Understanding Trauma Impacts and Supporting Foster Children with Incarcerated Parents

The following are strategies and resources for offering interventions and support to foster children with incarcerated parents:

1) Professionals first need to receive training about potential traumas and unique stressors affecting foster children:
   a. Abuse/Neglect are often the direct traumas that have lead to removal of the child.
   b. Attachment issues are common among children removed from their homes related to the neglect or abuse. Attachment issues can be exacerbated by the experience of being moved in and out of multiple foster homes.
   c. Separation from the parent can be experienced by a child as a life-threatening event, as they are often being forcibly torn from their primary caregiver and attachment figure.
   d. Entering and living in the foster/kinship care system can create stressors around living in an unfamiliar environment. Additionally, caregiver treatment may be subpar and placements may be unstable/inconsistent.

2) Professionals need to also receive training about the trauma and unique stressors associated with having an incarcerated parent:
   a. The Arrest- Violence and aggression displayed in front of the children can have a significant and potentially long-term traumatic impact on children eliciting shock, fear, anxiety, and anger.
   b. The Separation- Elicits feelings of abandonment, insecurity, looming danger. Fear for parent’s safety is active. Unpredictability of access to parents and siblings is often anxiety provoking.
   c. Visitation to the Prison- This can be particularly stressful and triggering due to long wait times, potentially scary and invasive security procedures and limitations to access their parent (ex. video visit, Plexiglas boundaries, no touching).
   d. Stigmatization- Children are aware of societal attitudes toward the stigmatized very young and may internalize negative self-concepts about being a child of an incarcerated parent.
   e. Babies Born to Incarcerated Mothers- Bonding and attachment to mother are interrupted by incarceration which can have harmful affect on baby. Providing an immediate and consistent replacement caregiver(s), focused on establishing secure-attachment is essential to mitigate long-term effect on baby.

3) Professionals need to familiarize themselves with “The Adverse Childhood Experiences (ACE) Study” and its findings that parental incarceration is now recognized as an “adverse childhood experience” (ACE).

4) Professionals need to familiarize themselves with PTSD criteria, be able to identify the child’s dysfunctional/maladaptive coping strategies such a behavioral disturbances, guardedness, distrust, self-sabotage and refer appropriately.

5) Explore the services for foster children with incarcerated parents. Are there non-profits or community programs aimed at supporting the child available? Have all efforts been made to place siblings together to mitigate traumas around separation. Are transportation and arrangements made in a way as to encourage the foster parents to maintain visitation between child and parents?

6) Providers should monitor vicarious trauma- Recommend quarterly use of Self-Care Assessment Tool.

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