Parenting programmes for reducing negative outcomes for incarcerated fathers and their families
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- [x] Crime and Justice
- [ ] Education
- [ ] Disability
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- [ ] Nutrition
- [x] Social Welfare
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- [x] Maybe
- [ ] Yes
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- [ ] Other

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TITLE OF THE REVIEW

Parenting interventions for reducing negative outcomes for incarcerated fathers and their families

BACKGROUND

Due to the enforced absence from the daily enactment of parenting duties, such as feeding, playing or assisting with homework, the role and experience of parenting is fundamentally different for incarcerated rather than domiciliary parents. As a result, fathers who are prisoners can feel illegitimate and unrecognised in their role as parent (McCrudden, Braiden, Sloan, McCormack & Treacy, 2014). This sense of illegitimacy can leave some fathers with feelings of guilt, shame or helplessness (Boswell & Wedge, 2002), and on the outside of their children’s lives. Additionally, perceptions of fatherhood are influenced by men’s normative view of masculinity (McLaughlin & Muldoon, 2014). The restricted ability to enact the role of father, as well as the perceived incompatibility of the role with the role of prisoner can result in fathers being unwilling and unable to behave as competent fathers. This in turn has negative consequences for both the prisoners and their families both during time spent in prison and on their release.

The extent of inter-generational incarceration suggests that many prisoners have had poor role-models and experiences of being fathered themselves, undermining their parenting skills but also placing their children at increased risk of incarceration. While imprisoned fathers who maintain a positive relationship with their children are six times less likely to re-offend (Social exclusion Unit, 2002), the nature and experience for families who visit prisons can leave prisoners and families with feelings of frustration and guilt undermining the continuation of visits. This has been linked to increased risk of negative outcomes in terms of well-being, behavioural problems, negative social interaction and cognitive delays amongst children of incarcerated parents (Eddy & Poehlamann, 2010).

Parenting Interventions are recognised as a potential pathway to support incarcerated parents and their families (Skar, Tetzchner, Clucas & Sherr, 2014). Research indicates improved outcomes for both the incarcerated parent and their family (Landreh & Lobaugh, 1997). While the majority of policy, interventions and research has been targeted toward mothers who are incarcerated (Travis & Waul, 2004), the last decade has seen an increase in research aimed specifically at exploring the cost of imprisonment of fathers on their partners and children (Meeks, 2007). Results from this research indicate that the value of some elements of parental interventions were particularly high for incarcerated fathers (Palusci, Crum, Bliss, & Bavolek, 2008). However, other studies highlight potential adverse effects (Skar et al., 2014). In light of these specific and contradictory findings, the purpose of this proposed review is to (a) Synthesise individual findings and (b) explore potential explanations for contradictory results.
OBJECTIVES

1. Synthesise research findings of individual studies on parenting interventions for incarcerated fathers in improving fathers parenting skills and mental health.

2. Synthesise the evidence on the effectiveness of parenting programs for incarcerated fathers in reducing post-release recidivism.

3. Synthesise the evidence relating to the barriers and facilitators of implementing successful prison based parenting interventions.

EXISTING REVIEWS

A search conducted on Cochrane, Campbell and PROSPECT databases revealed one registered title of a systematic review involving parenting programmes for incarcerated parents (McLaughlin, Dempster & Livingston, 2014). Since initiating the Title Registration Process for our own review the protocol for McLaughlin et al. has been published (2016). This has enabled us to identify key points of difference between the current project and the existing protocol.

While a gender-neutral review of parenting interventions are important, identifying the unique situations of incarcerated fathers is a critical task (Dyer, Pleck & McBride, 2012). Societal norms surrounding parenthood result in different attitudes and expectations relating to the roles of fathers and mothers (Skar, 2014). As a result, judicial systems often recognise motherhood as a mitigating aspect when formulating policy surrounding visitation facilities as well as sentencing practices (Minson, 2013). However, these policies rarely take into account the needs of fathers to interact meaningfully with their families in the same way. This results in societal expectations and practices emphasising the incompatibility of father and prisoner identities (Dyer, et al. 2012). Such an approach relegates the father-child relationship to a secondary role within the family (Hairstone, 1998). This is in spite of the fact that father absence represents the single most important predictor of subsequent criminal behaviour (LaRosa & Rank, 2001). In addition, Hjalmarsson & Lindquist (2012) emphasis the potential impact of incarcerated fathers as negative role models with 63% of boys with a convicted father going on to offend themselves (Farrington, et al., 2001). As such, fathers’ experiences, needs and responses from parenting interventions may differ (Skar et al. 2014).

A significant difference between the existing Cochrane Protocol and the current review is the inclusion of both quantitative and qualitative methods. By incorporating qualitative designs the current title can evaluate not only the effectiveness of prison based parenting interventions but also explore barriers and facilitators to effective participation and implementation (Pope & Mays, 1995).
Finally, the current review includes within group designed studies. The nature of the prison system is not conducive to the consistency and continuity required of an RTC. Early release schemes, disciplinary procedures and prisoner movements can undermine attempts to maintain strict control of any intervention. By including within group and no control group studies the present proposal increases the number of papers eligible for review.

Taken together this emphasises the importance and justification of conducting a systematic review aimed specifically at the impact of parenting interventions on incarcerated fathers.

**INTERVENTION**

Eligible interventions will include all parental training and educational interventions with an emphasis on parental knowledge of child development & behaviour, as well as enhancing effective parental communication, promoting incarcerated fathers engagement with their family. This will include individual and/or group based programmes as well as short intense interventions and longer term stage interventions.

Comparison groups will be within group pre-intervention levels, non-incarcerated father groups, no intervention, treatment as usual or waiting list controls.

**POPULATION**

Incarcerated fathers with children under the age of 18.

**OUTCOMES**

**Primary Outcome**

1. Changes in parenting skills, mental health and long term implications for reoffending of incarcerated fathers.

   i). Parenting skills changes will be measured in knowledge of child behaviour and development, knowledge of parenting styles, parental attitudes, father-child interaction & self reported parental confidence.

   ii). Mental health changes will be measured using psychometric scales of parental stress, self-esteem & general health and well being

**Secondary Outcomes**

1. Impact of parenting intervention on fathers’ self-identity.

2. Improvements in child functioning, well-being & behaviour.
3. Identify barriers and facilitators of implementing successful prison based parenting interventions.

Short term effects will be considered at the end of treatment in comparison to pre-intervention and/or control group levels.

Medium/Long term effects will be evaluated at follow up data collection points.

**STUDY DESIGNS**

Quantitative design studies involving comparison groups of non-incarcerated father groups, no intervention, treatment as usual or waiting list controls will be included in this review with over 35 studies already identified for consideration (See Table 1 for a brief description of examples of potential studies to be included). Quantitative designs studies included will incorporate psychometric scales. Measures will be taken from incarcerated fathers and their families, as well as prison and programme implementation staff. Qualitative design studies included will incorporate observational and interview measures.

Qualitative studies will be included in order to identify barriers and facilitators of implementing successful prison based parenting interventions. Additionally, qualitative studies will be used to identify future research questions as well as potential directions of future research.

Quantitative designs will be used to assess primary outcomes knowledge of; child behaviour and development, knowledge of parenting styles, parental attitudes, self-reported parental confidence, psychometric scales of parental stress, self-esteem and general health & well being

Quantitative designs will also be used to assess secondary outcomes: identification of any adverse effects on incarcerated fathers and their families, improvements in child functioning, well being & behaviour, long term implications for reoffending, well being and social integration for incarcerated fathers and children.

Quantitative data will be synthesised using meta-analysis when it is either possible or appropriate to do so. Narrative analysis will be applied in all other cases. Qualitative data will be thematically analysed and related to quantitative data in the narrative findings.
<table>
<thead>
<tr>
<th>No.</th>
<th>Authors/ Country</th>
<th>Treatment group</th>
<th>Comparison group</th>
<th>Intervention</th>
<th>Study design</th>
<th>Measures</th>
<th>Main findings</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Block et al. (2014) USA</td>
<td>309 incarcerated fathers</td>
<td>104 incarcerated father control group</td>
<td>12 sessions over 6 weeks using the InsideOut Dad Program aimed at improving father-child relationships. Topics included: 1. Getting started 2. About Me 3. Spirituality 4. Emotions 5. Relationships 6. Fathering 7. Parenting 8. Discipline 9. Fathering from the Inside 10. Ending Program</td>
<td>Within and between groups comparison.</td>
<td>Coping Self efficacy Scale (CSES) InsideOut Dad Knowledge Assessment (IODKA)</td>
<td>Treatment group reported improvements in CSES, IODKA, PARI Scale and phone contact in comparison with controls. No significant changes in attitude scale. Qualitative outcomes highlighted satisfaction with the comprehensive nature of the course and utility of the course handbook. Lack of planned activities, Family participation, Attrition levels as well as Follow-up practices were highlighted as areas to improve. Facilitators indicated potential for more therapeutic &amp; emotional processing sessions, need to limit group sizes, as well as</td>
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<tr>
<th>2</th>
<th>Bayse, Allgood &amp; Van Wyk (1991)</th>
<th>27 incarcerated fathers</th>
<th>27 waiting list control group.</th>
<th>Treatment group completed 4x 2.5 Hour sessions covering the following topics;</th>
<th>Within and between groups comparison</th>
<th>2 page course evaluation form</th>
<th>Course evaluation form indicated the utility of the normal family functioning, rebuilding trust, and intergenerational connections.</th>
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<tr>
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<td>1. Narcissism, appropriate self-disclosure, decision making, &amp; intergenerational transmission of attitudes, behaviours and values.</td>
<td></td>
<td>The ‘Selfism’ (NS) Scale</td>
<td>Results indicated significant differences between the treatment and control groups in NS, as well as FACES III (Now) sub-scales; Cohesion and Distance from Center. FACES III (IDEAL) sub-scale; Cohesion.</td>
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<td>2. Healthy Family relationships, communication, trust, self-control reciprocal fairness,</td>
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<td>Family Adaptability and Cohesion Evaluation Scale (FACES III) - (NOW) versus (IDEAL)</td>
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<td>3. Negotiation skills, discipline, responsibility, altruistic love and Self-esteem</td>
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<td>18 fathers from the treatment group passed the final exam.</td>
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<td>3.</td>
<td>Cornille et al. (2006) US</td>
<td>46 in face to face delivery,</td>
<td>17 through distance learning using video conferencing</td>
<td>Four 3-hour sessions using the DADS programme aimed at developing new attitudes towards parenting and teach them new skills. Topics included;</td>
<td>Within and between groups comparison</td>
<td>Parent Attitude Research Instrument (PARI Q-4)</td>
<td>Distance learning group reported positive change in PARI Q-4 subscale scores in; Self-expression, Discipline, Refraining</td>
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<td></td>
<td>Qualitative semi-structured interview with 4 video conference participants</td>
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1. Developing self,  
2. Developing Safety & sensitivity,  
3. Play skills,  
4. Communication skills.  
5. Stress management,  
6. Discipline,  
7. Experiential skills

| 4 | Eddy, Martinez Jr. & Burraston (2013) | 182 incarcerated parents | 177 Services as usual | Treatment groups consisting of 15 participants in each met for 2.5 hr sessions 3 times a week for 12 weeks. Sessions utilised the Parent Management Training (PMT) grounded in a social action learning theory (SLT). | Within and between groups comparison. | Parent Stress  
Perceived Stress Scale  
Parent Depression  
Likely To Play An Active Role In Child’s Life  
Positive Parent-Child Interaction  
Ease Of prisoner-Caregiver relationship  
Closeness To Caregiver  
Family Contact in Prison | Significant effect of treatment on Parent Stress, Parent depression, & Positive Parent-Child interaction. In the case of interactions between interventions and baseline levels interventions impacted parents who needed the intervention most. | Significant effect of treatment on Parent Stress, Parent depression, & Positive Parent-Child interaction. In the case of interactions between interventions and baseline levels interventions impacted parents who needed the intervention most. | Face to face delivery group reported positive change in PARI Q-4 subscale scores; Refraining from physical punishment | No information on qualitative results |
| 5 | Harrison, K. (1997). | 15 incarcerated fathers | 15 Incarcerated father watched videos and participated in discussions but received no advice, instruction or encouragements toward appropriate parenting. | Treatment group attended 2.5 hour sessions 3 times a week for 6 weeks. Sessions focused on child development, behavioral management, family relationships, and communication. Topics included:  
1. Three weeks of developmental stages from birth to 2.5 years following the Concept Media’s Curriculum  
2. Two weeks of human development 2.5 to 6 years  
3. Three sessions on behavioral management techniques drawing concepts from the Nurturing Program  
4. 1 session on the role and problems of stepparents | Within and between group comparison | Adult Adolescent Parenting Inventory (AAPI)  
Index for Self-Esteem (ISE)  
Children self-perception profile for Children (or Adolescents) (SPPC) | Results indicated a significant time x treatment interaction with the treatment group reporting a greater attitudinal change |
|---|---|---|---|---|---|---|---|
5. Three sessions drawn from the STEP program exploring communication and building child confidence

|   | Landreth, G. L., & Lobaugh, A. F. (1998). | 16 incarcerated fathers | 16 control visits as normal | Treatment group received 1.5 hour training sessions in filial therapy between fathers and children for 10 weeks. Sessions focused on;  
   | Within and between group comparison | The Porter Parental Acceptance Scale (PPAS) | Parental Stress Index (PSI) | The Joseph Preschool and Primary Self-Concept Scale (JPPSCS) |
|   | Palusci, Crum, Bliss & Bovolek, (2008) | 484 Incarcerated parents | 296 Parents in at-risk population | Groups participated on the Helping Your Child Succeed program which was grounded in the Family Nurturing Program for 2 hours weekly for 8 weeks for groups based in the community and 10 weeks for those in prison context, Topics included;  
   | Within and between group comparison | Adult Adolescent Parenting Inventory (AAPI-2) | Child Abuse Potential Inventory | No significant results based on location |
|   |   |   |   | Fathers showed lower levels but greater improvement on AAPI-2 scores in all groups with greater gains in Empathy, expectations and use of Corporal punishment |
2. Realistic and developmentally appropriate expectations
3. Family rules/limit setting
4. Personal power/negative control
5. Managing anger
6. Corporal punishment and alternatives
7. Choices: Natural and logical consequences
8. Listening, communication and confrontation
9. Communication and confrontation
10. Assessment/seal the learning

<table>
<thead>
<tr>
<th>8</th>
<th>Robbers, M. L. (2005). 72 incarcerated fathers</th>
<th>Treatment group met once a week for 1.5 hours for 10 weeks. Treatment aimed to increase participants knowledge responsibility and engagement with their children</th>
<th>Frequency of contact Adult-Adolescent Parenting Inventory (AAPI)</th>
<th>Treatment group reported increased levels in family contact, AAPI, and in KJS levels when compared to control and pre-test levels</th>
</tr>
</thead>
<tbody>
<tr>
<td>31 incarcerated fathers</td>
<td>Within and between groups comparison Quality of relationship with mother (QRM) Knowledge of Justice System (KJS)</td>
<td></td>
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</table>
Both groups participated in the International Child Development Program aimed at increasing fathers’ awareness of their children’s psychosocial needs. Within and between group comparison.

- Parent-Child Conflict Tactics Scales (PCCTS)
- Parenting Strategy (PS)
- Child Management (CM)
- Emotional engagement with the child (WWC)
- Health and quality of life (HQL)
- The Satisfaction with Life Scale (SLS)
- The Generalised Self-Efficacy Scale (GSES)
- The Basic Emotion Trait Test (BETT)
- The Hospital and Anxiety and Depression Scale (HADS)
- The Strength and Difficulties Scale (SDQ)

Before the treatment prison group self-reported better parenting skills and poorer psychosocial health than comparison group. Both groups improved in parenting strategies.

Comparison group improved on emotional engagement and positive discipline while the prison group reported no change or lower scores.

Interview results indicate prison fathers became more aware of their paternal role but also found the treatment challenging.

Participant interviews (N=20)
<table>
<thead>
<tr>
<th>Study</th>
<th>Authors</th>
<th>Number of Treatment Group</th>
<th>Number of Control Group</th>
<th>Intervention Details</th>
<th>Measurement</th>
<th>Results</th>
</tr>
</thead>
<tbody>
<tr>
<td>10</td>
<td>Skarupski, et al. (2003)</td>
<td>42 incarcerated fathers</td>
<td>47 incarcerated fathers</td>
<td>Treatment group participated on the long distance Dads Programme. Participants attended once a week for 12 weeks. Topics covered included: 1.) Fatherhood Self-Assessment 2.) Character of a Man 3.) Similarities and Differences 4.) My Anger: Friend or Foe? 5.) My Child’s Life I 6.) My Child’s Life II 7.) Communication 8.) Healthy Relationships 9.) Frustration and Discouragement 10.) Looking Beyond the Walls 11.) What Did we Miss 12.) Fatherhood: The Next Level</td>
<td>Care giver telephone interviews (N=18)</td>
<td>Two outcomes showed better outcomes for participants in the LDD program as a result of participation: Self-reports of the number of letters sent to child; and Self-reports of total contact with the child. These self-report findings were not corroborated by the caregiver reports.</td>
</tr>
<tr>
<td>11</td>
<td>Wilczak, &amp; Markstrom (1999).</td>
<td>21 incarcerated fathers</td>
<td>21 waiting List Control</td>
<td>Treatment group attended eight 1.5 hour long sessions over three weeks using a modified STEP Program aimed at increasing fathers’ locus of control and parental satisfaction. Sessions covered;</td>
<td>Content test Locus of control Cleminshaw-Guidubaldi Parent Satisfaction Test</td>
<td>No differences between treatment and control groups at pre-test. Treatment group showed increased knowledge in Content Test,</td>
</tr>
</tbody>
</table>
1. Understanding your child’s behaviour
2. Understanding more about you as a parent
3. Encouraging your child
4. Listening to your child
5. Expressing your feelings appropriately to your child
6. Discipline
7. Video: common sense parenting
8. Dealing with your separation and reintegration with your family

Treatment group showed increased levels in parent performance subscale of the locus of control scale; Total score, Parent efficacy, & parents belief in fate or Chance

Treatment group showed increased levels in parent performance subscale of the parent satisfaction scale; General satisfaction & Parent performance.
REFERENCES


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ROLES AND RESPONSIBILITIES

Please give a brief description of content and methodological expertise within the review team. It is recommended to have at least one person on the review team who has content expertise, at least one person who has methodological expertise and at least one person who has statistical expertise. It is also recommended to have one person with information retrieval expertise. Please note that this is the recommended optimal review team composition.

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POTENTIAL CONFLICTS OF INTEREST

There are no conflicts of interest

PRELIMINARY TIMEFRAME

Note, if the protocol or review are not submitted within 6 months and 18 months of title registration, respectively, the review area is opened up for other authors.

- Date you plan to submit a draft protocol: May 2017
- Date you plan to submit a draft review: January 2018
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Form completed by: Daragh Bradshaw Date: November 2016