

NEEDS CREATED IN CHILDREN'S DAILY LIVES BY THE ARREST OF A CAREGIVER



FINDINGS FROM THE CCSU-IMRP NEW BRITAIN SUPERIOR COURT FAMILY SURVEY

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The IMRP sincerely appreciates the efforts of the attorneys, social workers, and state marshals at the New Britain Superior Courthouse to facilitate this project; without their assistance the project could not have occurred.

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EXECUTIVE SUMMARY

Introduction

It has been estimated that in 2010, over 62,000 Connecticut children had a caregiver arrested and over 19,000 had a caregiver incarcerated (Conway & Keays, 2015; Lang & Bory, 2012). A caregiver's arrest can be harmful to a child in several ways; witnessing the arrest can be traumatizing (Phillips & Zhao, 2010), court dates during the pretrial phase can cause significant anxiety (Dallaire et al., 2015), and the caregiver's incarceration can be very stressful for children and families (Turney, 2014). There is ample evidence that caregiver incarceration is associated with negative child outcomes such as mental health problems (Murray & Murray, 2010), physical health problems (Dong et al., 2004), antisocial behavior (Murray, Farrington, & Sekol, 2012), and youth incarceration (Conway & Jones, 2015; Huebner & Gustafson, 2007).

We believe that these negative effects are due in part to gaps in children's daily lives created by the caregiver's arrest and possible incarceration. These gaps may come about due to loss of the caregiver's financial and emotional support, transportation, or help with homework. Identifying these gaps is essential for understanding the specific effects a caregiver's arrest and incarceration may have on children. It is also important for developing policies and practices to support children and families and prevent unnecessary harm. The goal of the present study was therefore to assess the gaps created by the arrest of a caregiver.

The present study took place at the New Britain Superior Court. Our research questions were:

1. How many caregivers are arraigned, and how many children have an arrested caregiver being arraigned at the New Britain Superior Court?
2. What is the demographic profile of children and caregivers?
3. What supports in daily life might children lose when a caregiver enters the criminal justice system? How does this potential loss differ by caregiver's gender and legal guardianship, or by children's age?
4. When a caregiver is arrested, how often do children witness the arrest, and what are their experiences when this happens (e.g., how frequently do children witness the use of weapons)?

Method

Sample. Our sample consisted of 45 caregivers surveyed regarding 108 children they had been caring for. Caregivers were public defender clients who were held in lockup and arraigned at the New Britain Superior Court. Our sampling approach did not include "walk-in" clients (those not held in lockup; it was estimated that this group makes up 40% of public defender clients) or arraignees with private representation (this group was estimated at less than 10% of arraignments at the courthouse).

Survey. We designed a survey to be read to caregivers and answered orally, including sections on (a) individual children's age and sex, their relationships to the caregiver (e.g., whether they lived with the caregiver in the month prior to the arrest), and the supports the caregiver had been providing to each child in the month prior to arrest (e.g., whether the caregiver had been providing each child with financial support, transportation, etc.); (b) information about the arrest (e.g., whether children witnessed the arrest, and if so whether any children witnessed violence during the arrest); and (c) caregiver demographics.

Procedure. Caregivers were recruited by public defender attorneys during pre-arraignment meetings with clients. Research staff from Central Connecticut State University's Institute for Municipal and Regional Policy (IMRP) administered surveys orally to caregivers in the courthouse's lockup facility, in a non-contact interview room with a glass partition in between the surveyor and the caregiver. Surveys began on September 23, 2014 and concluded on March 2, 2015.

Findings

Population Estimates for Numbers of Children and Their Arraigned Caregivers.

- **814 Children** are estimated to have a caregiver arraigned in a year at the New Britain Superior Court. This is an underestimate due to parts of the caregiver population not sampled (e.g., public defender walk-in clients and caregivers with private representation).
- **339 Caregivers** are estimated to be arraigned in a year at the New Britain courthouse. This estimate has the same limitations as the number of children with an arraigned caregiver.

Demographic Profile of the Children and Caregivers.

Children:

- The children's mean age was 6.7 years (median = 6.5), ranging from prenatal to 16 years. 45.4% were age 5 or below.
- 54.6% of the children were boys and 45.4% were girls.
- For 74.1% of the children, the arraigned caregiver was male, and for 25.9% the caregiver was female.
- Arraigned caregivers were the legal guardian for 73.1% of the children. There was no statistical difference in the percentage of arraignees who were legal guardians by gender (85.7% for female caregivers and 68.8% for males).
- 50.9% of the children lived with a caregiver who was arraigned. The percent varied by the caregiver's gender:
 - 75.0% lived with a female caregiver
 - 42.5% lived with a male caregiver

Caregivers:

- 24.4% of the 45 caregivers were female, and 75.6% were male.
- Nearly half of the caregivers were Latin American or Hispanic (48.9%), 40.0% were White or Caucasian, 20.0% were African American or Black, and 6.7% were Native American or Indian.

Lost Supports when a Caregiver Enters the Criminal Justice System.

- Caregivers reported generally being quite involved in children's lives; the table below shows percentages of children who were receiving each type of support from the arraigned caregiver (in the month prior to arrest); each type of support was provided by well over 50% of caregivers (except for medical or special needs at 25%).
- Of the eight specific types of support shown in the table below, 93% of caregivers reported providing at least one. Most caregivers (84%) provided at least four types of support (80% of male caregivers and 96% of female caregivers).

Percent of Children (N = 108) Who Had Been Receiving Support from
Arrested Caregiver in the Month Prior to Caregiver's Arrest

Type of Support	Percent
Financial support	87.0
Listening or helping with personal problems	86.4*
Helping at least once a week with homework/projects	86.4*
Talking with teachers, coaches, etc.	81.4*
Transportation at least once a week	79.6
Watching the child at least once a week	74.1
Government assistance	59.3
Care at least once a week for medical or special needs	25.0

* Percentages only include school-age children, age 6 and above ($n = 59$ children).

Children Witnessing the Caregiver's Arrest.

- Most children (82.4 %) did not witness the caregiver's arrest. Based on the 17.6% of children who did witness the arrest, we project that 143 children per year for cases heard at the New Britain courthouse with public defender representation will observe a caregiver's arrest (and many more statewide). This is important because of the potential for problems such as posttraumatic stress (Phillips & Zhao, 2010).
- Of the 10 caregivers whose children witnessed the arrest, 5 said at least one child saw the parent being handcuffed, 2 reported that a gun was pointed at the caregiver, and 1 reported a baton pointed at the caregiver.

Conclusions and Policy Implications

Conclusions. Several tentative conclusions are warranted based on the findings from this small-scale study:

- It is likely that a large number of children in Connecticut are affected each year by the arrest of a caregiver.
- A non-trivial number of Connecticut children witness a caregiver's arrest.
- Caregivers' arrests are likely to have significant effects on children's daily lives (e.g., loss of financial support, transportation, and direct child care, as well as added family stress which can tax the family's ability to help children cope). Effects are likely substantial for children of both male and female arrested caregivers.

Policy implications. We recommend that policies and procedures be developed or modified to consider effects on children and families of arrested caregivers, without jeopardizing public safety. Based on the findings of the present survey we offer two tentative implications for public policy.

- A process should be developed to assess, shortly after an arrest, whether the caregiver's entry into the criminal justice system will create needs in children's lives.
- Ways of minimizing negative impacts on children should be identified and evaluated. Examples include:

- Training law enforcement officers on (a) understanding the impact of caregiver arrest on children, and (b) arrest procedures that consider the arrestee's children to minimize harm (Lang & Bory, 2012; Puddefoot & Foster, 2007).
- Use of family impact or family responsibility statements to encourage consideration of the children and families at the time of sentencing. A toolkit for developing a family impact statement process was provided by Cramer, Peterson, Kurs, and Fontaine (2015); this toolkit could be used to develop a process in Connecticut.

INTRODUCTION

The arrest and potential incarceration of a caregiver is a serious issue for children in Connecticut. Lang and Bory (2012) provided a rough estimate that in the year 2010 over 62,000 children in the state had a caregiver arrested. Fewer caregivers are actually sentenced to incarceration, but the number is still substantial; Conway and Keays (2015) estimated that in 2010 there were 19,321 Connecticut children with an incarcerated caregiver.

A caregiver's arrest can be damaging to a child in several ways. The child's presence at the arrest may lead to posttraumatic stress (Phillips & Zhao, 2010) and internalizing and externalizing problems (Roberts et al., 2013). It is difficult to estimate how many children may be present for a caregiver's arrest, but Lang and Bory suggested that in Connecticut in 2010, the number was between 12,000 and 52,000. In a separate analysis of domestic violence arrests, it was found that in 2013 there was a child present for 25% of arrests (Improving Outcomes for Children & Youth Exposed to Family Violence Workgroup, 2015). Even if the child is not present, a caregiver's arrest can cause fear, confusion, and panic over the sudden loss of the caregiver (Adalist-Estrin, 2014). There may also be anxiety as the pretrial phase continues through multiple court dates for bail hearing, arraignment, etc. (Dallaire et al., 2015).

Having a caregiver actually incarcerated has documented associations with negative outcomes including increased child mental health problems (Murray & Murray, 2010), physical health problems (Dong et al., 2004), antisocial behavior (Murray, Farrington, & Sekol, 2012), and youth incarceration (Conway & Jones, 2015; Huebner & Gustafson, 2007). These outcomes may be due at least in part to high family stress levels (Turney, 2014). Stress may come about due to loss of income (with added expenses related to incarceration such as the cost of phone calls, commissary purchases for the incarcerated caregiver, and visitation), disruption of child attachment and other family relationships, loss of childcare and other supports the caregiver had been providing, and stigma over the caregiver's arrest. These factors can cause difficulties for children and reduce the remaining caregiver's ability to support the child, and may constitute "toxic stress" (Shonkoff & Garner, 2012), overwhelming the child's and family's ability to cope. The resulting over-activation of the body's stress response system can affect the course of a child's development, with changes in the brain and behavior. This idea is consistent with the identification of family incarceration as an "Adverse Childhood Experience" (Felitti et al., 1998).

There has been work on how to mitigate the negative effects on children due to the arrest and incarceration of a caregiver. The effects of a caregiver's arrest have been addressed through development of child-sensitive arrest protocols (e.g., International Association of Chiefs of Police, 2014; Kilshaw, 2015; Lang & Bory, 2012; Puddefoot & Foster, 2007). There have also been evaluations of interventions such as mentoring and counseling/case management to serve children with an incarcerated parent (Conway & Keays, 2015; ICF International, 2011).

What we have not seen in the literature is a more direct assessment of gaps created in children's lives by the removal of a caregiver. Gaps might be created if the caregiver, prior to arrest, had been meeting financial, emotional, and other needs in children's daily lives. Identifying these gaps is essential for understanding the specific kinds of effects a caregiver's arrest may have on children, and for identifying policies and practices to support children and families. Assessing the gaps created by the arrest of a caregiver was therefore the goal of the present study.

Effect of Caregiver Arrest on Children's Daily Lives

To our knowledge no research exists directly assessing changes in children's daily lives due to the arrest of a parent or caregiver. However, changes can be inferred to a certain extent by examining the relationships of children with the caregivers prior to the arrest. Glaze and Maruschak (2010), using nationwide data on parents in state and federal prisons, reported that 47.9% of parents in state

prisons lived with their children either in the month before their arrest or just before their incarceration. The figure for federal prisons was somewhat higher at 56.4%. In a Connecticut-focused study of children with incarcerated parents receiving either mentoring or home-based counseling and case management services, Conway and Keays (2015) found that 56% lived with the incarcerated parent prior to the incarceration. These results indicate that for many children, the arrest (and potential incarceration) of a caregiver is likely to have a fairly dramatic effect on daily life due to the loss of the caregiver from the home. The disruption of a caregiving relationship could mean the loss of financial, emotional, and/or instrumental (e.g., transportation) support.

Regarding specific types of support, Glaze and Maruschak (2010) provided data on financial support and the fairly broad category of “daily care.” Fifty-four percent of parents in state prisons and 67.2% in federal prisons indicated providing “primary financial support” for the children. We believe it is likely that other parents provided at least some (though not primary) financial support. Data on “daily care” indicate a high level of involvement by parents living with children. Over 90% of parents in both state and federal prisons, who lived with their children, reported either providing primary care or sharing daily care of the children before their incarceration (mothers were considerably more likely than fathers to have provided primary daily care). It is important to note that parents of both genders were quite involved with their children’s care.

These data indicate the potential for a considerable impact on children’s daily lives when a caregiver is arrested. However, it would be helpful to have more specific information on what types of support arrested/incarcerated caregivers had been providing. This information would help to understand the human impact of arrest and incarceration, as well as the financial cost. Understanding children’s needs could provide a foundation for more systematic planning efforts to fill gaps created by the caregiver’s absence and address the resulting needs (Leeson & Morgan, 2014). The result could be a reduction in child and family stress, and ultimately reduced likelihood of negative outcomes such as mental or physical health problems.

It would also be helpful to know more about the demographics of the children and families affected by arrest and incarceration. Examples include how frequently male versus female caregivers are arrested and the ages of their children. These factors likely influence the types and amount of supports caregivers had been providing to children prior to arrest.

Purpose and Research Questions

The purpose of the present study was to examine needs in daily life created by the arrest of children’s caregivers in Connecticut. The focus (the time point of data collection) was on arraignment rather than arrest, because arraignment was the point in the criminal justice process at which we were able to obtain data. We believe gathering data at arraignment provides a useful means for understanding the impact of caregivers’ arrest (especially given the lack of existing data).

The present study took place at the New Britain Superior Court. Our research questions were:

1. How many caregivers are arraigned, and how many children have an arrested caregiver being arraigned at the New Britain courthouse?
2. What is the demographic profile of affected families - how many children have a male versus female caregiver being arraigned, what are the ages of affected children, and how many children lived with the arraigned caregiver?
3. What supports in daily life might children lose when a caregiver enters the criminal justice system? How does this potential loss differ by male versus female caregiver, by caregiver’s legal guardianship, or by children’s age?
4. When a caregiver is arrested, how often do children witness the arrest, and what are their experiences when this happens (e.g., how frequently do children witness the use of weapons)?

METHOD

Sample

The two related populations we wished to study were (a) arrested caregivers of minor children in Connecticut, and (b) their minor children. Our sampling frame consisted of caregivers arraigned at the New Britain Superior Court who were represented by Connecticut Public Defender Services and held in lock-up. In effect, this sampling frame limits our conclusions to the area served by the courthouse, which includes the towns/cities of Berlin, New Britain, Newington, Rocky Hill, and Wethersfield, Connecticut. Our sample included those caregivers willing and able to participate in our survey when at the New Britain courthouse for arraignment.

We surveyed 45 caregivers about their 108 children. Demographic information on the sample of children and caregivers is provided below.

It is important to note that our sampling frame excluded portions of the intended population. These non-represented portions include: (a) public defender clients whose condition at the pre-arraignment meeting precluded the survey being explained to them (e.g., very upset over the arrest, behaving violently, or under the influence of drugs or alcohol; estimates from a courthouse social worker and the marshal in charge of lock-up indicated that this occurred at least several times per week, if not once a day), (b) public defender clients who were not held in lock-up (the head public defender at the courthouse estimated that 40% of their clients were “walk-ins” and not held in lockup), and (c) arraignees with private representation (not represented by public defenders; the head public defender estimated that this group comprises less than 10% of arraignments at the courthouse). We also note that while Spanish translation was available, no survey respondents were non-English speakers, suggesting that clients needing translators did not become participants.

Survey

We were not able to locate an existing survey that would allow us to answer our research questions so we designed one. The survey, designed to be read to caregivers and answered orally, included sections on (a) individual children, their relationships to the caregiver, and the supports the caregiver had been providing to each child, (b) information about the arrest (e.g., if any of the children witnessed it, whether they saw weapons or violence), and (c) caregiver demographics. Demographic questions included sex, race or ethnicity, whether the caregiver had been released since the arrest, and whether the caregiver had ever been in jail or prison before (and if so, approximate dates).

Information about children, relationships to the caregiver, and supports provided by the caregiver. Caregivers were asked how many minor children they helped care for, and for each child to report (a) the child's age, (b) the child's sex, (c) whether the caregiver was the child's legal parent or guardian (caregivers were not necessarily legal guardians, as explained later under “Recruitment”), (d) whether the child lived with the caregiver in the month prior to the arrest, and (e) whether the child witnessed the arrest.

Caregivers were then asked for each child about supports they had been providing regularly in the month prior to the arrest. The list of supports was generated through discussion by the research team, which included a social worker with a Master of Social Work (MSW) degree, a student in a MSW program, and several researchers with experience studying the needs of children with incarcerated parents. The list of supports included material (e.g., financial), direct care, instrumental (e.g., transportation, help with homework), and emotional support. Table 1 provides a list of the supports, and the actual text that was shown to caregivers appears in Appendix A. Caregivers indicated for each type of support whether they had, or had not, been providing that support regularly in the month prior to the arrest.

Information about the arrest. Caregivers were asked a number of questions about the arrest. First, if a caregiver had indicated earlier that any of the children witnessed the arrest, the caregiver was asked whether any of the children saw or heard (a) forced entry by the police, (b) the caregiver being handcuffed or otherwise physically restrained, (c) the caregiver being physically subdued or taken down, (d) a family dog being subdued or taken down, or (e) property destroyed. The caregiver answered “yes” or “no” for each question (but was not asked which specific children witnessed the act – only whether any of them had). If no child had witnessed the arrest, these questions were skipped.

Next, caregivers reporting that at least one child had witnessed the arrest were asked “Which (if any) of the following weapons did at least one child see being pointed at or used on you?” The list included gun, Taser, teargas, baton, and any other weapon. The caregiver replied “yes” or “no.” Any time the caregiver replied “yes,” a follow-up question was asked about whether the weapon was actually used on the caregiver.

Caregivers were then asked about caring for the children at the time of arrest, beginning with “At the moment you were arrested, were you responsible for watching any of the children?” If they replied “yes” they were asked “Was there another caregiver present to watch the children?” and whether the arresting officer knew (or asked about) the caregiver being responsible for the children. Caregivers were also asked “If the officer knew you were responsible for children, did he or she allow you to make sure someone else could watch them?” and whether the officer informed the caregiver about any services available for the children. The last question about the arrest was the approximate time of day it occurred.

Procedure

Recruitment. Public defender attorneys informed clients about the survey during a pre-arraignment meeting. These meetings took place in the morning, with arraignments occurring in the late morning or afternoon. Attorneys asked (a) whether the client was the parent or caregiver of any minor children, and (b) if so, whether she or he would be willing to participate in the survey. The specific language used to explain who constitutes a caregiver, from a script provided to attorneys, was “The researchers from CCSU are asking parents or people who help support children under age 18 to answer a few questions around lunch time today. Do you have any children under age 18 that you help to support or care for?” The definition of caregiver was therefore fairly broad. This is important because children may be substantially affected by the loss of caregivers even if they are not legal parents or guardians. The attorneys’ script also made it clear that participation was voluntary, and that the choice to participate or not would not affect the client’s case, and that no information from the survey would be shared with any agency or the client’s family. A list was made of clients who were caregivers and had agreed to participate. The list was provided to the marshals responsible for transporting prisoners to and from the lockup facility. Information on how many arraignees were caregivers and the number of caregivers that had agreed to participate was communicated to research staff at Central Connecticut State University’s Institute for Municipal and Regional Policy (IMRP).

Survey administration. IMRP staff administered surveys to caregivers being held in the courthouse’s lockup facility, either before or after the caregiver’s arraignment. Administration procedures were determined through discussion with courthouse staff. Surveys were conducted during lunch time, when no arraignments were taking place. The surveys were completed in a non-contact interview room with glass in between the surveyor and the caregiver. Marshals escorted caregivers to and from the interview room; caregivers were not provided with any papers or pen or pencil. The informed consent statement was taped to the glass so the caregiver could read it, and was read to the caregiver by the IMRP researcher. The researcher administered the survey orally. The only printed material in addition to the consent form was the list of possible supports the client may have been providing to children (see Appendix A), which was taped to the glass.

Dates of surveys. Surveys began on September 23, 2014 and concluded on March 2, 2015. In total, there were 96 days (all weekdays) on which the IMRP received reports on the number of potential caregiver respondents from the courthouse. There were some weekdays during which the IMRP did not receive reports, either because the courthouse was closed for a holiday or courthouse staff members working with the IMRP were not available.

The IMRP received reports each morning of three pieces of information from the courthouse (occasionally one or the other piece of information was not provided): (a) the number of arraignments (reported on 94 of the 96 days), (b) the number of arraignees parenting or caring for children (reported on 88 of the 96 days), and (c) the number of caregivers willing to participate in the survey (reported on all 96 days). The number of surveys completed is lower than the number of arraignees who agreed to participate because some caregivers, after agreeing to participate, were released before the lunch time survey period or changed their minds about participating (e.g., were upset following the arraignment).

FINDINGS

Findings are organized by research question.

Population Estimates for Numbers of Children and their Arraigned Caregivers at the New Britain Superior Court

Number of caregivers arraigned. We estimated the population size for number of caregivers coming through arraignment in New Britain based on clients' reports to their attorneys. There was an average of 7.71 arraignments per day (minimum = 0; maximum = 14; SD = 3.20) with a 95% confidence interval ranging from 7.06 to 8.37. The average number of arraignees who were caregivers per day was 1.36, with SD = 1.64 and a 95% confidence interval from 1.01 to 1.71.

Using the average number of caregivers per day, we estimate approximately 339 caregivers are arraigned annually at the New Britain courthouse.¹ Using the upper and lower limits of the confidence interval (1.01 and 1.71), we estimate that the 95% confidence interval for yearly number of arraigned caregivers ranges from 251 to 426.

Number of children with arraigned caregivers. The population size for number of children with arraigned caregivers was estimated using reports from caregivers who participated in the survey. There were 45 caregiver respondents, and they cared for an average of 2.40 children each (SD = 1.64; the 95% confidence interval ranged from 1.91 to 2.89 children cared for).

Multiplying our estimate of 339 caregivers in a year by 2.40 children gives an estimate of 814 children per year with a caregiver arraigned in New Britain. Using the limits of the confidence interval for number of children per caregiver, we estimate that between 647 and 980 children have a caregiver arraigned in a year at the New Britain Superior Court.

There are important limitations associated with these estimates. One limitation is that we are dependent on clients being candid in their responses to attorneys' questions about whether they have children; we are also dependent on candidness in response to survey items. A second limitation is that we cannot be sure how the particular days (and portion of the year) included here are representative of the entire year. And as noted earlier, there are segments of the population that we did not sample (e.g., walk-in clients of public defenders; clients with private representation); therefore the numbers of arraigned caregivers and the number of affected children are very likely greater than our estimates.

Demographic Profile of the Children and Caregivers

Profile of children. The demographic profile of the children and caregivers is summarized in Table 1. The children were young – the mean age was 6.7 years, and 45.4% were age 5 or below. For most children (79.1%) the arraigned caregiver was a legal parent or guardian; while the difference was not statistically significant, in our sample legal parenthood/guardianship was more likely when the caregiver was female (percentages were 85.7 for children with female caregiver vs. 68.8 for those with a male caregiver). A majority of children lived with the caregiver prior to arrest, but the likelihood of children living with the caregiver prior to arrest was significantly greater for female caregivers (75.0%) than for male caregivers (42.5%), $\chi^2(1) = 8.77, p < .05$.

Profile of caregivers. Most caregivers (75.6%) were male; caregiver race/ethnicity varied, with the largest group being Latin American or Hispanic (48.9%).

Table 1: Demographic Profile of Children and Caregivers in Sample

Children's Characteristics (N = 108)			
Children's Age	Category	Mean = 6.7 years Median = 6.5 years Range: Prenatal to 16	
	5 years old or below	n = 49 (45.4%)	
	6 to 10 years old	n = 37 (34.3%)	
	11 to 17 years	n = 22 (20.4%)	
Children's Gender	Female child	n = 59 (54.6%)	
	Male child	n = 49 (45.4%)	
Gender of Child's Caregiver	Female caregiver	n = 28 (25.9%)	
	Male caregiver	n = 80 (74.1%)	
Caregiver is Child's Legal Parent/Guardian	Yes	All Caregivers	n = 79 (73.1%)
		Female Caregivers	n = 24 (85.7%)
		Male Caregivers	n = 55 (68.8%)
	No	All Caregivers	n = 29 (26.9%)
		Female Caregivers	n = 4 (14.3%)
		Male Caregivers	n = 25 (31.3%)
Child Lived with Caregiver Prior to Arrest ^b	Yes	All Caregivers	n = 55 (50.9%)
		Female Caregivers	n = 21 (75.0%)
		Male Caregivers	n = 34 (42.5%)
	No	All Caregivers	n = 53 (49.1%)
		Female Caregivers	n = 7 (25.0%)
		Male Caregivers	n = 46 (57.5%)
Children's Characteristics (N = 45)			
Caregiver Gender	Female	n = 11 (24.4%)	
	Male	n = 34 (75.6%)	
Caregiver Race/Ethnicity ^a	Latin American or Hispanic	n = 22 (48.9%)	
	White or Caucasian (not Hispanic)	n = 18 (40.0%)	
	African American or Black	n = 9 (20.0%)	
	Native American or Indian	n = 3 (6.7%)	
	Asian	n = 0	

Table Notes:

^aPercentages sum to greater than 100 because caregivers were asked to indicate all races or ethnicities that applied to them.

^bA χ^2 test of independence showed that the likelihood of children living with the caregiver prior to arrest was greater for female than for male caregivers, $\chi^2(1) = 8.77$, $p < .05$.

Lost Supports When a Caregiver Enters the Criminal Justice System

The most important question addressed by the present study concerned supports the caregiver had been providing, which might be lost to the child due to the caregiver's arrest. Table 2 shows percentages of children who were receiving each type of support from the arraigned caregiver in the month prior to arrest. Some supports are very unlikely to be needed by young children (e.g., not yet school-age), including help with homework or projects, talking with teachers, coaches, etc., and listening to personal problems. For those three supports we therefore only included data for children age 6 and above (these supports are indicated in Table 2 by superscripts).

Supports provided – total sample. Results in Table 2 indicate that caregivers generally reported being quite involved in children's lives. Most caregivers, 88.9%, provided at least three of the various types of support (92.6% provided at least one; this result is not shown in the table). Each type of support was provided by well over 50% (except for medical or special needs at 25%).

Supports by caregiver gender, legal guardianship, and living arrangement. Comparisons were done for each type of support, to see whether children were more likely to receive that support from (a) male or female caregivers, (b) caregivers who were or were not their legal parent/guardians, and (c) caregivers who did or did not live with children prior to the arrest. Significance tests were done using the χ^2 test of independence.

Results showed that large majorities of both male and female caregivers provided at least three types of support (86.3% for male caregivers and 96.4% for female caregivers). Although children were more likely to receive most supports from a female caregiver than from a male caregiver (statistically significant differences are indicated in Table 2 with an asterisk and green highlighting), results show that caregivers of both genders were heavily involved.

Both guardians (89.9%) and non-guardians (86.2%) were very likely to provide at least three types of support. There was one statistically significant difference by whether the child's caregiver was a legal parent/guardian: non-guardians were more likely to help with homework or other projects. We are not sure why this might be, but the more important finding may be the relative lack of differences, and the high rates of support provided by both legal guardians and non-guardians.

Comparisons showed that caregivers who lived with the child prior to the arrest provided more support than those who did not - significant differences on four of the eight types of support, as well as for providing three or more types of support (see Table 2). However, those not living with the child were still quite likely to provide at least three types of support (77.4%; the value was 100% for those living with the child).

Children Witnessing the Caregiver's Arrest

How frequently children witnessed the arrest. Previous research has shown that being present for a parent's arrest can be traumatizing and is associated with posttraumatic stress (Phillips & Zhao, 2010) and internalizing and externalizing problems (Roberts et al., 2013). An important question in the present study was therefore how frequently the child witnessed the arrest.

Results show that witnessing the caregiver's arrest was relatively rare – 19 children (17.6%) witnessed the arrest. However, if our earlier estimate of 814 affected children is correct, then the number of children witnessing a caregiver's arrest per year in towns served by the New Britain Superior Court is estimated at 17.6% of 814, or 143. It is important to note that (a) this number is likely an underestimate for reasons discussed earlier (e.g., not including walk-in public defender clients in the study), and (b) the number for the entire state of Connecticut must be much larger.

How frequently children witnessed violence. The 19 children witnessing the arrest had a total of 10 caregivers (i.e., some of the children were together, witnessing the arrest of the same caregiver). These caregivers were asked whether any of their children witnessed violence. Of the ten caregivers, five said at least one child saw the parent being handcuffed, two reported that a gun was

pointed at the caregiver, and one reported a baton pointed at the caregiver.

Caregivers providing care at the moment of arrest. Thirty one percent (14 out of 45) of caregivers surveyed were responsible for watching children at the time of their arrest, but most of them (12 of the 14) also had another caregiver present to take responsibility. The arresting police officer only discussed with two of the caregivers services that were available for children. Two other caregivers reported that the officer merely informed them that the Department of Children and Families may get involved.

Table 2: Percentages of Children Receiving Support in the Month Prior to Caregiver's Arrest

Type of Support	Percent of Children Who Had Been Receiving Support From Arraigned Caregiver					
	By Caregiver Gender		By Caregiver Guardianship		By Caregiver Living Arrangement	
	Male Caregiver (n = 80)	Female Caregiver (n = 28)	Legal Guardian (n = 79)	Non-Guardian (n = 29)	Living with Child (n = 55)	Not Living with Child (n = 53)
Overall (N = 108)						
Financial support	87.0	100*	89.9	79.3	90.9	83.0
Helping at least once a week with homework/projects	86.4 ^a	100 ^{a*}	81.0 ^a	100 ^{a*}	92.9 ^a	80.6 ^a
Listening or helping with personal problems	86.4 ^a	100 ^{a*}	83.3 ^a	94.1 ^a	89.3 ^a	83.9 ^a
Talking with teachers, coaches, etc.	81.4 ^a	100 ^{a*}	76.2 ^a	94.1 ^a	92.9 ^a	71.0 ^{a*}
Transportation at least once a week	79.6	89	76	81	94.5	64.2*
Watching the child at least once a week	74.1	89.3*	74.7	72.4	87.3	60.4*
Government assistance	59.3	78.6*	62.0	51.7	76.4	41.5*
Care at least once a week for medical or special need	25.0	32.1	29.1	13.8	32.7	17.0
At least 3 types of support	88.9	96.4	89.9	86.2	77.4	100.0*

Table Notes:

^a Percentages only include school-age children, age 6 and above (n = 59 children).

* Asterisk and green highlighting indicates a statistically significant χ^2 test of independence.

CONCLUSIONS AND IMPLICATIONS

Conclusions

Several tentative conclusions are warranted based on the findings from this small-scale study. A first conclusion is that it is likely that a large number of children in Connecticut are affected each year by the arrest of a caregiver. Our estimate for the area served by the New Britain Superior Court is 814 children in a year. As discussed earlier this is likely to be an underestimate due to the portions of the population not included in our sampling method (most notably, walk-in clients of public defenders). And while we cannot estimate the number of children in other Connecticut cities and towns, the number is surely large.

A second conclusion is that a non-trivial number of Connecticut children witness a caregiver's arrest. We estimated that 143 children in the area served by the New Britain courthouse witness the arrest in a year. The statewide number must be much larger, for the same reasons discussed in the previous paragraph. The main focus of this report is effects of caregiver arrest on daily life, but it is worth noting that children who witness the arrest are at elevated risk for posttraumatic stress and other mental health issues (Phillips & Zhao, 2010; Roberts et al., 2013).

A third conclusion, most directly relevant to the main purpose of the study, is that caregivers' arrests are likely to have significant effects on children's daily lives. While the present study did not actually examine children's daily lives, we can infer likely effects from arrested caregivers' survey responses. One important issue is the potential loss of financial support. The vast majority (87.0%) of children were receiving financial support from the arrested caregiver, and many (59.3%) were receiving some form of government support (e.g., food stamps). The family may lose some or all financial support if the caregiver's employment is disrupted (either by incarceration or by missing work due to multiple court dates; and future employment opportunities may be limited by a felony conviction; Reinhart, 2012). This loss may be compounded by expenses associated with the incarceration (e.g., the cost of phone calls, commissary to purchase necessary items for the incarcerated caregiver, and travel for visitation). Further, if the family had been receiving government benefits, those benefits may be lost due to a criminal conviction (American Bar Association & Public Defender Services for the District of Columbia, 2009).

Another likely effect on daily life concerns the "little things" that need to happen throughout a child's day. Given the extent to which the caregivers had been involved in day-to-day activities with the children (79.6% provided transportation; 86.4% helped with homework or projects; 86.4% listened or helped with personal problems), caregivers' arrests likely create gaps that families may have a difficult time filling. Particularly important is the fact that most of the children (74.1%) received direct care from the caregiver, which could mean that either the remaining caregiver will have additional responsibilities or will need to scramble to find someone else to help care for the children (which could mean additional expenses).

These likely effects on daily life mean it will be more difficult for the family to provide the things children need, such as transportation to school and other commitments (e.g., doctor's appointments, games and activities) and help with schoolwork. This difficulty may have a direct impact on children's well-being (e.g. on health or school performance). It may also have an indirect effect by increasing family stress levels (Turney, 2014). The (potentially toxic) stress will be more acute if the arrested caregiver ultimately is sentenced to a term of incarceration, but even if not, the likely multiple court dates can cause significant difficulty (not to mention the potential for job loss and stigma associated with arrest).

A fourth conclusion is that the negative effects on children's daily lives (and potential longer-term problems) are likely substantial for both male and female caregivers. Children whose arrested caregiver was female were more likely to be receiving a variety of supports as shown in Table 2, but male caregivers were still quite likely to be providing multiple supports.

Policy Implications

Based on the findings of the present survey we offer two tentative implications for public policy. One implication is that a process should be developed to assess, shortly after an arrest, whether the caregiver's entry into the criminal justice system will create needs in children's lives. Who would conduct the assessment, and how it would be conducted, are important questions that would need to be answered.

A second implication is that ways of minimizing negative impacts on children should be identified and evaluated. One example might be training law enforcement officers on (a) understanding the impact on children of caregiver arrest, and (b) arrest procedures that consider the arrestee's children to minimize harm (Lang & Bory, 2012; Puddefoot & Foster, 2007). The International Association of Chiefs of Police (2014) provided a model policy including, for example, instructions to question and handcuff the caregiver out of the child's sight and hearing (if it is reasonable and prudent to do so).

Another way to minimize impact on children could be, in cases where the caregiver is convicted of an offense, encouraging consideration of the children and families at the time of sentencing. A goal might be to reduce the chances that a caregiver receives a sentence involving incarceration that is not necessary for public safety and/or when the likely harm the separation would cause the children outweighs the potential benefits of incarceration. This could be attempted through the use of family impact statements (Cramer, Peterson, Kurs, & Fontaine, 2015). Cramer et al. (2015) gathered information from stakeholders in New York City and San Francisco, where family impact statements have been implemented, and provided recommendations for development and implementation. Recommendations included ensuring a collaborative process (e.g., gaining buy-in from key stakeholders), integrating the concept of effect on the family into the pre-sentence investigation (e.g., in San Francisco, the pre-sentence investigation report includes a section on family impact), and translate into practice (e.g., developing training curriculum for stakeholders).

It is important to recognize barriers to effective implementation of family impact statements or other practices and policies for meeting children's needs. Peterson, Fontaine, Kurs, and Cramer (2015) discussed implementation challenges including difficulty generating buy-in, implementation taking a long time, and lack of knowledge about what practices are effective. Family impact statements in particular are not widely used, and there is a lack of evaluation data (Cramer et al., 2015).

Limitations and Future Research

We believe the present study provides valuable information given the near-absence of data on the effect of caregiver arrest on children's daily lives. But we acknowledge that there are important limitations and a need for additional research. One limitation, discussed earlier, concerns portions of the population not sampled in the current study. A second limitation is that we only inferred effects on daily lives using information gathered shortly after the arrest. Future work might follow families over time, collecting data to see how children's lives have changed since a caregiver's arrest. A third limitation is that we can only speculate on what new practices or policies may be effective for meeting children's needs in daily life. Future work implementing and evaluating practices is needed.

Endnote

¹We estimated the number of caregivers arraigned in a year at the New Britain courthouse by multiplying the average of 1.36 arraigned per day by the number of court days in a year. The number of court days is the number of weekdays, approximately 261, minus the number of state holidays (12), or 249. The calculation is $1.36 \times 249 = 339$.

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Appendix A
Sheet Shown to Caregivers to Describe Types of Support

Kinds of Support You Might Give to Children
*** During the month before your arrest**

- **Financial support (helping to pay for food, rent, clothes, bills, or other things children need)**
- **Benefits (such as SNAP/food stamps, health insurance, Section 8 housing, or others)**
- **Watching the child at least once a week when no other caregiver is present**
- **Care at least once a week related to medical or special needs**
- **Transportation at least once a week (to school, activities, visiting friends or family, etc.)**
- **Talking with teachers, coaches, etc.**
- **Helping at least once a week with homework or other projects**
- **Listening or helping with personal problems**
- **Other kinds of support**