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Article title: A father in prison is still a father: Paternal Imprisonment and Infant Mental Health

Abstract

Recent evidence suggests that school nurses are best placed to raise awareness and support families affected by paternal imprisonment. Less emphasis has been placed on health visitor practice in working with and supporting families with children under the age of five involved in the criminal justice system and yet professionals working in the area offer a potential in addressing the needs of these families.

Through presenting findings from a review of the literature undertaken to explore the impact of father imprisonment on infant mental health, this paper seeks to discuss emerging findings from the current evidence-base.

Introduction

While prisoners' children are by no means a homogenous group (Barnados, 2013), evidence clearly demonstrates that the impact of parental incarceration is detrimental to children in many ways (Hagan & Dinovitzer, 1999). Regarded as a 'hidden population', approximately 200,000 children have a parent in prison in England and Wales (Williams et al. 2012) and inequalities in terms of health and social outcomes are often more pronounced in this groups than others.

There has been a strong discourse from governmental levels about the importance of preserving and maintaining family ties. Government reform designed to 'transform rehabilitation' places emphasis on the role of family support in custody, with the role of improving family links seen as a critical pathway to ensuring that prisoners reintegrate more successfully in the community after their period of imprisonment (Ministry of Justice, 2013). The importance placed on regular face-to-face visits by policymakers is not misguided; evidence is accumulating which shows a number of positive effects resulting from regular prison visitation, including reduced depressive symptoms in women and adolescent prisoners and evidence that visits creates a less fractious prison environment (De Claire and Dixon, 2015). The discourse on maintaining ties has had an overwhelming emphasis on how maintaining contact with families and children is *good* for the prisoner with very little emphasis placed on what effect contact with parents in prison has on the child. In this regard, this brief paper seeks to raise awareness of these issues and suggest implications for health visitor practice.

The (hidden) scale of the issue

The prison population has increased substantially across the UK (Walmsley 2013) and it would be reasonable to assume that this means the potential for more prisoners' families, particularly children, to be affected. There has recently been a demographic transition, however, whereby older prisoners (60 years and over) are the fastest growing sub-section of the population. As a stark illustration, the number of older prisoners increased by more than 300% in England and Wales (Prison Reform Trust 2015). This may mean that the numbers of younger children and infants affected by parental imprisonment is decreasing. Nevertheless, there are substantial challenges in verifying this assumption as prisoners' parental status are not recorded on reception into the prison (Arditti et al, 2005; Clarke et al, 2005, Glover, 2009; Rosenberg, 2009; Raeder, 2012). Identifying the number of fathers in prison is methodologically complex, often relying on self-reported data.

Nevertheless research suggests that 54% of prisoners have a child under the age of 18 at the time they entered prison (Williams et al. 2012). The limited accuracy in ascertaining this data is that the likelihood of non-disclosure is high as prisoner's can fear a negative outcome for their child (i.e. the child being taken into care). This inevitably leads to a hidden population of infants and children who become invisible to services that could support them (Boswell, 2002; Mazza, 2002; Prinsloo, 2007; Glover, 2009; Rosenberg, 2009; Social Care Institute for Excellence, 2009; Losel et al, 2012; Raeder, 2012; Jones et al, 2013).

The Healthy Child Programme (Department of Health (DoH), 2009) actively encourages father involvement and participation within its recommendations for practice. It also highlights how both maternity and child services are used to working mainly with women, and how, by consequence, this influences both father engagement and involvement. The Healthy Child Programme (DoH, 2009) addresses this by acknowledging that services do not do enough to recognize or support fathers in service delivery and outcomes, recommending that fathers should be offered their own needs assessment. However, it disregards the needs of fathers who wish to be involved but are absent through circumstance and does not offer guidance to delivering a service in this situation.

What makes a 'good' father?

Whilst there is no definitive theory of fatherhood (Palkovitz, 1997; Bronte-Tinkew et al, 2006), various authors have strived to define the value of 'The Father' by exploring differing types of father involvement. Missing from the discourse has been theoretical literature relating to fathering in prison, although studies do make the case that fatherhood can be a 'turning point' (Edin et al., 2006) which provides a compelling motive to make choices which are conducive for health, long-term rehabilitation and stability.

An understanding of the role of the father is important; the way a father understands and is able to organise their role affects the nature of father-infant interactions and can ultimately have consequences for child development (Bronte-Tinkew et al, 2006). Research shows that a father's behaviour, beliefs and aspirations can profoundly influence the health and wellbeing of both mother and child in positive and negative ways (Department of Health, 2009), with suggestion that own fathering experience also influences roles and perceptions (Corcoran, 2005; Bronte-Tinkew et al, 2006; Hauari and Hollingsworth, 2007; Dick, 2011; Purvis, 2013).

Whilst research suggests that certain roles, for example, financial provider, protector and disciplinarian, are seen as predominantly male (Boswell, 2002; Bronte-Tinkew et al, 2006; Maldonado, 2006; Wilson & Prior, 2011), more recently, men have reported feeling that their role is far more encompassing. In a move away from more 'traditional roles' within a family, fathers are assuming a more egalitarian partnership, combining approachability and nurturing with economic support (Hauari and Hollingsworth, 2009). In recognizing this, father involvement becomes an evolving concept. Overall, the literature supports the view that in order to ensure optimal child development and reduce the risks of emotional problems and incidences of anti-social behavior, a balance of quality and quantity father involvement is required (Maldonado, 2006, Flouri, 2008; Willerton et al, 2011; Brown et al, 2012; Lee et al, 2012; WAVE Trust, 2013).

What does this mean for the father in prison?

The prison environment itself brings its own challenges for fathering. The very nature of imprisonment means the father is obviously less involved in physical nurturing and care giving activities (Bronte-Tinkew et al, 2006); a prison sentence does not provide a hiatus from parenting, roles and responsibilities continue, and certain expectations remain.

'Prisonisation' (Clarke et al, 2005; Maldonado, 2006; Prinsloo, 2007; Rosenberg, 2009) is a term used to demonstrate how the experience of the prison environment influences the identity of the male prisoner and how they will ultimately reflect the norms and values of the institution. Many fathers who were actively involved with their children pre-prison find themselves so overwhelmed by their situation they would rather choose to discontinue contact with family than continue in a relationship (Rosenberg, 2009; Purvis, 2011).

Feelings of guilt, grief and helplessness are common for many (Arditti et al, 2005); there is often an internal struggle to maintain feelings of being a 'good father' (Clarke et al, 2005; Prinsloo, 2007; Rosenberg, 2009; Purvis, 2011; Secret, 2012). These feelings of powerlessness have the potential to contribute towards discouraging father involvement in other areas.

However, Palkovitz (1997) and Willerton et al (2011) highlight how father roles continue to occupy the mind even when the child is absent; numerous, immeasurable aspects of involvement require emotional or affective energy or investment, therefore, whilst significantly less involved in nurturing and care giving activities, father involvement for male prisoners can be maintained through thoughts and feelings.

Where conducive, maintaining father involvement and family relationships during imprisonment is beneficial to both parties (Pugh, 2004; Glover, 2009; Purvis, 2011; Dixey and Woodall, 2012). Imprisonment can also offer fathers a chance for self-reflection, creating a positive opportunity to re-evaluate and re-appraise their criminal lifestyle and family relationships, becoming a catalyst for creating new, positive, father interventions (Clarke et al, 2005; Rosenberg, 2009; Purvis, 2011; McShane, 2012). Notwithstanding this, an important distinction is between prisoners that

identify themselves as 'fathers' and prisoners that may have fathered a child. For this latter group, fatherhood is frequently not significant enough to alter individuals' self-identity or a catalyst for behaviour change (Woodall, 2010).

What does having a father in prison mean for the child?

The majority of the literature studying the emotional impact of imprisonment on a child is grounded in the study of the effects of prisoners serving long-term sentences in maximum-security prisons (Clarke, 2005; Prinsloo, 2007; Rosenberg, 2009; Secret, 2012); there is a lack of evidence comparing the attachment relationships between infants and fathers placed in different categories of prison. It is therefore difficult to ascertain from the literature the full impact of repeated arrests and consequently, repeated separations on infant mental health (Rosenberg, 2009).

The infrequent and unpredictable presence in the infants life of a father involved in the criminal justice system suggests the onset of inevitable ambivalence towards him (Balbernie, 2003; Tyano et al, 2010). However, evidence implies that it is the style of attachment relationship preceding or surrounding the period of separation that ultimately determines the emotional state and resilience of the infant (Pugh, 2004; Murray and Farrington, 2008). This suggests why family-centred and family-friendly policies in prison to maintain family connections is so important to preserve this resilience (Woodall et al., 2014).

A wealth of literature supports the impact that emotional ambivalence can have on infant development (Prinsloo, 2007; Glover, 2009; Jones et al, 2013). Evidence demonstrates the influence of imprisonment on developmental stages and milestones, ultimately resulting in maladaptive behaviour patterns, with boys' externalizing their problems and frustrations through anger, fighting, and behavioural disorders (Murray and Farrington, 2008; Glover, 2009; Geller et al, 2011). Girls have more of a tendency to internalize their issues by withdrawing, isolating themselves or developing psychosomatic disorders (Glover, 2009; Jones et al, 2013).

The health visitor role

Overall, there is a lack of evidence to support health visitor practice in the context of working with families in the criminal justice system and this paper serves to highlight this under-reported area of practice.

Identifying those affected at the earliest opportunity enables implementation of early intervention strategies for those considered to be in need. Children are at risk of becoming victims of a lack of mainstream provision, unrecognised as a distinct group and often falling between the guidelines of various departments, such as health, the justice system and social care (Murray, 2007; Murray and Murray, 2010).

Intensive, evidence based programmes of health visitor support are already accepted and used within practice, with one such example being the Family Nurse Partnership (Family Nurse Partnership (FNP), 2015). This model offers a sustained programme of intensive health visiting support for vulnerable, first time young parents, underpinned by robust evidence to demonstrate improved health, social and educational outcomes in the short, medium and long term (FNP, 2015). Further research to assess and establish the effects that intensive family support has on paternal imprisonment, the mediating factors on the mother (Makariev and Shaver, 2010; Jones et al, 2013), and the investigation into the correlations between mother support and resilience development in the infant may influence the provision of support offered by society, family and health care professionals.

Applying a similar strategy of intensive early intervention in working with families within the criminal justice system would be an essential preventative service. In choosing to address this issue, the implications for practice are multifold; ignoring it also brings its own consequences. In addressing it, health visitors have the opportunity to reduce the number of referrals to Child and Adolescent Mental Health Services, the criminal justice system and adult mental health services, further reducing the drain on adult services in the future (WAVE Trust, 2013). The expenses incurred by choosing not to intervene are both direct and indirect; continuing increases in anti-social behaviour, mental ill health and inter-generational crime and insecurity are all long-term consequences.

Conclusion

Evidence suggests that children and infants of parents who are imprisoned have disproportionate amounts of health and social need – this is often compounded by this population being ‘hidden’ from mainstream services and support. This brief paper has sought to highlight the issues that occur as a result of parental incarceration and suggests that fathering from inside poses both explicit and implicit challenges. Health Visitors have a key role to play in supporting children and families effected by imprisonment and yet current services and policies are not designed to cater for these groups. Future attention should be given to reconfiguring Health Visitor policy and practice to ensure that children who have a parent in prison are adequately supported.

Key Points

- The number of children affected by paternal imprisonment is an unknown quantity, leading to a ‘hidden’ population at risk of becoming ‘invisible’ to services.
- Evidence implies the style of attachment relationship preceding or surrounding the period of separation ultimately determines the emotional state and resilience of the infant
- Identifying those affected at the earliest opportunity enables implementation of early intervention strategies for those considered to be in need.
- Where conducive, maintaining father involvement and family relationships during imprisonment is beneficial to both parties.

MeSH Terms: Prisons, Family, Parent-Child Relations, Paternal Behavior, Infant, Fathers

References

- Arditti, J; Smock, S and Parkman, T. (2005) "It's Been Hard to Be a Father": A Qualitative Exploration of Incarcerated Fatherhood. *Fathering* **3** (3), Fall, 267-288.
- Balbernie, R (2003) Law and Child Development. *Family Law*. **33**, July, 508-512.
- Boswell, G. (2002) Imprisoned Fathers: the children's view. *Howard Journal of Criminal Justice*, **41** (1) February, 14-26.
- Barnados (2013) Working with children with a parent in prison. Essex: Barnados.
- Bronte-Tinkew, J; Carrano, J; Guzman, L. (2006) Resident Fathers' Perceptions of Their Roles and Links to Involvement with Infants. *Fathering: A Journal of Theory, Research & Practice about Men as Fathers* **4** (3) 254-285.
- Brown, G; Mangelsdorf, S and Neff, C. (2012) Father involvement, paternal sensitivity, and father-child attachment security in the first 3 years. *Journal of Family Psychology*, **26** (3), June, 421-430.
- Clarke, L; O'Brien, M; Godwin, H; Hemmings, J; Day, R; et al (2005) Fathering behind Bars in English Prisons: Imprisoned Fathers' Identity and Contact with Their Children. *Fathering: A Journal of Theory, Research & Practice about Men as Fathers*, **3** (3) 221-241.
- Corcoran, M. (2005) Portrait of the 'absent' father: the impact of non-residency on developing and maintaining a father role. *Irish Journal of Sociology* **14** (2), 134-154
- De Claire, K. & Dixon, L. (2015) The effects of prison visits from family members on prisoners' well-being, prison rule breaking, and recidivism. A review of research since 1991. *Trauma, Violence, & Abuse*, DOI: 10.1177/1524838015603209, 1-15.
- Department of Health (2009) *The Healthy Child Programme: Pregnancy and the first five years of life*. 297756. London: Crown
- Dick, G. (2011) The changing role of fatherhood: The father as a provider of self object functions. *Psychoanalytical Social Work*. **18** (2) October, 107-125

Dixey, R. and Woodall, J. (2012) The significance of 'the visit' in an English category-B prison: views from prisoners, prisoners' families and prison staff. *Community, Work and Family*, **15** (1) February, 29-47.

Edin, K., Nelson, T. J. & Paranal, R. (2006) Fatherhood and incarceration as potential turning points in the criminal careers of unskilled men. In: Pattillo, M, Weiman, D. & Western, B. eds. *Imprisoning America: the social effects of mass incarceration*. New York, Russell Sage Foundation.

Family Nurse Partnership (FNP) (2015) *Family Nurse Partnership*
<http://www.fnp.nhs.uk> (accessed 31 January 2016)

Flouri, E. (2008) Fathering and adolescents' psychological adjustment: the role of fathers' involvement, residence and biology status. *Child: Health, Care and Development*. **34** (2) 152-161.

Geller, A; Cooper, C; Garfinkel, I; Schwartz-Soicher, O and Mincy, R. (2012) Beyond Absenteeism: Father Incarceration and Child Development. *Demography*, **49**, 49-76.

Glover, J. (2009) *Every night you cry: The realities of having a parent in prison*. October, Barnardo's: Essex

Hagan, J. & Dinovitzer, R. (1999) Collateral consequences of imprisonment for children, communities, and prisoners. *Crime and Justice*, **26**, 121-162.

Huari, H. and Hollingsworth, K (2009) *Understanding Fathering: Masculinity, Diversity and Change*. Research Report. York: Joseph Rowntree Foundation.

Jones, A; Gallagher, B; Manby, M, et al. (2013) *Children of Prisoners: Interventions and mitigations to strengthen mental health*. Huddersfield: University of Huddersfield.

Lee, C; Sansone, F; Swanson, C and Tatum, K. (2012) Incarcerated Fathers and Parenting: Importance of the Relationship With Their Children. *Social Work in Public Health*, **27**, 165-186.

Losel, F; Pugh, G; Markson, L; Souza, K and Lanksey, C. (2012) *Risk and protective factors in the resettlement of imprisoned fathers with their families*. Final Report: University of Cambridge.

- Maldonado, S. (2006) Recidivism and Paternal Engagement. *Family Law Quarterly*, **40** (2), Summer, 191-211.
- Mazza, C. (2002) And Then the World Fell Apart: The Children of Incarcerated Fathers. *Families in Society*, **83** (5/6) September/December, 521-529.
- McShane, C. (2012) Fathers in prison need support too: Keeping dads connected to their children during their sentence gives them purpose. *New Statesman*, 4 December 2012.
- Ministry of Justice (2013) *Transforming Rehabilitation. A revolution in the way we manage offenders*. London: The Stationery Office.
- Murray, J. (2007) The cycle of punishment: Social exclusion of prisoners and their children. *Criminology and Criminal Justice*, **7** (1), 55-81.
- Murray, J and Farrington, D (2008) Parental imprisonment: Long-lasting effects on boys' internalizing problems through the life course. *Development and Psychopathology*, **20**, 273-290.
- Murray, J and Murray, L. (2010) Parental incarceration, attachment and child psychopathology. *Attachment and Human Development*, **12** (4), July, 289-309.
- Osofsky, J; Osofsky, H and Bocknek, E. (2010) The impact of trauma on parents and children. In: Tayano, S; Keren, M; Herman, H and Cox, J. eds. *Parenthood and Mental Health: A Bridge between Infant and Adult Psychiatry*. Chichester: John Wiley & Sons Ltd.
- Palkovitz, R. (1997) Reconstructing 'involvement': Expanding conceptualizations of men's caring in contemporary families. In: A. J. Hawkins & D. C. Dollahite eds. *Generative fathering: Beyond deficit perspectives*. California: Sage Publications
- Prinsloo, C. (2007) Strengthening the father-child bond: Using groups to improve the fatherhood skills of incarcerated fathers. *Groupwork: An Interdisciplinary Journal for Working with Groups*, **17** (3), 25-42.
- Prison Reform Trust (2015) *Bromley briefings*. Prison factfile. PRT, London.

- Pugh, G (2004) *Sentenced Families: Signs of change for children with a parent in prison*. Ipswich: Ormiston
- Purvis, M. (2013) Paternal Incarceration and Parenting Programs in Prison: A Review Paper. *Psychiatry, Psychology and Law* **20** (1) 9-28.
- Raeder, M. (2012) Special Issue: Making a better world for children of incarcerated parents. *Family Court Review*, **50** (1) January, 23-35
- Rosenberg, J. (2009) *Children Need Dads Too: Children with Fathers in Prison*. Human Rights and Refugees Publications. Geneva: Quaker United Nations Office.
- Secret, M. (2012) Incarcerated Fathers: Exploring the Dimensions and Prevalence of Parenting Capacity of Non-Violent Offenders. *Fathering*.**10** (2), Spring, 159-177.
- Social Care Institute for Excellence (SCIE) (2008) *Children of Prisoners – maintaining family ties*. Children's and Families Services SCIE Guide 22. London: Social Care Institute for Excellence.
- Stubbs, J and Achat, H. (2012) Health home visiting for vulnerable families: what has occurred and what is yet to arrive? *Australian Journal of Primary Health*. **18** (1), March, 23-30
- Tyano, S; Keren, M; Herman, H and Cox, J. eds. (2010) *Parenthood and Mental Health: A Bridge between Infant and Adult Psychiatry*. Chichester: Wiley-Blackwell
- Walmsley, R. (2013) *World prison population list* (10th edn). ICPS, London.
- WAVE Trust (2013) *Conception to age 2 – the age of opportunity: Addendum to the Government's vision for the Foundation Years: 'Supporting Families in the Foundation Years'* 2nd Ed.
- Willerton, E; Schwartz, R; Wadsworth, S; Oglesby, M. (2011) Military Fathers' Perspectives on Involvement. *Journal of Family Psychology*, **25** (4) August, 521-530.
- Williams, K., Papadopoulou, V. & Booth, N. (2012) *Prisoners' childhood and family backgrounds: results from the surveying prisoner crime reduction (SPCR) longitudinal cohort study of prisoners*. London: Ministry of Justice.

Wilson, K. and Prior, R (2011) Father involvement and child well-being. *Journal of Paediatrics and Child Health* **47** (7) July, 405-407.

Woodall, J. (2010) *Control and choice in three category-C English prisons: implications for the concept and practice of the health promoting prison*. Unpublished PhD thesis. PhD, Leeds Metropolitan University.

Woodall, J., Kinsella, K. & Stephenson, L. (2014) 'It was just like we were a family again': play as a means to maintain family ties for children visiting an imprisoned parent. *International Journal of Play*, 3, 169–181.