# i-HOP: Assisting Health Professionals to support children of offenders



'I just bottle it up...I don't want to tell anyone'

2x

Children with a parent in prison are twice as likely to experience mental health problems.

Find out how to support offenders' children and their families

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# Who are we? i-HOP is a service that supports professionals to work effectively with offenders' families with children, which collates and promote examples of services, interventions, resources, policy and research around this vulnerable group.

Barnardo's in partnership with POPS have been commissioned by the **Department for Education** to deliver this service as an online information hub with a focus on England (www.i-hop.org.uk). The service is targeted at professionals who work with offenders' children and their families, from numerous spheres including education, health and social care as well as the criminal justice system.

Joseph Murray, David P. Farrington, Ivana Sekol and Rikke F. Olsen, *Effects of parental imprisonment on child antisocial behaviour and mental health: a systematic review*, The Campbell Collaboration, University of Cambridge, September 2009

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"We was there when he got locked up."
7 year old girl

It is estimated that there are 200,000 children a year that experience the imprisonment of a parent. Research increasingly shows the impact that parental imprisonment can have on these children – poorer outcomes, stigma, isolation, health and financial difficulties. Currently there is no routine identification of who these children are and therefore no way of ensuring their needs are met.

### Children of offenders and health services

"I was pregnant when (partner) went away, but I would have liked to have had more help in people talking to me and telling me what to expect ."

Mother

Children with a parent in prison are at higher risk of physical illness¹ and are twice as likely to experience mental health problems.² Unfortunately, because of the disadvantage and stigma that these children often experience, there can be reluctance for families to talk about and seek help when a parent is in prison. And given that there is no systematic identification of these children and families by local authorities, prisons, police or children's services, they can often be left feeling isolated and with a lack of support.

## "The health visitor knows that dad is in prison... She is supportive." Parent

Health care providers in secure settings can play a vital role in ensuring parents are aware of their children and babies' physical and mental development and health needs. Health care professionals in the community such as Midwives and Health Visitors are the very first universal service providers that children come into contact with. The central role of GP surgeries and community health services can be well placed to be a non-judgmental, confidential space for families to disclose information. Because of the sensitivity of the issue, and reluctance of some to engage with support services, children and families may wish to inform one health care professional, or they might be happy for this information to be shared appropriately with other agencies who can offer support. With their responsibility to safeguard their patients and promote their wellbeing, health care professionals play an integral role in ensuring



that the needs of these children are recognised and acted upon.

#### How can i-HOP support health services?

"I found your service to be very approachable and well informed. I was amazed at how much information you could provide me with." GP who had used i-HOP

The Department for Education have recognised the needs of this group of children and for them to be given appropriate support, through the funding of i-HOP. COPING, a recent large-scale European study notes that recognising children of prisoners as a potentially vulnerable but resilient group is a means to strengthening their mental health.<sup>3</sup> The National Offender Management Service (NOMS) recognises the link between parental imprisonment and children's mental health<sup>4</sup>. The multiagency safeguarding of children of offenders features in the Working Together guidance.<sup>5</sup> Poverty and poor physical and mental health in prisoner's families are inextricably linked, resulting in them being more likely to have multiple needs and access health services<sup>6</sup>.

#### "(i-HOP is) a valuable source of information" Health professional

i-HOP is a national one stop information and advice service for all professionals working with

children and families of offenders. It brings together information that can support health care professionals in working with children affected by parental offending:

- details of local and national services that work specifically with children and families of offenders, to signpost patients to
- details of local multi-agency training for professionals
- **research** into the impact of imprisonment on children and families' health
- resources for professionals, children and family members to help develop knowledge of the impact and practicalities of parental imprisonment
- existing **strategies** for multiagency working that are being used by local authorities
- **guidelines** to support health staff to incorporate policy in their practice

i-HOP recognises that health care professionals work in busy environments with demands on their time. i-HOP puts all the resources in one place so help and information is there when it's needed.

#### Note:

Children's and parents' quotes are taken from interviews with children and families in a Barnardo's report: Owen Gill, Every night you cry: Case studies of 15 Bristol families with a father in prison, Barnardo's, 2009

Professionals quotes are taken from responses to i-HOP survey March 2014 and quotes from informal i-HOP helpline feedback.

#### References:

- 1 Rowntree Smith R, Grimshaw R, Romeo R, Knapp M, Poverty and disadvantage among prisoner's families, Joseph Rowntree Foundation, 2207
- 2 (SCIE (Social Care Institute for Excellence) (2008) Guide 22 Children of Prisoners; Maintaining Family Ties, www.scie. org.uk)
- 3 Jones A D and Wainaina-Woźna A E (Eds.), COPING: Children of Prisoners, Interventions & Mitigations to Strengthen Mental Health, University of Huddersfield, 2013
- 4 NOMS, An Introduction to NOMS Offender Services Cocommissioning, 2014
- 5 Department for Education, Working together to Safeguard children, 2013
- 6 Rose Smith, Roger Grimshaw, Renee Romeo and Martin Knapp, *Poverty and Disadvantage among prisoners families*, Joseph Rowntree Trust, 2007

#### **Examples of existing practice**

**i-HOP supported the work of a GP.** During an appointment a family disclosed that their father was in prison overseas. The GP contacted the i-HOP helpline who **signposted** her to support services such as Prisoners Abroad which were targeted to the families' needs. They also suggested age appropriate **resources** for the children to help them understand what was going on as well as free **e-learning** tools aimed at raising awareness of the children of prisoners amongst professionals.

**Reading Midwives** record in referral forms if new and expectant mothers' babies have a parent or close relative in prison. **Health Visitors** also have a vital role in information sharing in Reading in that they specifically refer families affected by parental imprisonment to their local Children's Centres who have information packs to support families and their needs.

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