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What are the factors of parental incarceration that may increase risk of poor emotional and mental-health in children of prisoners?

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Abstract

Purpose

Globally, millions of children have a parent who is imprisoned. Research suggests that this has an adverse impact on the child and imprisonment of a parent is considered to be an adverse childhood experience (ACE). Parental incarceration will not only affect the child but the entire household and may result in further ACEs, such as household dysfunction and parental separation, making this group of children particularly vulnerable. This scoping review adopted an international perspective to comprehensively examine the extent, range and nature of literature, both published and grey, relating to parental incarceration and the potential impact on children's emotional and mental health.

Design/methodology/approach

In this scoping review, the five stages identified by Arksey and O'Malley (2005) were used including: identifying the research question, identifying relevant studies, study selection, charting data, collating, summarising and reporting results. In addition, the included articles were appraised for quality using methodology specific tools. A critical narrative synthesis was adopted to present findings and discussion.

Findings

Nine articles met the inclusion criteria. Of the included articles, eight were retrieved from peer reviewed journals and one from grey literature searching. Five categories with subcategories were identified affecting children's mental health: 1) Relationships: parent and incarcerated child relationship; facilitators and barriers to maintaining contact; 2) Family structure; maternal or paternal incarceration; living arrangements during parental incarceration; 3) Children's emotions: emotional recognition and regulation; resilience; 4) Prison stigma: social stigma; shame and secrecy; 5) Structural disadvantages: poverty; race/ethnicity.

Originality

This scoping review has highlighted how the imprisonment of a parent negatively affects their children's emotional and mental health. Factors negatively impacting children's emotional and mental health are interrelated and complex. Further research is required, including: Differences between paternal and maternal incarceration; impact of gender and age of child; poverty as an ACE and prison exacerbating this; and effects of ethnicity and race. An important policy direction is in developing an effective way of capturing parental status of a prisoner to ensure the child and family receive needed support.

Keywords

Child; prison; parent; health; mental health; emotional well-being; incarceration; scoping review

Background

Global prison population

The global prison population stands at nearly 11 million people (Walmsley, 2018). Most imprisoned people are male, however the proportion of women imprisoned has increased significantly since 2000 by around 53%, in contrast to males at approximately 19% (Walmsley 2017). Most incarcerated people are from disadvantaged backgrounds with low or no income prior to incarceration (Parliament UK, 2018; The Brookings Institute, 2018). Having a criminal record increases risk of poverty due to discrimination and fewer job opportunities (Hills *et al.*, 2019), potentially resulting in a cycle of poverty and crime.

Identifying children of prisoners

Penal Reform International (2020) estimates that millions of children globally have an incarcerated parent and their rights are largely unacknowledged within criminal justice systems worldwide. Few countries, including the USA and UK, have reliable reporting systems to capture parental status on entry to prison (Crest, 2019; Robertson *et al.*, 2016; Shlafer, Duwe and Hindt, 2019), creating a 'hidden population' of children of prisoners (Prison Reform Trust, 2018; Nesmith and Ruhland, 2008; Trotter, Flynn and Baidawi, 2017).

Parental incarceration and Adverse Childhood Experiences

Parental incarceration is an Adverse Childhood Experience (ACE), a traumatic event in a child's life, which can cause long lasting psychological and/or physical harm (World Health Organization, 2018). Children who experience multiple ACEs are more likely to participate in drug/alcohol misuse, risky sexual behaviours, criminal behaviour (Felitti *et al.*, 1998) and be imprisoned during their lifetime (Farrington *et al.*, 2006; Reavis *et al.*, 2013; Public Health Wales NHS Trust, 2015). Additionally, children exposed to an ACE are more likely to attempt suicide in adulthood, with multiple ACEs tripling this risk (Thompson, Kingree and Lamis, 2019). Although found across all populations, ACEs are more common in areas of deprivation (Walsh *et al.*, 2019; CDC, 2019a) which itself is linked to imprisonment (Houchin, 2005). Parental incarceration will not only affect the child but the entire household and may result in further ACEs, such as household dysfunction and parental separation, making this group of children particularly vulnerable (Turney, 2014).

Reported negative impacts of parental incarceration on children's mental health include disruptive behaviour disorders (Phillips *et al.*, 2002), stigma, embarrassment and adversity (Murray and Farrington, 2008), post-traumatic stress, depression and anxiety (Fang and Luo 2012).

To date there has been no systematic examination of the evidence that critically considers the factors of parental incarceration that may increase the risk of poor emotional and mental health in children-_of prisoners, at all stages of their development. This scoping review aims to fill that knowledge gap.

Methods

A scoping review is a comprehensive process to search and map the type and extent of evidence on a phenomenon of interest, key concepts are then explored and evidence synthesised to present a cohesive picture of current research in order to identify potential gaps and areas for further research (Colquhoun *et al.*, 2014).

In this scoping review, the five stages identified by Arksey and O'Malley (2005) were used including: identifying the research question, identifying relevant studies, study selection, charting data, collating, summarising and reporting results.

A robust and comprehensive method to search for literature was adopted to ensure the process was transparent and replicable (Colquhoun *et al.*, 2014). The research team and information specialists discussed the search terms to ensure the search captured all relevant literature on the chosen topic. Four individual key terms (child, prison, parent, health) were chosen to be searched adjacent to each other. This ensured data retrieved was not burdensome in terms of unrelated results, for example identifying the parent's health rather than the children. The result was a search strategy suitably sensitive to capture the area of enquiry, whilst ensuring the data retrieved was broad enough to prevent missing key data, as demonstrated by the large number of hits on a relatively under-researched area.

A comprehensive search of nine electronic databases was conducted in May 2019; Embase, Medline, CINAHL Plus, PsycINFO, Child development and adolescent studies, Econlit and ASSIA using the following search strategy (Figure 1). The same strategy was applied to each theme and for each database to ensure consistency.

Figure 1 Search strategy

Grey literature was explored using the following resources: open grey repository, grey literature report, EThOS, SCOPUS and google scholar.

The data were screened using title and abstract to ascertain whether they met the inclusion/exclusion criteria (Table 1). No restrictions were placed on date, language, design/methodology or geography of origin in order to capture all data published.

Table 1 Inclusion and exclusion criteria

Hand searching or snowballing reference lists from the literature search results and key papers identified was completed (Pham *et al.,* 2014).

Data were charted to include the following information: author(s), year of publication, study location, intervention type, and comparator (if any), duration of the intervention, study populations, aims of the study, methodology, outcome measure, important result. <u>Common categories in each of the included publications were found from the important findings within the data charting.</u>

The Critical Appraisal Skills Programme (CASP) checklist was chosen to appraise the following research designs: case-control, cohort, systematic review and qualitative (CASP UK, 2020). As no CASP tool for cross-sectional studies existed at the time, the validated AXIS critical appraisal tool (Downes *et al.*, 2016) was used for this study design. A critical narrative synthesis Narrative synthesis of the findings was adopted was used to describe findings, explore relationships and emerging concepts, critique the data and assess robustness of the synthesis in the included publications (Popay *et al.*, 2006).

Results

Supplementary_material_appendix_1_data_charting_of_included_papers

A total of 497 original articles were recovered. After screening, nine publications were included: Bradshaw et al., 2019; Davis and Shlafer, 2017; Hindt et al., 2016; Manby, 2014; McGinley and Jones, 2018; Sharratt, 2014; Tasca et al., 2014; Waldegrave and Woodall, 2015; and Zeman et al., 2017. They were published in English in the USA, UK and the Republic of Ireland between 2014 and 2019. One UK publication (Sharratt, 2014) used data from four European countries (UK, Germany, Romania, Sweden). All publications explored the topic of parental incarceration and the implications for child emotional and/or mental health. Three used a qualitative methodology (Manby, 2014; McGinley and Jones, 2018; Sharratt, 2014), five quantitative (Bradshaw et al., 2019; Davis and Shlafer, 2017; Hindt et al., 2016; Tasca et al., 2014; Zeman et al., 2017) and one was a scoping review (Waldegrave and Woodall, 2015). Eight were published in peer-reviewed journals and one was a PhD thesis (Manby, 2014). Five used primary data and four utilised secondary data sources (Bradshaw et al., 2019; Davis and Shlafer, 2017; Manby, 2014; Waldegrave and Woodall, 2015). The ages of the participants mostly ranged from 0-19 years, however one study included participants up to 26 years of age talking about their experiences as a child (McGinley and Jones, 2018). Both male and female children were included in all publications. One publication exclusively explored maternal incarceration (Zeman et al., 2017) with one focusing on paternal incarceration alone (Waldegrave and Woodall, 2015); the remainder either did not specify or explore both.

Figure 2 PRISMA flow chart for Ssearch strategy results

Key categories identified from charting the data

The nine studies in this scoping review highlighted five key categories: relationships; family structure; children's emotions; prison stigma; and structural disadvantages (Figure 3).

Relationships

Relationship between child and incarcerated parent

Manby (2014) found the quality and strength of the relationship between 8-17 year olds and their parent in prison within the UK was the most important protective factor in emotional wellbeing. In the USA, Davis and Shlafer (2017) supported Manby's (2014) study in a similar age group of 12-19 year olds, finding parental closeness significantly reduced the risk of mental ill health in those experiencing parental incarceration. The authors highlighted this as important as the children of currently incarcerated parents are 2.5-4 times more likely to suffer from mental health problems than their peers without parental incarceration, however, the level of protection a strong relationship can provide reduced in children who faced extreme levels of adversity.

Facilitators and barriers to maintaining contact

Sharratt (2014) explored how various types of contact can affect maintaining relationships within families from four European countries. The pre-existing relationship with the incarcerated parent was important : strong, positive relationship between parent and child pre-incarceration generally provided motivation to maintain all types of frequent contact, aiding in relationships. However, this was juxtaposed in some children, as a strong relationship caused separation anxiety, making leaving face-to-face visits a traumatic event. A harmful relationship pre-parental incarceration resulted in contact causing unnecessary pain and upset for the child and it was deemed better for the child to have no relationship at all.

Sharratt (2014) also found that maintaining contact, and therefore sustaining relationships once parental incarceration had occurred, was affected by varying prison regulations between the four countries involved in their study, in terms of types and frequency of contact allowed. Telephone contact within German and Romanian prisons was restrictive, while more accessible in UK and Swedish prisons. In all four countries, visitation was the least prohibitive, however distance between home and prison resulted in fewer visits in Romania and Sweden compared to the UK and Germany. Additionally, prison regulations affected the visitation experiences of children, with child-unfriendly environments and procedures within prisons, such as physical searches, having the ability to negatively affect contact and relationships. In particular, this acted as a barrier to contact if a strong relationship was not present prior to incarceration, therefore providing less motivation to visit.

Family structure

Maternal or paternal incarceration

In a scoping review, Waldegrave and Woodall (2015) specifically examined the effects of having a father in prison and concluded that paternal incarceration, although multifaceted with environmental and/or social issues, resulted in a detrimental impact on an infant's life and mental wellbeing. By contrast, the effect of maternal incarceration alone was explored by Zeman et al. (2017), who identified specific risks associated with incarceration, including the witnessing of arrest, the requirement to change schools and changes in living arrangements, which indirectly affected children's behaviour, especially anger regulation.

Other studies have explored the differences between maternal versus paternal incarceration on children's emotional and mental health. Tasca et al. (2014) found that children in the USA who experienced parental incarceration did not comprise a homogenous group and, although having either parent in prison was statistically significantly detrimental to the child's wellbeing, risk of harm to the mental health of children with incarcerated mothers was 1.9-2.4 times higher than for children with incarcerated fathers, when demographic variables were controlled.

Living arrangements during parental incarceration

A plausible explanation for different effects of maternal and paternal incarceration was suggested in Manby's (2014) UK study, which indicated that which parent is incarcerated could affect where the child subsequently resided. Children who experienced paternal incarceration were more likely to reside with their mother, whereas children experiencing maternal incarceration were most likely to reside with other family members or possibly with foster carers, potentially adding further risk to emotional and mental health. Furthermore, Manby (2014) suggested that relationships children have with those outside of prison affect how they subsequently cope with parental incarceration, specifically the relationship with the primary caregiver. An empathetic two-way relationship between child and caregiver based on mutual support was considered key to maintaining emotional resilience for the child, and is therefore an important coping strategy for children of incarcerated parents. In particular, when the mother was the remaining caregiver, girls showed less psychological distress and, although only partially, high quality care from the mother could buffer the psychological impact on boys when the father was in prison. However, this only applied to families where the parent was serving relatively short prison sentences, whereas boys showed profound distress if their father was incarcerated for a longer period, suggesting the importance of the gender of the child and of parental sentence length.

Children's emotions

Emotional recognition and regulation

If a child is capable of emotional recognition they should be more effective at emotional regulation (Hindt et al., 2016), thus aiding in negating the impacts of parental incarceration on emotional and mental health. In a USA study, Hindt et al. (2016) hypothesised that a child's ability to recognise emotions at ages 3-8 years would be less precise,

with a greater tendency among those with incarcerated parents to label their emotions negatively compared to children whose parents had not been to prison. Initially, Hindt *et al.* (2016) identified significantly fewer positive emotional labels and significantly more negative labels, including bias or "overextension" in children with a parent in jail. However, when variables were controlled for demographically, such as by age, race and ethnicity, no significant differences were observed between children from different backgrounds.

Quantitative research conducted in the USA by Zeman *et al.* (2017) examined more specifically the role of emotional regulation in mediating the psychological impact of parental incarceration for children aged 7-12 years. They reported that parental incarceration had a significant indirect effect, causing children to internalise and externalise their emotions that was observable through anger regulation. Children with more incarceration specific risks exhibited poorer anger regulation that resulted in more internal and external behaviour problems.

In their UK-based qualitative study, McGinley and Jones (2018) found that individuals aged 13-26 years who had grown up with a parent in prison commonly described growing up more rapidly than their peers; this was interpreted as another example of emotional regulation across a wider age range. In their US-based study of parental incarceration and children's emotional and behavioural development, Bradshaw *et al.* (2019) analysed longitudinal data and observed higher anxiety levels at age nine among children whose parents had been in prison compared with children whose parents had not been to prison. At the age of thirteen years, the same children showed lower levels of happiness and higher levels of emotional difficulties reported by primary caregivers than matched controls; anxiety levels were no longer different, suggesting possible adjustment to parental incarceration and a need for further research. Moreover, these findings were strengthened by matching cases and controls using propensity score matching, which reduced the effect of confounders and increased the ability to infer causality (Inacio *et al.*, 2015).

Emotional resilience

Emotional resilience has been shown to be an important asset for children of incarcerated parents. Children who exhibit high levels of emotional resilience are reported to be more able to cope with parental incarceration and to cope more effectively (Manby, 2014). Manby (2014) found that such children revealed both innate and social resilience that was influenced by access to social resources including support networks (Manby, 2014). McGinley and Jones (2018) emphasised the importance of enabling children to have the opportunity to build their emotional resilience throughout the period of parental incarceration. They suggested the utilization of coping strategies, including ability to self-distance from the parent in prison and to and employ euphemisms when referring to their parent's incarceration, effectively allowing private conversations to take place in public situations. The younger cohort of children within Manby's (2014) study also consciously limited their emotional involvement by self-distancing from the experience, being selective with whom and how much information they would share with others about their parents' incarceration. Additionally, Manby (2014) observed older children to be more emotionally resilient and able to cope, and therefore less likely to be at risk of deteriorating mental health. However, the age range of children in Manby's study was varied and the ages of the children when parental incarceration first occurred was not stated, so it was uncertain whether this had different impacts on mental health. Manby (2014) acknowledged that the stage of

parental incarceration at the time of interview was an important methodological consideration since it was likely that an interview conducted close to the time of initial incarceration would show more negative outcomes than one conducted much later into a parent's prison sentence.

Gender has also been shown to affect resilience, with boys more likely to exhibit emotional problems and vulnerabilities and girls appearing to be more emotionally resilient (Manby, 2014). Thus, boys whose parents are incarcerated are likely to be at an increased risk of negative consequences to their mental health and wellbeing compared with girls. This could be related to a child's emotional turmoil being increased if the same sex parent is imprisoned, possibly due to their role model of the same sex not being present during a period of their childhood (Manby, 2014). With substantially more men than women in prison (Walmsley, 2017), this would account for the comparatively negative impact on boys.

Prison sStigma and shame

Social stigma

Social stigma associated with having a parent in prison was a strong theme that emerged from Manby's (2014) qualitative research. Moreover, Manby argued that the social meaning of imprisonment – how it is viewed in society – has an important influence on children's experiences of stigma. In communities where going to prison is relatively commonplace and even perceived as a "rite of passage", it is likely that children and families will experience less social stigma associated with parental imprisonment. Additionally, Manby argued that this can be the case where parents or other relatives have spent repeated episodes in prison, such that this becomes normalised within the child's social network. Imprisonment is in such cases more acceptable – or normalised – and the child consequently is better equipped to employ protective mechanisms, as they know what to expect. Manby nonetheless argued that the effect of social stigma was often exacerbated when the imprisoned parent and child were of the same sex, which could be related to the degree to which a child identifies with their mother or father and seeks to incorporate and reproduce features of identity, status and role of their incarcerated parent (Manby, 2014).

Shame and secrecy

In their qualitative research, McGinley and Jones (2018) found that for their participants the most distress arose through coping with stigma associated with shame of having a parent in prison. This represented a significant challenge whereby the children's sense of shame extended to low self-esteem, feelings of guilt, of being judged and sense of intimidation. They felt vulnerable to being ostracised and socially isolated, which highlights the importance of robust emotional support from significant others, caregivers and peers. Shame associated with parental incarceration often led to secrecy and non-disclosure to even closest friends through fear of judgement. If disclosure did occur, this would be tempered through being economical with the level of detail and playing down the truth. Secrecy sometimes extended to the whole family where the subject of parental incarceration was actively avoided,

as it was perceived as a source of embarrassment and shame. A life built around secrecy hence made it difficult for children to cope effectively with the loss of the parent from their lives. Conversely, having access to a trusted individual to confide in was seen as hugely beneficial to counteract negative emotions and to overcome secrecy, although support of this nature was not always consistent or available. A possible limitation of McGinley and Jones' research was that participants were recruited from two agencies that worked with young people and families who were either 'socially excluded' or involved with the criminal justice system, which could mean that the findings do not necessarily reflect the experiences of children who have not had access to support to cope with the experience of parental incarceration.

Structural disadvantages

Many of the publications take into account other variables and demographics within their studies, although not part of their main research questions and objectives. The key demographics presented are poverty and race and/or ethnicity.

Poverty

As already presented, having a parent in prison in the USA increases the likelihood of developing mental health problems and remained so even after controlling for factors such as race, poverty and family structure (Davis and Shlafer, 2017). However, important findings included children living in poverty were more likely to experience parental incarceration and to be at increased risk of mental health problems compared to those with no parental incarceration experience. This was further supported by Bradshaw *et al.* (2019) who reported that in Ireland, nine-year-old children experiencing parental incarceration tended to come from a socially disadvantaged background compared to those with no parental incarceration experience, including an increased use of social welfare within the families. Parental incarceration could exacerbate financial problems by resulting in reduced or lack of income for a child's household, which in turn can affect maintaining relationships with the incarcerated parent, as demonstrated by Sharratt (2014). Financial restraints were the deciding factor regarding how often and whether contact was maintained between children and their parents, for example, prisoners had to buy their own telephone credits in all countries except Sweden where some free calls were provided and families had to pay the transport to prison for face-to-face visits. As families with parental incarceration have been shown to come from more socially and economically disadvantaged backgrounds, affording these were a barrier to contact and hence has the potential to affect the child's mental health.

Race and ethnicity

Race was also identified as a contributory factor to mental health issues in those experiencing parental incarceration, with younger children from ethnic minorities identified at increased risk (Davis and Shlafer, 2017).

Tasca *et al.* (2014) support these findings by reporting the Latino/Latina race/ethnicity was a significant predictor of child mental health problems in those with parental incarceration, being of cross-sectional study design there was no control group to enable comparison and again homogenises race and ethnicity.

Discussion

This scoping review has highlighted five areas that negatively affect children of prisoner's emotional and mental health. The relationship between the child and the incarcerated parent prior to incarceration can be indicative of whether contact is sustained during incarceration. However, multiple barriers can also affect this relationship, such as the method of contact utilised, which parent is incarcerated, whom the child resides and the relationship they have with that primary care giver. Furthermore, integral to this, age and gender of affected children also had an observed effect especially with regards gender identity and the disruption to the family roles and responsibilities. Emotional resilience of children appears to be affected by age and gender and also which parent was incarcerated. Social stigma associated with parental imprisonment with the associated feelings of shame and need for secrecy, results in difficulties for children in coping with the loss of an incarcerated parent, which is again affected by the gender and age of the child; where the child and the imprisoned parent share the same gender, incarceration appears to be a more negative experience for the child. Poverty and being from a disadvantaged background was associated with increased risk of incarceration and with an increased financial burden on the family left behind and thus more difficulties maintaining contact. In addition, race and ethnicity was identified as a contributory factor.

The research included in this scoping review suggests that a strong relationship between a child and their incarcerated parent can positively affect the child's mental health and wellbeing (Sharratt, 2014). However, Davis and Shlafer (2017) suggest this may only be a partial buffer, since children can find prison visits to be extremely distressing events, particularly in prison environments that are poorly equipped and maintained (Sharratt, 2014). Ensuring the prison environment is child friendly and feels safe could help in building and maintaining relationships between children and their incarcerated parents (Poehlmann *et al.*, 2010; Jones *et al.*, 2013).

The benefits for prisoners and to society of maintaining contact between prisoners and their significant others outside of prison are recognised internationally, especially in reducing recidivism (Prison Reform Trust, 1991; Ministry of Justice, 2017; Council of Europe, 2006; US Department of Justice, 2016). However, despite these perceived benefits, some incarcerated parents will choose not to maintain contact with their families so as to protect themselves and their family from what they view as a potentially harmful experience (De Claire and Dixon, 2017).

Having either parent in prison is shown to be detrimental to children's wellbeing (Waldegrave and Woodall, 2015), with psychological damage and long-term implications explained by separation, restricted and infrequent contact, and instability or uncertainty concerning who is left caring for the child

(Murray and Murray, 2010). Tasca *et al.* (2014) have suggested that maternal incarceration can have significantly worse impact on children's mental health and wellbeing compared with paternal incarceration. This may be due to disruption to the family structure where, most commonly, children of incarcerated fathers will be brought up by their mothers or, in the case of maternal incarceration, they will more commonly be brought up by other female relatives or foster carers (Manby, 2014). In the case of paternal incarceration, Turney and Wildeman (2013) have suggested that there is a significant increases in likelihood of the mother beginning a new relationship with consequences for family dynamics. Conversely, Jones *et al.* (2013) suggest that when mothers succeed in sustaining relationships with incarcerated fathers, children are more likely to adapt and cope better to the circumstances (Jones *et al.*, 2013).

When a parent of the same gender as the child is incarcerated, this can also have a negative impact on the mental health of the child (McGinley and Jones, 2018), possibly because the child loses a role model with whom they formerly identified. This may explain why boys appear to suffer more emotional turmoil than girls (Manby, 2014). Additionally, parental incarceration can lead to altered roles for children within the family, especially for eldest siblings who may take on increased responsibility as a 'surrogate parent' that is not always appropriate for their age, for example where boys may become male protectors or girls may take on caring roles (Jones *et al.*, 2013). Regardless of role change, the evidence reviewed suggests that children can perceive or be perceived to "grow up" prematurely due to increased responsibilities bestowed upon them (McGinley and Jones, 2018), a situation that has been referred to as "parentification", whereby the child is compelled to undertake roles and responsibilities normally performed by the absent parent (Hooper, 2007).

This scoping review suggests Pparental incarceration evidently has negative consequences for children's emotional development, (Social Care Institute for Excellence, 2008), which can predict future negative mental health (Davis, Nowland and Qualter, 2019). Zeman *et al.* (2017) found that children aged 7-12 years whose mothers had been in prison learned to regulate their anger as a protective mechanism but when they encountered highly stressful adverse events they became less effective at regulating their anger (Zeman *et al.*, 2017); which suggests that there may be a dose-response relationship with adverse experiences as is commonly seen within children exhibiting multiple ACE's (Public Health Wales, 2018; Campbell, Walker and Egede, 2016).

An individual's ability to adapt to adversity and sources of stress is defined as resilience (The American Psychological Association, 2014). Within the experience of parental incarceration, the evidence suggests that children cope better if they have both innate resilience and social resilience (Manby, 2014), which is associated with increased levels of happiness and reduced risk of poor mental health (Marmot *et al.*, 2010). Resilience is affected by multiple interconnected physiological, psychological, social and environmental factors and may be perceived as a continuum that reflects our wellbeing at different times and stages of our lives (Southwick *et al.*, 2014). Gender differences appear to be important with boys demonstrating less resilience and being more likely to display externalised negative

behaviours compared to girls who are more likely to demonstrate more internalised behaviours (Manby, 2014; Wildeman, 2010; Turney and Goldberg, 2019). As previously discussed, this could be linked to the gender of the parent in prison and the length of the prison sentence, since longer paternal sentences appear to be associated with higher levels of distress among boys (Manby, 2014).

The evidence suggests that a child's relationship with their primary caregiver is central to maintaining their resilience whilst the other parent is in prison (Manby, 2014), although the emotional wellbeing of the primary caregiver is also important to maintain stability and support within the family (Jones et al., 2013). A primary caregivers' ability to provide emotional support can moreover be impacted detrimentally by perceived or actual negativity from or stigmatisation by relatives, friends, peers and society more broadly, which in turn is likely to affect their own confidence to seek or embrace social support through fear of judgement and sense of shame (Nesmith and Ruhland, 2011). This manifestation of shame may be deeply rooted in a political rhetoric, and a "tough on crime" stance, which results in a social expectation and awareness that people who commit offences are morally bad and deserve punishment (Myers et al., 1999, p.20). Unfortunately, those associated with the offender, including their children, may be perceived as guilty by association, leading to feelings of embarrassment, shame and even responsibility. This arguably explains why children may limit how much they share with others, as this may be a tactic to protect themselves as well as their incarcerated parent (Dobson, 2015). Likewise, primary caregivers will also use secrecy in an attempt to protect the child (Manby, 2014). Secrecy is therefore a strategy children will use to manage distress caused by shame and stigma (McGinley and Jones, 2018) and can extend through a family's social network (Barnardo's, 2016). Limiting disclosure in this way, however, can be problematic since it essentially suppresses what has happened and does not resolve a child's anxieties, uncertainties and feelings (Reeves, 2016); conversely, willingness to discuss negative feelings can aid in the development of strategies for coping with adversity (Gentzler et al., 2005), which underlines the need for children affected by parental imprisonment to have access to caregivers and support networks they can trust and talk openly with (McGinley and Jones, 2018).

Parental incarceration and growing up in poverty independently bring negative impacts to children's emotional, social and educational development and to their mental health (Davis and Shlafer, 2017; Marmot *et al.*, 2020). However, material deprivation – which is often characterised by income, employment and educational deprivation within families and communities – when combined with parental imprisonment and possibly a history of offending related behaviour affecting the family, multiplies the risk of emotional, psychological and social harm for children, who may already have had adverse childhood experiences (Davis and Shlafer, 2017). A family's economic status will impact their capacity to afford travel to prison visits or to pay for regular telephone calls (Sharratt, 2014), which are important for maintaining family relationships. People in the criminal justice system and their families are statistically more likely to be from materially deprived communities (Bradshaw *et al.*, 2019; FPWA, 2019; United Nations, 2020; Ministry of Justice, 2012) and material deprivation is known to be linked to ACEs (Walsh *et al.*, 2019; CDC, 2019a). Poverty can therefore exacerbate the effects of parental incarceration and hence is arguably a catalyst for further ACEs to occur (Hughes and Tucker, 2018). Recently,

researchers have begun to explore whether the definition of ACEs should be expanded from family household risks to include community level ACEs, such as economic hardship (Cronholm *et al.*, 2015). Braveman *et al.* (2018) have suggested that failing to recognise economic hardship as an ACE risks missing an opportunity for governments to create progressive policies to address this damaging experience through misunderstanding of its significance and its potential harm to health in childhood and beyond.

Another factor associated with increased likelihood of children experiencing deteriorating mental health from parental incarceration is race and ethnicity (Davis and Shlafer, 2017; Tasca *et al.*, 2016). Wakefield and Wildeman (2014) comment that the dramatic increase in parental incarceration in the US has not only resulted in more children suffering negative consequences from parental imprisonment but that a disproportionate number affected are black and that this has widened social and racial inequalities. This phenomenon is not likely to be confined by geography, since black and ethnic minorities are significantly overrepresented in <u>many global prison systems</u>. UK prisons, with approximately 27% of the total prison population from ethnic minorities compared to 13% of the general population (House of commons library, 2020). The studies included in this scoping review did not explicitly examine ethnicity or race. However, since black and ethnic minority communities are at increased risk of material deprivation and poor mental health (Equality and Human Rights Commission, 2016; CDC, 2019b), are less likely to seek support from primary healthcare and social welfare agencies (Memon *et al.*, 2016; Davis and Shlafer, 2017) and are overrepresented in UK and US prisons, this is a clear area where further research is needed.

This scoping review is unique as one has not been completed within this area of enquiry before, allowing the synthesis of available literature to contribute to the body of knowledge whilst highlighting areas for further exploration. The methods used in this review were robust and involved quality appraisal of the included publications. Methodological specific tools were used for appraisal to aid in consistency. In addition, the comprehensive search strategy undertaken is transparent and reproducible with no restrictions on language, date or geography to ensure a breadth of literature was captured. The findings provide valuable insight into multiple and interrelated factors contributing to poor emotional and mental health in children of prisoners.

The quality and scope of the included literature in the review mean the findings are limited. It was not possible to disentangle parental incarceration from other adversities the child was exposed to as the driving force of negative outcomes in the affected children. Furthermore we appreciate that prison systems and therefore key issues such as the ability of an imprisoned person to maintain contact with their children, will vary greatly across different countries. As such, it is difficult to recommend anything but high level actions that are relevant to all countries.

The fundamental rights of children are enshrined in the United Nations Convention on the Rights of the Child (UNCRC). Parental incarceration or imprisonment is likely to compromise these rights where it negatively impacts a child's emotional, psychological and social development such that the best interests of the child can no longer be assured. A range of rights are potentially compromised through

parental imprisonment including that governing parental guidance (Article 5), separation from parents (Article 9), respect for the views of the child (Article 12), right to privacy (Article 16), parental responsibilities (Article 18), protection from violence, abuse and neglect (Article 19), and access to an adequate standard of living (Article 27) (UN Commission on Human Rights, 1989). Forced separation of children from their parents essentially contravenes the rights of the child and therefore, in the UK and Europe at least, courts of law passing sentence should ensure the rights of children are considered during sentencing, and relevant information concerning parental status are known to courts to enable appropriate sentencing in the best interests of children (Epstein, 2014; Brett, 2018). Research published by the Howard League for Penal Reform found that sSentencing in the UK, particularly of mothers, dpesid not routinely consider the best interests and rights of affected children (Epstein, 2014). This suggest a serious flaw in criminal justice policy where there is arguably a pressing need to reduce the impact of parental incarceration on children, especially given the known negative repercussions for emotional and social development and long-term mental health.

Few countries systematically document the parental status of prisoners with the intention of providing support for families affected by parental imprisonment (Robertson *et al.*, 2016). Furthermore, perceived stigma and the potential repercussions for offenders' families, including fear of potential removal of children, mean that offenders are reluctant to declare their parental status, which can serve to suppress the issue and mean that children and families are not adequately supported (Robertson *et al.*, 2016).

To negate the effects of the factors found in this review on children's mental health from parental incarceration, alternatives to imprisonment should be considered. If community alternatives that maintain the parent-children relationship are not possible then interventions in prisons need to improve contact and visitation experiences to promote healthy relationships. This could be achieved by creating child frendly prison environments for visits (Jones *et al.*, 2013). Family contact days could also increase the sense of normality for children with the emphasis on physical contact and play (Manby, 2014). Utilising a pay therapist within prisons would be a significant investment but one that could see substantial benefits for younger children. As well as the positive effects maintaining contact with families could have for reducing recidivism, De Claire and Dixon (2017) have noted that child friendly prisons can bring further benefits to prisons including calmer environments and reduced violence where prisoners are actively supported in connecting with their families.

Resilience was a central theme that arose from the findings of this scoping review, being an important indicator of how well children cope with parental incarceration. Promoting programmes to develop and build resilience in children and their families, such as the globally available Resilience Doughnut programme (The Resilience Doughnut, 2020), could ensure that coping with parental incarceration becomes more achievable, through the teaching of transferable resilience skills to enable children and families to better cope with life in general, long after the experience of parental incarceration. Additionally, school based education should address parental incarceration to reduce fear, stigma and discrimination associated with offending, and thereby empower children through understanding and geater social tolerance. A variety of electronic resources are available to support education and discussion within families, particularly for primary caregivers who are adjusting to stressful scenarios such as parental imprisonment. Bradshaw and Muldoon (2020) have highlighted that families who experience parental incarceration can find comfort and strength in those who could relate to their struggles; therefore, the use of peer support or group-based interventions could be of benefit but would require further research.

To negate the effects of the factors found in this review on children's mental health from parental incarceration, alternatives to imprisonment should be considered. If community alternatives that maintain the parent-children relationship are not possible then interventions in prisons need to improve contact and visitation experiences to promote healthy relationships. This could be achieved by creating child frendly prison environments for visits (Jones *et al.*, 2013). Family contact days could also increase the sense of normality for children with the emphasis on physical contact and play (Manby, 2014). Utilising a pay therapist within prisons would be a significant investment but one that could see substantial benefits for younger children. As well as the positive effects maintaining contact with families could have for reducing recidivism, De Claire and Dixon (2017) have noted that child friendly prisons can bring further benefits to prisons including calmer environments and reduced violence where prisoners are actively supported in connecting with their families.

Further research is needed to assess the full, long-term effects of parental incarceration; longitudinal designs will be most appropriate. Additionally, the research on stigma/secrecy in this review was qualitative and would benefit from some quantitative/mixed methods research using validated tools to measure the outcomes. In any research, researchers should be aware when trying to illuminate and improve the plight of children experiencing parental incarceration an unintended consequence could be perpetuating stigmatisation by marginalising and labelling them (Philips and Gates, 2011).

Conclusion

This scoping review has highlighted how the imprisonment of a parent negatively affects their children's emotional and mental health. Community alternatives to imprisonment must be carefully considered, especially for those with dependent children, if this is not possible, addressing the effects of parental incarceration through supportive mechanisms could help prevent or reduce emotional and mental health problems for children that may persist into adulthood, with a focus on reducing social inequalities and poverty being essential (Walsh *et al.*, 2019; CDC 2019a). To truly make a difference and address the damaging effects to children, the causes of parental incarceration must be addressed (Marmot, 2005), to end the global cycle of crime.

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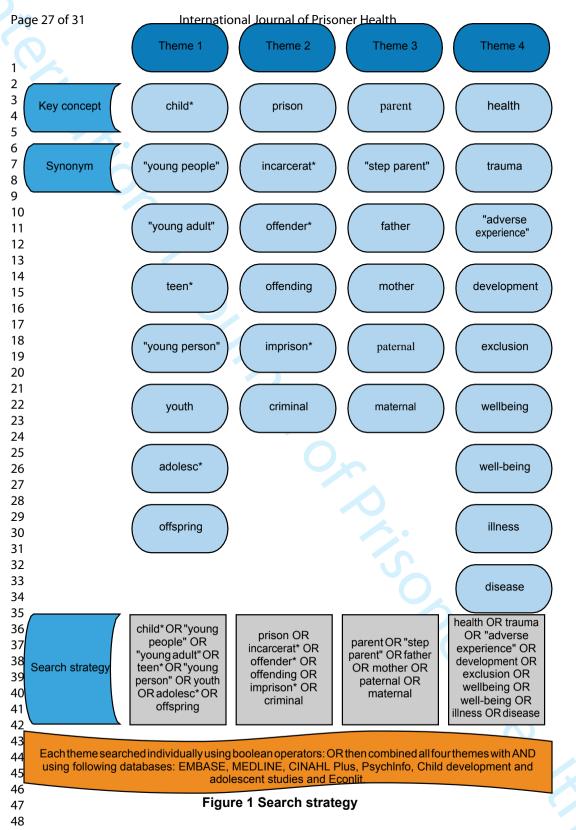
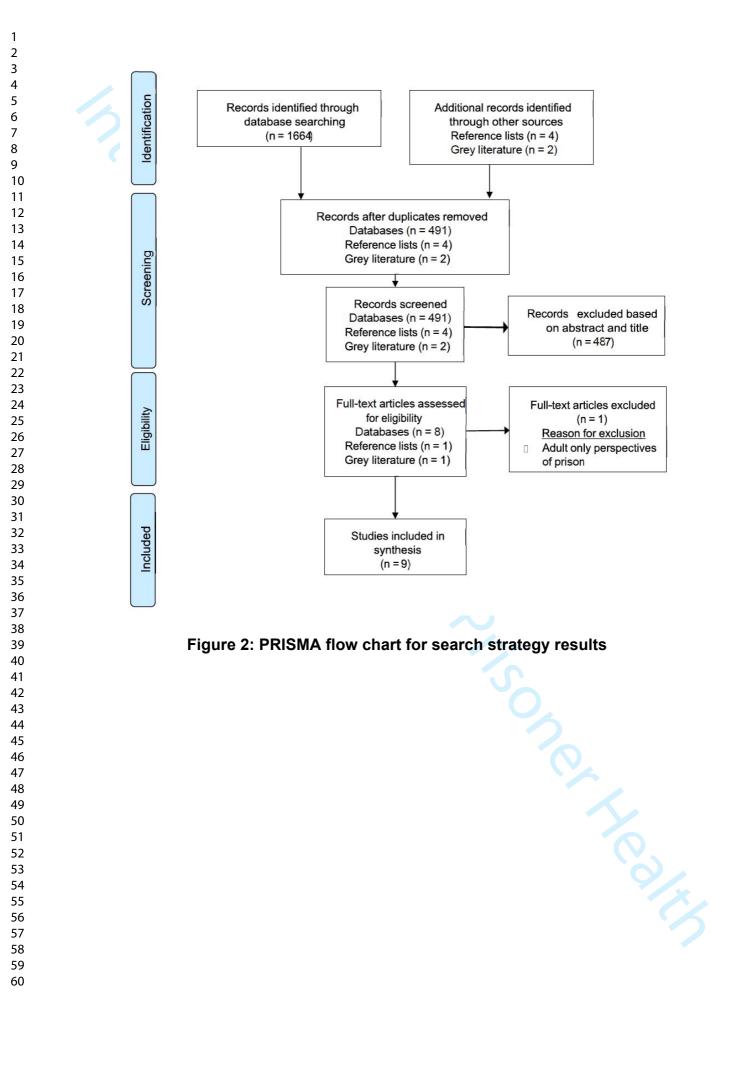


Table 1: Inclusion and Exclusion criteria

Inclusion	Exclusion
Any article, study, report or dissertation reporting	Book(s).
psychological outcome(s) including: mental	
health, emotional wellbeing, to children 0-18 years	
with a parent in prison.	
No restriction on date.	Any study reporting physical outcome(s) to children
	0-18 years with a parent in prison.
Any language.	Any study reporting both physical and psychologica
	outcome(s) to children 0-18 years with a parent in
	prison.
Any design/methodology.	Any study reporting only the effect on children 0-18
,, ,,, , .	years due to parental offending (not specifically
	incarceration but the act of criminal behaviour of a
	parent).
Any geography of origin.	Any study that exclusively or includes substance
	abuse i.e. drug/alcohol.
	C C



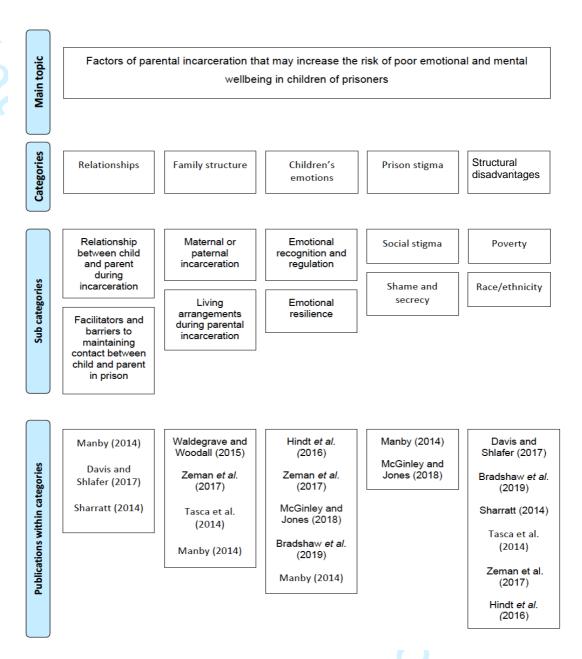


Figure 3: Overview of categories, sub-categories and applicable publications

1 ว	Article Title Page
2 3	
4	
5	
6 7 8	What are the factors of parental incarceration that may increase the risk of poor emotional and mental health in children of prisoners?
9	
10	Author Details:
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31 32	Acknowledgments (if applicable):
33	
34	
35	Biographical Details (if applicable):
36	
37	[Author 1 bio]
38 39	[Author 1 bio] [Author 2 bio] [Author 3 bio] [Author 4 bio] Structured Abstract: Keywords: Article Classification:
40 41	[Author 3 bio]
42	[Author 4 bio]
43	
44	
45	Structured Abstract:
46	
47 48	Kauwandar
40 49	Keywords:
50	
51	Article Classification:
52	
53	
54 55	
55 56	For internal production use only
57	Running Heads:
58	
59	Emerald
60	Emerata