Conference Report January 2002

FROM PRISON TO HOME:

THE EFFECT OF INCARCERATION

ON CHILDREN, FAMILIES AND

COMMUNITIES

Department of Health and Human Services Office of the Assistant Secretary for Planning and Evaluation Substance Abuse and Mental Health Services Administration

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FROM PRISON TO HOME: THE EFFECT OF INCARCERATION ON CHILDREN, FAMILIES AND COMMUNITIES

Prepared for:

The Department of Health and Human Services Office of the Assistant Secretary for Planning and Evaluation Substance Abuse and Mental Health Services Administration

by: The Urban Institute

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Disclaimer: This report presents a summary of the presentations and discussions at the state symposium held by the Office of the Assistant Secretary for Planning and Evaluation on November 21, 2001 and the *From Prison to Home* conference held at the National Institutes of Health Natcher Conference Center on January 30 and 31, 2002. These activities were conducted by the Urban Institute under contract HHS-100-99-0003, TO #12 with the Office of the Assistant Secretary for Planning and Evaluation, U.S. Department of Health and Human Services. The report presents the views and opinions of the symposium and conference participants and does not necessarily represent the views, positions, and policies of the Urban Institute or of the funding agencies, the Office of the Assistance Secretary for Planning and Evaluation and the Substance Abuse and Mental Health Services Administration.

From Prison to Home: The Effect of Incarceration and Reentry on Children, Families and Communities

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Acknowledgments

The Prison to Home project was made possible because of the contributions and hard work of more than 400 researchers, practitioners, policymakers, analysts and advocates from the public and private sectors of the criminal justice and human services systems. Helping to frame the issues and ensure a balanced approach was a Technical Review Group comprised of individuals from 30 federal agencies, professional associations and advocacy organizations. Eighteen State officials from Maryland, Nevada, Oregon, Pennsylvania, and Wisconsin took time out of their very busy schedules to travel to Washington D.C. to provide insights from their states experiences in developing innovated practices that linked criminal justice and health and human services systems. The eleven commissioned papers on the effects of parental incarceration on children, families and communities were reviewed by three dozen experts from various disciplines and perspectives throughout the public and private sectors. About 350 individuals participated in the Prisons to Home conference itself, including Assistant Secretaries in the Federal Government, Agency Heads at the State level, nationally recognized academic and program experts, federal and state program and policy staff, and researchers and program practitioners from Massachusetts to California. From the plenary sessions to the small group breakout sessions to the networking discussions over lunch and break, comments were thoughtful, perspectives diverse, and the excitement palpable. Lastly, special thanks are owed to the HHS federal project officers, Evvie Becker and Linda Mellgren of the Office of Human Services Policy, ASPE and Ulonda Shamwell, Women, Children and Family Team, SAMHSA, for their vision and perseverance throughout the life of the project.

I. Introduction to the From Prison to Home Project

An increasing number of children and families in our society are affected by the incarceration of a parent or family member. Relatively little is known about how the incarceration of parents affects the health and well being of children and families, and about the specific service needs of the children and families of inmates. Yet, the circumstances for these families may pose specific challenges for delivering and accessing services.

The importance of this issue for U.S. Department of Health and Human Services (HHS) policies and programs is directly related to the growing numbers of families and children that are affected by the high rates of incarceration. Individuals under correctional supervision and their families are likely to be eligible for or served by HHS-funded programs. For example, some are current or former welfare recipients. The inmate or his/her family may receive health care coverage through the Medicaid or the State Child Health Insurance Program, get health care through primary health care centers and maternal and child health care clinics, and receive mental health and substance abuse treatment in programs funded with state block grant funds. Families with incarcerated parents constitute part of state child support enforcement system caseloads. Some children, especially when the incarcerated parent is a single parent, may be placed in state-financed relative care or the foster care system as a result of the incarceration. Yet having a parent or other close family member incarcerated or under criminal justice supervision usually is not identified as a factor that places children at risk for family disruption, poverty and negative outcomes.

In order to identify program and policy issues for the children and families of incarcerated parents and ex-offenders returning to the community, the Department of Health and Human Services' (HHS) Office of the Assistant Secretary for Planning and Evaluation (ASPE), together with HHS' Substance Abuse and Mental Health Services Administration (SAMHSA), funded a project called "From Prison to Home: The Effects of Incarceration and Reentry on Children, Families, and Communities." The goal of this effort was to help HHS:

- Understand the health and human services needs of incarcerated populations and their families;
- Identify the HHS policies and programs that may have an effect on the outcomes for children and families when a parent or caregiver is incarcerated or released from prison or jail; and
- Facilitate the collaboration among HHS agencies and among HHS and the Departments of Justice, Education, Housing and Urban Development, and Labor so that service strategies address the needs of incarcerated and formerly incarcerated individuals *and* their families.

Assisting in the development process was the Technical Review Group (TRG), invited representatives from across the federal government and from professional and advocacy organizations, which worked together to identify the important questions, review project plans, review documents and provide leadership for conference activities. (See TRG membership at Appendix A.)

The "From Prison to Home" project had four major components. First, ten papers were commissioned to develop a research and practice baseline about this high-risk, high-services use population. Second, a state symposium was held in November 2001 to gain insight into how

states are responding to these issues. Third, a national policy conference was held on January 30-31, 2002 at the National Institutes of Health to discuss the papers and get feedback from policy makers at the federal, state and local level, from practitioners, and from the research community. This invitational conference focused on the identification of research, policy, and program issues at the intersection of health and human services and criminal justice systems. About 350 leaders from criminal justice and health and human services fields participated in the conference. More information on the papers, symposium and conference agenda can be found in Boxes 1 and 2 and at Appendices B and C of the report.

Box 1-- State Symposium

As a part of the "From Prison to Home" project, a State Policy Symposium was held in November 2001 to bring together the collaborating agency heads and other key stakeholders from five states doing innovative and collaborative work for prisoners and their families. Key representatives from Maryland, Nevada, Oregon, Pennsylvania, and Wisconsin participated in the full day meeting.

The purpose of the discussion was to glean insights from the states about the barriers and opportunities for implementing cross-cutting strategies involving criminal justice and health and human services systems. The discussion explored the following critical areas: 1) resource issues involved in implementing collaborative programs; 2) barriers to collaboration and program implementation; 3) partnership building; and 4) lessons learned from collaborative programming focused on this target population. Information gleaned from the meeting was used in developing the agenda and presentations for the national policy conference. Agenda and list of participants can be found at Appendix B.

This final report constitutes the fourth component of the effort. The following chapters synthesize key aspects of the state symposium discussions, conference proceedings and the research papers developed for it. This report is not intended to be a complete record of the conference presentations. Rather, it captures the common themes and salient tensions that emerged and their implications for children, families and communities.

The *From Prison to Home* conference sought to highlight the increasing fiscal and social cost associated with not recognizing and addressing the distinct needs of this growing population, including higher incidences for children of future delinquency and maladaptive behaviors, fractured families, and unstable communities. Participants from across policy, research and practice domains pointed to the critical need to coordinate across systems to simultaneously meet human services and criminal justice system goals. Hopefully the publication of the conference papers and of this report will be part of the continuing discussions about cross-program and multi-disciplinary research and the planning and implementation of service delivery efforts at the federal, state and local levels.

Box 2 – Conference Papers

Conference Theme

The From Prison to Home National Policy Conference was organized around four broad crosscutting themes—the impact of incarceration and reentry on prisoners, their children, families, and communities. In each of these areas, we explored what is known from research and practice, and the opportunities for future policy innovations through a series of discussion papers developed for the conference.

Each of the 10 papers, written by a recognized expert in the field, focused on a specific aspect of the effects of parental incarceration on children, parenting, the prisoner as parent, and the community. The mapping presentation documented— for the first time—in one community, the overlap between populations served by health and human services programs and those who are or have been under criminal justice supervision. All of the papers and the mapping presentation are available on the Urban Institute website (www.urban.org). The Urban Institute Press has publishing revised versions of the papers plus an additional chapter on children and families in an edited volume released in January of 2004.

Impact of Incarceration and Reentry on Individual Prisoners

The Psychological Impact of Incarceration: Implications for Post-Prison Adjustment Craig Haney, University of California-Santa Cruz

Exploring the Needs and Risks of Returning Prisoners Jim Austin and Patricia Hardyman, George Washington University

The Skill Sets and Health Care Needs of Released Prisoners Gerald Gaes and Newton Kendig, Federal Bureau of Prisons

A Woman's Journey Home: Challenges for Female Offenders Stephanie Covington, Center for Gender and Justice

Impact of Incarceration and Reentry on Children and Parenting

Effects of Parental Incarceration on Children: Perspectives, Promises and Policies Ross Parke, University of California-Riverside K. Alison Clarke-Stewart, University of California-Irvine

Adolescent Children of Incarcerated Parents Mark Eddy and John Reid, Oregon Social Learning Center

Prisoners and Their Families: Parenting Issues During Incarceration Creasie Finney Hairston, University of Illinois-Chicago

Impact of Incarceration and Reentry on Communities

Criminal Justice and Health and Human Services: An Exploration of Overlapping Needs, Resources, and Interests in Brooklyn Neighborhoods Eric Cadora

Services Integration: Strengthening Former Prisoners and Their Families While Promoting Community Health and Safety

Shelli Rossman, Urban Institute

Incarceration, Reentry and Social Capital: Social Networks in the Balance Dina Rose and Todd Clear, John Jay College of Criminal Justice

II. Children and Families of Incarcerated Adults: What's at Stake?

More children and families are affected by the incarceration of a parent today than at any other time in our nation's history. The incarceration of a parent may signal a family already struggling with a host of issues such as poverty, household instability, and violence. These conditions can be exacerbated by the arrest and imprisonment of a family member, creating a new, more complicated set of needs that the family brings into the health, human services and criminal justice systems. Until recently, the specific issues facing children and families of prison inmates had not been central to research, policymaking or coordination efforts. Yet, emerging research and observations from practice point to the substantial and adverse consequences of not addressing the needs of this growing population.

The scope and magnitude of parental incarceration has increased, resulting in new and greater challenges for a growing number of families and service providers.

As the number of people incarcerated in the U.S. has risen, so has the number of families and children impacted by incarceration and reentry. Today, there are 1.4 million adults serving time in state or federal prisons across the country.¹ More than half of these prisoners are parents of minor children.² Based on estimates from these prisoners' reports, there are about 1.5 million children with a parent in prison. If we widen the scope to include all forms of criminal justice supervision, more than seven million children in the United States, or about ten percent of all children under age 18, have a parent in state or federal prison, in jail, on probation or parole, or reentering society after a period of imprisonment.³

High rates of recidivism mean that some parents are cycling in and out of prison more than ever before⁴, a process that may cause additional disruption and instability for the child, family, and community to which the offender belongs. Parents entering prison—like all inmates—are considered already to have been at high risk on a number of fronts due to high rates of poverty, infectious disease, substance abuse, mental illness, homelessness and unemployment.

Table 1. Number of Children with Parents underCorrectional Supervision, 2001			
	Parents	Children	
Incarcerated	1,110,400	2,329,400	
State Prison	655,400	1,351,200	
Federal Prison	90,400	198,300	
Local Jails	364,600	779,900	
Community Corrections	2,546,200	5,003,700	
State Probation	2,135,100	4,149,700	
State Parole	361,900	746,100	
Federal Parole	49,200	107,900	
Total	3,656,600	7,333,100	

Source: Mumola 2002

¹ P. Harrison and A. Beck. 2002. "Prisoners in 2001." Bureau of Justice Statistics, Bulletin. Washington, D.C.: U.S. Department of Justice, Bureau of Justice Statistics, NCJ 195189.

² C. Mumola. 2000. "Incarcerated Parents and Their Children." Bureau of Justice Statistics, Special Report. Washington, D.C.: U.S. Department of Justice, Bureau of Justice Statistics, NCJ 182335.

³ C. Mumola. 2002. Presentation for Families Ties colloquium, Washington D.C., October 31, 2002.

⁴ J. Lynch and W. Sabol. 2002. "Prisoner Reentry in Perspective." *Crime Policy Report*. Washington, D.C.: Urban Institute.

These factors suggest that the children and families of many incarcerated parents were already living in tenuous circumstances. Additionally the incarceration of a family member can exacerbate family poverty, stress and trauma.⁵.

The degree to which a child or family is impacted by the incarceration of a parent rests on a number of variables including the age at which the child is separated from his or her parent, the length of the separation, the level of disruption to the household caused by the incarceration, the number and result of previous separation experiences, and the availability of family or community support.⁶

Conference participants recognized that the incarceration of a parent could have mixed effects for children. In some cases, the incarceration of a parent can have positive effects, either because it reduces household stress or because the parent was not adequately caring for the child, as when a parent who was abusive is removed and the abuse is interrupted. At the same time, the child is likely to be attached to the parent, even one who has these negative qualities, and feel the trauma of an abrupt separation. In other instances, incarceration may leave the child worse off, if a positive parental-child relationship is interrupted. The child then may face changes in care giving arrangements, school and social environments, loss of financial support and the stigma of having an incarcerated parent. Even when a child has no ongoing relationship with the incarcerated parent, parental incarceration can still leave the child feeling stigmatized and under increased stress.

There is no government agency responsible for coordinating the overlapping service needs of prisoners and their families, nor any central policy focus driving this work.

The lack of research and policy attention focused on the children and families of incarcerated parents means that health and human service systems and criminal justice agencies may be working in isolation from one another—or, in worst case scenarios, at cross purposes. In fact, the central missions of the health and human services and criminal justice systems often seem at odds.

Several conference speakers stressed that corrections departments are primarily held accountable for inmate security. Their policies are not designed to encourage the maintenance of family relationships, to assess the impact of incarceration and reentry policies on the children and families involved, or to reach out to the community. Human services organizations typically work at the community level, see the family and/or the child as their client, and have little direct contact with the criminal justice system. Because they have different roles, responsibilities, goals and clients, corrections departments and human services agencies often find it difficult to develop the linkages necessary to identify and work with all family members during a parent's incarceration.

⁵ R. Parke and A. Clarke. 2002. "Effects of Parental Incarceration on Children: Perspectives, Promises and Policies." Paper prepared for the From Prison to Home National Policy Conference, January 30-31, 2002, Washington, DC

⁶ R. Parke and A. Clarke. 2002. and C. Seymour. 1998. "Children with Parents in Prison: Child Welfare Policy, Program, and Practice Issues." *Child Welfare*, 77 (5): 469-493.

Many incarcerated parents and their families come from and stay tied to a relatively small number of communities already faced with many disadvantages, including high rates of childhood poverty, TANF receipt, violent crime, and public housing.⁷ There are increasing overlaps between the community members involved in both the health and human services and criminal justice systems so that local systems are increasingly taxed by attempting to meet the needs of returning prisoners and their families. Often it may take a special initiative to take into account the impact of incarceration on these children and families.

Box 3-- State Case Study of Oregon (Families)

About 300 prisoners per month finish their sentences and return to communities in Oregon. In 1999, the Oregon Department of Corrections led a strategic planning effort involving representatives from community corrections offices, the parole board, sheriff's departments, victim's advocates and various human services agencies to develop a reentry plan for the state. The **Transition Project** evolved from those discussions and now has over 300 people from over 70 agencies working to begin planning for an inmates release at the time of sentencing to improve outcomes for returning prisoners.

Findings from a 2000 survey of Oregon prisoners highlighted the importance of family in the reintegration process. The survey results revealed that more than two-thirds of the women and nearly one-fifth of the men in Oregon prisons have minor children and the majority of these parents plan to live with their children after they are released. The survey also showed that the children of these parents had been exposed to domestic violence and substance abuse issues. More than half of the women and one-fourth of the men said that their children had witnessed domestic violence and almost 55 percent of the women and 31 percent of the men reported that their children had witnessed alcohol or drug abuse in their homes.

In February 2000, the Oregon DOC initiated the **Children of Incarcerated Parents Project** (CIPP) as a component of the Transitions project. CIPP provides family orientations at the prison facility, therapeutic visitation and development of a transition plan that addresses various family reunification issues. The Project also involves a partnership with the Oregon Social Learning Center (OSLC) to develop a parent education program. The six-week education course provides inmates with basic information on child development and communication skills and emphasizes hands-on learning by holding supervised therapeutic family visitation sessions. The program is being evaluation by OSLC researchers. A multidisciplinary policy group consisting of legislators, agency administrators, community interest groups, and other stakeholders is overseeing implementation of the Children's Project.

From information provided at State Symposium and Oregon Department of Corrections. http://www.doc.state.or.us/transition_project/welcome.shtml (accessed June 17, 2002)

Generally community agencies are not aware of the types of supports needed to assist with reintegration and how to identify the returning inmate and his or her family so that they can be connected to appropriate resources. Children's lives are mostly centered in the neighborhood in which they live—it's where their families are, their friends are, and where their schools are. Because children are in the process of acquiring skills and forming their identities, the lack of a community response to the impact of parental incarceration and re-entry could have a profoundly negative influence on child outcomes.

⁷ E. Cadora. 2002. "Criminal Justice and Health and Human Services: An Exploration of Overlapping Needs, Resources, and Interests in Brooklyn Neighborhoods." Presentation prepared for the From Prisons to Home National Policy Conference, January 30-31, 2002, Washington, DC.

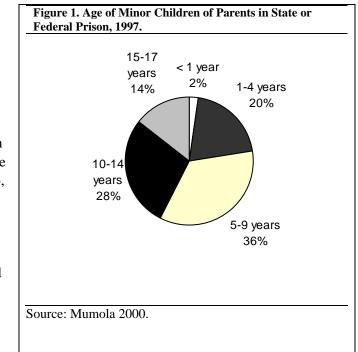
III. Who are the Children and Families Affected by Incarceration and Reentry?

Incarcerated Parents and Their Families

More than seven million children have a parent who is in jail, on probation, parole, or who has recently been released from prison.⁸ Of these children more than 1.5 million children, or about two percent of all children, have a parent in state or federal prison. These children are disproportionately of minority race and ethnicity, African American (51 percent) and Hispanic (20 percent). Most of these children are young. Sixty percent are under the age of ten, and the average age is eight years old.⁹

Parental incarceration signals a child and family already in need.

Conference participants discussed how incarcerated parents and their children often struggle with a host of issues including poverty, homelessness, mental illness, health problems, and substance abuse. The conditions are often present prior to, during and after the parental incarceration period. These conditions are often exacerbated by the arrest and imprisonment of a family member. Many incarcerated parents were considered poor by federal poverty standards prior to incarceration. Often, they were marginally attached to the labor



market prior to incarceration, and those who were employed primarily worked low-wage jobs.

A Bureau of Justice Statistics survey of state prisoners found:

- About fourteen percent of parents reported indications of mental illness.
- Seventy percent of parents in prison do not have a high school diploma.

⁸ Mumola, 2002.

⁹ Mumola, 2000.

- Thirty percent of parents in prison reported being unemployed during the month prior to their arrest. Incarcerated mothers were more likely to be unemployed (50 percent) and receiving government benefits (41 percent) than fathers in the month before their arrest.
- Most parents in prison (85 percent) reported past drug use; the majority (58 percent) had used drugs in the month prior to their most recent arrest.
- Nearly half of all parents in prison were already on probation or parole at the time of their arrest. Over three-quarters of parents in prison reported a prior conviction; and about 60 percent had previously served more than one incarceration or probation sentences. ¹⁰

These parental and household characteristics signal families already struggling with poverty, substance abuse and involvement with the criminal justice system. The incarceration of a parent often further exacerbates existing negative conditions of family poverty, stress and trauma for children. Even in circumstances where removing the parent from the home may have positive benefits for the child, it is still disruptive as children are often anxious about where their parents are and if they are alright. For children who are already living with non-parental caregivers prior to the incarceration, the issues surrounding separation can become exacerbated.

Family living arrangements, the gender of the parent and the nature of the parent-child relationship affect what happens to the child while his or her parent is incarcerated.

The family living arrangements prior to incarceration, the strength of the parent-child relationship, and the gender of the incarcerated parent are among the most salient factors that predict the type of care arrangements provided during parental incarceration and the child's adjustment and needs during that period.¹¹ These differences have implications for the types of health and human services that might be required.

Gender	Percent
Male	92.6
Female	7.4
Race/Hispanic Origin	
White non-Hispanic	28.9
Black non-Hispanic	49.4
Hispanic	18.9
Other	2.8
Age	
24 or younger	15.8
25-34	44.9
35-44	32.1
45-54	6.0
55 or older	0.6
Median Age	32 years
Marital Status	
Never Married	47.7
Married	23.0
Divorced	20.5
Separated	7.2
Widowed	1.6

¹⁰ Mumola, 2000.

¹¹ Parke and Clarke, 2002.

	Total	Male	Female
Prisoners with minor children	55.4	54.7	65.3
Lived with children prior to admission	45.3	43.8	64.3
Child's current caregiver			
Other parent	85.0	89.6	28.0
Grandparent	16.3	13.3	52.9
Other relatives	6.4	4.9	25.7
Foster home or agency	2.4	1.8	9.6
Friends, others	5.3	4.9	10.4

Imprisoned parents are predominately male (90 percent), though the number of mother in prison has nearly doubled in the past decade.¹² This means that most children who experience the loss of a parent through incarceration are experiencing the loss of a father. Incarcerated fathers are less likely than mothers to have been living with their children prior to prison, 44 percent of incarcerated fathers report living with their children or not, they are typically still involved in their lives through time spent together and financial support.¹³ Prior to the incarceration of their fathers, children typically resided with their mothers, or their mothers and fathers, so they may not experience an immediate change in household arrangements, even if there is a change is family structure. The families may also experience financial strain when the income provided by the father is lost due to his incarceration.

Female prisoners are more likely than male prisoners to: have children; be living with their children at the time of their arrest; and be single parents, leaving no other parent behind with the children. Austin, Irwin and Hardyman cited a Florida study that found that seventy-nine percent of the children of incarcerated mothers were in the care of a family member <u>other</u> than the father,¹⁴ whereas eighty-five to ninety percent of the children of incarcerated fathers are in the care of the child's mother.¹⁵ In addition, female prisoners are at risk along a number of dimensions. They report extensive histories of drug use and of physical and sexual abuse; and, as

¹² Mumola, 2000.

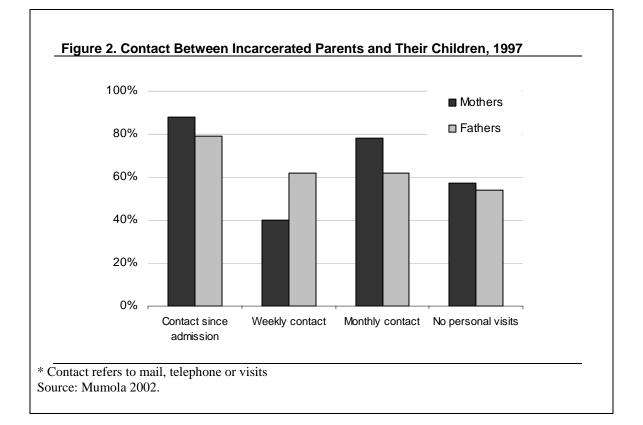
¹³ C.F. Hairston. 1995. "Fathers in Prison." In *Children of Incarcerated Parents*. New York: Lexington Books, and C.F. Hairston. 2002. "Prisoners and Their Families: Parenting Issues During Incarceration." Paper prepared for the From Prison to Home National Policy Conference, January 30-31, 2002, Washington, DC.

¹⁴ J. Austin, J. Irwin, and P. Hardyman, "Exploring the Needs and Risks of Returning Prisoners," 2002. Paper prepared for the From Prison to Home National Policy Conference, January 30-31, 2002, Washington, DC.

¹⁵ Mumola, 2000, and Austin, Irwin and.Hardyman. 2002.

compared to their male counterparts; they have poorer employment histories, fewer financial resources, and fewer economic resources.¹⁶

It would not be accurate, however, to say that more children are at risk because mothers are in prison than because fathers are in prison-primarily because the number of children affected by the imprisonment of men is so much larger than the number of children affected by the imprisonment of women. For example, the proportion of mothers living alone with their children one month before arrest (slightly less than 50 percent) is more than three times the proportion of fathers living alone with their children (about 15 percent). However, because so many fathers are in prison compared to mothers, the number of children potentially needing alternative care arrangements because of a single father's arrest was about 190,000, compared to about 60,000 for single mothers.¹⁷



Conference presenters and participants noted that maintaining ties with family members during a parent's prison term—particularly between the inmate and the other parent or caregiver, and between the parent and child—can be difficult. Prison visits can be humiliating for family members. Inmates are often held in facilities far from where the family lives. Visiting hours are often predicated on prison schedules, not when public transportation might get a person to the facility or on when families might be most likely to be able to visit. Having to arrange private

¹⁶ S. Covington. 2002. "A Woman's Journey Home: Challenges for Female Offenders." Paper prepared for the From Prison to Home National Policy Conference, January 30-31, 2002, Washington, DC.

¹⁷ Based on extrapolations from Mumola, 2000, "Incarcerated Parents and Their Children"

transportation and lodging can make visits costly. In addition, phone calls can be financially prohibitive. In some institutions, a weekly 30-minute telephone call can cost \$125 per month. Conference participants noted how these types of prison policies contribute to the breakdown of relationships with families because it is difficult to stay in touch over time.

Table 4. Contact Between Incard and Their Children, 1997	cerated Parents	
	Mothers	Fathers
Contact since admission	88%	79%
Weekly contact	40%	62%
Monthly contact	78%	62%
No personal visits	57%	54%
Source: Mumola 2000.		

Incarcerated parents face a number of challenges when returning home that translate into challenges for their families.

Most incarcerated parents will be released from prison while their children are still minors. For fathers in state prisons the average time served is 80 months, for mothers 49 months. Many hope to resume their parenting responsibilities and re-establish family relationships. In doing so, the majority will face many of the same challenges and barriers they faced prior to incarceration, plus the added psychological, social and economic costs that the prison experience can impose. These challenges might include: heightened mental and physical health problems; addiction; homelessness; strained connections to family; the culture shock of moving from the imposed order of prison to a lack of predictability; and the implications of having a felony conviction on finding work.¹⁸

Box 4 -- State Case Study of Nevada

In Nevada, working relationships between the Nevada Department of Corrections and state public health agencies have proven to be successful. Addressing the physical and mental health needs of released inmates is important in their transition to their families and communities. The State of Nevada hosted a summit in April 2000 focusing on the collaboration of correctional and public health agencies to provide health services for offenders before and after release. Areas of care discussed at the summit include: HIV/AIDS care, mental health, sexually transmitted diseases, substance abuse, and tuberculosis.

Before the summit, Nevada inmates infected with HIV left prison without an adequate supply of medications, nor were they directed to community medical clinics or other support services in their home communities. To address this need, state and community agencies established the Prison Discharge Planning Program, providing continuity of care and support for HIV-infected offenders when they leave prison. With the establishment of the Discharge Planning Program, inmates are provided a 30-day supply of HIV medications upon release. Appointments are also made for inmates at HIV clinics within 30 days of their discharge, to ensure that they will receive post-release care. Case managers also refer HIV-infected

¹⁸ J. Travis, A. Solomon, and M. Waul. 2001. *From Prison to Home: The Dimensions and Consequences of Prisoner Reentry*. Washington, DC: The Urban Institute.

offenders to other support services, including housing, transportation, and substance abuse treatment. This collaboration between agencies has increased treatment and reduced recidivism within this population.

Another partnership between corrections and public health in Nevada was a 12-month pilot project to screen female inmates for breast and cervical cancer. The Women's Health Connection (WHC), part of Nevada's Health Division, conducted screenings to 499 incarcerated women at a prison facility in Las Vegas. WHC staff also worked with in-prison medical services and community health services to ensure further diagnosis and treatment for these women. Based on the pilot program's success, the WHC has planned on establishing further collaborations with other women's facilities in Nevada.

From information provided at State Symposium and Nevada State Health Division website at: http://health2k.state.nv.us/hiv/summit/index.htm and http://health2k.state.nv.us/hiv/summit/outcomes.htm (accessed June 26, 2002).

The extent and nature of the challenges facing returning prisoners is predicated on the individual characteristics and circumstances of the person. An inmate who entered prison at age 18 for a violent crime and returns home at age 34—without ever having lived on his own, held a job in the private labor market, or established a relationship with a now teenage daughter—faces a different set of challenges from the inmate who entered prison at age 33 for a drug crime and is released nine months later, having had a solid work history prior to incarceration, access to drug treatment while incarcerated and some hope that eventually he may be able to reunite with his family and support his three children.

The ways in which inmates learn to adapt in the prison environment can be counterproductive to developing skills needed on the outside.¹⁹ Prisons, by their very nature, are extremely controlled and stressful environments structured on hierarchy, routine, and restricted movement and behavior. Returning home, parents who have become dependent on the institutional structure and routines imposed upon them during incarceration cannot organize the lives of their children well. Re-establishing trust and intimate relationships is often difficult. The tendency to withdraw emotionally and remain aloof is counter to the open communications needed in healthy family settings.

Given that nearly all prisoners eventually return to their families and communities, prison could provide an opportunity to improve inmates' job and life skills, treat their addictions and prepare them for life after prison. Research suggests that in-prison programs followed by community-based treatment and services can be effective in ensuring a successful reintegration.²⁰ However, relatively few prisoners receive treatment or training while in prison and even fewer receive coordinated services that continue upon their release back to the community. The lack of access and connection to community-based services as a parent transitions from prison to home has direct implications for issues of family violence, homelessness, health, satisfactory parenting and child substance abuse and delinquency. It can also contribute to unemployment and under-

¹⁹ C. Haney. 2002. "The Psychological Impact of Incarceration: Implications for Post-Prison Adjustment." Paper prepared for the From Prison to Home National Policy Conference, January 30-31, 2002, Washington, DC.

²⁰ G. Gaes, T. Flanagan, L. Motiuk, and L. Stewart. 1999. "Adult Correctional Treatment." In Prisons, edited by M. Tonry and J. Petersilia. Chicago: University of Chicago Press and G. Gaes and N. Kendig. 2002. "The Skill Sets and Health Care Needs of Released Prisoners." Paper prepared for the From Prison to Home National Policy Conference, January 30-31, 2002, Washington, DC.

employment, adding stress to the household and, where applicable, an inability to pay child support.

The Community Context

In many States the incarcerated population is increasingly concentrated in a relatively small number of communities where there is substantial overlap between the populations served by the health, human services and criminal justice systems.

Several of the conference presentations and discussion sessions emphasized that high levels of poverty and the resulting reliance on public benefit programs are characteristics of the communities that inmates return to. Conference participants observed that overlapping rates of poverty, public assistance, public housing and incarcerated and paroled resident populations may be related to high levels of residential mobility, lack of community trust and cohesiveness, and increased stress upon already stressed community resources.²¹ These high concentration areas can create "cumulative risk"—especially for children—due to the presence of so many coinciding negative factors.²² The result is that children are affected not only by incarceration of their own family members, but from living with the effects of incarceration in the community at large.

Presenters indicated that there is growing research evidence for the idea that when incarceration and return rates hit a certain tipping point, they might actually result in higher crime rates because the neighborhood becomes increasingly unstable.²³ This instability can undermine the development of a community's social network; family formation; informal responsibility for the oversight of children; and the resources available for the families left behind. In addition to the risks this poses for the children, families and community members of these neighborhoods, these community attributes also have an impact on prisoner recidivism and public safety, creating a self-perpetuating cycle of crime, incarceration and return.²⁴

The concentration of social and economic disadvantages in a relatively few communities strains existing public resources and social, religious and individual support systems.

Conference participants noted that although a significant amount of public resources are being spent in these high concentration communities, there is little coordination among the various public and private agencies or across the criminal justice and human services systems. Participants expressed concern that former inmates and their family members may be receiving services from multiple agencies and systems with little recognition of how their service needs are related. Mention was made of a 1998 survey of state welfare agencies by the Child Welfare

²¹ Also see D. Rose and T. Clear. 2002. "Incarceration, Reentry and Social Capital: Social Networks in the Balance." Paper prepared for the From Prison to Home National Policy Conference, January 30-31, 2002, Washington, DC.

²² See R. Parke and A. Clarke-Stewart, 2002.

²³ T. Clear, D. Rose, and J. Ryder. 2001. "Incarceration and the Community: The Problem of Removing and Returning Offenders." *Crime and Delinquency* 47 (3): 335-351.

²⁴ D. Rose and T. Clear, 2002.

League of America that found that most agencies did not systematically collect data on parental incarceration. Conference participants noted that families may be placed in public housing without considering how that placement may make it impossible for a returning prisoner to stay, or even resume contact, with his/her family, whether that family is a parent, sibling, wife or child, because of public housing restrictions. This lack of coordination can result in significant service gaps and strained support systems. One study of Brooklyn neighborhoods found that in some high-incarceration neighborhoods annual expenditures for incarcerating and returning residents are more than a million dollars.

Box 5—Case Study of Overlapping Needs in Brooklyn Neighborhoods

To make the concept of community concentrations more concrete, one of the conference presentations focused on specific neighborhoods in Brooklyn with high rates of resident incarceration and return. In some Brooklyn neighborhoods, one out of eight parenting age males is admitted to jail or prison every year. These neighborhoods experience nine times more admissions to jail and prison each year than the neighborhoods with the lowest rates of resident incarceration. Prisoner return is just as concentrated in Brooklyn. Eleven percent of block groups (small areas within census tracts) account for 20 percent of the total population in Brooklyn, yet are home to 50 percent of the parolees.

This analysis found a number of ways in which health and human services population and criminal justice populations overlap with one another at the community level. Focusing only on two high-incarceration census tracts in Bedford Stuyvesant in Brooklyn, researchers found high concentrations of human service needs and criminal justice involvement. There were high levels of receipt of needs-based-assistance programs: over one-quarter of families were receiving some form of public assistance; two-thirds were living in public housing and half of all children under age18 were in households receiving public assistance. Layered on top of these needs, there are high levels of criminal justice system involvement. Approximately 11 percent of adults were incarcerated in one year and five percent of those had been arrested for a drug crime. An estimated six percent of incarcerated adults in these two neighborhoods were parents.

Total Population	7,605	
Adults 18 and over	4,850 (64%)	
Children under 18	2,755 (36%)	
Children under 5	632 (5%)	
Public Assistance		
Residents on public assistance	1,989 (26%)	
Residents in public housing	5,077 (67%)	
Children <18 on public assistance	1,498 (54%)	
Children <5 on public assistance	522 (83%)	
Criminal Justice System Involvement		
Adult residents incarcerated in 1 year	520 (11%)	
Adult residents on probation or parole	206 (4%)	
Adult residents incarcerated for drug crime in 1 year	238 (5%)	
Adult parents incarcerated in 1 year	286 (6%)	

Criminal Justice and Public Assistance Populations in Two Bedford Stuyvesant Census Tracts (253, 255)

From Criminal Justice and Health and Human Services: An Exploration of Overlapping Needs, Resources, and Interests in Brooklyn Neighborhoods, conference presentation by Eric Cadora, January 2002.

This estimate does not include the related costs of law enforcement, judicial processes, probation, parole or juvenile incarceration. In these same neighborhoods, there are also high levels of other public expenditures—public assistance programs like TANF, food stamps, Medicaid and public housing. Conference participants discussed whether a more coordinated approach to using these community resources could result in more comprehensive services and better outcomes for the recipients.²⁵

²⁵ S. Rossman. 2002. "Building Partnerships to Strengthen Offenders, Families and Communities." Paper prepared for the From Prisons to Home National Policy Conference, January 30-31, 2002, in Washington, DC.

IV. What are the Consequences of Incarceration and Reentry for Children, Families and Communities?

The Incarceration Period

Children whose parents have been incarcerated can experience a range of negative outcomes. Understanding the impact of parental incarceration on children is complicated because these outcomes may be related to any number of conditions—the parent-child separation, the crime and arrest that preceded incarceration, or general instability, poverty and inadequate care at home. Further, the degree to which a child is affected by incarceration of a parent rests on a number of variables including the age at which the child is separated from his/her parent, the length of the separation, the level of disruption caused by the separation, the number and result of previous separation experiences, and the availability of family or community support.²⁶ Even though these conditions complicate research efforts on the specific effects of incarceration on children, there are findings from research and practice that can be useful to health and human service policymakers.

Parental incarceration is likely to be associated with a range of negative child development outcomes.

Children go through critical developmental stages that are the formative bases for adulthood. Understanding and addressing these developmental needs within the context of parental incarceration can be critical to promoting child well being. Two of the most immediate responses to the incarceration of a parent are the trauma and uncertainty associated with the abrupt loss of a parent and changes in the household. This abrupt loss can result in new care giving arrangements, separation from other siblings, household income loss, relocation, and changes in schools and friendship networks.

Children experience the abrupt loss of a parent as a traumatic event regardless of the circumstances surrounding the parent's departure.²⁷ Yet, some separations are particularly disturbing for children. For example, of the children whose mothers are incarcerated, one in five are present at the time of her arrest and witness the mother being taken away by authorities. More than half of the children who witness this event are under age seven and in the sole care of their mother at the time. Children who are in school at the time of the arrest may return home to an empty house, unaware of the arrest of their mother or father.

This situation is exacerbated when there is confusion about what has happened to the parent. An estimated seventy-five percent of parents or caregivers do not adequately explain to the child what has happened to the parent who is gone. Well-meaning caregivers keep basic information

²⁶ C. Seymour, "Children with Parents in Prison: Child Welfare Policy, Program, and Practice Issues." *Child Welfare*, 77, 5, 469-493, September/October 1998.

²⁷ R. Parke and A. Clarke-Stewart. 2002.

from the children to protect them, but the literature on children's coping suggests that uncertainty and lack of information undermines children's ability to cope, leading to greater anxiety and fear.²⁸ Reactions can include the inability to form attachments with others, numbing, anger, depression, and other mal-adaptive behaviors. These reactions occur even when a disruptive, abusive and/or addicted parent is removed from the home--a circumstance that may have positive long-term effects--as the child may still be attached to a parent who has all of these negative qualities.

Children also experience the stigma of having a parent in prison. For most children, the stigma of losing a parent to prison is felt in their neighborhood, among their peers, and from their teachers and family members, often resulting in feelings of shame and low self-esteem. Typically, there are no specific programs in schools or communities for this population of children to help them cope with the loss of a parent to prison.

Over the long-term, the stress and disruption that can be caused by parental incarceration, when not managed well, can have a profound impact on the children left behind—particularly if the parent-child relationship was strong prior to incarceration. By the time children of incarcerated parents reach adolescence, many already have had multiple experiences with parental crime, arrest and incarceration.²⁹ Research has found that many adolescents whose parents were incarcerated exhibit problems including depression, delinquency, and difficulty getting along with others in a variety of settings.³⁰ Conference participants noted other potential outcomes for adolescents whose parents are incarcerated, including: the rejection of limit setting by adults; poor school performance; and negative perceptions of the police and the legal system. There is also evidence to suggest that children of incarcerated parents are at high risk of future delinquency and/or criminal behavior.³¹

Family functioning and structure may change during parental incarceration.

The most immediate changes experienced by the family of an incarcerated parent can be changes in family composition, childcare arrangements, and financial support. The impact of parental incarceration on family and child functioning varies depending on whether the parent sent to prison is the sole caregiver and the extent to which the family has a strong social or kinship network that can continue to care for the child/children.

If the father already was absent from the home, incarceration may have no effect on family structure but may affect family functioning because the elimination of financial and emotional support disrupts the mother's ability to provide care for the children. If the father was present in

²⁸ L. Wright and C. Seymour. 2000. "Working with Children and Families Separated by Incarceration." Washington, DC: Child Welfare League of America.

²⁹ D. Johnston, *Jailed Mothers*, in *Children of Incarcerated Parents* edited by K. Gabel and D. Johnston: 41-55, New York: Lexington Books and A. Stanton, *When Mothers Go to Jail*. Lexington, MA: Lexington Books, 1980.

³⁰ M. Eddy and J. Reid. 2002. "Adolescent Children of Incarcerated Parents." Paper prepared for the From Prison to Home National Policy Conference, January 30-31, 2002, Washington, DC.

³¹ D. Johnston and K. Gabel. 1995. "Incarcerated Parents." In *Children of Incarcerated Parents* edited by K. Gabel and D. Johnston: 3-20. New York: Lexington Books.

the home and employed, his removal will place a greater financial and care burden on the remaining parent.

When the only parent present in the family home is incarcerated, children are most likely to be placed with a related caregiver—a grandparent or other family member. For these families, adjustment to the new care giving arrangements may be less stressful because the child already has a relationship with the new caregiver. Caregivers who had little contact with children prior to incarceration will have to establish themselves as the new parent figure and develop a relationship with the child. Contributing to the trauma of this changing family structure, the children of both male and female prisoners are sometimes separated from their siblings during incarceration because caregivers may not be able to care for the entire sibling group.³²

Incarceration, because it disproportionately affects families living in poverty, contributes to further economic hardship among the families and caregivers. Caregivers often struggle to make ends meet during the period of incarceration of the child's parent. In many cases, they rely on public assistance. One study conducted in the mid 1990's estimated 45 percent of families caring for children of an incarcerated parent reported relying upon AFDC. The Temporary Assistance to Needy Families Program (TANF) program, which replaced AFDC following passage of welfare reform in 1996, may have disproportionately reduced reliance on welfare as a form of support for families both during and following incarceration. Although implementation of policies varies from state to state, in general the TANF program has a life time eligibility of a maximum of 60 months for federally funded benefits, has work requirements for caregivers who receive benefits, and places restrictions on those who have violated probation or parole and those who have been convicted of certain drug crimes.³³ TANF allows certain children to receive benefits for longer than 60 months when no adult is also receiving benefits as the family caregiver, however, there is no information on the number of child-only TANF cases where a parent is incarcerated.

Maintaining parental support and family ties during prison is often difficult, but can result in positive outcomes for both the children and the parents.

Many parents want to continue their role as a parent while incarcerated. Nearly two in three state prisoners reported at least monthly contact with one of their children by phone, mail or, less frequently, personal visits.³⁴ More than sixty percent of both mothers and fathers report at least weekly contact with at least one child while in prison. Regardless of the gender of the parent, the parent-child relationship is often continued during the incarceration period. About 80 percent of prison inmates report having some type of regular contact (phone, mail or visits) with their children,³⁵ but over half report never having received a personal visit. The most often cited reasons for not visiting are the distance required to travel to the prison and lack of transportation.³⁶ A parent's ability to maintain contact with his/her children also often depends

³² C.F. Hairston. 1995. "Fathers in prison." In *Children of Incarcerated Parents* edited by K. Gabel and D. Johnston: 31-40. New York: Lexington Books.

³³ S. Phillips and B. Bloom, "In whose best interest? The impact of changing public policy on relatives caring for children with incarcerated parents." *Child Welfare*, 77, 5, 531-542, September/October 1998.

³⁴ C. Mumola, 2000.

³⁵ C. Mumola, 2000.

³⁶ C. Hairston 2002.

on the quality of the relationship with the caregiver of the children. If this relationship is strained, incarcerated parents' relationships with their children may also become more tenuous.

Box 6—Case Study of Pennsylvania (Fathers)

The State of Pennsylvania offers innovative fatherhood programs and emphasizes the role of parenting for individuals in Pennsylvania's correctional facilities. In March 1999, The Pennsylvania Department of Corrections (DOC) conducted a survey to learn more about the families of prisoners in Pennsylvania state prisons. Of the 638 inmates surveyed, 55 percent reported having one or more children under the age of 18. At the time of the survey, these inmates parented a total of 717 children under the age of 18.

These survey results led to a partnership with the **National Fatherhood Initiative** (NIF) in order to create fatherhood programs in the prison system. The Pennsylvania Fatherhood Initiative is a collaborative multi-agency effort with the Departments of Corrections, Health, Public Welfare, Education, Labor and Industry, Community and Economic Development, and the Board of Probation. This multi-agency effort between the criminal justice system and the health and human services system works with local communities to create parenting programs.

The Pennsylvania DOC, the NIF, and the Father Workshop (an affiliate of NIF) have been working closely to develop ways to successfully transition fathers from prison to homes. In 1996 the program **Long Distance Dads** was initiated at the state correctional facility at Albion, Pennsylvania in an effort to decrease recidivism. Long Distance Dads focuses on character building, communication skills, responsible parenting, and works with community outreach programs to help fathers transition from prison to being with their family. The main components of the program involve developing skills to becoming more involved fathers and empowering fathers to take financial and emotional responsibility for their children. The program also aims to meet the psychological and physical needs of the incarcerated fathers. Long Distance Dads has been implemented in 19 of Pennsylvania's prisons.

In June 2001 researchers from Penn State University, Behrend College, and the Center for Organizational Research and Evaluation (CORE) released their evaluation findings on the Long Distance Dad's program. The CORE evaluators conducted a process evaluation to determine how the program was being implemented. The findings revealed several strengths about the program such as, the staff's support of the program, the overall inmate view of the program, and the level of understanding the inmates had about what the program was trying to accomplish.

From information provided at the State Symposium, the Pennsylvania Department of Corrections website at <u>http://www.cor.state.pa.us/programs5a.html</u> (accessed May of 2002) and CORE Evaluation materials.

For parents whose children enter the foster care system due to their incarceration, conference participants expressed concern about permanent family break-up. The Adoption and Safe Families Act (ASFA) of 1997 allows states to seek termination of parental rights and concurrently secure a qualified adoptive family on behalf of any child, regardless of age, that has been in foster care for 15 out of the most recent 22 months. The purpose of this act is to keep children from being shuffled from one home to another, which may sometimes result in parental rights being terminated due to the length of time of the incarceration.

Parents' advocates at the conference argued that many incarcerated parents have positive parentchild relationships and that children can be worse off if parental rights are terminated. On the other side, child advocates contended that many children have spent critical developmental years in foster care and temporary environments and that the reason for parental absence (e.g., jail, prison) is not a significant factor for waiving ASFA time limits. They indicated that when there are no family caregivers to step in, the length of time that the child is without the parent should be the main concern. If a permanent placement is possible outside the family, that could be a sufficient reason for termination of parents' rights. Conference participants were concerned that AFSA might have unintended consequences because parents would be afraid to tell authorities that they had children in their care. A number of conference participants indicated there is a critical need for research to measure the impact of AFSA on the well being of children and the well being of incarcerated parents.

Research presented at the conference suggests that maintaining parent–child relationships during incarceration, when appropriate to do so, can have a positive outcome for both children and parents.³⁷ In addition, this research indicates that family variables, such as parental attachments and nurturing, are important correlates of whether children engage in delinquent behavior. Studies also show that continued parent-child contact during incarceration may help mitigate the negative effects of separation and ease parent-child reunification upon the parent's release from prison, and also reduce parental recidivism and foster positive offender reintegration into the community.³⁸

Child welfare advocates and other conference participants cautioned that high-quality assessments of the children, parents, and correctional facility environment must be conducted to determine the appropriateness of child-parent visits in a given case. In addition, well-qualified staff inside and outside the facility need to monitor how children are coping with visits to their parents.

Reentry into the Family and the Community

The process of coming home is a complex one for all involved. A prisoner's family may not be willing to accept him or her back; old peer groups stand ready to support the resumption of criminal habits and drug and alcohol abuse; and mental and physical health issues may have been exacerbated in prison.

The incarcerated parent comes home to children that have grown and developed during the parent's period of incarceration. Often the parent is unaware of the developmental changes or not prepared to handle them. New relationships are commonly formed between children and other caregivers during the period of the incarcerated parent's absence. Changes have likely taken place between the inmate's partner or spouse and/or with the inmate's child's other parent. Thus, the inmate is often returning to a revised family system without clear roles or responsibilities. They must confront a process of reestablishing bonds and parental authority with children, even though they have had relatively limited contact with them while in prison.

³⁷ C.F. Hairston, 2002, "Prisoners and Their Families: Parenting Issues During Incarceration" and J. Jeffries, S. Menghraj, and C.F. Hairtson. 2001. "Serving Incarcerated and Ex-Offender Fathers and their Families: A Review of the Field." New York: Vera Institute of Justice.

³⁸ C. F. Hairston 2002.

Overcoming the prison experience takes time and effort.

Life in a prison environment is itself an experience that can be counterproductive to family togetherness, parent-child attachments, and intimacy. It can compound the challenges of post-prison adjustment. A major task for returning inmates is "taking off the prison psychology."³⁹ Some research suggests that the task of undoing the psychological harm of prison is even more difficult than in the past because conditions in prisons have made them become more difficult places in which to adjust and survive.

According to Haney, there have been substantial changes in prison environments over the past twenty-five years including:⁴⁰

- Widespread overcrowding;
- A philosophical shift from a rehabilitative model to a punishment model, with accompanying implications for programs and services: and
- More punitive approaches to corrections and corrections management (such as the use of isolation or "supermax" confinement).

Haney also pointed out that the way in which the culture of the prison environment influences inmate behavior happens gradually over time as the inmate becomes more accustomed to the restrictions that prison life imposes.⁴¹ The rigors of prison life require inmates to give up the freedom to make their own choices and decisions. Inmates are given direction on basic day-to-day decisions such as when they will eat, work and sleep. Over time, it is not uncommon for some inmates to become dependent on the structure and schedule of the institution to organize daily life. Parents who return home accustomed to imposed external structure and control often find it difficult to re-integrate into community and employment settings, and often cannot effectively communicate with or organize the lives of their children. Additionally, prison itself, because of the conditions and mix of violent and non-violent offenders may result in inmates becoming hyper-vigilant, suspicious, distrustful, and withdrawn. For inmates with mental illness or developmental disabilities, negotiating the prison environment is particularly difficult.

Many conference participants expressed their belief that vocational and occupational training, assistance in establishing and strengthening ties to families, and prison decompression programs that allow inmates to understand the psychological impact of their incarceration and develop strategies for functioning in the world outside can assist in "undoing the harm" of incarceration. Additionally, as pointed out by Gaes and Kendig, addressing inmates skill needs such as, employment and parenting, does not produce or ensure a change in an inmates motivation to learn and change. There are all kinds of factors associated with criminal conduct—both individual and societal—and to change changing those behaviors we must know how interventions affect underlying deficiencies.⁴²

³⁹ C. Haney. 2002.

⁴⁰ C. Haney, 2002.

⁴¹ C. Haney, 2002.

⁴² G. Gaes and N Kendig, 2002

Building and renewing child and family relationships is a key element for successful reentry.

There was general concern expressed in many break-out sessions that transitions back to the community often occur with little input from or coordination with the prisoner's families. Expectations often differ between the offender and his or her family. Involving inmates' families in the process of prisoner return can help to support healthy family functioning and successful family reintegration. Participants seem to agree that there has been very little research on understanding what happens to family relationships during incarceration or what can be done to support them.

There was substantial agreement that there are many caring and committed mothers and fathers who want to resume their parenting roles upon release. As discussed earlier, the task of reuniting returning parents with their children and families, when appropriate, is a complex one, as children and families change and reorganize while parents are incarcerated. A variety of factors affect the re-establishment of child and family relationships: family violence; the parent-child relationship prior to and during incarceration; the relationship between the current caregiver and the child; the relationship between the caregiver and the incarcerated parent; and the availability of services to help manage the transition back to the family. These factors are discussed briefly below.

• *Family Violence*. Participants indicated that very little is known about the implications of reentry for violence. While a small percent of inmates are incarcerated specifically for domestic violence offenses, it is generally believed to be an underestimate of the number of prisoners with family violence in their histories. There is little, if any, attention paid to the special reentry planning needs of those with a history of domestic violence.

For families whose members have been victims of family violence extra care and consideration is needed in helping them during the prison term and in planning for the release of the parent implicated in past violent behavior, whether or not they seek to reunify.

For those individuals with a history of domestic violence, the issue should be addressed in the context of prisoner reentry and child and family reunification. For mothers, this would include addressing the impact of domestic violence experienced prior to imprisonment as well as threat of harm post-release. For fathers, this would include the safety of the family members to whom he may return. Most prisoners, even those with identified histories of domestic violence, have not participated in "batterer intervention" programs in prison because these programs are not available to them or are of limited effectiveness.

• **Parent-Child Relationship**. What happened before incarceration and during incarceration is extremely important for determining the appropriateness of building or strengthening parent-child relationships when parents are released. Some children may have been so young and/or contact during incarceration so limited that the parent is no longer emotionally present for the child. Relationships have to be started from scratch, because the parent is like a stranger to the child. Other children may have been traumatized by the events leading up to the arrest and incarceration or have developed very negative feelings towards the returning parent. Some children may have been abused or witnessed abuse by the parent. For these children, restarting the parent-child relationship may take professional interventions. Children may

need to be assessed to determine if re-establishing the relationship will enhance or decrease child well being. Parents, too, may need to be assessed to determine their competence to re-establish appropriate parenting.

Box 7--State Case Study of Maryland (Health)

Recognizing the increase of individuals with mental health and/or substance abuse issues in the justice system, criminal justice and human services agencies in Maryland have coordinated to provide more comprehensive community services for people with co-occurring disorders. The Maryland Department of Health and Mental Hygiene (DHMH) initiated the creation of the **Maryland Community Criminal Justice Treatment Program** (MCCJTP). The MCCJTP is an example of collaborative effort among agencies from the criminal justice system and the public health system. The program, which provides intensive case management to individuals with co-occurring mental health and substance abuse problems in the criminal justice system, has been implemented in 23 local jurisdictions. Maryland's MCCJTP focuses on meeting the needs of this special population and on reducing recidivism to psychiatric hospitals, prisons, and shelters.

Phoenix Project. The DHMH Division of Special Populations has also received funding from the Substance Abuse and Mental Health Services Administration (SAMHSA) for the Phoenix Project in Wicomico County, Maryland. The Phoenix project is closely coordinated with MCCJTP and is a jail diversion project for women with co-occuring disorders. This program aims to meet the multiple needs of women. Intensive case management services are provided in which case managers develop goals with the women and help them obtain assistance such as domestic violence services. A key element to the program is the provision of on-site mental health and substance abuse treatment. The issues of the women's children are also addressed and the project provides services and advice on childcare, reunification, parenting classes, and mental health services for the children. The program also connects the women with educational and vocational programs as well as housing. Finally, the Phoenix project recognizes that many of these women may have lived in violent environments and helps identify and work with trauma victims.

TAMAR Project (Trauma, Addiction, Mental Health, and Recovery). The Division of Special Populations has also received funding from the Substance Abuse and Mental Health Services Administration (SAMHSA) for the TAMAR Project (Trauma, Addiction, Mental Health, and Recovery). The TAMAR project is one of SAMHSA's Women, Co-occuring Disorders and Violence Study sites which targets women inmates (misdemeanors or non-violent crimes) with substance abuse and mental health issues and/or a history of violence. Several features of the project include, a formal agreement with local organizations, staffing meetings and training on trauma issues for substance abuse, mental health, and corrections staff, intensive case management, and connections to services for the women and their children. According to a local survey on the project, from September 1, 1999 to May 30, 2000 the project served 129 women and 209 children. The results from a small study also revealed that in one county the project "serviced 48 women and only 5 of the women were re-arrested and in another county only one woman was arrested on a new charge"

From information provided at the State Symposium and the State of Maryland brochure, *The TAMAR Project: Addressing Trauma Issues of Offenders in Jails*

Participants commented that prison would erode relationships with families even when there was a strong parent-child bond, because it is difficult to stay in touch and lives are changing on the outside. Children grow and change rapidly, adults in prison experience life from a different perspective; accepting these changes can be difficult for both the parent and the child. A relationship with an adolescent can be very different than the relationship with a

curious and compliant seven year old. Parents, too, may have changed. For example, parents may be afraid there children may follow in their footsteps and become unreasonable and inappropriately strict. Participants indicated that most parents returning from prison and their children do not have the benefit of programs to help them make the transitions back to being a family.

• *Caregiver-Child Relationship.* Children live with different kinds of caregivers while their parents are incarcerated. For most incarcerated fathers in State prison, their children lived with their mothers before incarceration and continue to live with their mothers during periods of parental incarceration. For mothers incarcerated in state prison the picture is more mixed, slightly more than half report that the children live with a grandparent, about one quarter report their live with their father, another quarter report their children live with other relatives, about ten percent of mothers report their children live in foster care, and another ten percent report that children live with friends⁴³.

Participants indicated that the caregiver might play a gate keeping function in terms of limiting or discouraging a child's contact with a former inmate. The caregiver may feel protective of the child, believing that the formerly incarcerated individual is a bad role model, or has not "reformed" and may engage in behaviors that may harm the child. Caregivers may have come to see themselves as the only rightful parent or as the legitimate substitute for the biological parent and see no reason to share the child with the returning parent. Foster parents and relative caregivers may believe their responsibility is to continue to care for the child and not to facilitate a relationship with the returning parent. And depending on the length of time the parent was incarcerated, the age of the child when the parent left and contact during imprisonment, the child may view the resident parent or caretaker as the only parent they want and may not have any interest in developing or resuming a relationship with the returning parent. Disrupting the caregiver-child bonds may not always be in the best interest of the child and care needs to be taken in re-introducing an "absent" parent back into a child's life.

• Incarcerated Parent-Caregiver Relationships. Another factor impacting family reunification after prison is the nature of the incarcerated parent's relationship with the caregiver of his/her children. For men, more than half of the state and federal inmates who lived with their children prior to arrest were also living with their child's/children's mother. About one fifth of the men in state prison and one third of the men in federal prison lived in a two-parent household with children prior to arrest.⁴⁴ If these relationships continued during imprisonment, fathers have a stronger likelihood of family reunification. If the inmate-caregiver relationship may be complicated by competition with a father substitute or having to re-establish positive relationships with a hostile ex-partner. Even when the partner or ex-partner is willing to have the formerly incarcerated parent involved in the life of the child/children, she may have reservations about his ability to parent appropriately. Parents also may find it hard to co-parent if they have many outstanding issues from their past

⁴³ Mumola, 2000

⁴⁴ Mumola, 2000

relationship that have not been addressed. Since ninety percent of men report that their children live with their mother, the relationship between the father and the mother is key to the relationship of the father with his children.

Women are more likely than men to have lived with their children prior to arrest and imprisonment, however a smaller percentage were living in a two parent family. Slightly more than ten percent of women in State prison and twenty percent of women in Federal prison were living in two parent families with their children prior to arrest.⁴⁵ Around half of women with children lived in single parent families, with or without other adults, such as another relative, prior to arrest. A woman's relationship with her own parent(s) or other relative caregiver may be the key to her ability to regain access to her children. Participants indicated that regaining access to their children might be more difficult for former women prisoners than for men. Although rates of incarceration have been climbing, incarceration for women is still a rare event. At the same time, and many women who are incarcerated have histories of violence and trauma starting in childhood. Substance abuse is a big issue for female offenders and they are also likely to have co-occurring mental health issues.⁴⁶ Participants indicated that these women are likely to have alienated their children's current caregiver by their past behavior, including their inability to provide care for their children. Like fathers, mothers may have to prove that they are 'fit" to parent again, even when their children are in the care of their own family members.

• Special Considerations When Children Are in the Care of State. Participants noted that families with children who were formally placed in foster care or some other out-of-home care may confront several additional barriers to reunification with their children upon release. Programs such as TANF, AFSA, and Public Housing, have provisions that may make it more difficult for incarcerated parents—particularly mothers—to reunite with their children even if family re-unification otherwise would be appropriate. For example, incarcerated women serve an average of 18 months in prison. Under ASFA, the result is that the average woman sentenced to prison whose children are placed in foster care could lose the right to reunite with her children upon release.

Participants discussed the difficulty prisoners had in accessing the services required by the child welfare system for reunification while they are in prison. Communication between inmates and caseworkers regarding permanency planning and other important issues for reunification is frequently hampered by the fact that prisoners are typically housed in facilities many miles from their community. As note previously, it is also difficult for inmates to remain in touch with their children while in prison, which is the most basic requirement for reunification.⁴⁷

There are many barriers to family stability after prison.

Coming home can be an opportunity to turn one's life around. Yet the opportunity to do so is tempered by the number of basic needs that an ex-offender must address upon release. The

⁴⁵ Mumola, 2000

⁴⁶ S. Covington. 2002.

⁴⁷ See also: Child Welfare League of America, Issue Brief, 1997, see http://www.cwla.org/.

majority of inmates leave prison without savings, without immediate entitlement to unemployment and other benefits, with poor prospects for employment and no place to live. Certain problems are ubiquitous, including housing, denial of benefits and employment barriers, and have significant consequences for the inmate's successful reintegration and re-establishment of child and family ties.

- *Housing*: One of the first tasks for returning prisoners is finding a place to live. Returning prisoners rarely have the financial resources or personal references needed to secure housing in the private market. Landlords also typically require potential tenants to list employment and housing references and to disclose financial and criminal histories. Moving in with family can put additional strain on already burdened households, as well as put the family at risk of eviction, particularly if the family is living in public housing. Federal housing policies permit, and in some cases require, public housing to individuals who have engaged in certain criminal activities, unless certain conditions for access are met. ⁴⁸ Whether because of these policies or for other reasons, a substantial proportion of homeless individuals are exoffenders.
- *Employment*: Having a legitimate job not only lowers the likelihood that a former prisoner will re-offend, but also provides an important means of stable support for the family. Finding a job is particularly important for parents who were subject to a formal child support agreement during their prison term. If an inmate is not able to amend the court-ordered child support arrangement during his or her prison term, child support obligations may accumulate. These unpaid child support obligations may have legal and financial implications for inmates once they are released.

Beyond the general stigma of a criminal record among employers, there are also rules that more directly govern an ex-offender's labor market activities. Many states prohibit employers from discriminating based on an applicant's or employee's criminal history unless there is a "direct" or "substantial" relationship between the circumstances of the offense and the circumstances of the job, except in instances where the law specifically prohibits an employer from hiring anyone in particular positions with certain criminal backgrounds. States vary in the ease with which criminal backgrounds can be checked and to whom and what kind of information will be released. In general, though, employers can check criminal backgrounds.

• *Child Support:* Participants noted that child support is an issue that creates tension between advocates for low-income fathers and advocates for children and families. Few prison jobs pay enough to even pay a nominal amount of child support each month and even fewer father are able to get their child support reduced to a minimum order while incarcerated. So for many fathers, child support debt accumulates while they are in prison. Once out of prison, the expectation is that child support payments will resume and additional payments to cover child support will also be made. Nonpayment of child support can lead to re-arrest and to re-incarceration. Given the difficulties in finding employment for many low-skilled, formerly

⁴⁸ See Legal Action Center, "Housing Laws Affecting Individuals with Criminal Convictions." Washington, D.C.: Legal Action Center. For more information, see <u>http://www.lac.org/</u>.

incarcerated individuals, conference participants expressed concern that having large amounts of child support withheld when a job is finally obtained may drive men out of the legitimate labor market. It was noted in discussion that states are starting to develop initiatives to balance the needs of children with the ability of formerly incarcerated individuals to pay support. A few states, such as Maryland, are working with formerly incarcerated fathers to reduce the amount of previously owed child support, when a father regularly pays the child support he currently owes.⁴⁹

- Access to Public Assistance: Access to public benefits that could help stabilize families following parental incarceration has been limited. Criminal convictions can bar individuals from receiving federal welfare benefits (TANF), food stamps, Supplemental Security Income, and access to public housing.⁵⁰ For example, the Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (P.L. 104-193) law precludes—for life—receipt of food stamps and TANF cash grants by those with a drug felony conviction, unless a state overrides the federal provision. Twenty-four states have left the federal provision intact; the remainder either eliminated or modified the ban.
- Access to Health Care and Treatment: Prisoners have higher rates than the general population of mental illness, substance abuse, TB, HIV/AIDS and other STDs. Returning offenders and their families have two sets of issues regarding access to health care and treatment. The first is how to assure a continuum of care. One issue is how to continue treatment and/or care begun in prison, once the prisoner is on the outside. Unless eligible for SSI or Social Security disability payments, returning prisoners often are not eligible for publicly provided health services, treatment facilities may not be in the communities where the returning prisoner lives, families may not be aware of the medical needs and families tend not to have any more resources to pay for treatment or health care than the individuals coming out of prison. This may put the prisoner at risk of relapse and the family, in some cases, as with TB, at risk of exposure to infectious disease.

If the prisoner did not have access to treatment for alcohol or substance abuse while in prison, then there is a greater risk of relapse on the outside even if the prisoner has not had access to drugs or alcohol while in prison. For women prisoners, who have a high incidence of co-occurring mental health and substance abuse disorders, if neither disorder has been addressed, treatment for both conditions may be necessary before any plans for reunification with her children can be made. Participants indicated that health care and mental health and substance abuse treatment are scarce in the prison environment and they are even scarcer on the outside. According to service providers at the conference, waiting lists for treatment are long and prisoners do not have priority over other members of the community. Participants express an understanding that there are good reasons not to give former prisoners priority over community members with no convictions, yet were concerned that these policies can also result in more returns to prison.

⁴⁹ See J. Pearson and E. Griswold, "Child Support Arrears: Compilation of Three Reports." Denver Colorado: Center for Policy Research, 2001. Prepared under contract for the Office of Child Support Enforcement, ACF, HHS.

⁵⁰ Legal Action Center, "Public Assistance Laws Affecting Individuals with Criminal Convictions." Washington, D.C.: Legal Action Center. For more information, see <u>http://www.lac.org/</u>.

V. Community Connections: What is the Role of Service Systems and Social Capital in Helping to Restore Families?

Communities are important contexts for child development and family well-being. Yet, very little research exists on the service needs of families who have a parent who is incarcerated, or on the services that families need in order to aid an offender's successful reintegration into the family and community. Communities need to be actively involved in supporting families during the period of incarceration and in the process of prisoner return in order to support healthy family functioning and successful family and prisoner reintegration. From the perspective of the former prisoner, aftercare is known to be a key component necessary to continue any progress made in prison and it may help to mitigate negative effects of the prison experience.⁵¹ Yet how to support families, as part of the aftercare paradigm, is seldom discussed or researched.

Some of the questions raised in discussion were "Why don't we have effective systems to identify children (and families) with an incarcerated parent (or spouse)?" and "Why don't we have effective intervention programs when children and families are identified as at risk?" When families need financial or social support or children need special interventions, the role that parental incarceration has had in destabilizing the family situation is usually not considered or addressed. Participants were concerned that such identification of parental incarceration can carry risks for the child and the family, risk that include stigmatization and lowered expectations, so issues of privacy and confidentiality need to be addressed. However, not identifying parental incarceration as one of the issues affecting child and family functioning may result in inadequate or misdirected interventions.

Community service providers do not receive any advanced notification that an inmate might be returning home, what his or her particular needs are or what the families needs. In order to ensure communities have the capacity to meet the needs of returning inmates and their families, good needs assessments while the inmate is incarcerated would assist in understanding the types of services the individual will need in the community. In addition, individualized case plans developed in cooperation with the correctional facility, the inmate, his or her family and the community would be useful.

Integration of and collaboration among community services (e.g., housing, substance abuse treatment, health, employment, child care, welfare) for returning ex-offenders and their families are vital for successful outcomes.

Social service systems that work in isolation from one another may not be the best way to meet the needs of children, families, offenders or communities and may be fiscally and socially costly. Improving outcomes requires unified planning among corrections, child welfare and community agencies to assist in keeping families strong by coordinating what happens during incarceration and ensuring parents, children, and caregivers are provided with the necessary supports. This includes:

- Ensuring that the array of services available in a community meets the needs of the target population;
- Building the capacity of the service system to provide the appropriate level of service to all those who need it; and

⁵¹ G. Gaes and N. Kendig. 2002.

• Collaborating to assure access to all needed services.

Several promising models of service integration and coordination have been identified. These models share two characteristics: a coordinated continuum of services that overcomes fragmentation; and strong case management and mentoring supports for ex-offenders.⁵² Service integration and policy coordination across systems and institutions is critical so that individuals and families who need services do not "fall through the cracks."

Box 8--State Case Study of Wisconsin (Welfare to Work)

The Wisconsin Department of Correction has developed a unique partnership with the Department of Workforce Development to create a project called the **Non-Traditional Opportunities for Work** (NOW). The NOW project helps non-custodial parents by assisting incarcerated fathers or mothers with parenting skills, finding stable employment, paying child support, and establishing paternity. The program later expanded to serve adolescents 18 to 24. In an effort to assist the non-custodial parents on parole or probation, the NOW program works closely with several Welfare-to-Work agencies to help with employment, training, education, and other support services. In addition to collaborating with local agencies, the NOW project placed "agents" who are probation or parole officers to specialize in supervising the participants in the program. These specialized agents function as a case manager and work closely with the job coaches at the Welfare-to Work agencies. The program also has a parenting component that provides participants with workshops on topics such as parenting skills, child support, communication skills, and substance abuse issues. According to one report on the NOW program, over 300 inmates have used the NOW program, many have found jobs above minimum wage, most are paying child support, and a majority of those who are not working while in the NOW program are seeking education training.

From the State Symposium and unpublished NOW handout

The entire community needs to be part of the re-entry planning process, including the people who live in the community.

There is a tendency to think of re-entry as an individual process, that what is most important is to work out a good re-entry plan for the prisoner. But especially in communities with high concentrations of incarceration and re-entry, all residents, all business, all churches and religious organizations, all schools, that is, the entire community, is affected. The re-entry plan is not just about what the prisoner will do, but also about what the community can and will do. There are different ways to involve the community. Step down programs that bring prisoners back into the community for the last months of his/her sentence can create conversations about matching needs with resources. In Baltimore, the Enterprise Foundation convened a broad representation of community stakeholders to develop a community re-entry plan. Representatives of families of returning prisoners, as well as representatives of victims, need to be part of the process.

Poor communities of color are disproportionately affected by cycles of incarceration and reentry. Capacity building needs to be a part of the strategy to help re-turning prisoners and their families.

Incarcerated populations are not evenly dispersed across communities. The majority of former prisoners return, in relatively high concentrations, to a small number of minority communities that are low-income and high crime areas. These communities most likely lack community

⁵² S. Rossman. 2002.

resources. Participants indicated that community development needed to be a part of re-entry strategies. They expressed concern that it does not do any good to talk about jobs and connections to services if the community does not have the capacity to provide jobs or services. Participants stated that improving the economic development and services available in minority communities has to be a more significant part of the conversation. Race and class are issues at the individual level and at the community level.

Building social capital is critical because it can reduce isolation and help mobilize resources.

Social networks are one important component of social capital. Social networks can help individual, families and communities achieve their goals, such as finding a job, locating a good school, living in a safe neighborhood. For example, if you ask a friend if he has a job opening for your child, you are relying on a social network. Incarceration disrupts social networks by removing individuals from their families, friends, social organizations and places of employment or by causing their withdrawal due to stigma or shame. Without social networks in place, the family and the returning prisoner have reduced social capital for making it through the period of incarceration and the transition process from prison to home.

Trust and shared values are important components of social capital. To rebuild positive social capital requires the re-establishment of trust, self-esteem, and often proving that one is "worthy" of re-entry into society. Sometimes it's easier for returning prisoners to go back to the social network of the street, but such a return usually has negative consequences for the individual, the family and community. Interventions that help families and prisoners plan for difficult reunions make connections with community based services, and tie returning prisoners into community institutions and responsibilities could help communities as well as individuals and families reestablish mutual trust and a sense of efficacy.

Churches and other faith-based organizations have a role in building social capital for children, families and prisoners.

People of faith have historically reached out to prisoners and their families. Participants talked about current programs, like the InnerChange Freedom program that Prison Fellowship Ministries conducts in three states that appear to motivate prisoners to change behaviors and attitudes. Programs in prison can be linked to churches, synagogues and mosques on the outside to provide a continuity of relationship and perspectives. It was noted that returning inmates (and their families) need someone in their life that is a positive source of support. Faith-based organizations are often motivated to provide mentoring support to returning prisoners and to their families. Such support can help the prisoner and the family during make connections to the resources and opportunities in the broader community.

VI. *From Prison to Home:* What Are the Implications for Program Interventions and Research?

Presented research and the subsequent discussions identified children, families, and former prisoners who have experienced incarceration as a group at high risk for adverse child, adult and family outcomes. Many conference participants expressed hope that addressing these needs could reduce the risks of recidivism, substance abuse relapse, and family violence. Throughout the conference participants noted examples of many public policy and program areas that could better serve prisoners and their families. Reentry strategies that involve families could also promote child, family and community well-being. Mental health and substance abuse prevention and treatment programs could be more family-oriented. Re-entry planning could include re-unification services for children and parents, when appropriate. Use of welfare and food stamps could be part of a self-sufficiency plan for the re-turning prisoner and his/her family. And family violence concerns could be addressed both in prison and in the community. Participants believed that the opportunities to link incarceration, re-entry and family services are substantial and bear the promise of profound and far-reaching benefits for all involved. Targeted interventions could increase public safety and social functioning—benefits of interventions that are important for returning prisoners, their children and families, and communities.

Participants acknowledged the need for a continuum of supports for individuals and families throughout the incarceration and reentry period—so that appropriate services for individuals and families are developed and those who actually need services get them. It was expressed that current and new interventions need to be integrated and coordinated across multiple systems and institutional domains and that to capitalize on the learnings from interventions, accompanying research also needs to be multi-disciplinary.

Summarized here are highlights from the conference discussion that may be helpful in the development of future interventions and research at the local, state, and federal level.

- *Maintenance of Family Ties During Incarceration.* Most parents remain involved in their children's lives during incarceration and expect to resume parenting responsibilities upon release. Most children want to continue to maintain a relationship with their parents. Fostering positive child-parent interaction during incarceration, when appropriate, can help children, the incarcerated, and the care-giving parent. More interaction between human services' and the corrections' systems is needed on how and when ongoing relationships between the inmate parent and the caregiver and between the parent and the child should be facilitated. Information is also lacking on how best to support families in their desire to maintain ties with an incarcerated family member, ties that will strengthen the families and community upon release.
- **Preparation of Prisoners and their Families for Reentry.** Nearly all prisoners will eventually return to their families and communities. Yet, many prisoners are not adequately prepared to manage the return. Likewise, the families of prisoners and the communities they return to are often not prepared to help them become reintegrated into family and community life.
- *Implementation of Coordinated Community Programs*. Many inmates and ex-offenders would benefit from employment and parenting skill building, treatment for their trauma histories and substance abuse problems, and help in preparing for productive life when they return to their families and communities. However, there are few models for

coordinated, multidisciplinary, multi-systemic efforts to provide ex-offenders with opportunities to financially and emotionally support their families. Additionally, gender, race, and class difference of inmates, ex-offenders, their families, and communities often are not considered in the design of programs and research.

- *Coordination of Systems and Resources*. Poverty, welfare, public housing, and incarcerated and parole populations concentrated in a small number of neighborhoods may hinder child development outcomes. Neighborhood assessments seems to indicate that it is likely that many of the same families have family members in the criminal justice system and family members served by health and human services systems of care. Yet, there are only a few communities and states where the criminal justice and health and human services systems are working together to address the needs of these multi-system involved families. More attention needs to be paid to how health and human services and criminal justice policies and programs intersect in high crime communities and how policies and programs can be coordinated and structured to improve the delivery of services that meet the needs of community residents.
- *Information Sharing Among and Between Systems*. Relatedly, current human services and criminal justice systems have no easy way of sharing information with each other. In fact, incarceration of a parent may never be identified as one of the causative or related events that brings a family into some part of the health and human services systems. Information sharing models that provide privacy protections and facilitate an examination of the service needs of the prisoner and family need to be tested to determine if early and coordinated interventions provide better outcomes for prisoners, families, and society as a whole.
- *Basic Research on Children and Families of Prisoners*. There is little basic research on children and families with incarcerated parents, and thus, there are many unanswered questions. Some of these questions are: the effects of parental criminality and parental absence during incarceration on children; the effect of parental involvement and familial relationships on adult recidivism; and the effect of high rates of incarceration on family and community stability. Answering these kinds of questions would involve undertaking prospective, longitudinal studies that: 1) follow families at risk of incarceration to determine the impact of incarceration, beyond other risk factors such as poverty and exposure to violence; 2) develop and use multidisciplinary approaches; 3) use developmentally appropriate, standardized measures for assessing children; and 4) address the effects of mother versus father incarceration, cultural and ethnic backgrounds, and individual, family, contextual and cultural processes.
- **Research on Policy Impacts.** There has been little research on the effect of human services and corrections policies on children and families and on re-unification efforts. Program provisions that may provide good opportunities for study include time limits for termination of parental rights, restrictions on the receipt of welfare and public housing by convicted drug felons, non-modification of child support orders while a non-custodial parent is in prison, and mandatory sentencing requirements for certain crimes.

Post Script

Since the Prison to Home Conference was held in January 2002, there has been a significant amount of activity relevant to the focus of the conference--children and families with an incarcerated parent. It is important for the reader of this report to understand that a lot has happened but that a lot more remains to be done. Current activities underway that address some of the issues and concerns identified at the conference include the Serious and Violent Offenders Re-entry Initiative (SVORI), the Mentoring Children of Prisoners program, the National Institute of Drug Abuse CJ-DATs program, the Council of State Governments Re-entry Policy Council, and the National Governors Association Prisoner Re-entry Policy Academy.

During the *Prison to Home Conference*, representatives from DOJ announced the publication of the announcement of grant fund availability for the Serious and Violent Offenders Re-entry Initiative (SVORI). Established by the Department of Justice in collaboration with the Departments of Labor, Housing and Urban Development, and Health and Human Services, SVORI has provided over \$100 million to 69 grantees to develop programming, training, and state-of-the-art reentry strategies at the community level. An evaluation of the initiative is underway. The first report of the national evaluation, <u>A National Portrait of SVORI</u> was published in July of 2004. Also in 2004, DOJ sponsored the First National Conference on Reentry for SVORI grantees and others interested in re-entry activity in Cleveland, Ohio. Over 1000 criminal justice, health, and human services providers from the public and private sectors attended the conference.

In FY 2002, the Congress passed and President Bush signed into law, a bill authorizing the Mentoring of Children of Prisoners program. Ten million dollars was appropriated for spending in FY 2003 and fifty million dollars in FY 2004. Currently there are over 200 Mentoring Children of Prisoners grantees throughout the country. The MCP grantees provide services, both directly and in collaboration with other local agencies, to strengthen and support children of incarcerated parents and their families. This includes preserving families and connecting the children with their imprisoned parent when appropriate. Grant recipients are required to cultivate mentors from within the child's family and community through recruitment, screening, training, and monitoring and evaluation. In addition, grantees are encouraged to incorporate elements of a positive youth development approach, reducing risky behavior by giving young people the chance to exercise leadership, build skills, and become involved in their communities.

In September of 2002 the National Institute of Drug Abuse established a cooperative research program (the Criminal Justice-Drug Abuse Treatment Research Studies (CJ-DATS)) to explore the issues related to the complex system of offender treatment services. Nine research centers and a Coordinating Center were created in partnership with researchers, criminal justice professionals, and drug abuse treatment practitioners to form a national research infrastructure to develop and test models for integrated approaches to the treatment of incarcerated individuals with substance use disorders, including both treatment in jail or prison and treatment as part of re-entry into the community. Research is ongoing and includes a range of topics, such as, facilitating adolescent offenders' reintegration from juvenile detention to community life and inmate pre-release assessments.

In 2003, the Center for Best Practices of the National Governors Association established the NGA Prisoner Reentry Policy Academy (RPA). The RPA works with seven states in an effort to help Governors and other state policymakers develop and implement statewide prisoner reentry strategies that reduce recidivism rates by improving access to key services and supports. Through the academy, states assembled interdisciplinary reentry policy teams responsible for assessing the reentry process within their state, identifying major service gaps and other barriers, and examining relevant state data on prisoner reentry trends. State teams have had the opportunity to participate in at least one in-state policy workshop, two policy academy meetings that brought together all seven states, and a "learning lab" on working with families, youth, and children. Through the academy, the Center has helped states take advantage of and build on other large-scale reentry initiatives.

In his State of the Union address in January 2004, President Bush announced the creation of a new initiative to facilitate prisoner re-entry. The Prisoner Re-entry Initiative (PRI) is a collaboration of the Departments of Labor, Justice, Housing and Urban Development and Health and Human Services. Designed to help ex-offenders find and keep employment, obtain transitional housing and receive mentoring in urban centers and areas of greatest need, faith-based and community organizations will offer job training and job placement services in coordination with business and other employment providers. They will also provide post-release mentoring and other services essential to reintegrating ex-offenders in coordination with the corrections, parole, and probation structure. In 2005, the U.S. Department of Labor awarded 30 grants totaling \$19.8 million to faith-and community-based organizations to assist non-violent ex-offenders returning to their local communities. The Department of Justice will fund additional grants in the states where the Labor Department PRI grants were awarded.

In January of 2005, the Council of State Government's published the report of its Re-entry Policy Council (RPC). Established in 2001 to assist state government officials grappling with the increasing number of people leaving prisons and jails and returning to the communities they left behind, the RPC brought together key stakeholders from all branches of state and local government and community provider across criminal justice, health, and human services systems to develop bi-partisan re-entry policies and principles and facilitate coordination and information-sharing among organizations involved in implementing re-entry initiatives. The 650 page report, organized into 35 broad policy statements, provides critical information about research, practice, and collaborations to facilitate re-entry. Information about how to support family relationships and address family and children's issues within the context of prisoner re-entry is also included.

All these efforts, and others at the local, state, and federal level, have expanded the discussions about the affects of parental incarceration on children, families, and communities. While there is still much work to be done, the work has begun. Professionals from the criminal justice systems and health and human services systems are not only talking to each other, but are also working together to plan and implement interventions that strengthen families, support positive change by incarcerated parents, and promote re-integration into family and community life.

Appendix A

The Effect of Incarceration and Reentry on Children, Families & Communities



URBAN INSTITUTE Justice Policy Center

From Prisons to Home: The Effect of Incarceration on Children, Families & Low-Income Communities

Technical Review Group Meeting

February 20, 2001

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The Effect of Incarceration and Reentry on Children, Families & Communities

- State Symposium Agenda
- State Symposium Participants and Observers

The Effect of Incarceration and Reentry on Children, Families & Communities

State Innovations Symposium:

Successful Policy Collaborations to Aid Children and Families of Prisoners

U.S. Department of Health and Human Services November 27, 2001

AGENDA

10:00 – 10:15	Welcome Bobby Jindal, Assistant Secretary for Planning and Evaluation US Department of Health and Human Services
10:15 – 10:45	Introductions Background and Objectives of the Meeting Jeremy Travis, Urban Institute
10:45 – 12:15	Successful Collaborations in the States Examples of collaborative policy innovations aiding children and families of prisoners in each state
12:15 – 12:30	Break
12:30 – 2:45	 Facilitated Discussion over Working Lunch What lessons have states learned about collaborative programming for offenders, their children and families? How have states been able to overcome barriers to collaboration? How have states been successful in leveraging state and federal funding streams to address overlapping needs in the criminal justice system, health and human services systems?
2:45 – 3:00	Wrap-up and Summary

Jeremy Travis, Urban Institute

The Effect of Incarceration and Reentry on Children, Families & Communities

State Innovations Symposium

U.S. Department of Health and Human Services November 27, 2001

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The Effect of Incarceration and Reentry on Children, Families & Communities

State Innovations Symposium

U.S. Department of Health and Human Services November 27, 2001

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The Effect of Incarceration and Reentry on Children, Families & Communities

- From Prisons to Home Conference Agenda
- From Prisons to Home Participants

NATIONAL POLICY CONFERENCE

From Prison to Home: The Effect of Incarceration and Reentry on Children, Families and Communities

U.S. Department of Health and Human Services

The Urban Institute

CONFERENCE AGENDA

January 30-31, 2002

Natcher Conference Center National Institutes of Health 45 Center Drive Bethesda • Maryland • 20892

Wednesday, January 30th (8:15am-5:00pm)

OPENING SESSION

8:15 – 9:00 am	Conference Registration		
9:00 – 10:30am Main Auditorium	Welcome and PurposeJeremy Travis, Urban Institute		
	 Opening Remarks Assistant Secretary Bobby Jindal, U.S. Department of Health and Human Services 		
	Opening Presentation Criminal Justice and Health and Human Services: An Exploration of Overlapping Needs, Resources, and Interests in Brooklyn Neighborhoods • Eric Cadora, Community Justice Consultant		
PLENARY SESSION #1			
10:30 – 11:30am Main Auditorium	Impact of Incarceration and Reentry on Children Ross Parke, University of California-Riverside Mark Eddy, Oregon Social Learning Center Shay Bilchik, Child Welfare League of America Benjamin de Haan, Oregon Department of Corrections 		
Breakout Sessions 11:45am – 12:45pm			
Balcony B	 (1a) Impact of Incarceration and Reentry on Young Children Discussion Leaders: *Helene Stebbins, National Governors' Association Ross Parke, University of California-Riverside Denise Johnston, Center for Children with Incarcerated Parents Stephen Amos, Maryland Governor's Office of Crime Control and Prevention 		
Balcony C	 (1b) Impact of Incarceration and Reentry on Adolescents Discussion Leaders: *Sonia Chessen, Office of the Assistant Secretary for Planning and Evaluation / HHS Mark Eddy, Oregon Social Learning Center Elizabeth Lopez, Office of Juvenile Justice and Delinquency Prevention / DOJ 		
Room G	 (1c) Parental Incarceration and Future Delinquency Discussion Leaders: *Lorenzo Harrison, U.S. Department of Labor Jeff Butts, Urban Institute Terry Donahue, Office of Juvenile Justice and Delinquency Prevention / DOJ 		
Room A	 (1d) Community Supports for Children of Incarcerated Parents Discussion Leaders: *Mary Whitaker, National Institute of Corrections / DOJ Mary Shilton, Center for Community Corrections Peter Breen, Centerforce Daniel Dodgen, American Psychological Association (Invited) 		
12:45 – 1:45pm	Lunch on your own		

* Denotes principal moderator.

Wednesday, January 30th

PLENARY SESSION #2

2:00 – 3:00pm Main Auditorium		■ Cr ■ Jo ■ Vi	ict of Incarceration and Reentry on Families reasie Finney Hairston, University of Illinois-Chicago ohn Jeffries, Vera Institute of Justice vian Gadsden, National Center on Fathers and Families uart Simms, Maryland Department of Public Safety and Correctional Services
Breakout Sess 3:15 – 4:15pm	sions		
	Balcony B	(2a)	Programs and Policy Strategies to Address Parenting During Incarceration Discussion Leaders: • *Phyllis Modley, National Institute of Corrections / DOJ • Creasie Finney Hairston, University of Illinois-Chicago • Mary Gaines, Federal FORUM
	Balcony C	(2b)	 Programs and Policy Strategies to Address Parenting Following Incarceration Discussion Leaders: *Naomi Goldstein, Administration for Children and Families / HHS John Jeffries, Vera Institute of Justice Carol Shapiro, Family Justice Mario Paparozzi, New Jersey State Parole Board
	Room A	(2c)	Caring for Children when Parents are Incarcerated Discussion Leaders: • *Laura Radel, Office of the Assistant Secretary for Planning and Evaluation / HHS • Rob Geen, Urban Institute • Ellen Barry, Legal Services for Prisoners with Children
	Room C	(2d)	Implications of Reentry for Domestic Violence Discussion Leaders: • *Jerry Silverman, Office of the Assistant Secretary for Planning and Evaluation / HHS • Myrna Raeder, Southwestern University School of Law • Catherine Pierce, Violence Against Women Office / DOJ
	Room G	(2e)	A Focus on Fatherhood Discussion Leaders: • *Lorin Harris, Charles Stewart Mott Foundation • David Siegel, Office of Child Support Enforcement / HHS • Joe Jones, Center for Fathers, Families and Workforce Development
4:30 – 6:00pm		Docu	mentaries on Families of Incarcerated Parents
	Balcony B	• "A Sentence of Their Own" Edgar Barens While Becky's husband faced a seven-year prison sentence, she and their two sons were le with the aftermath. "A Sentence of Their Own" chronicles the damaging impact incarcerat families and makes visible the gradual descent of a family "doing time" on the outside.	
	Room G	"Insid who h	Inside / Out" and "What Does He Do in There?" Barry Zack, Centerforce e/Out" presents real stories of four women whose partners have been incarcerated and five men ave served time. "What Does He Do in There?" is a video designed for children and tracks a day in the of a prisoner in San Quentin State Prison to answer questions posed by visiting children.
	Balcony C	Revea	Bad Dads" Arnold Shapiro Productions ling some universal truths about the indelible impact a father has on his children, "Bad Dads" as on an unusual parenting program at a federal penitentiary called "H.O.P.E. For Life."
	Room A	"Wher	When the Bough Breaks" Marie Kenyon (Filmmaker is Jill Evans Petzel) In the Bough Breaks" explores the emotional impact on children whose mothers are incarcerated for iolent crimes. Filmed over the course of a year, children in three Missouri families tell their stories.

Thursday, January 31st (8:30am-5:00pm)

OPENING SESSION		
8:30 – 9:00am Main Auditorium	 Opening Remarks Don Winstead, Office of the Assistant Secretary for Planning and Evaluation / HHS Wade Horn, Administration for Children and Families / HHS Charles Curie, Substance Abuse and Mental Health Services Administration / HHS Terry Donahue, Office of Juvenile Justice and Delinquency Prevention / DOJ (<i>Invited</i>) 	
PLENARY SESSION #3		
9:00-10:00am Main Auditorium	 Profile of Returning Offenders and Implications for Families Craig Haney, University of California-Santa Cruz James Austin, George Washington University Reginald Wilkinson, Ohio Department of Rehabilitation and Correction Elizabeth Gaynes, Osborne Association 	
Breakout Sessions 10:15 – 11:15am		
Room G	 (3a) Psychological Impact of the Prison Experience and Implications for Families Discussion Leaders: *Evvie Becker, Office of the Assistant Secretary for Planning and Evaluation / HHS Craig Haney, University of California-Santa Cruz Sandra Barnhill, Aid to Children of Imprisoned Mothers Jeff Beard, Pennsylvania Department of Corrections 	
Balcony B	 (3b) Needs and Risks of Returning Prisoners and Implications for Families Discussion Leaders: *Phil Merkle, Corrections Program Office James Austin, George Washington University Sherry Snyder, Pennsylvania Department of Public Welfare Diane Williams, Safer Foundation (Invited) 	
Room A	 (3c) Housing Needs of Ex-Offenders and their Families Discussion Leaders: *Marina Myhre, U.S. Department of Housing and Urban Development Michael Oliver, Community Resources for Justice Tomi Hiers, Enterprise Foundation 	
Balcony C	 (3d) Impact of Substance Abuse and Mental Illness on the Family Discussion Leaders: *Dave Morrissette, Substance Abuse and Mental Health Services Administration / HHS Steve Belenko, Columbia University Joan Gillece, Maryland Department of Health and Mental Hygiene Helen Geyso, National Alliance for the Mentally III 	

Thursday, January 31st

PLENARY SESSION #4

11:30 – 12:30pm Main Auditorium	 Dynamics of Transition Gerald Gaes, Federal Bureau of Prisons / DOJ Stephanie Covington, The Center for Gender and Justice John Larivee, Community Resources for Justice AT Wall, Rhode Island Department of Corrections 		
12:30 – 1:15	Lunch on your own		
Breakout Sessions 1:30 – 2:30pm			
Room A	 (4a) Gender Responsive Services for Women Coming Home Discussion Leaders: *Ulonda Shamwell, Substance Abuse and Mental Health Services Administration / HHS Stephanie Covington, The Center for Gender and Justice Patricia Schupple, Maryland Department of Public Safety and Correctional Services Susan Galbraith, Our Place 		
Room G	 (4b) Prison Programs and Preparation for Release Discussion Leaders: *Susan Salasin, Substance Abuse and Mental Health Services Administration / HHS Gerald Gaes, Federal Bureau of Prisons / DOJ Marta Nelson, Vera Institute of Justice 		
Balcony B	 (4c) Federal Policies Affecting Employment and Income Supports Discussion Leaders: *Mindy Feldbaum, U.S. Department of Labor Debbie Mukamal, Legal Action Center Susan Dreyfus, Wisconsin Department of Health and Family Services Mack Storrs, Administration for Children and Families / HHS 		
Balcony C	 (4d) Collaboration Across Health, Human Service and Criminal Justice Systems Discussion Leaders: *Linda Mellgren, Office of the Assistant Secretary for Planning and Evaluation / HHS AT Wall, Rhode Island Department of Corrections Thomas MacLellan, National Governors Association Michael Thompson, Council of State Governments 		

Thursday, January 31st

PLENARY SESSION #5

2:45 – 3:45pm Main Auditorium	Incarceration and Reentry in Communities Shelli Rossman, Urban Institute Dina Rose, John Jay College of Criminal Justice Cressida Wasserman, National Center for Victims of Crime Scott Brooks, University of Pennsylvania 		
Breakout Sessions 4:00 – 5:00pm			
Room G	 (5a) Integration of Services in the Community Discussion Leaders: *Shelli Rossman, Urban Institute Gary Melton, Clemson University Eddie Ellis, Community Justice Center 		
Balcony C	 (5b) Reentry, Social Capital and Communities Discussion Leaders: *Jim Lynch, American University Dina Rose, John Jay College of Criminal Justice Beverly Watts Davis, San Antonio Fights Back Jeff Evans, National Institute of Child Health and Human Development / HHS 		
Balcony B	 (5c) Place-Based Strategies for Reintegration Discussion Leaders: *Nancy Ware, Executive Office of Weed and Seed / DOJ Todd Clear, John Jay College of Criminal Justice Ed Rhine, Ohio Department of Rehabilitation and Correction Demetra Nightingale, Urban Institute 		
Room A	 (5d) The Role of Faith-Based Programs in Prisoner Reintegration Discussion Leaders: *Richard Lewis, Prison Fellowship Ministries Julio Medina, Exodus Brent Orrell, Office of Faith-Based and Community Initiatives / DOL 		

NATIONAL POLICY CONFERENCE

From Prison to Home: The Effect of Incarceration and Reentry on Children, Families and Communities

January 30-31, 2002 U.S. Department of Health and Human Services The Urban Institute

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