maintain a support system, address any mental health or substance abuse concerns, and create a healthy relationship with the non-incarcerated caregivers. Participation is an opportunity that these incarcerated parents should be taking advantage of because it can have significant positive effects on the entire family system.

Programs for parents. Several programs have documented positive outcomes for parents and their children, such as Nurturing Parenting, Systematic Training for Effective Parenting, Helping your Child Succeed, Parenting from Prison, Re-bonding, and Rebuilding, Parent-Child Interaction Therapy (PCIT), and the Messages Project (Turney & Goodsell, 2018). Some of the themes within these programs include communication, mental health, alliance with caregivers, emotion regulation, attitudes toward parenting, co-parenting, child development, discipline, problem-solving, and behavior management. Nonetheless, if these programs are not offered at a specific institution, it is useful to search for programs that have any of the aforementioned themes. It is believed that participation in any relevant program can increase knowledge and wisdom, improve relationships with children and families, and encourage and protect child development.

Criminal justice policy. The current criminal justice system in the United States is broken and needs significant policy updates. With regard to parents who are convicted of crimes, it would be beneficial to consider an alternative to incarceration such as substance abuse or mental health treatment, community service, or probation. These alternatives could address the organic issue, create less disruption in the child's life, and protect the child from the detrimental impacts of parental incarceration.

Community support. Another critical factor in the exosystem includes community support. When a parent or family is struggling, community partnerships (e.g., financial, housing, employment) can prevent them from continual suffering. These organizations can contribute to the health and well-being of children and the successful reintegration of an incarcerated parent into society.

Limitations and Implications

Overall, this model was developed to combat the detrimental effects of parental incarceration by identifying the protective factors across the lifecycle and throughout the microsystem, mesosystem, and exosystem. It appears to be a relatively comprehensive model for the microsystem, mesosystem, and exosystem. However, there are some limitations. The current model does not include protective factors within the macrosystem and chronosystem. Therefore, future models should incorporate those systems for a more comprehensive approach to treatment.

Additionally, it could be beneficial to incorporate strategies or interventions for decreasing dynamic risk factors in addition to increasing protective factors among children and families. Last, the current model is most useful for parents, teachers, mental health professionals, and the child welfare system; however, there are other adults (e.g., grandparents, older siblings, extended family) involved in these children's lives that could benefit from guidance and recommendations. By incorporating other adults, the research has an opportunity to provide a more culturally appropriate model.

Presently, empirical research is lacking for the impact of maternal incarceration on children. However, this is the fastest-growing sector in the criminal justice system. Future research should focus on the effects of maternal incarceration, the effects of having both parents incarcerated, and/or repetitive incarcerations throughout childhood. It is also recommended that future researchers empirically evaluate the effectiveness of enhancing protective factors in the ecosystem as a treatment approach for children impacted by parental incarceration. With this knowledge, an effective wrap-around intervention could be developed, which could decrease recidivism rates and safeguard healthy child development.

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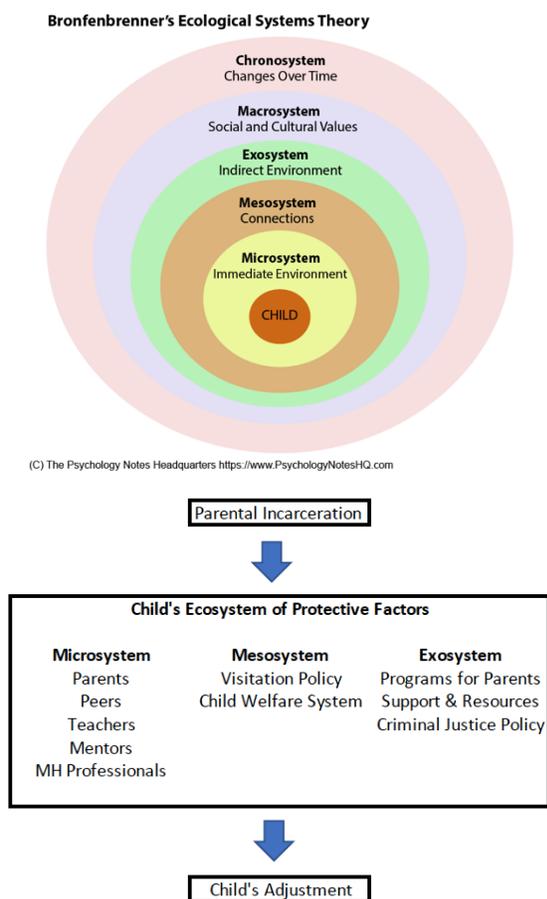
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Appendix A: Handout for Adults

A handout outlining the major aspects of the social-ecological and protective factor approach to managing parental incarceration has been developed. It can be distributed to any adult in the ecosystem of a child experiencing parental incarceration.

MANAGING PARENTAL INCARCERATION: Ecological Systems Theory of Development and protective factors provided the outline for the model. It will concentrate on protective factors within the child and their microsystem, mesosystem, and exosystem.



CHILD

- Achieve developmental tasks on time (reference Erik Erikson's stages of psychosocial development)
- Infancy (attachment, communication, emotions)
- Toddler (language, self-control)
- Early school-age (gender identity, moral development, peer play)
- Middle childhood (friendship, skill learning, team play)
- Early adolescent (physical maturity, thought, problem-solving, reasoning, membership in peer group, romantic/sexual interest)

MICROSYSTEM

Parents

- Maintain a nurturing and loving relationship
- Understand child development
- Create an environment that is conducive to learning and growing
- Understand discipline strategies, boundaries, and developmentally appropriate limits
- Parents need to establish their own support system
- Gain access to resources (The National Resource Center on Children and Families of the Incarcerated, The Child Welfare Information Gateway, Sesame Street in Communities, Saving Kids of Incarcerated Parent (SKIP, Inc.), The Osborne Association, and Children of Incarcerated Parents)

Incarcerated Parents

- Be familiar with the institution's visitation policy and share with family
- Have empathy for child's experience and find ways to prepare them
- Be patient, flexible, ask questions about their day to day life and accomplishments
- Before the visit ends, give the child a warning so they can prepare for the emotional process of leaving their parent behind
- Provide stability, consistency, honesty, and affection

Teachers & Educators

- Be knowledgeable about parental incarceration and the impact it has on children (emotional/economic/social strains)
- Be aware of negative stereotypes and bullying
- Be mindful of "conspiracy of silence"
- Collaborate with the child's parent
- Research community organizations and provide resources
- Develop a positive/open relationship with students
- Implement behavioral and academic supports
- Establish a safe/structured classroom
- Have high and clear expectations/procedures
- Empower (provide choices/options, facilitate problem-solving skills)
- Encourage participation in after school activities
- Serve as mentors and role models
- Combat stigma/shame of parental incarceration

Peers

- Abide by healthy societal norms and rules
- Promote prosocial behavior

Mentors

- Provide friendship, guidance, and opportunity for growth
- Be reliable, trustworthy, and nonjudgmental
- Learn about the child, do not make assumptions, and do not pressure them to share information
- Provide social, cultural, and recreational enrichment
- Gather their hopes/dreams, spend time doing activities they enjoy, expose them to new places and activities
- Provide resources
- Prepare for the reintegration of their incarcerated parent
- Successful mentor match: child has pre-existing difficulties/ exposed to environmental risk, good personality fit, similar interests, mentors assumed teaching/advocacy roles, weekly contact for at least 12 months.

Mental Health Professionals

- Teach children/families problem-solving via role-playing, modeling, and asking questions
- Provide opportunities for children to express, experience, and regulate their emotions
- Identify and discuss strengths and positive family experiences
- Foster self-worth and self-esteem (nurture talents, assign tasks, and teach them that mistakes are acceptable and a chance for growth)
- Teach optimistic thinking and perspective-taking
- Cognitive restructuring and thought stopping
- Group therapy (cognitive strategies, skills, interpersonal, stress reduction and self-regulation)
- Encourage order, consistency, and warmth in the home
- Provide resources

**MESOSYSTEM****Visitation Policy**

- Prior to visitation, rules and process should be clearly and consistently communicated to children/families
 - Decrease time in the waiting room
 - Provide small rewards for going through security, offer positive non-verbal and verbal interactions
 - Correctional staff should treat family with respect and equality, regardless of the incarcerated parent's crime.
 - Less restrictive and more flexible
 - Use age-appropriate language with children if they make a mistake or break a rule
 - Provide families with a reminder on time-limits
- Child Welfare System**
- Resources: Child Welfare Practice with Families Affected by Parental Incarceration; Guide for Incarcerated Parents Who Have Children in the Child Welfare System

EXOSYSTEM**Programs for Parents**

- General: Child development, attachments with their children, communication, maintain a support system, mental health, substance abuse, communication, alliance with caregivers, emotion regulation, attitudes toward parenting, co-parenting, discipline, problem-solving, behavior management, reentry into society
- Specific: Nurturing Parenting, Systematic Training for Effective Parenting, Helping your Child Succeed, Parenting from Prison, Re-bonding and Rebuilding, Parent-Child Interaction Therapy (PCIT), and The Messages Project

Community Support

- Financial, housing, and employment
- Rzero.org
- Jobsforfelonshub.org

Criminal Justice System

- Address organic issue v. criminal behavior
- Alternative to incarceration (substance abuse & mental health treatment)
- Community service
- Probation