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Primary Caregiver Imprisonment in Uganda: Its Impact on Child Poverty, Health and Education

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Primary Caregiver Imprisonment in Uganda: Its Impact on Child Poverty, Health and Education



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We hope that the findings presented in this report will prove useful and inform policy, practice and the provision of services and supports to children and families affected by primary caregiver imprisonment.

Executive Summary

While research has examined how primary caregiver imprisonment (i.e. the imprisonment of those who are mainly responsible for the care of children) can affect children and families in high income countries, little is known about how primary caregiver imprisonment can affect children and families in low income countries. This research sought to address this gap in our knowledge by examining if primary caregiver imprisonment can affect child and family outcomes in low income countries, as well as the achievement of the United Nations (2015a) Sustainable Development Goals. Using Uganda as an in-depth case study, this project investigated whether primary caregiver imprisonment influenced child poverty, health, wellbeing, education and family breakdown. It also sought to examine if primary caregiver imprisonment can impact on the achievement of the United Nations (2015a) Sustainable Development Goals in Uganda.

A mixed methods approach involving both qualitative and quantitative methods was used to conduct the research. Questionnaires were used to measure the participants' experiences of poverty, child wellbeing, health, education and relationship quality before and after the imprisonment of their primary caregiver. Interviews were also used to examine how primary caregiver imprisonment had affected the lives of children and those adults who had assumed the caring responsibilities of the primary caregiver following their imprisonment (i.e. the non-imprisoned adult caregiver). Questionnaires were conducted with 115 participants, consisting of 88 non-imprisoned adult caregivers and 27 children whose primary caregiver was imprisoned. Interviews were conducted with 76 participants, 61 non-imprisoned adult caregivers and 15 children affected by primary caregiver imprisonment. Only children aged between 10 and 17 were eligible to participate in the research and children and their non-imprisoned caregivers were identified as possible participants by their imprisoned caregiver. Participation in the research was voluntary and all potential participants were advised that if they decided not to participate in the research, there would be no negative consequences for them or their imprisoned caregivers. Thematic analysis was used to analyse the interview transcripts and a series of frequencies, paired samples t-tests, Wilcoxon Signed Ranks tests and a linear regression were used to analyse the quantitative data emerging from the questionnaire responses.

After analysing the data, primary caregiver imprisonment was found to have a predominately negative impact on child and family outcomes. While it was possible that primary caregiver imprisonment may have minimal impact on children or, in rare cases, improve child outcomes if the imprisoned caregiver had been abusive, in the vast majority of cases in this research, primary caregiver imprisonment had a negative impact on child and family outcomes. Child wellbeing, health, diet and education was found to worsen following the imprisonment of a primary caregiver. Children reported greater levels of restlessness, illness, anger, loneliness, worry, distractedness, fearfulness and stigmatisation after primary caregiver imprisonment compared to before primary caregiver imprisonment. Children's health decreased following the imprisonment of their primary caregiver and less money was available to pay for medication, medical services or travel to healthcare facilities. More incidents of ill health and sickness were reported by children and adults after primary caregiver imprisonment. Likewise, families and children ate less often, experienced more hunger and the quality and quantity of the food they ate was reduced after the imprisonment of their caregiver. The negative impact of primary caregiver imprisonment on the diet of families and children was also attributed with increasing their susceptibility to illness, hindering the ability of children to perform at school and undertake chores, as well as weakening the capacity of non-imprisoned adult caregivers to care for and provide for the children. Primary caregiver imprisonment was also found to negatively affect school attendance and performance. Compared to before the imprisonment of a

primary caregiver, school attendance become more sporadic and more children left school early as families struggled to pay school fees and children were often excluded from school due to the non-payment of fees. In most cases, children's educational performance and attainment worsened as children were working for longer periods of time on heavy tasks outside of school and as adults had less time available to spend helping them with their schoolwork. Children reported feeling less safe and cared for by teachers following the imprisonment of their primary caregiver and their reduced wellbeing, diet and greater susceptibility to illness was believed to restrict their ability to study and perform well at school.

Primary caregiver imprisonment was also found to exacerbate child poverty and place additional stress and strains on family relationships, potentially contributing to family breakdown. Primary caregiver imprisonment was found to worsen child poverty and increase the deprivations children and families experienced. Before primary caregiver imprisonment, two thirds of children reported being deprived on two, three or four of the poverty indicators but after primary caregiver imprisonment, two thirds of children reported being deprived on six or more of these indicators. Primary caregiver imprisonment is argued to contribute to poverty and inequality by exacerbating and reproducing intergenerational cycles of poverty, inequality, hunger and poor educational attainment. Poorer families were believed to be more likely to be imprisoned and have to rely on credit for their survival. As a result, primary caregiver imprisonment often resulted in these families amassing more debt, which they attempted to manage by selling their few possessions, exchanging labour for money/services and reducing their expenditure on food, health and education. However, this worsened children's and families' experiences of poverty and deprivation, as well as negatively impacted on child wellbeing, health and education. The increased poverty children and families experienced due to the imprisonment of their caregiver was also problematic as it lessened the ability of the family to remain in contact with their imprisoned caregiver, as children and the non-imprisoned adult caregivers were often unable to afford the cost of travelling to visit their imprisoned caregiver. Accounts of primary caregiver imprisonment contributing to family breakdown were also heard due to the added stresses it placed on the relationship between the imprisoned and non-imprisoned adult caregivers, the inability of the non-imprisoned adult caregiver to cope with these added stresses and strains, as well as the lack of contact between families and the imprisoned caregiver. Families and children affected by primary caregiver imprisonment described experiencing a lack of support from government and non-governmental organisations which they believed contributed to family relationships becoming more strained and fractured. The vast majority of both children and non-imprisoned adult caregivers requested financial assistance from government and non-governmental organisations to help them pay for school fees, food, medication and accommodation. They also requested social support and help with getting their imprisoned caregiver released from prison. Lastly, adults and children expressed their concerns about corruption, a lack of fairness and inefficiency in the criminal justice system, which appeared to undermine their public confidence in the criminal justice system and their belief that the justice system, and criminal justice professionals, were operating in a fair and legitimate manner.

Based on these findings, it is therefore concluded that primary caregiver imprisonment can have a substantial negative impact on child wellbeing, health, education and poverty. It can also significantly affect the financial status of families, place additional stresses and strains on family relationships and potentially contribute to family breakdown. The ability of primary caregiver imprisonment to negatively impact on Uganda's achievement of its United Nations (2015a) Sustainable Development Goals is also discussed. In particular, how primary caregiver imprisonment can hinder the Sustainable Development Goals of no poverty, zero hunger, good health, wellbeing, quality education, decent work, economic growth, reducing inequality, responsible consumption and production, as well as sustainable life on land is described. The

report then concludes by outlining some possible next steps that can be taken to address the issues identified in this report and help facilitate the achievement of Uganda's Sustainable Development Goals.

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Chapter 1: Setting the Scene

Uganda has undertaken substantial work to transform its economy and improve the lives of its residents (Republic of Uganda, 2007; 2015; 2016). Between 1990 and 2015, Uganda reduced poverty, hunger, the spread of malaria, mortality rates and orphan levels, while increasing life expectancy, school enrolment and literacy (Republic of Uganda, 2016). It also improved access to medical treatment for HIV/AIDS, safe drinking water, basic sanitation and electricity (Republic of Uganda, 2016). However, despite this work, challenges remain, with almost 20% of the population reporting an income below the national poverty line (Uganda Bureau of Statistics, 2017). Similarly, while school enrolments, literacy and life expectancy have improved, early school leaving, illness and mortality rates continue to pose problems (Uganda Bureau of Statistics, 2016a). The Government of Uganda are aware of these challenges and are tackling them through the achievement of the United Nations Sustainable Development Goals (SDGs) (Republic of Uganda, 2015; 2016). The United Nations (2015a) SDGs aim to reduce poverty, hunger and inequality, while improving health, wellbeing, education, employment, economic growth, peace and the delivery of justice, in a sustainable, environmentally friendly manner. The Government of Uganda have incorporated these SDGs into their plans to transform Uganda from a low income country into a middle income country by 2040 (Republic of Uganda, 2015; 2016). In these plans, interventions seeking to lessen poverty, hunger and inequality, as well as enhance the delivery of education, health and justice, are viewed as central to the development of a stronger economy and more efficient workforce (Republic of Uganda, 2015; 2016).

Uganda has one of the youngest populations in the world, with over 75% of its population aged under 30 (Uganda Bureau of Statistics, 2016b). Yet, over half of young people aged between 15 and 30 have not completed primary education and an additionally 24% have not completed their secondary school education (Uganda Bureau of Statistics, 2016a). This means that roughly 78% of young people are undereducated as their level of educational attainment is to primary school or less (Uganda Bureau of Statistics, 2016a). The main explanation given by young people for early school leaving is because they can no longer afford to pay school fees, with 59% of young people citing this reason, 9% stating they no longer wished to attend school and 8% citing pregnancy as the explanation for their departure (Uganda Bureau of Statistics, 2016a). Many of these young people end up working in insecure, low paid jobs, which are unlikely to lift them or their families out of poverty (Uganda Bureau of Statistics, 2016a). Those with higher levels of education have a higher probability of successfully transitioning into better paid, secure employment but only 27% of young people successfully make this transition and if they do not immediately obtain such employment on completion of their studies, it can take up to a year to make this transition (Uganda Bureau of Statistics, 2016a). Youths with higher levels of education who had not yet made the transition into secure, well paid employment were generally underemployed, meaning that they did not have enough paid work to sustain them or were working in jobs that did not made full use of their skills and abilities (Uganda Bureau of Statistics, 2016a). Within the entire working population in Uganda, education levels are low, with less than one third of all employed people reporting either a secondary school education or post-secondary/primary specialised training (Uganda Bureau of Statistics, 2017). These experiences have led the Government of Uganda to state that the lack of educational attainment and mismatch between people's skills and employment opportunities is hindering the economic and social transformation of the economy (Republic of Uganda, 2015).

The largest industry in Uganda is the agricultural and forestry sector which employs 72% of all of the working age population (Uganda Bureau of Statistics, 2017). Young people from rural locations, females

and those with lower levels of education are more likely to be employed in the agricultural and forestry sector (Uganda Bureau of Statistics, 2016a). These groups also tend to be less well paid compared to males, those in urban locations and those with higher levels of education (Uganda Bureau of Statistics 2016a). In recent years, concerns have been expressed that performance in the agricultural and forestry sector has not been as productive or effective as it could be and is contributing to deforestation and the unsustainable use of resources (Republic of Uganda, 2015). The slow adoption of technological innovations, poor management of pests and diseases, limited access to land and agricultural finance and an over dependency on rain-fed agriculture are thought to be just some of the reasons for this under-performance (Republic of Uganda, 2015). These issues tend to disproportionately affect women and young farmers, with female headed households producing on average 17% less per acre compared to plots managed by male headed households or those that are jointly managed with other family members (Republic of Uganda, 2015). Despite progress being made in gender equality issues, women also continue to face constraints in accessing, controlling and owning businesses and resources (such as land and credit), are marginalised in skills development, inheritance rights and are less well paid in comparison to men (Republic of Uganda, 2015). In addition, people living in rural locations and who have no formal education are more likely to be chronically poor (Uganda Bureau of Statistics, 2017). Females, poorer people, those living in rural locations and those with lower levels of education can also experience more health problems, difficulties accessing healthcare services, child malnutrition and delayed child development (Uganda Bureau of Statistics, 2016c). Over half (55%) of all children aged 0-4 in Uganda experience child poverty and 38% of 6-17 year olds (UNICEF, 2014). Poorer households tend to have more children than richer households and are more likely to experience child poverty (UNICEF, 2014). Children from rural areas and households with low levels of education are also much more likely to experience child poverty, while households that have increased in size and increased the number of children aged under 5 at a greater risk of falling back into poverty (UNICEF, 2014; 2015).

This figures indicate that some groups are particularly vulnerable and less likely to experience the benefits of social and economic developments due to the intersecting inequalities they experience (i.e. their gender, location, socioeconomic status, educational attainment, etc.). These intersecting inequalities can reproduce poverty and inequality, such that those who are the poorest, most marginalised and least educated in society are the last to benefit from economic and social advancements (United Nations, 2015b). For example, women, young people, those from rural locations and those with lower levels of education are more likely to work in the agricultural and forestry sector in poorly paid, insecure work (Uganda Bureau of Statistics, 2016a). Their limited income can increase the probability that their children will experience poverty, poorer health, malnutrition, early school leaving, low education attainment and be employed in low paid, insecure work (Ugandan Bureau of Statistics, 2016a). As a result, these families may continue to be chronically poor and struggle to adopt technological innovations and the most productive, efficient farming techniques because they lack the ability to access credit to invest in these technological innovations, their limited education hinders their awareness/understanding of what farming techniques are the most productive or efficient and/or because their poor health/malnutrition may limit their capacity to undertake these activities. The United Nations (2015b) has recently recognised this problem, stating that often the poorest and most disadvantaged in society have been left behind and not benefitted as fully as they should have from economic and social developments. For this reason, the United Nations (2015a) SDGs emphasise that ‘no-one should be left behind’ and that those who are the hardest to reach should be given priority when seeking to achieve the SDGs.

In this regard, Uganda is no different to other low, middle and high income countries who struggle with issues of inequality, marginalisation and ensuring that those who are the poorest in society benefit the most

from interventions and societal advancements (United Nations, 2015b; World Bank, 2017; World Health Organisation, 2017; Lange et al., 2018). It is for this reason that so many low, middle and high income countries have agreed to commit themselves to the achievement of the United Nations (2015a) SDGs, as they attempt to develop peaceful, prosperous, equal societies that can provide a secure, decent, meaningful employment in a sustainable environment. The SDGs encourage governments to think about how policies, practices and interventions in one area may have knock on consequences in another area and reproduce rather than transform inequality and poverty (United Nations, 2015a; 2015b). For instance, within the SDGs, there is a specific focus on peace, justice and strong institutions as it is argued that violence, human rights violations and a corrupt and/or inefficient justice system will hinder the achievement of peaceful, prosperous and equal societies (United Nations, 2015a). The Government of Uganda have acknowledged that the fight against corruption and the need to ensure a fair legal system is especially important for reducing poverty and inequality, as corruption and abuse of powers can have a disproportionately negative impact on the poorest in society (Republic of Uganda, 2015). Yet, less attention has been paid to how imprisonment may exacerbate poverty and inequality experienced by female headed households, contribute to families falling back into poverty, hinder the achievement of SDGs or negatively impact on child and family outcomes. This research seeks to address this gap in our knowledge by examining how primary caregiver imprisonment may impact on child poverty, health and education and affect Uganda's achievement of its SDGs.

Imprisonment in Uganda

As part of its plans to transform Uganda into a middle income country and achieve the SDGs, plans have already been put forward by the Government of Uganda to tackle corruption, reform laws and enhance access to and provision of legal services (Republic of Uganda, 2015). In the criminal justice system, laws have been reformed, access to justice services have been increased and an alternative dispute resolution mechanism has been introduced (Republic of Uganda, 2015). These improvements have led to the World Justice Project identifying Uganda as one of the countries that has been improving its rule of law and increasing its position in its Rule of Law Index 2017- 2018 (World Justice Project, 2017). With regards to the Uganda Prisons Service, efforts have been made to promote human rights, improve prison conditions and offer educational and rehabilitation programmes (Republic of Uganda, 2015, Uganda Prisons Service, 2018). The percentage of the prison population on remand has been reduced, as well as the average length of stay while on remand (Republic of Uganda, 2015; Institute for Criminal Policy Research, 2018). In addition, access to education, health services and the diet offered to those imprisoned has been enhanced (Republic of Uganda, 2015). Conditions within the prisons have also been progressed as efforts are underway to improve sanitation, renovate detention facilities and build new prison buildings to reduce congestion and overcrowding (Foundation for Human Rights Initiative, 2015a; Republic of Uganda, 2015; Uganda Prisons Service, 2018). Nevertheless, despite these improvements, challenges remain.

Overcrowding remains a serious concern (Office of the Auditor General Uganda, 2016; Uganda Bureau of Statistics, 2017). In 2016, 51,247 people were imprisoned, representing an almost 13% increase in the prison population from 2015 (Uganda Bureau of Statistics, 2017). This increase led to substantial overcrowding; with on average 308 people being held in a space that was originally intended for 100 people (Uganda Bureau of Statistics, 2017). The vast majority of people imprisoned are male (approximately 96%), Ugandan (98%), aged under 34 (77%) and are imprisoned for burglary and theft (20%), murder (16%) and aggravated defilement (14%) (Uganda Bureau of Statistics, 2017). Although the percentage total number of the prison population on remand has been reducing, it remains high at 51% (Uganda Bureau of Statistics,

2017). Additionally, while the average length of time spent on remand has been decreasing, 34% of the total number of people imprisoned on custodial remand sampled by the Office of the Auditor General Uganda (2016) were on remand for more than two years. A shortage of judicial officers and limited funding have resulted in lengthy trial proceedings, which have contributed to long periods of custodial remand and added an additional financial burden on the Uganda Prisons Service due to the costs associated with feeding these individuals and transporting them to and from the courts (Foundation for Human Rights Initiative, 2015a; Uganda Prisons Service, 2017). Corruption in the courts, the taking of bribes and inadequate legal representation is also problematic and can result in those who are poor being over-represented in the prison system as they are disproportionately affected by these issues and lack the resources required to pay fines, bribes, obtain their own legal representation and avoid imprisonment (Foundation for Human Rights Initiative, 2015b; Republic of Uganda, 2015). Other concerns include dealing with outstanding sanitation issues, insufficient staff, a lack of appropriate staff accommodation and prisoner uniforms, as well as limited access to healthcare and educational facilities for those imprisoned (Office of the Auditor General Uganda, 2016; Uganda Bureau of Statistics, 2017). The Government of Uganda has accepted that institutional barriers to accessing and delivering justice services, alongside corruption, are hindering its social and economic development and contributing to poverty and inequality (Republic of Uganda, 2015). For this reason, the Government of Uganda are taking action to address these concerns and acknowledge that how justice is delivered can impact on Uganda's social and economic development, as well as its achievement of its SDGs (Republic of Uganda, 2015).

In spite of this acknowledgment, however, little is known about the backgrounds of those who are imprisoned in Uganda or how imprisonment may affect their families, child outcomes or the SDGs. Some preliminary research by the Foundation for Human Rights Initiative (2015c) found that 76% of imprisoned women were poor or very poor, 32% had never been to school, 36% had a primary school education, 29% had a secondary school education and 3% had been to vocational school/university education. The most common reasons given by the women for committing their offences were to protect their children (36%), for financial/poverty-related reasons (36%) and to support their family (31%) (Foundation for Human Rights Initiative, 2015c). Nearly all of the women (97%) reported having children, with 276 children being affected by the imprisonment of 194 women (Foundation for Human Rights Initiative, 2015c). During 2016, there were 225 babies living with their mothers in prison as imprisoned mothers in Uganda are allowed to keep their babies so that they can breastfeed their babies and develop early bonding attachments (Uganda Bureau of Statistics, 2017). Imprisoned women reported a number of consequences arising from their imprisonment, including loss of job (43%), loss of home (35%), children being taken away (31%), family being broken up (25%), health issues (24%), being stigmatised by family and community (20%), husband leaving them (13%), children living on the street (9%), early school leaving (4%) and other consequences (2%) (Foundation for Human Rights Initiative, 2015c). Only 31% of imprisoned women were visited by family members and only 13% were visited by their children (Foundation for Human Rights Initiative, 2015c). Less is known about the characteristics of imprisoned men in Uganda or how their imprisonment may affect their children and families. However, given a fertility rate of 5.4 children to every woman and that Uganda has one of the youngest growing populations in the world (Republic of Uganda, 2017; Uganda Bureau of Statistics, 2017), it is highly likely that many children are affected by the imprisonment of men, especially if these men are the main financial providers for their children and families.

Research in high income countries has found a strong relationships between the experience of childhood adversities and negative outcomes later in children's adult life (Felitti et al., 1998; Dube et al, 2003; Felitti & Anda, 2010). Eight types of childhood adversity have been consistently linked with negative outcomes in adulthood and these include: poverty; child abuse; domestic violence; caregiver illness/disability; caregiver

substance misuse; caregiver mental illness; caregiver criminality and separation from their primary caregiver through relationship breakdown, divorce, bereavement or imprisonment (Davidson et al, 2012; Webb et al., 2014). Internationally, statistics on the number of children affected by the imprisonment of a primary caregiver (e.g. a parent) are not routinely collected and it is only in recent years that governments in high income countries have begun to pay attention to this issue (Children of Prisoners Europe, 2015; Robertson, 2012). Research in high income countries indicates that the imprisonment of a primary caregiver can have a predominately negative impact on children and families, though this impact can vary, depending on the availability of social welfare services and supports in a country, as well as prison policies and practices regarding visitation and family contact (Murray et al. 2007; Besemer, et al., 2011; Hutton, 2016; Hayes et al. 2018).

Caregiver Imprisonment and Child Outcomes

Past studies in predominately high income countries have found that the imprisonment of a primary caregiver can have a number of negative consequences for children and families (Flynn & Eriksson, 2015; Foster & Hagan, 2009; Hagan & Foster, 2012; Wildeman, 2009). Primary caregiver imprisonment can contribute to relationship breakdown, financial hardship, reduced psychological wellbeing, increase the probability that children will become involved in crime and imprisonment, as well as reinforce existing social inequalities (Murray, 2005, Murray & Farrington, 2005, 2008a, 2008b; Glover, 2009; Kjellstrand & Eddy, 2011; Jones & Wainaina-Woźna, 2013; Wildeman, 2014; Butler, et al., 2015). For children with positive child-caregiver relationships with their caregiver before the caregiver's imprisonment, primary caregiver imprisonment can result in financial hardship, reduced wellbeing, poorer educational attainment, criminality, anger, social exclusion, mental health problems and behavioural difficulties (Foster & Hagan, 2009; Hagan & Dinovitzer, 1999; Murray & Murray, 2010; Wakefield & Wildeman, 2011; Wildeman, 2014). Compared to other types of separation, children's experience of primary caregiver imprisonment strongly predicts their likelihood of experiencing delinquency and antisocial behaviour in adulthood, even when parental criminality and other childhood risk factors are controlled for (Murray & Farrington, 2005). In addition, primary caregiver imprisonment can also predict children's problems with anxiety and depression in adulthood, unlike other forms of parental separation (Murray & Farrington, 2008a, 2008b). However, for children coming from abusive or violent homes, the separation from an abusive caregiver can be beneficial and improve family and child outcomes (e.g. Amato et al., 1995; Jaffee et al., 2003; Nesmith & Ruhland, 2008; Wilderman, 2014). See Table 1 for a list of some of the potential ways that primary caregiver imprisonment has been found to affect children and families in high income countries.

Table 1: Potential Effects of Primary Caregiver Imprisonment

On Children	On Non-Imprisoned Caregivers
Separation Anxiety	Loss of income and financial hardship
Anger	Extra childcare burdens
Worry about safety and wellbeing of the imprisoned caregiver	Feelings of social isolation
Behavioural disturbances	Difficulty maintaining contact with imprisoned person
Deterioration in school performance	Family relationship breakdown
Stigma	Stigma
Decrease in stable, quality parenting due to additional work commitments taken on by the non-imprisoned adult caregiver and the less time the non-imprisoned adult caregiver has available to spend with children	Added financial strain due to costs associated with imprisonment (e.g. visiting, sending money into prison, etc.)
Teasing	Strain in relation contributing to separation/divorce
Bullying	Moving home due to an inability to continue to pay rent/mortgage on the family home
Increased probability of being involved in crime and antisocial behaviour	Reduced wellbeing as non-imprisoned caregiver must now support themselves, the imprisoned individual and the children
Increased probability of being imprisoned	Poor visiting conditions and problems with being able to avail of visiting opportunities (e.g. due to the costs associated with visiting)
	Perceived hostile and judgemental attitudes of some prison staff towards families
	Problems reuniting with imprisoned person on release from prison

(Source: Murray, 2005; Glover, 2009; Jones & Wainaina-Woźna, 2013; Butler et al. 2015).

The impact of primary caregiver imprisonment on children has been found to be even greater in cases where mothers are imprisoned, as children are often placed into the government’s social care system if fathers or other family members are unable to assume responsibility for their welfare (Hamilton & Fitzpatrick, 2006; Corston, 2007; Penal Reform Trust, 2014). Some research has found that children of imprisoned mothers are more likely to be convicted of a criminal offence as an adult compared to the children of imprisoned fathers (Dallaire, 2007). Yet, how primary caregiver imprisonment can affect children depends on their relationship with their primary caregiver before their imprisonment, as well as how children cope and react to these events, which is in turn influenced by how the non-imprisoned adult caregiver reacts to and discuss these events with children (Jones & Wainaina-Woźna, 2013; Manby et al., 2015). Adults who maintain a positive view of the imprisoned caregiver and do not experience shame or stigma at their imprisonment tend to encourage children to maintain a positive view of their imprisoned caregiver (Manby et al., 2015). Being supported by family and friends, living in a secure, stable and loving environment, as well as having an opportunity to visit the imprisoned caregiver and maintain contact with them, can also reduce the negative impact of primary caregiver imprisonment on children (Parke & Clark-Stewart, 2001; Poehlmann, 2005; Nesmith & Ruhland, 2008; Jones & Wainaina-Woźna, 2013; Butler et al., 2015; Manby et al., 2015). The availability of social welfare services and supports in a country, as well as prison policies and practices which encourage regular family contact, can also lessen the potential negative impact primary caregiver imprisonment can have on child and family outcomes (Murray et al. 2007; Besemer, et al., 2011; Hutton, 2016; Hayes et al. 2018).

An additional concern is that research has found that young people, ethnic minorities and those who are the most economically and socially disadvantaged in a society are over-represented in prison systems internationally (e.g. Wacquant 2001, 2009; Penal Reform International 2017; Prison Reform Trust 2017). This means that many poor, disadvantaged young people will experience imprisonment in addition to their economic and social marginalisation. As primary caregiver imprisonment can negatively impact on children's educational performance, family income and involvement in criminality, it can further compound the intersecting inequalities these children experience. Accordingly, primary caregiver imprisonment and its effects on children and families may reproduce poverty and inequality, thereby ensuring that these groups remain chronically poor and the last to benefit from social and economic advancements. Research in America indicates that primary caregiver imprisonment significantly increased the risk of child homelessness and that this effect was concentrated amongst African Americans (Wilderman, 2014). In this way, Wilderman (2014) argues that primary caregiver imprisonment can contribute to racial disparities in child homelessness, black-white inequalities and inequality in civic and political participation. It is, therefore, important to consider how primary caregiver imprisonment may be affecting child and family outcomes, as well as the achievement of the United Nations (2015a) SDGs.

The Present Study

This study seeks to begin to address this gap in our knowledge by examining if primary caregiver imprisonment can affect child and family outcomes and the achievement of the SDGs in Uganda. Using Uganda as an in-depth case study, this research will examine if primary caregiver imprisonment in low income countries can affect child poverty, health and education, as well as contribute to family breakdown. More specifically, this research will:

- ❖ Assess if child wellbeing is affected by primary caregiver imprisonment.
- ❖ Explore whether primary caregiver imprisonment influences child health
- ❖ Investigate whether children's educational performance is altered by caregiver imprisonment
- ❖ Examine if primary caregiver imprisonment impacts on child poverty
- ❖ Probe whether caregiver imprisonment contributes to stresses on family relationship and family breakdown
- ❖ Scrutinize the extent to which primary caregiver imprisonment may be exacerbating poverty and inequality, hindering the achievement of the SDGs.

Chapter 2: Research Methodology

To achieve the study objectives, both quantitative and qualitative methods were used to gather information about the wellbeing of children before and after the imprisonment of a caregiver/parent. The target respondents were children aged between 10 and 17 years old, and the non-imprisoned adult caregivers of these children who had assumed the responsibility for caring for these children following the imprisonment of their primary caregiver. The non-imprisoned adult caregivers provided information about the wellbeing, education, health and poverty of children aged under 10 years old. Quantitative questionnaires were used to in order to understand the quantitative differences in child wellbeing, health, diet, education and poverty of children before and after the imprisonment of their primary caregiver, whereas qualitative interviews were used to get a detailed understanding of how primary caregiver imprisonment had affected the lives of these children and non-imprisoned adults, as well as the achievement of Uganda's SDGs.

Sample

As there is no administrative records held of the families affected by imprisonment or their contact details, potential participants were voluntarily recruited by approaching imprisoned caregivers through the Uganda Prisons Service. Researchers entered three Ugandan prison facilities (Sentema, Kasangati and Mpigi prisons) to voluntarily recruit 100 imprisoned caregivers to provide the contact details of their families. Two key benefits of using this recruitment method were that it allowed the researchers to obtain the consent of the imprisoned caregiver before approaching their family about potentially participating in the research and it ensured that researchers were provided with the accurate contact details of these families. When recruiting imprisoned caregivers within the Ugandan prison facilities, Ugandan prison staff gathered those detained in the prison for a verbal announcement about the project by the research team. This announcement was given in multiple languages by members of the research team to facilitate the different languages spoken by those in the prison. The purpose of the research, its voluntary nature and what participation would involve was explained to all. Special attention was paid to ensuring that all understand the voluntary nature of the research and that there would be no negative consequences for them or their families if they chose not to participate in the research. This was done in order to avoid people feeling coerced to participate. People who believed their families would like to take part in the research were asked to speak to the researchers following the announcement so that the researchers could explain the study in more detail to them, obtain their consent to contact their families and record the contact details of their families. Initially, it was envisaged that only families from Sentema prison would be recruited but in order to obtain the contact details of 100 families, it was necessary to extent the research to two other prison facilities in the Wakiso and Mpigi districts (Kasangati and Mpigi prisons). Although it was estimated that the families of the imprisoned caregiver would live within a radius of 300 kilometres of the prison facilities, the families were scattered in the Eastern, Northern, South-Western and Central regions of Uganda. The majority were from the Central region were the prison facilities were located. Only those families for whom the imprisoned caregiver had given their consent to contact were contacted, using the contact details provided by the imprisoned caregiver.

After receiving the consent and contact details of these families from the imprisoned caregiver, the researchers contacted these families to explain who they were, how they had obtained their contact details and the purpose of the research. What was involved in taking part in the research was explained, as well

as the voluntary nature of the research and that a decision not to take part in the research would not negatively impact on the family, their imprisoned caregiver or their dealings with the Uganda Prisons Service. Family members were only eligible to take part in the research if they gave their informed consent to participate and it was stressed to all family members that just because their imprisoned caregiver had provided their contact details and suggested that they might like to take part in the research, they were under no obligation to do so. Of the 100 families contacted, three refused to take part in the research. If family members consented to take part in the research, a suitable time to conduct the research was agreed. Only children aged between 10 and 17 years and their non-imprisoned adult caregivers were eligible to participate. Drawing on census data, it had been anticipated that each households would have at least 3 children aged between 10 and 17 who could potentially take part in the research. However, this was not the case as most of the people who were imprisoned in the prison facilities visited by the research team were young and were either not married or had young families with children less than 10 years old. When families agreed to take part in the research, they were first asked to complete the questionnaire component of the research, before then being asked if they would like to take part in an interview about their experiences of how primary caregiver imprisoned had affected their lives. All participants were aware that they could refuse to take part in the questionnaire and/or interview, refuse to answer a question or discontinue their involvement in the research at any stage, without giving an explanation or experiencing any negative consequences for doing so.

The final sample for the questionnaire component of the research was 115 participants, consisting of 88 non-imprisoned adult caregivers and 27 children. More non-imprisoned adult caregivers were included in the study than children because most children were aged under 10 years old. The final sample for the interviews was 76 participants, involving 61 non-imprisoned adults and 15 children. The sample size for the interviews was slightly smaller than for the questionnaire component of the research as some participants who completed the questions decided not to take part in an interview.

Measures

Structured self-report questionnaires and in-depth interview schedules were used to collect the data. Two questionnaires were developed for data gathering: the child questionnaire and the caregiver questionnaire. The child questionnaire included sections which measured children's socio-demographic characteristics, access to household assets, household nutrition, relationships and behaviour, health, education and wellbeing. Questions asked in the questionnaire were modelled on segments of the Goodschools questionnaire and the Demographic and Health Survey (please contact the authors for a copy of the questionnaire used). Similarly, the caregiver questionnaire included sections which measured children's socio-demographic characteristics, access to household assets, household nutrition, health, education and child wellbeing. Again, questions asked in the questionnaire were modelled on parts of the Demographic and Health Survey (please contact the authors for a copy of the questionnaire used).

Two interview schedules were also created to guide the in-depth semi-structured interviews with children and their non-imprisoned adult caregivers. In the interviews with children, children were asked to talk about their experiences prior to the imprisonment of the primary caregiver. In particular, they were asked about their education, wellbeing, family relationships, health and nutrition. Next they were asked if the imprisonment of their primary caregiver had affected their education, family relationships, health, nutrition and/or wellbeing. Lastly, they were asked if they had received any support following the imprisonment of

their primary caregiver, if they thought families affected by primary caregiver imprisonment should be supported and, if so, what types of support they would like to see given to such families (please contact the authors for a copy of the children's interview schedule). Similar questions were asked in the interview schedule for non-imprisoned adult caregivers. These adults were asked about what life had been like for them and the children prior to the imprisonment of the children's primary caregiver and if their imprisonment had affected their family relationships and financial status. Following on from this, they were asked if they believed that the imprisonment of the children's primary caregiver had affected their educational performance, health, nutrition or wellbeing. Finally, they were asked about the extent to which they and the children were able to maintain contact with the imprisoned caregiver, what support they had received and if they believed services and supports should be available to help children affected by primary caregiver imprisonment (please contact the authors for a copy of the adult's interview schedule).

One of the aims of this study is to examine if child poverty and inequality can be exacerbated by caregiver imprisonment. In assessing child poverty, the Bristol school approach was adopted and the indicators accessed include: the extent to which a child participated in child labour, school attendance status of the child, ownership of a school uniform, a pair of shoes, access to a computer, own room for sleeping, a pair of bed sheets, a blanket, own room for sleeping, information, books and nutrition status (see Gordon et al., 2003). This approach to defining child poverty has been used in Uganda previously (e.g. UNICEF, 2014) and the Uganda Bureau of Statistics has used the indicators referred to above as a means of measuring household and individual poverty (Uganda Bureau of Statistics, 2018).

Procedure

Data collection was undertaken by a team of trained research assistants who were predominately University students from Makerere University and overseen by Dr Misinde and Dr Butler. The research assistants were trained for four days before beginning to collect data to ensure they were acquainted with the measures being used, the ethical issues involved in conducting the research and the potential challenges that may be encountered during the data collection. The research assistants also provided feedback on the measures being used, helping to improve these measures and their usability during the data collection stage. Five research assistants were trained but only four research assistants (three male and one female) took part in the data collection as one of the research assistants dropped out of the team before data collection began.

As previously described, after giving their consent to participate, children and non-imprisoned adult caregivers were initially asked to complete a self-report questionnaire about their experiences before and after the imprisonment of their primary caregiver. Researchers gave participants the option of completing the questionnaire on their own or with their assistance to allow for potential reading, writing and comprehension difficulties. After completing the questionnaire, participants were given the option of also taking part in an interview about how primary caregiver imprisonment affected their lives. Interviews were recorded with the permission of the participant and later transcribed for analysis. Children were free to choose whether or not they wanted their non-imprisoned adults with them as they took part in the research. After completion of the questionnaires and interviews, participants were thanked for their time and given the researchers' contact details should they have any further questions or wish to withdraw from the study at a later date.

Data collection was completed between June and August 2017. During the field work, the researchers moved in pairs and were supported by field guides who were well conversant with the areas visited and also an interpreter for households that did not understand either Luganda or English. This helped to reduce the potential navigational and language difficulties the research team encountered. However, a number of other challenges remained. For example, some potential participants remained sceptical of the researchers and were reluctant to participate, fearing that the researcher were working for the criminal justice system. Some participants would ask: “are you a police man or a lawyer or who?”. Participants also desired the researchers to assist them. Despite the researchers clearly explaining the purpose of the research and that they do not have any influence or control over the criminal justice system, some participants continued to request assistance for their imprisoned caregiver and/or their children. In addition, access to families of imprisoned caregivers was not easy given the lack of precise addresses system in Uganda. The researchers used the Local Council to try to locate households. In some places, the roads to households could not be accessible by vehicles; hence the use of a bodaboda became paramount. Moreover, some imprisoned caregivers had more than one wife with children in different places and many children were either at school or taken to live with other family members in different locations when the data was collected.

Ethical Considerations

Ethical approval was obtained to conduct the study from Queen’s University Belfast, Makerere University and the National Council for Science and Technology in Uganda. In addition, permission to access the prison facilities was obtained from the Uganda Prisons Service. At the prison facility, permission was also sought from the Officer in charge of the facility before entering the prison to begin the participant recruitment to the study.

Given the nature of the research, a number of ethical considerations were of particular importance. Ensuring participants were fully informed about the nature of the research, understood its voluntary nature and did not feel coerced to participate was paramount. Informed consent was obtained at every stage of the research and from every individual involved in participating in the research. First, informed consent was obtained from the imprisoned caregivers so that researchers could contact their families. Next, the informed consent of the non-imprisoned adult caregiver was sought, as well as the informed consent of children. Only those non-imprisoned adult caregivers and children who voluntarily consented to take part in the research were eligible to participate. In this way, the consent of both the imprisoned caregiver and non-imprisoned adult caregiver was obtained before children were asked if they would like to take part in the research. Information sheets, announcements and one-on-one conversations were used to explain the purpose of the study and what participation would involve to potential participants. Great care was also taken to ensure that all participants understood the voluntary nature of the research and that there were no negative consequences for them or their imprisoned caregiver if they decided not to take part in the research or withdraw from the study. The researchers also stressed to potential participants that they were unable to influence or exert control over the criminal justice system or criminal justice personnel. Only those who had the capacity to give informed consent were included in the study.

Only limited confidentiality and anonymity was offered to potential participants and this was made clear in all verbal communications with participants, as well as the study information sheet and consent form.

Participants were aware that information would remain confidential and anonymous unless participants threatened to harm themselves or someone else or informed the researchers about a serious incident of criminality. In such circumstances, the researchers were required to report this information to a relevant authority and could not guarantee anonymity or confidentiality in these circumstances. However, in all other circumstances, the information remained anonymous and confidential. The interview transcriptions and questionnaire responses were anonymised so that no names or other identifying information appeared in the report. Only members of the research team, a translator and a transcription company used to transcribe the interviews recordings had access to the data collected as part of this research and the translator and transcription company signed a confidentiality agreement agreeing not to disclose any of the information they had access to. Potential participants were aware of this before consenting to take part in the research. All project data was stored securely either on a password protected computer drive or a locked filing cabinet in a locked office.

In order to minimise the possibility of participants becoming distressed during the research, all potential participants were made aware of the types of questions they would be asked if they decided to take part in the research. Potential participants were advised that if they thought they might become distressed while discussing this information, they should not agree to take part in the research. If participants consented to take part, they were reminded that they could refuse to answer a question, stop the research or withdraw from the research at any stage should they begin to feel distressed. A distress protocol was also followed. As part of this protocol, the researchers were required to monitor participants during the research for verbal and behaviour signs of possible distress and, if they become aware of any such signs, offer to pause the data collection, reschedule the data collection or terminate the participant's involvement, depending on the specific needs of the individual. A list of available support agencies was also provided to participants on completion of the project.

Data Analysis

The quantitative data was captured using Epidata and transferred to Stata 13 for cleaning and analyses. Descriptive statistics which include frequency distribution and bivariate analysis to identify simple relationships between before and after imprisonment situations were done. Wilcoxon signed-rank test and paired t-tests were used to determine the differences between pre and post caregiver imprisonment of children's wellbeing, education, health, nutrition, relationships and poverty. A linear regression was also used to examine how primary caregiver imprisonment could exacerbate children's experience of severe deprivation and poverty.

The interview data was transcribed and entered into NVivo for analysis. Thematic analysis was used to analyse the interview transcripts. Thematic analysis is a qualitative methodology used to identify, analyse and report patterns or themes in a dataset (Braun and Clarke, 2006). This method of analysis was used to identify recurring themes in participants' responses to the interview questions to identify how primary caregiver imprisonment can impact on the lives of children and their non-imprisoned adults. Quotes from the interviews with children and their non-imprisoned adults have been chosen for inclusion in this report as they best exemplify the themes being discussed.

Chapter 3: Impact on Children

In this chapter, the impact of primary caregiver imprisonment on child wellbeing, health and education is explored. The chapter begins by examining if primary caregiver imprisonment has negatively affected child wellbeing, before moving on to examine its impact on child health. Following on from this, the effect of primary caregiver imprisonment on child education is investigated. The chapter then concludes with a summary outlining the key findings to emerge from this data.

Child Wellbeing

Using a paired samples t-test, a significant difference was observed between the children's total self-reported wellbeing scores before and after the imprisonment of their caregiver ($t(26) = 5.526, p < .001$). Children reported more problems in their wellbeing following the imprisonment of their caregiver compared to before their imprisonment (see Figure 1).

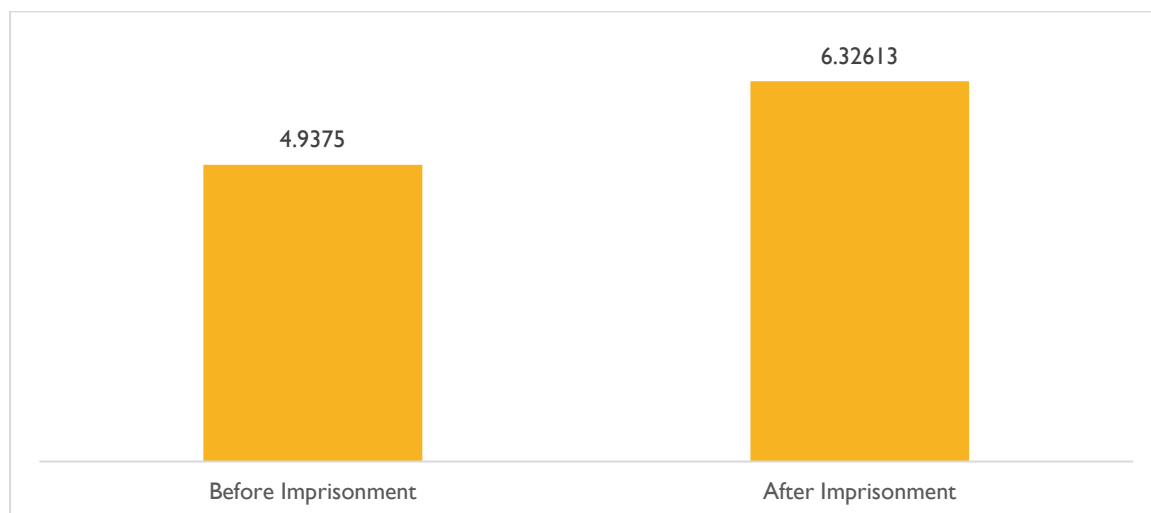


Figure 1: Mean reported wellbeing problems before and after caregiver imprisonment

A series of Wilcoxon Signed Ranks tests was then used to identify what aspects of the children's wellbeing was affected by the imprisonment of their caregiver. No statistically significant differences ($p > .05$) were observed in children's self-reported sharing, caring, volunteering, fighting, bullying and stealing behaviours. Likewise, no statistically significant differences ($p > .05$) on their helpfulness, niceness, obedience, ability to relate to others, kindness, nervousness, concentration, friendliness or the extent to which they think before acting was found. However, a statistically significant difference was reported on their restlessness ($Z = -2.863; p < .01$), with children reporting significantly more restlessness following the imprisonment of their caregiver compared to before their imprisonment (see Figure 2).

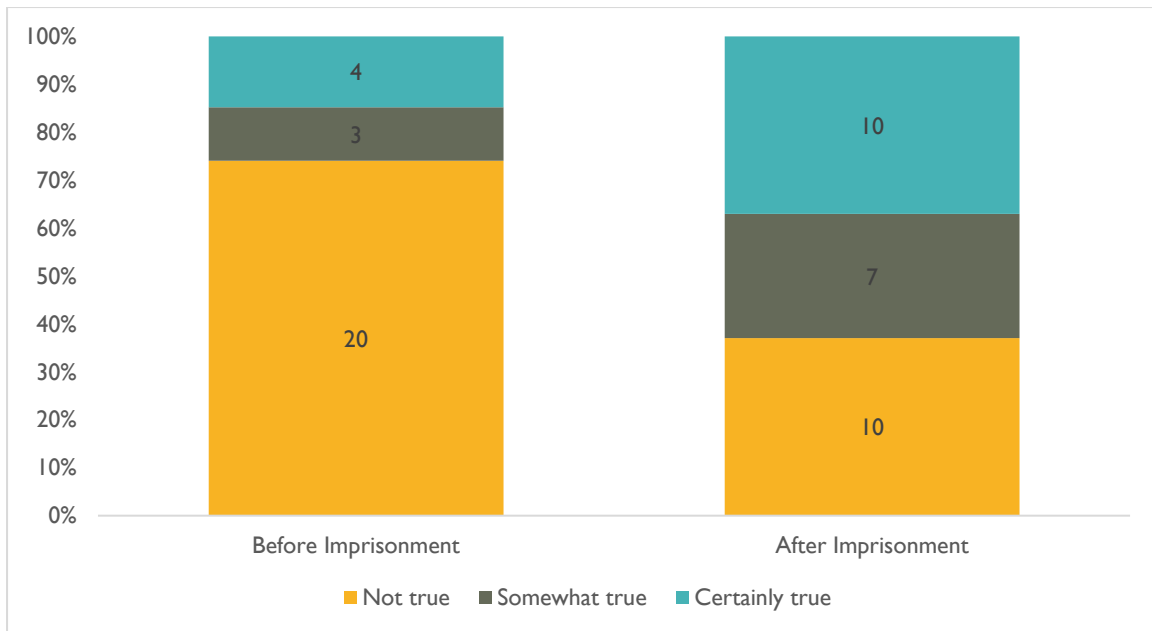


Figure 2: Children's self-reported feelings of restlessness pre and post caregiver imprisonment

A significant difference was also found in the amount of headaches, stomach-aches or sickness that children experienced ($Z = -3.176$; $p < .001$), with children reporting more frequent headaches, stomach-aches and sickness after the imprisonment of their caregiver (see Figure 3).

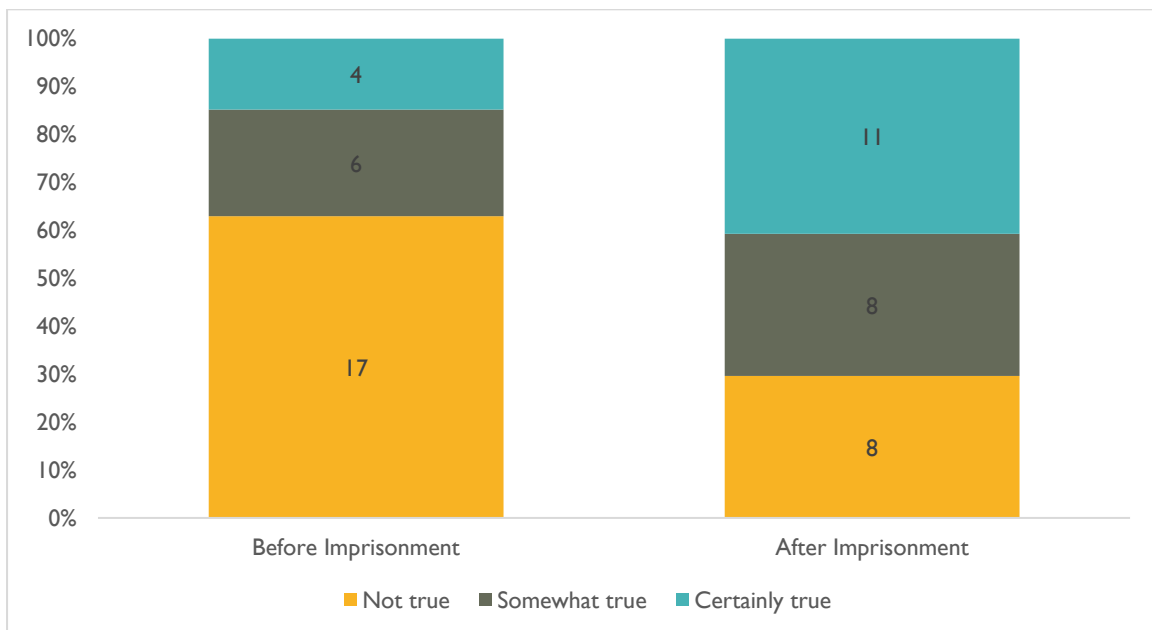


Figure 3: Extent to which children self-reported experiencing a lot of headaches, stomach-aches and sickness pre and post caregiver imprisonment

In addition, children reported feeling significantly more anger following the imprisonment of their caregiver and losing their temper more frequently compared to before their imprisonment ($Z = -2.636$; $p < .01$) (see Figure 4).

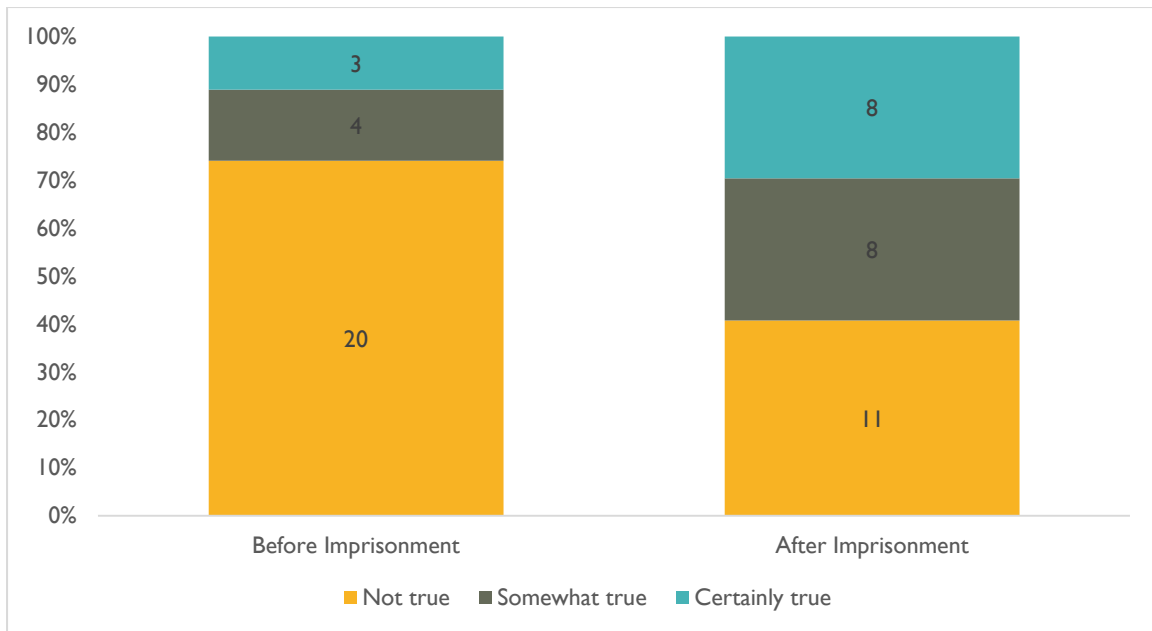


Figure 4: Children self-reporting anger and losing their temper pre and post caregiver imprisonment

More children also reported that they were usually on their own following the imprisonment of their primary caregiver compared to before their imprisonment ($Z = -2.377$; $p < .05$) (see Figure 5).

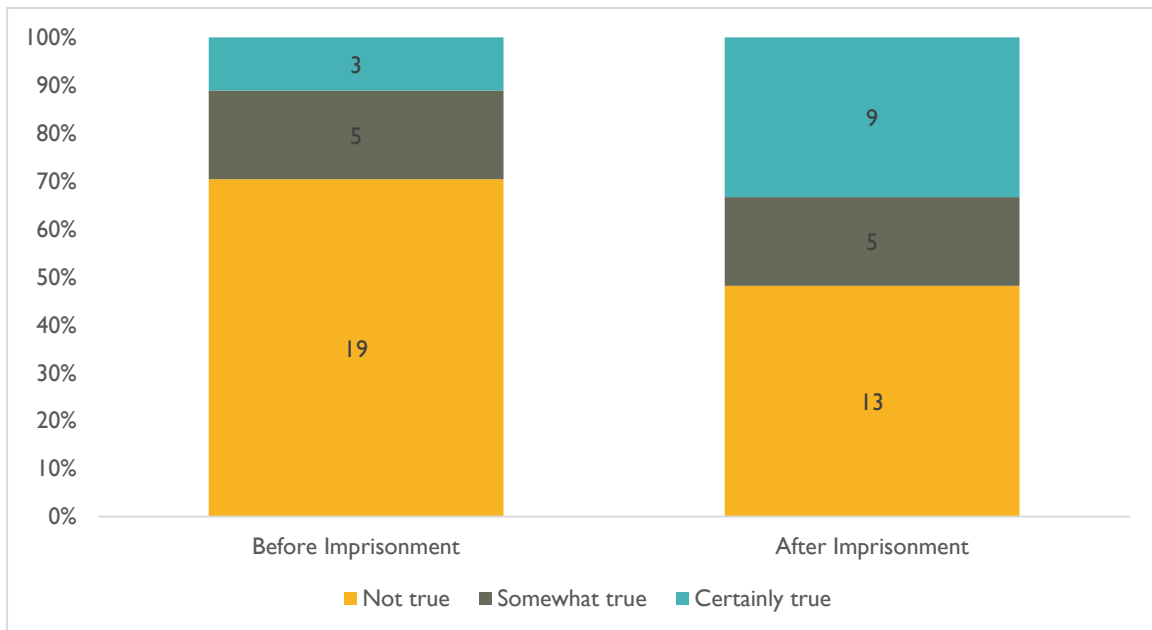


Figure 5: Extent to which children reported that they were usually on their own pre and post caregiver imprisonment

Moreover, children were significantly more likely to report that they worried a lot following the imprisonment of their caregiver ($Z = -3.615$; $p < .001$) (see Figure 6).

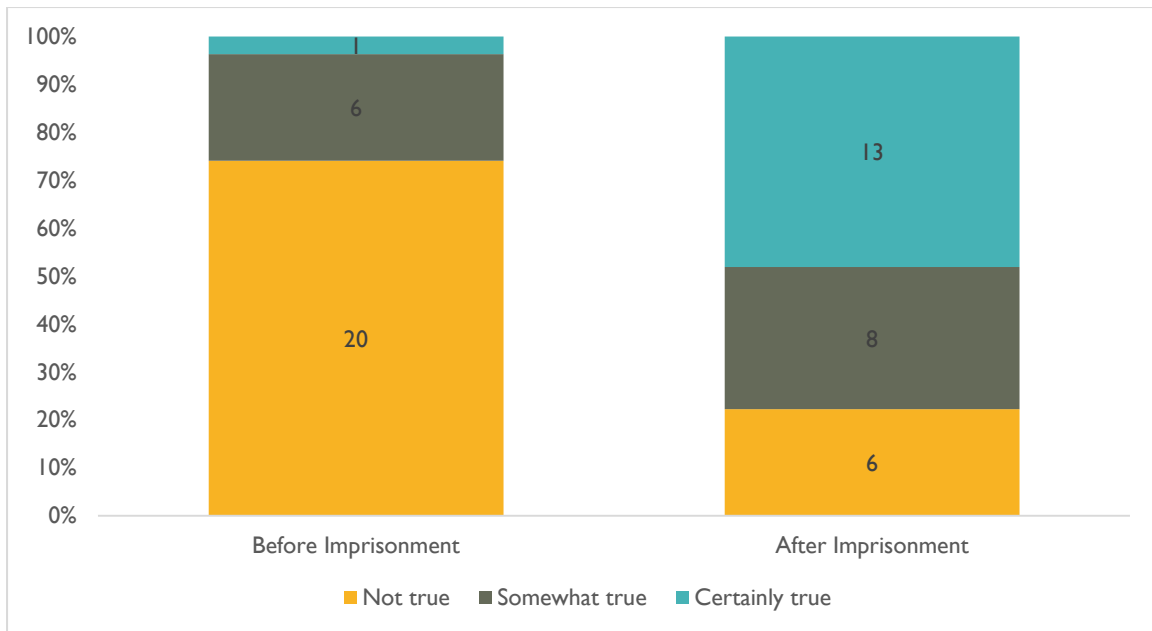


Figure 6: Children self-reporting they worried a lot pre and post caregiver imprisonment

Fidgeting and squirming was also significantly more common in children following the imprisonment of their primary caregiver ($Z = -2.530$; $p < .05$) (see Figure 7).

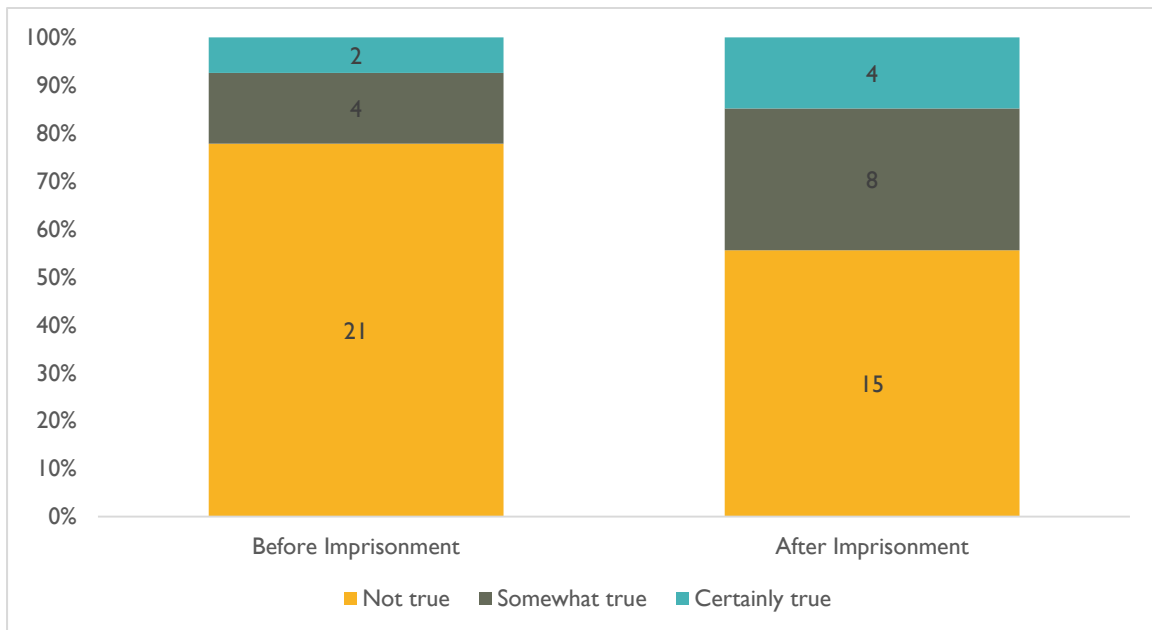


Figure 7: Children's self-reported constant fidgeting and squirming pre and post caregiver imprisonment

More children reported being unhappy, downhearted and tearful following the imprisonment of their caregiver compared to before their imprisonment ($Z = -3.195$; $p < .001$) (see Figure 8).

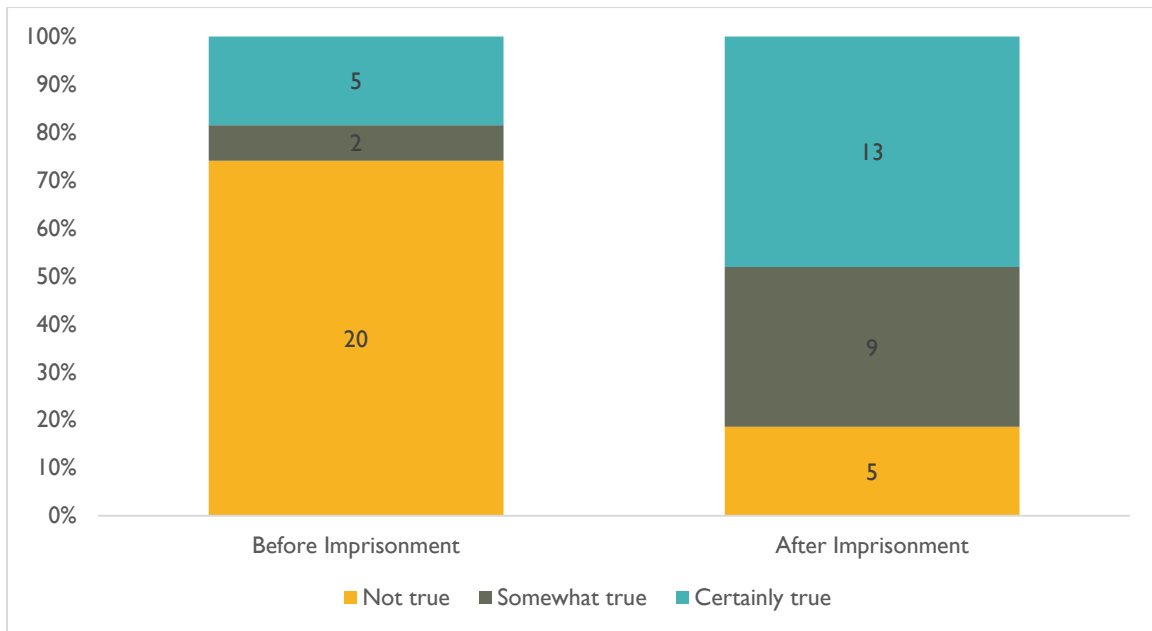


Figure 8: Extent to which children reported that they were often unhappy, downhearted or tearful pre and post caregiver imprisonment

Further, more children reported being easily distracted following the imprisonment of their primary caregiver ($Z = -2.486$; $p < .05$) (see Figure 9).

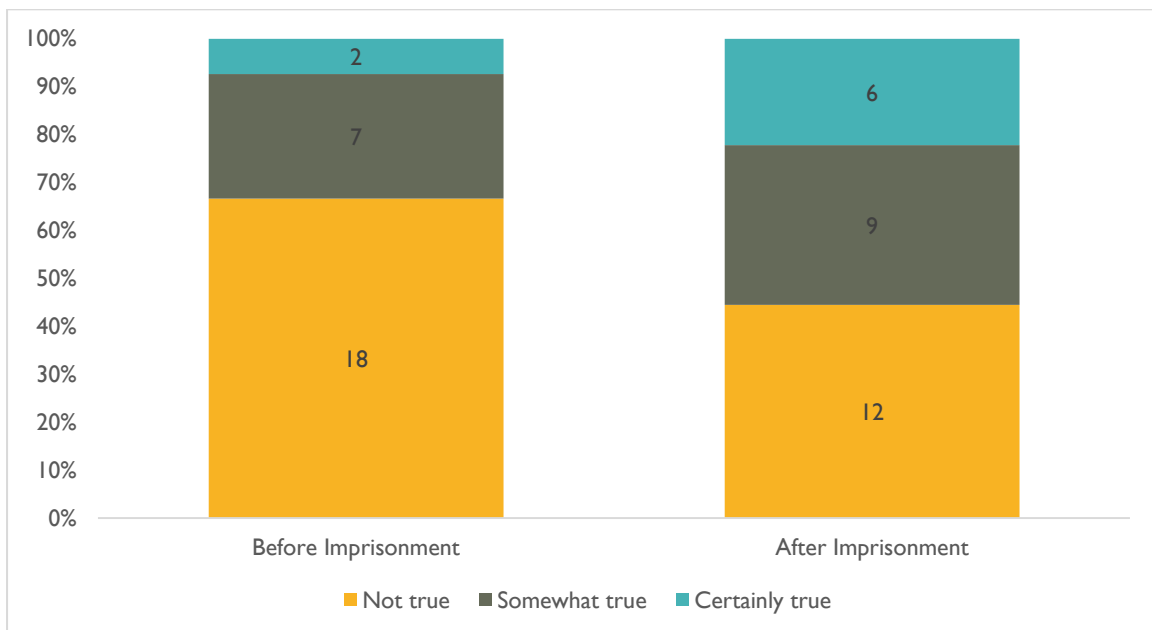


Figure 9: Extent to which children reported that they were easily distracted pre and post caregiver imprisonment

More children also stated that they had been accused of cheating or lying following the imprisonment of their primary caregiver ($Z = -2.271$; $p < .05$) (see Figure 10).

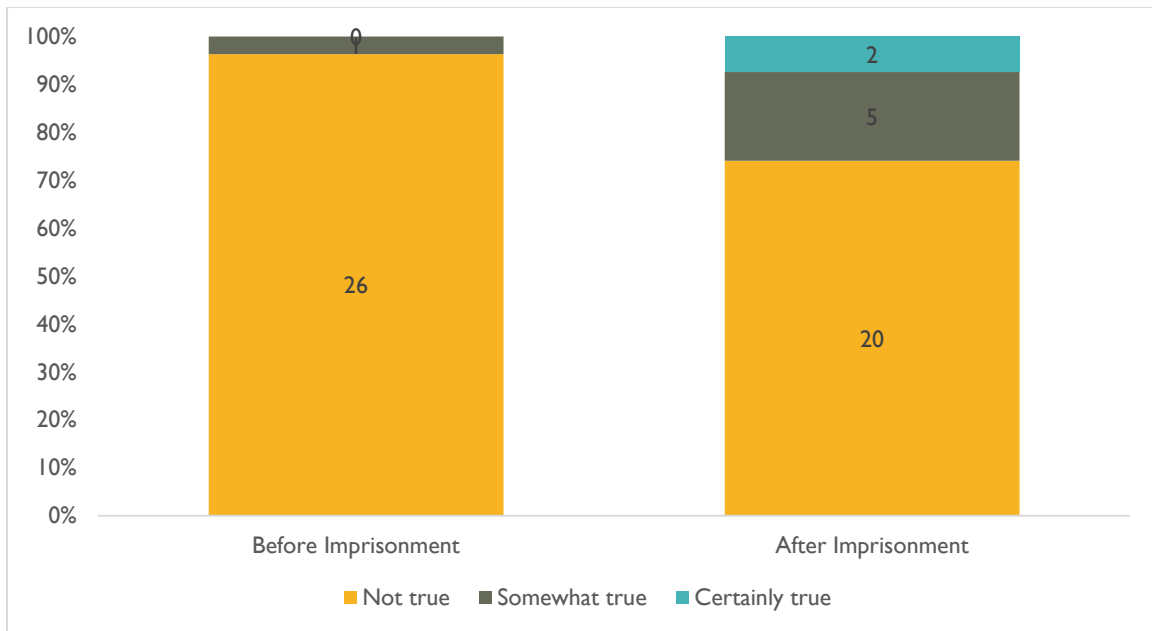


Figure 10: Extent to which children reported being accused of cheating or lying pre and post caregiver imprisonment

Children stated that they experienced significantly more fears and were easily scared after the imprisonment of their primary caregiver compared to before their imprisonment ($Z = -2.810$; $p < .01$) (see Figure 11).

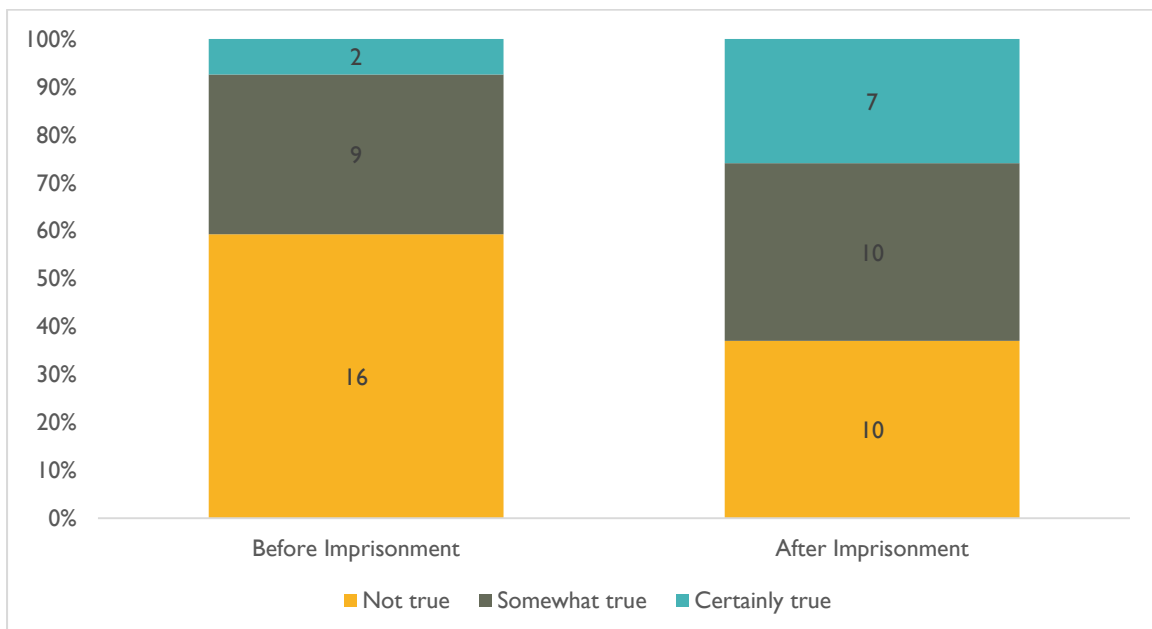


Figure 11: Extent to which children reported having many fears and being easily scared pre and post caregiver imprisonment

Lastly, children also reported experiencing significantly more emotional, concentration, behavioural and relational problems after the imprisonment of their caregiver compared to before their imprisonment ($Z = -3.500$; $p < .001$) (see Figure 12).

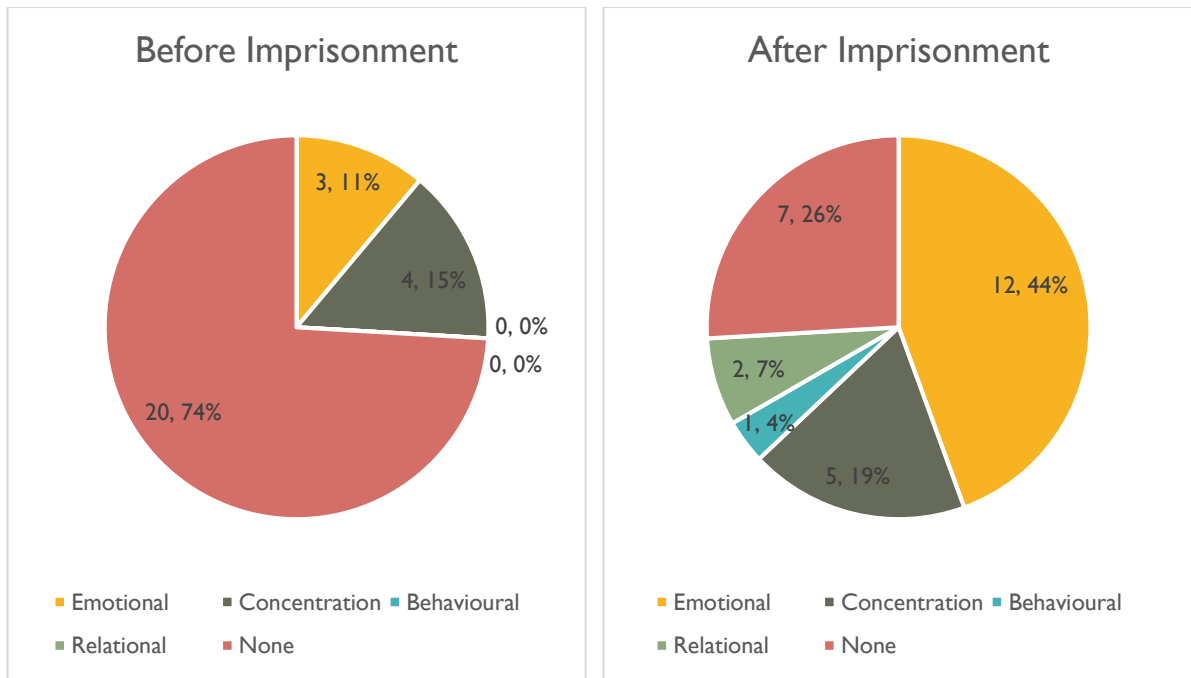


Figure 12: Prevalence of children’s self-reported problems pre and post caregiver imprisonment

The vast bulk of children reported that their emotional, concentration, behavioural and relational problems had worsened since the imprisonment of their caregiver, although it is worth noting that a small number of children reported that their problems improved following their imprisonment (see Figure 13). Others stated that their problems remained the same or were unsure how to answer this question (see Figure 13).

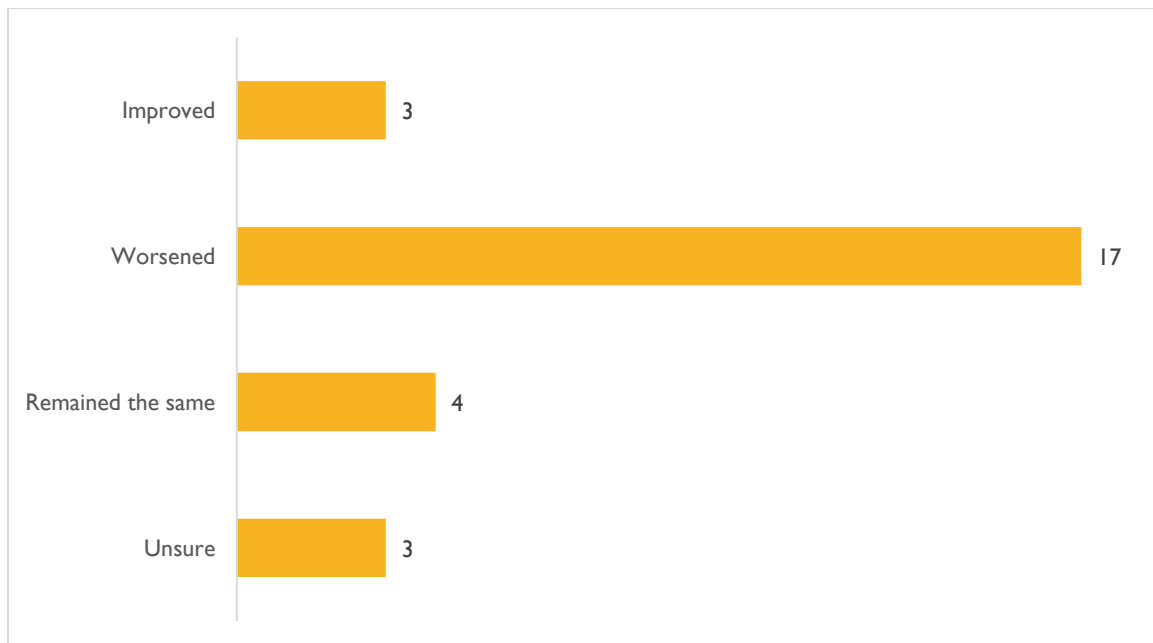


Figure 13: Number of children reporting a change in the problems they had experienced since their caregivers’ imprisonment

These findings were confirmed in the interviews with children and their non-imprisoned carers. Approximately half of the adult interviewees (30 of 61) spoke about how the imprisonment of the child's caregiver had negatively impacted on child wellbeing. Only one non-imprisoned adult interviewee felt that caregiver's imprisonment had been positive for children and this was because of the negative impact their primary caregiver's pre-existing emotional and psychological problems had had on the children. In most cases, non-imprisoned adult interviewees felt caregiver imprisonment had had a negative impact on the children's happiness and increased their feelings of worry. Non-imprisoned adult caregivers stated that children missed the love and affection of their imprisoned primary caregivers and were worried about how the family would cope without the emotional and financial support provided by the imprisoned caregiver:

"You can see that they are not jolly and happy as they used to be. They never used to be sad like now [after the imprisonment of their father]. They were always happy, every time, which is not the case now. All the time they are asking 'But mummy, is daddy really going to come back?' and I tell them 'Yes, he will come'. [...] They miss him a lot." (Participant 32 - Adult)

"The children themselves they were not happy because their mother was not here." (Participant 46 – Adult)

"Yes, it [the imprisonment of their father] has affected her [child] because now she no longer stays with him and cannot get everything she used to get when her father was here like school fees, clothes and all she desired to have. The child also misses her father so much and she is not happy like before." (Participant 48 – Adult).

Some adults explained that these emotions had begun to affect the children's behaviour. They recounted stories of children refusing to eat because of their distress at the absence of their imprisoned caregiver and, in one case, a non-imprisoned adult caregiver stated that the child had been so distressed that they had threatened to commit suicide:

"This 3 year old can even refuse to eat food and ask me 'Where is father?' [...] he can spend the day crying [...] 'I want father. By this time, father used to be back, where is he now?' [...] It hurts them from within [...] deep inside they are affected and lacking their father." (Participant 59 – Adult)

"He [child] knows that he [father] was imprisoned and he [child] sometimes gets sad, he then tells me that he will kill himself. He says 'I will kill myself if daddy is not coming back' then I tell him 'You have to be strong, God is there', then he relaxes and calms down." (Participant 26 – Adult)

Stories of children acting out, becoming angry, not listening to their non-imprisoned carer and refusing to undertake chores or attend school were also heard:

"Oh yes, there is change [in child]. I really saw it because when he [imprisoned father] was there, in the morning the older daughter would tell me 'Mummy, go I will make your bed, you can go, I will wash those shoes and the clothes, mummy you can go I will clean the house' but now she no longer wants to do anything at home when her father is not there. [...] [Relationship is] Not good at all. [...] They have too much anger towards me." (Participant 22 – Adult)

These accounts were confirmed by children themselves. All child interviewees (15 of 15) reported that the imprisonment of their primary caregiver had negatively impacted on their wellbeing. These children explained that they missed the love and affection provided by their imprisoned caregiver and were worried about the health of their imprisoned caregiver while in prison:

“As they took him to prison, it hurt me as a child because I love my dad so much; I love my parents so much. [...] We prayed and prayed, yet every time he would be taken to court, they would say ‘He is transferred, the Judge is not there’. [...] I would have cried from there because I knew he would not come home with me.” (Participant 66 – Child)

“Myself, I felt bad [when mother was imprisoned] [...] I though mum would die in prison.” (Participant 68 – Child)

They were also worried about the financial impact of the imprisonment of their primary caregiver on the family finances. These children explained that they were worried about how the family was going to pay for food and school fees:

“We worry a lot, we no longer eat well like we used to, even at school. He [imprisoned caregiver] would at times help pay for our school fees but now we don’t have someone to do that for us. [...] Ever since he went to prison, we are always worried. [...] I am not happy. [...] The one, who was taking care of us, is now not here [...] we children in that state cannot afford to take care of ourselves.” (Participant 70 – Child)

“I do worry for the house rent because at any time eviction is possible. [...] What is worrying us is the issue of school fees, especially my brother in senior four. He is really worried. They now have to go for a study tour, but no one can pay for his trip.” (Participant 72 – Child)

The majority of the non-imprisoned adult caregivers who took part in the questionnaire felt that the imprisonment of children’s primary caregivers had changed children’s feelings about their home environment. Most felt that the imprisonment of the children’s caregiver had worsened their feelings about their home environment, while others felt that their feelings remained the same, had improved, were unsure how to answer this question or did not answer this question (see Figure 14).

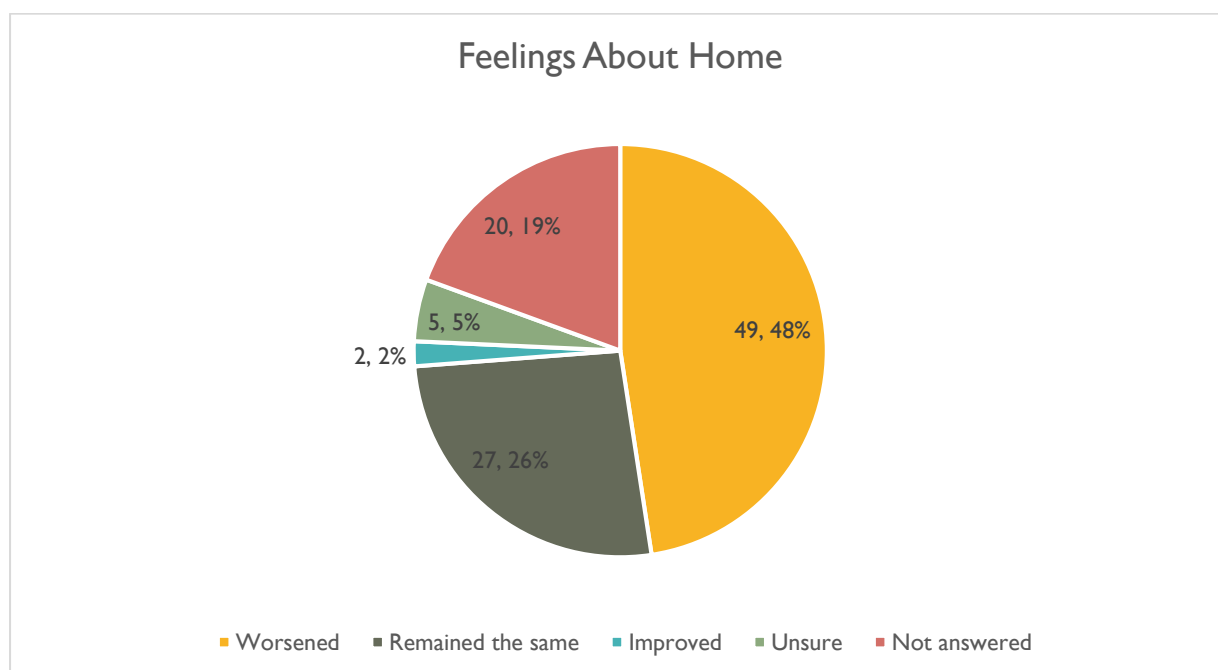


Figure 14: Adults beliefs about how children’s feelings about their home changed following the imprisonment of their caregiver.

When children were asked the same question, they were more likely to state that their feelings about their home had either worsened or remained the same (see Figure 15).

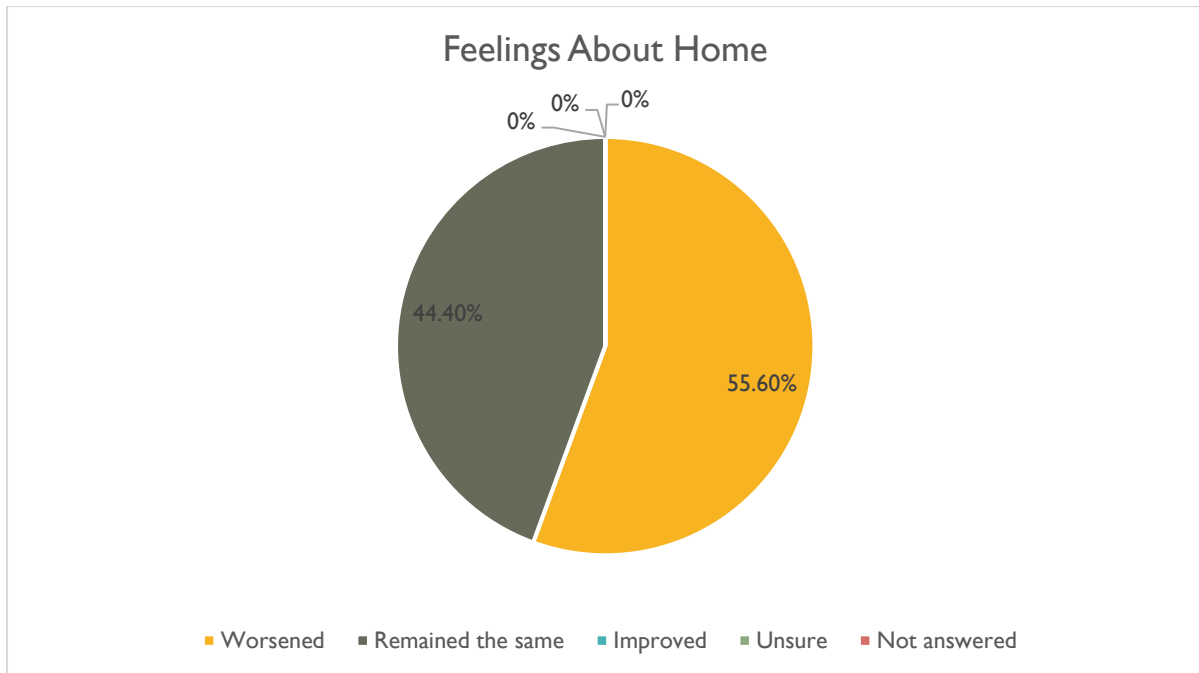


Figure 15: Children’s feelings about their home following the imprisonment of their caregiver.

Most non-imprisoned adult caregivers believed that children knew how much they cared about them and that the children felt safe at home all or most of the time (see Figure 16).

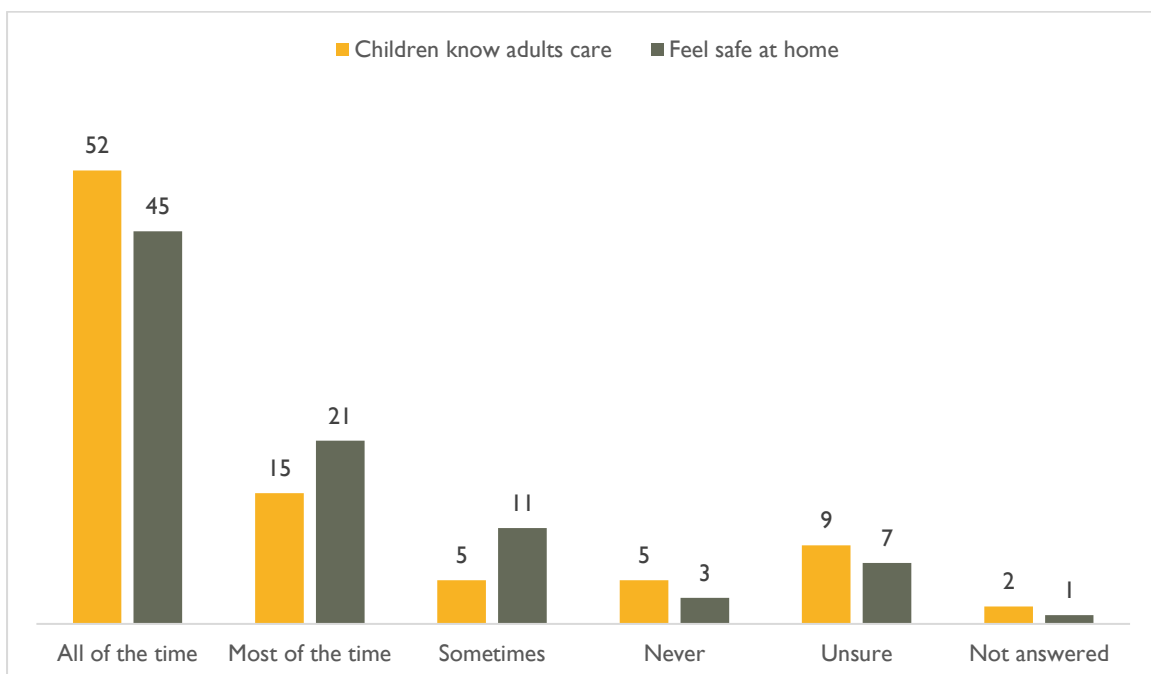


Figure 16: Adults beliefs regarding children feeling cared for by adults and safe at home

Similarly, most non-imprisoned adult caregivers believed that their children had friends that they could talk to about important issues and could rely on for support all of the time, most of the time or sometimes, though a number of adults felt their children did not have friends they could rely on for support or were unsure how to answer this question (see Figure 17).

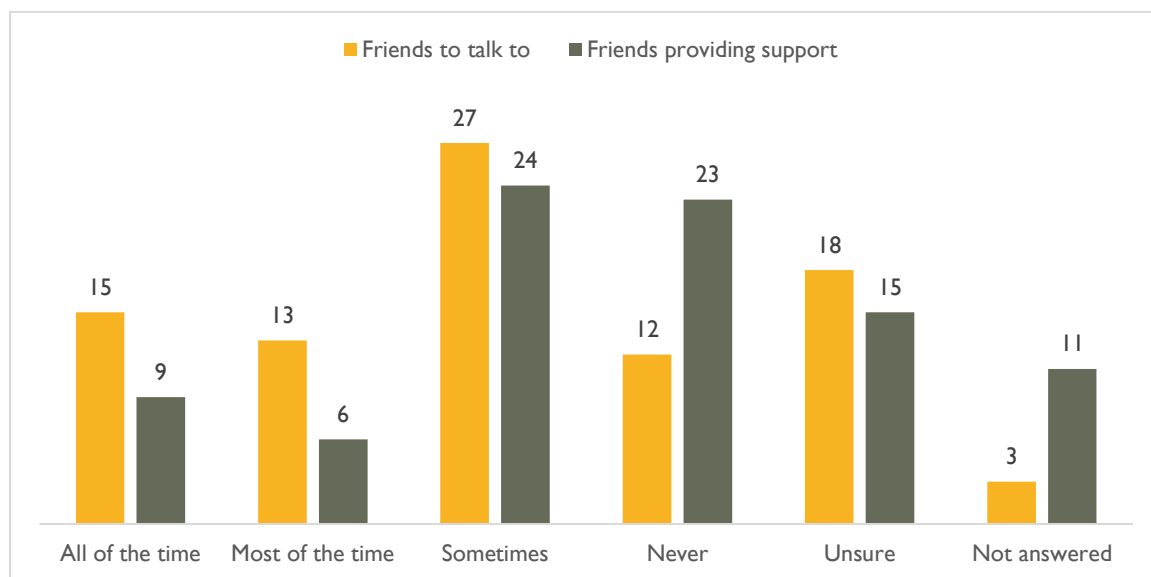


Figure 17: Adults beliefs about children's friendships

When children were asked these questions, no significant differences ($p > .05$) were observed in their friendships and the extent to which they felt supported by their friends pre and post the imprisonment of their primary caregiver. The majority of children reported that they had friends that they could talk to and rely on for support all of the time, most of the time or sometimes. Likewise, no significant difference ($p > .05$) was reported in the extent to which they felt cared for pre and post their caregiver's imprisonment. However, a significant difference was observed in the extent to which they felt safe at home ($Z = -2.347$; $p < .05$). After the imprisonment of their primary caregiver, more children were inclined to report that they felt less safe at home compared to before their imprisonment (see Figure 18).

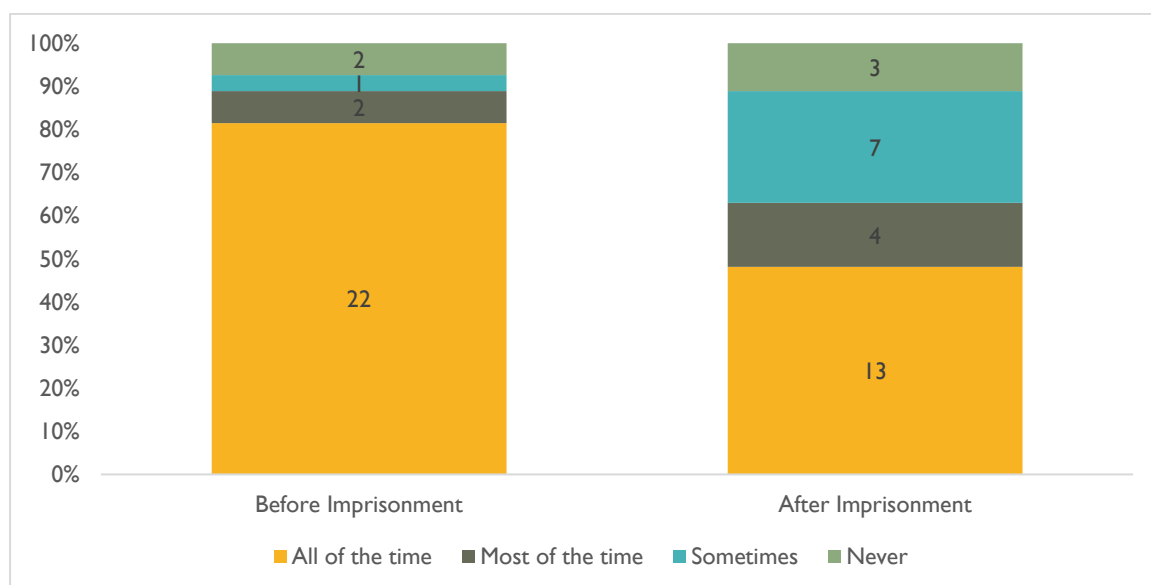


Figure 18: Children's self-reported feelings of safety at home pre and post caregiver imprisonment

In their interviews, children explained that they felt less safe at home after the imprisonment of their caregiver because they feared for the ability of the family to pay rent, school fees and buy food and medication. In addition, their experience of being left on their own more often after the imprisonment of their primary caregiver added to their fears about their safety:

“Child: Sometimes I would sleep alone [...]

Interviewer: Were you scared to sleep alone in the house?

Child: Yes I was.” (Participant 68 – Child)

When children were asked in the questionnaires if they had ever received support from anyone, the majority of the children explained that they had not received any support since the imprisonment of their primary caregiver (see Figure 19). However, if they had received support, this support was mostly in the form of counselling (see Figure 19).

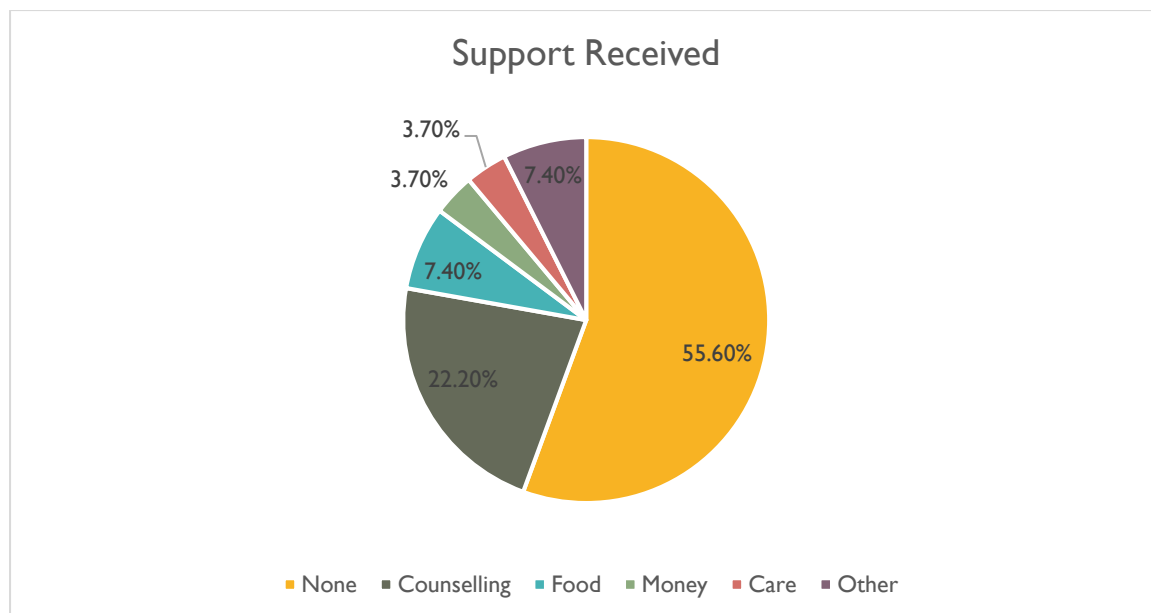


Figure 19: Type of support received by children following the imprisonment of their caregiver

In their interviews, children rarely mentioned talking to their peers or receiving support from their friends but most (12 of 15) reported receiving help and support from adult family members and adult family friends. This help generally involved giving the family money to help pay rent, school fees, buy medication or food:

“Yes [we received help]. [...] From our paternal uncle. [...] He gave us some money and we cooked food.” (Participant 65 – Child)

“Our [adult family] friend has money. So he pays for us. [...] He gives us money, food and rent.” (Participant 71 – Child)

Despite receiving this help, there remained a noticeable impact of primary caregiver imprisonment on children’s health and educational performance.

Child Health

As previously stated, children reporting experiencing significantly more headaches, stomach-aches and sickness after the imprisonment of their caregiver. In the interviews with children, children attributed this reduction in their health to stress, a lack of money to buy food and medication, as well as the additional chores they had been asked to undertake since the imprisonment of their caregiver:

“Yes [I often fall ill] [...] Stress. We had a lot of stress. Most of us fell sick.” (Participant 65 – Child)

“We used to suffer with planting tomatoes and spraying them which involves carrying the spray on our backs, carrying them to where to sell them and looking for [a] market. [...] When he left [father was imprisoned], we started doing everything ourselves. [...] Our hands would ache, we got headaches and fever [...] falling sick.” (Participant 67 – Child)

“I was walking and then a stick pricked me, then my leg became sick. [...] No [I didn’t go to hospital] [...] I just massaged it with hot water mixed with salt [...] because there was no money.” (Participant 71 – Child)

“Life has changed. It was daddy who would buy us food, pay fees for my siblings and pay the rent. But now, we have no one to lean on. [...] I have ulcers.” (Participant 72 – Child)

These findings were mirrored in the questionnaire and interview responses given by the non-imprisoned adult caregivers. In their questionnaire responses, the vast majority of non-imprisoned adult caregivers felt that the children’s health had worsened following the imprisonment of their primary caregiver (see Figure 20).

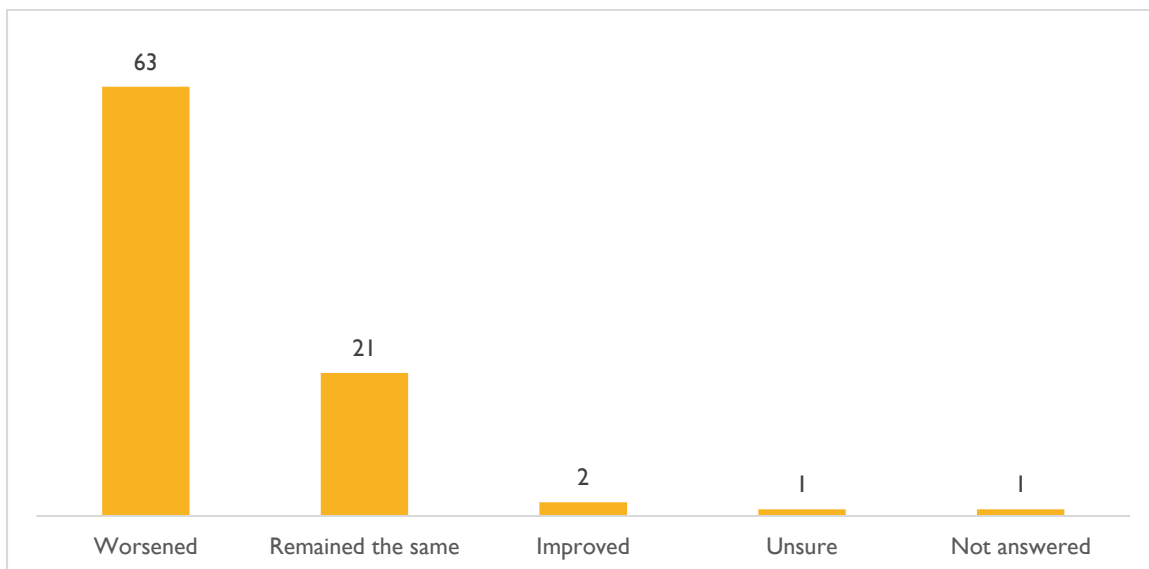


Figure 20: Adults beliefs regarding how children’s health had changed following the imprisonment of their caregiver

In the interviews, almost two thirds of non-imprisoned adult caregivers (40 out of 61) felt that the imprisonment of the children’s primary caregiver had negatively impacted on the child’s health. Only four

adults (out of 61) felt that the imprisonment of the children’s primary caregiver had not negatively impacted on the children’s health. For those who felt that the imprisonment of the primary caregiver had negatively impacted on the children’s health, they attributed this negative impact to a reduction in the family finances, which limited the money they had available to spend on food, travel to healthcare facilities and medication:

“The children are facing poor feeding and lack of proper health care services making them sick all the time.” (Participant 02 – Adult)

“Previously they [children] used not to fall sick often and even when they fell sick, they would receive medication on time. But now he [child] can fall sick and [...] I have no money for medicine. [...] The hospital is far [away], it requires a Boda Boda [to travel there] and I even don’t have the fares for the Boda Boda. [...] I see my children might die under my watch because of the situation. I therefore need assistance.” (Participant 16 – Adult)

“When his father was around he [child] had never fallen sick [...] but ever since he went [to prison] [...] he started falling sick. [...] What mostly makes him sick is the situation and not breastfeeding also makes him sick. [...] I still had breast milk but it reduced because of stress.” (Participant 39 – Adult)

It was also claimed that child health was negatively affected as less attention was being made to food preparation and the purification of water, resulting in children becoming ill. This was believed to be a particularly issue in cases whereby the mother of the children was imprisoned:

“Their mother not being around [due to her imprisonment] used to monitor them [children] fully to know what to eat, drink where to sleep to prevent diseases like typhoid. It’s hard for me so they get sick. [...] They eat enough from my gardens but I have no time to monitor how food is prepared by the maid/house helper that’s why [my] children always suffer from typhoid.” (Participant 10 – Adult)

In the questionnaires, over a quarter of non-imprisoned adult caregivers (27.3%) reported that the children had experienced a serious illness which required a visit to a hospital/health centre in the previous month. Wilcoxon Signed Ranks tests revealed that adults found it significantly more difficult to access a health centre/hospital following the imprisonment of the children’s caregivers ($Z = -6.477$; $p < .001$) (see Figure 21).

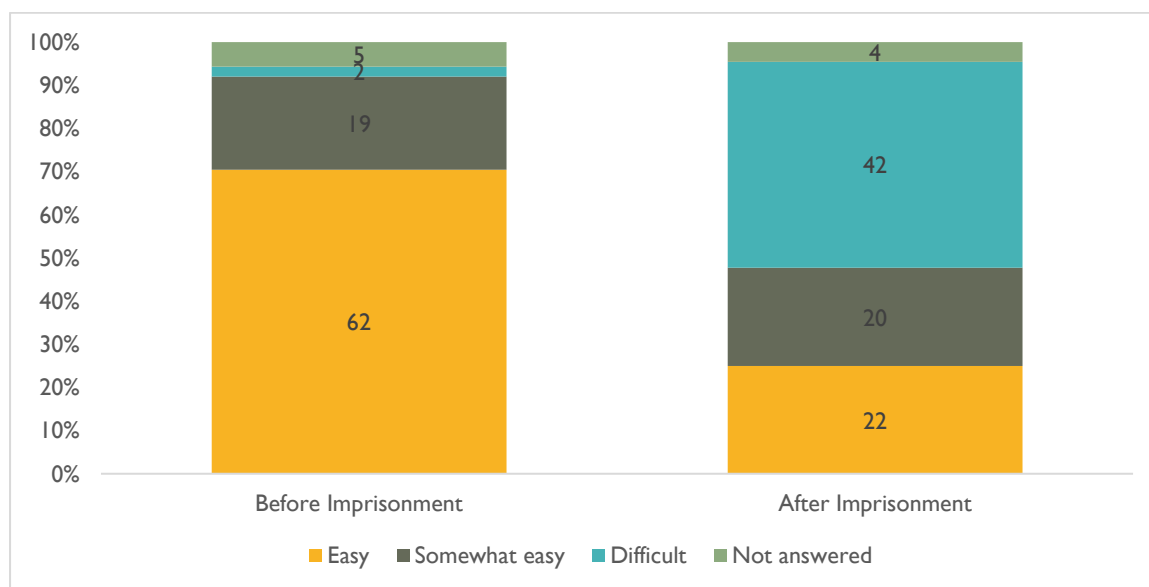


Figure 21: Ease of accessing healthcare for children pre and post caregiver imprisonment

Over half of the non-imprisoned adult caregivers (57.7%) claimed that it took 30 minutes or less to reach the nearest health facility, while just under one third (32.4%) reported that it took between 60 and 90 minutes to reach the nearest health facility. The majority of non-imprisoned adult caregivers explained that they tried to overcome these difficulties in accessing healthcare facilities and paying for medication by using local herbs, obtaining credit, deferring payment until the imprisoned caregiver returned and undertaking chores in exchange for medical assistance:

“My child fell sick and I failed to get treatment at the government health centre so I went to the traditional healer of which I was given a garden to work on for treatment payment, the child’s behaviour has not changed.” (Participant 05 – Adult)

“The children are ever sick and there are no drugs at the government health centre so I give the herbal medicine from the nearby bushes. If it gets worse I get credit to take them to the clinics. In case he [imprisoned father] comes back early he has to pay.” (Participant 07 – Adult)

“I have a male friend of mine who is a Doctor. [...] I rang him and told him we are all sick and we don’t have a coin. He asked what we should do and I told him to try and find means of giving us medicine which he did and up to now I have not paid him. I told him I have not got the money but I will pay when I get [the money].” (Participant 27 – Adult)

If local herbs were not sufficient to aid the child’s recovery and adults were unable to obtain credit, defer payment or exchange labour for medication then children went without medical assistance:

“The nearby hospital which is a government hospital in most cases there is no medication. Then when you go to a private hospital and you don’t have money they chase you away.” (Participant 20 – Adult)

“I don’t get the necessary treatment because if they [children] fall sick, there is some medicine they [medical staff] tell me to buy when I don’t have money. That’s the problem.” (Participant 34 – Adult)

Alongside an inability to buy medication and access healthcare facilities, food shortages and the negative impact of primary caregiver imprisonment on the children’s diet was offered as one of the main explanations for why children’s health worsened following the imprisonment of their caregivers. Wilcoxon Signed Ranks tests revealed a significant difference in the children’s self-reported diet pre and post the imprisonment of their primary caregivers. While all children reported normally eating at least one meal per day, children reported eating significantly less meals after the imprisonment of their caregiver ($Z = -3.777$; $p < .001$). Before the imprisonment of their primary caregiver, the majority of children reported eating three or more meals per day (see Figure 22). Yet, after the imprisonment of their primary caregiver, this figure reduced with the majority of children stating that they normally only ate one meal per day (see Figure 22).

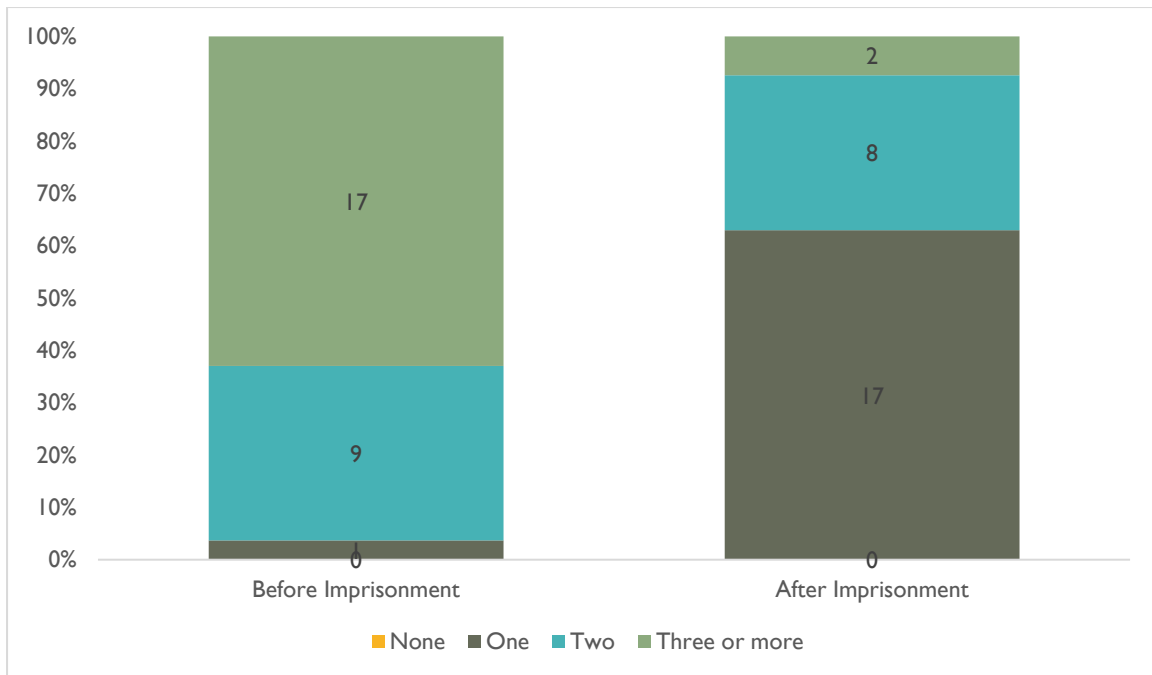


Figure 22: Number of meals normally eaten per day by children pre and post caregiver imprisonment

These children reported a significant reduction in the quantity of meat eaten in their household, with the frequency of eating meat reducing following the imprisonment of their caregiver ($Z = -3.186$; $p < .01$) (see Figure 23).

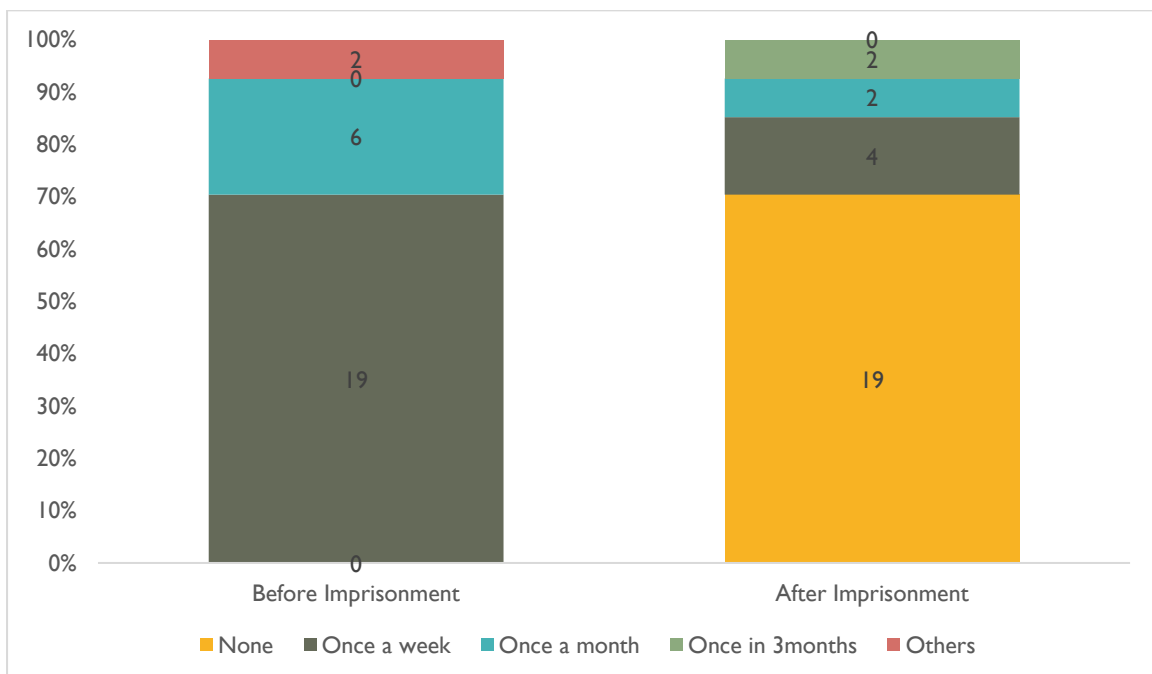


Figure 23: Children's self-reported frequency of eating meat pre and post caregiver imprisonment

A significant difference was also evident in children’s self-reported frequency of eating fish pre and post the imprisonment of their caregiver, with fish eating decreasing after the imprisonment of their caregiver ($Z = -2.51$; $p < .05$) (see Figure 24).

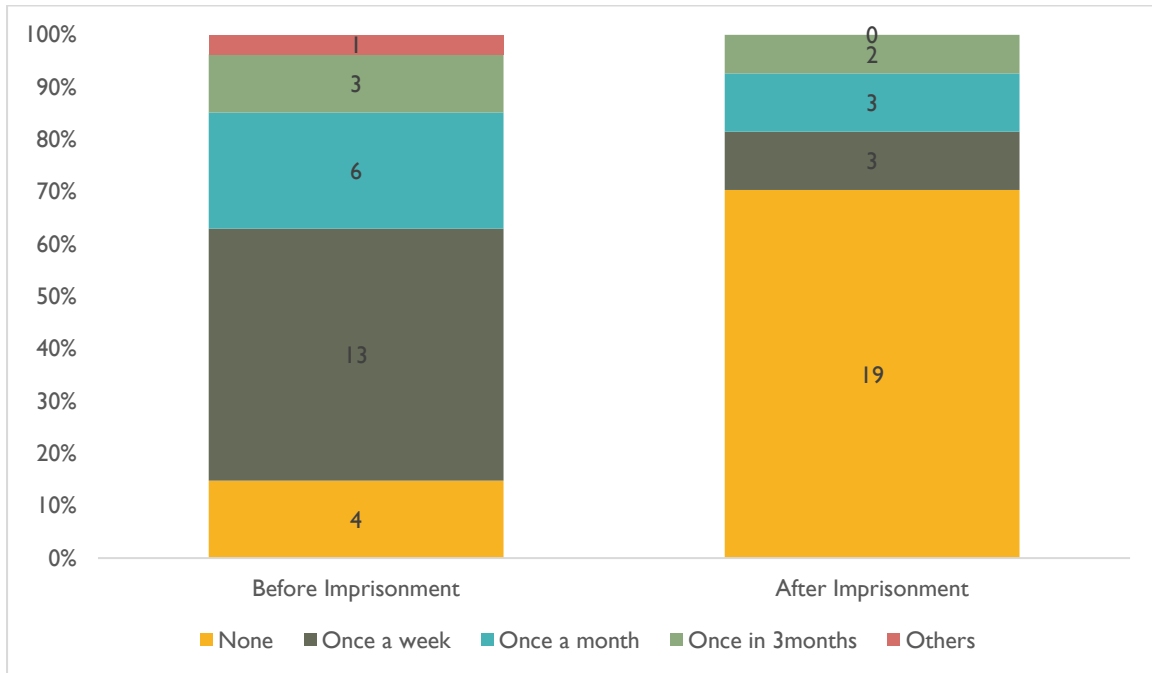


Figure 24: Children’s self-reported frequency of eating fish pre and post caregiver imprisonment

Additionally, children reported that they were significantly less likely to have eggs as part of their diet after the imprisonment of their caregiver ($Z = -2.225$; $p < .05$) (see Figure 25).

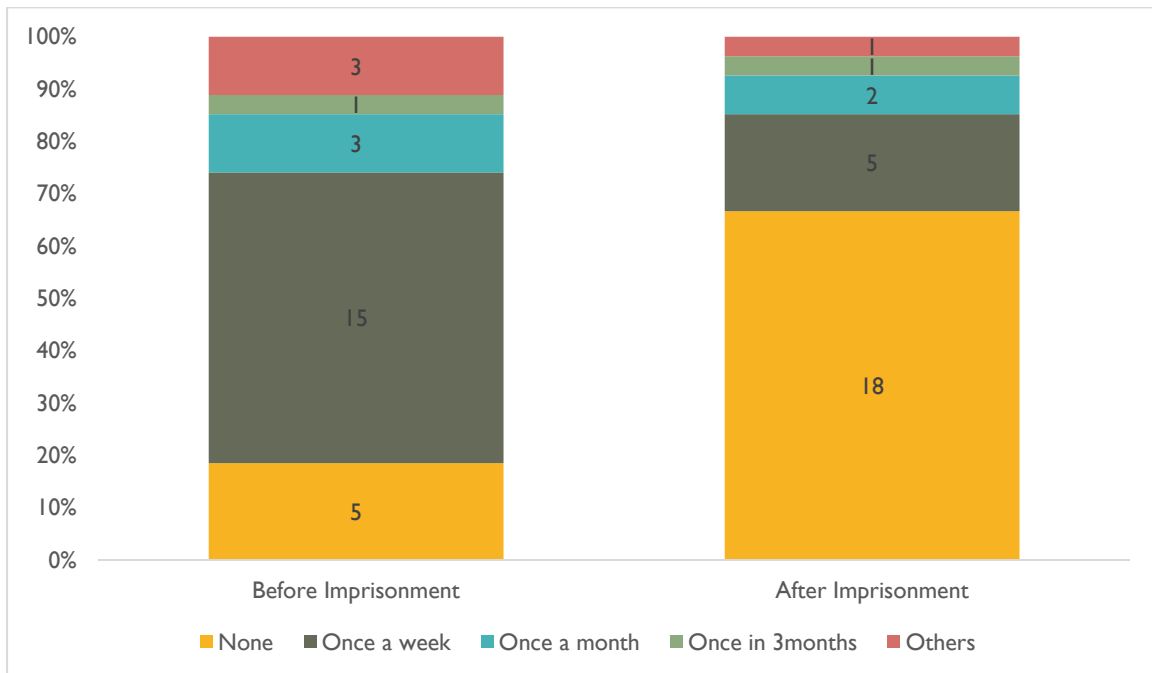


Figure 25: Children’s self-reported frequency of eating eggs pre and post caregiver imprisonment

In their interviews, the majority of the children (11 out of 15) explained that they ate less well and less often following the imprisonment of their caregiver:

“We had nothing to eat [when father was imprisoned] and we now starting digging. [...] I felt so bad and I wanted him to come back [...] because we did not have food, books, milk for the baby.” (Participant 62 – Child)

“I used to play very well, I would always pack eats and I would feel at peace but when he went [father was imprisoned], I got deprived of all that.” (Participant 66 – Child)

“We would eat everything we wanted when he [father] was around, but when he went to prison, we started eating [only] one meal.” (Participant 70 – Child)

Non-imprisoned adult caregivers also reported a reduction in the quantity and type of food eaten in their questionnaire responses. Non-imprisoned adult caregivers reported a significant reduction in the number of meals normally eaten following the imprisonment of the children’s primary caregiver ($Z = -6.007$; $p < .001$). Similarly to the children’s responses, while all households normally ate at least one meal per day, after the imprisonment of a caregiver, families were more likely to report eating only one or two meals per day, while they mostly ate two or three meals before the imprisonment of their caregiver (see Figure 26).

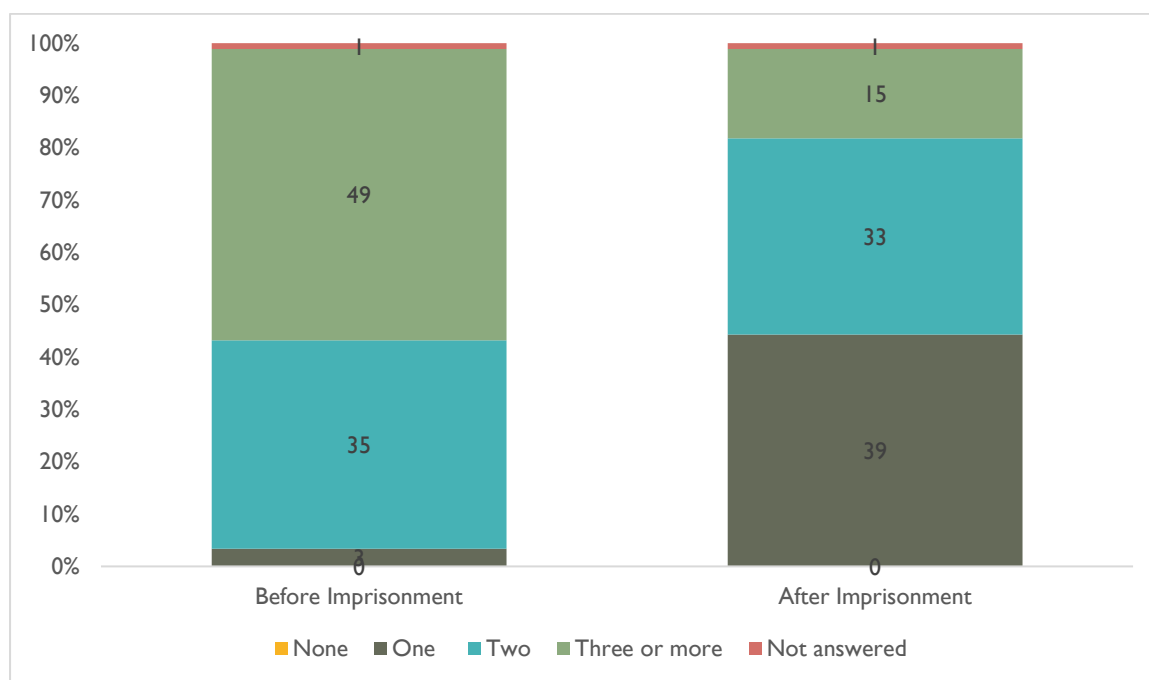


Figure 26: Adults self-reported number of meals normally eaten per day in the household pre and post caregiver imprisonment

Non-imprisoned adult caregivers stated that children in their household were significantly less likely to eat fresh fruit or vegetables at least once per day after the imprisonment of their caregiver compared to before their imprisonment ($Z = -5.396$; $p < .001$) (see Figure 27).

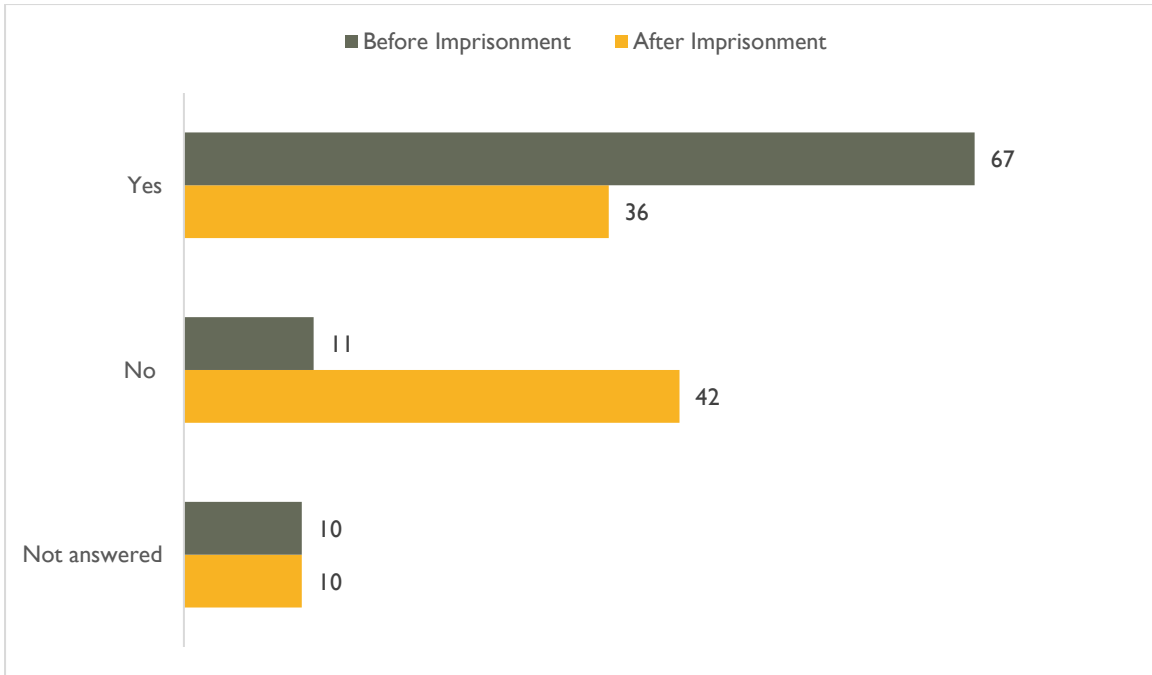


Figure 27: Extent to which adults reported all children in their household eating fresh fruit or vegetables at least once per day pre and post caregiver imprisonment

Likewise, non-imprisoned adult caregivers claimed that the frequency of eating meat in the household reduced significantly following the imprisonment of the children’s caregiver ($Z = -5.762$; $p < .001$). Prior to their imprisonment, most adults reported that they ate meat weekly but following the imprisonment of the children’s caregiver, most adults reported that they no longer ate meat in their household (see Figure 28).

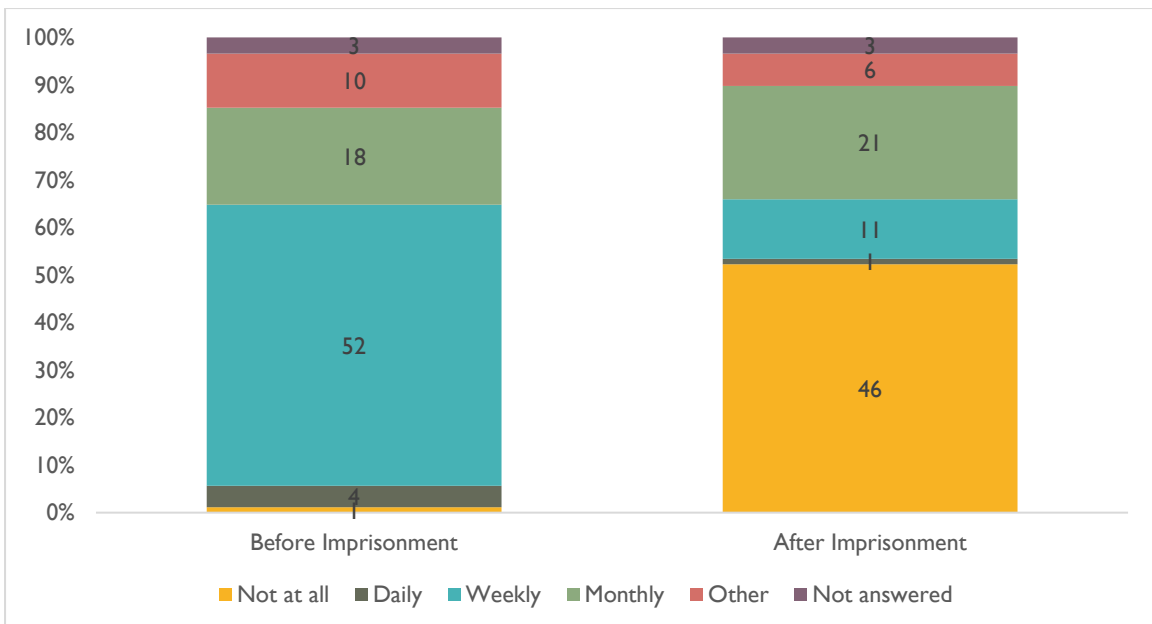


Figure 28: Adults’ self-reported frequency of eating meat in the household pre and post caregiver imprisonment

Non-imprisoned adult caregivers stated that they were significantly less likely to eat chicken following the imprisonment of the children’s caregiver ($Z= -4.592$; $p<.001$) (see Figure 29).

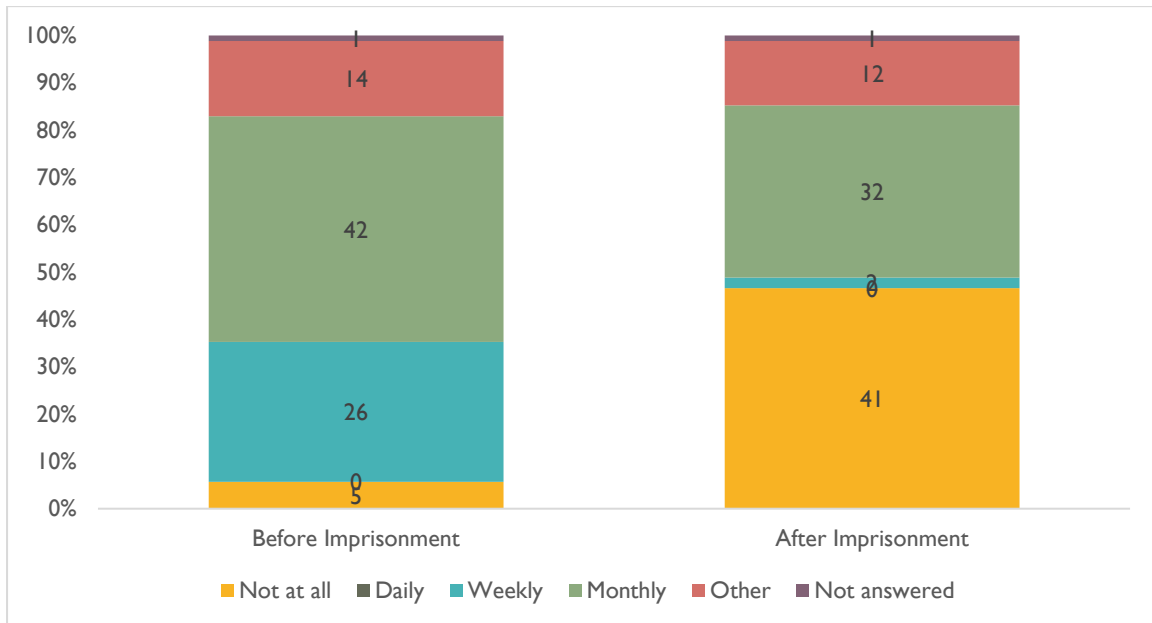


Figure 29: Adults’ self-reported frequency of eating chicken in the household pre and post caregiver imprisonment

Likewise, non-imprisoned adult caregivers reported being significantly less likely to eat fish following the imprisonment of the children’s caregiver ($Z= -5.002$; $p<.001$) (see Figure 30).

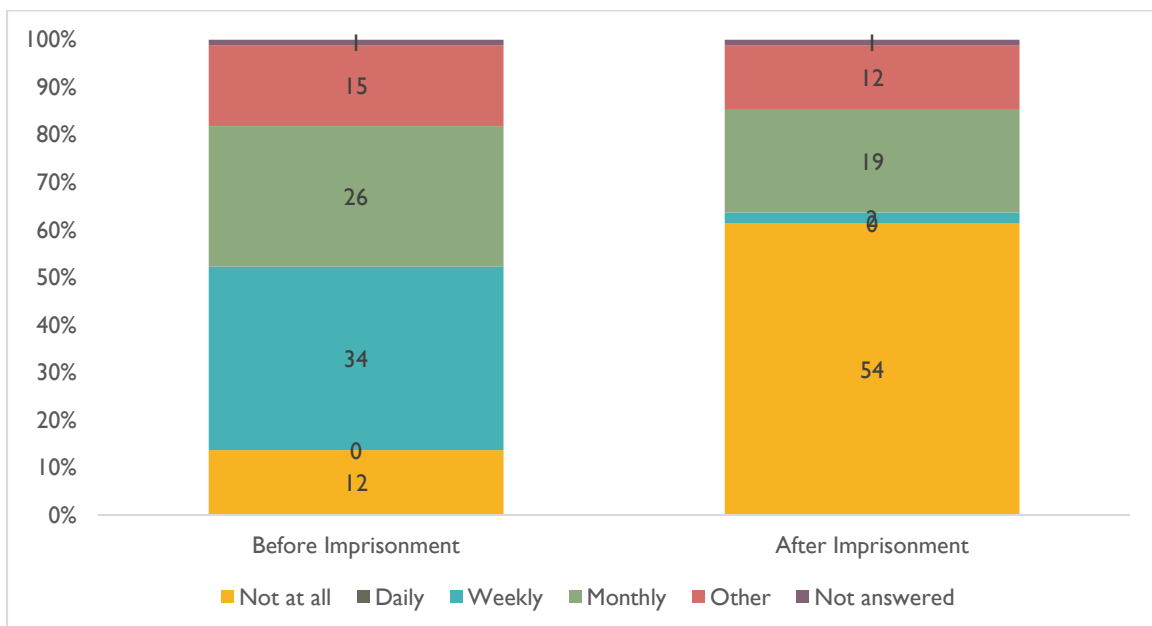


Figure 30: Adults’ self-reported frequency of eating fish in the household pre and post caregiver imprisonment

Non-imprisoned adult caregivers questionnaire responses also revealed that their households were substantially more likely to suffer food shortages in the 12 months after caregiver imprisonment compared to the 12 months before their imprisonment ($Z = -6.656$; $p < .001$) (see Figure 31).

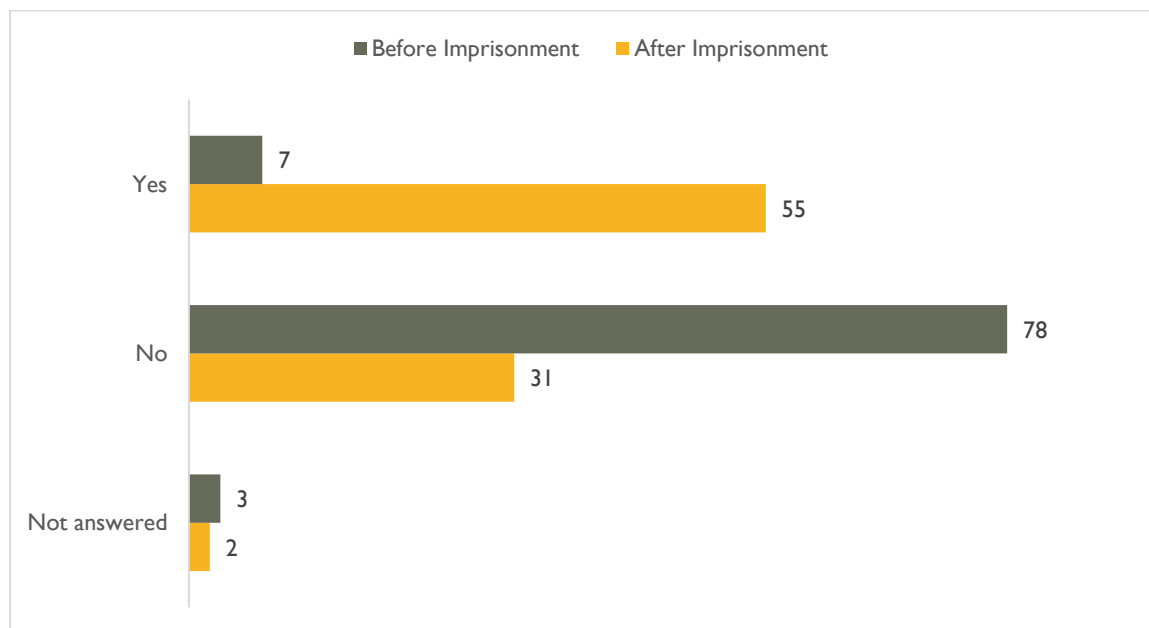


Figure 31: Number of adults reporting a food shortage in the 12 months pre and post caregiver imprisonment

In the interviews with non-imprisoned adult caregivers, over three quarters of the adult interviewees (47 out of 61) stated that the imprisonment of the children’s caregiver had negatively impacted on the family food supply and the children’s nutrition. Only five adults stated that the imprisonment of the caregiver had had no impact on the children’s diet and this was predominately because the non-imprisoned caregiver was employed in secure, decent employment or because the imprisoned caregiver had not been financially contributing to the child’s maintenance prior to their imprisonment. In the vast majority of cases, the non-imprisoned adult caregivers explained that the imprisonment of the children’s caregiver had negatively impacted on the family finances and the amount of money available to purchase food. Almost half of all adult interviewees (28 out of 61) reported taking on additional work in order to improve the family finances and obtain money to pay rent and school fees, as well as buy food, medication and clothes. In many cases, it was a male who had been imprisoned (primarily the children’s father) and this male had been financially providing for the family. Without their income, the family struggled and despite taking on additional work, the non-imprisoned carer (often their mother) still struggled to provide enough money for the family, with the result that tough decisions had to be made about how to spend their available finances. In many cases, food was reduced as the non-imprisoned adult caregiver prioritised the payment of rent, medical bills and school fees:

“Life became hard on my side as a spouse because I couldn’t manage to meet their [children’s] needs like paying health care and food. It took some time to know that he was in prison because his phone was off. [...] [After his imprisonment] We used to eat once a day, the children used to cry at night due to sleeping hungry. I used to exchange labour for food.” (Participant 03 – Adult)

“We eat once, we used to eat three times but we now [after his imprisonment] eat once. [...] because [...] the scarcity of money, the way you get and also have to pay for rent so in all that,

the eating had to reduce because you would say if I don't pay the house the landlord will throw me out and you save some money for him." (Participant 57 – Adult).

Food was also reduced when extended family members (e.g. uncles, aunts, grandparents, etc.) took in and looked after the children of those imprisoned, increasing their own family size and the number of children they had to feed on their pre-existing family income:

"[After imprisonment] Food was not enough and they [children] used to eat three days a week. [...] We don't have enough food since I am looking after two families. Now we eat twice a day." (Participant 14 – Adult)

Even in cases involving the imprisonment of a mother, fathers reported a reduction in the children's nutrition as they explained they faced difficulties in ensuring food was prepared for their children as they were away from home working all day, trying to earn enough money to pay for the children's needs:

"In the absence of my wife [who is imprisoned], food itself [became difficult] because, me, I always leave home early. At home we eat once because they have to go to school and I also have to go to work so [...] this young girl she eats very late because I always come back home very late. Sometimes even I face difficulties. [...] That was her [imprisoned mother's] responsibility because she was always at home [...] she would make something for them [children] to eat." (Participant 46 – Adult)

Other consequences of a reduced household diet was the inability of mothers to breastfeed their children and a believed reduction in the educational performance of children due to hunger:

"This daughter of mine has always been the 4th [highest performer in her class] ever since she started school but this term when her father was not around [imprisoned] I see she performed poorly [...] because I don't think a child can go to school hungry and learn and understand what they teach. She can't understand." (Participant 32 – Adult)

"I don't have breast milk. The reason being I don't get sugar, I don't get enough to eat. He [child] needs to take milk but he doesn't get it. [...] He is in a very poor condition. He falls sick. [...] Sometimes we sleep without lunch or supper" (Participant 33 – Adult).

"I don't know if they [children] will perform well because they come back [from school] when they are hungry and [...] they spent the day without eating anything because I don't have money to pay for their lunch at school. [...] One [child] refuses to go since he is young and says he can't go if he has nothing to eat. [...] They were performing well but now the situation [has changed] because children cannot learn when they have not eaten." (Participant 40 – Adult)

Child Education

In their questionnaires, children were asked if their feelings toward school had changed following the imprisonment of their caregiver. The majority of children reported that it had not. Almost half of the children stated that their feelings toward school had remained the same, while just over a quarter reported that their feelings towards school had worsened (see Figure 32).

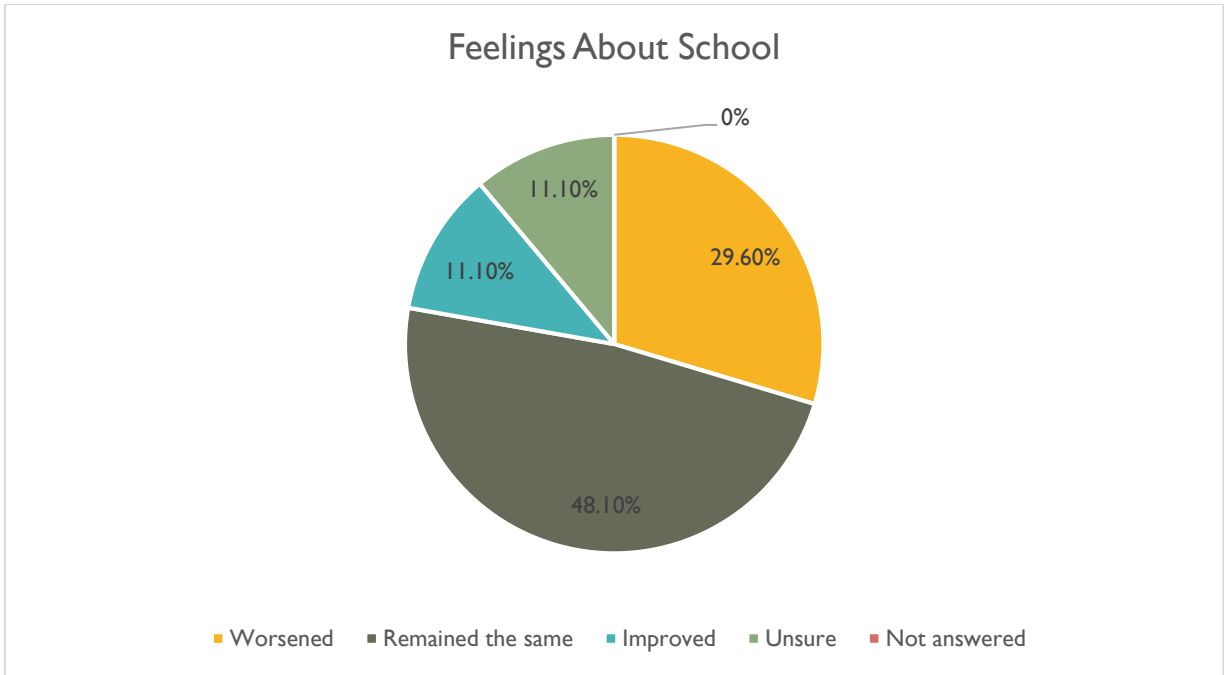


Figure 32: Extent to which children’s feelings towards school changed following caregiver imprisonment

There was a noticeable difference in how children responded to questions about school attendance, educational performance, feelings of safety at school and the extent to which teachers cared for them before and after the imprisonment of their caregiver. Using Wilcoxon Signed Ranked tests a statistically significant difference was observed in the number of children who were attending school pre and post the imprisonment of their caregiver ($Z = -2.236$; $p < .05$). After the imprisonment of their caregiver, less children stated that they were attending school (see Figure 33).

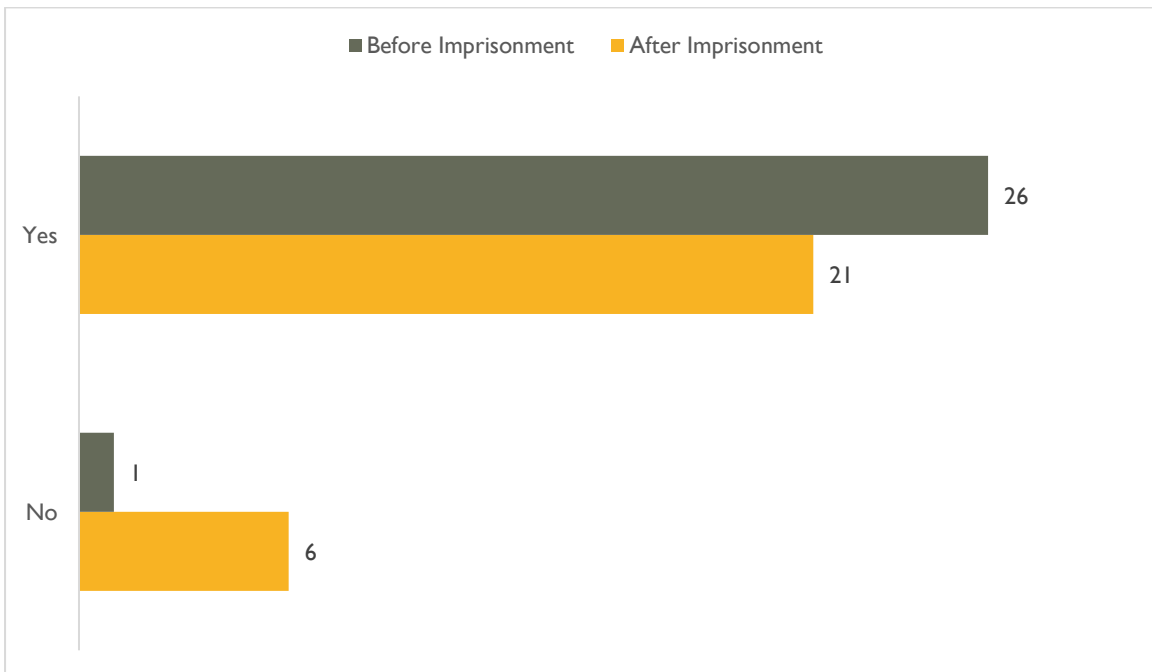


Figure 33: Children’s self-reported school attendance pre and post caregiver imprisonment

The majority of children reported that they felt that their grades and the average number of days that they attended school per week had changed since the imprisonment of their caregiver, with most stating that they felt their grades and attendance at school had worsened following the imprisonment of their caregiver (see Figure 34).

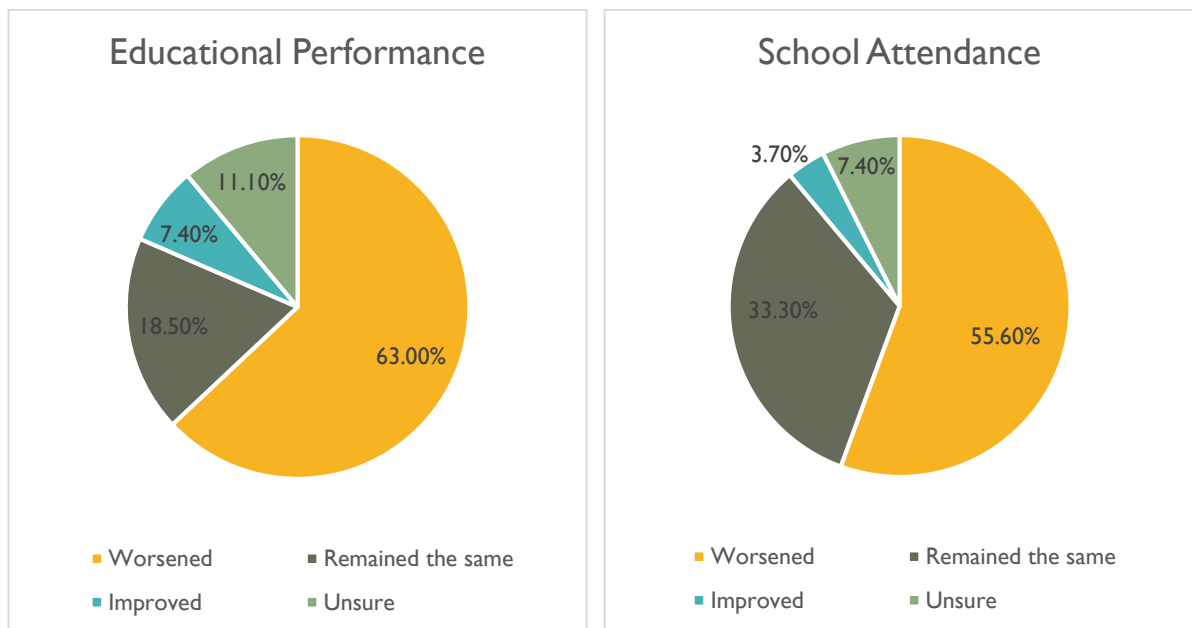


Figure 34: Children’s beliefs about how their educational performance and school attendance have changed following the imprisonment of their caregiver

A significant difference was observed in the grades children reported receiving before and after the imprisonment of their caregiver ($Z = -3.242$; $p < .01$), with children stating they performed less well after the imprisonment of their caregiver compared to before their imprisonment (see Figure 35).

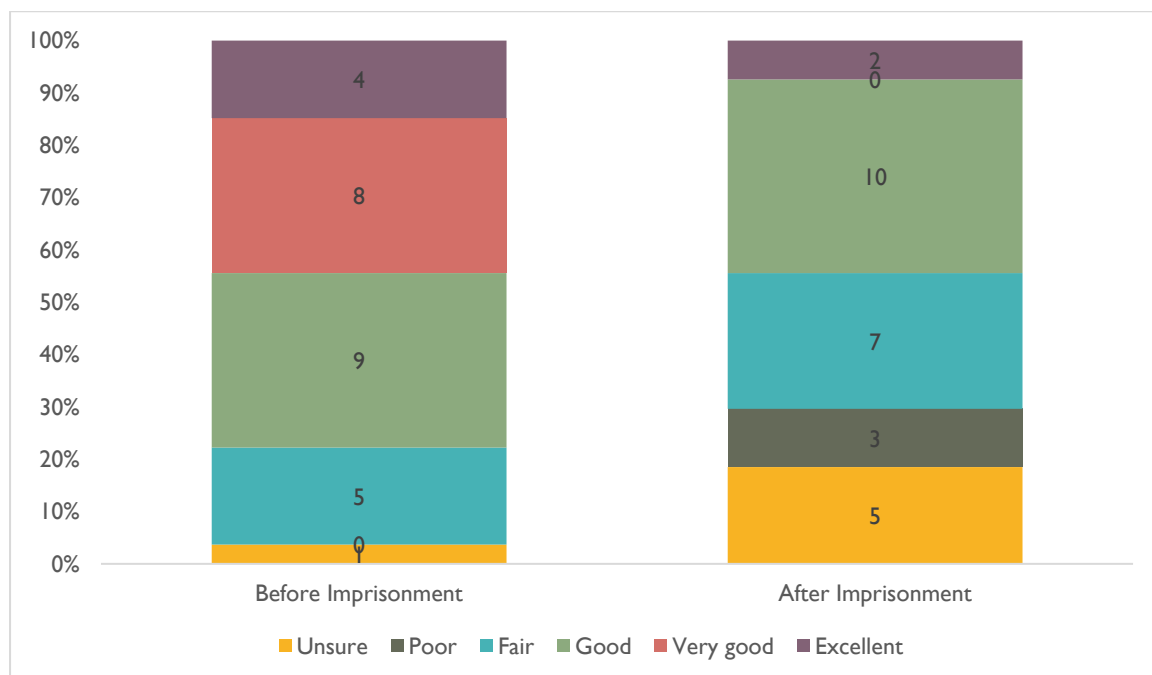


Figure 35: Children’s self-reported school grades pre and post caregiver imprisonment

A significant difference was also reported in the average number of days children attending school per week before and after the imprisonment of their caregiver ($Z = -3.160$; $p < .01$). Children reported attending school on average less days per week after their caregiver's imprisonment compared to before their imprisonment (see Figure 36).

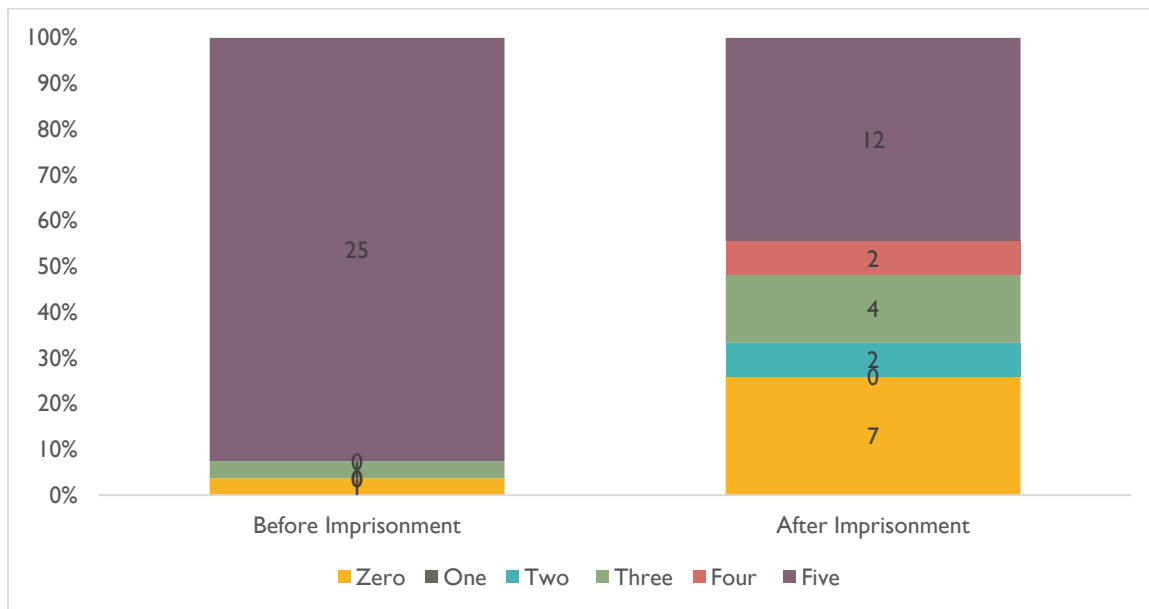


Figure 36: Average number of days per week children reported attending school pre and post caregiver imprisonment

Most children claimed that the average daily amount of time they spent doing work outside of school had changed since the imprisonment of their caregiver, with the majority stating that they felt the time they spent working outside of school had increased after primary caregiver imprisonment (see Figure 37).

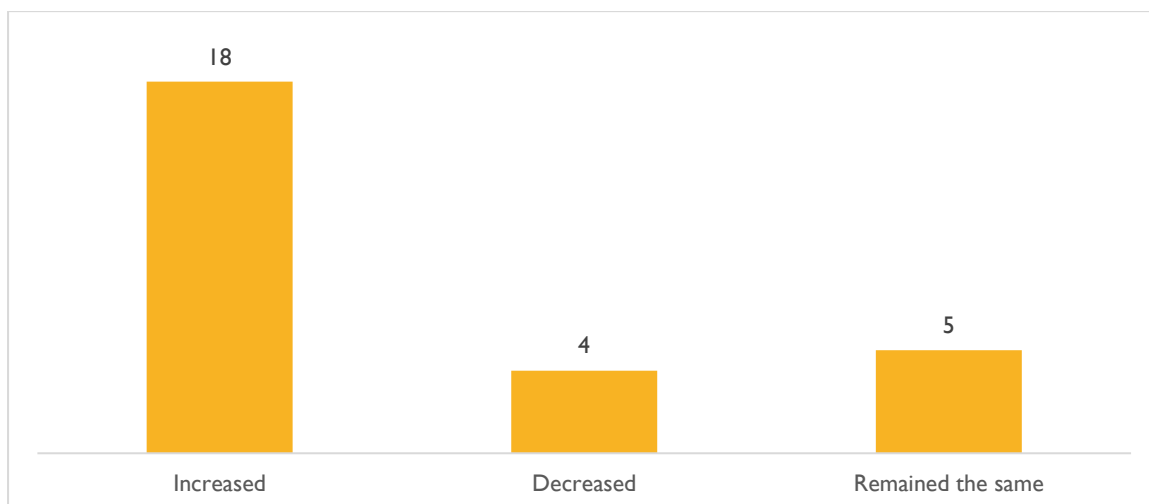


Figure 37: Children's beliefs regarding how the time they spend working outside of school has changed following the imprisonment of their caregiver

A significant difference was reported in average amount of hours children reported working outside of school per day before and after caregiver imprisonment ($Z= -3.315$; $p<.01$). Children reported working for more hours after the imprisonment of their caregiver compared to before their imprisonment (see Figure 38).

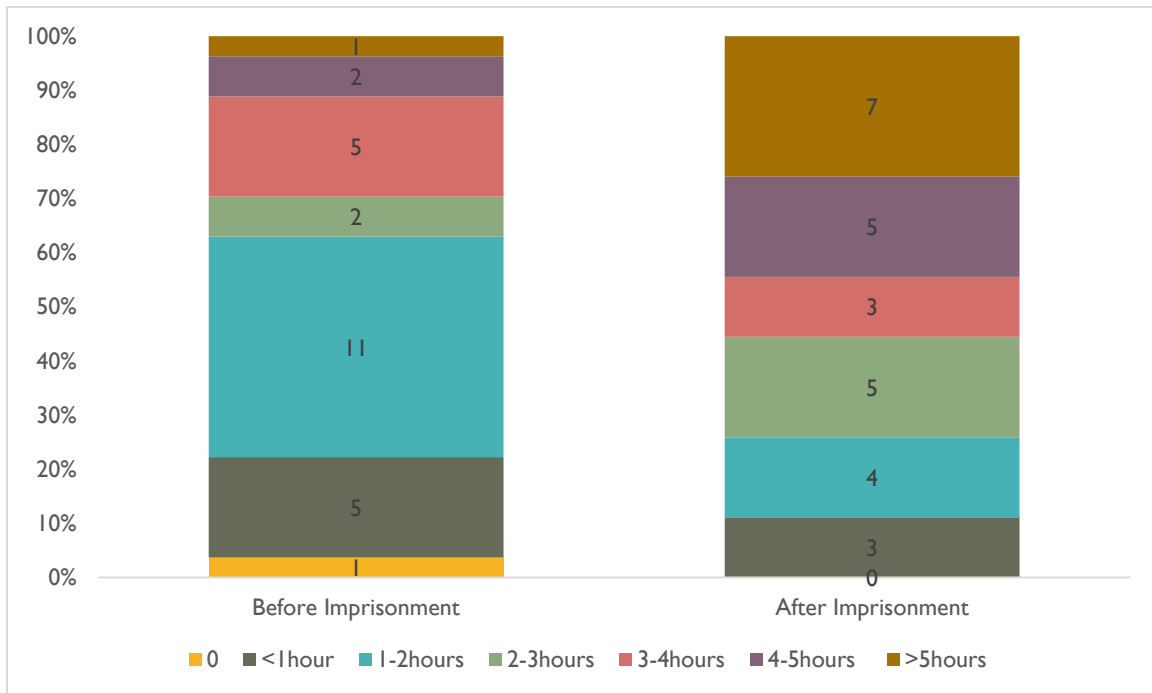


Figure 38: Average daily hours children reported working outside of school pre and post caregiver imprisonment

Children stated that the work they were involved in outside of school consisted of significantly more heavy tasks after the imprisonment of their caregiver compared to before their imprisonment ($Z= -3.315$; $p<.01$) (see Figure 39).

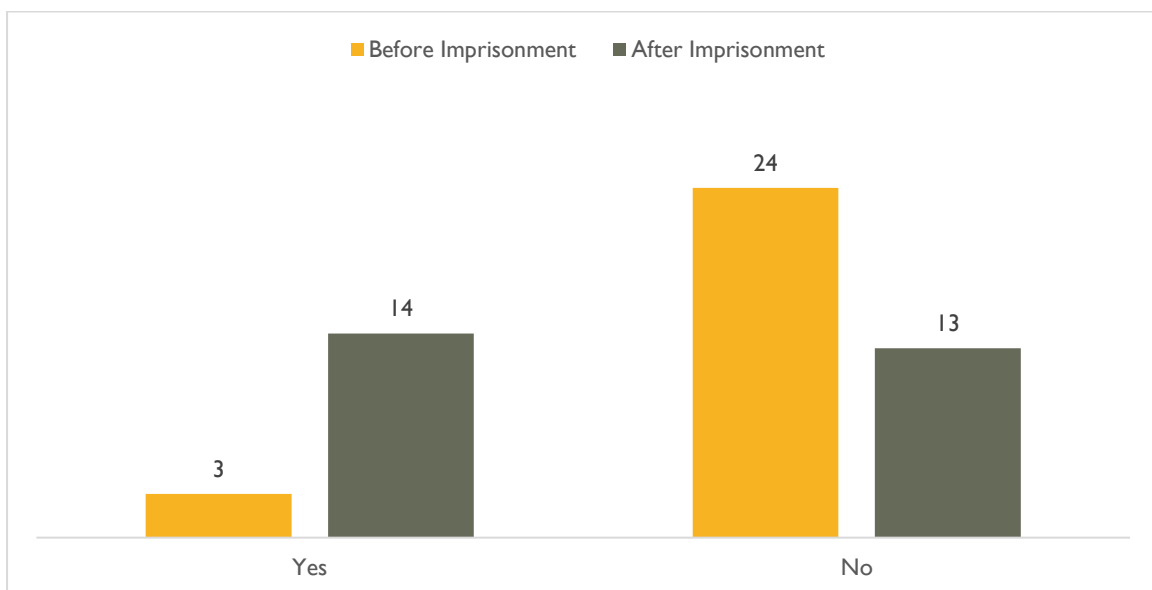


Figure 39: Children's self-reported involvement in work consisting of heavy tasks pre and post caregiver imprisonment

Moreover, a significant difference was observed in the extent to which caregivers were available to assist children with their schoolwork before and after caregiver imprisonment ($Z = -2.365$; $p < .05$). After the imprisonment of a caregiver, children stated that adults were less likely to spend time with them helping them to complete their schoolwork (see Figure 40).

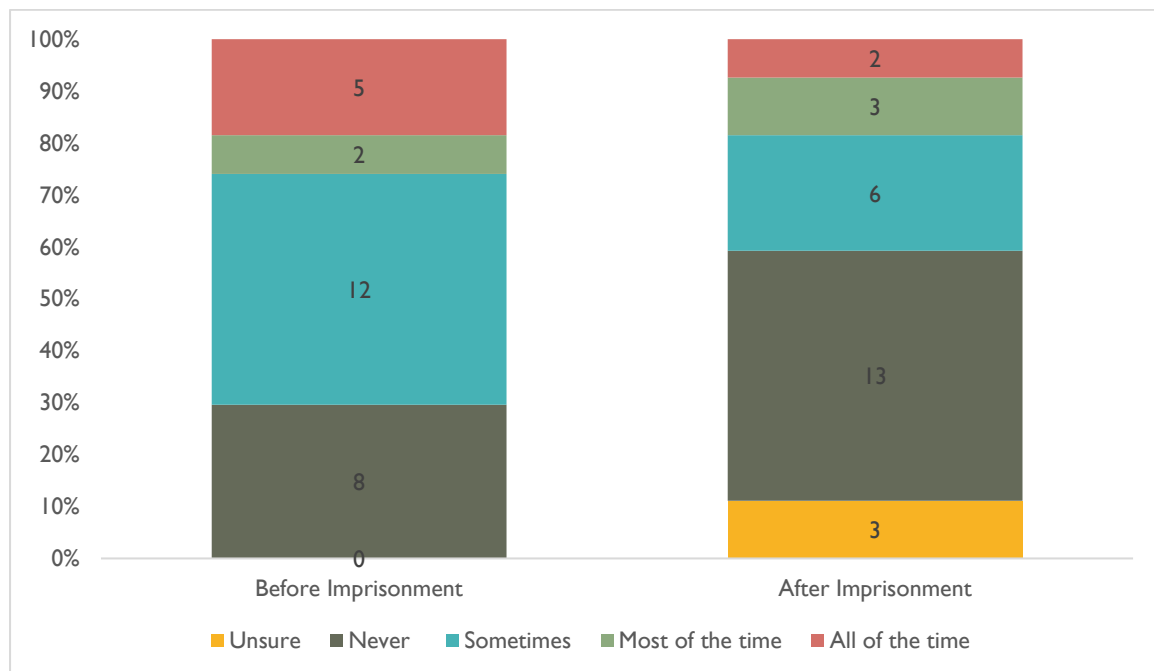


Figure 40: Amount of time children reported caregivers spent helping them with schoolwork pre and post caregiver imprisonment

Children’s feelings towards their school and teachers also changed after the imprisonment of their caregiver. Based on their questionnaire responses, children felt less safe at school following the imprisonment of a caregiver ($Z = -2.774$; $p < .01$) (see Figure 41).

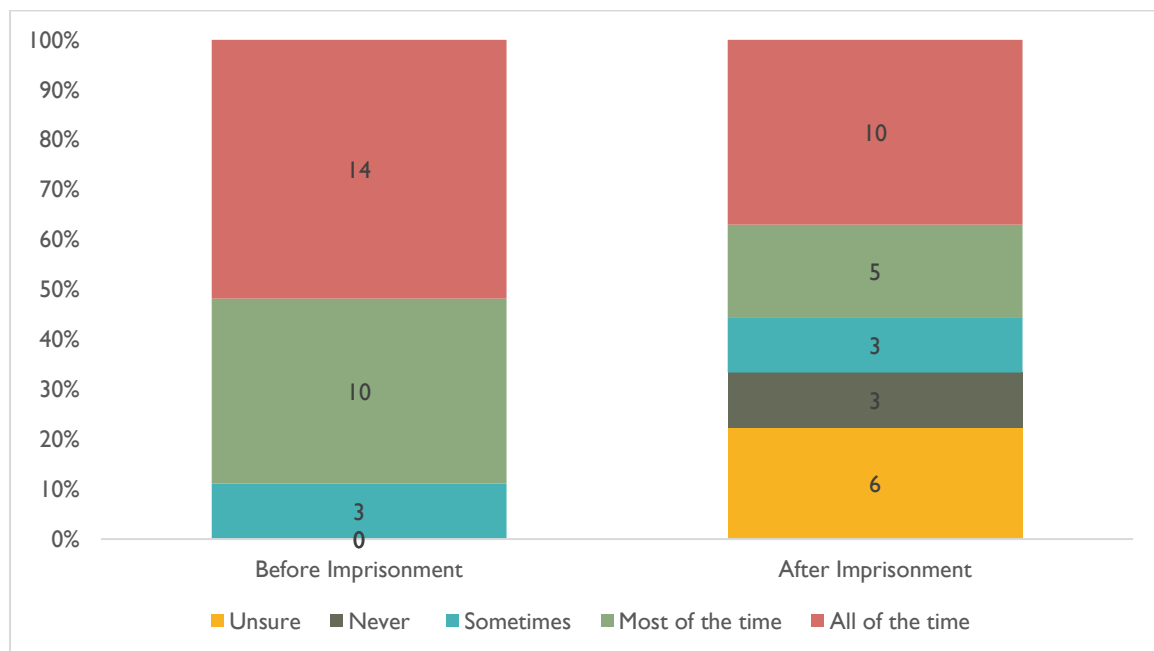


Figure 41: Children’s self-reported feelings of safety at school pre and post caregiver imprisonment

Additionally, children’s perceptions about the extent to which their teachers cared about them changed following the imprisonment of their caregiver ($Z = -2.364; p < .05$). Children reported that they felt that teachers cared less about them following the imprisonment of their caregiver compared to before their imprisonment (see Figure 42).

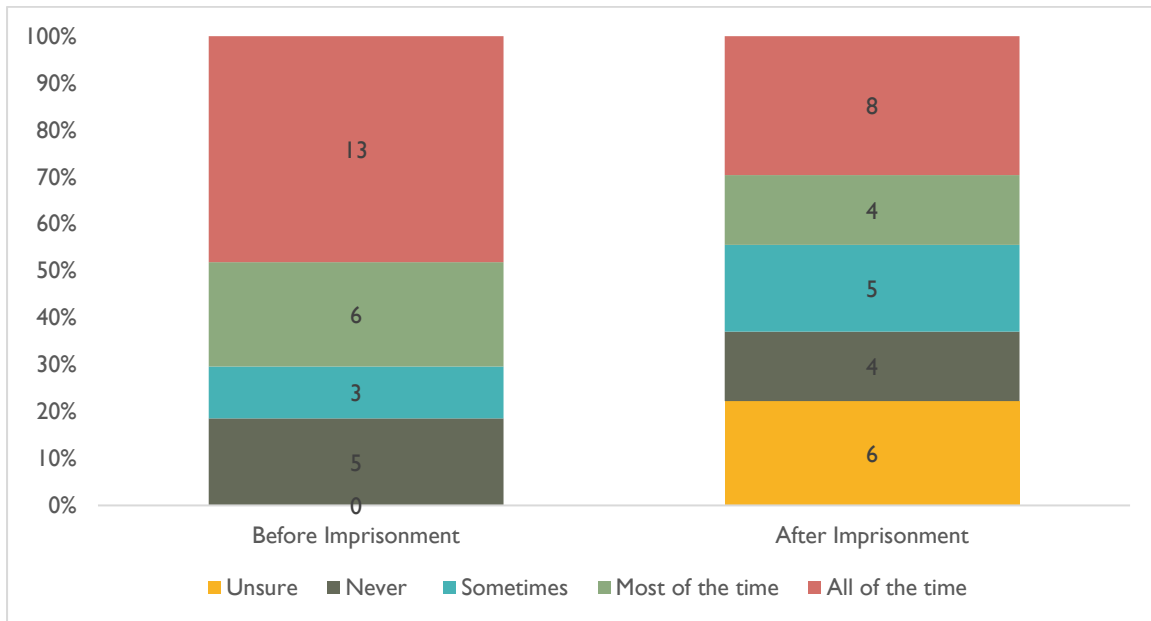


Figure 42: Extent to which children felt teachers cared about them pre and post caregiver imprisonment

Non-imprisoned adult caregivers were also asked about how primary caregiver imprisonment may have affected children’s feelings about school. Almost half thought that children’s feelings towards school had worsened following the imprisonment of their caregiver (see Figure 43).

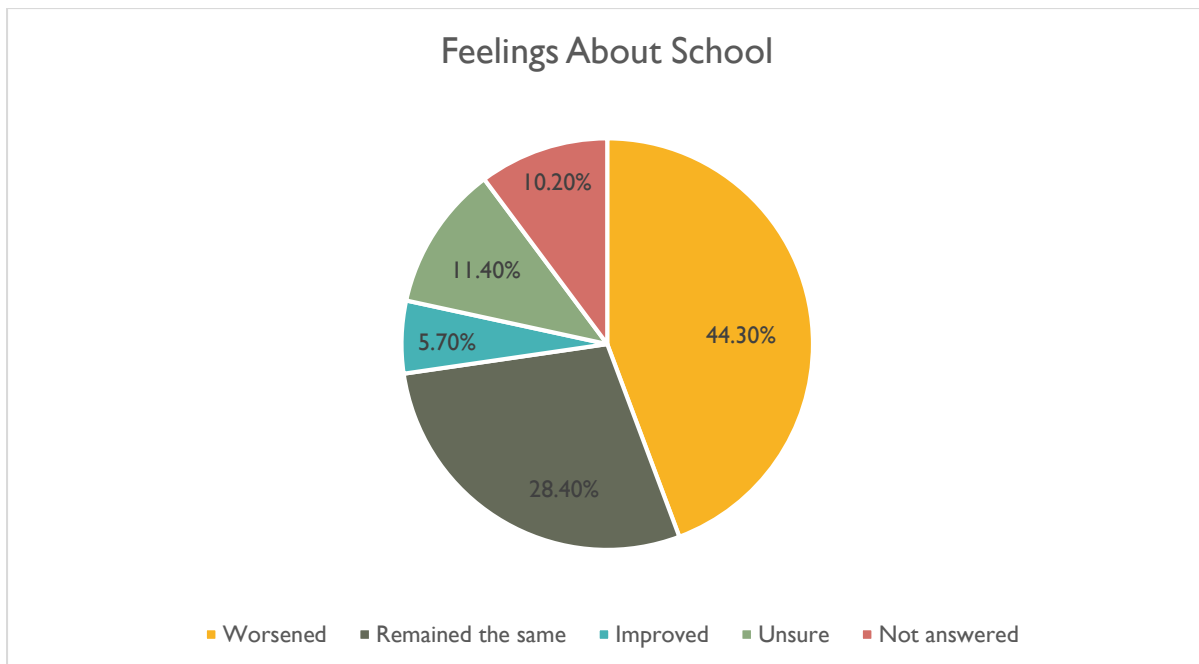


Figure 43: Adults beliefs regarding the extent to which children’s feelings about school changed following the imprisonment of a caregiver

When asked how often they were available to help children with their schoolwork, almost half of all non-imprisoned adult caregivers stated that they had never been able to help children with their schoolwork in the past year (see Figure 44).

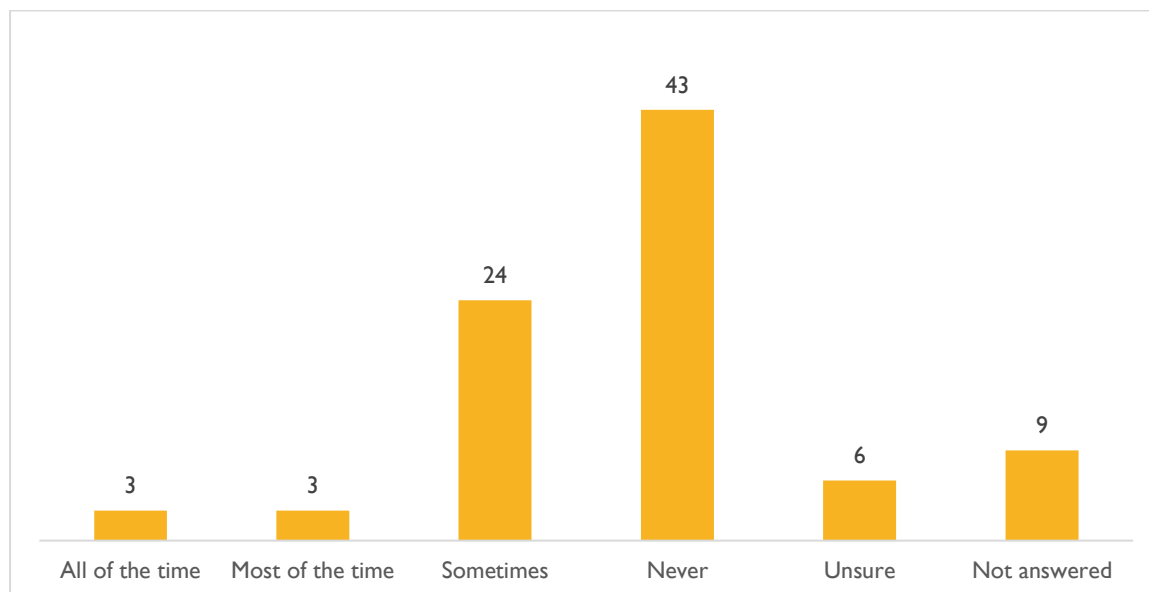


Figure 44: Extent to which adults reported helping children with schoolwork in the past year

In the interviews with non-imprisoned adult caregivers, it quickly became apparent that adults felt they had little time to help children with their homework due to the extra work they had undertaken as they sought to meet the additional financial responsibilities that the imprisonment of the children’s caregiver had placed on them. Of particular concern to both non-imprisoned adult caregivers and children in the interviews was the payment of school fees and the negative impact primary caregiver imprisonment had on the ability of the non-imprisoned adult caregiver to pay school fees and buy school books, uniforms and scholastic materials. The difficulties experienced in paying school fees was the main reason given for why both children and non-imprisoned adult caregivers believed that primary caregiver imprisonment had had a negative impact on child education. In the interviews with children, most children (10 out of 15) explained that the imprisonment of their caregiver had hindered their educational performance and attainment. Likewise, most adult interviewees (43 out of 61) believed that the imprisonment of the children’s caregiver had negatively impacted on the children’s education. Only one child reported that the imprisonment of their caregiver had led them to perform better at school as they sought to make their imprisoned caregiver proud of them by improving their school grades. However, no adult interviewees believed that the educational performance and school attendance of children had improved, following the imprisonment of their primary caregiver. Seven adults and one child claimed that the imprisonment of their primary caregiver had had no impact on the child’s educational performance or school attendance and this was because the children were either away attending a boarding school and/or their school fees had already been paid for by a bursary, scholarship or family member:

“They were all in boarding school and are still in boarding school.” (Participant 10 – Adult)

“They imprisoned her [mother] before he [child] started school then I took him to school [...] with my money.” (Participant 58 – Adult)

With regards to those whose education was negatively impacted by caregiver imprisonment, one of the main explanations given for this negative impact was the difficulties families encountered paying school fees and buying books, uniforms and other scholastic materials:

“No, they don’t go to school. [...] I don’t have the capacity, I am not working and I don’t have any income so I cannot afford school fees and other scholastic materials. The father used to provide for them but he is now not here [due to his imprisonment] so my hands are tied.” (Participant 17 – Adult)

“We worry a lot [since the imprisonment of their caregiver] [...] he would at times help pay for our school fees but now we don’t have someone to do that for us. [...] Sometimes we miss [school], even beginning of [this] term we missed some days, and then last term we also did not do the exams.” (Participant 70 – Child)

Non-imprisoned adult caregivers and children recounted how children were frequently sent back home for the non-payment of school fees. While non-imprisoned adult caregivers attempted to take on extra work to pay school fees, defer payment of these fees until the release of their imprisoned caregiver or organise a bursary/scholarship for the children, children were nonetheless often sent back home from school because of the non-payment of school fees or because they lacked the books and/or other scholastic material required by their school:

“She no longer go to school. [...] We don’t have money to even buy books and I don’t have money for school fees.” (Participant 21 – Adult)

“I went and pleaded with the teacher [...] but I know anytime he [child] will be sent back home because we did not pay a single coin [...] because all others [older children] were sent away [by the school] so I knew he will also be sent back home. [...] He really likes school [...] but money is the problem. [...] They [school staff] have not yet sent him back home but very soon they will because they want school fees which I don’t have right now.” (Participant 31 – Adult)

“I used to enjoy school but when money became a problem, it was always me to be sent back for [not paying school] fees and I would always miss doing exams [...] because of the situation.” (Participant 72 – Child)

Being sent back home by schools for the non-payment of school fees was the most common explanation given for the reduction in school attendance following caregiver imprisonment and for why some students had not progressed further with their education. Adults and children also attributed the reduction in the children’s grades and educational performance to being sent home from school, as their absence from class hindered their educational performance and ability to maintain their previous grades. Nevertheless, in two cases adults reported that children had refused to go to school since the imprisonment of their caregiver:

“Their father used to take them [to school] so they [children] say that if he is not there they will not go to school.” (Participant 37 – Adult)

“No, I don’t have any [children in school]. [...]If they refuse, I leave it [...] I don’t force.” (Participant 56 – Adult)

In order to try to reduce the costs associated with the payment of school fees, some children and adults explained that children had dropped out of school completely or else had transferred from a private school to a government funded school with lower school fees. However, they were concerned about the impact this was having on their educational performance and attainment:

“Children left good schools to poor ones [...] and where they are now performance is poor. [...] They moved from good private schools to poor government school.” (Participant 14 – Adult)

“I dropped out during the very month he was jailed. [...] I had the hope of going back to school but now where it has reached, I can no longer go back. [...] When they [school staff] started demanding [payment] for [school] fees, we had to stop. Even the eldest sister had to be sent back home for [non-payment of school] fees.” (Participant 76 – Child)

In addition, non-imprisoned adult caregivers and children reported taking on additional chores and heavy tasks to help amass the money required to pay for school fees and other scholastic materials:

“I had to struggle to get school fees through digging for other people.” (Participant 02 – Adult)

“We dig for people and they give us money. [...] Those people we dig for pay mummy, then she gives it to us to take to school.” (Participant 73 – Child)

Yet, taking on this additional work affected the ability of children to attend school and undertake their schoolwork at home, limiting their ability to study to increase their grades and improve their educational attainment.

Moreover, children and adults explained that the increase in worry, unhappiness and illness that children felt following the imprisonment of their caregiver hindered their ability to study and perform well during exams:

“Her performance has reduced from first/second position to eighth position. [...] My child used to perform very well. [...] It [caregiver imprisonment] stressed her somehow [...] now she is the 8th position and below.” (Participant 09 – Adult)

“Yes. It [imprisonment of caregiver] really affected him [child] because we haven’t got money for the child’s school requirements [...] and he is also sick. He fell sick on his return [to school].” (Participant 15 – Adult)

Children and non-imprisoned adults also believed that the diminished family food supply and changes in the children’s diet that had been experienced since the imprisonment of the children’s caregiver meant that children were often hungry and unable to properly concentrate on their studies, hindering their educational performance and attainment:

“They [children] come back, they have nothing to eat and [...] then you involve them in reading but they can’t. [...] What I mostly want is my children going to school and then getting food to eat because even if they go to school, when they have not eaten, they might end up missing what they teach in class. But if they leave home satisfied [...] they will be active in class and be able to perform better.” (Participant 18 – Adult)

“Generally it has affected it [performance at school] [...] I for one I think that if father was around, maybe we would not be affected by hunger.” (Participant 73 – Child)

In all of these ways, caregiver imprisonment negatively impacted on children’s education.

Summary

These findings indicate that primary caregiver imprisonment has a predominately negative impact on child outcomes, such as child wellbeing, health and education. While it is possible that in some cases child health, education and wellbeing may not be affected by primary caregiver imprisonment or occasionally improve child outcomes, these findings reveal that the majority of children are negatively affected by the imprisonment of their caregiver. Caregiver imprisonment negatively affected child wellbeing, with children reporting greater problems with their wellbeing after the imprisonment of their caregiver compared to before their imprisonment. Children were found to experience greater levels of restlessness, illness, anger, loneliness, worry, distractedness, fearfulness and to be more often accused of cheating or lying after caregiver imprisonment compared to before their imprisonment. Reduced child wellbeing was attributed to feelings sadness at being separated from their caregiver, children's fears for the health of their caregiver while in prison and their worries over how their family would survive without the imprisoned caregiver's financial support. Child health also became poorer after caregiver imprisonment, as there was less money available to spend on medication, food or travel to access hard to reach healthcare facilities. This meant that children often went without medication, if money was not available to buy medication or cover the cost of travelling to distant healthcare facilities, if adults were unable to access credit to pay for medical services or if they were unable to exchange labour for these services. In addition, the reduction in the family income due to the loss of the imprisoned caregiver's income meant that families had to make tough choices about how to use their available resources. Often, food intake was reduced as families sought to prioritise the payment of rent, medication and school fees. Families reported eating less meals, meat, chicken, fish, eggs, fresh fruit and vegetables after caregiver imprisoned compared to before the imprisonment of a caregiver. Moreover, more families reported experiencing food shortages after the imprisonment of a caregiver compared to before their imprisonment. This reduction in quantity and quality of food was attributed with weakening children's health and increasing their susceptibility to illness. It was also credited with hindering children's educational performance as the increased hunger children felt after caregiver imprisonment was believed to make it more difficult for children to concentrate on their studies. Further, it was found that primary caregiver imprisonment had a negative impact on school attendance, educational attainment and the payment of school fees. After the imprisonment of a primary caregiver, attendance at school became more sporadic, with some children leaving school early as they could no longer afford the payment of school fees and as a small minority refused to attend in the absence of their imprisonment caregiver. Children's performance and educational attainment also worsened as children were working for longer periods of time outside of school in heavy tasks and as non-imprisoned adult caregivers had less time available to spend helping children with their schoolwork. Additionally, children's educational attainment and performance was believed to be poorer because they were often sent home from school due to the non-payment of school fees, missing educational classes and examinations. The reduced wellbeing of children was also believed to restrict their capacity to study and perform to the best of their ability. Finally, children reported feeling less safe at school and cared for by their teachers following the imprisonment of a caregiver.

Chapter 4: Child Poverty and Impact on Families

In this chapter, the extent to which primary caregiver imprisonment may affect child poverty and the strength of family relationships is investigated. The chapter begins by assessing if primary caregiver imprisonment has negatively affected child poverty and the number of deprivations children and their families experience. Next, whether primary caregiver imprisonment has influenced the ability of families to maintain their family relationships is examined and the views of non-imprisoned adult caregivers and children regarding what supports they would like to see provided to children and families affected by caregiver imprisonment is reviewed. The chapter then concludes with a short summary.

Child Poverty

The United Nations (1998) states that poverty is a violation of human dignity through the denial of choices, opportunities and the capacity to participate effectively in society. An internationally agreed definition of child poverty is “a condition characterised by severe deprivation of basic needs, including food, safe drinking water, sanitation facilities, health, shelter, education and information. It depends not only on income but access to social services” (Gordon et al. 2003: 5). In assessing child poverty, the internationally recognised Bristol Townsend Centre for International Poverty Research approach to measuring child poverty was adopted and poverty was assessed based on: the nutrition status of the child; access to information; access to books; possession of bedsheets; possession of a blanket; access to their own room for sleeping; access to a computer; ownership of a pair of shoes; ownership of a school uniform; extent to which the child is attending school; and involvement in labour. From examining these indicators, it was evident that the proportion of children aged 10 years and above who were deprived increased after the imprisonment of their primary caregiver, increasing child poverty (see Figure 45).

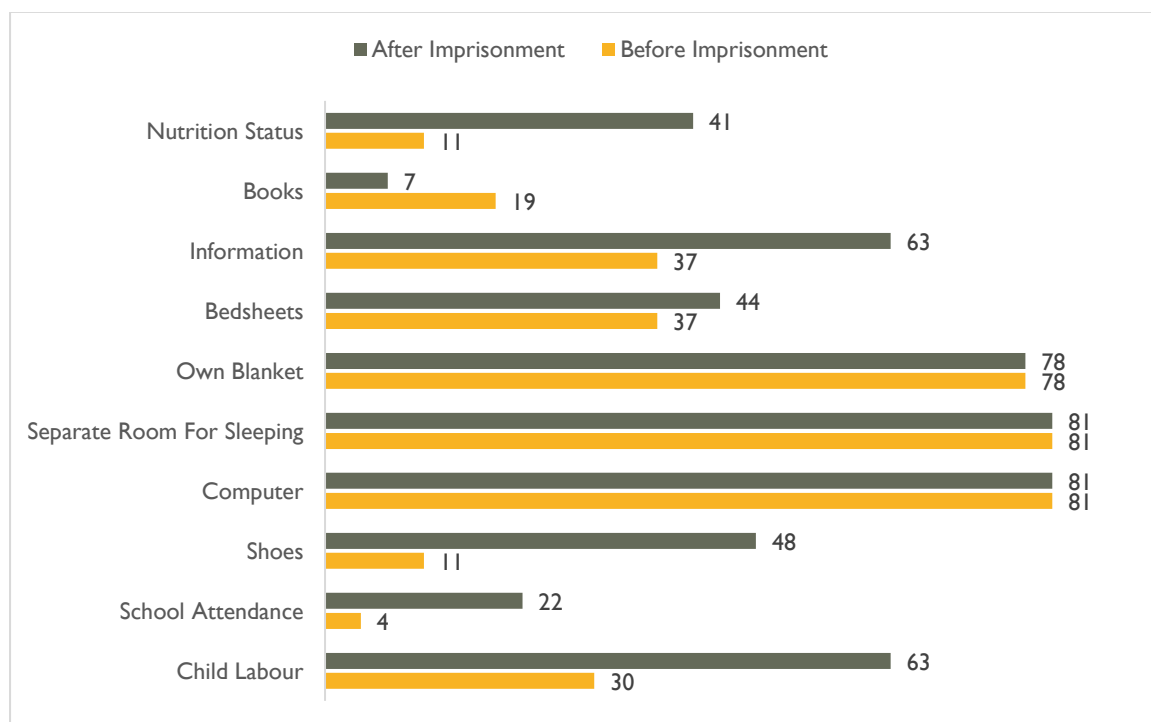


Figure 45: Percentage of children deprived of each indicator before and after caregiver imprisonment

Examining these figures further revealed that roughly two thirds of children were deprived on two, three or four of these indicators prior to the imprisonment of their caregiver, while after their caregiver's imprisonment, approximately two thirds of children were deprived on six or more of these indicators (see Figure 46). This suggests that caregiver imprisonment exacerbated child poverty.

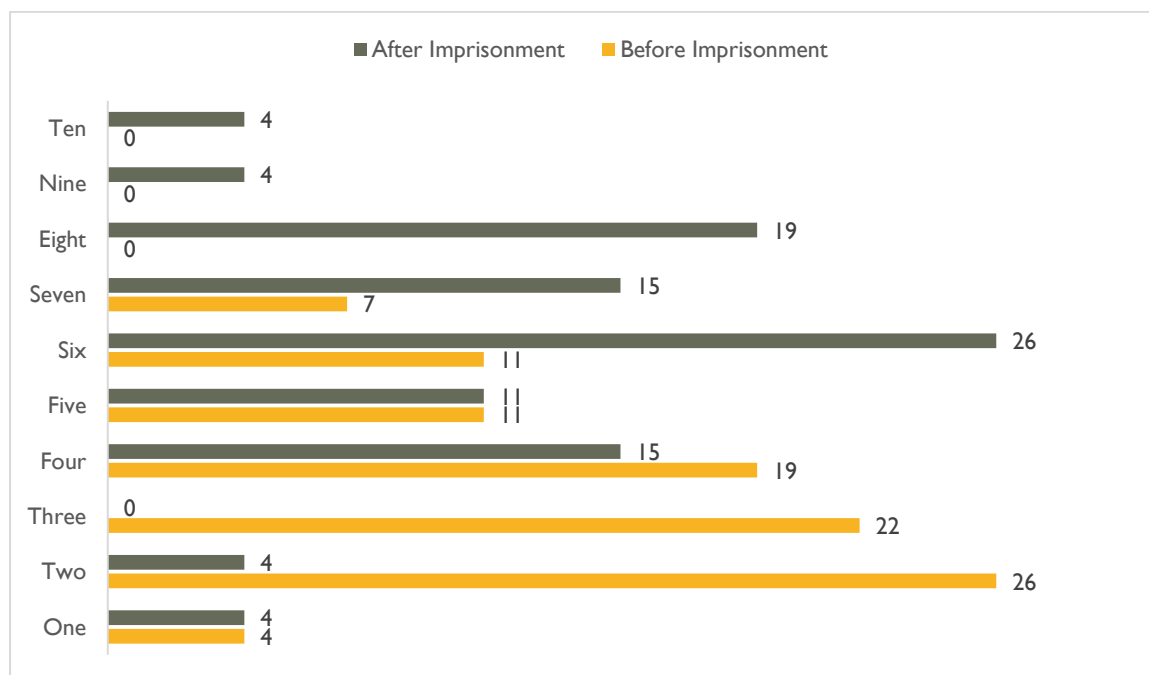


Figure 46: Percentage of children experiencing multiple deprivation pre and post caregiver imprisonment

A simple linear regression was used to examine the relationships between the experience of child poverty before and after imprisonment and it found that for every deprivation experienced before imprisonment, children's experience of severe deprivation increased by 0.67 after imprisonment ($\beta=0.67$; $p<.05$). This further demonstrates that primary caregiver imprisonment worsens child poverty and contributes to inter-generational cycles of poverty, hunger and deprivation.

A series of Wilcoxon Signed Rank tests was conducted on the children's questionnaire responses to examine how children's material possessions changed following the imprisonment of their caregiver. While no significant differences ($p>.05$) were observed on the extent to which children had their own bed, own blanket, access to a computer or a television before and after caregiver imprisonment, a number of significant differences were observed. For instance, children reported being less likely to have a second school uniform after primary caregiver imprisonment ($Z=-2.828$; $p<.01$) (see Figure 47).

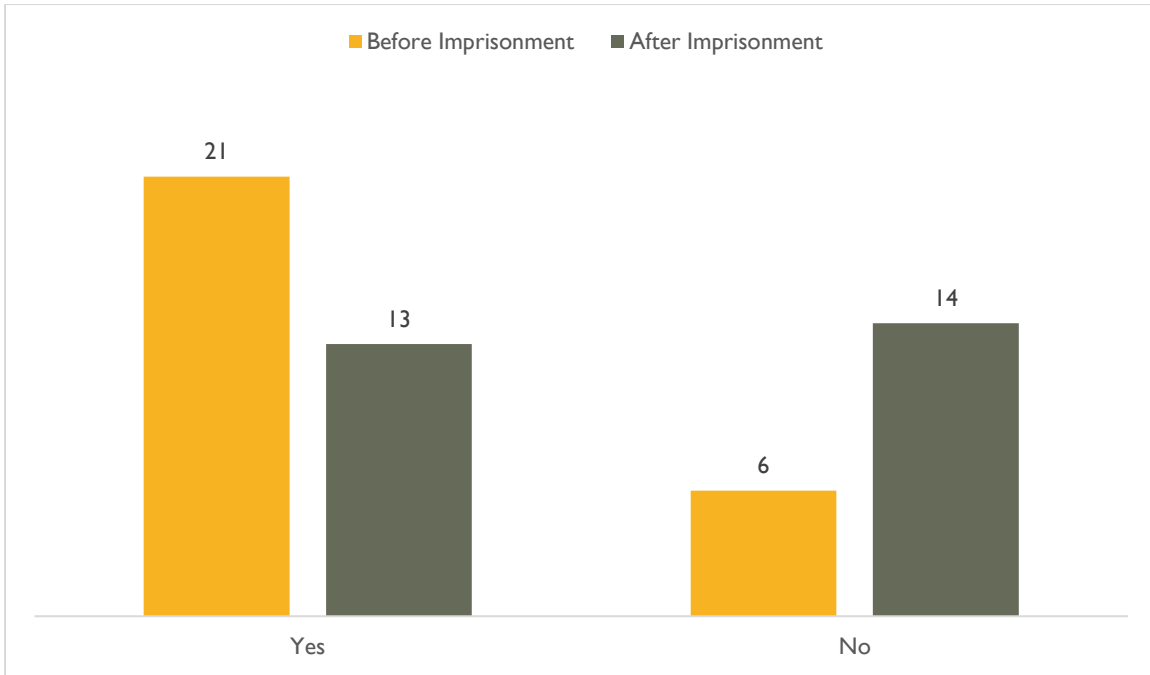


Figure 47: Children's self-reported possession of a second school uniform pre and post caregiver imprisonment

Children were less likely to own a pair of good shoes after their caregiver's imprisonment compared to before their imprisonment ($Z=-2.887$; $p<.01$) (see Figure 48).

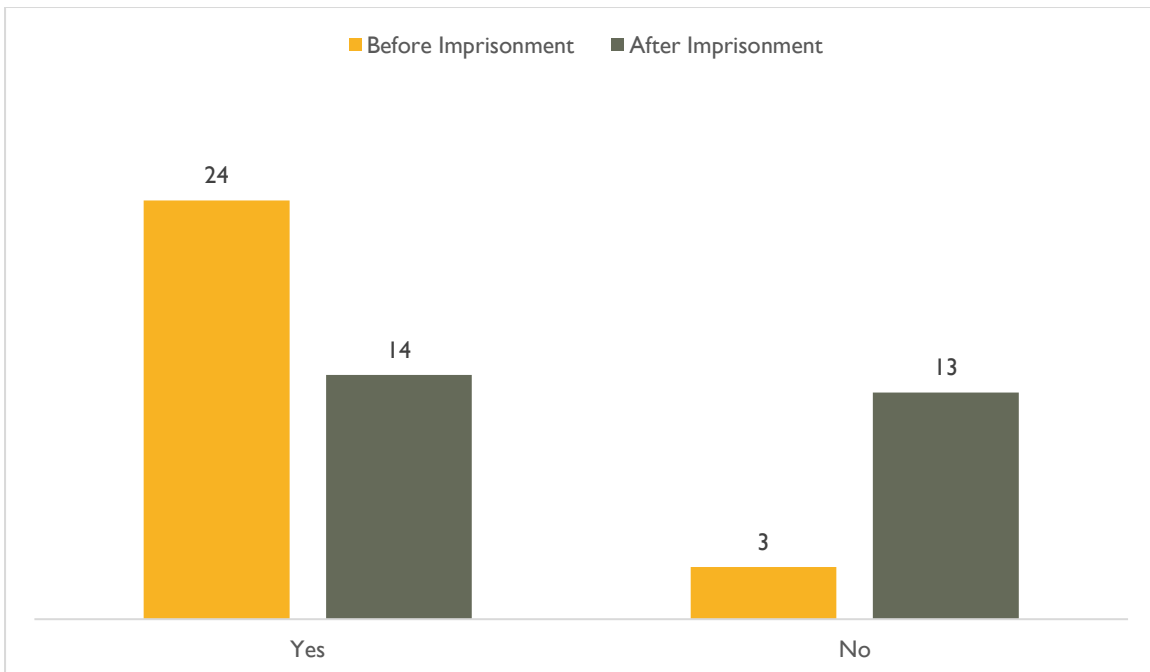


Figure 48: Children's self-reported possession of a good pair of shoes pre and post caregiver imprisonment

In addition, children were less likely to own a pair of bed sheets after the imprisonment of their caregiver ($Z=-2.646$; $p<.01$) (see Figure 49).

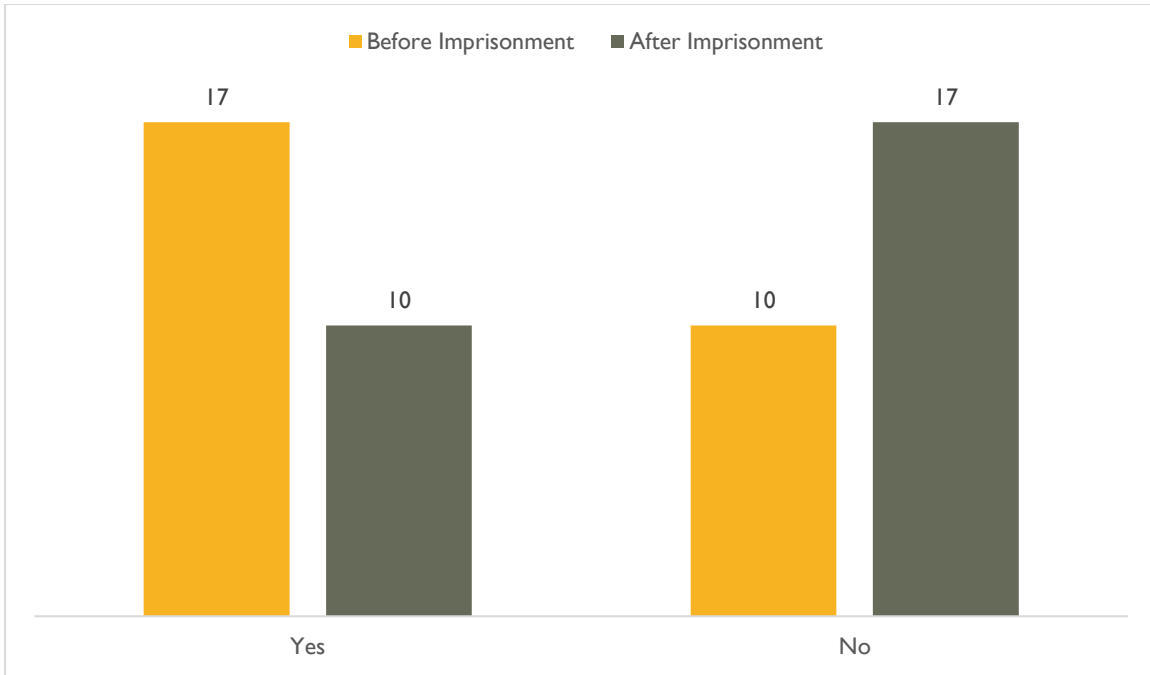


Figure 49: Children's self-reported possession of a pair of bedsheets pre and post caregiver imprisonment

Access to a mobile telephone was less common for children after the imprisonment of their caregiver compared to before their imprisonment ($Z=-2.236$; $p<.05$) (see Figure 50).

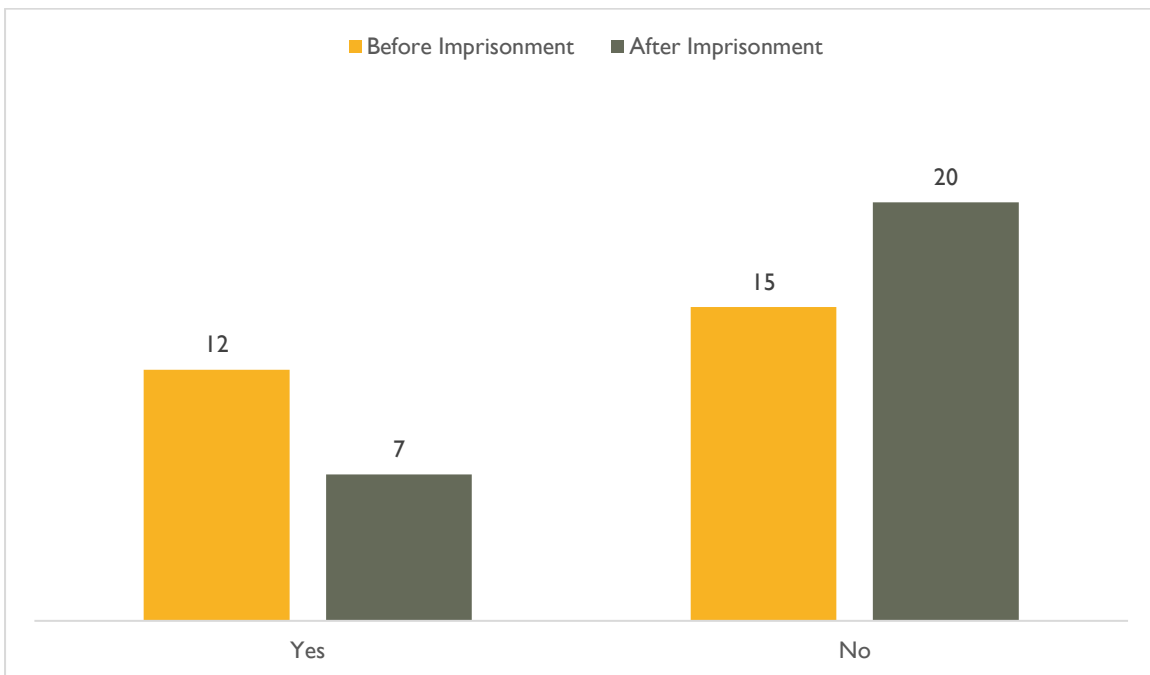


Figure 50: Children's self-reported access to a mobile telephone pre and post caregiver imprisonment

Likewise, less children reported having access to a radio following the imprisonment of their caregiver ($Z=-2.828$; $p<.01$) (see Figure 51).

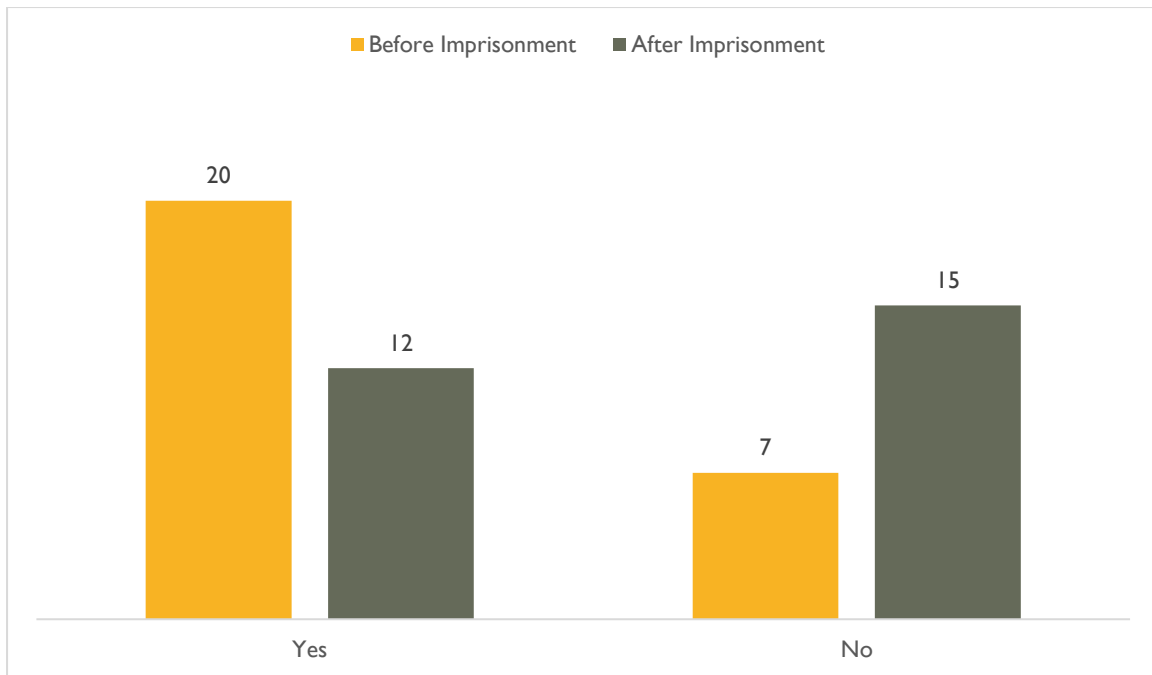


Figure 51: Children's self-reported access to a radio pre and post caregiver imprisonment

Children also reported less access to scholastic materials like books and pens after their caregiver's imprisonment ($Z=-2.828$; $p<.01$) (see Figure 52).

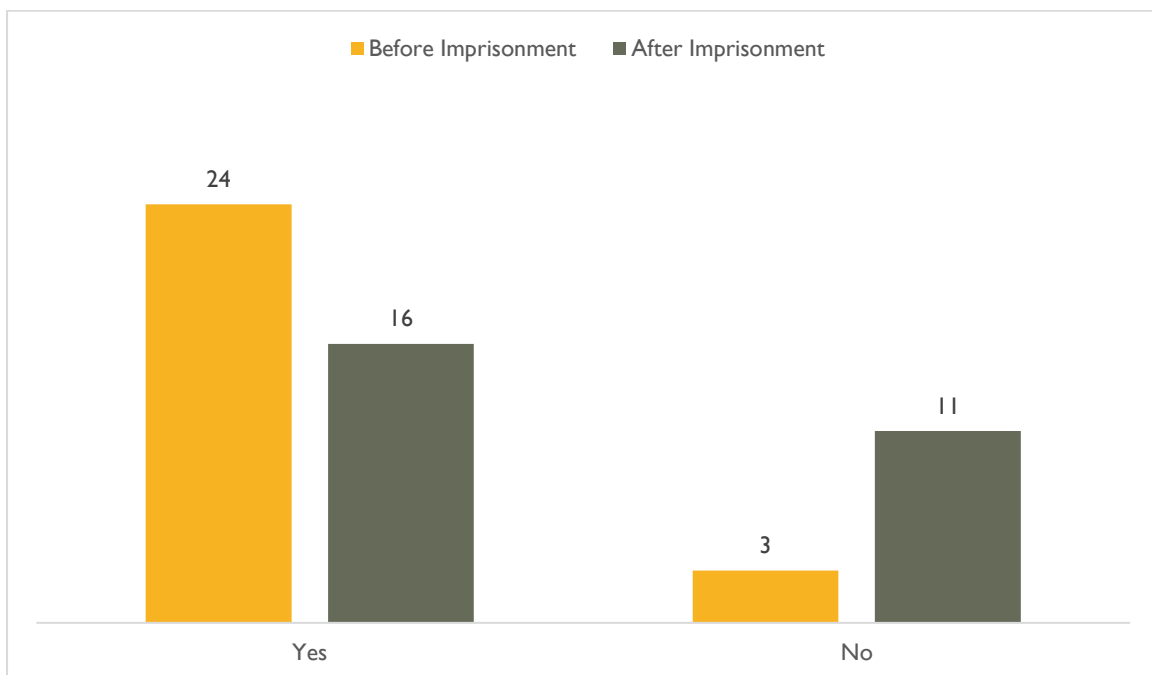


Figure 52: Children's self-reported access to scholastic materials pre and post caregiver imprisonment

When the non-imprisoned adult caregiver questionnaire responses were examined, a similar increase in the deprivations experienced by households was observed. For example, while no significant differences was witnessed in the number of households taking action to make water safer to drink or the methods they used to make water safer, a significant difference was found in the length of time it took to fetch water

before and after caregiver imprisonment ($t(84) = 2.512, p < .05$). Adults reported that it took longer to fetch water after caregiver imprisonment compared to before their imprisonment (see Figure 53).

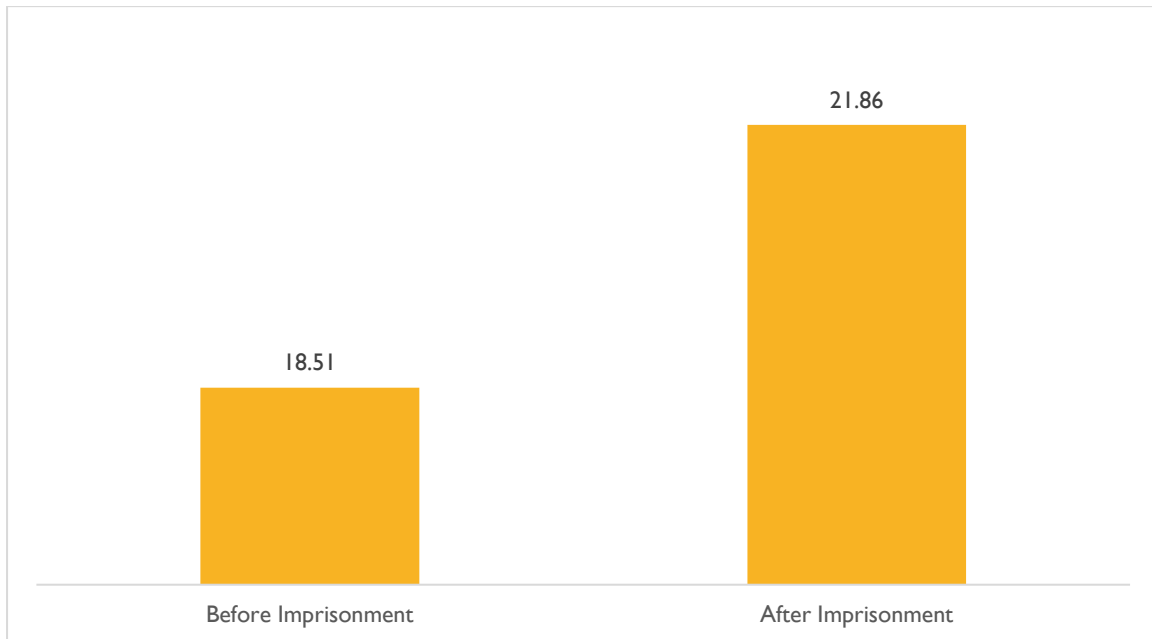


Figure 53: Adult’s self-reported mean time taken to fetch water pre and post caregiver imprisonment

A significant difference was observed using Wilcoxon Signed Rank tests in the sources of drinking water used before and after caregiver imprisonment ($Z = -2.313; p < .051$), with these figures indicating that after the imprisonment, there was a small shift from using an improved safe water source to using an unsafe water source (see Figure 54). This could be due to families changing accommodation following caregiver imprisonment or because households could no longer afford to sustain payment for water and were resorting to cheap or free sources of drinking water (see Figure 54).

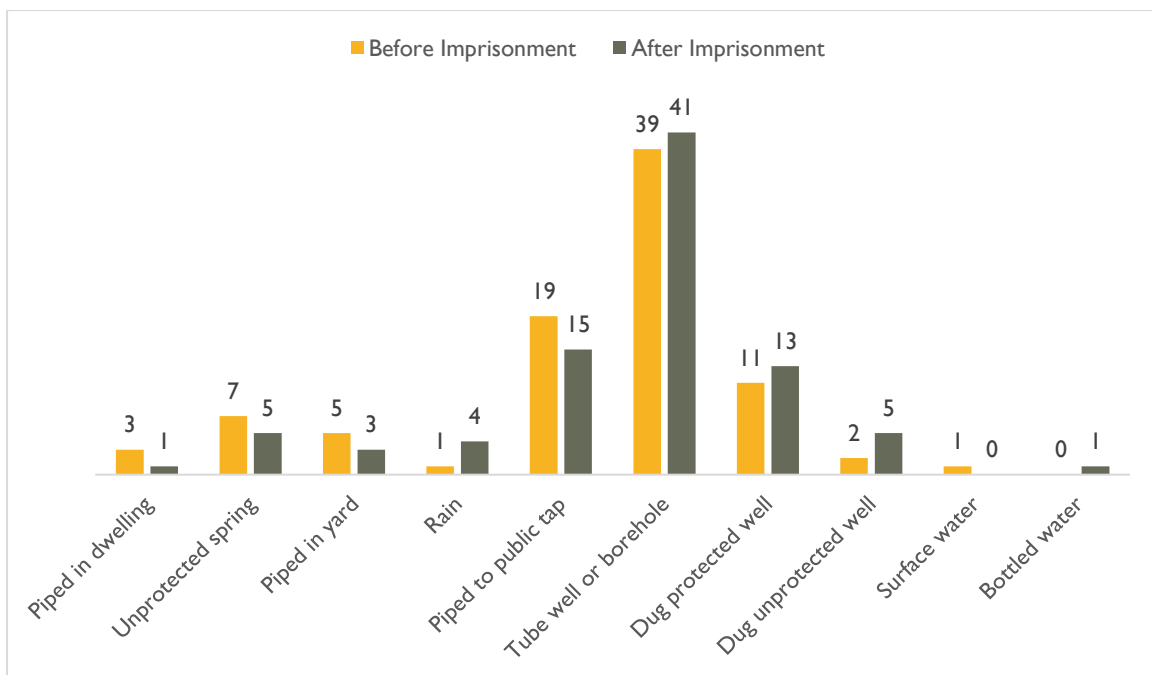


Figure 54: Adult’s self-reported sources of drinking water pre and post caregiver imprisonment

A significant difference was also observed in the self-reported toilet facilities used before and after caregiver imprisonment ($Z=-2.121$; $p<.051$), with these figures indicating that after caregiver imprisonment, less families had access to improved toilet facilities (see Figure 55).

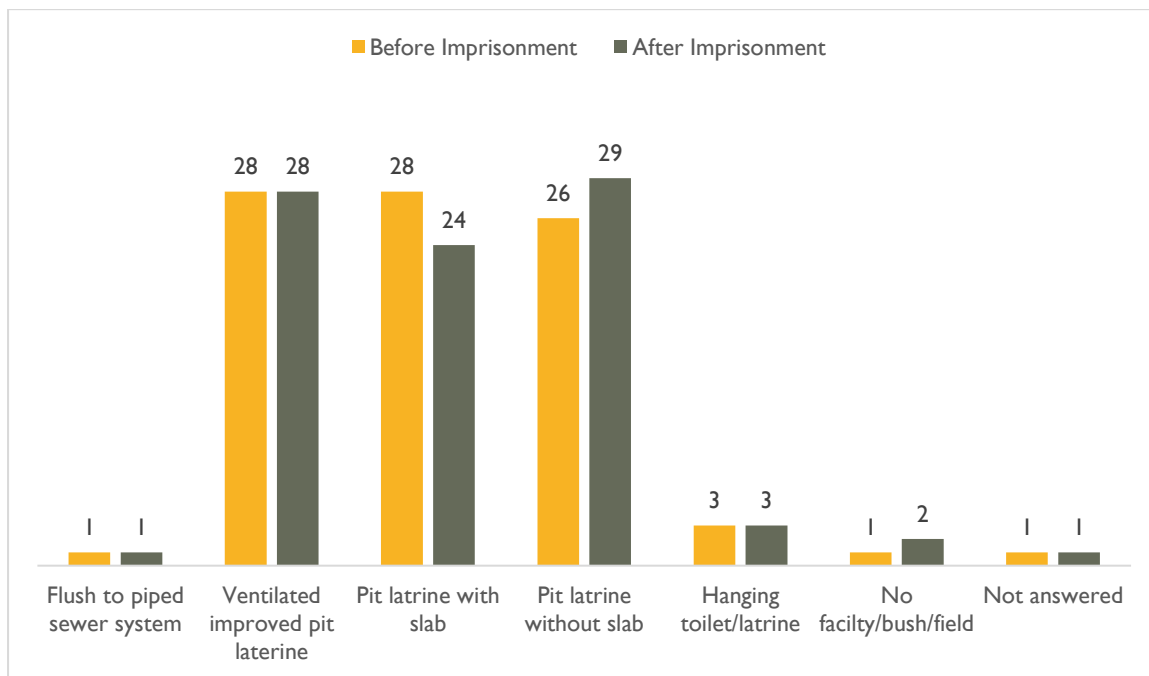


Figure 55: Adult's self-reported toilet facilities pre and post caregiver imprisonment

Non-imprisoned adult caregivers reported having less access to electricity after caregiver imprisonment compared to before their imprisonment ($Z=-3.051$; $p<.01$) (see Figure 56).

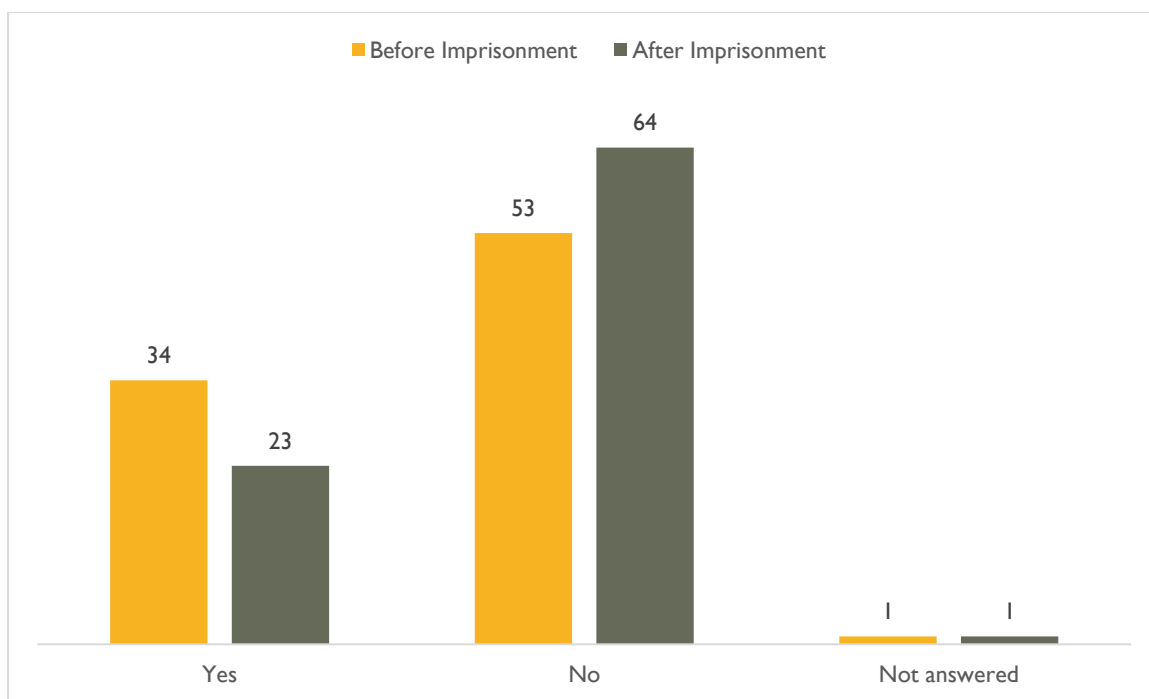


Figure 56: Adult's self-reported household access to electricity pre and post caregiver imprisonment

Similarly, adults reported less radio ownership following the imprisonment of a caregiver ($Z=-3.742$; $p<.001$) (see Figure 57).

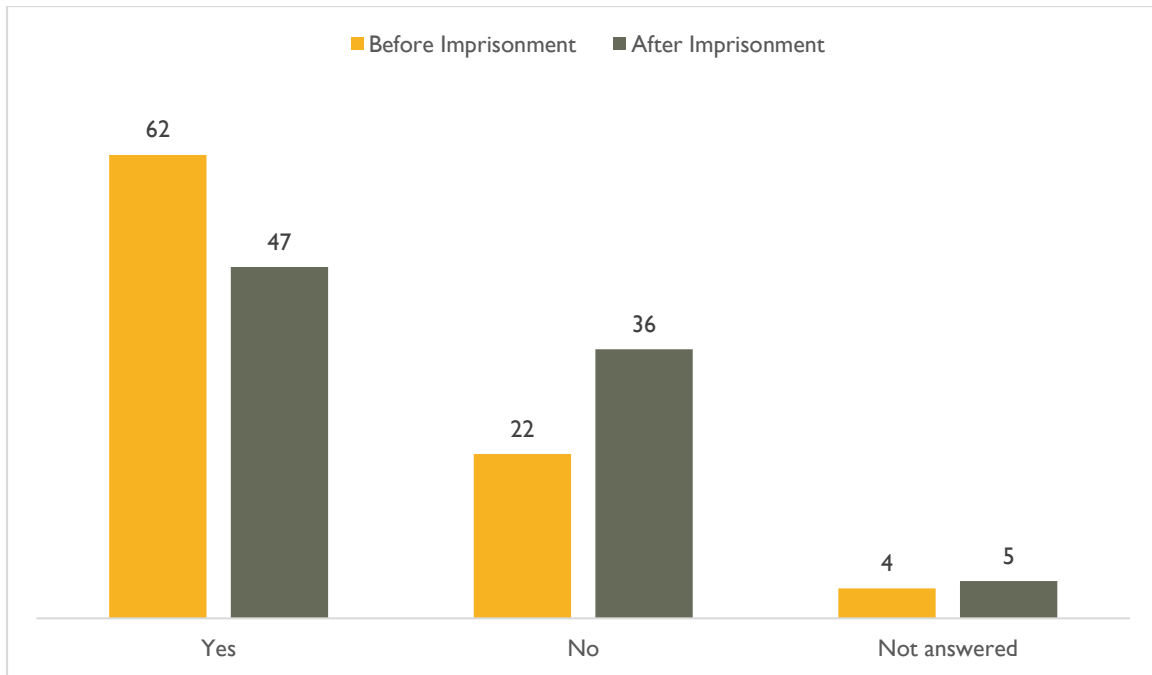


Figure 57: Adult self-reported household ownership of a radio pre and post caregiver imprisonment

A significant difference was also observed in adults self-reported ownership of a television ($Z=2.646$; $p<.001$). However, in contrast to the children's questionnaire responses, adults reported greater ownership of a television after caregiver imprisonment (see Figure 58).

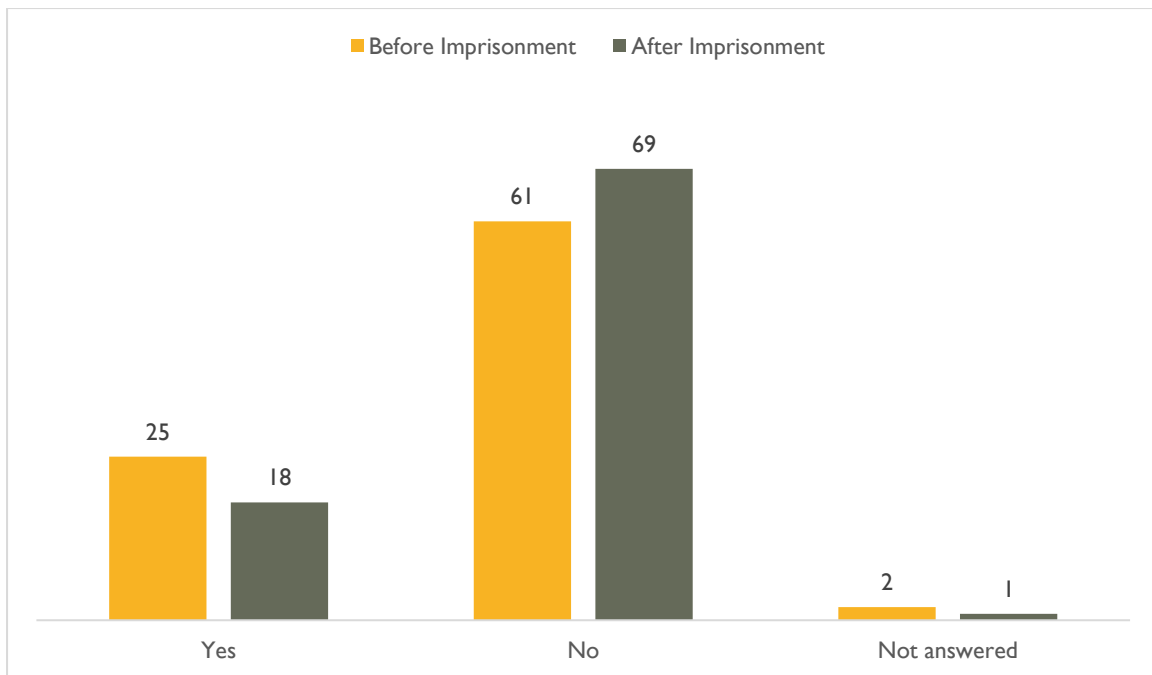


Figure 58: Adults self-reported household ownership of a television pre and post caregiver imprisonment

Household ownership of a mobile telephone was significantly reduced following the imprisonment of the children's caregiver ($Z=-7.076$; $p<.001$), with most households changing from owning a mobile telephone to no longer owning a mobile telephone after caregiver imprisonment (see Figure 59).

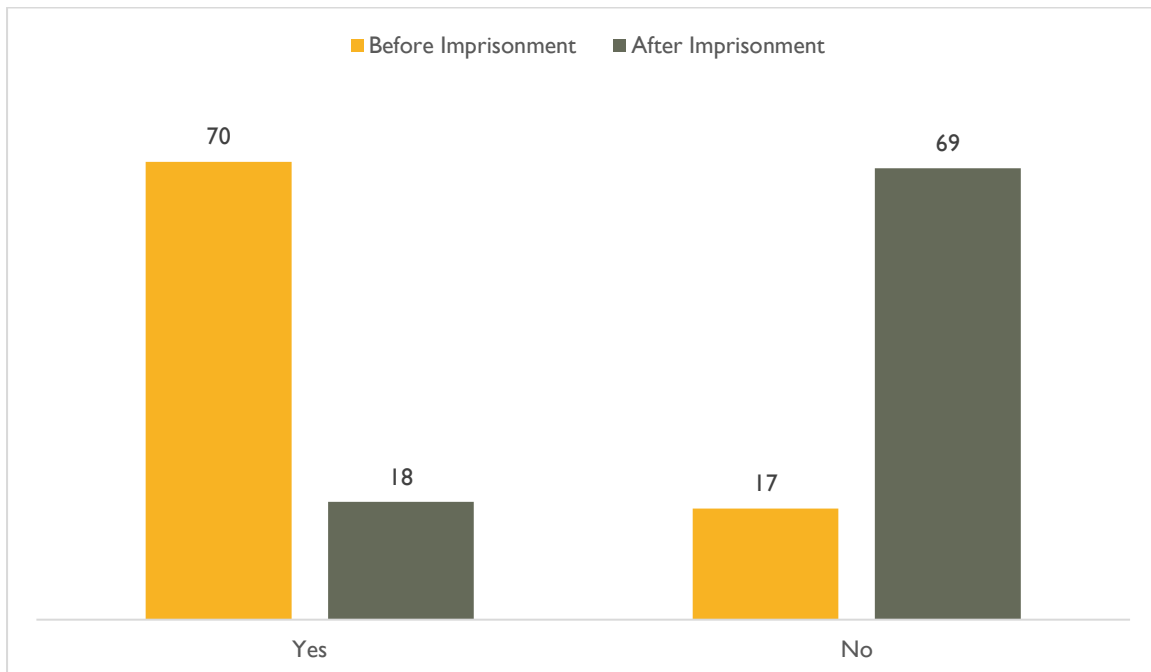


Figure 59: Adults self-reported household ownership of a mobile telephone pre and post caregiver imprisonment

No significant differences were found in household ownership of a table or a chair but a significant difference was observed in the household ownership of a sofa ($Z=-2.530$; $p<.05$), with less sofa ownership reported after caregiver imprisonment (see Figure 60).

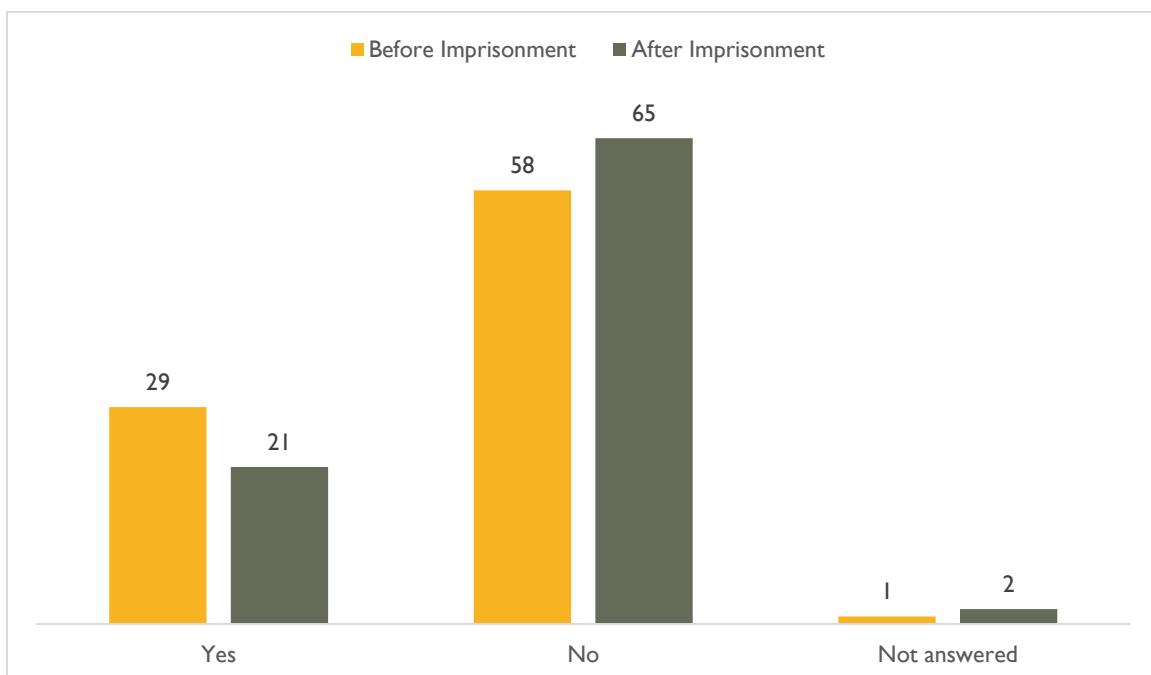


Figure 60: Adult self-reported household ownership of a sofa pre and post caregiver imprisonment

Likewise, households were significantly less likely to own a separate bed for each member of the household after caregiver imprisonment compared to before their imprisonment ($Z=-2.530$; $p<.05$) (see Figure 61).

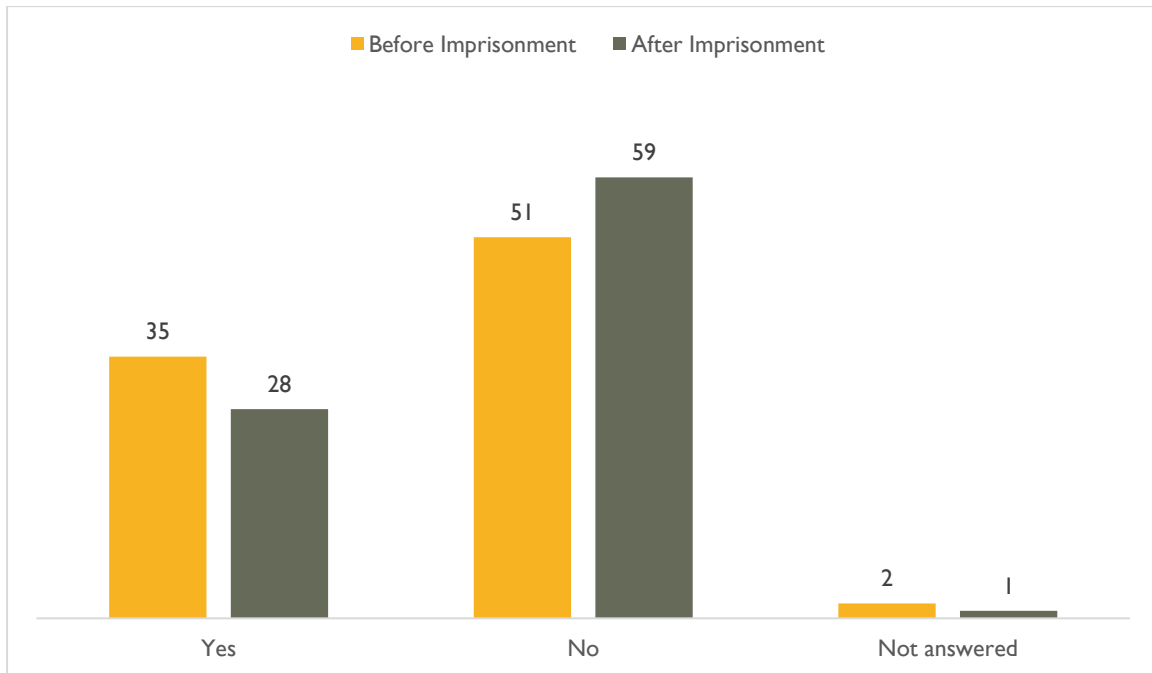


Figure 61: Adult self-reported household ownership of a separate bed each household member pre and post caregiver imprisonment

In addition, households were less likely to own a separate blanket for each member of the household after caregiver imprisonment ($Z=-2.887$; $p<.01$) (see Figure 62).

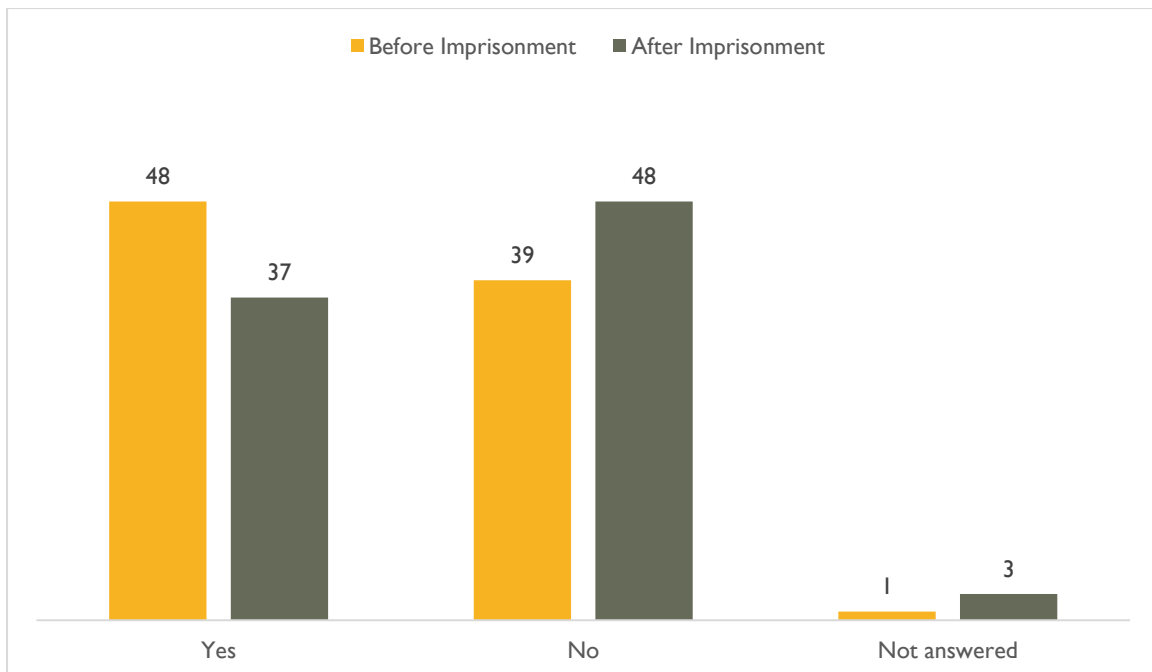


Figure 62: Adult self-reported household ownership of a separate blanket for each household member pre and post caregiver imprisonment

When asked if each member of the household had two sets of good clothes to wear, non-imprisoned adult caregivers reported less good clothes ownership for each household member after caregiver imprisonment compared to before their imprisonment ($Z=-4.000$; $p<.001$) (see Figure 63).

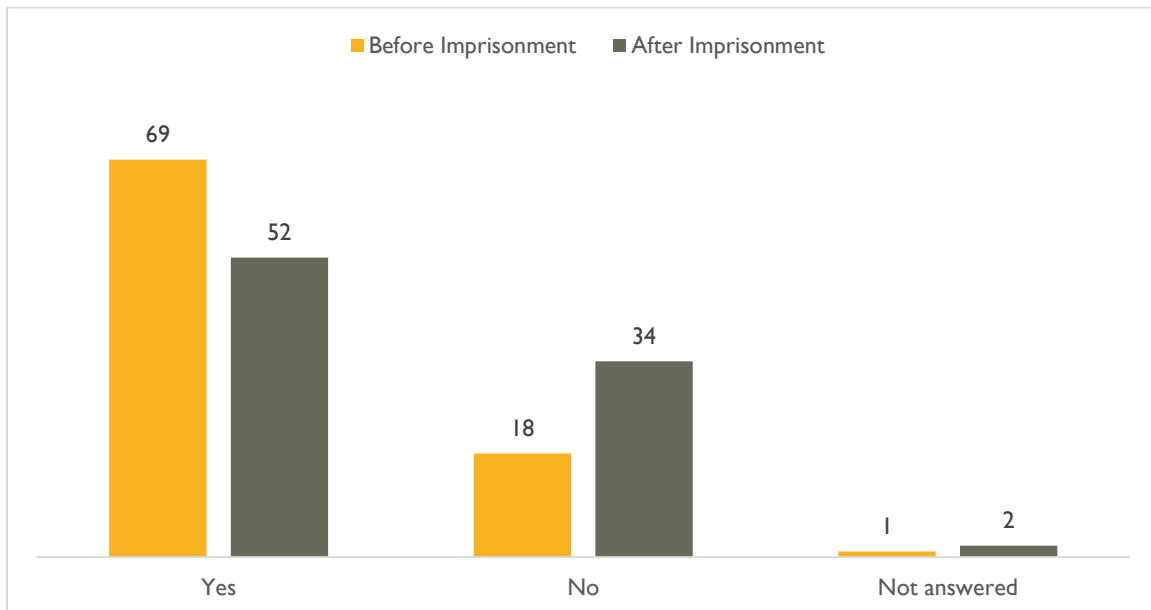


Figure 63: Adult self-reported household ownership of two sets of good clothes for each household member pre and post caregiver imprisonment

Each member of the household was also less likely to own a pair of good shoes following caregiver imprisonment ($Z=-3.771$; $p<.001$) (see Figure 64).

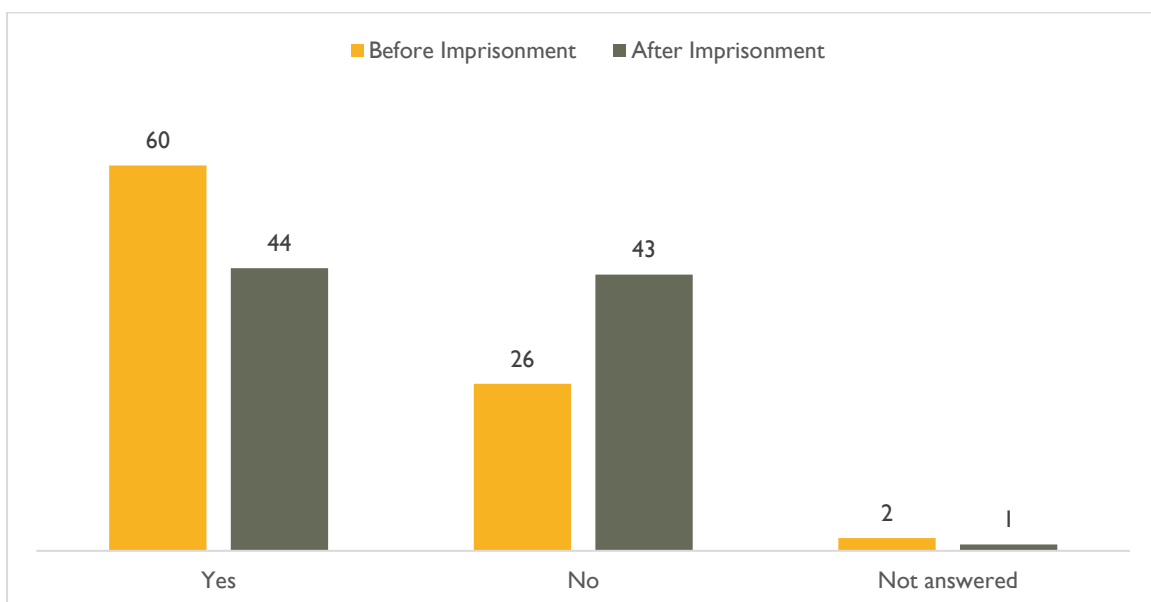


Figure 64: Adult self-reported ownership of a good pair of shoes for each household member pre and post caregiver imprisonment

Moreover, non-imprisoned adult caregivers were less likely to report that each member of the household owned or slept under a mosquito net after caregiver imprisonment ($Z=-3.051$; $p<.01$) (see Figure 65).

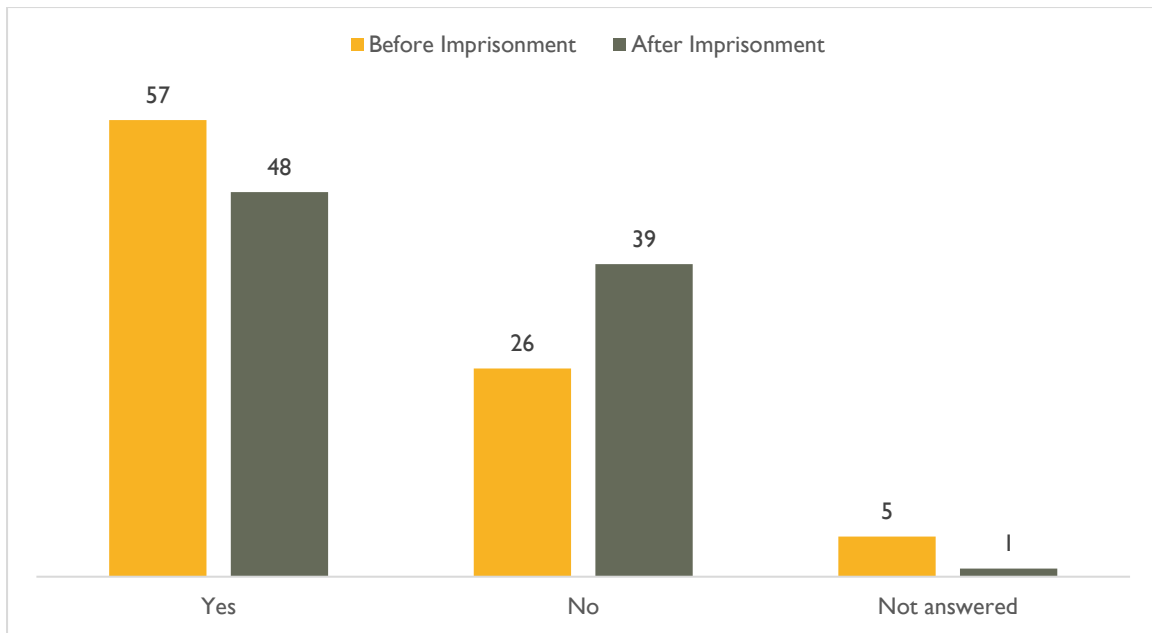


Figure 65: Extent to which adults self-reported each household owning or sleeping under a mosquito net pre and post caregiver imprisonment

Furthermore, non-imprisoned adult caregivers were less likely to report household ownership of a clock following the imprisonment of a caregiver ($Z=-2.887$; $p<.01$) (see Figure 66).

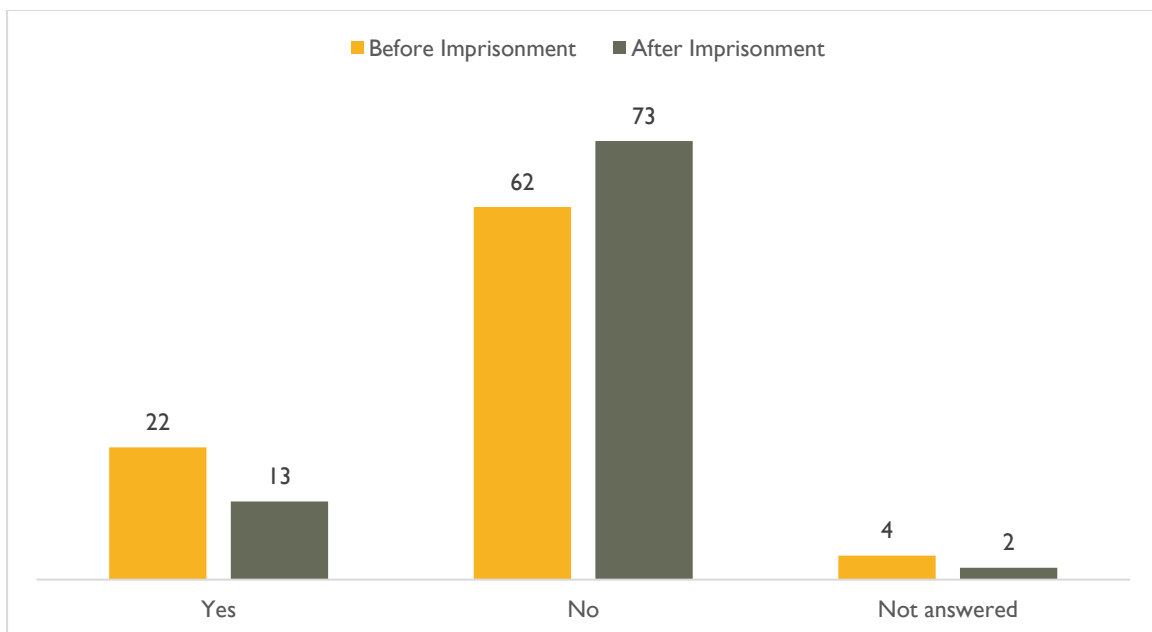


Figure 66: Adult self-reported household ownership of a clock pre and post caregiver imprisonment

However, no significant differences were observed pre and post caregiver imprisonment in the material used to construct the floor, roof or walls of the households of the non-imprisoned adult caregivers surveyed ($p>.05$) and no significant differences were found in the self-reported household ownership of a bicycle, motorcycle/scooter, animal to draw a cart, car/truck, boat or land following caregiver imprisonment ($p>.05$).

In the interviews, almost half of the children (7 out of 15) and nearly two thirds of the non-imprisoned adult caregivers (39 out of 61) gave accounts of how caregiver imprisonment affected them and their family financially and enhanced the deprivations they experienced. Time and time again, similar stories were heard with regards to how caregiver imprisonment worsened families' financial status, resulting in these families amassing more debts as they sought to survive during the imprisonment of their caregiver (see Figure 67). As their debts grew, the number of multiple deprivations families experienced soared as they attempted to sell their possessions to pay their debts, as well as reduce food, medical and educational expenditure. As it was mostly males who were imprisoned, and as these males predominately provided for the families affected, this meant that children and their non-imprisoned adult caregivers (mostly mothers) had lost important labour force to farm crops and money needed to travel to tend to their crops, resulting in their harvest being less plentiful than it would otherwise have been and less able to sustain families and their expenditure (see Figure 67). Accounts of how business income was lost due to the stigma associated with caregiver imprisonment and a lack of support from government and non-governmental organisations contributed to the increased deprivations families experienced were also heard (see Figure 67). In this way, poverty was exacerbated and children's long-term outcomes hampered by the negative effects of caregiver imprisonment and a lack of support provided by government and non-governmental organisations to assist these children and their families (see Figure 67).

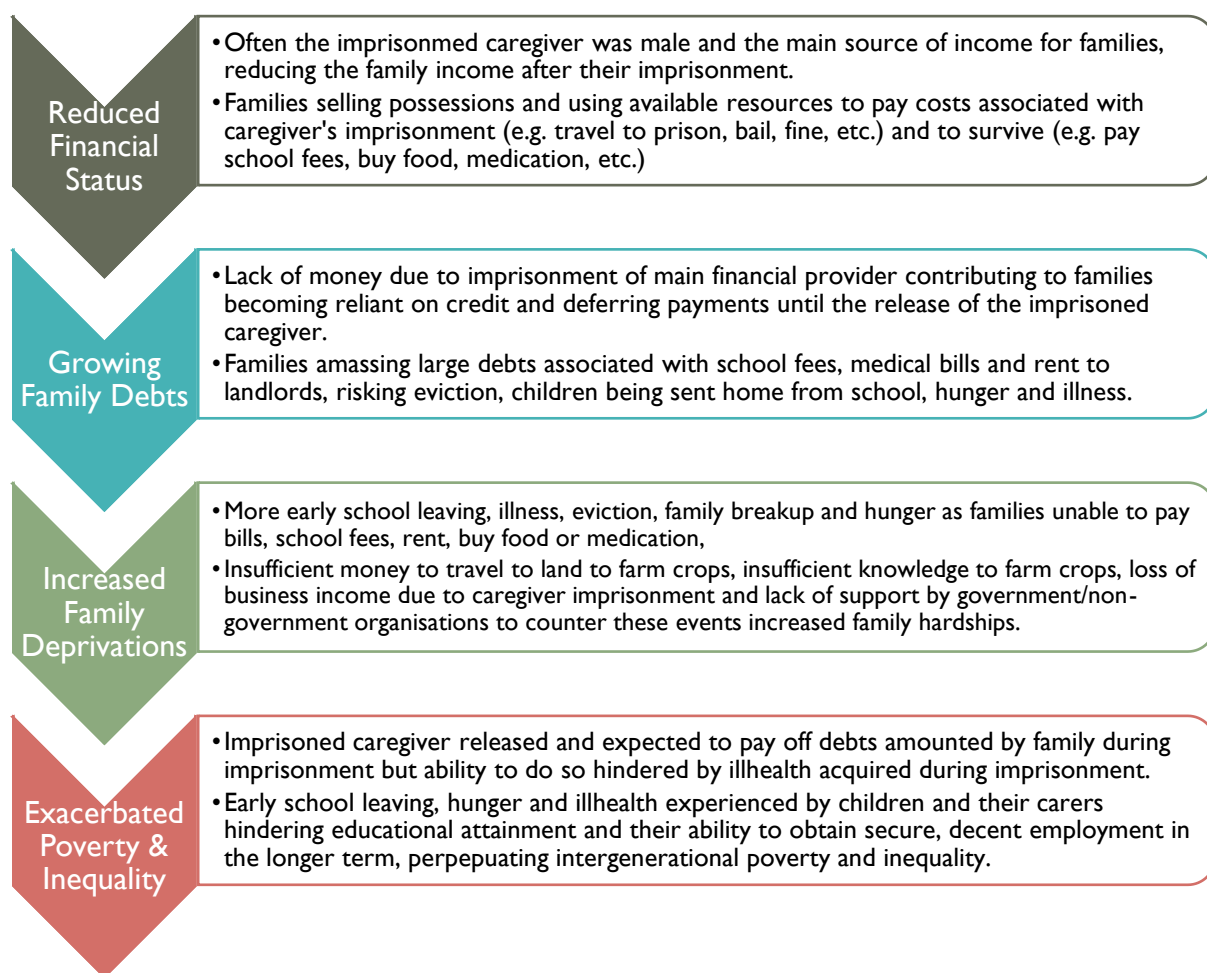


Figure 67: Pathway by which caregiver imprisonment can exacerbate child poverty

Examples of some of these stories heard during the research include:

“[After the imprisonment of children’s father] the family is living in poverty where food is not enough at all. I decided to resort to casual agriculture labourer but mostly in exchange for food. [...] [I] am burdened while looking for family survival. [...] I told the child that your father is in prison so no [school] fees and the child dropped out of school [...] [I] am not living in peace because my child dropped out of school because I do not have enough money for school fees, money to feed the family and also failed to get a garden to grow food. Generally I have no peace at all. [...] The family has no money at all, we are living in poverty.” (Participant 05 – Adult)

“His work was antagonised [after his imprisonment] [...] due to his image that was tainted. So everyone fears to come for service, calling him a thief and a fraudster.” (Participant 15 – Adult)

“I want to resume my saloon business but I don’t have capital. [...] He [police officer] advised me to get Shs.100,000 to bail my son out. [...] I came back and sold everything that was in the house, of course cheaply, and got my son out [...]. After coming out, they made him sick, he suffered a mysterious disease” (Participant 23 – Adult)

“It [imprisonment of father] affected them [children], reason being, by the time he came back from prison, for us, we didn’t know the market season for tomatoes and he found them already ripe, we didn’t know how to harvest them, spray them, look for market. The children did not have uniform, the uniforms were worn out, we had not paid even half of the fees and we had many debts because sometimes we borrowed to get food to eat. This boy fell sick and was so much affected. [...] He [imprisoned father] had planted watermelon but all his calculations failed, it did not grow big because we did not spray it because we didn’t know that they were also to be sprayed.” (Participant 27 – Adult)

“We have got a serious problem because I just try but I can’t, my children were in school but were sent [home] because of school fees [...] the two [children] are going to make a month without going to school and I don’t have anywhere to get money and pay their fees [...] because he [imprisoned father] is the one who used to provide for me. [...] Even yesterday the landlord came asking for the money and I told him I don’t have [it] and he told me to put the things out of the house and get somewhere else to live, he wants his house.” (Participant 40 – Adult)

Interviewer: Do you have some land to cultivate?

Child: Yes.

Interviewer: What do you plant there?

Child: Maize, cucumber, sukuma and eggplants.

Interviewer: They are for you to sell?

Child: Yes

Interviewer: Do you go there now to harvest now that daddy is in prison?

Child: No.

Interviewer: Why? Aren’t there crops to harvest?

Child: They are there but no money to reach there.” (Participant 71 – Child)

These stories demonstrate how the poverty children and families experienced worsened following the imprisonment of a caregiver. They also reinforce the findings in the previous chapter which highlight how caregiver imprisonment negatively impacted on child wellbeing, health and education. The lack of money that families had at their disposal meant that they were less able to take care of the health, educational and

dietary needs of their children and wider family, increasing their vulnerability to poverty and potentially decreasing their ability to successfully transition into secure employment in the longer term due to their poor educational attainment. Their reliance on credit and deferred payments also placed additional pressure on imprisoned caregivers to quickly begin to generate income upon their release from prison, which may be extra challenging given the stigma of being in prison and the possibility for the imprisoned caregiver's health to have been negatively affected while they were imprisoned, potentially reducing their capacity to work to earn an income upon their release.

Reference was also made to corruption within the criminal justice system and how the poorest are often the most likely to be imprisoned as they lacked the money needed for the payment of fines, bail and/or bribes:

“There is too much corruption everywhere, in police and too much in court. They are after money, you have the money then you win the case.” (Participant 23 – Adult)

“Because we are poor. [...] The lady [accuser] [...] got out a box of money she would then give out. She gets people and gives them money so they go and be witnesses against my husband, my brother-in-law and two other friends of my husband. [...] They imprison them. [...] The message goes to our Local Councils, which we have, [that] they side with the rich people to harass the poor ones. [...] We even went to the Chairman to ask [for] a bail letter for my husband but he refused, reason being the lady had given him money. This pains me a lot. [...] the person who has money is the one they go with, the poor ones have no say.” (Participant 30 – Adult)

“My father was imprisoned but he is innocent. [...] It is that thief [that is] to blame. He attempted to steal the motorbike. [...] I know it should have been some kind of bribe that led to my father's imprisonment.” (Participant 71 – Child)

A desire for the hearing of criminal justice cases to be speeded up, more alternative disposal mechanisms being available to the court other than fines or imprisonment (e.g. working to pay off the debt owed/repair the harm caused) being used and for a fairer, less corrupt criminal justice system were also expressed:

“The government should only put people in prison after they have gathered enough evidence [to prove the commission of a crime], putting them on remand for long [periods of] time puts their families in a hard time for survival” (Participant 07 – Adult)

“The government should bring justice within a short time and give punishment. [...] Like my wife has been in prison for five years but has never been in court.” (Participant 10 – Adult)

“What's on my heart is imprisoning a debtor when he has to work, I don't understand it very well. How then will he work when he is a prisoner? [...] They should, maybe say, he goes back home and they give him a period so we find a solution [something] like that.” (Participant 35 – Adult)

If the most deprived and marginalised individuals are more likely to be imprisoned and the impact of this imprisonment negatively affects child wellbeing, health, education and poverty, this can create intergenerational cycles of poverty, inequality, exclusion and marginalisation. This research demonstrates how caregiver imprisonment can significantly worsen children's poverty, health, education and wellbeing and contribute to negative child outcomes, such as greater exposure to illness, hunger, poverty, low educational attainment and early school leaving. These experiences may hamper the ability of these children to transition out of poverty and obtain secure, meaningful employment in the longer term. A perception of the criminal justice system as unfair, corrupt and inefficient may also contribute to those who are poorer

and more marginalised feeling disenfranchised from criminal justice agencies and turning to non-conventional means of obtaining justice, which may also contribute to a cycle of criminal activities such as 'mob justice' as an alternative to the criminal justice system. Moreover, the increase in poverty and deprivation that families experience after the imprisonment of a caregiver may hamper their ability to maintain contact, placing added stresses on family relationships and contributing to family relationships breaking down.

Maintaining Family Relationships

The vast majority of those interviewed reported that caregiver imprisonment negatively impacted on the ability of their family to maintain contact with each other. All of the children (15 out of 15) explained that since the imprisonment of their caregiver, they had rarely been able to visit their caregiver, mostly because their families were unable to afford the cost of transport to and from the prison:

“Interviewer: Do you know where your father is?”

Child: Yes.

Interviewer: Where is he?”

Child: In prison.

Interviewer: Have you ever visited him in prison?”

Child: No. but others have visited him.

Interviewer: Why?”

Child: Because I don't have money for transport.” (Participant 70 – Adult)

Similarly, over three quarters of the non-imprisoned adult caregivers interviewed (47 out of 61) explained that their ability to be able to maintain contact with the imprisoned caregiver had been impaired by poor family finances, due to the loss of the imprisoned caregiver's income. For the majority of these adults, the cost of transport to the prison restricted their ability to visit the imprisoned caregiver and to bring children to visit the imprisoned caregiver:

“Imprisonment did cut off our communication with him [imprisoned father], because the prison was very far in Kampala. [...] I was not able [to visit] since Kampala was very far, transport was too high. [...] If we had money [we] would have gone to check on him. [...] If there was free transport we would have taken them [children to see imprisoned father].” (Participant 01- Adult)

For a very small number of participants (6 out of 61), other reasons were given for the lack of contact between imprisoned caregivers and their children. These included that they did not know where the caregiver was imprisoned, believed they were not allowed to visit, feared the stigma associated with having a caregiver imprisoned or believed that bringing their children to the prison would result in their children being cursed:

“I didn't know where he [imprisoned father] was.” (Participant 19 – Adult)

“We have never gone there [prison]. [...] We were told that they [prison staff] cannot give him to us to see him. [...] I would like to go and see him. [...] They [children] also would like to go and see their father.” (Participant 34 – Adult)

“In prison, children are not allowed there [...] because they come back with bad luck from the prison. [...] Yes, people of long ago tell us [...] it follows them [when they visit prison]. [...] It’s bad, the child takes it upon him also [...] it’s a big curse.” (Participant 38 – Adult)

“You know how young children are difficult, they can go telling everyone ‘daddy is in prison, daddy is in prison’ so I feared telling them that.” (Participant 41 – Adult)

The lack of contact with imprisoned caregivers was thought to negatively impact on children’s wellbeing as children missed the love, affection and financial support provided by imprisoned caregivers. As was previously reported, all child interviewees (15 of 15) and almost half of non-imprisoned adult caregiver interviewees (30 of 61) stated that children missed the love, affection and support of their imprisoned caregivers (see Chapter 3). In their interviewees, some non-imprisoned adult caregivers (8 of 61) explained that the prolonged period of time that caregivers could spend separated from their children due to their imprisonment could result in relationship breakdown, as children began to forget about their imprisoned caregiver or began to resent them for the increased poverty and deprivation the family was experiencing because of their imprisonment:

“Too much time has passed, the children no longer remember him [imprisoned father]. He left them when they were very young.” (Participant 02 – Adult)

“The time they [children] took without seeing him resulted in them not recognising their father on his return. The young one would simply cry and the other would also not replicate the love when he calls him. The true love he had [for his father] before the imprisonment has not returned. It changed a bit. [...] I think that time he [father] took, the one month and some weeks when he was away [in prison]. They [children] also happened to have a scarcity of eats. Their father could bring them samosas and the like and he could also show them love. So they happened not to get that love in that one month and I think they also got frustrated. [...] You can also see that young one is just forcing the love.” (Participant 15 – Adult)

One child interviewee (out of 15) also described how their love towards their father had lessened since his imprisonment. However, the child was hopeful their love towards their father would return:

“Child: Our family was alright when he was around but when he went, things started going astray.

Interviewer: How about when he came back, was your love for him the same just as before?

Child: It reduced a little, but I know it will come back.” (Participant 65 – Child)

Relationships between partners could also become more strained as the non-imprisoned partner was left to assume sole responsibility for the children and often experienced additional stress, pressure, anxiety and worry as a result. Three quarters (46 of 61) of all the non-imprisoned adult caregivers interviewed for this research claimed that their health and wellbeing had suffered since the imprisonment of the children’s caregiver, as they were left to provide for the family and ensure their survival:

“It has affected me greatly, too, too much, with my children not attending school, then also me, I am really affected too much because everything is on standstill because him [imprisoned father] as a man would see how to handle everything for the survival of the family but now I am really affected, the children no longer get sugar, the children are falling sick. [...] It really became hard for me.” (Participant 17 – Adult)

“The difficult part when she left [mother was imprisoned] [...] the family issues became so difficult for me, cooking itself was not easy because these children are still young everything became difficult for me. When I am at work I divide my mind that I should also come for them, the same time

taking them to school and making them also something at least for them to eat. It was hard, hard time.” (Participant 46 – Adult)

In some cases, the stresses became too much and negatively impacted on the relationship between the imprisoned caregiver and their partner. Six (out of 61) non-imprisoned adult caregiver interviewees stated that their relationship with the children’s imprisoned caregiver had deteriorated due to their imprisonment and the additional stresses and strains they had experienced as a result of their imprisonment:

“He [imprisoned father] used to take care of his family by fulfilling his responsibility as a man. [...] [Since his imprisonment] Many children dropped out of school and food became a problem. I resorted to casual labourer in exchange for food. My love really reduced.” (Participant 06 – Adult)

“Me, as an adult, it brings me stress because every time you look at your child lacking something, you feel so sad and develop much hatred towards the man [imprisoned father], thinking that if he was not in prison all this would not have happened. [...] I don’t think everything will be back to normal [on his release]. [...] It will take some small time.” (Participant 18 – Adult)

Accounts of caregiver imprisonment contributing to family breakdown was also heard. Fifteen (out of 61) non-imprisoned adult caregiver interviewees and one (out of 15) child interviewee explained that their families had broken down because: the partner of the imprisoned caregiver had left the relationship; the partner had been unable to cope and had sent the children to live with different family members to spread the burden associated with providing for the children; or the partner had left the family home to find work in another area so as to be able to financial provide for the children:

“It [father’s imprisonment] disorganised us so much, the family separated. Some children went with their mother and others remained with me [their aunt]. [...] The family is apart, we are no longer together.” (Participant 11 – Adult)

“She [wife] was around but when she heard [father would be imprisoned for] 2 years, I think she got another man and ran away from here. [...] She left the child. [...] Now I took him to my mother’s place and I did not tell his father. [...] He even doesn’t know that the mother abandoned the child and ran away.” (Participant 23 – Adult)

“Now the wife, the wife was here at home and she sometimes come here to see the children and she helps us a bit with a few things [...] but it’s me who stays with the children. [...] Now when they imprisoned her husband, she went to look for money to be able to look after the home since the husband was imprisoned [...] but it’s not that they separated. [...] [She is] In Kampala [working].” (Participant 60 – Adult)

“I personally stay [...] at my grandmother’s. [...] We stopped [living together]. Mummy had lost a child and they took us.” (Participant 62 – Child)

The lack of available support for families was often cited as adding to the stresses experienced by families and contributing to family relationships becoming strained, harder to maintain and in some cases, breaking down.

Desire for Support

Only six (out of 61) non-imprisoned adult caregiver interviewees stated that they had ever received any assistance from a government or non-governmental organisation to help them cope with the negative effects of imprisonment on their family. This help generally took the form of counselling, sponsoring children’s school fees or providing small amounts of money to help the family buy food and other necessitates. In two cases, female adults reported being helped by local women’s groups:

“We, as women, we have those small organizations [...] sometimes they feel pity for me and contribute some money for me, when we meet, and they give me some support. [...] No [I receive no support from other organisations] apart from these women organizations which the President told us to form.” (Participant 43 – Adult)

“I had some women groups where I could get like Shs. 50,000 [...] for feeding and helping us at home.” (Participant 47 – Adult)

However, all adult and child interviewees expressed a desire for government or non-governmental organisations to provide support to help them cope with the challenges of having a caregiver in prison so as to lessen the negative impact of caregiver imprisonment on children and families. Exactly what support interviewees requested varied but, overwhelmingly, most interviewees requested financial assistance. Fifty-eight (out of 61) non-imprisoned adult caregiver interviewees requested financial assistance, as well as most child interviewees (12 of 15). In the majority of cases, interviewees were requesting assistance with buying food, medication, rent and school fees:

“Food and money for school fees, clothes, buying books, [...] sugar, meat, etc.” (Participant 02 - Adult)

“The children need clothes, feeding and [school] fees. [...] What is on my heart is that I want to help me and get for me the school fees for the children, food, paying the rent and maybe some money to buy medicine that’s what I want.” (Participant 37 – Adult)

Assistance with school fees was consistently requested by adults and children:

“If they help me with school fees I can handle other [things] slowly.” (Participant 28 – Adult)

“What I would see is the education, to help you with school fees. [...] Say the government [...] help you and pay for your school fees, when the child is in school. [...] Even if he studies for free. [...] It should be done that the children who are not with their parents say they [government] imprisoned them, they should then educate them or pay for their school fees.” (Participant 58 – Adult)

“Help for schooling.” (Participant 64 – Child)

“Paying for my school fees.” (Participant 68 – Child)

Both adults (39 of 61) and children (8 of 15) requested assistance from the government and non-governmental organisations to improve their diet and reduce feelings of hunger:

“The children should indeed be assisted. Because you see, some people are arrested when their wives are pregnant, sometimes the children are young. A child needs to take milk, he needs sugar. For example, the situation I have been in, children need sugar, they need milk but their father is not around [because he is in prison]. So at that point, I am the father and mother. [...] They should provide the children with eats and drinks. [...] Parents struggle with eats and drinks for children. [...] So, if there is an organisation that helps people like me, when my husband was imprisoned, they should give us eats and drinks.” (Participant 15 – Adult)

“I would like to request them [government and non-governmental organisations] to pay for us school fees, dressing us and food. With feeding, we are badly off.” (Participant 70 – Child)

In addition, adult (15 of 61) and child (4 of 15) interviewees requested assistance with obtaining adequate healthcare. Adults and children recognised that their health had worsened since their caregiver’s imprisonment and were requesting assistance with accessing medication and appropriate healthcare to help them overcome their illness:

“Health care services and mosquito nets for the children.” (Participant 07 – Adult)

“Medication for malaria.” (Participant 74 – Child)

A number of adult (13 of 61) and child (3 of 15) interviewees also requested help with getting their imprisoned caregiver released:

“I would personally say government or rather people that are, any organisation that can help people that are falsely imprisoned. There are people that are falsely imprisoned. They should help, people are in prisons suffering.” (Participant 15 – Adult)

“To release daddy from prison so that our family becomes happy again.” (Participant 69 – Child)

Moreover, concern about their living arrangements led two (out of 15) child interviewees and 12 (out of 61) adult interviews to request assistance with providing stable accommodation:

“I think they should be assisted in such a situation when they [...] rent. [...] because it can incidentally happen that the landlord is also an impatient one and he throws the person’s property out of the house. [...] You end up homeless.” (Participant 61 – Adult)

“Education, something to eat and house rent.” (Participant 72 – Child)

Lastly, social support was requested by both adult (10 of 61) and child (3 of 15) interviewees, as they spoke of their desire for counselling and to feel supported by their local community, government and non-governmental organisations:

“Neighbours should come together to help prisoners out of prison and also support their families.” (Participant 08 – Adult)

“Guidance and counselling to reduce on their stress caused by their bread winner being in prison.” (Participant 09 – Adult)

“To be helped.” (Participant 67 – Child)

Summary

Based on these findings, primary caregiver imprisonment exacerbated poverty and inequality, as well as placed additional stress on family relationships, contributing to family breakdown. Children and families experience more deprivations after the imprisonment of their caregiver compared to before their imprisonment. After caregiver imprisonment, they reported being significantly less likely to: have a second school uniform; own a pair of good shoes; own two sets of good clothes; own a pair of bed sheets; have their own separate bed; have their own separate blanket; own a clock; sleep under a mosquito net; own a sofa; have access to a mobile telephone, radio, television, scholastic materials or electricity. Their access to sanitation and water also changed and it took significantly longer for families to fetch water after the imprisonment of their caregiver compared to before their imprisonment. Accordingly, caregiver imprisonment was found to exacerbate child poverty, worsening both the amount and severity of deprivations that children and their families experienced. The fact that two thirds of children reported being deprived on two, three or four of the poverty indicators prior to caregiver imprisonment but reported being deprived on six or more of these indicators after caregiver imprisonments demonstrates how caregiver imprisonment worsened poverty. Poorer families were believed to be more likely to be imprisoned due to their inability to pay fines, bail and/or bribes needed for the release of their caregiver. During the imprisonment of their caregiver, they tended to rely on credit and/or the goodwill of others for their survival, often amassing more debts which required them to sell what possessions they owned to survive, as well as seek to reduce their food, medical and school expenditure. As a result, accounts of early school leaving, children being sent home from school for the no-payment of school fees, an inability to pay rent and/or medical bills, as well as increased illness were common. Caregiver imprisonment worsened

children's and families' experiences of poverty and deprivation, negatively impacting on child wellbeing, health and education. These experiences imply that in the longer term, primary caregiver imprisonment may hinder the ability of these children to transition into secure, meaningful employment that will lift them and their families out of poverty. In this way, primary caregiver imprisonment may reproduce and reinforce intergenerational cycles of poverty, inequality, hunger and poor educational attainment. The increased poverty children and families experienced after caregiver imprisonment was also problematic as it lessened the ability of these families to be able to maintain contact as they could no longer afford to visit their caregiver in prison. In addition, it placed added stresses and strains on the non-imprisoned adult caregiver, which could weaken their relationship with the imprisoned caregiver, potentially leading to family breakdown. Families were also broken up as non-imprisoned caregivers were unable to cope and sought the assistance of family and friends to help provide for their children, resulting in the family and children being separated from each other as children were sent to live with relatives, often in rural locations. Moreover, the lack of support provided to families affected by caregiver imprisonment was believed to contribute to family relationships becoming more strained and sometimes fracturing. Perhaps, unsurprisingly, most adults and children desired financial assistance to help them cope with the negative effects of primary caregiver imprisonment, especially regarding the payment of school fees. They also sought assistance with food, medication, accommodation, social support and the release of their caregiver from prison. Non-imprisoned adult caregivers and children felt that the criminal justice system was unfair, corrupt and inefficient, indicating that these groups may not have confidence in the criminal justice system or view criminal justice professionals as fair, legitimate authority figures, potentially increasing the use of alternative forms of justice such as 'mob justice'. Consequently, these experiences suggest that how the criminal justice system operates is not only important for the achievement of economic and social development by encouraging investment in a country but it can also affect the achievement of SDGs by reproducing and exacerbating inequality, poverty, hunger, poor educational attainment and reduced wellbeing, as well as lessening public confidence and legitimacy in the legal system.

Chapter 5: Conclusion

The findings from this research, therefore, demonstrate that primary caregiver imprisonment can have a significant impact on child and family outcomes in low and middle income countries. Using Uganda as an in-depth case study, this research found that primary caregiver imprisonment negatively impacted on child wellbeing, health and education. In cases of child abuse, it was possible that child wellbeing could improve after the imprisonment of a caregiver, but the vast majority of adults and children in this study reported that the child wellbeing decreased following primary caregiver imprisonment. In particular, children reported more sadness, restlessness, anger, loneliness, worry, fear, distractedness and being accused of lying or cheating (i.e. being stigmatised) after the imprisonment of their caregiver. Child health also worsened following primary caregiver imprisonment, with children reporting more illness and families having less money available to pay to travel to healthcare facilities, access medical services or buy medication. A decrease in child and family nutrition after caregiver imprisonment was believed to negatively impact on the health of children and their families as the quantity and quality of food available decreased following primary caregiver imprisonment. This reduction in their diet increased hunger, enhancing child and family susceptibility to illness and weakened the ability of children and non-imprisoned caregivers to concentrate at school and undertake work and/or chores. In addition, child educational outcomes suffered as primary caregiver imprisonment hindered the ability of families to pay school fees, resulting in children frequently being sent home from class and restricting the ability of these children to complete their schooling and obtain educational qualifications. More children left school early after the imprisonment of their primary caregiver and for most, their educational performance, school attendance and feelings of safety at school worsened following caregiver imprisonment.

Moreover, the experience of poverty for children and families increased following the imprisonment of a primary caregiver. The amount and severity of deprivations that children and families experienced grew substantially following the imprisonment of a caregiver, with children and families reporting significantly less possessions, clothing, shoes, access to information, mosquito nets, electricity and longer journeys to fetch water. Many families were reliant on the goodwill of others to help them survive, as well as accessing credit and deferring payments for goods and services. Accessing credit and deferring payments put added pressure on family relationships and this approach to survival was dependent on imprisoned caregivers being able to repay the debts amassed by their families on their release. If imprisoned caregivers returned home from prison ill or were detained on custodial remand for long periods of time, this could hinder their ability to pay these debts and plunge families back into poverty/further poverty, as well as result in this family becoming homeless. When non-imprisoned caregivers struggled to cope, they often sent their children to live with relatives in rural locations but this broke up families and placed added strain on rural households as they attempted to cope with the additional costs of feeding, clothing and schooling these children, enhancing the risk of these families experiencing further poverty as well. Furthermore, children could not afford to visit their caregiver during their imprisonment and relationships between caregivers became fraught due to the pressure the non-imprisoned adult caregiver was under to provide for the family. Consequently, primary caregiver imprisonment increased child poverty and placed added stresses and strains on family relationships, contributing to family relationship breakdown. These findings also indicate that primary caregiver imprisonment was exacerbating poverty and inequality as corruption, use of fines, high use of custodial remand and long periods of time spent on custodial remand tended to have a more negative impact on poorer families and their children. Poorer families and their children were more likely to lack the funds and resources needed to help avoid the initial imprisonment of their caregiver, secure the release of their caregiver or cushion the negative impact primary caregiver imprisonment may have on child

and family outcomes. Additionally, it is highly likely that the negative impact primary caregiver imprisonment had on child health, wellbeing, education and poverty may have a long term impact on the outcomes of these children as adults, affecting their ability to find secure, meaningful employment as adults, escape poverty and avoid being involved in the criminal justice system. In this way, criminal justice policies and the use of imprisonment may perpetuate and exacerbate intergenerational cycles of poverty and inequality, as well as affect a number of Uganda's SDGs.

Impact on Sustainable Development Goals

These findings indicate that primary caregiver imprisonment impacts on the achievement of Uganda's SDGs in a number of ways. Firstly, the findings demonstrate how the criminal justice policies being pursued can hinder the SDGs of no poverty and zero hunger. Government efforts to reduce poverty and eliminate hunger can be undermined by criminal justice policies which unnecessarily imprison people and expose their families to an increased risk of severe deprivation, poverty and hunger. In this way, some government departments may be working hard to tackle poverty and hunger, while other government departments may be unintentionally operating in a manner that increases the risk of poverty and hunger. A review of the United Nations (2015b) Millennium Development Goals found that, despite significant advancements being made, often the poorest and most disadvantaged in society were left behind and did not benefit from progress because of a failure to think through how the multiple social, economic and spatial inequalities people experienced impacted on their ability to access services. This finding led to greater calls to understand how the multiple inequalities people experience can impact on the achievement of SDGs (United Nations 2015a, 2015b). The Government of Uganda has acknowledged that the achievement of the SDGs in Uganda requires a more holistic approach to the planning, delivery and monitoring of interventions and programmes which can take account of how intersecting inequalities may enhance vulnerability to the issues focused on the SDGs (Government of Uganda, 2016). However, the Government of Uganda has also acknowledged that collaboration across different departments and sectors remains weak, as well as multi-sectoral implementation, planning and coordination. The findings from this research indicate that reviewing criminal justice policies and practices to avoid the unnecessary use of imprisonment, as well as speeding up the processing of cases through the courts, may help to reduce poverty, hunger and lessen the potential for families to slide back into poverty, hunger and severe deprivation. Primary caregiver imprisonment should, therefore, be recognised as one of the potential causes of child poverty and hunger, alongside parental divorce and/or parental death.

Secondly, primary caregiver imprisonment can hamper the achievement of the SDGs of good health, wellbeing, quality education, decent work and economic growth. The financial strain families experience as a result of the loss of income provided by their imprisoned caregiver affected their ability to access healthcare and education. Even if free government facilities were available, a lack of resources meant that these families were unable to afford the cost of travelling to these facilities or buying the required medication or associated scholastic materials. Many of the families and children who participated in this research reported that they were just about managing to cope with the cost of medication, school fees and other associated costs prior to their caregiver's imprisonment but that the loss of the primary caregiver's income meant that they were now struggling to meet these costs, with the result that children and families were experiencing more ill health, school absences and early school leaving. Given the links between educational attainment and the successful transition of young people into decent, secure and meaningful work (Uganda Bureau of Statistics, 2015), these findings suggest that the children of imprisoned caregivers may struggle to find decent work, contributing to a cycle of intergenerational poverty, inequality and

insecure employment. In addition, these events hinder economic growth more broadly as young people leave school early, lacking the skills needed to grow the economy and increase productivity and efficiency. The Government of Uganda has previously stated that a key concern for the government is the failure to match the skills needed in the economy to those young people possess (Republic of Uganda 2007). Accordingly, as before, a failure to think through how criminal justice policies, and in particular the use of imprisonment, may be unintentionally worsening the intersecting inequalities families and children experience may be hampering the achievement of the SDGs of good health, wellbeing, quality education, decent work and economic growth.

Thirdly, recognising the impact that primary caregiver imprisonment, as well as the operation of the criminal justice system more generally, can have on perpetuating and exacerbating poverty, deprivation, hunger, access to education and employment, is important if the SDG of reduced inequalities is to be achieved. Globally there is a concern that those who are the poorest and most marginalised in society are overrepresented in prison populations and are the most likely to experience worse outcomes in the criminal justice system (e.g. Wacquant 2001, 2009; Penal Reform International 2017; Prison Reform Trust 2017). The findings from this study clearly demonstrate that primary caregiver imprisonment can also worsen child and family outcomes as well, significantly enhancing their experience of poverty, deprivation, hunger, ill health and poor educational attainment. As a result, the children and families of those imprisonment may become even more poorer and marginalised, contributing to a greater inequalities in a society as a portion of the population continue to be 'chronically poor' due to the intergenerational cycles of poverty, hunger and poor educational attainment they experience. The potential for the criminal justice system to contribute to inequalities in society is worsened when corruption can thwart the delivery of a fair justice system and undermine public confidence and legitimacy in the legal system. Similarly, a reliance on the use of fines to avoid imprisonment will disadvantage poorer and more marginalised groups as they lack the resources to pay fines, resulting in their imprisonment due to their inability to raise the capital needed for their release rather than the risk they pose to society. The imprisonment of these individuals also places added strain on the prison system as the Uganda Prisons Service is overcrowded and struggling to cope with the cost of detaining individuals in its limited budget (Foundation for Human Rights Initiative, 2015a; Office of the Auditor General Uganda, 2016; Uganda Bureau of Statistics, 2017; Uganda Prisons Service, 2017). Reducing the prison population would enable the Uganda Prisons Service to use its available resources to further improve prison conditions, sanitation, healthcare and the availability of rehabilitation programmes. In turn, these developments would help to ensure that those in prison are released in good health, so that they can work to repay the debts amassed by their families during their imprisonment, as well as reduce the potential for reoffending through the provision of appropriate rehabilitation programmes. Based on these findings, reviewing the use of imprisonment, alternatives to imprisonment, the use of fines, the use of custodial remand, as well as tackling corruption, are important tools that the Government of Uganda can use to achieve the SDGs of reducing inequalities and promoting a just, peaceful and inclusive society that has strong, accountable justice institutions.

Fourthly, these findings also offer insights into how the SDGs of responsible consumption and production, as well as a sustainable life on land could be achieved. The Government of Uganda has previously raised concerns that the agricultural and forestry sector has not been as effective, productive or sustainable as it could be (Republic of Uganda, 2015). In particular, concern has been expressed that existing practices are contributing to deforestation and ecosystem degradation, which is resulting in the unsustainable use of resources (Republic of Uganda, 2015). This is especially concerning given that the agricultural and forestry sector employs 72% of all working age people in Uganda and that this sector is viewed as the backbone of the Ugandan economy (Republic of Uganda, 2015; Uganda Bureau of Statistics, 2017). Youths in rural

locations, those with lower levels of education and females are more likely to work in the agricultural and forestry sector but these groups tend to be less well paid than others and households headed by females and/or youths tend to be less productive than male headed households or jointly run households (Republic of Uganda, 2015). The findings from this research offer some insights into why this may be the case. The findings indicate that some women and young people lack the knowledge and resources required to properly farm their lands. The male primary caregivers often assumed responsibility for managing the land and selling the crops which meant that some of the women and children did not know how to manage the land to maximise its productivity or sell the crops to ensure a substantial return on their harvest. This hampered productivity and, as a result, added to the vulnerability of these families to experiencing more severe deprivations, poverty, ill health and hunger. In some cases, the women and children may have had some knowledge of how to manage and sell their crops but lacked the resources they needed to either travel to their land to manage their crops, harvest them or sell their produce due to their reduced financial status as a result of their primary caregiver's imprisonment. In both cases, the end result was the same as land was not being used in a productive manner and families were at a greater risk of experiencing poverty, deprivation, hunger and ill health. Moreover, as the children of these families were at an increased risk of leaving school early and obtaining poorer educational qualifications due to their caregiver's imprisonment, it reduced their potential exposure to educational opportunities that may enhance their knowledge of how to farm in a more productive, sustainable manner. Consequently, providing supports and programmes that work with these families to help teach them how to maximise their resources, as well as enhance the productivity and sustainability of their business/farm may lessen the negative impact of primary caregiver imprisonment, as well as help achieve the SDGs of responsible consumption production, consumption and the sustainable use of land.

Uganda is therefore similar to other international jurisdictions that have found that primary caregiver imprisonment can have a negative impact on child and family outcomes (Flynn & Eriksson, 2015; Foster & Hagan, 2009; Hagan & Foster, 2012; Murray, 2005; Murray & Farrington, 2008a, 2008b; Wakefield & Wildeman, 2011; Wideman, 2009). Similar to high income countries, this research revealed that the imprisonment of primary caregivers can have a negative impact on the health, wellbeing, education and financial status of families and children. Studies in high income countries have demonstrated how primary caregiver imprisonment can place additional stresses and strains on family relationships, contribute to family breakdown and lead non-imprisoned caregivers to seek financial assistance and support from family, friends, government and non-governmental organisations (Carlson & Cervera, 1992; Clear, 2007; Geller et al., 2011; Gleeson et al., 2009; Green et al., 2006; Huebner, 2005; Murray, 2005; Tasc et al., 2011; Turanovic et al. 2012). Likewise, studies in high income countries have found that primary caregiver imprisonment can impede the performance of children at school and their educational attainment (Hagan & Foster, 2012; Murray, 2005). However, the availability of range of social welfare services and supports, as well as free public education and healthcare services in most (though not all) high income countries appear to lessen the magnitude of the impact of primary caregiver imprisonment (Besemer et al., 2011; Murray et al. 2007). While primary caregiver imprisonment in Uganda was found to have a similar negative effect on child wellbeing, health, education and family finances as in high income countries, the more limited availability of social welfare and supports services, as well as free public education and healthcare, seemed to result in primary caregiver imprisonment having a bigger impact on child health, education and poverty than is normally witnessed in high income countries. This suggests that there is a need to try to minimise the unnecessary use of imprisonment and provide services and supports to families affected by primary caregiver imprisonment to minimise its negative impact on child wellbeing, health, education and poverty, as well as facilitate the achievement of SDGs.

Possible Next Steps

Based on these findings, there are a number of possible next steps that could be taken to address the issues raised in this report and facilitate the achievement of Uganda's SDGs. These include:

- Officially recognising the role primary caregiver imprisonment can play in causing child poverty, as well as the impact it can have on the achievement of SDGs, such as no poverty, zero hunger, good health and wellbeing, quality education, decent work and economic growth, reduced inequalities, life on land and peace, justice and strong institutions.
- Tackling corruption to ensure that those who are poorer are not disadvantaged in their dealings with the legal system or criminal justice officials.
- Employing more Judges to ensure that criminal cases are dealt with more efficiently, reducing the long periods of time caregivers can spend on custodial remand, lessening the negative impact of imprisonment on children and families, as well as improving conditions in the Uganda Prisons Service by easing overcrowding and its associated consequences.
- Avoiding the use of custodial remand where possible so that only those who pose a serious, violent risk to society are imprisoned.
- Increasing the use of alternative disposals mechanisms other than fines and imprisonment (e.g. community service, reparation, etc.) available to the court to ensure that the harm caused by offending can be addressed, while minimising the unnecessary use of imprisonment and its potential to contribute to intergenerational poverty and inequality.
- Mobilising public, private and international resources to assist children affected by primary caregiver imprisonment (as well as children affected by other intersecting inequalities) to remain in school, enhancing their educational attainment, employment prospects and potential to become future productive workers.
- Developing schemes that will work with families to help them maximise their resources, as well as enhance the productivity and sustainability of their farm/business, so as to try to lessen the potential negative impact primary caregiver imprisonment can have on family finances.
- Providing appropriate healthcare and rehabilitative programmes in prison which will give the imprisoned caregivers the skills they need to help tackle the debts their families have amassed and are expected to pay back upon their release.
- Cooperating with non-governmental organisations to provide support to children and families affected by primary caregiver imprisonment, so as to lessen the negative impact of caregiver imprisonment on child and family outcomes.
- Requiring policymakers to reflect on how policies may exacerbate poverty and inequality by insisting that an equality impact assessment is included when new policies are being developed, which will examine the potential impact of new policy on vulnerable and marginalised groups, as well as the SDGs.

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