

Breaking the Cycle of Incarceration: Using Evidence-based Programs to Strengthen Families to Improve Child Outcomes

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Contents of Presentation

- **Impact of Incarcerated Parents on Children**
- **Family Risk and Protective Factors**
- **Solutions: Effective Parenting and Family Programs**
- **What You Can Do**

Parents Matter: Connecting the Dots

- Parents and Elders are Role Models for Children
- Children of prisoners are at higher risk for incarceration and other problems
- 80% of prisoners were raised fatherless.

Connecting the Dots: Many Prisoners are Addicted Parents

- A 2 to 5 times increase in drug use in girls in USA in 1990's increased drug abusing women in prison by 700% today
- 70% of women in prison are mothers
- Children of addicted parents are 3 to 4 times more likely to be abused and neglected (Kumpfer & Bayes, 1995).
- 40% to 80% of all Child Maltreatment Cases involve parental alcohol and drug abuse (CWLA, 2003)
- 80% of states say substance abuse and poverty are two major factors in child maltreatment cases (NCANN, 2003).

Impact on Children of Addicted Mothers in Prisons

- 50 – 80% of children of women prisoners were exposed to drugs in utero
 - Fetal Alcohol or Drug Effect
 - Decreased I.Q, 1/3 below average
 - Learning deficits
 - 45% birth complications
 - expensive neonatal intensive care
 - 63% with insecure parent/caregiver attachment (Poehlmann, 2003)
- Reduced parent/child bonding leading to “reactive attachment disorder”—don’t respect authority figures and little empathy for others leading to violent crimes.

Research Study Found Parents Matter

National Longitudinal Adolescent Survey (Resnick et al 1997)

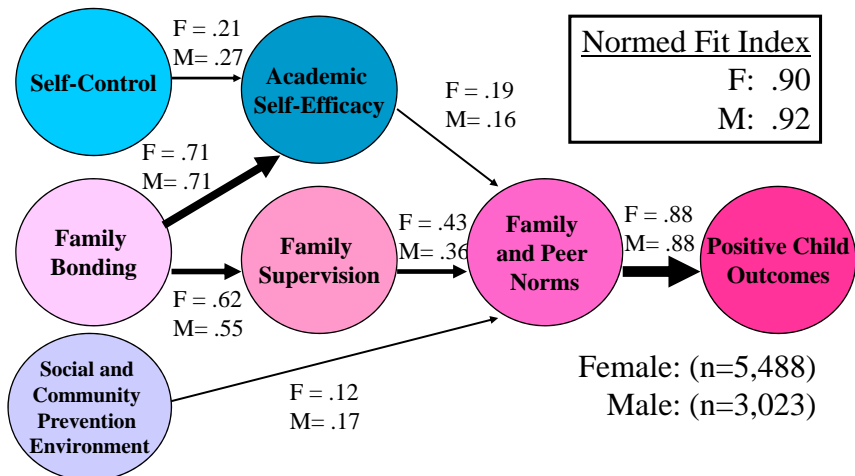




What does research say are critical family risk and protective factors?

Protective Factors Leading to Positive Child Outcomes: Social Ecology Model

(Kumpfer, Alvarado, & Whiteside, 2003)



Family Protective Processes

- Parent/child attachment
- Parental monitoring and discipline
- Consistent, predictable parenting
- Parents' communication of values and expectations

Family Risk Factors

(Kumpfer & DeMarsh, 1985, 1986; Chassin, et al., 2004)

- Family conflict
- Lack of love, care, & support
- Unrealistic developmental expectations
- Lack of supervision or discipline
- Lack of family rituals
- Low expectations for school success
- Lack of communication
- Neglect, physical and sexual abuse

Biological and Genetic Risk Factors

(Kumpfer, 1987)

Over Stressed Youth Syndrome

- Difficult Temperament
- Hyperactivity, Rapid Tempo
- Autonomic Hyperactivity
- Rapid Brain Wave

Decreased Verbal IQ and
Prefrontal Cognitive Dysfunction

Rapid Metabolism of
Alcohol

Fetal Alcohol & Drug Syndrome



Solutions for Breaking Cycle of Addiction and Incarceration

Why does working from a family-centered approach make more sense?

- Strong families, strong children
- Strong families avert many adverse outcomes: substance abuse, teen pregnancy, school failure, aggression and delinquency *(Hops, et al., 2001)*

Why Do Family Interventions? Because Positive Child Outcomes are 9 times Larger

(Tobler & Kumpfer, 2000)

- | | |
|-----------------------------------|--------|
| • School-based Affective Programs | -.05 |
| • Knowledge plus Affective | .05 |
| • Life or Social Skills Training | .28 |
| ○ Average ES Youth-only Programs | .10 ES |
| • Parent Skills Training | .31 |
| • Family Therapy | .38 |
| • Family Skills Training | .82 |
| • In-home Family Support | 1.62 |
| ○ Average ES Family Interventions | .96 ES |



Family Interventions Can Teach Resiliency Skills

- Parenting and Social skills: speaking and listening
- Planning & organizing (family meetings)
- Problem solving
- Peer resistance
- Restoring self-esteem
- Identifying feelings, taking criticism
- Managing feelings, coping with anger

Family-centered Intervention Outcomes Improve Over Time

- Whereas youth-only centered treatment or prevention have reduced outcomes in longitudinal studies; family program have improved outcomes over time.
- Improving parenting skills reduce relapse and recidivism in drugs, crime, and child maltreatment.
- Parent are less stressed and depressed



Child Welfare Outcomes (Katz, 2006)

- Drug Court and Dependency Court judges say they get better and more detailed reports on improved parent/child relationships and parenting skills after family skills training programs
- Group leaders actually see parents and children interacting in family sessions and during meals
- Leading to faster reunification and less days in foster or kinship care or prevention of abuse and CPS reports



Family Interventions are Cost Effective

- Families Skills Training Programs average +\$9.44 saved per \$1.00 spent
- Juvenile Corrections approaches without family cost -\$5.40 more than benefit. (Aos, et al., 2004; Spoth, Gyll & Day, 2002, Kumpfer, in press)





What are Evidence-based Programs and Why are They Important?

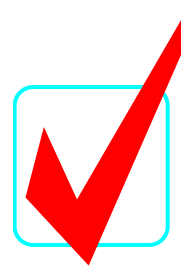
Evidence-based Programs (EBP)

- EB programs or Empirically Supported Treatments (ESTs) have positive research results.
- The best EB programs are replicated programs with large effect sizes.



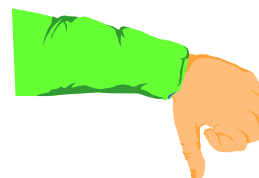
Good News:

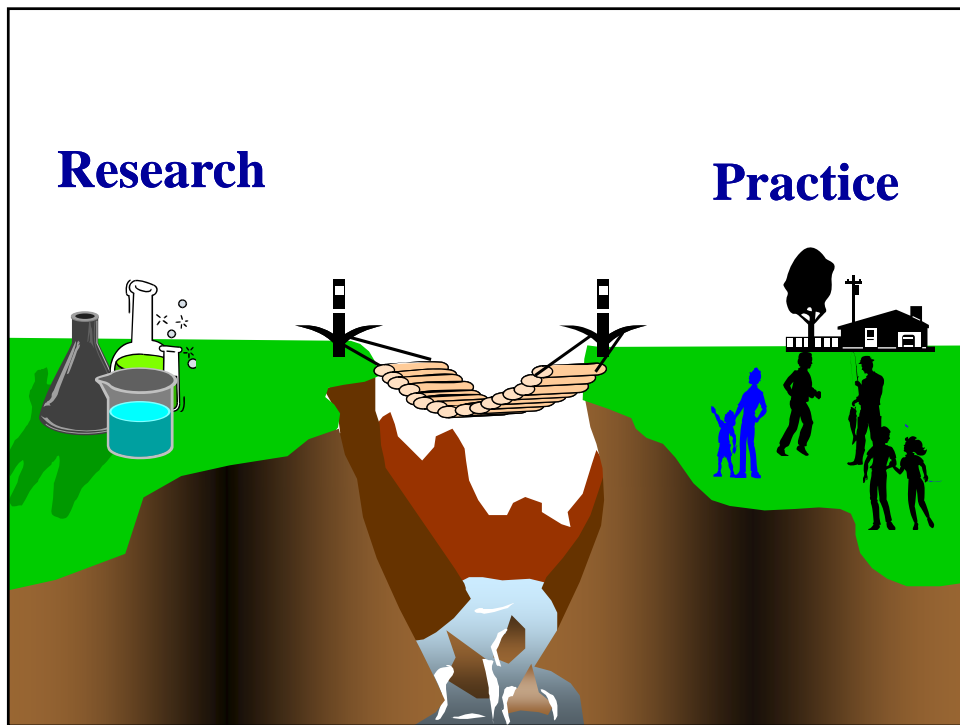
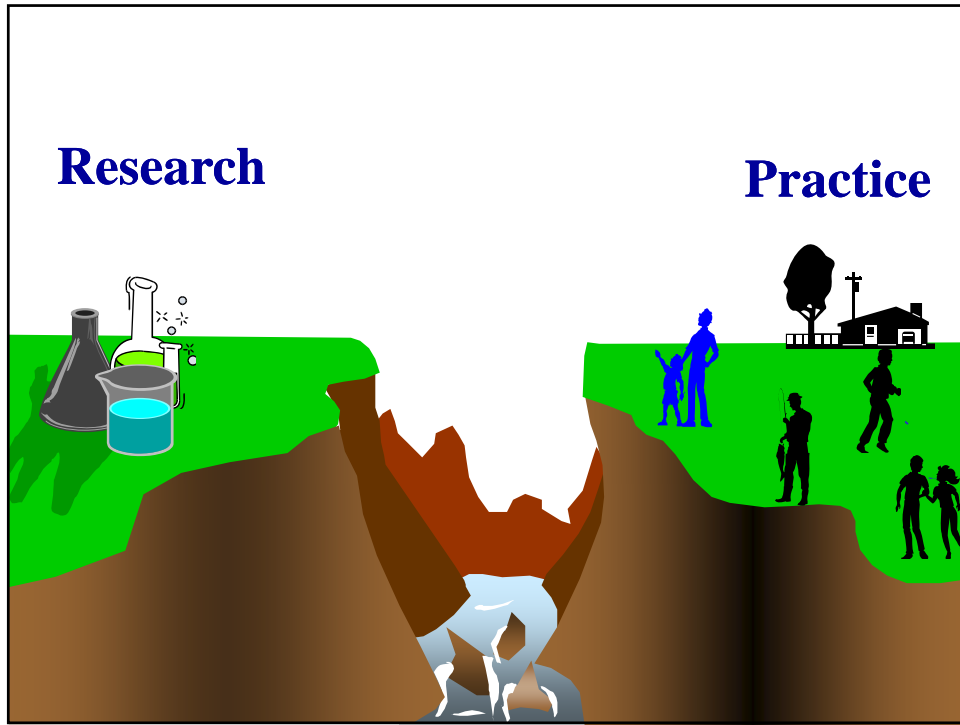
- We know how to prevent negative parent and child outcomes by strengthening families, schools, and communities.

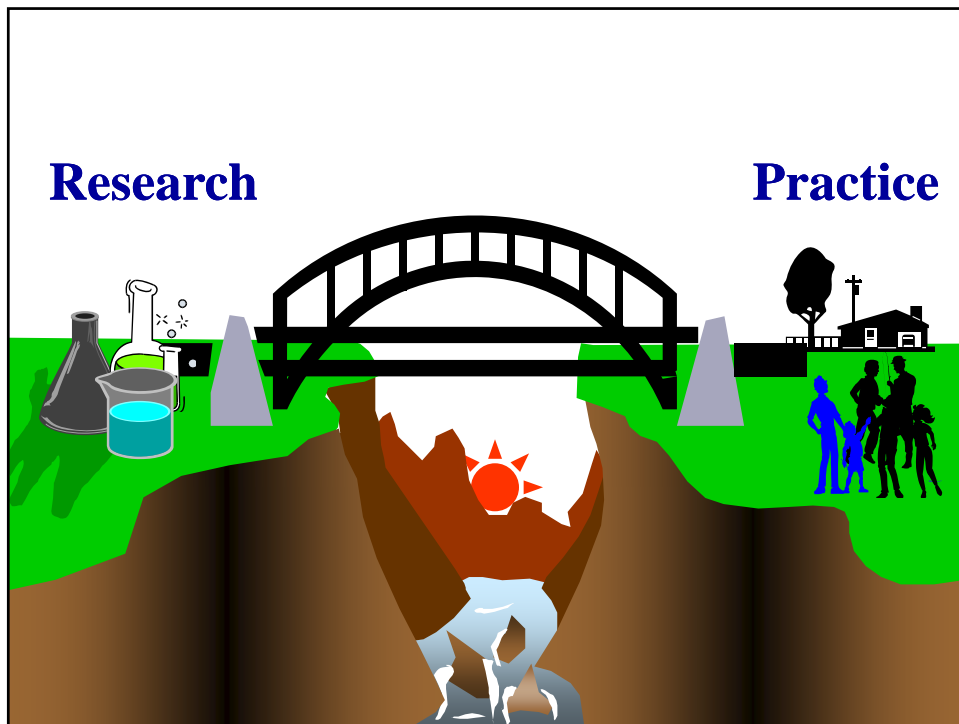


Bad News:

- Prevention is not easy. There are no quick fixes.







*NIJ/OJJDP Strengthening
America's Families Initiative*

www.strengtheningfamilies.org

- **Exemplary I Programs: 7**
effective, replicated programs with
multiple RCTs by independent researcher
teams
- **Exemplary II Programs: 7**
effective programs tested in RCTs by the
original researcher only
- **Model Programs: 16** programs
with quasi-experimental program
evaluation studies.
- **Promising Programs: 5** with
non-experimental studies, but similar
structure to EB programs

Evidence-based Family Interventions

(see www.strengtheningfamilies.org)

- **Only 7 Exemplary I (replicated parenting and family programs):**
 - Incredible Years (3-10 years)
 - Helping the Non-compliant Child (3-7 years)
 - Strengthening Families Program (3-16 years)
 - Guiding Good Choices (PFDY) 8-14 years)
 - Functional Family Therapy (10-18)
 - Multisystemic Therapy (10-18)
 - Treatment Foster Care (12-18)

Effective Ways to Engage Families to Attend

- **Personal Invitation to Attend** (home visits, calls, printed welcome letters)
- **Meals** – a draw and a barrier removed
- **Transportation Help** - vouchers, bus tokens, phone trees, vans
- **Child Care or SFP Groups** - for younger & older kids
- **Rewards** for attendance, participation, graduation
- **Weekly Calls** - “check-in” from Leaders
- **BIG Graduation:** ceremony, party

Factors Affecting Effective Implementation of Evidence-based Programs

- **MONEY:** Evidence based programs cost a little more but deliver real results (more cost-effective).
- **Solution:** Federal and state government earmarks for funding for evidence-based programs increase implementation dramatically.
 - Congress earmarked \$13.5 million for EB family programs to 142 communities per year in 1998 and drug use came down.
 - New Jersey legislature earmarked \$1.8 million for SFP in 55 communities.
 - Virginia legislature earmarked funds and requires outcomes to be published also.
 - Arizona Governor's Commission funded and mandated all incarcerated parents with kids to attend SFP. Phoenix Probation office had 800 families/year complete.

Other Factors Impacting Wide-scale Dissemination

- **Training and Technical Assistance Systems needed** (Developers have developed training workshops, online web based supervision also possible)
- **Culturally Adapted Versions** help increase recruitment and retention 40%.
- **Court Referral Systems** to get criminally involved and drug abusing parents to attend (judges to court order families with criminal drug charges or child protective services orders).

What Can You Do

- Learn about EB family interventions
- Advocate funding for EB programs and evaluations
- Educate judges to mandate effective parenting programs
- Fund family interventions in prisons

Thank You and How to Contact Us

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