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## Chapter

# Perspective Chapter: The Impacts of Maternal Imprisonment on Children

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## Abstract

Taking a global perspective, this chapter examines socio-economic and health and wellbeing impacts on children with experience of maternal imprisonment. Whilst we know the approximate numbers of women and girls imprisoned is approximately 6.9% of the global prison population there is no official recording of how many children lose their primary caregiver when women are imprisoned. Although estimates suggest the majority of imprisoned women are mothers. Drawing upon secondary data, we reveal the global knowledge base on the impacts of maternal imprisonment on children is incredibly limited with most understanding drawn from the US. The extant literature shows that children with experience of maternal imprisonment lose essential economic and social capital associated with educational deficits and suffer a range of physical and mental health risk factors. Responding to the evidence we draw six distinct conclusions and argue that for reductions in the various harms outlined separation of mother–child should be a last resort. We make the case for community-based residential alternatives to custodial sentencing for women with accompanying monitoring and evaluation to ameliorate the negative socio-economic and health and wellbeing impacts associated with this form of maternal deprivation.

**Keywords:** maternal imprisonment, maternal incarceration, maternal deprivation, women, children, children's outcomes, health, wellbeing, socio-economic, prison alternatives, custodial alternatives, alternative to incarceration

## 1. Introduction

Women and girls make up approximately 6.9% of the global prison population. Since around 2000 the numbers of women and girls being imprisoned has increased by approximately 53% [1] with increases in each continent. More often than not mothers in prison have been the primary caregiver of their children before entering prison [2]. Based upon estimates, approximately 100,000 women are imprisoned in European countries with a corresponding 10,000 infants under two impacted [3]. Some piecemeal national level data exists but even here it is not comprised of official statistics but estimates gathered from other sources.

In the UK, it is estimated that 17,000 children experience maternal imprisonment annually [4]. According to the Prison Reform Trust, 75% of children stay with their

mother when fathers are imprisoned contrasted with 9% remaining with their father when mothers are imprisoned. Of these, 5% remain in the family home [4]. In the United States, where incarceration rates are the highest, it was estimated that there were a quarter of a million children whose mothers were incarcerated in 1998 [5]. In Europe approximately 800,000 on any given day have a parent in prison [5]. In South Korea, 54,000 children have an incarcerated parent and in China more than one million children have at least one of their parents in prison [6, 7].

In reports focusing on imprisonment and the family, the benefits to the imprisoned parent are often emphasised whilst the benefits to the children are secondary; children are mostly seen as instrumental in their parent's rehabilitation and their needs are largely ignored. However, the issue of maternal incarceration is increasing in salience in the Global North [8]. The impacts of maternal versus paternal imprisonment are likely to be very different; the negative health consequences on children may be much greater if a mother is imprisoned [9–11]. Taking a global perspective this chapter unpacks the effects of maternal imprisonment on children focusing on socio-economic and health and wellbeing impacts although we acknowledge these impacts are not exhaustive. Drawing on secondary data, the subsequent sections discuss socio-economic, and health and wellbeing risk factors associated with maternal imprisonment. In light of the evidence, we then draw six distinct conclusions and argue for alternatives to custodial sentencing to ameliorate the negative socio-economic and health and wellbeing impacts associated with this form of maternal deprivation.

## **2. Socio-economic outcomes**

### **2.1 Educational attainment**

Globally, there is scant research addressing socio-economic impacts with single studies being present across a handful of mostly English first language speaking countries (including Australia, Colombia, Ethiopia, Hong Kong, New Zealand, South Africa) and no English published papers for the vast proportion of the majority world. A number of these papers whilst addressing educational attainment linked to parental attainment do not disaggregate between mothers and fathers. Haskin's (2012) and Shaw's (2019) US studies being cases in point demonstrating the negative effect of parental incarceration on educational attainment, performance and school unhappiness, inferring negative intergenerational impacts of adolescence school unhappiness and restricted educational mobility into adulthood [12, 13]. Luk et al's (2022) systematic review gives an indication of the dearth of studies available with 46 of 57 studies drawn from the US, and 10 of those (18%) exclusively focusing on maternal incarceration [14].

The majority of quantitative studies examining socio-economic effects assess educational attainment during school years. A cluster of overwhelmingly US-based studies find a negative association for maternal incarceration, that is children attain lower grades than their counterparts without mothers in prison and higher rates of incompleteness of school [15–17]. Despite fathers being incarcerated at a higher rate, the effect threshold is lower and for educational attainment the negative impact tends to be greater for those where mothers have been imprisoned [15]. Trice and Brewster (2004) examined children with mothers imprisoned in Virginia state prisons and found they were twice as likely to have received fail grades than the control group of children not experiencing parental imprisonment [16]. Similarly, Cho (2008) found

that grade retention is less likely with children experiencing maternal imprisonment compared to their counterparts for the years immediately following incarceration, for kindergarten to eighth grade in Chicago public schools from 1991 to 2004 [18]. An earlier study in California by Stanton reported that half of the children of the incarcerated mothers were rated by teachers as showing poor or below-average school behaviour, compared with 22% of controls, and 70% of the children of gaoled mothers had below-average academic performance, compared with just 17% of those children whose mothers were on probation [19]. Haskins (2012) found where mothers were incarcerated with children between the ages of 1–4 there was increased grade (school year) repetition [12]. Longitudinal studies for educational impacts for maternal imprisonment are non-existent Nichols and Loper's (2012) study tracked academic outcomes for children experiencing parental incarceration across 11 waves finding that failure to graduate high school was almost double compared to their counterparts [20].

A report by the UK based New Economics Foundation highlighted a higher likelihood that children with experience of maternal imprisonment are especially vulnerable to being unemployed or not in post-school studies, so called NEET “not in education or employment”, after leaving school [21].

Against these dismal analyses, counter findings from Cho (2009) reported no decline in reading or mathematical ability for children experiencing maternal imprisonment [22]. Dargis (2022) found visiting to be a mitigating factor, with improved academic attainment for children visiting their mothers in prison [23].

Away from the US, a study from Colombia demonstrates that parental incarceration had a positive effect of grade attainment, increasing the scores. However, it did not disaggregate maternal from paternal imprisonment [24].

It is not only children of the incarcerated who are affected, Hagan and Foster's US analysis evidence spillover effects that go beyond the children with experience of maternal imprisonment to their counterparts with non-imprisoned mothers in schools with elevated levels of maternal imprisonment. These children were also found to have educational deficits [15].

## **2.2 Financial wellbeing**

Qualitative data in Ethiopia and the UK highlights shared cross-cultural effects of financial difficulty experienced by families and children with maternal imprisonment. Such as highlighted in two distinct rural and urban contexts, as an Ethiopian family report that due to visiting, “our farming land is not properly cultivated; our cattle are not managed; and our living cost has been raised” (p. 71) [25]. Similarly, a UK family reflects, “It's like 75 miles there and 75 miles back and also when you're on benefits and stuff like that it does take quite a chunk out of your money each week..., but the kids had been saying that they wanted to see their Mum and I'm not going to stop them from coming to see their Mum” (p.104) [26]. Time spent visiting the mother by caregivers is a double-edged sword with importance of mother–child bonding on the one hand but oftentimes at the expense of familial income on the other. Family members choosing to care for the child whilst their mother is in prison may give up work to do so adding strain, especially with infants [27].

Later life socio-economic effects have also been minimally considered. The US-based Pew Center for Charitable Trusts notes familial financial difficulties and educational detriment following parental imprisonment so that “prospects for upward economic mobility become significantly dimmer” (p.8) for those children

[28]. The singular longitudinal study in this area to date, again US based, measured young adult outcomes as indicators of social exclusion across four waves: personal income, household income, perceived socioeconomic status, and feelings of powerlessness. The study found that maternal incarceration significantly contributes to social exclusion for these children in their twenties and thirties. Importantly, the study moves beyond purely financial exclusion to lack of social integration and insufficient social participation (and powerlessness) showing the ongoing negative impacts stretching across the life course [29]. Similarly, Minson's (2020) qualitative study also found social exclusion and marginalisation experiences by children of maternal imprisonment, with a trend of mistrust for the police by these children [30].

Many of the socio-economic focused studies treat children as a somewhat homogeneous group, not digging down into differences across characteristics, such as ethnicity, type of replacement caregiver, age at incarceration and so forth. Dowell et al. (2018) are a notable exception [31]. They used linked administrative data for children in Western Australia showing experience of higher rates of social economic disadvantage for children impacted by maternal incarceration for both indigenous and White children compared to their counterparts not experiencing maternal imprisonment.

Taken together the extant literature shows that children lose essential economic and social capital as a result of maternal imprisonment.

### **3. Health and wellbeing outcomes**

Given the socioeconomic consequences on families of maternal imprisonment, and the strong relationship between low socioeconomic status and poor health, it is not surprising that the available evidence suggests that parental imprisonment has a negative impact on the mental and physical health of these children [32]. However, the evidence is not of high quality and most of it comes from one country, the USA. Much of the research examining the health impacts of maternal imprisonment is qualitative with small, non-representative samples, and the quantitative studies are usually cross-sectional surveys although a few studies do look at longitudinal data. Understanding the true impact of maternal imprisonment on their children's health is further complicated by numerous other issues. Not all studies account for the range of possible confounders such as household poverty and the presence in the household of adults who use drugs and/or alcohol. It is also important to consider the age at which the child experienced maternal imprisonment and the sex of the child as it is likely that the impacts vary depending on such variables. Added to this, there is a paucity of data because most studies focus on the impact of the paternal imprisonment, probably because, as already noted, women make up a small proportion of imprisoned people. Nonetheless, the studies published to date suggest wide-ranging impacts on the health of children whose mothers are imprisoned, and these are discussed further below.

#### **3.1 Impacts on mental health and wellbeing**

Several studies have examined the impact of parental imprisonment on the mental health and wellbeing of their children; the majority have shown a relationship between parental imprisonment and poor mental health across a range of disorders. Studies consistently show that children who experience maternal imprisonment are more likely to be diagnosed with anxiety and/or depression than their peers in the community who do not have an imprisoned parent [33–35].

Tasca et al. (2014) found that children in the USA who experienced parental incarceration were statistically significantly more likely to have poorer mental wellbeing but that the risk of harm to the mental health of children with imprisoned mothers was about two times higher than for children with imprisoned fathers, when demographic variables were accounted for [36]. Woo et al.'s study in South Korea showed that parents were more likely report their child having symptoms of depression if the mother was imprisoned compared to the father being in prison [37]. In the USA, Thomson found that children who experienced maternal imprisonment were more likely to experience affective psychopathy than compared to children whose fathers were in prison (Odds Ratio 1.27) but were significantly less likely so experience interpersonal psychopathy (Odds Ratio 0.82) [38].

Gualtieri et al. (2020) conducted a systematic review examining Post-Traumatic Stress Disorder (PTSD) in children with imprisoned parents. They found six studies with 2512 participants and found that 15% of children had PTSD. The parents' sex was significantly associated with the effect sizes suggesting that the prevalence of PTSD was higher in children whose mothers were imprisoned. This is of particular concern and a prevalence of 15% contrasts sharply with the prevalence in the general population of children [39]. In the UK, the British National Survey of Mental Health of over 10,000 children and young people reported the incidence of post-traumatic stress disorder in the UK to be 0.2% for children 5–15 years of age [40]. A large US study of adolescents aged 13–18 years, revealed a prevalence of 5% [41].

A number of studies have examined outcomes relating to substance and alcohol by children of imprisoned parents. In general, studies indicate that children of imprisoned parents are more likely to use drugs or alcohol than their peers who do not have an imprisoned parent. Heard-Garris (2018) showed that children with an imprisoned parent were more likely to smoke cigarettes, use prescription drugs, demonstrate 'problem drinking' and 'problem drug use' than other children [42]. Work conducted by Foster (2013) supported the association between parental imprisonment and 'problem drug use' although Kopak's work (2018) revealed the opposite of this [35, 43]. In none of these studies was it shown that the effect on the children was greater if the mother as opposed to the father was imprisoned.

Despite the apparent level of mental health needs, it is likely that these largely go unmet. The COPING study which looked specifically at the mental health needs of children with imprisoned parents in four European countries (Germany, Sweden, Romania and the UK) found a lack of specialised services in the community for children across all countries and high levels of perceived unmet need [44].

### **3.2 Impacts on physical health**

The physical health and wellbeing of children whose mother is imprisoned have been explored in a number of studies. Physical health outcomes that studies have examined include cancer, high cholesterol, hypertension, diabetes, asthma; migraine, epilepsy, hepatitis, and human immunodeficiency and acquired immunodeficiency syndrome (HIV/AIDS), sexual health, weight, and mortality. The mortality data, from a large Danish database, demonstrated that imprisonment of a parent did have an influence on child mortality but that the sex of the child and the imprisoned parent were important [45]. There was no clear association between maternal imprisonment and mortality in female children. In boys however, mortality was almost doubled if the mother was imprisoned. The authors' conclusions were based on a number of

models that they ran, taking account of a number of potential confounding factors including the age of the child when the parent was imprisoned, household income and parental age [45].

Unfortunately, it is hard to draw conclusions from the available data as studies examine different physical health outcomes and therefore meta-analysis or other meaningful collation of findings is not possible. This is compounded by the small number of events; as far fewer women than men are imprisoned, the data on their children is very limited and the number of events (the occurrence of disease) is even smaller. The data therefore on diagnoses of high cholesterol, asthma, migraine and HIV/AIDS, is limited and shows no difference between those who experience maternal imprisonment and those who do not [33, 46].

Branigan and Wildeman (2019) found that children of imprisoned mothers were 57% less likely than their peers whose parents were not imprisoned to be overweight; this was statistically significant [42]. In contrast, Lee et al. (2013) found no statistically significant difference in obesity rates between children whose mother was imprisoned and children not experiencing parental imprisonment [33]. Such findings were not anticipated given other research by Jackson et al. (2017) showed that there was significantly higher consumption of sugary drinks, salty snacks, starch and/or sweet consumption by children whose mothers were imprisoned compared to children whose did not have imprisoned parents [46]. Heard-Garris et al. (2018) did not find any significant association relating to consumption of sugary drink/soda [42].

A number of studies looked at sexual health outcomes. Two studies looked at early age sexual initiation but showed contradictory findings [47, 48]. Le et al. found that those who experienced maternal imprisonment were significantly more likely to have 'early sex' (defined as under 15 years of age) when compared to children whose parents were not imprisoned but Nebbit et al. using an early sex definition of under 13 years of age, found no statistically significant association. Both studies were based in the USA [47, 48].

Le et al. (2019) also found that children whose mother was imprisoned were over five times more likely to have a sexually transmitted infections (STI) (adjusted Odds Ratio 5.5, 95%CI (1.7,17.6)) when compared to children whose parents were not imprisoned and more likely than those whose father was imprisoned [47]. Roettger and Houle (2021) examined lifetime risk of STI, finding that children with imprisoned mothers were not significantly more likely to have had an STI when compared to children whose parents had not been imprisoned. The strength of their study was that they were able to adjust for confounding variables [49].

### **3.3 Health care use**

Heard-Garris et al. (2018) examined health service usage by children who had either a father or mother imprisoned and compared this to the general population. For children with an imprisoned mother, they were significantly less likely to have had an annual dental exam when compared to children whose parents were not imprisoned (Odds Ratio 0.67 (0.50–0.90)) [42]. Interestingly, this was not the case for children whose father was imprisoned; they were no less likely to have taken part in this important preventive medicine activity. Children of imprisoned mothers were also more likely to have foregone health care (Odds Ratio 1.65 (1.20–2.27)) and used the emergency department as their source of care (Odds Ratio 2.36 (1.51–3.68)) than other children. Children of imprisoned fathers were not more likely to have used the hospital emergency department as a source of care than children without imprisoned

parents. These findings suggest that children of imprisoned mothers in particular are less likely to seek health care despite their high health needs. Their pattern of use is sub-optimal for their health and wellbeing with their low levels of preventive health-care uptake and high levels of emergency care use. That this seems to be particular to the children of imprisoned mothers rather than fathers might be related to the family circumstances. Whilst the children of most imprisoned fathers remain with their primary care giver (their mother), this is not the case with imprisoned mothers whose children often have to leave the family home and their communities. This disruption is likely to impact on their ability to access health services in a timely and appropriate manner.

#### **4. Conclusions**

This chapter has drawn attention to the damage of maternal incarceration for children of women sentenced to prison, highlighting evidence across a range of negative socio-economic and health and wellbeing outcomes. The global knowledge base is incredibly limited with most understanding drawn from the US. Given the heterogeneous nature of imprisonment circumstances it is impossible to draw firm conclusions across the board, nonetheless there is strong evidence that maternal imprisonment is harmful. Children suffer impairments across the four domains of wellbeing: education, health, behaviour, and deprivation when their mothers are incarcerated [50].

To improve these children's life prospects, making them visible and literally count by officially recording their numbers in national government statistics is an essential prerequisite to directly addressing the harms inflicted by maternal imprisonment. Beyond the number of children affected crucial factors such as sentence length or where the child is routed for caregiving not captured. Despite the substantial number of children affected worldwide we have an insufficient understanding of these factors. In essence, these children are desperately underserved by government systems and structures meant to support them, and official poor data capture has contributed to this.

Whilst the extant evidence is heavily skewed to the Global North, particularly North America, the valuable albeit tiny literature from the Global South demonstrates some similar impacts. Context matters and more research is needed in each country affected to understand nuances, similarities, and differences. Moreover, long term impacts are underexplored. Longitudinal research for socio-economic outcomes is scant and again skewed to North America. Although the existing research is not largely of high quality, nor is it extensive, what is available points in one direction: maternal imprisonment has a range of potential negative effects on the health and wellbeing of the children. These might be adverse effects on mental health or on physical health and will be affected by numerous other factors at the individual, family and societal level. However, the quantitative evidence is of poor quality and few studies have effectively disentangled the impact of parental imprisonment from socio-economic factors. The research demonstrates no consistently positive impact on children and does not reveal any successful interventions when the imprisonment of a mother has been seized as an opportunity to intervene early to protect the health and wellbeing of these vulnerable young people.

It is acknowledged that the socio-economic and health and wellbeing impacts discussed in this chapter do not operate independently. For instance, education is a social determinant of health and failure to graduate high school is considered a



serious indicator for poor life adjustment (e.g., related to lower lifetime income, increased chances of being unemployed, welfare-dependent, and incarcerated). A study by Yu-Tzu Wu et al. (2020) focused on health ageing and found that early life differential educational attainment is strongly associated with disparities for a large, multi-country cohort of older people [51]. Therefore, the intersections of the various impacts highlighted require serious scholarly interrogation. Given the intertwined nature of the impacts of maternal imprisonment, alternatives must also incorporate holistic and networked interventions in their services.

Whilst there may be mitigating effects, again little is known about these with the exception of Dargis' work examining family visits to prison. Yet, visits can only go so far not least because of the burden they generate. Due to the comparatively small amount of women's prisons to men's, often families have much further to travel for visiting incarcerated mothers which is more burdensome in terms of time and finances [26]. This suggests caution and a more holistic approach is needed in examination of mitigating factors also.

For a reduction in the various harms outlined separation of mother–child should be a last resort. As demonstrated by Baldwin and Epstein (2017), Booth (2020), Masson (2021), Minson (2021), and others, short term prison sentences wreak havoc not only for the woman sentenced but for her children and family [26, 30, 52, 53]. The immense disruption and harms which ensue are disproportionate to the large majority of sentences often lasting a number of weeks for majority petty theft (shoplifting) and non-violent crimes [53].

This chapter has also shown community spillover effects highlighting the knock-on impacts on society writ large. In essence, a ripple effect, as illustrated by Hagan and Foster's findings on educational deficit. It is unlikely that spillover effects<sup>1</sup> are isolated to this one domain. Elsewhere, negative spillover effects have been studied in relation to violent crime and community mental health. These studies indicate the importance of a more expansive approach to researching the diverse risk factors at play.

Residential community-based alternatives to prison where children are not separated from their mothers are therefore essential. This proposal is less controversial in some countries than others. Whilst the importance of mother–child relationships and alternative residential-based alternatives are recognised by some governments such as the UK and Australia [54–57] as a better way of responding to criminalised women the pace of change is incredibly slow. These government-funded residential alternatives tend to de-emphasise the importance of being located within the community.

Globally, there are a small number of community-based alternative to imprisonment facilities for women however, which enable children to stay with their mothers whilst the women serve their sentences and undertake both psychological and employment-related rehabilitative work. These are mostly operational in the USA and typically run by non-government organisations. Qualitatively, these facilities are understood to work but policymaking relevant evidence, i.e., robust statistical analysis is lacking. A total of four mixed-methods evaluations have been conducted, all in the USA with only one including children in the evaluation design [58–61].

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<sup>1</sup> Although one study has been conducted in relation to children of parental incarceration and spillover effects, elsewhere positive community spillover effects have been studied, relating to children's education (Anderberg, 2003) and negative community spillover effects relating to violent crime (Bencsik, 2018) suggesting the importance of understanding spillover effects 2e572a\_49438f41751c4f868240c372f10d94f4.pdf (wixstatic.com).

At the time of writing, an additional mixed-methods evaluation is underway in the UK for a newly opened gender-responsive, trauma-informed residential community-based alternative facility in England, 'Hope Street' which includes an evaluation of the health and wellbeing impacts of children residents as well as their mothers' [62]. Therefore, alternative facilities need to be accompanied by in depth evaluations to accelerate the policy debate and yield concrete change to improve the life prospects of children with mothers facing a prison sentence.

Returning to the point of spillover effects, this is worth keeping in mind when considering interventions that may initially appear too generous to the public imagination. Taking trauma-informed gender-responsive residential community alternatives as a case in point. We suggest not only do these facilities and services potentially serve the women to rebuild their lives, directly impacting their children but they may also positively impact the local community and broader society by eliminating the boundaries between community and sentenced women and reducing stigma. Where children's outcomes can be improved there are potential positive spillover effects into the community.

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