



# Children of Incarcerated Parents LIBRARY

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For Health Care and other Service  
Providers: CIPL 305

## **Strategies for Intervention**

By Ann Adalist-Estrin

**Provide materials on the impact of incarceration to the child's family or caregiver and to all office staff.**

Clinics and medical offices often provide patients with information on a variety of social and environmental subjects that affect health and development. Such pamphlet topics include: the impact of divorce, choosing childcare, coping with addictions, child abuse, and learning disabilities. In recent years, issues related to gay and lesbian parents and families coping with HIV infection have been added to the list. Parents and caregivers of children of incarcerated parents can benefit from:

- Information on the impact of incarceration on children and families
- Advice on coping with visitation at prisons
- Preparing for a parents' return from incarceration
- Ideas for keeping children connected to their incarcerated parent



in facilities that are in low income and urban neighborhoods, this would be a mistake. Children with incarcerated parents live in all communities. Some of these children have always lived in

These materials can easily be included with other information packets made available to patients.

Children's books in waiting rooms of health care and other facilities are sometimes chosen because of socially relevant content. Books about parents who are incarcerated or addiction treatment facilities should be included.

Sesame Street now has a toolkit *Little Children –Big Challenges- Incarceration* which has a video and childrens books as well as resources for caregivers. <http://www.sesamestreet.org/parents/topicsandactivities/toolkits/incarceration> .

While it might seem prudent to provide these resources primarily

Suburban or rural areas. In addition, many children are sent from inner city neighborhoods to live with relatives in rural and suburban communities when their parent is incarcerated.

Whole families will sometimes relocate to a community nearer the prison or to a location far away from the media coverage or community reaction to the family member's crime. Physicians, teachers, and librarians in many different communities and neighborhoods have included information and resources about incarcerated parents as a part of their work with children and families. These professionals overwhelmingly report, "If you build it...they will come."

**Examine individual biases, perspectives, and experiences and understand the influence they have on your assessment**

Everyone brings his or her history and prejudices to work. They color many observations with interpretations and meaning. It is often particularly difficult for

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health care providers and other professionals working with children and parents to avoid projecting or interjecting their own experiences (positive or negative) with parenting, mental health, and with addictions, treatment, and recovery.

Equally difficult are issues related to domestic and community violence and crime. It helps to be aware of one's own perspective, to consider a teamwork approach to interventions with families, and to include a trusted colleague or supervisor in the management of cases that elicit a personal response.

### **Create an atmosphere of safety and trust**

Since many of the issues related to the incarceration of a parent are important to the overall health and well-being of the child, effective communication between the caregiver, parents, and health care provider is essential.

Trust and safety are necessary for optimal communication and are best nurtured in an atmosphere of genuine respect and acceptance. This can sometimes be difficult when the needs of the child are in conflict with the needs of the adults or when information or observations about the child will offend or upset the parents or caregivers.

It is also essential to recognize the role that race, ethnicity, language, gender and age can play in building trust between patients and health care providers. See CIPL 306 for more information.

### **Outline a plan for responding to the issues of parental incarceration.**

Pediatric or family practice health care providers are not expected to function as social workers or therapists or to intervene in the criminal justice process.

What you can do to mitigate the effects of parental incarceration on children will depend in part on how the issues come to your attention. The child may be exhibiting symptoms of anxiety or depression or developmental delay. There may be sudden onset of enuresis and encopresis, sleep disruptions or feeding difficulties.

The parent or caregiver may report that the child is having difficulty in school. The child may tell you outright about their incarcerated parent. You may have concerns about the caregiver's mental health. The parent may request that the child's health records be sent to the incarcerated parent. In any of these or other scenarios, the health care provider has several options for intervention

### **Options for Intervention**

#### ***NOW: Deal with it in the moment***

If there is urgency on the part of the parent or caregiver and, of course, if the child appears to be in danger or jeopardy.

#### ***SEND: Make appropriate referrals***

Choose other health, mental health, or social service program or agency referrals carefully. If at all possible be sure that the professionals you are referring

to have experience or expertise with families of prisoners or are at least aware of their unique issues and concerns. This is especially important when referring children and families to mental health professionals.

Unfortunately, insurance coverage, location, and setting may dictate referrals in ways that preclude such screening. Having resources, such as Children of Incarcerated Parents Library materials, to give parents and caregivers as supplemental to the referral will be essential.

#### ***NOTE: Chart the conversations for follow up***

All patients feel more acknowledged and cared for when health care providers remember a few details about their lives. This is even more important to those who are struggling with major life crises. Noting the incarceration of a child's parent presents some conflicts, however.

The child is the patient, and this information, which could be used in some way against the parent or caregiver could be considered inappropriate for inclusion in the child's medical record. Similar concerns exist in dealing with parental depression, domestic violence, and parental addictions. The policy of your practice or clinic on confidentiality can easily apply here.

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*Health Care Providers can find more about helping children of incarcerated parents and their families at the Children of Incarcerated Parents Library (CIPL), [www.nrccfi.camden.rutgers.edu](http://www.nrccfi.camden.rutgers.edu). See especially the CIPL 300 series, For Health Care Providers.*



### **About the Children of Incarcerated Parents Library (CIPL)**

Pamphlets may be downloaded without charge from the National Resource Center on Children and Families of the Incarcerated current website:

[nrccfi.camden.rutgers.edu](http://nrccfi.camden.rutgers.edu).

Duplication is permitted and encouraged, so long as the materials are not altered or sold. Sorry, the NRCCFI is not budgeted to mail free copies. Send comments to the Children of Incarcerated Parents Library at Rutgers University Camden, 405-7 Cooper Street, Room 103, Camden, NJ 08102-1521.

856/225-2718, 856/225-6435 Fax

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