

## Children of Incarcerated Mothers

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*We review the literature on children whose mothers are incarcerated in jails or prisons. These children typically experience a great many risk factors besides their mothers' incarceration, including poverty, drug and alcohol problems in their families, community violence, and multiple changes in caregivers. Children's lives are greatly disrupted when mothers are arrested, and most children show emotional and behavioral problems. The impact this has depends on the age of the child, the alternate caregiving arrangements, and the course of the mother's incarceration. Children of incarcerated mothers experience internalizing (fear, withdrawal, depression, emotional disturbance) and externalizing (anger, fighting, stealing, substance abuse) problems, as well as heightened rates of school failure and eventual criminal activity and incarceration. Research in this area is scarce and often of poor quality. A research agenda which is guided by a transactional, ecological, and developmental model, and which examines children's well-being over the course of the mothers' incarceration is suggested.*

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Children whose mothers are in prison or jail are among the riskiest of the high risk children in our nation. These children typically experience poverty (Baunach, 1985; Johnston, 1995a; Kampfner, 1995; US Department of Justice, 1994), school problems (Sack, Seidler, & Thomas, 1976; Trice, 1997), repeated shifting of households and caregivers (Johnston, 1995a; Norman, 1995; Sack et al., 1976), and the pain and disruption that accompany separation from the mother (Bowlby, 1969,

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1973; Gabel & Johnston, 1995). Some experts characterize these children's ongoing, repeated stresses as "enduring trauma" and see these stressors as impediments to conquering developmental tasks (Johnston, 1995c; Phillips & Harm, 1997).

Families are more likely to be disrupted by women's incarceration than by men's (Baugh, 1985; Bloom, 1993). While children experience the incarceration of a father more frequently than the incarceration of a mother (due to a larger male population of inmates), the children of incarcerated mothers are more likely to be displaced from their homes and to experience problems associated with the separation from their parent (Bloom, 1993). Children of female inmates suffer even more trauma since the mother is usually their primary caregiver (Fishman, 1983). Despite the degree of trauma these children experience, and the amount of trouble they later cause society, children of incarcerated mothers are an oddly ignored group. They live in every town, every city, every rural county, yet no agency counts them or provides services in an organized way.

### **NUMBER OF CHILDREN OF INCARCERATED MOTHERS**

We do not know how many children in the US are separated from mothers in jails and prisons because no agency—local, state, or federal—keeps track. When a mother is arrested and taken into custody, or even when she is sentenced to a jail or prison where she will stay for months or years, no single agency is responsible for gathering information about her children or seeing that children receive services which they may need (Johnston, 1995a; Virginia Commission on Youth, 1993). Estimates of the number of affected children are estimates, not actual counts, which are based on counting incarcerated women, estimating the percentage who are mothers, and multiplying by the average number of children as found in large-scale self-report data. The United States Department of Justice (1993) conducted a comprehensive survey of men and women in state prisons in 1991 and found that more than 75% of the incarcerated women were mothers of dependent children, while another study of women in jails estimated that 80% are mothers (Inter-University Consortium, 1991).

Prevalence estimates indicate the incarcerated mothers have an average of 2.4 dependent children each (McGowen & Blumenthal, 1978; US Department of Justice, 1993). In 1993, there were approximately 90,000 women incarcerated in jails and prisons in the US, and using the 75% estimate, 67,500 of these were mothers (Johnston & Gabel, 1995). Multiplying these numbers gives a 1993 estimate of over 160,000 children whose mothers were incarcerated. Today's numbers are doubtless higher, due to increased drug arrests and mandatory sentencing laws.

Even if today's numbers were available, more children than this absolute count are affected by maternal incarceration. This is because counts provide a "spot census" which cannot capture the number of mothers who move repeatedly through incarceration, parole, probation, and additional incarceration. For example, the

1991 state prison survey found that over 70% of female prisoners had served a prior sentence of either incarceration or probation (US Department of Justice, 1993). These statistics are important for children because some investigations have found that parental recidivism—the repeated in and out from the prison to home and back to prison—is the most damaging aspect of parental incarceration (Johnston, 1995b; McGowan & Blumenthal, 1978).

### RISK FACTORS BEYOND THE INCARCERATION IN CHILDREN'S LIVES

Children whose mothers are in jail or prison experience the incarceration as one of many ongoing risks. It would not be accurate to say that all their ensuing problems are a direct result of their mothers being imprisoned, for most of the families affected by incarceration are at risk *prior to* the mother's first arrest. The majority of incarcerated women live in poverty, are single, of low education, and disproportionately of minority status (Inter-University Consortium, 1991; Johnston, 1995b; US Department of Justice, 1993). Drug and alcohol use affect a majority of these mothers. Sixty-five percent of women in state prisons in 1991 reported that they were regular drug users, while nearly one in four reported committing the current offense to get money for drugs (US Department of Justice, 1993). Further, for the sample in the Children of Offenders study (Johnston, 1992), 77% of the children of currently or previously incarcerated women had been prenatally exposed to drugs or alcohol. Besides the potential risks from prenatal substance exposure (Myers, Britt, Lodder, Kendall, & Williams-Petersen, 1992; Streissguth et al., 1986; Streissguth, Barr, Sampson, Darby, & Martin, 1989), the children of drug users experience a household which may have become disorganized and a mother whose behavior may have become impaired during times of seeking and using substances.

Incarcerated women typically had a difficult childhood, which may threaten their ability to parent effectively when they are at home with their children. The US Justice Department's (1993) survey of state prison inmates found that one-third of incarcerated women had been physically abused and another one-third sexually abused prior to the incarceration, most during childhood. Childhood physical and/or sexual abuse were reported for 31% of a jailed sample of 100 mothers (Johnston, 1991). Further, the jailed mothers reported that 39% of a their *own* parents had been physically abused as children. The state prison survey found that more than half (58%) of incarcerated women had grown up in a household without the presence of both parents (the rate for the general population when these women were children was 20%), including 17% who had lived in a foster home, agency, or institution at some time during childhood (US Department of Justice, 1993). Almost half the women in prison (47%) had at least one immediate family member who had been incarcerated; the figures for jailed women were 34% with a

parent and 77% with another family member who had been incarcerated (Johnston, 1991). A third (33.6%) of the women in state prisons had a parent who abused alcohol or drugs during their upbringing; for the jailed sample, 39% had a parent addicted to alcohol and 18% had a parent addicted to drugs (Johnston, 1991). These experiences suggest a multigenerational family involvement with criminal behavior, drugs, and alcohol addiction which could affect mothers' perceptions of normal family life and their parenting behavior when they are home with their children.

### **CHILDREN HAVE DIFFERENT EXPERIENCES DEPENDING ON WHO CARED FOR THEM PRIOR TO INCARCERATION**

#### **Children Already in Another Caregiver's Care**

For children who were not living with their mothers at the time of the arrest, the mother's latest incarceration may provide little change in their daily lives because they go on living in the same house, and in the care of the same person (a grandmother, the father, a foster family). Though mothers may not have had full-time parenting responsibility, they often report regular and frequent contact with their children (Hairston, 1991), and so these children are not unaffected by the incarceration. There is no way of knowing how many children fall into this category. For example, in empirical studies from the 1960s to the 1990s, the "children not living with mother" group comprised 44% (Zalba, 1964), 60% (McGowan & Blumenthal, 1978), 26% (Baunach, 1979), 40% (Hairston, 1991), and 33% (Bloom & Steinhart, 1993) of the samples. The more times the mother has been incarcerated, the more likely it is that her children will be in someone else's care (Johnston, 1995a; McGowan & Blumenthal, 1978).

#### **Children in Their Mother's Care**

Most children, especially young children, are in the primary care of their mother when she is arrested. The degree of disruption in these children's lives upon the arrest of their mothers depends in large part on where they go and who takes care of them while she is incarcerated. When fathers go to jail or prison, their children's mothers typically continue to care for them (US Department of Justice, 1993). This is less often the case when mothers are incarcerated. Mothers in state prisons report that their children are in the care of the father in just 25% of cases, while the rest go to a grandmother (51%), another relative (20%), a family friend (4%), or a foster home or agency (11%) (US Department of Justice, 1993). Two percent of children under 18 live alone, without adult supervision. (These statistics do not add to 100% because mothers may be reporting on more than one child,

and the children may be placed in different settings.) Grandmothers are the largest caregiver group, and the many difficulties they face has been well-documented (Dressel & Barnhill, 1994; Jendrek, 1994; Minkler, Roe, & Price, 1994).

Little or no financial assistance is available to family members who are willing to take on the responsibilities involved in raising these children, a burden the state would have to finance should the children be placed in foster care. Such financial hardships may contribute to the complex nature of the child/caregiver relationship. In many instances, relative-caregivers can help prevent children from being exposed to chaotic or neglectful living conditions that perpetuate the possibility of problems in later stages. Relative-caregivers can provide the familial continuity, and the safe, stable environment that the children need. However, this often strains the finances, resources, and energy of caregivers who are older and have few resources (Phillips, 1996).

The child's first placement may not last. Johnston (1995a) reported that the majority of children of incarcerated mothers experience at least one change in placement or caregiver during maternal incarceration. Zalba (1964) found that two-thirds of 299 children studied had at least one change in caregiver, while about 60% had a change in placement. About one in ten children have two or more changes in caregiver (Johnston, 1995a). Changes in caregivers and in placements have been reported in England as well as the US (Woodrow, 1992).

## **CHILDREN'S RESPONSES AND ADJUSTMENT TO MOTHER'S INCARCERATION**

### **Crisis at the Arrest**

The first crisis point for children who are living with their mothers is the actual arrest. This stage is characterized by bewilderment, shock, and stress for the child (Fishman, 1983). One in five children is present at the arrest and witnesses the police officer taking the mother away, often in handcuffs and amidst great noise and confusion (Johnston, 1991). Children are typically terrified. Half of these child witnesses are young, under 7 years, and in their mothers' sole care. One interview study of 36 children, 30 of whom witnessed the arrest, found that even when children had not seen their mothers in two to three years, every child had a vivid memory of the arrest (Kampfner, 1995). If the children are not present, arrested mothers are typically not asked or may not volunteer information about their children (American Bar Association, 1993; Johnston, 1995a; McGowan, & Blumenthal, 1978). The child may come home to an empty house, without any knowledge of what happened to the mother (Fishman, 1983).

Arresting officers often make the initial decision in the field as to where to place children at the time of arrest: They may ask the parent who to call, or may call the juvenile division of their police unit or child protective services to take

custody (American Bar Association, 1993). Children of arrested mothers are most often placed informally with family or friends, or in an institutional setting, which may be changed later (Johnston, 1995a). The child's life is filled with trauma at this time. Children are dealing with their mother's absence from their lives, but in addition may have to move to a new home, which provides another stress. Sack, Seidler, and Thomas (1976) found that in 17 of the 31 families interviewed, the children moved to a different location soon after the initial placement. In addition, siblings are often separated from each other to reduce the burden placed on a single caregiver (Fishman, 1983; Woodrow, 1992).

### **Visitation and Contact with Mothers**

Visits with their mothers following forced separation can be critical to children (Johnston, 1995d). Research involving children in foster care provides much of the evidence that parent-child visitation for children living separate from their mothers is important to children's emotional adjustment, well-being, and reduced behavior problems (Hess, 1987; Kelmer & Clifford, 1962). Johnston (1995d) noted that children need to visit their mothers as soon as possible after incarceration, and then on a regular and frequent schedule. Visits allow children to express their emotional reactions to the mother's separation and to see their mother's situation realistically, thus relieving irrational fantasies and fears about where their mother is housed and how she is being treated. Most important, visits allow parents and children to maintain their relationship during the separation and to reunite more successfully following release.

Children's visits to mothers in prison are made difficult due to distance from the prison, lack of transportation, poor visiting conditions, and caregivers' unwillingness to bring the children to the prison (Beckerman, 1989; Fishman, 1983; Hairston, 1991). Children are most likely to visit their mothers during the first year: In a California study of 99 visiting families, 57% of the mothers whose children visited them had been in prison for less than a year; 61% of the children who visited came at least twice a month (Fuller, 1993). Caregivers and children are much less likely to visit the incarcerated mother if they live more than 100 miles from the prison (Fuller, 1993). The large-scale survey of state prison inmates in 1991 found that 52% of mothers never received visits from their children; about 20% of mothers saw their children less than once a month, and 18% once a month (US Department of Justice, 1993). Only 8% saw their children each week. Hairston (1991) found that, of the mothers in her sample of 56 jailed mothers, 71% had not seen their children and 16% had been visited by their children only once during their incarceration. The majority of the mothers said that they did not want their children to visit them in jail due to the unpleasant visiting conditions. Many jails, and some prisons, have only non-contact visits, in which visitors are separated from the inmate by a Plexiglas screen and must talk through a telephone, often in

a noisy and crowded room. Few visiting areas have playrooms or permit toys and books to be brought in for children.

Caregivers, caseworkers, and prisoners themselves sometimes resist visitation by children, citing undesirable reactions by the children (Bloom & Steinhart, 1993). A survey of caregivers of 240 children visiting California prisons in a 2-week period found that about half the children had behavioral reactions to the visits, most commonly excitability or hyperactivity before visits (Johnston, 1995d). Most reactions (74%) lasted one week or less, and about half occurred only on the visit day. None of the children had prolonged reactions.

### **Children's Age Makes a Difference**

It is common knowledge that children suffer when they are removed from a loving parent or other primary caregiver. The specific impact is related to the child's stage of development. Infants and toddlers face attachment problems when moved into and out of their mothers' care and, if moved repeatedly, may have insecure attachments to their other caregivers as well (Bowlby, 1969, 1973). Not only do the infants not have the chance to form a secure attachment to their mothers, but the mothers may also lack the opportunity to bond to the infants.

About 6% of incarcerated women in the US are pregnant when first sent to jail or prison (US Department of Justice, 1994). Mothers of newborns have one or two days contact while in the hospital and then must relinquish the infant and return to prison or jail. Only a handful of prisons or jails in the US permit mothers to keep their infants with them (Gabel & Girard, 1995). After the mother's release, she comes home to an infant or young child with whom she has not developed an emotional bond and who is not attached to her, with the likely result that the children will have emotional and behavioral problems (Jacobson & Frye, 1991; Lyons-Ruth, Alpern, & Repacholi, 1993). We know that disruptions in a mother's life impact an infant's life, and can change the quality of mother-child attachment in both middle (Thompson, Lamb, & Estes, 1982) and low-income families (Vaughn, Egeland, Sroufe, & Waters, 1979), even in relation to relatively minor changes of housing, child care, and relationships with boyfriends. The impact of a mother actually coming and going from her infant's life could only have a much larger impact on a child's internal representation of attachment figures.

Johnston (1995c) suggested that two- to six-year-old children are the most impacted by separation from their mothers. These children are most likely to witness the crime and the arrest, as they are too young to be at school or outside playing with friends. Witnessing their mother committing a crime is itself a source of stress, as young children are developing a conscience and the moral emotions of empathy, shame, and guilt (Kochanska, Casey, & Fukumoto, 1995; Kochanska, DeVet, Goldman, Murray, & Putnam, 1994; Lewis, 1992). With the separation after the arrest, young children may regress to less mature behavior. They may be slow to

develop autonomy and independence, instead staying excessively dependent and unsure of themselves at an age when a confident self-concept should be forming. Johnston et al. (1995c) reported that young children do not recognize their parents as completely separate from themselves, and so “tend to experience injuries or threats to the parent as injuries or threats to themselves” (p. 73). Some young children feel guilty and responsible, as though their own childish misdeeds or angry feelings caused the mother’s removal. If children are told about their mothers’ incarceration, they sometimes have terrible images about the conditions of the prison (“small, dark, pen-like cells”) and what is happening to the mother (“abuse by guards and inmates . . . they will die in prison”) (Thompson, 1984).

School-aged children and adolescents whose mothers are incarcerated have often had repeated experiences of parental separation and incarceration. Moving between caregivers is a source of traumatic stress for children (Doyle & Bauer, 1989), and studies of children of women offenders have found that a significant portion of children experience repeated placements (Baunach, 1979; Johnston, 1991; Zalba, 1964). Johnston (1992), in a study of older children of offenders, found that only 1 in 11 children lived continuously with one primary caregiver since birth.

Older children experience stresses that involve the incarceration but also go beyond the incarceration. Phillips and Harm (1997) have focused on the “enduring trauma” experienced by children of incarcerated women, a trauma which results from an accumulation of years of poverty, abuse, neglect, molestation, community violence, grief, parent-child separation, multiple placements, and changes in caregivers. The typical immediate emotional reaction for children to such trauma is to feel scared, anxious, and sad. Children who turn their anxiety inward experience withdrawal, hypervigilance, restlessness, nightmares, feelings of guilt, eating problems, declines of self-esteem, and emotional difficulties (Fishman, 1983; Fritsch & Burkhead, 1981; Gaudin & Sutphen, 1993). Baunach (1985) reported that 70% of the children of incarcerated mothers had emotional or psychological problems. If a child has poor coping skills and a family that cannot offer support, feelings of guilt may turn to reactive, acting out behaviors (Fritsch & Burkhead, 1982; Johnston, 1995c). Reactive behaviors in response to repeated trauma include anger, aggression, hostility towards caregiver, sexual promiscuity, substance abuse, gang activity, lying, and stealing. Hunter’s (1984) interviews with 55 parolee mothers showed that 74% of their children had problems such as fighting, lower grades, anger, nightmares, and emotional difficulties. For some children, these reactions are severe enough to be seen as post-traumatic stress disorder (Kampfner, 1995; Lyons, 1987).

By adolescence, maladaptive coping patterns are common among children of offenders (Johnston, 1992, 1995a, b, c). Lying, stealing, gang activity, and violence are common (Johnston, 1995c). Early adolescence is a time when issues of self-identity and autonomy are salient. These children advance from elementary school into middle and high school, and often move into new groups of peers. Looking for a place to fit, many adolescents in this population do not attempt friendships with children from “good” homes and instead feel more accepted by peers from



problem families, peers who are more likely to be engaging in risky or illegal behavior (Kennon, 1997). The socializing experiences available to many youth—team sports, Scouts, musical organizations, school clubs—are often unavailable to these teens from highly stressed families in poor communities. Even when healthy activities are available, these adolescents' own behavior has often become so disruptive and their attitudes so negative that they are neither welcome nor interested in taking part. Johnston (1995c) suggested that the antisocial behavior of these youth reflects an attempt to cope with the demands of the multiple trauma they have faced, and while these responses are maladaptive, they make sense to the young people who are trying to increase their sense of control.

### **SCHOOL PROBLEMS**

Children of incarcerated mothers may also experience problems in school. Sack et al. (1976) found that over 50% of the children of the 11 incarcerated mothers and 20 incarcerated fathers had problems in school following the incarceration. Seventy percent of 166 children of incarcerated mothers showed poor academic performance and 50% showed classroom behavior problems (Stanton, 1980). An investigation of 219 adolescent children of mothers incarcerated in a state prison in Virginia compared the school performance of these adolescents with their same-gender best friend, using data reported by the caregiver of the target child and the mother of the peer child (Trice, 1997). The children of mothers who were incarcerated were more likely than their peers or than state-wide statistics to experience suspension, mandated school visits by the guardian, failing classes, and extensive absences from school. In addition, there was a 34% school drop-out rate for the prisoners' children in comparison with a 10% drop out rate for their best-friend peers. The drop-out rate was related to the imprisoned mothers' educational level, as well as to the type and stability of the child's placement. Mothers who were taking part in educational programs while at the prison had children who were doing better in school than those whose imprisoned mothers were not taking classes.

### **LAWBREAKING AND INCARCERATION BY CHILDREN OF INCARCERATED MOTHERS**

Children of incarcerated mothers are more likely to engage in lawbreaking and to be arrested than other children. The actual risk is a long-term question, and no longitudinal studies have been conducted which might show the rate of arrest or incarceration for these offspring by age 15 or 20 or 25. A frequently cited figure is that children of incarcerated parents are six times as likely as their peers to be incarcerated themselves, although no published account exists of the origin of this

estimate (Johnston, 1998). A sample of 100 women in a California jail reported that 11.4% of their children had been arrested and 10% had been incarcerated (Johnston, 1991). Twenty-nine percent of the 11- to 14-year-olds in another study had been arrested or incarcerated (Johnston, 1992, 1995a). Incarcerated mothers in Trice's (1997) study of 219 adolescent children reported that 29% of their children had been arrested. Combined with the US Department of Justice (1994) finding that for women in state prisons, 46.6% had a family member who been incarcerated, there is strong evidence for family patterns of illegal activity and incarceration. The actual degree of increased risk awaits more careful investigation.

### SHAME, DECEPTION, AND SECRECY

Families of incarcerated women are surrounded by feelings of shame and social isolation. Unlike children experiencing other involuntary separations from parents, such as when a parent is hospitalized or overseas in the armed services, children do not receive sympathy and support from others in response to a parental incarceration (Fritsch & Burkhead, 1982). Families often choose not to tell their children the truth about where the parent is, instead telling them that the parent is in the hospital, away at college, or working out of town (Gabel, 1992; Hairston, 1991; Sack et al., 1976; Woodrow, 1992). Hairston (1991) reported that, to keep up the facade, one mother had post cards mailed from Florida to her children, who lived in the midwest. Most experts agree that this deception is harmful to children (Fishman, 1983; Gabel, 1992; Sack et al., 1976). Children feel confused and abandoned in their mother's absence, they are suspicious of the made-up stories they've been told, and they run the risk of learning the truth from others at school or in the neighborhood.

Even when children are told that their mother is in prison or jail, the stigma of parental incarceration may prompt caregivers to ask the children not to talk about this family secret due to realistic fears about community scorn or rejection. Zalba (1964) found that only 6% of children told others that their mother was incarcerated. Therapists who counsel these children report that forced silence adds to the trauma experienced by children because they have no one to talk with about their feelings (Johnston, 1995a, c; Kampfner, 1995). Children who are asked to keep quiet report social isolation from their friends (Sack et al., 1976). For example, children may not be able to tell friends or teachers why they were absent from school, or why they cannot play in a Saturday ball game, when they went to visit their mother in prison. Adolescents may avoid interaction with well-behaved peers, and gravitate to higher risk peers, out of fear and shame that the good crowd would find about their incarcerated mother (Kennon, 1997). This shame and secrecy may be fueled by the politics of "tough on crime" attitudes, especially when this is accompanied by media coverage which makes villains of the offending parents. The children of

offenders hear these ads and political speeches, and they take in the message that their parents' criminal behavior is shameful.

The stigma of incarceration is felt most strongly by children from communities in which incarceration is unusual and for whom the crime is atypical (e.g., sex crimes, tax fraud, embezzlement; Lowenstein, 1986). Families of first-time offenders feel the social stigma and shame more strongly than families who have experienced this before (Morris, 1965). Gabel (1992) reported that stigma is not as significant for African-American families, who may see incarceration as related to prejudice rather than as an individual problem. In addition, those families who are in good standing with their community prior to the incarceration experience more support from people outside the family (Sack et al., 1976).

### **ALTERNATIVES TO INCARCERATION**

Children may have an easier time if their mothers can serve their sentences in the community rather than going away to prison or jail (Family and Corrections Network Report, 1995). Alternatives to incarceration include house arrest, half-way houses where mothers and young children stay together, day reporting programs in which mothers attend programs in correctional facilities during the day and return to their homes at night, and prison-based nurseries for mothers and infants. These alternatives may require community service placements, supervised jobs, drug treatment, counseling, parenting education, or other community services. Devine (1997) surveyed 24 community-based programs for mothers and children in 14 states. The programs included residential mother/child programs, day programs for mothers, and residential programs for mothers in which children had overnight visits on weekends and holidays. The survey found that overall, community-based sentencing greatly reduced recidivism, was cost-effective, and was effective in preserving and strengthening families. Despite their apparent advantages, these types of programs are available to only a small fraction of female offenders (Devine, 1997).

### **RESEARCH AGENDA**

Research on children of incarcerated women is scarce and most often of poor quality. Researchers have not solved the problem of finding representative samples of these children, and we do not know whether the ones who show up in studies are a typical sample, or the most troubled or the least troubled, of the total population. Few studies have directly interviewed or observed children or used standardized assessment techniques to measure behavioral outcomes (Gabel, 1992; Johnston, 1998). Studies have not examined children's coping skills or resiliency factors or related family dysfunction (Gabel, 1992). Most studies of children of offenders

base conclusions on parent or caregiver interviews. Studies are needed in which all three parties—the children themselves, the mothers, and the caregivers—are observed or interviewed and in which reliable, standardized measures are used. There is a problem even in knowing how many children of offenders there are, for mothers may not want officials to know about their children, and so they may not mention the one who is living out of state, or the one who is with her father.

The accuracy of incarcerated parents' reports on how their children are doing may be inaccurate. Their reports could be affected by social desirability, wanting to cover up problems, or by simply not being aware of what problems their children are experiencing. For example, Fritch and Burkhead (1981) found that incarcerated fathers were more likely to report acting-out problems in their children, while incarcerated mothers reported more acting-in problems. Sack et al. (1976) found that the incarcerated parent played down or failed to acknowledge any problems with their children since the incarceration, while their at-home spouses cited numerous difficulties. Gabel (1992) also criticized the research with children of incarcerated parents for nonrandom selection of subjects, failure to describe the criminal offenses of parents or the length of their sentences, and failure to describe the relationship between mother and child (as well as caregiver and child) prior to the incarceration.

Future research in this area must be guided by a theoretical model that is transactional (Sameroff & Chandler, 1975), ecological (Bronfenbrenner, 1979), and developmental. The children's problems are not caused only by the mother's incarceration. They are caused by a multitude of risk factors which interact and change over time and which can be moderated by protective factors present in the children themselves, as well as in the environment. Research with children of offenders must also be developmental. Children's developmental status—age at separation, how long the separation lasts, gender—provides a template on which these risk and protective factors operate. Response to childhood trauma, living with secrecy and stigma, and movement toward criminal activity all follow developmental processes that are not well understood. Our review of the literature found no longitudinal studies, no studies that examined how children and families changed over the course of a mother's incarceration. The field needs researchers who are well grounded in child and adolescent development who can work together with researchers and service providers from the criminal justice arena (Johnston, 1998). There are more unknowns than knowns.

In general, we know that children of incarcerated mothers have problems—problems which are painful for them as children and which over time become troublesome and dangerous to society. But which children show early signs of trouble, at what ages, at what stage of separation, and in what settings? Which children are showing resilience, and how long does that last? How does repeated separation due to maternal recidivism affect the children? How does the caregiving children receive while the mothers are incarcerated—the quality of the care, the stability of the placement, the quality of the relationships between children and caregiver, and

between mothers and caregivers—influence the children’s adjustment during the incarceration? What factors are critical to children’s adjustment after the mother comes home? How do events and resources in the mother’s past, the caregiver’s life, and the community serve as risk or protective factors? How do alternative correctional programs affect children and their mothers? How do incarceration factors—visitation policies, secrecy and stigma about incarceration, provision of support services, mothers’ participation in training or treatment programs—affect children’s adjustment? These incarceration factors are of immediate importance because they are most amenable to change through policies and services provided by the community and by correctional institutions. There are many unanswered questions. Before planning expensive interventions or policy initiatives, we need research that identifies the multiple risk and protective factors and which unravels the developmental issues of age and timing and individual experience which are critical to the lives of children of incarcerated mothers.

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