“Parental imprisonment has emerged as a novel, and distinctly American, childhood risk that is concentrated among black children and children of low-education parents”

~Christopher Wilderman

In 2007, 1 in 15 Black children and 1 in 42 Latino children had a parent in prison, compared to 1 in 111 White children (Mauer, 2009). Though the majority of incarcerated parents are fathers, the prevalence for Black mothers is rapidly growing and disproportionately to that of their White counterpart. According to that the 2011 United States Bureau of Justice report, Black women are six times more likely to be incarcerated than their White women, accounting for more than 26,000 or 23% of the total female prison population. There are clear disparities around incarceration that have added to the destabilization of the African American family (Wakefield & Wilderman, 2014; Wilderman & Muller, 2012). Roberts (1991) pronounced that “Poor Black women have been selected for punishment as a result of an inseparable combination of their gender, race, and economic status. Their devaluation as mothers, which underlies the prosecutions, has its roots in the unique experience of slavery and has been perpetuated by complex social forces” (pg. 1424). More specifically, the War on Drugs has amounted to a war on the Black family in that the majority of Black women are locked up for nonviolent property and drug crimes (Terborg-Galloway, 2005). The collateral damage that follows is the disproportionate prevalence of Black children in the foster care systems and babies born during imprisonment. Relational and proximal closeness or attachment may suffer. Studies have shown that children of incarcerated mothers are more likely to experience emotional problems, nightmares, fighting in school, and a decline in academic performance (Gabel & Johnston, 1995; Smith, 2013); public schools are ill-equipped to meet the needs of this population. Child welfare or social services may not adequately meet the social or emotional needs of the child, particularly where special services are required due to preexisting conditions. Parental incarceration is associated with a variety of negative behavioral outcomes. Over the past decade, problematic behavior among children of incarcerated parents has increased from 1 in 120 to 1 in 28 (Wilderman & Muller, 2012). The shame and stigma associated with having an incarcerated parent further perpetuates the probability for behavioral problems and mental health issues like depression and anxiety.

From the moment of birth, everything a child hears, sees, touches, and tastes contributes to the building blocks for learning and optimal development. By the child’s fourth birthday, 80% of the brain development has taken place. Negative experiences in the family system (parental incarceration) can be especially harmful to very young children, impacting later learning and
health. Further, exposure to toxic stress such as racism, poverty, abuse, neglect, and abandonment can impede optimal social/emotional/physical development. It has been well documented that children of incarcerated mothers experience complex childhood trauma (Rich, Blum, Corbin, 2009). As denoted in the Adverse Childhood Experiences study (Felitti et al, 1998), the cumulative effects of exposure to such diverse traumatic events epitomizes adverse childhood experiences that can lead to significantly compromised health, social, and economic risks in adulthood, including early death. For many of these children and their mothers, social determinants, such as poverty, illiteracy, racism, and unresolved intergenerational trauma limit their ability to have a sense of empowerment and control (Marmot, 2004); resulting in re-traumatizing effects. Black children’s experience of complex trauma must be conceptualized within the context of historical trauma, cumulatively and collectively, as it may manifest as internalized oppression, disenfranchised grief, and/or historically unresolved grief (Brave Heart, 2011).

There are no clear mandates to minimize harm to affected children of the arrestee. Detention center policies concerning children of an arrestee are confusing, limiting, and inconsistent across and within states (e.g., lack of clarity about visitation, families lacking funds for transportation, visitation rooms are not child-friendly, foster families refusing to visit, etc.). Further, complex issues surrounding family support may delay disbursement of aid to support the cost of daily living for children in care. Community service agencies may not readily rectify obvious gaps in care and services largely due to the fact that social service funding pools are outside the jurisdiction of the legal system that is solely responsible for the arrestee (Scher, 2013).

Clear and distinct needs of this population have been well established through family-focused and child-focused services. Offender-child closeness is a critical feature of caregiver relationship quality, co-parenting quality, and parenting distress (Beckmeyer & Arditti, 2014). Coordinated social, emotional, and behavioral services are critical features in the service intervention. Family-centered care may be particularly effective to restore optimal functioning. Advocates of this approach view the incarceration experience as an example of trauma (Rich et al., 2009). External threats (incarceration, toxic stress exposure, chronic poverty) further complicate resources to cope with adversity; cumulative structural and systemic effects result.

Recommendations

1. That there are coordinated grassroots and federal and/or state efforts to address the disparities related to the over-incarceration of Black women, especially with regard to deferring for substance abuse treatment and recovery versus criminal imprisonment.
2. Social service and child welfare agencies should provide specialized trauma-informed services and resources for children of incarcerated mothers, with particularly attention to the children’s social and emotional development.
3. Federal and state mandates should be established in order to keep incarcerated mothers close to their communities and the integration of programs intended to support/nurture the parent-child bond.
4. The funding of innovative national culturally-informed initiatives focused on historical trauma that are intended to support the reunification and/or reintegration of Black mothers with their children, thereby potentially minimizing recidivism rates.

5. Increased culturally-congruent or African-centered research in the areas of public health, policy, education, and mental health specific to the lived experiences and unique needs of Black children with incarcerated mothers.

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