

## **Reducing Traumatic Stress in Children of Arrested Parents: Cross-Systems Collaboration**

### **The Problem**

The arrest of a parent can be a traumatic experience for a child. From the child's perspective, a parent's arrest typically involves the sudden, unanticipated, and possibly violent removal of a loved one from the home. In addition, children are often uncertain when they will see their parent again and who will care for them. Following such an arrest, children are at increased risk for posttraumatic stress symptoms and other mental health concerns, delinquent behavior, changes in living situation, and financial hardship.

Young children are particularly vulnerable to the separation from a parent under these circumstances, and 50% of children of incarcerated parents are under nine years old<sup>[1]</sup>. A parent's arrest may also compound the distress children experience from other potentially related traumatic events, including domestic or community violence, neglect or abuse, or distribution or use of illegal substances.

Very little is known about these children who are left behind. There is virtually no data collected by police departments about the children of arrestees, and few published studies exist about these children. However, we estimate that each year, between 3.5 and 6 million children in the United States -- and from 35,000 to 60,000 children in Connecticut -- experience a parent's arrest. Police officers are not typically trained or equipped to serve the mental health needs of children, and may feel helpless when children are distressed. Too often, these children and remaining family members are left behind without resources or support to promote their recovery and healthy development following the arrest.

### **Connecticut's Response**

In August of 2011, CHDI was awarded a 3-year grant from the Institute for Municipal and Regional Policy (IMRP) at Central Connecticut State University to develop and pilot a collaborative response model to support children following the arrest of a parent or other caregiver (including relatives, foster parents, or others who provide care for a child). The [Child Health and Development Institute's \(CHDI\)](#) primary partners in this work are the Connecticut Department of Children and Families (DCF), including their EMPS Mobile Crisis program, and the Connecticut Alliance to Benefit Law Enforcement (CABLE).

Called **REACT (Responding to Children of Arrested Caregivers Together)**, the model was developed through a comprehensive literature review, consultation with national experts, surveys and focus groups, and a statewide advisory board comprised of state and local law enforcement, child welfare, EMPS mobile crisis, corrections, probation, family members, and others.

The goals of REACT are to:

- (1) Minimize traumatic stress and distress to children
- (2) Support children's healthy relationships with arrested and non-arrested parents
- (3) Provide resources to, and reduce the burden on, law enforcement when children are present for a parent's arrest
- (4) Improve collaboration across the traditionally quite separate law enforcement, child welfare, mental health, and corrections systems.

The REACT model includes:

- *Training:* Joint training for law enforcement, Emergency Mobile Psychiatric Service (EMPS) clinicians, and child welfare workers on the effects of a parent's arrest on children, minimizing distress to children, and how to support children following arrest
- *Policy and Procedures:* Work with law enforcement to modify policies and procedures to support children following a parent's arrest without compromising safety
- *Collaboration:* Enhanced collaboration between law enforcement, EMPS clinicians, child welfare, and corrections, when a child's parent is arrested
- *Clinician Response:* Assurances that a trained EMPS clinician can respond acutely to a child when their parent is arrested, and will follow-up as needed for up to 45 days, including linkages to other services
- *Technical Assistance:* REACT staff will work with participating police departments and other local partners to support implementation

### **Next Steps**

CHDI has just begun to pilot REACT in Waterbury with the support of the Waterbury Police Department, Wellmore Behavioral Health, and the Waterbury DCF area office. A second city will be selected for piloting REACT in 2013. In addition, CHDI is offering eight introductory REACT trainings across the state over the next two years.

*To learn more about REACT, please contact:*

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**To learn more about child trauma visit: [www.kidsmentalhealthinfo.com](http://www.kidsmentalhealthinfo.com)**

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[1] Glaze & Maruschak, 2008

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