


**EDUCATORS ARE CRITICAL
PARTNERS IN MAKING A
DIFFERENCE IN THE LIVES OF
CHILDREN OF INCARCERATED
PARENTS**

September 24, 2015
2:00 – 3:30 PM EDT

Federal Interagency Reentry Council's
Subcommittee on Children of
Incarcerated Parents

American Institutes for Research

AGENDA

- Welcome and Housekeeping
 - Introductions and Poll
 - Overview — Ann Adalist-Estrin
 - Implementing a Whole School Approach — David Osher
 - Hearing from an Educator at SEL/Trauma Informed School — Dwight Davis
 - Dream Academy Youth with Incarcerated Parent — Kendall Tidwell
 - Q&A Session
 - Wrap-Up
- 

ANN ADALIST-ESTRIN



DIRECTOR

**NATIONAL RESOURCE
CENTER ON CHILDREN AND
FAMILIES OF THE
INCARCERATED**

RUTGERS UNIVERSITY

RESPONDING TO THE NEEDS OF CHILDREN AND FAMILIES OF THE INCARCERATED IN SCHOOLS



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QUICK CHECK: ASSUMPTIONS BELIEFS AND ATTITUDES

- The best thing that could happen to the children of incarcerated parents is _____

- The worst thing that could happen to children of incarcerated parents is _____

GUIDING PRINCIPLE # 1

Be Self Reflective

- What lenses are you wearing when you think about this topic or engage with children and families of the incarcerated?
- Which life experiences color and shade your thoughts, feelings, and opinions?

HOW WE KNOW WHAT WE KNOW

Three elements of understanding children with incarcerated parents.

➤ **Data**

Review of administrative data and collection of demographics

➤ **Experiences**

Anecdotal, programmatic and clinical chronicles and empirical studies

➤ **Meaning Making**

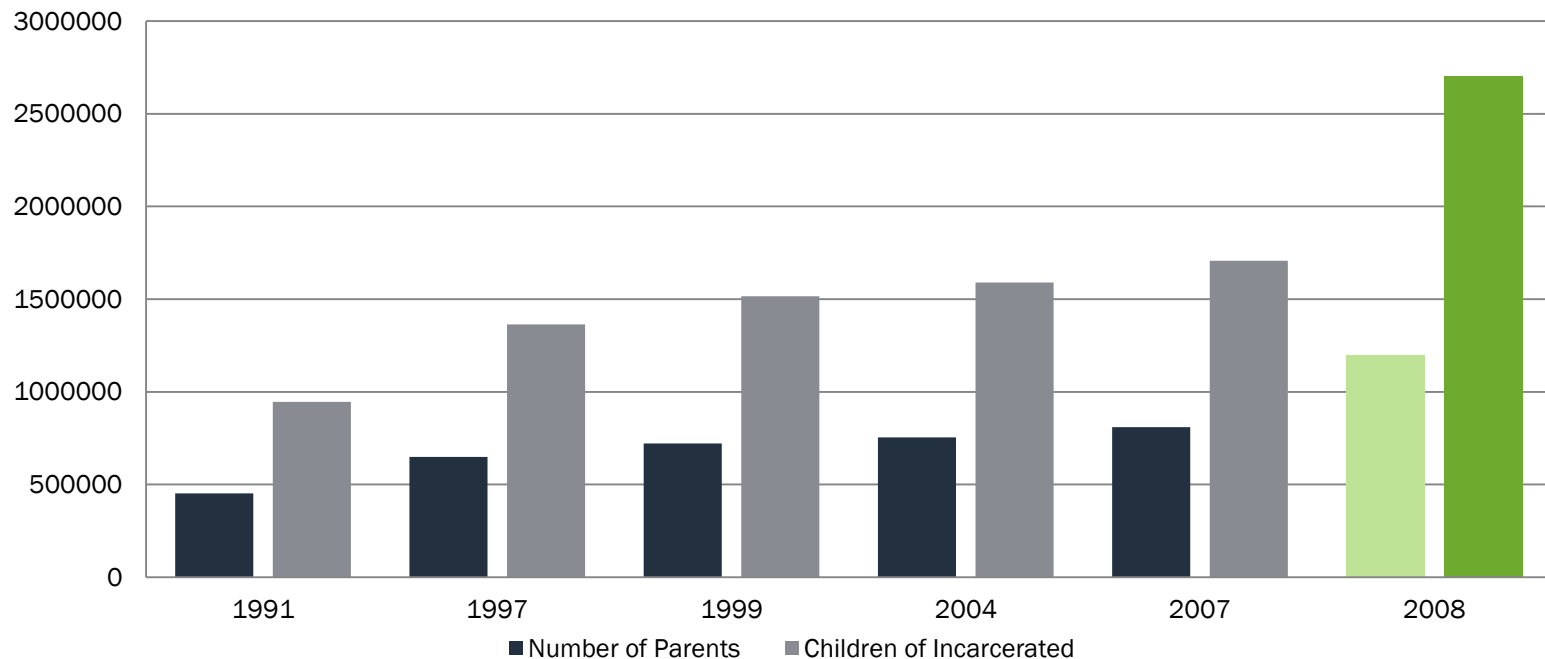
Interpretations and judgments



“ESTIMATED” NUMBERS

- Including jails, estimates indicate that as many as 2.7 million children have a parent behind bars.

Estimated number of parents in state and federal prison and jail and their minor children

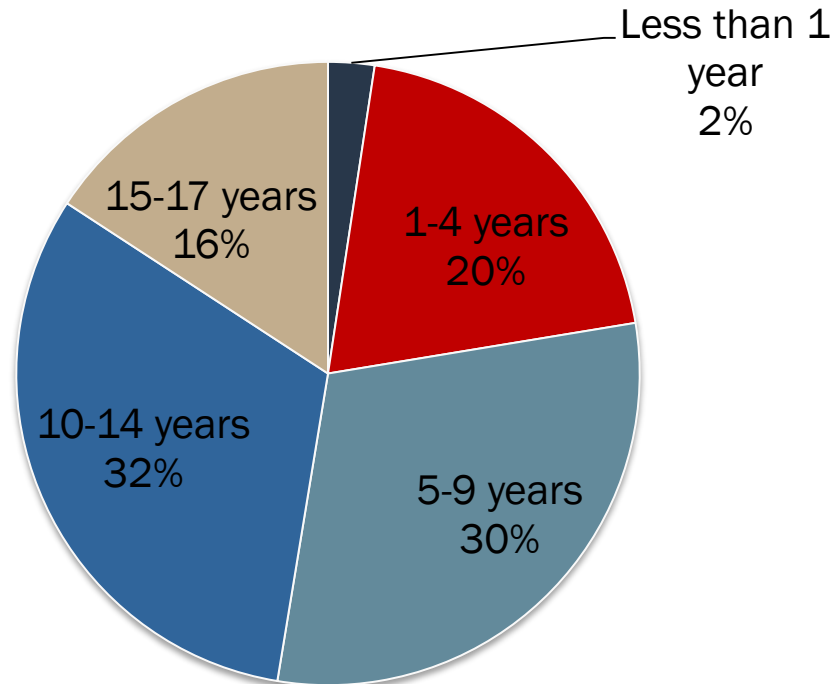


Source: Pew Charitable Trusts. *Collateral Costs: Incarceration's Effect on Economic Mobility*. 2010.

AGES

- Over 50% of children who have an incarcerated parent are age 9 or younger

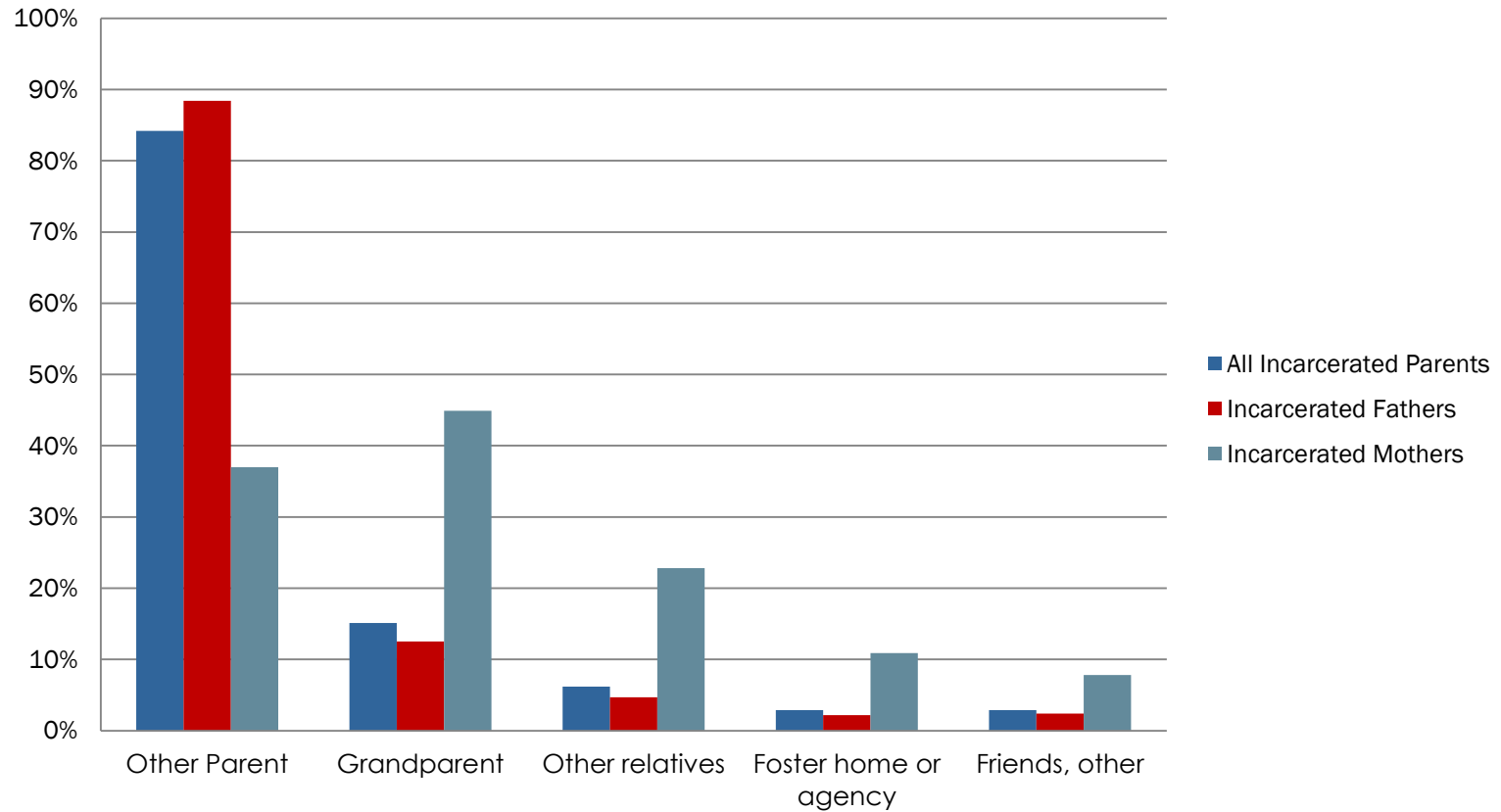
Ages of Children who have a Parent in Federal or State Prison



Source: Bureau of Justice Statistics. *Parents in Prison and their Minor Children*. Aug 2008.

CAREGIVERS

Caregiver for Children During Parent's Incarceration



Source: Bureau of Justice Statistics. *Parents in Prison and their Minor Children*. Aug 2008.

HOW WE KNOW WHAT WE KNOW: EXPERIENCES

- All Alone in the World, Nell Bernstein
- Parental Incarceration and the Family, Joyce Arditti
- Disrupted Childhood: Children of Women in Prison, Jane Siegel
- Doing Time on the Outside, Donald Braman

HOW WE KNOW WHAT WE KNOW: EXPERIENCES

Adverse Childhood Experiences Study

Growing up experiencing any of the following conditions in the household prior to age 18 led to many negative health and behavioral outcomes later in life.

- Recurrent physical or emotional abuse or neglect
- Sexual abuse
- An alcohol and/or drug abuser in the household
- An incarcerated household member
- Someone who is chronically depressed, mentally ill, institutionalized, or suicidal
- Mother is treated violently
- One or no parents

The ACE Study is an ongoing collaboration between the Centers for Disease Control and Prevention and Kaiser Permanente. Led by Co-principal Investigators Robert F. Anda, MD, and Vincent J. Felitti, MD.

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TRAUMA: IMPACT ON BRAIN DEVELOPMENT RELATED TO CORTISOL REGULATION



- Impulse Control – inability to stop oneself
- Cause and Effect – limited capacity to anticipate consequences
- Predictability – lack of social “cueing”
- Emotional Regulation – extreme difficulty delaying gratification
- Reciprocal Engagement – inability to tolerate conflict with or in others

Leading to poor school performance, increased drop out rates, gang involvement, early pregnancies and drug use, abuse and addiction.

TRAUMA IN CHILDREN: EXPANDING THE DEFINITION

- The Child Witness to Violence Project at Boston University School of Medicine defines child trauma as events that activate high levels of fear for ones life or someone closely connected.
- According to Victor Carrion at Stamford University young children have a distorted and non permanent sense of life and death and porous boundaries between themselves and parent.
- Therefore the absence or unavailability of a parent or primary attachment figure is emotionally equivalent to life threatening.

SEEKING EQUILIBRIUM



The presence of parents or other adult attachment figures raises dopamine levels and lowers the dangerous levels of cortisol.

Dozier, 2005.

BIG T/LITTLE t: STRESS AS TRAUMA

Persistent fear and anxiety can affect young children's learning and development and change brain architecture.

Scientists now know that chronic, unrelenting stress in early childhood, caused by abrupt separation from caregivers, extreme poverty, or parental depression, for example, can be toxic to the developing brain in the same way as repeated abuse and witnessing violence changes brain architecture.

Center on the Developing Child, Harvard University, *In Brief: The Science of Early Childhood Development*. NGA. Center for Best Practices, National Conference of State Legislatures, and Center on the Developing Child, Harvard University, 2008, www.developingchild.harvard.edu.

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HOW WE KNOW WHAT WE KNOW

Meaning Making

The ACE Study through a lens of child maltreatment vs. adult risk factors

“So when we talk about a child losing a parent to incarceration and we are interpreting the ACES literature only through a child maltreatment lens, the meaning that gets made (intentionally or not) is that children of incarcerated parents are maltreated children, harmed by their parents and thus better off without them. If however, the parents who are in prison or jail are seen as potential supports for these children, as buffers from the toxicity of the stress, then a different meaning is made of the loss. It becomes more profound and less dismissible.”

Adalist-Estrin, A. White House Remarks 2014.

GUIDING PRINCIPLE # 2

When reading research always ask yourself why would this be true?

- Murray's Cambridge Study (2005) indicates that children separated from parents because of incarceration exhibited more antisocial behavior than children separated for other reasons.
- Murray, Farrington, Sekol and Olsen found that children of incarcerated parents were twice as likely to exhibit antisocial behaviors and other mental health problems as their peers. (2009)

CHILDREN OF THE INCARCERATED? OR JUST CHILDREN?



Children of the Incarcerated like all humans are “all at once like all others, like some others and like no others.”

- *Emmanuel Lartey*

GUIDING PRINCIPLE # 3

CHILDREN OF INCARCERATED PARENTS AND THEIR FAMILIES ARE NOT ONE MONOLITHIC GROUP.



Honor the Themes and Variations



COMBINED SOURCES POINT TO UNIQUE TOXIC STRESS OF PARENTAL INCARCERATION

- Stigma and Shame
- Conspiracy of Silence and isolation
- Changes in residence, family structure
- Difficulty maintaining a relationship with the incarcerated parent
- Fear and worry about parents and caregivers
- Loyalty Conflicts
- Guilt and self blame
- Trauma from the sudden absence of a parent or the events leading up to it
- Lack of relevant support
- School behavior and performance problems

WHAT CAUSES THE SHAME AND STIGMA?

The meaning that is made....children are ashamed of their parents crime or imprisonment.

But the children say...

“...they feel ashamed because of the reactions of...us. The body language and the words of teachers, coaches, social workers pastors and mentors, feels judgmental. When we train mentors and youth group leaders and camp counselors not to mention the parent unless the child brings it up, we must also train them to first let the child know that they know about the situation and are comfortable if the child ever wants to talk. Such training also needs to include practice in listening for how children “bring it up without bringing it up” as well as practice in how to respond effectively. The child who sees a red truck and says that’s a cool truck, it’s like the one my Dad had” is “bringing it up” and needs to know that it is ok with us to talk about Dad.”

Adalist-Estrin, A. White House Remarks 2014.

WHAT THE CHILDREN SAY...

“When people ask about my father, I know that if I tell them he is in prison for drugs, they will either drop me in the conversation and talk about the weather or give me this big lecture about how I don’t have to turn out like him. I hate it both ways, so I lie and say he died.”

- P., age 13

ASSESSING FOR ADDITIONAL TRAUMA OF PARENTAL INCARCERATION

Witnessing the arrest of a parent intensifies the child's loss and creates additional trauma.



Phillips, S.D., & Zhao, J. The relationship between witnessing arrests and elevated symptoms of posttraumatic stress: Findings from a national study of children involved in the child welfare system. *Children and Youth Services Review*, 32, 1246-1254.2010.

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EMBEDDED ISSUES

Two-thirds of the incarcerated parent population is non white

- Over 70% of minor children with a parent in prison are children of color
- 1 in 28 children has parent in prison (3.6 % of children)
 - Black children (1 in 9)
 - Hispanic children (1 in 28)
 - White children (1 in 57)



The Sentencing Project 2009.

UNDERSTANDING THE IMPACT ON SCHOOL PERFORMANCE

Parental Incarceration

	Yes	No
➤ Fair or poor overall health	4.95%	3.01%
➤ Learning disability	15.29%	7.41%
➤ ADD or ADHD	18.01%	7.09%
➤ Depression	6.20%	1.83%
➤ Anxiety	6.99%	3.06%
➤ Behavioral or conduct problems	10.39%	2.62%
➤ Autism (or related condition)	2.03%	1.80%
➤ Developmental delay	6.35%	3.33%
➤ Asthma	14.00%	8.43%
➤ Obesity	21.15%	15.21%
➤ Speech or other language problems	7.37%	4.58%
➤ Diabetes	.31%	.31%
➤ Epilepsy or seizure disorder	1.30%	.61%
➤ Hearing problems	1.93%	1.19%
➤ Vision problems	2.11%	1.26%
➤ Bone, joint, or muscle problems	3.10%	2.16%
➤ Brain injury or concussion	.42%	.26%
➤ Activity limitation	8.44%	4.69%
➤ Chronic school absence	3.96%	2.60%

Stress Proliferation across Generations? Examining the Relationship between Parental Incarceration and Childhood Health, Kristin Turney 2014.

THE ROLE OF SCHOOLS

How can teachers, counselors, coaches and other school staff respond to the needs of children of the incarcerated?



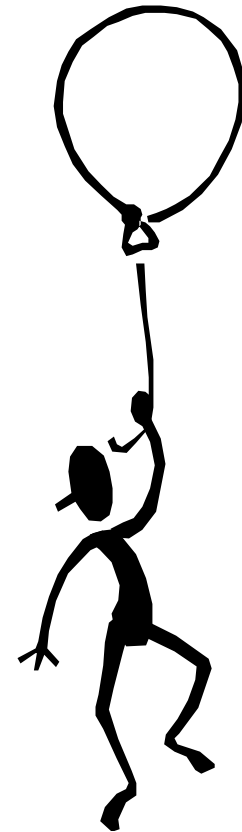
RESIST THE TEMPTATION TO SEE PARENTAL INCARCERATION AS THE SAME AS OTHER LOSSES

- People want to know...why is this different than other losses and vulnerabilities?
- Parental incarceration is distinguished from other adverse childhood experiences by the unique combination of trauma, shame, and stigma in the absence of relevant support.

SEEING RESILIENCE

“Risk factors are not predictive factors because of protective factors.”

- David Satcher, M.D. , Former U.S. Surgeon General



RECOGNIZING PROTECTIVE FACTORS

- Primary attachments
- Other adult bonds
- Skills-confidence
- Emotional competence
- Faith, hope, ability to find meaning



CAREGIVERS AS PROTECTIVE FACTORS BUT...

- Financial hardship
- Shame, stigma and isolation
- Elevated levels of emotional stress
- Additional strains placed on interpersonal relationships
- Increased difficulty in monitoring and supervising children.
- Difficulty deciding what information should be shared with the child
- Lack of information and resources

This was true for all types of caregivers.

“The Collateral Consequences of Incarceration...the Effects on Caregivers of Children of Incarcerated Parents” Turanovic, Rodriguez and Pratt. 2012.

SEEING INCARCERATED PARENTS AS PROTECTIVE FACTORS

Not having access to an available parent causes a feeling of intense stress, fear of abandonment and helplessness in children which causes further trauma.



Milot et al. 2010.

WHAT MEANING DO YOU MAKE?

“56% of children responded negatively and 44% responded positively after the visit, based on caregiver reports...”



“It’s Not All Cupcakes and Lollipops: An Investigation of the Predictors and Effects of Prison Visitation for Children during Maternal and Paternal Incarceration.” Melinda Tasca, 2014.

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TEACHER BIAS

“In a study offering hypothetical children in various life circumstances...Teachers rated children of incarcerated mothers as less competent academically and socially and more difficult behaviorally than their peers with mothers who were ‘away’ for other reasons.”

Dallaire, Ciccone and Wilson 2010.

WHAT YOU CAN DO

- Know yourself
- Refer respectfully and apply Trauma Informed Practice
- Use Universal outreach
- Display materials that can help
- Include books in the general libraries and the topic in your curriculum
- Help children talk about it but maintain confidentiality
- Form support groups
- Involve the incarcerated parent
- Promote awareness and reflect on policies
- Find and partner with local programs

ALSO

Encourage the use of accurate and helpful statistics in portraying the needs of children and families of the incarcerated.

See Jim Conway's article from Central Connecticut State University:

- *“Seven out of ten? Not even close. A Review of Research on the Likelihood of Children with Incarcerated Parents Becoming Justice-Involved.”*
- http://www.ctcip.org/app/download/8947957/CIP_Seven_Out_of_Ten_Not_Even_Close.pdf

AND ALWAYS

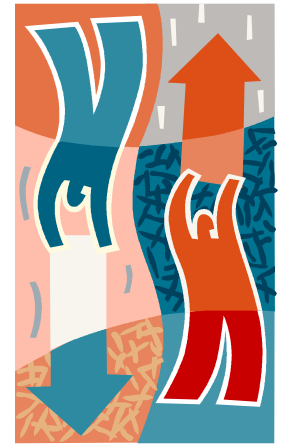
Include children of the incarcerated, their caregivers, incarcerated parents and formerly incarcerated parents in defining the problems and designing the solutions. They should have a place at every meeting or table where their needs and concerns are discussed and planned for. They are the experts!

- *“Families of the incarcerated are included as the warm up act, the anecdotes and the sad stories instead of as the experts.”* Liz Gaynes, FCN Report 33, 2003
- <http://echoesofincarceration.org/Home.html>

END QUOTES

“Don’t let what you can’t do interfere with what you can do.”

- John Wooden





DAVID OSHER

**VICE PRESIDENT &
INSTITUTE FELLOW**

**AMERICAN INSTITUTES FOR
RESEARCH**

BOTTOM LINE I


- Build assets and protective factors
- Reduce or eliminate risk factors
- Build staff, school, and system proficiency and capacity to serve children of incarcerated parents and other vulnerable children

BOTTOM LINE II

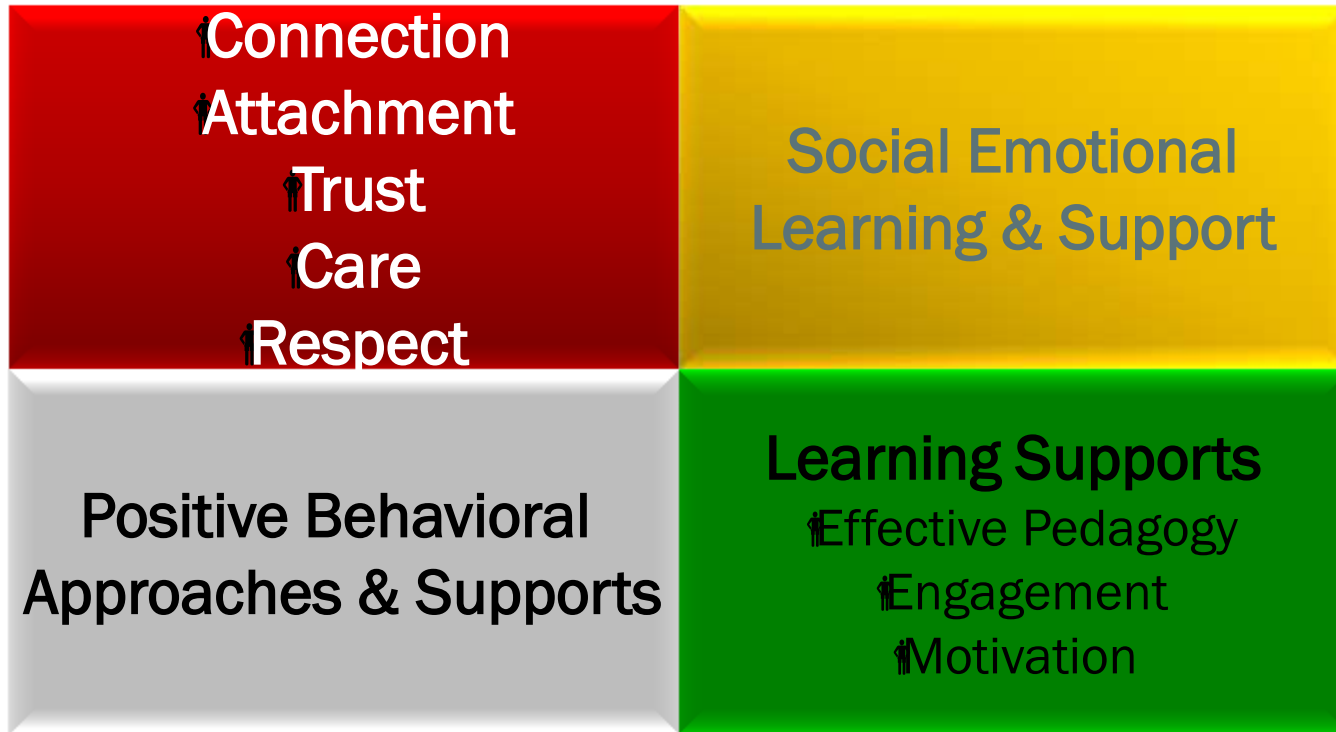
- Employ universal trauma sensitive approaches within a multi-tiered system of support
- Build strong conditions for learning for all students
- Employ approaches to learning and development that are:
 - strengths based
 - child centered
 - youth and family driven
 - culturally competent

SCHOOLS ARE KEY TO WELLBEING

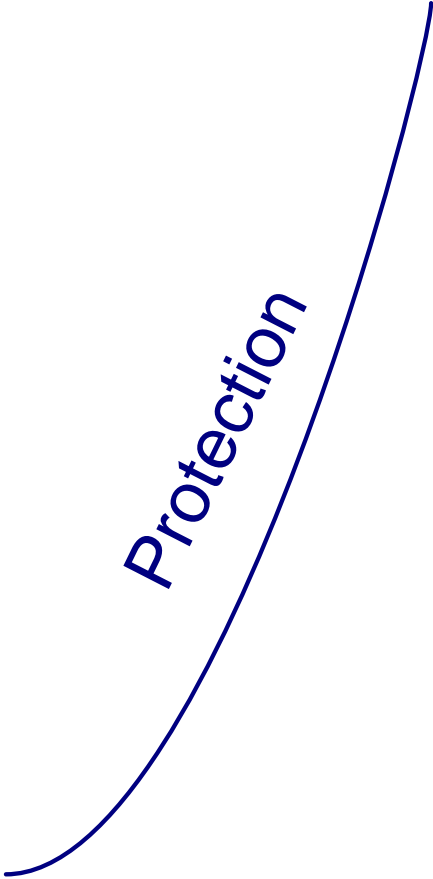
When they provide:

- Safety
 - Preparedness and a realistic sense of competence
 - Skills
 - Competencies
 - Dispositions
 - Experiences
 - Connectedness (Blum et al., 2002; Catalano et al., 2004)
 - Engagement (Connell et al., 1995; National Research Council, 2003)
 - A healthy and health-supporting environment
- 

SUPPORTING CONDITIONS FOR LEARNING



SCHOOL AS A PROTECTIVE FACTOR AND AS A CONTEXT THAT SUPPORTS RESILIENCE



Protection

- Connection
- Academic Success
- Supported Transitions
- Positive Relationships with Adults and Peers
- Caring Interactions
- Social Emotional Learning
- Stability
- Positive Approaches to Disciplinary Infractions
- Services and Supports


SCHOOL AS A RISK FACTOR



Risk

- Alienation
- Academic Frustration
- Chaotic Transitions
- Negative Relationships With Adults and Peers
- Teasing, Bullying, Gangs
- Poor Adult Role Modeling
- Segregation with Antisocial Peers
- School-driven Mobility
- Harsh Discipline, Suspension, Expulsion, Push Out/Drop Out

STUDENTS WHO ARE AT RISK ARE PARTICULARLY SUSCEPTIBLE TO:

- Low Teacher Efficacy
 - Low Teacher Support
 - Negative Peer Relationships
 - Chaotic Environments
 - Poor Instructional and Behavioral Practices
- 

MULTI-TIERED APPROACHES BUILD ON A STRONG UNIVERSAL FOUNDATION

Provide Individualized Intensive Supports

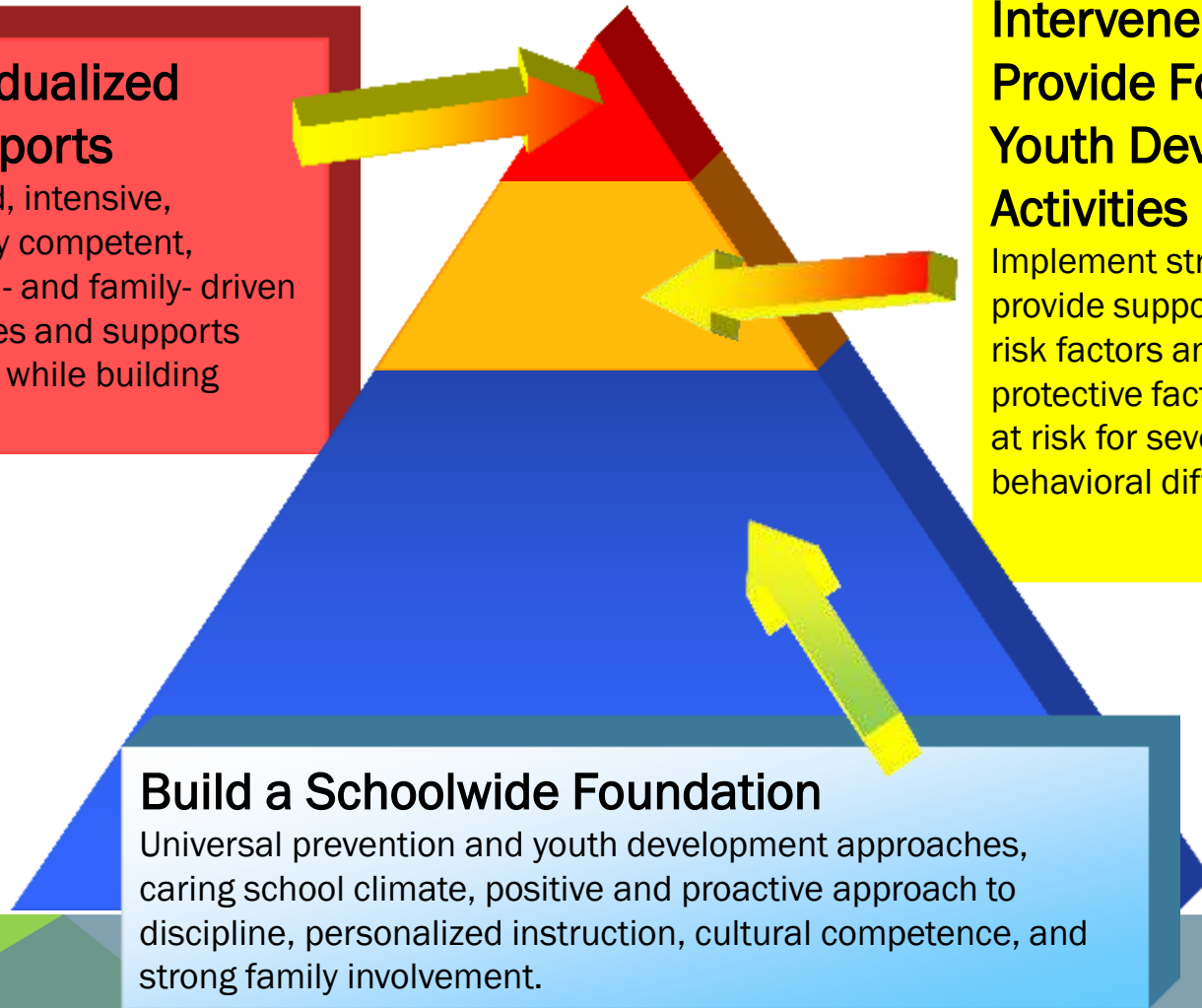
Provide coordinated, intensive, sustained, culturally competent, individualized, child- and family- driven and focused services and supports that address needs while building assets.

Intervene Early & Provide Focused Youth Development Activities

Implement strategies and provide supports that address risk factors and build protective factors for students at risk for severe academic or behavioral difficulties.

Build a Schoolwide Foundation

Universal prevention and youth development approaches, caring school climate, positive and proactive approach to discipline, personalized instruction, cultural competence, and strong family involvement.




UNIVERSAL INTERVENTION FOR VULNERABLE CHILDREN AND YOUTH

- Cannot Identify All Who Are At Risk
- Children Affect Each Other
- No Stigma
- No Self-fulfilling Prophecies
- No Homogenous Grouping
- Per Child Cost Is Less
- Provides A Foundation



WHY WILL STAKEHOLDERS SUPPORT UNIVERSAL APPROACHES

- Cost effective and beneficial
 - Many groups of vulnerable children
 - Schools cannot identify all students who are at need or who have experienced trauma
 - Parental incarceration effects outcomes for children whose parents are not incarcerated
- 

EXAMPLES

- Trauma Sensitive Schools (Massachusetts Advocates for Children)
- Compassionate Schools (Washington State)

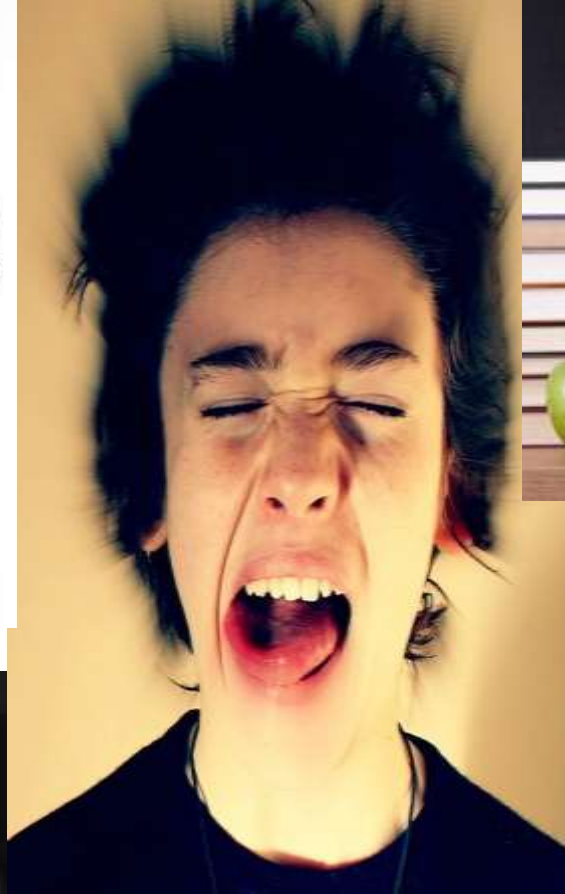


DWIGHT DAVIS

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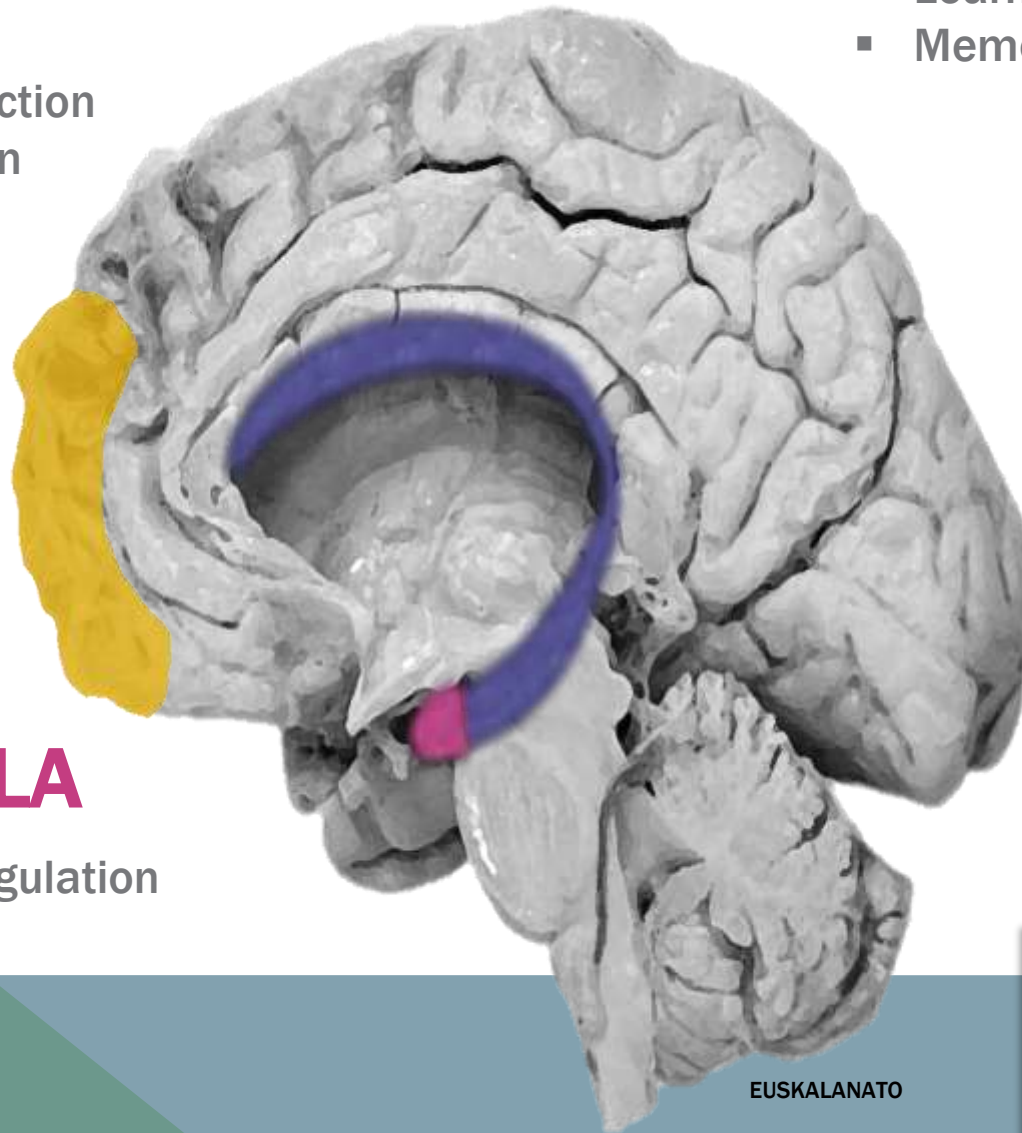


PREFRONTAL CORTEX

- Executive function
- Self-regulation
- Attention

HIPPOCAMPUS

- Learning
- Memory



AMYGDALA

- Emotional regulation
- Reactivity

EUSKALANATO

**LIMBIC
SYSTEM**







KEYS TO SUCCESS

1

Get to know who your students are and **MAKE A PLAN** for them

2

Invest in the **MENTAL HEALTH TEAM** at your school

3

TRUST IS THE ANTIDOTE TO STRESS: Just as stress produces cortisol, trust produces hormones such as serotonin, dopamine and oxytocin that lower cortisol and heal the brain

4

Build a **SAFE, SUPPORTIVE CLASSROOM COMMUNITY** that encourages strong relationships between teachers and students and between the students themselves

5

Develop an **INNOVATIVE, RIGOROUS, RELEVANT CURRICULUM**, including structures that help get children engaged in what they are learning





KENDALL TIDWELL

FRESHMAN

**LAMAR UNIVERSITY
BEAUMONT, TX**

Q&A SESSION

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THANK YOU!

Learn More/Contact Us:

- Visit: www.youth.gov/coip
- Email: youthgov@air.org
- Sign up for the COIP Listserv: <http://youth.gov/coip-listserv>

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