

INCARCERATED MOTHERS AND THEIR CHILDREN'S CAREGIVERS: HOW
THEIR RELATIONSHIP IMPACTS THE MOTHER-CHILD RELATIONSHIP

by Jodi S. Ford

A Dissertation Presented in Partial Fulfillment

Of the Requirements for the Degree

Doctor of Philosophy

Liberty University

2022

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2022

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ABSTRACT

Mass incarceration has impacted much of the population in the United States over the last several decades. One of the most significantly impacted groups is women. Over half of incarcerated women are mothers. Mothers are typically the primary caregiver of their children at the time of their incarceration, and most want to maintain a relationship and have contact with their children throughout their incarceration. However, the children's caregiver controls their relationship and contact with their incarcerated mother. The primary purpose of this research was to examine how the incarcerated mother's relationship with her children's caregiver impacts her relationship with her children. This study followed a quantitative design, using questionnaires and semi-structured interviews. The main findings suggest that an incarcerated mother's relationship with her children's caregiver impacts her relationship with her children, and the kinship of the caregiver impacts the amount of contact the mother has with her children. However, the mother's relationship with the caregiver does not necessarily impact the amount of contact she has with the children. Understanding the caregiver's impact on the mother-child relationship can allow incarcerated mothers to work toward fostering positive, productive relationships with their children's caregivers. This understanding can also help correctional agencies encourage the mother to foster positive relationships with her children and their caregivers, ensuring that she has a successful incarceration and a more successful return to society.

Keywords: caregiver, incarcerated mother, children, recidivism, reentry

Dedication

The hours of work this dissertation represents are dedicated to my family, who provided the motivation and encouragement to finish this process. I cannot express how thankful I am for your love and support.

I also dedicate this dissertation to my work family, who often had to deal with a grumpy boss after many late nights. I'm fine, it's fine, everything is fine.

Lastly, I dedicate this work to the incarcerated women I work with daily to remind them they do not have to be defined by the single moment in time that resulted in their incarceration.

Acknowledgments

I would like to thank Dr. Jared Linebach, my dissertation chair, for his guidance and support during this process.

I would also like to thank my reader, Dr. Billy Wilson, who asked tough questions to encourage critical thinking.

Lastly, I would like to thank Dr. Ryan Fox, my high school band pal, for his guidance and support throughout the statistical analysis.

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CHAPTER ONE: INTRODUCTION

Overview

In 2020, the United States had 2.3 million incarcerated individuals housed in state and federal prisons and local jails (Correa et al., 2021; Sawyer & Wagner, 2020). Of this staggering number, over 223,000 were women (Kajstura, 2019). There are also an estimated 500,000 children who have incarcerated parents (Benning & Lahm, 2016). The days of incarcerating women at a significantly lower rate than men are long over. By all indications, the judicial system no longer sympathizes with women who break the law regardless of whether they have children. Of course, women who break the law should face appropriate punishment; however, their children should not also face punishment. Because children cannot control their mother's actions, the criminal justice system should seek to mitigate any negative impacts the children experience. Children of incarcerated parents represent a very vulnerable group that mass incarceration has negatively impacted (Wakefield, 2015), and children of incarcerated mothers in particular should not be subjected to other adverse consequences at the hands of the criminal justice system due to their mother's incarceration.

Several factors impact an incarcerated mother's reentry into society after her incarceration, including the mother's removal from society, the stigma of being a convicted criminal, and the time away from her children (Aiello & McQueeney, 2016; Cooper-Sadlo et al., 2019). Incarcerated mothers often lose contact with their children for numerous reasons, one of which is often due to the caregiver of the children during the period of incarceration. Most incarcerated mothers are single parents who rely on family to help care for their children (Benning & Lahm, 2016). These caregivers have lives of

their own, sometimes leaving the incarcerated mother out of the picture. Another reason mothers lose contact with their children is due to disciplinary issues in prison. Many mothers do their best to maintain good behavior so they are permitted to visit and speak with their children (Benning & Lahm, 2016). However, they are not always successful and, as a result, limit or lose their ability to communicate with their children. Visitation is an opportunity for the mother to increase her feelings of hope, motivation, and self-esteem and increase her trust in others while adjusting to her life in prison (Atkin-Plunk & Armstrong, 2018). However, the prison or the caregiver may take away communication or visitation as punishment. Mothers also lose contact with their children through the mother's own choosing, in some cases because she does not want her children to see her in prison.

Regardless of the reasons a mother loses contact with or does not see her children, it is essential that she does not lose her sense of motherhood, even if her role as mother must be renegotiated (Easterling et al., 2019). No matter where her children are or where she is, she is still their mother. It is imperative that she keep her sense of motherhood while respecting her children's caregiver in order to navigate her incarceration and successfully integrate back into the family unit. This research examined the mother's relationship with the caregiver and explored how that relationship impacts her relationship with her children.

Background

Increased Incarceration Rate

In the United States, incarceration increased an alarming 750% from 1980 to 2017 (Wilson & Koons-Witt, 2021). The United States accounts for 25% of the world's

imprisoned individuals, even though the country comprises only 5% of the global population (Lawson, 2016). Additionally, the United States incarcerates more women than any other country in the world (Kajstura, 2019; Robillard et al., 2016). One of the primary reasons for the increase in incarceration relates to an era of efforts to get “tough on crime” (Adams, 2018; Alward et al., 2020; Easterling & Feldmeyer, 2017; Harris, 2017).

Increase in the Number of Incarcerated Mothers

The number of incarcerated mothers in the United States increased by 122% between 1991 and 2007 (Wilson & Koons-Witt, 2021). Shockingly, between 60% and 80% of incarcerated women are mothers (Aiello & McQueeney, 2016; Easterling & Feldmeyer, 2017; Halter, 2018; Kajstura, 2019; Mangurenje & Konner, 2018; Muftić et al., 2016; Robillard et al., 2016; Stearns, 2019; Wilson & Koons-Witt, 2021; Zeman et al., 2018). The impacts of incarceration spill over from the mother to the entire family, including her children (Wakefield et al., 2016). Immediately prior to incarceration, the children’s mother is typically the primary caregiver (Aiello & McCorkel, 2018; Benning & Lahm, 2016; Cooper-Sadlo et al., 2019; Easterling & Feldmeyer, 2017; Garcia, 2016; Mancini et al., 2016; Mangurenje & Konner, 2018; Nosek et al., 2019; Sparks et al., 2017; Stearns, 2019; Vigesaa et al., 2016; Wilson & Koons-Witt, 2021; Zeman et al., 2016).

Impacts of Incarceration

Incarceration limits the mother’s ability to have contact with and care for her children. Leaving the mother's role at the discretion of the children's caregiver, who is the gatekeeper of the mother–child relationship during her incarceration (Tasca, 2015;

Tremblay & Sutherland, 2017). Incarcerated mothers usually want to maintain contact with their children and have reported that being separated from them is one of the most difficult parts of incarceration (Mancini et al., 2016; Muftić et al., 2016). However, to cope with her new role in her children's lives, the incarcerated mother may have to modify her definition of motherhood (Easterling et al., 2019).

Even though the mother's role will differ from before incarceration, it is still essential for the mother to maintain some aspects of a mothering role. Feeling as if she has failed as a mother may lead to feelings of low self-esteem, anger, guilt, and shame (Bove & Tryon, 2018; Easterling & Feldmeyer, 2017). Incarceration changes the mother's relationship with her children and impacts other relationships, especially when friends, family, and/or the community reject the incarcerated mother (Bove & Tryon, 2018). Maintaining prosocial relationships is key to coping with incarceration and being successful when the mother returns home after her incarceration (Alward et al., 2020; Boman & Mowen, 2017; Folk et al., 2019; Link et al., 2019; Solinas-Saunders & Stacer, 2017).

Incarceration significantly impacts the mother's children (Aiello & McCorkel, 2018; Wakefield, 2015; Warren et al., 2019). Five million children have at least one incarcerated parent during childhood (Arditti, 2016; Haskins et al., 2018; Heard-Garris et al., 2018; Nosek et al., 2019; Wilson & Koons-Witt, 2021). These children experience the impacts of incarceration long before incarceration begins and long after their incarcerated parent returns home (Robillard et al., 2016; Warren et al., 2019). Before their mother's incarceration, children often experience an array of adverse circumstances, including poverty, homelessness, substance use, violence, and physical or sexual abuse

(Aiello & McCorkel, 2018; Arditti, 2016; Poehlmann-Tynan & Turney, 2021; Robillard et al., 2016; Western & Smith, 2018; Zeman et al., 2016; Zeman et al., 2018). These adverse circumstances often contribute to their mother's incarceration.

Upon the mothers' incarceration, changes to children's environmental factors, including living situation, school, financial circumstances, can take place quickly (Arditti, 2016; Easterling & Feldmeyer, 2017; Western & Smith, 2018; Zeman et al., 2016).

Additionally, children of incarcerated parents experience overall poor health and are at high risk for mental health problems (Arditti, 2016; Heard-Garris et al., 2018; Wakefield, 2015). Parental incarceration also increases the likelihood of overall behavior concerns (Arditti, 2016; Gaston, 2016; Western & Smith, 2018). Moreover, research has shown that adults who experienced parental incarceration as children are more likely to have lower incomes, be uninsured, and be homeless, and they have an increased likelihood of arrest (Muftić et al., 2016; Uggen & McElrath, 2014).

While incarceration can be difficult for the mother and children, they must maintain a relationship. Prosocial ties can help the mother overcome negative prison experiences, enhance her commitment to her family, encourage positive behavior, and help her remain optimistic about her return home (Atkin-Plunk & Armstrong, 2018). Research has shown that individuals who maintain contact with their family are less likely to recidivate upon release (Atkin-Plunk & Armstrong, 2018; Folk et al., 2019; Mancini et al., 2016). Incarcerated individuals who receive visits or other forms of contact are more likely to be involved with their children and work more and less likely to use drugs less, leading to less recidivism upon release (Folk et al., 2019). A lack of communication with their mother can negatively affect children's development (Halter,

2018). Maintaining contact can protect children from some risks often associated with parental incarceration (Arditti, 2016; Warren et al., 2019), and it helps the incarcerated mother experience less distress and more successfully co-parent with the caregiver (Charles et al., 2021). Despite the difficulties of maintaining contact between an incarcerated mother and her children, there are significant positive outcomes.

Problem Statement

Many incarcerated mothers want to maintain a relationship and have contact with their children throughout their incarceration. These mothers also desire to maintain their role as mother to their children even though they are absent from their daily lives. The problem is that the children's caregiver controls that relationship and the contact the incarcerated mother maintains with her children. The incarcerated mother is not in control of her relationship with her children and depends solely on the caregiver to help facilitate these relationships. Thus, the incarcerated mother's relationship with the caregiver ultimately impacts her relationship with her children (Robillard et al., 2016). However, surprisingly little research has focused on how the caregiver's relationship with the incarcerated mother impacts the children's relationship with her.

Additionally, the mother must reintegrate herself into the family unit upon release. Regardless of whether the incarcerated mother maintained a relationship and frequent contact with her children during incarceration, she cannot return home and expect the family dynamic to be the same as when she left; the mother, her children, and the caregiver change during and because of the incarceration. Resuming her parental role may be more complicated than the incarcerated mother anticipates because she has to reestablish and redefine her relationships once she returns home (Menting et al., 2017).

The children need time to get used to their mother again and the way she parents, and a child's behavior may call for different parenting styles than before (Menting et al., 2017). While many incarcerated mothers look forward to returning home, they often fail to consider the difficulties that may arise. This study of how the mother's relationship with her children is impacted by the caregiver can inform corrections agencies as they design programs that address caregiver relationships with the incarcerated mother and the incarcerated mother with her children.

Purpose Statement

The primary purpose of this research was to examine how the incarcerated mother's relationship with her children's caregiver impacts her relationship with her children. The findings from this study will guide correctional agencies toward a better understanding of the importance of programs that address the mother-caregiver relationship and the mother-child relationship during and after incarceration. The research followed a quantitative design, first using questionnaires (with Likert scale responses and an area for additional comments on some questions) and then semi-structured interviews. Through this approach, the questionnaire responses guided the interview protocol, while the interviews allowed the participants to explore ideas more fully.

Significance of the Study

This study is significant because it explored the under-studied relationship between the incarcerated mother and her children's caregiver. This relationship significantly impacts other familial relationships during incarceration because the children's caregiver has significant control over the relationship between the incarcerated

mother and her children (Tasca, 2016; Wilson & Koons-Witt, 2020). Having a more significant understanding of the dynamics of an incarcerated mother's and her children's caregiver relationships offers insights into other dynamics that impact how incarcerated mothers interact with their children.

Most incarcerated mothers want to preserve their relationship with their children, though they understand that their incarceration strains this relationship, making reentry more difficult (Wilson & Koons-Witt, 2021). The child's caregiver helps facilitate contact between mother and child and provides and filters information about the mother and her incarceration (Wilson & Koons-Witt, 2021). This information provided by the caregiver may begin to influence—positively or negatively—the child's perception of their mother. Throughout the mother's incarceration, the caregiver plays a more crucial role in the child's development and overall well-being (Robillard et al., 2016). Incarcerated individuals who can maintain family relationships throughout incarceration are less likely to recidivate, making contact between the incarcerated mother and her children even more crucial (Folk et al., 2019).

Understanding these relationship dynamics will help correctional agencies, incarcerated mothers, caregivers, and children successfully navigate incarceration and reentry. Corrections agencies can work toward developing programming that meets the various needs of incarcerated mothers, as most current programs do not meet the needs of women generally (Crittenden & Koons-Witt, 2017). Such programming would include those centered on improving mother and caregiver relationships, educating caregivers on pathways to incarceration and other barriers that impact positive mother-caregiver relationships, and fostering mother-child relationships. Incarcerated mothers can receive

education on improving weaknesses and maintaining strengths in their relationships with their children and their caregivers. Teaching the mother parenting and other skills will help them foster and maintain stronger relationships with her children throughout incarceration and allow her to better care for her children upon release.

Research Question and Sub-Questions

Central Question: How does the incarcerated mother's relationship with the child's caregiver impact her relationship with her child or children?

SQ1: How does the incarcerated mother's relationship with the child's caregiver impact the amount of contact she has with her child or children?

SQ2: What kinship of caregiver has the most significant impact on an incarcerated mother's relationship with her child or children?

SQ3: What kinship of caregiver has the most significant impact on the amount of contact an incarcerated mother has with her child or children?

Definitions

- *Caregiver:* The individual who assumes responsibility for the minor biological child or children of an incarcerated mother (Robillard et al., 2016). The caregiver's kinship with the child can be the other parent, grandparents, various family members, friends, other non-family members, or social services (Robillard et al., 2016; Tasca, 2016).
- *Incarcerated mother:* A female convicted of a crime and sentenced to serve prison time, leaving her minor biological child or children in the care of a caregiver.

- *Children*: Minors whose biological mother has been convicted of a crime and sentenced to serve prison time, leaving them in the custody of a caregiver.
- *Reentry*: The period of transition when the incarcerated mother is released from prison and returns to society.
- *Recidivism*: When someone who has already been convicted of a crime is later convicted of a subsequent crime or crimes.

Summary

Mass incarceration has impacted many facets of the U.S. population over the last several decades. Women are among the most significantly impacted groups, which in turn significantly impacts children, since well over half of incarcerated women are mothers. Incarcerated mothers face numerous challenges during and after incarceration, including maintaining relationships with their children. Mothers are typically their children's primary caregivers at the time of their incarceration. This research studied how the incarcerated mother's relationship with her children's caregiver impacts her relationship with her children. The children's caregiver controls the relationship the incarcerated mother maintains with her children and therefore is the primary person who facilitates or hinders contact between the mother and her children. Maintaining strong social ties with her children and other positive influences help the mother navigate incarceration and reduced the likelihood she will recidivate upon her release. Yet, the incarcerated mother is not always able to successfully navigate this sometimes tense and tumultuous relationship. Understanding these relationships and successfully navigating relationships with her children's caregiver and the children will position the mother for more successful incarceration and reentry.

CHAPTER TWO: LITERATURE REVIEW

Overview

The primary purpose of this research was to examine how the incarcerated mother's relationship with her children's caregiver impacts her relationship with her children. The children's caregiver is the gatekeeper of the mother-child relationship. This research highlights what kinship of the caregiver most significantly impacts mother-child relationships during incarceration. The results of this research will enhance correctional agencies' understanding of the importance of programs that address the mother-caregiver relationship and the mother-child relationship during and after incarceration. The primary problem this study addressed is the control that the caregiver has over the relationship and contact that the children maintain with the incarcerated mother. Additionally, even if the incarcerated mother can maintain a relationship and frequent contact with her children, when she returns, she cannot expect the family dynamic to be the same as before her incarceration. Maintaining positive relationships with the caregiver and children throughout incarceration has numerous positive impacts during and after incarceration for the incarcerated mother and her children.

Theoretical Framework

Ambiguous Loss

Most incarcerated mothers and their children experience ambiguous loss, or the loss felt when a person is physically absent but psychologically present or physically present but psychologically absent (Easterling & Johnson, 2015; Easterling et al., 2019; King & Delgado, 2021; Mechling et al., 2018). Many incarcerated mothers, caregivers, and children feel this loss throughout incarceration. Their relationships have changed,

and the future of those relationships remains unclear (Easterling et al., 2019). In some instances, the caregiver and children become accustomed to the mother's absence before her incarceration, due for instance to the mother's drug use or prior incarcerations. However, a prison sentence may intensify this sense of loss because of the complexities of the increased time away and distances associated with serving sentences in correctional facilities that are not close to home. The mother experiences these feelings of loss as a result of her separation from her family and children and from her role as a mother (Easterling et al., 2019).

Ambiguous loss associated with the death of a family member often brings to the surviving family the support and comfort of others (Mechling et al., 2018). Conversely, ambiguous loss associated with incarceration usually brings stigma to the family of the incarcerated (Mechling et al., 2018). Additionally, in the case of death, the child oftentimes can cope with the loss and move on; however, with incarceration, the child often struggles to understand the ambiguous nature of the separation (Hyppolite, 2017). In families experiencing ambiguous loss, hiding information from the children can lead to more questions and confusion (Mechling et al., 2018). At the same time, providing all the information about an incarceration to a child can lead to internal struggles about whether the incarcerated person is bad or a criminal (King & Delgado, 2021). Ambiguous loss may cause various negative responses, including depression, anxiety, sleeping problems, guilt, and an increased feeling of shame (Easterling et al., 2019). This study sought to identify these specific feelings of loss for incarcerated mothers, their children, and caregivers.

Attachment Theory

Attachment theory holds that children who receive constant care have stronger, more secure, and healthier attachments with the person caring for them than those who receive inconsistent care (Warren et al., 2019). Relationships that form during a child's early years significantly impact the rest of a child's development (Harris, 2017).

Separating children from their parents disrupts the ability of the parent and child to bond and disrupts the developmental process (Poehlmann-Tynan et al., 2017; Smith & Young, 2017). The disruption in this relationship leaves the child in a vulnerable position (Harris, 2017). Children of incarcerated parents are more likely to develop attachment disorders or have attachment insecurities (Muftić et al., 2016; Zeman et al., 2018). A mother may also experience difficulty with attachment to her children if she has been a victim of neglect or abuse during her lifetime (Harris, 2017).

Many caregivers to children of incarcerated mothers provide a seamless transition of care for the children. This seamlessness can be due to the caregiver being a regular fixture in the children's lives or to them gracefully assuming their new role as caregivers to children who have already experienced enough trauma. Children who have these positive caregiver experiences feel that the caregiver is available, sensitive, and responsive, making them feel more secure and ultimately resulting in more positive development (Harris 2017; Parolin & Simonelli, 2016). Such quality interactions contribute to close relationships between caregivers and children (Poehlmann-Tynan et al., 2017). However, some children experience disruption in their care because of their mother's incarceration, especially if they must move from one caregiver to another. These children are left feeling insecure due to unpredictability, rejection, and/or

unresponsive care from their caregivers, negatively impacting their development (Harris, 2017; Parolin & Simonelli, 2016).

Other children remain attached to their mother, either emotionally or because the mother continues to parent throughout her incarceration. Either circumstance poses challenges to the caregiver. Research has shown that even if the events leading to incarceration and the actual incarceration weaken these bonds, the mother and children can strengthen their relationship throughout and after incarceration (Sobba et al., 2017). This study examined how the mother perceives her attachment to her children and how she perceives their attachment to the caregiver. For optimal development, children must feel an attachment to a positive and responsible caregiver during their childhood.

General Strain Theory

General strain theory (GST) examines how individuals respond to strain during adverse situations (Warren et al., 2019). Not attaining goals (i.e., the difference between what a person expects and the actual outcome), a loss of positive stimuli (e.g., losing a parent through separation or death), or negative experiences, such as childhood abuse or incarceration, can all lead to strain (Craig et al., 2017; Iratzoquil, 2020; Jones et al., 2018; Semenza & Grosholz, 2019; Warren et al., 2019). Strain can lead to negative emotions such as anger, depression, fear, and frustration (Jones et al., 2018; Semenza & Grosholz, 2019), which can lead to behaviors that trigger problematic outcomes, including criminality (Semenza & Grosholz, 2019; Warren et al., 2019).

General strain theory specifically addresses how strain impacts males and females differently, including types of strain as well as the emotions and behavioral responses related to the strain (Iratzoquil, 2020; Jones et al., 2018). Males generally experience

strain related to success and achievement, fairness, and peer relationships (Jones et al., 2018). When males experience strain, they are more likely to be aggressive and take risks; therefore, they often respond to strain with anger and violence (Iratzoquil, 2020). The strain women experience tends to relate more to experiences like childhood abuse and interpersonal violence (Jones et al., 2018). Women are more passive and avoid risk taking, so they are more likely to respond to strain through self-directed means such as substance abuse, eating disorders, and running away (Iratzoquil, 2020; Jones et al., 2018).

Repeated strain may exacerbate negative responses (Sparks et al., 2017).

Reacting negatively to strain increases an individual's likelihood of committing crimes (Mancini et al., 2016). Strains that are higher in magnitude or more significant are more likely to lead to a criminal response, especially if the individual has high criminogenic traits (Craig et al., 2017; Iratzoquil, 2020), including low self-control, gang involvement or association with other delinquent peers, and favorable attitudes toward crime (Craig et al., 2017). Additionally, when coping mechanisms are weakened or absent, strain is more likely to result in criminal behavior (Craig et al., 2017). The strain itself is not to blame for the criminal behavior; instead, the blame lies in how the person responds to the strain (Jones et al., 2018). Once strain leads to criminal responses, coping strategies are not likely to improve, and involvement in the criminal justice system will only lead to more strain (Iratzoquil, 2020).

One strain associated with criminal behavior is victimization (Craig et al., 2017; Jones et al., 2018). Most incarcerated mothers face victimization throughout their lives, and their incarceration often victimizes their children. In cases of incarceration, the incarcerated mother, her child or children, and the caregiver all experience strain in

various ways. Gaston (2016) suggested that children of incarcerated parents experience negative emotions, changes in their economic status, and strained relationships.

Conversely, individuals who experience social support and have strong self-esteem are less likely to cope with strain through negative or criminal actions (Jones et al., 2018).

Feminist Strain Theory

Feminist strain theory (FST) developed out of general strain theory, which does not fully explain female criminality (Mancini et al., 2016). While GST does consider how males and females respond to strain, FST accounts for life-course approaches and pathways to crime specific to females (Mancini et al., 2016). Women's pathways to crime are significantly different from men's, just as women's response to strain is significantly different from men's. Feminist strain theory suggests that women have significant emotional reactions to depression, guilt, and anxiety (Mancini et al., 2016). Their responses to these negative emotions represent the foundation of FST.

Related Literature

Women and Incarceration

To fully understand the impact of women's incarceration, it is crucial to understand incarceration in the United States more broadly. The U.S. incarceration rate increased dramatically by over 750% between 1980 and 2017 (Wilson & Koons-Witt, 2021). The United States comprises about 5% of the world's population but 25% of the world's imprisoned population (Lawson, 2016)—the highest incarceration rate of any country globally (Berger et al., 2016; Glidden et al., 2020; Heard-Garris et al., 2018; Markson et al., 2016; Ray et al., 2017; Robillard et al., 2016; Sawyer & Wagner, 2020; Warren et al., 2019). One of the primary reasons for the increase in the incarcerated

population is the “War on Drugs” (Aiello & McQueeney, 2016; Harris, 2017; Lawson, 2016; Mangurenje & Konner, 2018; Muftić et al., 2016; Ortiz & Jackey, 2019; Solinas-Saunders & Stacer, 2017). Moreover, the number of women incarcerated has grown at a rate faster than any other demographic, outpacing the incarceration rate among males (Aiello & McQueeney, 2016; Bove & Tryon, 2018; Easterling & Feldmeyer, 2017; Glidden et al., 2020; Halter, 2018; Harris, 2017; Mangurenje & Konner, 2018; Muftić et al., 2016; Schubert et al., 2017; Solinas-Saunders & Stacer, 2017; Wilson & Koons-Witt, 2021).

Not only does the United States have the highest incarceration rates, but it also incarcerates more women than any other country in the world (Kajstura, 2019; Robillard et al., 2016). By 2019, there were over 223,000 women incarcerated in local, state, and federal incarceration systems in the United States (Kajstura, 2019). State prisons held 99,000 of these incarcerated women (Kajstura, 2019). Additionally, Kajstura (2019) pointed out that U.S. prison systems hold twice as many people as jails; however, jails hold more women than state prisons. In 2020, there were 2.3 million individuals incarcerated in the United States (Correa et al., 2021; Sawyer & Wagner, 2020): 1,291,000 were housed in state prisons, 631,000 in local jails, 226,000 in federal prisons and jails, and the remainder in various other types of confinement (Sawyer & Wagner, 2020).

Demographics

Incarceration does not impact all groups equally. Approximately 49% of incarcerated women are White (51 per 100,000), 25% are Black (129 per 100,000), and 17% are Hispanic (71 per 100,000; Solinas-Saunders & Stacer, 2017). Most incarcerated

women are 30–34 years old (Solinas-Saunders & Stacer, 2017). Women also face convictions for different crimes than men. Most women serve time for non-violent drug and property offenses (Crittenden & Koons-Witt, 2017; Glidden et al., 2020; Harris, 2017; Lawson, 2016; Robillard et al., 2016; Sparks et al., 2017; Vigessaa et al., 2016). In 2010, 25% of women were serving time for drug offenses, 29% for property crimes, and 37% for violent crimes, compared with over 50% of men serving time for violent crimes (Solinas-Saunders & Stacer, 2017). Compared with men, women are disproportionately involved in crimes related to their drug addictions (Solinas-Saunders & Stacer, 2017), supporting GST's tenet that women respond to strain through self-directed methods.

Pathways to Incarceration

Women experience different pathways to incarceration than their male counterparts. Incarcerated mothers frequently come from high-crime areas characterized by single-parent homes, low education, and high unemployment (Glidden et al., 2020). Most incarcerated mothers are poor and single (Glidden et al., 2020), and many come from dysfunctional families with generational drug use and criminal histories (Mancini et al., 2016). Women primarily commit crimes to support their drug habits (Berger et al., 2016; Solinas-Saunders & Stacer, 2017). In addition, having relationships with men involved in crime makes women more likely to participate in criminal activity (Mancini et al., 2016); in fact, many women have reported feeling forced or coerced into criminal activity by their partners (Dewey et al., 2018). Similarly, negative social support increases a woman's likelihood of engaging in criminal activity (Pettus-Davis et al., 2018). Incarcerated women have different needs than their male counterparts. Women are more likely to "suffer from medical problems, including mental and physical sickness,

have substance abuse problems, and have extended histories of sexual and physical abuse" (Lawson, 2016, p. 274). Incarcerated women also tend to have low educational attainment, lack useable job skills, and experience social isolation (Easterling et al., 2019).

One of the most significant pathways to crime for women is abuse and trauma (Garcia, 2016; Gobeil et al., 2016; Leigey, 2019; Mancini et al., 2016; Muftić et al., 2016; Solinas-Saunders & Stacer, 2017; Vigessaa et al., 2016). Trauma is a response to an event that threatens an individual's life or the life of a loved one (Harris, 2017). Chronic trauma is associated with events that occur over a prolonged period, and complex trauma comprises the emotional and physical impacts of chronic traumatic events (Harris, 2017). This latter trauma is often associated with sexual, physical, or psychological abuse (Mertens & Laenen, 2020). Forty-three percent of incarcerated women reported that they experienced abuse as a child, 50% reported some form of physical abuse, and 42% reported sexual abuse (Solinas-Saunders & Stacer, 2017). This abuse can lead to increased recidivism, mental health problems, and substance abuse (Solinas-Saunders & Stacer, 2017). Additionally, the associated unresolved trauma makes it difficult or impossible for the mother to attach and respond adequately to the needs of her children, as maintained by attachment theory (Harris, 2017).

Prison Classes and Programs

For many incarcerated mothers, prison is a time for self-reflection and self-improvement (Cooper-Sadlo et al., 2019). Programming offered in prison can help mothers through this process. Indeed, today's correctional facilities are shifting focus to education, vocation, and substance-abuse programming (Crittenden & Koons-Witt, 2017;

Glidden et al., 2020). The education and programming that incarcerated mothers receive impacts not only their incarceration, but also their later success upon release. Neglecting to participate in available programming can set up the mother for failure, even before release (Ortiz & Jackey, 2019).

For many years, prison programming was geared toward male offenders due to the smaller numbers of incarcerated females (Crittenden & Koons-Witt, 2017). However, more recently, programming has increasingly centered on females. Gender-responsive programming recognizes and addresses trauma, poverty, substance abuse, and other factors commonly associated with women's pathways to incarceration (Bove & Tryon, 2018; Vigessaa et al., 2016). Most women are willing to work on themselves while incarcerated, with about 65% attending self-help classes, compared with 57% of men; additionally, 27% of mothers attend parenting or childrearing classes, compared with only 11% of men (Glidden et al., 2020; Lawson, 2016). Likewise, women are 20% more likely than men to participate in educational programming and 15% more likely to participate in drug treatment (Crittenden & Koons-Witt, 2017). Often, mothers participate in programming because program participation allows them to have more contact with their children (Benning & Lahm, 2016). Thus, parenting programs are effective during incarceration because mothers are motivated to maintain a relationship with their children during this time (Tremblay & Sutherland, 2017).

Generally, incarcerated women need various programs outside of those focused specifically on the mother-child relationship. Other beneficial programming teaches parenting skills and helps women identify their role as a mother (Crittenden & Koons-Witt, 2017). They also seek to address eight main risk factors: antisocial associates;

antisocial cognitions; antisocial personality patterns; antisocial behavior; substance abuse; and circumstances surrounding family, school, and leisure (Boman & Mowen, 2017). Women need gender-specific programming to address these risk factors and how to respond to the strain associated with substance abuse, mental health, education, job and life skills, and past victimization (Crittenden & Koons-Witt, 2017; Glidden et al., 2020; Wilson & Koons-Witt, 2021). Addressing these risk factors and needs while incarcerated helps reduce the likelihood that the woman will recidivate (Wilson & Koons-Witt, 2021). Although substance-abuse treatment does benefit incarcerated women, the treatment must transition from incarceration to reentry (Ray et al., 2017). According to Taylor (2016), the need for drug or alcohol treatment increases the likelihood of reoffending by 198%–485%, highlighting the importance of participating in treatment opportunities.

Including the children's caregiver in pre-release programming can make the mother's transition into the community easier. Including the caregiver in programming allows the mother and the caregiver to understand how and when the mother should resume her role as a caregiver (Wilson & Koons-Witt, 2021). Additionally, it clarifies how much support for her children the mother can expect emotionally, financially, and logistically upon release (Wilson & Koons-Witt, 2021). To ensure that incarcerated mothers participate in available programs, correctional facilities can tie incentives to participation: reductions in sentences, additional visitation, extra commissary, more yard time, or special programs for complying with specific requests linked to programming around successful reentry (Boman & Mowen, 2017).

Incarcerated Mothers

With the number of women incarcerated increasing significantly over the last several decades, the number of mothers incarcerated has also increased—122% between 1991 and 2007 (Wilson & Koons-Witt, 2021). A shocking 60% to 80% of the women incarcerated are mothers of children under the age of 18 (Aiello & McQueeney, 2016; Easterling & Feldmeyer, 2017; Kajstura, 2019; Halter, 2018; Mangurenje & Konner, 2018; Muftić et al., 2016; Robillard et al., 2016; Stearns, 2019; Wilson & Koons-Witt, 2021; Zeman et al., 2018). The consequences of incarceration spill over from the incarcerated individual and impact the entire family (Wakefield et al., 2016). Some incarcerated mothers justify their criminal behavior to meet the needs of their children (Aiello & McQueeney, 2016). Losing a father to incarceration can be very traumatic for a young child; however, children's daily lives are disproportionately affected when they lose their mothers to incarceration (Aiello & McQueeney, 2016; Dallaire et al., 2015; Garcia, 2016; Lawson, 2016; Mangurenje & Konner, 2018; Poehlmann-Tynan & Turney, 2021; Tremblay & Sutherland, 2017; Zeman et al., 2016; Zeman et al., 2018). In most cases, the mother is the child's primary caretaker at the time of her incarceration (Aiello & McCorkel, 2018; Benning & Lahm, 2016; Cooper-Sadlo et al., 2019; Easterling & Feldmeyer, 2017, 2017; Garcia, 2016; Mancini et al., 2016; Mangurenje & Konner, 2018; Nosek et al., 2019; Sparks et al., 2017; Stearns, 2019; Vigesaa et al., 2016; Wilson & Koons-Witt, 2021; Zeman et al., 2016). The mother is also the children's primary financial support (Garcia, 2016; Mancini et al., 2016; Mangurenje & Konner, 2018). Most importantly, the mother plays an active role in the child's daily life before incarceration (Garcia, 2016; Mancini et al., 2016; Zeman et al., 2016).

Typically, fathers are not the primary caregiver to their children when incarcerated (Hyppolite, 2017). In fact, 90% of minor children remain with their mother when their father is incarcerated (Lawson, 2016; Poehlmann-Tynan et al., 2017). Therefore, the mother can provide a buffer against most of the traumas associated with the incarceration of a parent (Thomson et al., 2020). Conversely, less than 40% of children remain with their fathers when their mother goes to prison (Robillard et al., 2016). From the early 1990s to 2008, the number of children with incarcerated fathers increased by 77%, while the number of children with incarcerated mothers increased by 131% (Stearns, 2019).

Mothering from Prison

Mothers are responsible for nurturing; providing physical care; teaching language, physical skills, and self-care skills; ensuring adequate care and safety; orienting the child to society and their own feelings; instilling goals and values; promoting interpersonal skills and behaviors; and guiding a child in establishing their own goals and activities (Harris, 2017). However, fulfilling all these responsibilities to their children becomes significantly more difficult once incarcerated. Thus, incarcerated mothers often describe motherhood as a complex endeavor filled with joy, pain, guilt, and shame (Cooper-Sadlo et al., 2019). Women often strive to be the perfect mother, but women just need to be good mothers; that is all their children want (Harris, 2017).

Prisons are emotional places, but they are not emotionally *safe* places (Baldwin, 2018). Consequently, many mothers disconnect from their status as mothers and identify as an inmate (Baldwin, 2018). "Motherhood and mothering emotions represent an additional layer of complexity with relevance to working with most women in prison"

(Baldwin, 2018, p. 51). Additionally, prisons are generally unresponsive to the emotions or needs of offenders, their children, or their families (Aiello & McCorkel, 2018).

Mothers may be required to change their definition of motherhood throughout incarceration to maintain their mothering role (Easterling et al., 2019)—which is essential to incarcerated women's success during and after incarceration, despite the challenges.

Mothering Roles

Generally, mothers want to maintain contact and an attachment with their children throughout incarceration (Mancini et al., 2016). Mothers have reported that separation from their children is one of the most challenging aspects of incarceration (Muftić et al., 2016). Mothers often struggle with their desire to be mothers and to provide stable caregiver for their children (Cooper-Sadlo et al., 2019). Women are more likely to have contact with their children than fathers; therefore, incarcerated mothers face greater stigma that, due to their incarceration, they are incapable of being good mothers (Aiello & McQueeney, 2016; Cooper-Sadlo et al., 2019). However, it can be difficult for an incarcerated mother to maintain a positive relationship with her children throughout her incarceration (Halter, 2018). One challenge is her role with her children while incarcerated which speak to the mother's attachment with her children before, during, and after incarceration. According to Easterling et al. (2019), these roles usually fall into one of four categories:

- motherhood accepted (roles increase throughout and after incarceration),
- motherhood terminated (roles decrease throughout and after incarceration),
- mother on leave (roles decrease during incarceration but increase after

incarceration) and sporadic and shared mothering (roles vary and are shared before, during and after incarceration. (pp. 520–521)

Motherhood Accepted. When motherhood is accepted, the mother's role increases throughout and after incarceration (Easterling et al., 2019). The mother still feels a strong attachment to her children and will still try to discipline the children if the caregiver allows that (Robillard et al., 2016). The mother feels she has maintained a vital role as a mother, though sometimes the children may feel something different and not see their mother in the vital role the way she thinks they do (Western & Smith, 2018).

Motherhood Terminated. Motherhood terminated signifies a decrease in motherhood roles throughout and after incarceration (Easterling et al., 2019). The mother has a very weak sense of attachment to her children. Some mothers turn their children over entirely to someone else's care so their children have a stable caregiver without her interference (Cooper-Sadlo et al., 2019). These mothers report distancing themselves from their children and family to cope with the pains of their incarceration (Cooper-Sadlo et al., 2019). Sometimes this role changes, based on the age of the children, throughout incarceration and at the time of the mother's release (Easterling et al., 2019).

Mothers on Leave. Mothers on leave play a more minor mothering role during incarceration, but this role increases upon release (Easterling et al., 2019). The mother maintains an attachment to her children during her incarceration, but this attachment increases upon release. The mother still is very interested in her children's lives but understands that she cannot be a part of their life in the same capacity anymore. Mothers in this category usually have solid social support, allowing them to shift the caregiver

role during incarceration (Easterling et al., 2019). This strong social support also benefits the mother upon release.

Sporadic and Shared Mothering. Often, mothers resent their removal from their daily mothering role, even though they might not have been involved daily with their children before incarceration (Couvrette et al., 2016). These mothers may have a strong sense of attachment to their children, but the child does not have a strong sense of attachment to the mother, or the mother may also have a strong sense of attachment to whatever is keeping her away from her children.

Stigma

Friends, family, and society routinely reject incarcerated mothers (Bove & Tryon, 2018). The stigma of failing in her role as mother may compound the incarcerated mother's feelings of low self-esteem, anger, guilt, and shame (Bove & Tyron, 2018; Easterling & Feldmeyer, 2017). Incarcerated mothers face feelings of "despair, anger, grief, loss, frustration, hopelessness, guilt, sadness and shame, even when they are in contact with their children" (Baldwin, 2018, p. 52). However, during incarceration, motherhood can act as a source of both stigma and self-worth. While motherhood can provide a multitude of contradictory emotions, maintaining prosocial roles is imperative to having positive experiences throughout and after incarceration. Keeping prosocial ties can help a mother overcome negative prison experiences, enhance her commitment to her family, encourage positive behavior, and help her remain optimistic about her return home (Atkin-Plunk & Armstrong, 2018). Thus, the incarcerated mother should not allow stigma to impact her feelings about herself and her relationship with her children.

Children of Incarcerated Mothers

Children are innocent bystanders and hidden victims impacted by maternal incarceration (Wakefield, 2015; Warren et al., 2019). Many children are significantly impacted by parental incarceration, and unfortunately, for many children, prisons may play as significant an institutional role as school and religious organizations (Aiello & McCorkel, 2018). As incarceration rates have increased, so too has the number of children impacted by incarceration. Since there is no single source of reliable data, it is difficult to determine how many children suffer as a result of parental incarceration. Yet, it is estimated that 2.6 million children have at least one parent who is currently incarcerated, with a quarter of those children under the age of 5 (Arditti, 2016; Benning & Lahm, 2016; Poehlmann-Tynan & Turney, 2021; Roettger & Houle, 2021; Turney & Goodsell, 2018; Wakefield, 2015; Warren et al., 2019). More recent data have shown that as many as five million children have had at least one parent incarcerated at some time during their childhood (Arditti, 2016; Haskins et al., 2018; Heard-Garris et al., 2018; Nosek et al., 2018; Wilson & Koons-Witt, 2021).

The number of children with an incarcerated mother is more than double that of children with a single incarcerated parent in the last generation (Benning & Lahm, 2016; Robillard et al., 2016; Uggen & McElrath, 2014). Moreover, children of color are impacted disproportionately by incarceration: African American children are nine times more likely and Hispanic children three times more likely than White children to have incarcerated parents (Correa et al., 2021; Warren et al., 2019). Children of incarcerated mothers harbor complicated feelings toward their mothers based on the mother's absence, their relationship with their caregiver, and anxiety about what their future holds (Aiello &

McCorkel, 2018). Children of incarcerated mothers may experience greater disruption in social, emotional, and academic competencies (Zeman et al., 2018). However, Markson et al. (2016) showed that factors other than the mother's incarceration will impact the children.

Researchers have been hard-pressed to paint a complete picture of the impact of a mother's incarceration on her children. Barriers to obtaining information on the extent of the impact on children include mothers not having contact with their children; caregivers not wanting the children to participate in research studies; and children not being able to articulate how they feel about their mother's incarceration. However, it is incontestable that children are impacted not only during incarceration, but also long after their mother returns home (Warren et al., 2019).

Lifestyle

Certain events related to incarceration may increase the impact children feel, including "witnessing arrest, the stress of experiencing a parent's trial and the resulting media attention, changes in guardianship and living conditions, or separation from the parent" (Robillard et al., 2016, p. 103). Numerous factors influence the changes that children experience. Sudden incarceration can disrupt a child's life, including being subjected to inadequate care by the designated caregiver (Warren et al., 2019). However, if the child loses an abusive parent, incarceration may improve their well-being (Gaston, 2016).

Pre-Incarceration. Children of incarcerated mothers are at a significant disadvantage in many aspects of their life. Oftentimes, the negative impacts begin long before the mother becomes incarcerated since the children usually come from

environments that include other adversities and risk factors, including poverty or homelessness (Arditti, 2016; Poehlmann-Tynan & Turney, 2021; Zeman et al., 2018). These environmental adversities are often caused by risk factors such as family history and active substance abuse, preventing the individual from escaping poverty (Arditti, 2016; Poehlmann-Tynan & Turney, 2021; Zeman et al., 2018). These children are also frequently exposed to domestic violence, family instability (sometimes caused by increased stress around incarceration), or the dissolution of parental or other meaningful relationships (Poehlmann-Tynan & Turney, 2021; Zeman et al., 2018). Like many mothers, children may also be victims of physical and sexual abuse (Robillard et al., 2016).

Post-Incarceration. A mother's incarceration brings many rapid changes for her children. The first significant change relates to family relationships (Easterling & Feldmeyer, 2017). Children are left without their mother and in the care of someone else. Therefore, one of the most drastic changes is in the children's living situation—the result of a change in the custody arrangement and may include housing instability or homelessness (Aiello & McCorkel, 2018; Arditti, 2016; Easterling & Feldmeyer, 2017; Western & Smith, 2018). Additionally, children may face separation from their siblings, other caring adults, and friends (Zeman et al., 2018). Changes to the children's residence often change their school enrollment and impact their attendance and academic performance (Easterling & Feldmeyer, 2017; Zeman et al., 2016). These changes can sometimes force children to quit extracurricular activities (Correa et al., 2021) and can also increase the likelihood of associating with antisocial peers who smoke, drink, lie, and skip school (Cochran et al., 2018).

Loss of financial support through incarceration compromises the economic survival of impacted children (Arditti, 2016; Western & Smith, 2018). The children's economic situation can be impacted by losing their mother's financial contribution to the household or if the caregiver is now financially responsible for more children. Additionally, if the caregiver limits the children's contact with their mother, this can lead to feelings of alienation, causing extra distress in the household (Robillard et al., 2016). Young children may be most impacted by the separation itself, while older children may experience enduring trauma caused by the repeated poverty, violence, and change associated with their mother's incarceration (Robillard et al., 2016). Trauma will shape the child's physical, emotional, and intellectual development (Harris, 2017).

Additionally, children are subjected to added stress when they must take on more responsibilities or fill roles previously held by their mother (Warren et al., 2019). These duties may include helping around the house or assuming a mothering role with younger siblings. The expectation that the children of incarcerated mothers grow up and take on adult roles is usually accelerated. Sometimes, these roles are taken on with great pride, seriousness, and gratitude; at other times, they burden the child (Arditti, 2016).

Adverse Childhood Impacts of Parental Incarceration

It has been well documented that "children and adolescents with incarcerated parents are vulnerable to a diverse array of maladaptive outcomes" (Zeman et al., 2018, p. 223) related to physical health, mental health, behavior, and development. It is hard to predict how incarceration will impact each child, and children in the same household may have contradicting reactions to their mother's incarceration. However, understanding these outcomes can assist correctional facilities and schools in adapting programs that can

assist children of incarcerated parents instead of continuing to act as if parental incarceration does not impact children.

Physical Health. Children of incarcerated parents experience overall poor health (Arditti, 2016; Heard-Garris et al., 2018). Physical health concerns include sexually transmitted infections, cardiovascular disease, metabolic disease, high cholesterol, and obesity (Roettger & Houle, 2021; Turney & Goodsell, 2018; Uggen & McElrath, 2014). Other physical ailments include migraines, poor sleep habits, and respiratory conditions, including asthma (Correa et al., 2021; Haskins et al., 2018; Heard-Garris et al., 2018; Nosek et al., 2018; Roettger & Houle, 2021; Uggen & McElrath, 2014; Warren et al., 2019). These increased health risks can be associated with inconsistent healthcare and subjection to or involvement in behaviors that contribute to health risks (Heard-Garris et al., 2018).

Mental Health. Children of incarcerated parents are also at high risk for mental health problems (Wakefield, 2015), many of which are related to environmental factors the children are exposed to before, during, and after their mother's incarceration (Zeman et al., 2018). A lack of quality parenting contributes to childhood trauma, including stress, violence, and abuse, making these children more susceptible to mental-health risk (Arditti, 2016; Warren et al., 2019). The most common mental health issues these children experience are depression, anxiety, acute stress, and low self-esteem (Arditti, 2016; Correa et al., 2021; Heard-Garris, 2018; Muftić et al., 2016; Roettger & Houle, 2021; Warren et al., 2019; Western & Smith, 2018; Zeman et al., 2018). Moreover, children of incarcerated parents are vulnerable to severe mental illnesses and may

experience multiple mental health conditions throughout their lifetime, including psychopathology and post-traumatic stress disorder (PTSD).

Psychopathology. Parental incarceration and the associated economic strain and dysfunctional relationships are childhood stressors directly linked to psychopathology and antisocial behaviors (Arditti, 2016). Children who experience parental incarceration, particularly before age 10, are prone to antisocial behaviors (Arditti, 2016; Poehlmann-Tynan & Turney, 2021; Roettger & Houle, 2021; Warren et al., 2019; Zeman et al., 2018), including ignoring right and wrong, disregard for others' feelings, behaving violently or impulsively, and lying (Mayo Clinic, n.d.a).

Post-Traumatic Stress Disorder. Rates of PTSD are higher among children with a history of parental incarceration (Haskins et al., 2018; Heard-Garris, 2018). This trauma can be brought on by disrupted close relationships, witnessing their mother's arrest, and the general trauma associated with incarceration (Warren et al., 2019). Symptoms of PTSD include persistent flashbacks, nightmares, overwhelming thoughts, or anxiety triggered by the recollection of a terrifying event (Mayo Clinic, n.d.b).

Behavior. Feelings of guilt, shame, denial, anger, and sadness are prevalent among the children of incarcerated parents, leading to various behavioral outcomes (Gaston, 2016). Parental incarceration also increases the likelihood of overall concerns about externalizing or internalizing behaviors and increasing physical aggression (Arditti, 2016; Gaston, 2016; Western & Smith, 2018). Internalizing behaviors occur when the child focuses their thoughts, feelings, and actions internally, and include avoiding others, depression, and fear of new things (Mangurenje & Konner, 2018; Uggem & McElrath, 2014). Externalizing behaviors occur when children focus outwardly on their thoughts,

feelings, and emotions, and can be expressed through animal cruelty, being demanding or defiant, and delinquency (Mangurenje & Konner, 2018; Uggen & McElrath, 2014).

Children who display externalized behaviors are also more likely to fight with their siblings and classmates and to be suspended from school (Arditti, 2016).

Other school-related problems include trouble sitting still, frustration, and failure to do homework (Haskins et al., 2018). Children can also become defiant, creating conflict with their caregivers, leading to harsh punishments (Arditti, 2016; Warren et al., 2019). However, generally, caregivers are less likely to provide adequate parental supervision, which increases the chances of the children engaging in risky behaviors (Arditti, 2016). For instance, 60% of female children of incarcerated mothers have a teenage pregnancy, and among the teenage male children of incarcerated mothers there is a 40% delinquency rate (Lawson, 2016). As Lawson (2016) maintained, “when the children of incarcerated mothers suffer, it affects society on various levels including increases in poverty, teenage pregnancy, welfare recipients and overall criminal offenders” (p. 284).

Development. Children of incarcerated parents experience other childhood traumas such as family instability, learning delays, diminished educational attainment, and child abuse (Arditti, 2016; Heard-Garris, 2018; Poehlmann-Tynan & Turney, 2021; Roettger & Houle, 2021; Zeman et al., 2018). Additionally, children of incarcerated mothers may not want to speak with friends, their teachers, or even their caregiver about their mother, lest someone speak poorly of her and they have to defend her (Robillard et al., 2016). Children of incarcerated parents may also regress developmentally, exhibited through crying, withdrawing, and even losing potty training (Arditti, 2016).

The impacts on these children oftentimes carry on throughout their lives, affecting all the mother's children regardless of age or gender. Even when they are old enough, these children have difficulty assuming typical adult roles (Turney & Lanuza, 2017). The converse is also true: The children of incarcerated parents may take on adult roles early in life, including obtaining employment to contribute to the household, caring for younger siblings, grocery shopping, and doing housework (Turney & Lanuza, 2017).

Stigma. Children of incarcerated mothers face stigma. Teachers may think that, since the child's mother is incarcerated, the child should have lower expectations and standards (Arditti, 2016; Warren et al., 2019). Many people think that children of incarcerated mothers are inferior because of their parent's choices; consequently, the children feel unaccepted by teachers and classmates (Warren et al., 2019). Children of incarcerated mothers also face stigma related to social interactions with peers and other family members (Gaston, 2016; Turney & Goodsell, 2018).

Adverse Adulthood Impacts of Parental Incarceration

Factors related to incarceration that have long-term impacts on children include the frequency and duration of the disruption of caregiver relationships, the degree of economic and residential stability, social stigma related to the incarceration, and having a parent that is physically absent but emotionally present (Warren et al., 2019). In adulthood, negative impacts can include having lower income, being uninsured, and homelessness (Uggen & McElrath, 2014). Additionally, once children of incarcerated mothers reach adulthood, they are significantly more likely to be arrested, convicted, and incarcerated than adult children of incarcerated fathers (Muftić et al., 2016; Robillard et al., 2016; Zeman et al., 2016). Not only does a mother's incarceration hurt her children,

but the effects are also so far-reaching that there is the potential to influence future generations, thereby perpetuating the cycle of incarceration (Mangurenje & Konner, 2018). Yet, despite all the obstacles children face as a result of their mother's incarceration,

incarceration may serve as a “turning point” or key factor in motivating positive change for parents, that it can help families to pull together in new and productive ways, and that children with incarcerated parents are often resourceful in seeking out social support and enacting healthy coping strategies. (Easterling & Johnson, 2015, p. 1551)

Caregivers to Children of Incarcerated Mothers

Baker et al. (2010) noted that "approximately three-quarters of children of incarcerated mothers also have fathers involved in criminal activity" (p. 167). Both parents' incarceration dictates the need for someone to care for the children. The caregiver is responsible for all aspects of raising the children. One of the most frequently reported concerns of incarcerated mothers centers on their ability (or inability) to maintain contact with their children (Tasca, 2015). Children usually remain with a family member, like grandparents, but most commonly a grandmother (Arditti, 2016; Harris, 2017; Robillard et al., 2016). Less than 40% of children remain with their other parent, and around 30% go with another family member or friend (Robillard et al., 2016). Incarcerated mothers are more likely to be single parents and rely on the same caregivers who assisted with childcare before their incarceration (Benning & Lahm, 2016). There is routinely very little planning and consideration given to where the children will live upon the mother's incarceration (Trotter et al., 2016).

Incarcerated mothers either assume that the children's current caregiver will take on a more significant role or do not have the time or opportunity to make adequate arrangements. A mother with multiple children may leave her children with more than one caregiver, especially if a single caregiver does not have the means or desire to care for multiple children. A caregiver who is a family member is ideal for many children, ensuring safety, affection, and greater ease in maintaining contact with their mother (Baker et al., 2010). With little to no choice, the incarcerated mother often leaves her children with her own parents, even when acknowledges that they were not good parents to her (Aiello & McQueeney, 2016). Yet, generally, family members are more likely to facilitate contact between the incarcerated mother and her children (Wilson & Koons-Witt, 2021). The mother-caregiver relationship has a significant impact on the incarcerated mother-child relationship. The caregiver and mother's relationship can fall anywhere on the spectrum from no relationship at all to a solid supportive relationship—and anywhere in between (Robillard et al., 2016).

Caregiver Relationship with the Incarcerated Mother

The relationship between the caregiver and the incarcerated mother will determine the amount of contact between the mother and her children (Baker et al., 2010). When the mother-caregiver relationship is positive, it serves as a source of emotional support throughout incarceration and encouragement upon reentry (Wilson & Koons-Witt, 2021). Mothers often regard their children's caregivers with both gratitude and jealousy (Wilson & Koons-Witt, 2021); the incarcerated mother is thankful someone is there for her children in her absence but disappointed that she is not there to take care of them herself (Wilson & Koons-Witt, 2021). As a result, she often struggles with feeling that the

caregiver has replaced her role with the children (Wilson & Koons-Witt, 2021). These complex feelings can take a toll on the caregiver, the mother, and the children, increasing already high levels of stress, strain, and anxiety (Robillard et al., 2016).

The mother–caregiver relationship is a significant concern for the incarcerated mother (Wilson & Koons-Witt, 2021). A warm, caring relationship can result in fewer problems with children's behavior (Arditti, 2016). Moreover, a good relationship between the incarcerated mother and the children's caregiver that lasts even after the mother's release helps to ease the mother's transition into the community (Wilson & Koons-Witt, 2021). When the mother and caregiver co-parent, it creates a better environment for the children (Baker et al., 2010). Ultimately, the caregiver is positioned to make demands of the incarcerated mother regarding her future role and responsibilities as a mother (Tasca, 2016).

Caregiver Relationship with Children

Another critical piece of the caregiver relationship is the caregiver's relationship with the children now in their care. Children are less likely to experience adverse impacts of their mother's incarceration if cared for by a stable, quality caregiver (Schubert et al., 2017). Typically, the children and the caregiver are not close before the mother's incarceration, so the caregiver and children must get to know each other while adjusting to living with each other (Robillard et al., 2016). Conversely, the caregiver may have little time for the children due to the new responsibilities arising from the mother's incarceration (Arditti, 2016). The incarcerated mother hopes that her children's caregiver will treat the children well and provide proper care—but that is not always the case. There are often "extremely negative parenting behaviors among caregivers of the children

of incarcerated parents" (Wakefield, 2015, p. 911). Caregivers exhibit such behaviors as screaming, crying, and punishing out of spite, which negatively impact the children (Wakefield, 2015). The more stress, strain, and anxiety the caregiver feels, the less accepting they feel toward the children in their care (Robillard et al., 2016).

One of the most significant decisions the caregiver must make is what to tell the children about their mother's absence. There are various reasons to tell the children the truth about their mother. For instance, if children are left to their imagination, they may determine that their mother's absence is their fault, leading to more anxiety and fear (Chui & Yeung, 2016). On the other hand, the caregiver may hide information about the mother's incarceration as a coping mechanism and to protect the children from the stigma associated with incarceration (Chui & Yeung, 2016; Easterling & Feldmeyer, 2017). Also, the caregiver may feel that the truth about the incarceration will scare the children (Chui & Yeung, 2016). Ideally, the mother and caregiver will decide together what to tell the children.

Additionally, the caregiver's impact on the child's development is significant (Arditti, 2016). Providing the child with a stable home will help the child overcome challenges and succeed in everyday life (Warren et al., 2019). Caregivers are critical figures in the children's upbringing, and they help to facilitate contact between the mother and her children (Benning & Lahm, 2016; Robillard et al., 2016; Tasca, 2016; Wilson & Koons-Witt, 2021).

Impact to Caregiver

The mother and child are not the only ones impacted by incarceration. Though usually not the biological parent of the child, caregivers often experience significant

parenting stress (Arditti, 2016). Caregivers may also find themselves experiencing feelings of physical and emotional exhaustion (Arditti, 2016). In addition, they may be financially overwhelmed due to the loss of the mother's income or to taking on the financial responsibilities of children's care, or both, and the children may feel the effects of this strain on the caregiver (Arditti, 2016; Wakefield, 2015). Other financial burdens, such as legal fees, travel costs associated with visitation, phone calls, or the expense of providing the incarcerated mother's commissary, may add to the strain (Correa et al., 2021). Often grandparents who are already poor or infirm care for the children (Arditti, 2016). The caregiver often already has the responsibility of caring for other family members in the same household; thus, they experience even greater strain and distress when the care of the incarcerated mother's children falls on them (Arditti, 2016). Another impact on the caregiver may come from isolation from those who disagree with the caregiver's decision to care for these children during the mother's incarceration (Arditti, 2016).

Child Protective Services (CPS)/Foster Care

Incarcerated mothers whose children are in foster care were not a focus of this research. However, it is important to briefly discuss the significant role foster care plays in the lives of children of incarcerated mothers. Around 11% of children are left in foster care when their mother is incarcerated as a result of living in poverty without social support (Lawson, 2016; Robillard et al., 2016). When CPS takes custody of a child, the mother loses the ability to visit or talk to her child (Halter, 2018). The foster care caseload has increased due to maternal incarceration (Berger et al., 2016).

Sometimes, the mother's incarceration triggers proceedings to terminate parental rights (Easterling et al., 2019). There are several reasons why CPS is associated with incarceration. One relates to the arrest of a custodial parent, particularly a mother (Berger et al., 2016). A second reason for CPS's involvement is the incarceration of a custodial parent for child neglect or abuse (Berger et al., 2016). A third reason is the living environment during the mother's incarceration (Berger et al., 2016). Regardless of the reason for CPS's involvement, it adds strain on the incarcerated mother. After release, some mothers must face the additional burden of gaining custody of their children from the state (Wilson & Koons-Witt, 2021).

Contact between Mother and Children

Many outside variables impact the mother's ability to have contact with her children, including prison rules and regulations, the mother's behavior while incarcerated, and the children's caregiver. Many incarcerated mothers make it a priority to maintain contact with their children and other family members (Mancini et al., 2016). The children's development may be negatively affected by a lack of communication with their incarcerated mother, so maintaining contact is vital for child development (Halter, 2018). Some mothers refuse contact with their children during their incarceration due to feelings of guilt and shame (Wilson & Koons-Witt, 2021).

Contact between the incarcerated mother and her children is almost solely at the discretion of the children's caregiver (Baker et al., 2010). Mothers are more likely than fathers to have contact with their children throughout incarceration (Benning & Lahm, 2016). When grandmothers are responsible for the care of the children, they are generally more willing to facilitate contact between the incarcerated mother and the children

(Tasca, 2016). This willingness is partly due to the grandmother wanting her care for the children to be temporary, and she often feels overwhelmed by the children (Tasca, 2016). Many arguments can be made about the pros and cons of mothers having contact with their minor children during incarceration since children's relationships with their incarcerated mother can be positive or negative (Warren et al., 2019). In some cases, the caregiver will not allow the children to communicate with the incarcerated mother at all (Easterling & Feldmeyer, 2017).

Research has shown that maintaining contact with their incarcerated mother protects children from the risks often associated with parental incarceration (Arditti, 2016; Warren et al., 2019). Additionally, maintaining contact helps the incarcerated mother to experience less distress and to co-parent with the caregiver more successfully (Charles et al., 2021). As another positive impact, ongoing contact between the incarcerated mother and her children eases the pain of reentry for both. Previous studies have found that individuals who can maintain contact with their family are less likely to recidivate upon release (Atkin-Plunk & Armstrong, 2018; Folk et al., 2019; Mancini et al., 2016). Incarcerated individuals who receive visits or other forms of contact upon reentry are more likely to be involved with their children, work more hours, and use fewer drugs, thereby reducing the chances of recidivism (Folk et al., 2019). By contrast, children who cannot maintain contact with their incarnated mother are more likely to experience feelings of alienation and minimal attachment, leading to more negative outcomes associated with incarceration (Warren et al., 2019).

Visitation

Though the incarcerated mother has littler control over it, visitation can benefit her return to society. Visitation can minimize the impacts of incarceration on the mother and her children and poses significant consequences for the family (Aiello & McCorkel, 2018; Tasca, 2016). Visitation from family and friends during incarceration has been shown to increase the mother's "hopefulness, motivation, self-esteem, and trust in others" (Atkin-Plunk & Armstrong, 2018, p. 1508) while reducing prison misconduct and recidivism due to maintaining positive social ties (Benning & Lahm, 2016; Clark & Duwe, 2017; Folk et al., 2019; Mancini et al., 2016). Although visitation can be an emotional experience for the mother and children (Wilson & Koons-Witt, 2021), it ultimately helps facilitate healthy mother–child bonds (Lazzari et al., 2019).

According to Tasca (2016), mothers who were more involved with their children before incarceration are more likely to receive visits. However, 35% of mothers who receive visits often experience negative emotions, which can trigger outbursts and violent behaviors and lead to punishment for prison rule violations (Benning & Lahm, 2016). Indeed, mothers often find visits traumatic and painful (Benning & Lahm, 2016). Visitation can be a positive emotional experience for families, but it can also lead to feelings of worry and concern about the incarcerated mother's health, welfare, and safety (Arditti, 2016). Due to the relatively small number of women's prisons, it is not uncommon for the incarcerated mother to be in a prison located far from her family (Aiello & McCorkel, 2018; Wilson & Koons-Witt, 2021)—a barrier to visitation. Other barriers include complicated entry procedures, unpleasant prison staff, and child-unfriendly visitation areas (Tasca, 2016). Despite the negative feelings that can become

attached to visitation, research shows that consistent visitation helps reduce recidivism (Mancini et al., 2016).

Children cannot visit their mother on their own and must rely on the caregiver to bring them to visitation. Some caregivers are more likely than others to bring children to visitation, especially if the caregiver feels that visitation is difficult for the children (Arditti, 2016; Tasca, 2016). Gaining in-person access to their incarcerated mother requires that the children adapt to prison rules and norms, including controlled movement and constant surveillance (Aiello & McCorkel, 2018; Arditti, 2016). Some aspects of the visitation process may be scary for children, and as a result, many mothers do not want their children to visit (Aiello & McCorkel, 2018). In many instances, the caregiver is responsible for the child's behavior during the visit, so they avoid visiting (Arditti, 2016). There is no general guidance on creating child-friendly visitation procedures; therefore, each prison creates its own security, staffing, priorities, and practices (Aiello & McCorkel, 2018).

Some prisons have established child-friendly programs that allow children to visit their incarcerated mothers in a separate area from regular visitation (Aiello & McCorkel, 2018; Wilson & Koons-Witt, 2021). Child-friendly visits have positive outcomes for children and mothers (Charles et al., 2021). As an added benefit, visitation in such settings allow the incarcerated mother to practice parenting skills she may be learning in parenting classes (Lazzari et al., 2019). Child-friendly visitation areas also allow the children to experience less anxiety about visiting and about their mother's safety (Lazzari et al., 2019). Conditions of visitation vary from non-contact visits, in which the incarcerated mother and her children must look at each other through glass and talk on a

phone receiver, to child-friendly visitation areas where mother and child can sit on the floor and play (Aiello & McCorkel, 2018). Despite the benefits of child-friendly visitation, many of these child-friendly programs have visitation rules, including no crying and not discussing any bad feelings that the children or mother are experiencing (Aiello & McCorkel, 2018). These special visitation opportunities can incentivize program participation (Wilson & Koons-Witt, 2021).

Calls, Letters, and Technology

If an incarcerated mother cannot maintain contact through visitation, she may maintain contact through other approved means. Due to various factors, some incarcerated mothers rely on calls and letters to maintain contact with their children. While these methods of communication pose fewer barriers than visitation, there are still challenges associated with them. Phone calls, for instance, can be costly for the incarcerated mother's family (Wilson & Koons-Witt, 2021). Letters can be difficult when the children are unable to read or write the letter on their own (Wilson & Koons-Witt, 2021). Some prisons offer incarcerated mothers the opportunity to communicate with their children using email and video conferencing, but these also have associated costs for families (Wilson & Koons-Witt, 2021). Video visits support and encourage relationships with the incarcerated mother, even for infants (Charles et al., 2021). However, the children's caregiver must assist in scheduling and setting up the video visit (Charles et al., 2021). Letters can also be troublesome for mothers since they often convey bad news and hurt feelings (Benning & Lahm, 2016). Even when letters provide good information, they can increase the mother's guilt, anger, and resentment for missing positive

experiences (Benning & Lahm, 2016). However, letters have an overall positive impact (Sparks et al., 2017).

Mothers: Release and Reentry

Mothers have many goals upon their release from incarceration: reuniting with their children, securing employment, obtaining housing and reliable transportation, and securing resources for themselves and their families (Mancini et al., 2016; Muftić et al., 2016; Wilson & Koons-Witt, 2021). When the mother fails to meet any of these goals, it may increase strain, thereby increasing the likelihood of her return to criminal activity to support herself and her family (Wilson & Koons-Witt, 2021). Mothers will face numerous challenges when attempting to get back on their feet after incarceration, and family support is crucial to her successful reentry. Difficulty establishing positive relationships may cause the mother to turn to former peers who were central to her incarceration (Boman & Mowen, 2017). However, mothers should not expect a warm homecoming upon their release or for life to return to the way it was before incarceration (Cooper-Sadlo et al., 2019).

Family Reunification

Incarceration impacts all members of the incarcerated mother's family, affecting routines, relationships, emotions, and the worldview of the family of the incarcerated mother (Aiello & McCorkel, 2018). Family support is an essential component of a mother's successful reentry. Even when there is family conflict, that does not mean there is no family support (Link et al., 2019). However, conflict can make the mother feel that she is not supported. A primary reentry concern centers on reuniting with children and rebuilding relationships with her family (Pettus-Davis et al., 2018). Once released from

prison, it is even more difficult for mothers to reach and maintain the expectations associated with motherhood (Easterling et al., 2019). Despite how much an incarcerated mother has missed her children and is ready to return home, research shows that many mothers do not begin living with their children immediately after incarceration but slowly reestablish contact (Western & Smith, 2018).

Upon their release, women experience a high level of stress around parenting due partly to wanting to resume caring for their minor children but not having the means to do so (Tremblay & Sutherland, 2017; Wilson & Koons-Witt, 2021). The mother and children must get used to each other again, reestablishing their mother–child relationship (Menting et al., 2017). Many women who resume caring for their children feel this is a marker of success after incarceration (Wilson & Koons-Witt, 2021). Especially when incarceration has caused the parent and child relationship to look different, the mother can navigate those changes successfully. However, some women wish to delay reestablishing their caregiver role or do not want to resume the role as the primary caregiver and only wish to re-establish contact with their children upon release (Wilson & Koons-Witt, 2021).

Family Reunification Programs. Some state departments of corrections facilitate official family reunification programs. In New York, the Family Reunion Program allows incarcerated persons to have private overnight visits with their families (Walsh, 2016). These visits preserve and strengthen family ties, foster positive and responsible conduct, and facilitate post-release integration (New York Department of Corrections, n.d.). In Oregon, at Coffee Creek Correctional Facility, the Family Preservation Project works to reduce the consequences of incarceration on children,

families, and the community (YWCA of Greater Portland, n.d.). These goals are accomplished through supervised visits, family interventions, and educational and support services (YWCA of Greater Portland, n.d.). At Pleasant Valley State Prison, in California, a family liaison service specialist helps the inmate and their family plan for release (California Department of Corrections and Rehabilitation, n.d.). Likewise, the Family Services Program in the state of Washington works to identify the challenges to families impacted by incarceration and provide support and services to those families (Washington State Department of Correction, n.d.). However, no state provides reentry services in all of its facilities.

Delay in Reunification. There are numerous reasons for the returning mother to delay taking custody or reuniting fully with her children. One factor that may affect the mother's reunification with her children is whether they desire to reconnect with their her (Menting et al., 2017). Children often have conflicting feelings when their mother returns from incarceration (Easterling & Johnson, 2015), and they may have difficulty transitioning to their mother's renewed caregiver role (Wilson & Koons-Witt, 2021). These strained relationships make reentry more difficult for the mother and her children, with the mother facing feelings of anger and hostility from the children (Cooper-Sadlo et al., 2019; Wilson & Koons-Witt, 2021). If the mother left a small child during her incarceration, she might need to reacquaint herself with the child (Wilson & Koons-Witt, 2021). It is natural for the children to have mixed feelings about their mother's return, though these negative feelings do not ease the mother's reintegration into the family and society. In addition, family relationships that were strained before incarceration may need repairing when the mother is released (Brunton-Smith & McCarthy, 2016).

The mother's relationship with the caregiver may also slow the process of reunification (Wilson & Koons-Witt, 2021). The amount of contact she has with her children during incarceration often determines how much contact she will have upon release (Western & Smith, 2018). The more contact the mother maintains during incarceration, the easier it will be for her children to transition from relying on their caregiver to relying on her again. During the reentry process, children will often continue turning to the caregiver for advice, leaving the mother feeling that she is no longer needed, and these feelings become compounded if the mother must work with multiple caregivers (Wilson & Koons-Witt, 2021). In other instances, the caregiver might demand that the mother resume caring for her children, even when she does not yet have the financial means (Wilson & Koons-Witt, 2021). Such an immediate demand by the caregiver can make the reentry process more difficult and increase the chances of the mother's recidivism.

The mother may choose to delay resuming the caregiver role for her children to allow herself time to readjust to life in the community. She may wish to complete her education, secure a job, and find housing before taking on the additional responsibility of caring for her children (Wilson & Koons-Witt, 2021). Some mothers may also feel the need to control their mental and emotional health and sobriety before caring for their children (Wilson & Koons-Witt, 2021). Many mothers fear that resuming childcare before addressing other priorities will lead them back to a criminal lifestyle (Wilson & Koons-Witt, 2021).

Social Support

It is vital for the caregiver to support the mother through the family reunification process to help her succeed in her reentry. Individuals perform at their best when in a supportive environment (Fahmy & Wallace, 2019). Women rely heavily upon formal and informal social support after their release from prison; however, there is a lack of resources available to most women recently released from custody (Pettus-Davis et al., 2018). Formal support comes in the form of organized resources, such as social services (Pettus-Davis et al., 2018), while informal support often occurs through relationships the mother has already formed (Pettus-Davis et al., 2018). Formal resources available to the returning mother are often minimal and do not begin to meet many of her needs upon reentry (Wilson & Koons-Witt, 2021). However, social support helps recently released individuals buffer stress and establish a stable environment with a sense of purpose, belonging, and predictability (Pettus-Davis et al., 2018).

Family and other prosocial resources are crucial supports that should not be underestimated. Family can assist in providing employment and housing and obtaining public assistance (Atkin-Plunk & Armstrong, 2018; Clark & Duwe, 2017; Link et al., 2019). Prosocial ties also provide needed emotional support and employment as the previously incarcerated mother regains self-esteem and her productive role in society (Atkin-Plunk & Armstrong, 2018). Gaining and maintaining employment reduces the likelihood of recidivism (Link et al., 2019). Other prosocial support can be as simple as kindness expressed by the mother's probation officer or judge (Cooper-Sadlo et al., 2019).

Barriers to Reentry

Numerous factors hinder the returning mother's reentry process, including returning to old habits and peers, lack of resources, stigma, and violating probation or parole. Returning to old behaviors, namely substance use and abuse, is a significant barrier to reentry for women returning to the community (Dewey et al., 2018). Women returning to the community are more than nine times more likely than the general population to meet the criteria for drug dependence, and if one uses drugs, they are twice as likely to recidivate (Ray et al., 2017). If the mother does not receive needed treatment and counseling while incarcerated, she might return to her old habits, thereby limiting her ability to safely regain custody of her children (Western & Smith, 2018).

Long-term formerly incarcerated women oftentimes suffer from physical and mental health problems (Wakefield, 2015). Individuals with mental health concerns are more likely to commit crimes because they have increased exposure to other risk factors such as substance use and homelessness (Link et al., 2019). Depression is a significant risk factor that may contribute to mothers being less able to care for their children (Menting et al., 2017). Individuals who experience physical health issues are more likely to recidivate due to limited job opportunities, family conflict, and financial hardship (Link et al., 2019). Women lacking prosocial support are more likely to return to their old peers, increasing the likelihood of drug use and criminal activity (Boman & Mowen, 2017; Link et al., 2019; Pettus-Davis et al., 2018). Criminal peers significantly weaken family support (Boman & Mowen, 2017). Risk factors for recidivism and rearrests among former women prisoners include,

involvement with illegal substances, mental health problems, exposure to intimate partner violence and other forms of victimization, lack of adequate social support during reentry post-incarceration, experiences of poverty and homelessness, limited employment and education, and engagement in sex work and other risky sexual behaviors. (Herbst et al., 2016, p. 300)

Other barriers include denial of financial assistance by social services, employers' refusal to hire women with felony convictions, and CPS seeking to terminate parental rights (Cooper-Sadlo et al., 2019; Ortiz & Jackey, 2019). Formerly incarcerated women have reported many barriers to employment, including low educational attainment, few job skills, little work experience, and having a criminal record (Mancini et al., 2016; Wilson & Koons-Witt, 2021). In addition, it is often difficult to find stable and permanent housing (Garcia, 2016), and many mothers feel multiple financial strains of supporting their families (Wilson & Koons-Witt, 2021). Some of this strain is associated with the stigma of being formerly incarcerated, and some are due to women being uncomfortable making financial decisions (Glidden et al., 2020).

Stigma. Mothers are considered the backbone of society, so transitioning from citizen-mother to convicted felon-mother can damage her identity (Aiello & McQueeney, 2016). Upon release, the formerly incarcerated mother may experience internalized stigma due to perceived stigma from the community (Sinko et al., 2020). Society values mothers, but mothers face scrutiny over their choices and circumstances (Aiello & McQueeney, 2016). When individuals feel they will encounter stigma, they often avoid those people or places responsible for the stigmatization, resulting in social withdrawal (Sinko et al., 2020). Stigma can encourage mothers to avoid places like banks, hospitals,

or schools (Turney & Goodsell, 2018). The stigma of a criminal record can negatively impact a mother's ability to secure employment, public housing, or other public assistance. Another associated stigma is the inability to vote (Wakefield et al., 2016). Mothers can overcome this stigma by finding self-employment opportunities, networking, and making personal connections (Sinko et al., 2020). The stigma and collateral consequences associated with a felony arrest record will increase strain as well as the likelihood the mother will return to her old habits.

Probation or Parole. The previously incarcerated mother will likely be required to report to probation or parole, pay associated fines and fees, and attend court-ordered treatment. The conditions of probation and parole are often more stringent for women, making them more likely to violate these conditions and return to prison (Solinas-Saunders & Stacer, 2017). In fact, as many as 73% of women will face a probation or parole violation (Solinas-Saunders & Stacer, 2017). Formerly incarcerated women are more likely than men to be homeless, adding to the challenges of complying with the conditions of probation or parole, much less caring for their children (Kajstura, 2019; Lawson, 2016; Western & Smith, 2018). Strict requirements around reporting to probation or parole increase the likelihood that the mother will eventually return to prison. Probation and parole hinder successful reentry by creating and enforcing unrealistic expectations on individuals who are already struggling to get back on their feet (Ortiz & Jackey, 2019).

Recidivism

Each year in the United States, approximately 600,000 people are released from prison back into the community (Glidden et al., 2020). Since the 1980s, women's

recidivism rates have increased. In 1980, 12% of female offenders released from prison were rearrested within 5 years (Solinas-Saunders & Stacer, 2017). In 1994, 39.4% of the women released from prison were rearrested within 3 years (Solinas-Saunders & Stacer, 2017). In 2018, the Bureau of Justice reported that after release, 68% of people reoffend in 3 years, 79% within 6 years, and 83% within 9 years (Alper et al., 2018). Women recidivate for various individual, interpersonal, structural, and economic reasons that create challenges throughout the criminal justice process: arrest, sentencing, incarceration, and reentry (Herbst et al., 2016). Women who use drugs are three times more likely to violate their probation or parole or be charged with a new crime (Solinas-Saunders & Stacer, 2017). Having children, however, reduces female recidivism (Solinas-Saunders & Stacer, 2017).

Suggestions

There are many approaches to ensuring that the mother can maintain contact with her children, family, and other prosocial peers throughout her incarceration. One example is housing individuals in facilities close to their homes or using distance from home as one criterion for determining facility placement (Clark & Duwe, 2017). Another way to maintain prosocial relationships is by making visitation more family-friendly, extending visitation hours, offering programs that provide transportation, and increasing opportunities for video visitation (Clark & Duwe, 2017). Easing visitor restrictions could be beneficial (Taylor, 2016). Video visits, which can supplement regular visitation (Taylor, 2016), are more cost-effective for families and reduce the possibility of introducing contraband into facilities (Clark & Duwe, 2017). Gaston (2016) suggested that criminal justice policymakers weigh the benefits of incarcerating individuals against

the potential long-term damage to families due to the incarceration. Sometimes, community correction or rehabilitative treatment may benefit the individual, family, and community.

Summary

Incarceration in the United States has risen significantly over the last several decades. As previous research has noted, there is no way to determine how many children are impacted by the incarceration of their mothers, since no single agency tracks or updates the numbers of children with incarcerated mothers. This lack of reliable data was a limitation of this research. The inability to assess the impacts of incarceration on an indeterminate number of children limits the amount of knowledge that can be obtained about this population. It also limits the resources available for all children impacted by incarceration. The absence of a single reliable source for determining which inmates have children makes it even more important for researchers to work with incarcerated mothers to account for all their children. Even if it is only to note that her children are in the care of CPS (and are not subjects of interest in this research), it is crucial to know how many children that group encompasses.

Mothers, children, and caregivers are affected by the mother's incarceration. Mothers face numerous challenges while incarcerated, including determining who will care for her children, what her role will be with her children throughout her incarceration, what programs she can take advantage of while incarcerated, and what it will be like when she goes home. Children face various impacts related to their mother's incarceration, many of which begin long before incarceration. Once their mother is incarcerated, changes occur immediately, namely where the children live and with whom

they live. Additionally, the mother's incarceration impacts her children's emotional well-being, behavior, and financial stability—oftentimes well into adulthood. Caregivers are also impacted significantly by the mother's incarceration. Caregivers make considerable sacrifices to raise the children of the incarcerated mother, even when they are already strained by their life circumstances. Incarceration is a consequence of the mother's criminal activity; however, the consequences are far reaching, impacting the mother, her children, and the caregiver.

CHAPTER THREE: METHODS

Overview

Many incarcerated mothers want to maintain a relationship and contact with their children throughout their incarceration, even though the mother is absent from their daily lives. The problem is that the children's caregiver exercises considerable control over the relationship and contact that the incarcerated mother maintains with her children. Little research has focused on how the caregiver's relationship with the incarcerated mother impacts the children's relationship with their mother. The incarcerated mother depends solely on the caregiver to facilitate the relationship with her children. Additionally, whether the incarcerated mother maintained a relationship and frequent contact with her children, she must reintegrate into the family unit upon release. Many incarcerated mothers look forward to returning home but often fail to consider the difficulties that may arise, since everyone—the mother, her children, and the caregiver—has changed during and because of the incarceration. The primary purpose of this research was to examine how the incarcerated mother's relationship with her children's caregiver impacts her relationship with her children. The results of this research will help guide correctional agencies toward an understanding of the importance of programs that address the mother-caregiver relationship and the mother-child relationship during and after incarceration.

Study Design

This study adopted a causality and correlation research design. Data collection occurred via a questionnaire and through follow-up interviews. Causality examines one variable's actual or perceived influence on another (Pearl, 2000). In this study, causality

showed whether the relationship between the incarcerated mother and the caregiver influenced the relationship between the mother and her children. Causality also showed if the kinship of the caregiver caused more or less contact between the incarcerated mother and her children. Correlation investigates the relationship between a pair of variables (Duckett, 2021). This research explored whether the relationship between the incarcerated mother and her children's caregiver correlated with the quality of her relationship with her children, and whether the kinship of the caregiver correlated with the amount of contact between the incarcerated mother and her children.

Research Question and Sub-Questions

Central Question: How does the incarcerated mother's relationship with the child's caregiver impact her relationship with her child or children?

SQ1: How does the incarcerated mother's relationship with the child's caregiver impact the amount of contact she has with her child or children?

SQ2: What kinship of caregiver has the most significant impact on an incarcerated mother's relationship with her child or children?

SQ3: What kinship of caregiver has the most significant impact on the amount of contact an incarcerated mother has with her child or children?

Hypotheses

The null hypotheses for this study were:

H₀1: Incarcerated mothers who have a better relationship with their child's caregiver will have a better relationship with her children.

H₀2: Incarcerated mothers who have a better relationship with their child's caregiver will have more contact with their children.

H₀₃: Kinship caregivers who are immediate family members will foster a better relationship between the incarcerated mother and her children.

H₀₄: Kinship caregivers who are immediate family members will foster more contact between the incarcerated mother and her children.

Participants and Setting

The participants in this study were mothers incarcerated in a medium-security state prison in the southeastern United States in February 2022. The state's correctional system has four women's prisons, housing approximately 3,000 women. The prison where the research was conducted houses almost 350 women. Incarcerated mothers with biological children up to age 18 who were not in foster care or other custody were eligible for participation. Additional screening questions were asked about whether the mother had been previously supervised on probation or in prison, to avoid a potential conflict of interest with the researcher.

Instrumentation

The researcher wrote the survey instrument to fit the needs of the study, and the instrument had not been used in other research. Since few studies on the relationship between incarcerated women and their children's caregiver have been conducted or published, no existing survey could be used for this research. The survey comprised 35 questions: 11 questions related to the mother's demographics and incarceration information, six yes/no questions, and 18 scale-response questions. The scale responses for seven questions were 5 = *Strongly Agree*, 4 = *Agree*, 3 = *Neutral*, 2 = *Disagree*, and 1 = *Strongly Disagree*, with three reversed scored. Six questions were scaled as 1 = *Poor*, 2 = *Fair*, 3 = *Neutral*, 4 = *Good*, 5 = *Excellent*. Two questions were scored 0 = *Never*, 5 =

Daily, 4 = Weekly, 3 = 2x per month, 2 = Monthly, 1 = Holidays. One question was scored 1 = None, 2 = Very little, 3 = A significant amount, and 4 = The current caregiver usually takes care of my children, so there was not much planning required. One question used the scale 1 = They no longer want to visit me, 2 = My child(ren) is under age 12 and cannot visit, 3 = my child(ren)'s caregiver does not want to visit due to the shorter visitation timeframe, 4 = my child(ren)'s caregiver or I do not want to bring my child around extra germs, 5 = there has been no change in in-person visits since before COVID.

The lowest possible score for the questions regarding the mother's relationship with her children and their caregiver was 4, meaning the mother did not feel she had a good relationship with her children or their caregiver. The highest possible score was 20, meaning the mother felt she has an exceptional relationship with her children and their caregiver. Seven was the lowest score, meaning the mother felt the caregiver did not facilitate a positive relationship. The highest score was 35, meaning the mother felt the caregiver facilitated a positive relationship between her and her children. The lowest score for communication with her children was 0, meaning she never communicated with her children; the highest score was 20, meaning she communicated with her children almost daily. Visitation had a low score of 2, meaning she never received visits, and a high score of 10, meaning she was visited weekly.

Procedures

Due to the researcher's employment as the warden of another prison within the agency and the announcement of a Department of Justice investigation, the researcher submitted a request for research approval prior to approval from Liberty University's

Institutional Review Board (IRB). The agency has a policy that outlines the procedures for research requests. The researcher contacted the designated individual and submitted the agency request form, the survey questions, a draft approval letter, and a draft of the dissertation proposal to the agency's designee, after which the agency approved the research. Approval was also obtained from Liberty University's IRB process.

The researcher contacted the warden at the prison where the study was conducted, and the warden advised that the Deputy Warden of Care and Treatment (DWCT) assist the researcher in obtaining participants. The DWCT requested that the researcher provide the research criteria and details of the study 14 days prior to the research date, and the researcher provided this information as requested. The opportunity for participation in the research was presented to the incarcerated women by the DWCT at the prison. The DWCT verbally shared the criteria with the offender population and posted sign-up sheets in each dormitory so that willing offenders could express their interest in participating. Due to scheduling conflicts, the warden notified the researcher of how many offenders had volunteered for participation and that they would be divided by dorm. The researcher advised that there should be groups of no more than 15 offenders to allow the researcher to interact during survey administration and to not overwhelm participants during interviews at the end of the survey. In one dorm, 18 participants signed up, and they were all scheduled, assuming all of them would likely not show up on the research day. All offenders were scheduled for participation in the agency's offender management system.

On the research day, the researcher arrived at the prison. The researcher brought enough copies of the consent form so that all participants could have a copy to sign and a

copy to keep. The researcher brought enough copies of the research survey to ensure there were enough for each participant to complete. The researcher also brought enough approved stick pens for completing the survey instrument. A large classroom was provided for the research area. With assistance from the prison staff, participants came to the classroom at their scheduled time. There was no discussion or interaction between the participants; rather, the researcher read the questions and ensured that each participant understood the questions. The researcher first verified that all the offenders were eligible for participation in the study by administering the research criteria questionnaire. To eliminate any conflict of interest, the questionnaire asked if the incarcerated mother had been under supervision at any location during the researcher's employment there. Offenders not eligible to participate were dismissed from the research area to return to their dormitory.

Once it was verified that the offenders were eligible to participate, the researcher reviewed the consent with the study participants. All offenders who were deemed eligible and wished to participate signed the consent form, though participation remained entirely voluntary. The researcher reviewed each section of the consent form, giving the participants a chance to ask questions. The researcher then collected the consent forms, ensured that each was signed. The consent forms were placed in a file and have not been reviewed since then, preserving participant confidentiality.

The researcher then went over the research survey question by question to ensure participants understood precisely what each question was asking. The researcher encouraged the participants not to skip ahead and to stay focused on the question with the researcher. If the participant had any questions, they were instructed to circle the question

number. Then the researcher discussed the question further with the participant during the one-on-one interview.

After all 35 questions were answered, the researcher collected surveys from participants. All review interviews took place at the teacher's desk in the front of the room while the remaining participants stayed in their seats. Upon collecting the surveys, the researcher reviewed each survey to ensure that each question had been answered. The researcher discussed each written answer with the participant to ensure that the researcher understood what the participant was trying to convey with their written response. If the written response could be captured by one of the provided responses with the participant's consent, the researcher noted the provided responses agreed upon by the participant and the researcher. If the written response needed to remain, the researcher noted anything that needed to be captured for research purposes. There was no recording of any kind and no way to link the participant to the research survey later, so it was imperative that questioning occurred as the research surveys were submitted. Once the researcher was confident that each participant had no additional questions about the survey, the participant was released from the research area.

This process was repeated with each survey group until all participants were interviewed. The prison granted the researcher up to 2 full days to conduct all the research; however, it only took 1 day.

Data Analysis

The data collected from the study participants were analyzed using various methods based on the participants' responses to the survey instrument. Prior to data analysis, all surveys were randomly numbered from 1 to 36, and the survey data were

transferred into a Microsoft Excel spreadsheet on the corresponding line number for analysis. Since the surveys were numbered, any questions about the data spreadsheet could be checked against the correct survey during the analysis. If a mother had more than one child, the children were organized from oldest to youngest, and the oldest child was assigned the number 1, and each remaining child was numbered accordingly. The validity of the survey instrument was measured using Cronbach's alpha.

For Hypothesis 1, the independent variable was the incarcerated mother's relationship with the children's caregiver, and the dependent variable was the incarcerated mother's relationship with her children. The relationship with the caregiver was measured using an aggregate score of survey questions 11, 12, 13, 14, and 15. A score of 2 indicated a poor relationship between the incarcerated mother and the caregiver. A score of at least 12 indicated an excellent relationship between the incarcerated mother and the caregiver. The relationship with the children was measured using an aggregate score of survey questions 6, 16, and 17. An aggregate score of 4 indicated a poor relationship with each child, and a score of at least 18 per child indicated an excellent relationship with the child.

The independent variable for Hypothesis 2 was the relationship of the incarcerated mother with the caregiver, and the dependent variable was the amount of contact the incarcerated mother had with her children. The relationship with the caregiver was measured using an aggregate score of survey questions 11, 12, 13, 14, and 15. A score of 2 indicated a poor relationship between the incarcerated mother and the caregiver. A score of 12 or more indicated an excellent relationship between the incarcerated mother and the caregiver. The amount of contact the incarcerated mother

had with her children was measured using questions 30 and 31. A score of 0 indicated that the mother had no contact with her children or caregiver. A score of 50 (if incarcerated since the beginning of the COVID-19 pandemic) or 60 per child (if incarcerated pre-COVID-19) indicated that the mother had some contact with the child or caregiver daily.

For Hypothesis 3, the independent variable was the kinship of the caregiver to the child, and the dependent variable was the relationship between the incarcerated mother and her children. The kinship of the caregiver was determined by survey question 8. The relationship between the incarcerated mother and her children was measured using an aggregate score of survey questions 6, 16, and 17. An aggregate score of 3 indicated a poor relationship with each child, and a score of 15 per child indicated an excellent relationship with the child.

Lastly, for Hypothesis 4, the independent variable was the kinship of the caregiver to the child, and the dependent variable was the amount of contact between the incarcerated mother and her children. The kinship of the caregiver was determined by survey question 8, and the amount of contact was measured using survey questions 30 and 31. A score of 0 indicated that the mother had no contact with her children, while a score of 60 indicated that the mother had some form of contact with her children almost daily.

Pearson's correlation was used to measure the data for the first two null hypotheses, and the difference between two means was used to measure null Hypotheses 3 and 4. Demographic data were analyzed, and the mean age, number of children, sentence length, and education level were gathered for informational purposes.

Summary

The study data were collected using a survey instrument and follow-up interviews with the researcher. Causality and correlation were employed to examine how various aspects of a mother's incarceration impacted and influenced her relationship with her children. Pearson's correlation and the difference of two means were used to determine the validity of the four null hypotheses.

CHAPTER FOUR: FINDINGS

Overview

Many incarcerated mothers want to maintain a relationship and contact with their children throughout their incarceration, even though they are absent from their daily lives. The problem is that the children's caregiver, not the mother, has significant control over the relationship and contact that the incarcerated mother maintains with her children. Upon release, the mother will have to reintegrate herself into the family unit regardless of her relationship with her children and their caregiver during her incarceration. Many incarcerated mothers look forward to returning home without considering the difficulties that may arise.

This research examined how the incarcerated mother's relationship with her children's caregiver impacts her relationship with her children. This study is significant because it focused on the under-studied relationship between the incarcerated mother and her children's caregiver. The findings will help guide correctional agencies in better understanding the importance of programs that address the mother-caregiver relationship and the mother-child relationship during and after incarceration. Having a more significant understanding of the dynamics of these relationships will enhance understanding around relationship dynamic impacting how incarcerated mothers interact with her children.

The caregiver gives information to the child about their incarcerated mother, which will positively or negatively impact the child's view of their mother.

Understanding these complex relationship dynamics will help mothers, caregivers,

children successfully navigate incarceration. Corrections agencies can also work toward developing programming that meets the various complex needs of incarcerated mothers.

This research was conducted using a mixed-method design consisting of both qualitative and quantitative approaches. The first approach involved the administration of a questionnaire with Likert-scale items as well as open-ended questions to capture additional comments from participants. The second approach comprised semi-structured interviews, which guided the participants while allowing them to correct the researcher. The study utilized causality and correlation. Causality showed whether the relationship between the incarcerated mother and the caregiver influenced the relationship between the mother and her children. Causality showed whether the kinship of the caregiver caused more or less contact between the incarcerated mother and her children. The relationship between the incarcerated mother and her children's caregiver correlated with the quality of her relationship with her children. The kinship of the caregiver correlated with the amount of contact between the incarcerated mother and her children.

Research Question and Sub-Questions

Central Question: How does the incarcerated mother's relationship with the child's caregiver impact her relationship with her child or children?

SQ1: How does the incarcerated mother's relationship with the child's caregiver impact the amount of contact she has with her child or children?

SQ2: What kinship of caregiver has the most significant impact on an incarcerated mother's relationship with her child or children?

SQ3: What kinship of caregiver has the most significant impact on the amount of contact an incarcerated mother has with her child or children?

Hypotheses

H₀₁: Incarcerated mothers who have a better relationship with their child's caregiver will have a better relationship with her children.

H₀₂: Incarcerated mothers who have a better relationship with their child's caregiver will have more contact with their children.

H₀₃: Kinship caregivers who are immediate family members will foster a better relationship between the incarcerated mother and her children.

H₀₄: Kinship caregivers who are immediate family members will foster more contact between the incarcerated mother and her children.

Participants

The participants in this study were incarcerated mothers from a medium-security state prison in the southeastern United States in February 2022. The state correctional system has four women's prisons, housing approximately 3,000 women. Approximately 380 women are incarcerated at the facility where the research was conducted.

Incarcerated mothers with biological children up to age 18 who were not in foster care or other custody were eligible for participation. A total of 79 offenders signed up for participation in the research survey, and 49 women reported to participate in the study, a participation rate of 62%. Reasons for not showing up included participation in other scheduled programs, conflicts with work details, or deciding against participation in the study. Thirteen women showed up but did not participate in the survey, of the 13 women 11 did not meet the criteria, one decided she did not want to participate during the consent process, and one decided she did not want to participate after the first few questions of the survey were administered. A total of 36 women participated. Generally,

it is recommended that there be at least 40 data points, or participants, in a quantitative research study (Budiu & Moran, 2021). However, considering the obstacles that the mothers may have faced when reporting to the study location and the sensitive nature of this research, the sample size for this study was appropriate.

Participants had a mean of 2.5 children, with seven participants having only one child (the highest number was eight children) for a total of 92 children. However, children over the age of 18, children in other legal custody, and children who passed away during the mother's incarceration—a total of 75 children—were not included in the study. There was a total of 48 caregivers among the 36 mothers. Twenty-six of the mothers, over 70%, had one caregiver for all their children, while 10 had multiple caregivers. Of these 10, eight women had two caregivers, and two women had three caregivers. Table 1 provides information on the number of caregivers.

Table 1

Number of Caregivers per Incarcerated Mother

No. of Caregivers	<i>n</i>	%
1	26	72.2%
2	8	22.2%
3	2	5.5%

Note. Total number of caregivers: 48. Total number of mothers: 36

Sentence lengths ranged from 6 months to 20 years. These sentences were separated into straight sentences (i.e., the mother will serve her entire sentence in prison) and split sentences (i.e., the mother will serve a specified amount of time in prison, followed by a specified amount of time on probation). The mean sentence length was 9

years when considering total sentence length. The mean amount of time to serve in prison was six years, and the mean amount of time to serve on probation following prison was three years. However, all mothers may not have provided information on their probation due to the wording of the survey relevant survey question. One mother was serving 6 months due to a parole violation; otherwise, sentences of less than 1 year were being served in the county jail. The mother serving 2 years, 11 months, and 16 days was in prison for violating her probation with new charges. Because she was awaiting sentencing on those charges at the time of this study, she may have needed to serve more time. Table 2 summarizes the participants' sentence lengths.

Table 2

Study Participants' Prison Sentence Lengths

Prison Sentence Length	<i>n</i>	%
6 months	1	2.8%
1 year	1	2.8%
1 year 5 months	1	2.8%
2 years	1	2.8%
2 years 11 months, 16 days	1	2.8%
3 years	6	16.7%
4 years	4	11.1%
5 years	6	16.7%
7 years	3	8.3%
8 years	2	5.6%
10 years	9	25%
20 years	1	2.8%

The mean age of the participants was 35, with the youngest participant being 25 and the oldest being 45. Over 60% of the participants were White, and the largest portion had a high school diploma or GED. Table 3 shows demographic information, such as age, ethnicity, and education, related to the participants.

Table 3

Participants' Demographic Information

Characteristic	<i>n</i>	%
Age in Years		
25	1	2.8%
26-30	6	16.7%
31-35	8	22.2%
36-40	15	41.7%
41-45	6	16.7%
Ethnicity		
White	23	63.9%
Black	10	27.8%
Hispanic	2	5.5%
Asian	0	0%
Other: Brazilian/Italian	1	2.8%
Education		
Did not complete school	5	13.9%
High School/GED	13	36.1%
Some College	11	30.5%
Completed College	6	16.7%
Post-Secondary	1	2.8%

Thirty-eight female children and 37 male children were included in the study. The youngest two children were 21 months old, and the oldest two children were 18 years old. The mean age of the 65 children was 10 years, the median age was 11 years, and the mode was 17 years, with seven children being this age. The biological father was the most common caregiver; these fathers took care of their children, but only one father was still with the incarcerated mother at the time of this study. A total of 17 mothers had children living with their biological fathers. The next most common caregiver was the children's grandmother. Fourteen mothers had a total of 21 children being cared for by grandmothers; however, only two of these children were with a paternal grandmother. Two stepfathers who were not still with the mother cared for a total of five children (thus, they may have been with their half-siblings). Table 4 outlines the kinship of the caregivers.

Table 4*Caregiver Information*

Caregiver(s)	<i>n</i>	%
Biological Father		
Legally Married	1	1.3%
Not Together	28	37.3%
Stepfather—Not Together	2	2.7%
Grandfather—Maternal	2	2.7%
Grandmother		
Maternal	19	25.3%
Paternal	2	2.7%
Grandparents	2	2.7%
Aunt and Uncle	1	1.3%
Aunt	8	10.7%
Great Aunt	1	1.3%
Great-Grandmother	3	4%
Family Friend	5	6.7%
Family Friend's Mother	1	1.3%

Results

The first statistical analysis applied Cronbach's alpha to determine the internal reliability of the survey instrument. Survey questions about demographics, yes/no questions, and responses to the same questions about additional children or caregivers were removed from the analysis. Demographic questions included questions 1, 2, 3, 4, 5, 8, 33, 34, and 35. Yes/No questions included 7, 10, 11, 12, 13, 28, 29, and 30. Questions that were answered multiple times based on there being more than one caregiver or child included 6, 14, 15, 18, 19, 20, 21, 22, 23, 24, 25, 26, 27, 30, and 31. Questions with

multiple responses were separated into their own categories; these included questions 6, 30, and 31. A total of 31 datasets were used in the analysis. Cronbach's alpha (α) was .92, indicating that the survey had high internal reliability and that the survey questions all measured the same concept. A copy of the survey instrument can be found in the Appendix.

Responses seeking to establish the quality of the category in question were *Excellent*, *Good*, *Neutral*, *Fair*, and *Poor*. These quality scales were all scored from 5 (*Excellent*) to 1 (*Poor*). For questions seeking to establish the level of agreement, responses were *Strongly Agree*, *Agree*, *Neutral*, *Disagree*, and *Strongly Disagree*. In four questions seeking agreement, scores ranged from 5 (*Strongly Agree*) to 1 (*Strongly Disagree*). There was a reverse score in three questions, with *Strongly Disagree* scored as 5 and *Strongly Agree* as 1. More points were equivalent to a stronger or more positive response to the questions.

Hypotheses

Hypothesis 1

This hypothesis held that incarcerated mothers who have a better relationship with their child's caregiver will have a better relationship with her children. Several patterns emerged after examining each aggregate score of survey questions 11, 12, 13, 14, and 15 for the relationship with the caregiver and questions 6, 16, and 17 for the relationship with the children.

Poor Relationship with Caregiver. Only one mother reported having a poor relationship with her caregiver, with an aggregate score of 3. She also reported feeling she had a neutral relationship with all three of her children.

Fair Relationship with Caregiver. Five mothers reported having a fair relationship with their children's caregivers, with a score range of 4-5. Three of these mothers reported having a neutral relationship with all their children. The other two mothers both reported having excellent relationships with their children; each also had children with other caregivers and reported having a better relationship with that caregiver. One of these mothers had an excellent relationship with her other caregiver and children, and one mother had a good relationship with the caregiver and an excellent relationship with her children.

Neutral Relationship with Caregiver. There was less consistency among the 12 mothers who rated their relationships with the caregivers as neutral. One mother described her relationship with her child as poor. One mother described her relationship with both her caregivers as neutral, but she reported that her relationship with one of her children was fair and the other was neutral; five described their relationship with their children as neutral; two described their relationship with their children as good; one described her relationship with one child as good and the other as neutral; and two described their relationship with their child as excellent.

Good Relationship with Caregiver. Mothers who reported having a good relationship with the caregiver more consistently reported having a good relationship with their children. Eleven mothers reported having good relationships with at least one of their caregivers. Two mothers reported neutral relationships with their children. One mother reported having a good relationship with both her caregivers, a neutral relationship with one child, and a good relationship with her other child. One mother reported having a good relationship with one caregiver but a neutral relationship with that

child. Three reported having good relationships with their children, and three reported having excellent relationships. One mother reported having a good relationship with one caregiver and a fair relationship with the other but reported having an excellent relationship with all of her children.

Excellent Relationship with Caregiver. Lastly, 11 mothers reported having excellent relationships with at least one of their caregivers. One mother reported having a neutral relationship with her children. One mother reported having a good relationship with her child. One mother reported a good relationship with her child whose caregiver she has an excellent relationship with; however, she reported having a neutral relationship with her other caregivers and children. One mother reported a good relationship with one child and an excellent relationship with the other. Six mothers reported excellent relationships. One mother reported having an excellent relationship with two of her caregivers but a fair relationship with the other caregiver and reported an excellent relationship with all her children. Table 5 summarizes these results.

Table 5*Survey Results: Mother–Caregiver and Mother–Child Relationships*

Mother	No. Caregivers/No. Children	Relationship with Caregivers	Relationship with Children
1	1 Caregiver/4 Children	Fair	Neutral-Child 1-4
2	1 Caregiver/1 Child	Neutral	Neutral
3	1 Caregiver/2 Children	Excellent	Good-Child 1 Excellent-Child 2
4	1 Caregiver/1 Child	Excellent	Excellent
5	1 Caregiver/1 Child	Good	Neutral
6	1 Caregiver/1 Child	Neutral	Excellent
7	1 Caregiver/1 Child	Good	Good
8	1 Caregiver/1 Child	Good	Neutral
9	1 Caregiver/3 Children	Poor	Neutral-Child 1-3
10	1 Caregiver/3 Children	Excellent	Excellent- Child 1-3
11	1 Caregiver/ 2 Children	Excellent	Excellent-Child 1-2
12	1 Caregiver/1 Child	Neutral	Poor
13	1 Caregiver/2 Children	Good	Excellent
14	1 Caregiver/2 Children	Excellent	Excellent
15	1 Caregiver/1 Child	Good	Good
16	1 Caregiver/2 Children	Excellent	Excellent
17	1 Caregiver/2 Children	Neutral	Neutral- Child 1-2
18	1 Caregiver/2 Children	Neutral	Good- Child 1-2
19	1 Caregiver/1 Child	Neutral	Excellent
20	1 Caregiver/2 Children	Fair	Neutral- Child 1-2
21	1 Caregiver/2 Children	Excellent	Neutral- Child 1-2
22	1 Caregiver/1 Child	Excellent	Good
23	1 Caregiver/3 Children	Neutral	Neutral- Child 1-3
24	1 Caregiver/1 Child	Good	Excellent
25	1 Caregiver/2 Children	Good	Good
26	2 Caregivers/4 Children	Fair-Caregiver 1-2 Fair-Caregiver 1	Neutral-Child 1-4 Excellent-Child 1-2
27	3 Caregivers/4 Children	Excellent-Caregiver 2 Excellent-Caregiver 3 Neutral-Caregiver 1 Neutral-Caregiver 2	Excellent-Child 3 Excellent-Child 4 Fair-Child 1 Neutral-Child 2
28	2 Caregivers/2 Children	Excellent	Excellent-Child 1-3
29	1 Caregiver/3 Children	Excellent-Caregiver 1	Good-Child 1
30	3 Caregivers/4 Children	Neutral-Caregiver 2-3	Neutral-Child 2-4
31	2 Caregivers/2 Children	Good-Caregiver 1 Good-Caregiver 2 Neutral-Caregiver 1	Good-Child 1 Neutral-Child 2 Good-Child 1-2
32	2 Caregivers/3 Children	Good-Caregiver 2	Neutral-Child 3
33	1 Caregiver/1 Child	Good	Excellent
34	2 Caregivers/4 Children	Fair-Caregiver 1 Good-Caregiver 2	Excellent-Child 1-2 Excellent-Child 3-4
35	1 Caregiver/2 Children	Neutral	Neutral-Child 1-2
36	1 Caregiver/2 Children	Neutral	Neutral-Child 1 Good-Child 2

Findings of Hypothesis 1. Pearson's correlation was used to analyze the caregiver's and children's relationships with the mother prior to incarceration and the caregiver's and children's relationships with the mother during incarceration ($r = 0.26449$, t score = 0, p value = .05). Additionally, Pearson's correlation was run using the caregiver's relationship prior to and during incarceration and the children's relationship prior to and during incarceration ($r = 0.35432$, t score = 3.76742, and p value = 0.00017). In both cases, the p value was equal to or less than .05, suggesting a statistical correlation between the caregiver's relationship with the mother and the mother's relationship with their children. The null hypothesis was not rejected.

Hypothesis 2

This hypothesis held that incarcerated mothers who have a better relationship with their child's caregiver will have more contact with their children. Evaluation of Hypothesis 2 occurred using aggregate scores of questions 11, 12, 13, 14, and 15, related to the mother's relationship with their caregiver, and aggregate scores of questions 30 and 31, related to the incarcerated mother's relationship with each child. Four mothers reported having no contact with their children. Two of these mothers also reported no contact with the caregiver. Of the remaining two mothers, one reported she had weekly phone calls with the caregiver and received letters from the caregiver twice per month. The other mother reported that she had daily calls with her caregiver and twice-monthly letters and emails. Ten mothers reported having daily phone calls or emails with their children.

Other outside factors can contribute to a mother's ability to maintain contact with her children and caregiver. Though phone calls may be placed from a phone inside the

mother's living area in the evening, these calls are costly, and a living area may lose its phone privileges based on poor behavior within the living unit. Families must register to receive calls from the inmate. Currently, local phone calls cost \$1.95 for every 15 minutes, and long-distance calls cost \$3.15 (Prison Insight, n.d.). However, for \$45.99, the family member can access a local number for 90 days to help reduce the cost of each call (GlobalTel, n.d.). Additionally, mothers are limited to 12 phone numbers on their call list. These lists can be updated twice yearly unless the individual listed as their emergency contact changes their phone number. Therefore, mothers may not be able to contact all of their children's caregivers.

Most mothers are issued a Georgia Offender Alternative Learning (GOAL) device, otherwise known as a tablet. These GOAL devices can send and receive emails to and from friends and family. Mothers not issued a GOAL device also have access to a kiosk where they may send and receive emails, which cost \$0.35 each, and attachments can be added for an additional fee of \$1.05 for three attachments (Georgia Department of Corrections, n.d.). Although these methods of communication also cost money, they are significantly less expensive than phone calls. However, the GOAL devices and kiosks are not generally taken for behavioral reasons. Video visits are scheduled and conducted through the kiosk and cost \$3.95 for one 30-minute visit (Georgia Department of Corrections, n.d.). Yet, issues often arise with the kiosk, such as the receiver or camera not working; thus, the mother cannot hear or see the family or vice versa.

In-person visitation is conducted on weekends and state holidays. However, these visits have been significantly impacted by the COVID-19 pandemic, which shut down in-person visitation from March 2020 to December 2020. When visitations resumed, only

two adult members of the mother's family could visit. Then they were opened to four members over 12 years of age, four members over 5 years of age, and by June 2022, four members of any age.

All in-person visitors must be approved by the facility. The application process requires those over the age of 18 to complete a two-page written application, notarized, and supply a copy of government-issued identification; the applicant must also submit to criminal history check. Children under 18 must complete the same application, but it does not have to be notarized and their criminal history is not checked. Mothers may add visitors to their list twice per year during May and November; very few exceptions are made to updating this list at any other time.

As a result of COVID-19, family members must register to visit on the agency's website by the Wednesday before the weekend they want to visit. Visits are limited to 2 hours: 9:00 a.m.–11:00 a.m. or 1:00 p.m.–3:00 p.m. Visitors cannot come for two sessions in one day, but they may come to one session each day of the weekend. Typically, visitation is only revoked if an offender is placed in segregation due to a disciplinary issue; in such cases, the visitors may come one day during the week, apart from routine visitation, for 2 hours, and this visit must be scheduled directly with the facility.

Regarding communication through letters, generally, anyone except another incarcerated person can freely write to the mother, and officers read and search all letters and cards coming into the facility. To correspond with another incarcerated person, the mother must submit a request form to her warden for approval. The warden then forwards the request for approval by the warden of the facility where the receiving individual is

incarcerated. This process only applies to immediate family members who are incarcerated; therefore, parents of the same child who are not married cannot be approved to correspond. Mail privileges are only revoked if the mother is caught violating the mail policy, such as mailing or attempting to receive contraband through the mail.

Pearson's correlation was used for statistical analysis of the mother's relationship with the caregiver and the amount of contact with her children ($r = 0.34115$, t score = 3.6155 , and p value = $.000027$). The p value was less than $.05$, so there was likely statistical significance between the relationship with the caregiver and the contact with the children. The null hypothesis was not rejected.

Hypothesis 3

This hypothesis held that kinship caregivers who are immediate family members will foster a better relationship between the incarcerated mother and her children. For the purposes of this study, biological fathers, grandparents, aunts, and uncles were considered immediate family members. There were 63 children with immediate family caregivers. The mean of the mother's relationship with her children in the care of immediate family members was 1.095238 , and for other caregivers, it was 0.58333 . A t -test was used to determine that $SD = 0.872006$, t score = 0.587043 , and p value = 0.284514 . Since the p value was over $.05$, there was not a statistical likelihood that immediate family members fostered a better relationship than other caregivers. The null hypothesis was rejected.

Hypothesis 4

This last hypothesis held that kinship caregivers who are immediate family will foster more contact between the incarcerated mother and her children. The same group of

caregivers for immediate family was used in Hypothesis 3. The mean for contact with immediate family members was 7.429 and for other family members was 2.917. A t-test was used to determine $SD = 1.227$, $t \text{ score} = 3.677$, $p \text{ value} = 0.002$. Therefore, the null hypothesis was not rejected. Immediate family member caregivers fostered more contact than other kinship caregivers between incarcerated mothers and their children.

Conclusion

This study at a small, medium-security prison included 36 incarcerated mothers, 75 children, and 48 caregivers. The findings offer insight into the broader relationships between and among incarcerated mothers, their children, and their caregivers. The women who participated in this study were, on average, serving 9 years in prison, were 35 years old, and had 2.5 children who were in the care of the child's biological father.

The data supported the hypothesis that incarcerated mothers who have a better relationship with their child's caregiver will have a better relationship with her children. The highest number of mothers (13) rated their relationships with the caregivers as neutral. Good and excellent relationships with the caregiver were reported by 11 mothers each. Only one mother reported having a poor relationship with the caregiver, and five reported having a fair relationship. However, there was less statistical support for Hypothesis 2, that the caregiver influences the amount of contact between the mother and her children. Sadly, two mothers reported having no contact with their caregiver or their children. Ten mothers reported daily calls or letters from their children. Good communication is essential to forming strong relationships, leading to better outcomes upon release.

There was no statistical evidence supporting Hypothesis 3, that immediate family members foster a better relationship with the incarcerated mother. The researcher hypothesized that family members would be more likely than non-family members to foster relationships between the mother and her children. One reason the non-family member may be as likely to foster the relationship is that they do not want to be caring for the children for any longer than necessary and therefore want the mother to have a relationship during her incarceration. Conversely, family members may be tired of dealing with the mother's negative behaviors and want the children to have a relationship with their mother. Regarding Hypothesis 4, the study findings suggested that the caregiver's kinship impacts the contact between the incarcerated mother and her children. Family members are more likely to take the time to assist the children in contacting their mother during her incarceration.

Among the women sampled in this research, the mother's relationship with the caregiver and the kinship of the caregiver did have some impact on the incarcerated mother's relationship with their children.

CHAPTER FIVE: CONCLUSION

Overview

The primary purpose of this study was to examine how the incarcerated mother's relationship with her children's caregiver impacts her relationship with her children. This study's findings will guide correctional agencies in better understanding the importance of programs that address the mother-caregiver relationship as well as the mother-child relationship during and after incarceration. Improving these relationships during incarceration will help the mother achieve successful reentry into society. This study, as well as future research, can help develop programming that will help prepare incarcerated mothers, their children, and their families for the mother's release.

Informing and equipping mothers and families upon release from incarceration has many benefits. Rebuilding, developing, and maintaining strong relationships will help the mother be more successful in her return to society. For most caregivers, this will lessen the effort required to care for the mother's children, by reducing the likelihood of recidivism. It will help children build a more stable life with their previously absent mother, and it will help the mother navigate and maintain a crime-free, productive life.

Restatement of the Problem

Building and maintaining relationships is essential to a mother's incarceration, as quality relationships help ensure that the mother has a solid support system upon release. Many incarcerated mothers want to maintain their motherly role with their children, even though they are largely absent from the children's daily lives. The problem is that the children's caregiver often controls the relationship and contact that the incarcerated mother can maintain with her children. However, prior to this study, there was little

research on how the caregiver's relationship with the incarcerated mother impacts the children's relationship with their mother. Understanding this dynamic can help mothers more successfully return home upon their release.

Research Question and Sub-Questions

Central Question: How does the incarcerated mother's relationship with the child's caregiver impact her relationship with her child or children?

SQ1: How does the incarcerated mother's relationship with the child's caregiver impact the amount of contact she has with her child or children?

SQ2: What kinship of caregiver has the most significant impact on an incarcerated mother's relationship with her child or children?

SQ3: What kinship of caregiver has the most significant impact on the amount of contact an incarcerated mother has with her child or children?

Outcomes

The main findings of this research suggest that an incarcerated mother's relationship with her children's caregiver impacts her relationship with her children. The better the relationship with the caregiver, the better the relationship with the children, and vice versa. Additionally, the kinship of the caregiver impacts the amount of contact the mother has with her children. Immediate family members facilitate more contact than other caregivers. However, the mother's relationship with the caregiver does not necessarily impact the amount of contact she has with the children. Understanding the caregiver's impact on the mother-child relationship can allow incarcerated mothers to work toward fostering positive, productive relationships with their children's caregivers.

This research also highlights various external factors contributing to an incarcerated mother's interactions with her children during her incarceration.

The study data illuminate the importance of correctional agencies fostering positive, supportive relationships between mothers and their caregivers. Though this research focused on a small sample in one prison, the results, arguably, are generalizable to correctional facilities across the United States. Understanding the various dynamics impacting relationships between incarcerated mothers and their children and the caregivers on the outside will help better meet the mother's needs while she is incarcerated. Meeting these needs during incarceration will in turn increase the mother's chances for success upon release.

Also, this research can inform efforts within the criminal justice system to protect children from many of the negative aspects of maternal incarceration. Mitigating these negative impacts is vital for the child's development.

Barriers to Contact

While it may seem to the mother that the caregiver is intentionally blocking, discouraging, or not assisting the child in maintaining contact with the mother, there may be other barriers to an incarcerated mother's contact with her children. When a mother does not have contact with her children, it may be because life is busy, with each day slipping away without talking to or emailing the incarcerated mother. This lack of contact may be due to the caregiver or the child. The child may not want contact with the mother and may have even requested that the caregiver help them avoid contact with their incarcerated mother. Also, the rules and regulations of the prison can impact the amount of contact the mother can have with her children. For instance, the mother may have lost

visitation privileges due to a disciplinary infraction, or visitation may have been cancelled for pandemic-related reasons.

Additionally, there are several criteria that an individual must meet before they are approved for entry into the prison to visit the mother. This research can influence the prison system to evaluate its visitation procedures because visitation helps facilitate healthy mother–child bonds (Lazzari et al., 2019). While the safety and security of the prison is paramount, each family’s circumstances should be considered before making visitation decisions. For example, a visitor cannot be on probation or parole and must have a clear criminal record for the last 12 months to be approved for visitation. However, due to these stringent criteria, there are often few if any individuals who can be approved to visit the incarcerated mother; therefore, she cannot receive visits from her children because there is no adult approved to bring them.

Impact of Incarceration

Children

Before incarceration, children often experience an array of adverse circumstances, including poverty, homelessness, substance use, violence, and physical or sexual abuse (Aiello & McCorkel, 2018; Arditti, 2016; Poehlmann-Tynan & Turney, 2021; Robillard et al., 2016; Western & Smith, 2018; Zeman et al., 2016; Zeman et al., 2018). These adverse circumstances often contribute to their mother’s incarceration. During the incarceration, children experience rapid environmental shifts, including changes to their living situation, their school, and their financial circumstances (Arditti, 2016; Easterling & Feldmeyer, 2017; Western & Smith, 2018; Zeman et al., 2016). Additionally, children of incarcerated parents have overall poor health and are at high risk for mental health

problems (Arditti, 2016; Heard-Garris et al., 2018; Wakefield, 2015). As adults, these children are more likely to have lower incomes, be uninsured, and be homeless, and they have an increased likelihood of arrest (Muftić et al., 2016; Uggen & McElrath, 2014).

To help mitigate these negative impacts on children, prisons should increase programmatic opportunities designed to enhance the mother's positive contact with her children during her incarceration. Various volunteer programs conduct one-day activities in the correctional facility during which children can visit their mother in prison and do crafts and play games, similar to a field day at a school. Positive experiences during incarceration benefit the mother and child, and they allow prison staff to see an offender as more than just an inmate, but as a mother interacting with her children. Some programs also offer informational sessions to caregivers, allowing them to learn about caring for someone else's child and to interact with other caregivers in similar situations.

Caregivers

Caregivers are significantly impacted by a mother's incarceration. The caregiver is often not the child's biological parent but still experiences great stress surrounding the child's care. Caregivers are often physically, emotionally, and financially overwhelmed (Arditti, 2016). The caregiver often already has the responsibility of caring for other family members in the same household, and the addition of more responsibility often compounds their strain and distress. Additionally, caregivers must go through the trouble of applying for visitation privileges; they must find proof of identity, have paperwork notarized, and return the application during the appropriate timeframe. Moreover, the mother often depends on the caregiver to provide money for her commissary. The amount of money the mother is allowed to receive each week varies by state but is \$60.00 per

week in the state where this research was conducted. This amounts to \$240.00 per month that the caregiver needs to provide, in addition to the cost of caring for the mother's child or children. For these and other reasons, the caregiver could grow upset, disappointed, and even angry with the mother.

Prisons resources can help the caregiver through the mother's incarceration. Prisons should develop informational packets to distribute to caregivers and other family members that explain the many nuances, complexities, and challenges of having an incarcerated family member. Providing as much information as possible to the caregiver and family at the beginning of the incarceration can help the loved ones have a more positive experience during the mother's incarceration.

Programs

Incarceration can be a time for self-reflection and self-improvement, and to help mothers focus on these things, correctional facilities are shifting their attention to education, vocation, and substance-abuse programming (Cooper-Sadlo et al., 2019; Crittenden & Koons-Witt, 2017; Glidden et al., 2020). Male-focused programming is giving way to gender-responsive programs that address the various pathways that lead women to prison, including trauma, poverty, and substance abuse, and failure to participate in these programs can set up the mother for failure, even before release (Bove & Tryon, 2018; Crittenden & Koons-Witt, 2017; Ortiz & Jackey, 2019; Vigessaa et al., 2016). Some programs allow the mother to have more contact with her children, motivating her participation (Benning & Lahm, 2016; Tremblay & Sutherland, 2017). Heartbound Ministries offers one such program. The Returning Hearts Celebration "unites children and their incarcerated parent on the prison grounds for an unforgettable

day of games, food, crafts, relationship building and teaching to facilitate the healing process and break the cycle of crime and incarceration in families” (Heartbound Ministries, n.d.). A similar program, One Day with God, offered by Forgiven Ministries, includes a class for the caregiver to take while the parent and child spend time together on prison grounds:

One Day with God camps began with a vision of one day inside prison walls where parent and child could reconcile with one another and spend time together with God-anointed mentors working beside them. The day includes games, crafts, lunch, music, clowns, an illusionist, face painting and a parent-and-child quiet time. It is a divinely appointed time for both child and inmate in which both can experience the love of God and find forgiveness and reconciliation. If one child could have a Christ-centered Mom or Dad return home from prison, there would be a joyous change in that home forever, and it could change the path that child takes in life. (Forgiven Ministries, n.d.)

While both programs represent a notable start, each could be better. Both programs are Christ-centered, which can make some mothers and caregivers who are not Christian hesitant to participate. A program designed around family, not faith, would reach a broader group of mothers and families. Additionally, these programs do not offer the mother and the caregiver an opportunity to connect, even though mother-caregiver reunification is central to the mother’s reentry. Working toward reunification can help the caregiver let go of any anger or hard feelings they harbor toward the mother. Developing a program that includes the caregiver could make the mother’s transition into the community more manageable and allow the mother and the caregiver to understand how

and when the mother should resume her role with her children (Wilson & Koons-Witt, 2021). Just because the caregiver is ready for the mother to care for her children does not mean the mother is ready to successfully resume her role as a mother. Lastly, current programs are run virtually the same in men's and women's prisons. Having gender-responsive classes for incarcerated mothers and their children's caregivers would help caregivers better understand the mother's pathway to incarceration—how she ended up in prison and what may best help keep her out.

The mother, caregiver, and children all need resources during incarceration to help them through the various emotions they experience. This programming must be made available to each person individually, and then there must be opportunities for the mother, caregivers, and children to come together. It is essential that this programming continue after the mother's incarceration to deal with new challenges brought to the forefront by the mother's release.

Successful Reentry

This research shows that the caregiver's relationship with the mother and the kinship of the caregiver can impact the mother's relationship with her children. Understanding these relationships and working toward assisting the mother in strengthening the relationship between herself and her caregivers can help her upon release. Having solid relationships within the community also makes the mother's reentry after release more successful.

Limitations of Current Research

The most significant limitation of this study was the researcher's employment with the agency under study. This required extra precautions to ensure that there was no

perceived conflict of interest between the researcher and study participants. These extra precautions may have limited the sample size. Furthermore, study participants were selected only from one of the four women's prisons in the state due to various factors; this prevented the participation of close-security inmates or individuals serving lengthy sentences (i.e., more than 13 years remaining) or life sentences. These mothers likely would have different experiences based on their security level, their imprisonment in a close security prison, the length of time they have been or will be incarcerated, and the nature of the crimes they committed. In addition, the global pandemic significantly altered incarcerated mothers' contact with caregivers and their children, likely skewing the results to some degree. Lastly, not including the incarcerated mother's caregiver and children in the research resulted in an incomplete picture of the relationship between the mother, caregiver, and children—representing a call for future research.

Areas for Future Research

As mentioned previously, future research should include caregivers and children, evaluating the mother–caregiver and mother–child relationships from both the caregiver's and children's perspectives. In instances where the mother feels very positively or negatively about her relationship with either the caregiver or the children, it would be interesting to determine if the latter also feel as strongly as the mother about the status of their relationship. Gaining insight into the overall status of the relationship can help determine if there is a strained relationship or if it is just life getting in the way of the caregiver's ability to foster a positive relationship with the incarcerated mother. It would also help to determine if the child is stifling the relationship with their incarcerated mother and what factors contribute to that decision.

Including the caregiver and children in future research would also generate information about the relationship status between the caregiver and the child and offer opportunities to explore how it impacts the relationship with the incarcerated mother. Exploring these various perspectives on these relationships would broaden the scope of the actual status of the mother's relationships. In addition, consideration should be given to the age of the children and the custody status involved. Many mothers in this study wanted to include their children over 18 years of age because those children also lived with the caregiver. Another area for exploration is how the incarceration of a mother impacts her adult children.

Gathering more in-depth details about the participants would be beneficial. The researcher was interested in their stories, but this research was not conducive to collecting those stories, nor did the researcher have time to speak more freely with the participants. However, several participants could have provided much more information. Thus, future research should explore why the incarcerated mother perceives these relationships in specific ways.

It would also be beneficial to conduct research with participants from each of the four women's prisons. There are no close-security offenders or offenders serving life sentences in the prison where the research occurred. These women would likely have different experiences than those at the medium-security prison where the research was conducted.

Lastly, the survey administered for study should be modified for future research. One modification could be to conduct an entirely qualitative study. Modifications to the current survey instrument would include capturing the entire term of their sentence, not

just the amount of time sentenced to serve in prison. There should also be a better way for the mother to provide information about each child and each caregiver; in this study, it became cumbersome to ensure that all the responses were coordinated with the right individual. Conducting research about visitation after almost 2 years of children being unable to visit made the questions related to visitation a bit tricky. Hopefully, future research will not continue to be impacted by the global pandemic, which has drastically modified the visitation process.

Summary

This research explored an understudied but vitally important component of an incarcerated mother's experience. The study results show that an incarcerated mother's relationship with her children's caregiver does impact her relationship with her children. The better the relationship with the caregiver, the better the relationship with the children. Additionally, the caregiver's kinship impacts the mother's relationship with her children and the amount of contact she has with her children during incarceration. Immediate family members foster better relationships and more contact than other caregivers. Understanding the components that impact an incarcerated mother can help correctional agencies better aid the mother during her incarceration. By helping the mother foster positive relationships with her children and their caregivers, agencies can help ensure that the mother has a successful incarceration and a more successful return to society.

REFERENCES

- Adams, B. L. (2018). Paternal incarceration and the family: Fifteen years in review. *Sociology Compass*, 12(3). <https://doi.org/10.1111/soc4.12567>
- Aiello, B. L., & McCorkel, J. A. (2018). “It will crush you like a bug”: Maternal incarceration, secondary prisonization, and children’s visitation. *Punishment & Society*, 20(3), 351–374. <https://doi.org/10.1177/1462474517697295>
- Aiello, B. L., & McQueeney, K. (2016). “How can you live without your kids?”: Distancing from and embracing the stigma of “incarcerated mother.” *Journal of Prison Education and Reentry*, 3(1). <https://doi.org/10.15845/jper.v3i1.982>
- Alper, M, Durose, M. R., & Markman, J. (2018). *2018 update on prison recidivism: A 9 year follow-up period (2005-2014)*.
<https://bjs.ojp.gov/content/pub/pdf/18upr9yfup0514.pdf>
- Alward, L. M. (2020). Assessing the relative influence of individual attitudes, social supports, and neighborhood context on reentry outcomes: What changes matter most?. *Criminal Justice and Behavior*, 47(11), 1487–1508.
<https://doi.org/10.1177/0093854819901158>
- Arditti, J. A. (2016). A family stress-proximal process model for understanding the effects of parental incarceration on children and their families. *Couple and Family Psychology: Research & Practice*, 5(2), 65–88.
<https://doi.org/10.1037/cfp0000058>
- Atkin-Plunk, C. A., & Armstrong, G. S. (2018). Disentangling the relationship between social ties, prison visitation, and recidivism. *Criminal Justice and Behavior*, 45(10), 1507–1526. <https://doi.org/10.1177/0093854818772320>

- Baker, J., McHale, J., Strozier, A., & Cecil, D. (2010). Mother-grandmother coparenting relationships in families with incarcerated mothers: A pilot investigation. *Family Process, 49*(2), 165–184. <https://doi.org/10.1111/j.1545-5300.2010.01316.x>
- Baldwin, L. (2018). Motherhood disrupted: Reflections of post-prison mothers. *Emotion, Space and Society, 26*, 49–56. <https://doi.org/10.1016/j.emospa.2017.02.002>
- Benning, C. L., & Lahm, K. F. (2016). Effects of parent-child relationships on inmate behavior. *International Journal of Offender Therapy and Comparative Criminology, 60*(2), 189–207. <https://doi.org/10.1177/0306624x14551402>
- Berger, L. M., Cancian, M., Cuesta, L., & Noyes J. L. (2016). Families at the intersection of the criminal justice and child protective services systems. *Annals of the American Academy of Political and Social Science, 665*, 171–194. <https://doi.org/10.1177/0002716216633058>
- Boman J. H., & Mowen, T. J. (2017). Building the ties that bind, breaking the ties that don't: Family support, criminal peers, and reentry success. *Criminology & Public Policy, 16*(3), 753–774. <https://doi.org/10.1111/1745-9133.12307>
- Bove, A., & Tryon, R. (2018). The power of storytelling: The experiences of incarcerated women sharing their stories. *International Journal of Offender Therapy and Comparative Criminology, 62*(15), 4814–4833. <https://doi.org/10.1177/0306624x18785100>
- Brunton-Smith, I., & McCarthy, D. J. (2016). The effects of prisoner attachment to family on reentry outcomes: A longitudinal assessment. *British Journal of Criminology, 57*(2), 463–482. <https://doi.org/10.1093/bjc/azv129>

- Budiu, R., & Moran, L. (2021). *How many participants for quantitative usability studies: A summary of sample-size recommendations*.
<https://www.nngroup.com/articles/summary-quant-sample-sizes/>
- California Department of Corrections and Rehabilitation. (n.d.). *Pleasant Valley State Prison*. <https://www.cdcr.ca.gov/facility-locator/pvsp/>
- Charles, P., Kerr, M., Wirth, J., Jensen, S., Massoglia, M., & Poehlmann-Tynan, J. (2021). Lessons from the field: Developing and implementing an intervention for jailed parents and their children. *Family Relations*, *70*, 171–178.
<https://doi.org/10.1111/fare.12524>
- Chui, W. H., & Yeung, A. Y. (2016). Understanding the conspiracy of silence: Factors associated with whether caregivers choose to disclose incarceration information to children with imprisoned fathers. *The Prison Journal*, *96*(6), 877–893.
<https://doi.org/10.1177/0032885516671921>
- Clark, V. A., & Duwe, G. (2017). Distance matters: Examining the factors that impact prisoner visitation in Minnesota. *Criminal Justice and Behavior*, *44*(2), 184–204.
<https://doi.org/10.1177/0093854816667416>
- Cochran, J. C., Siennick, S. E., & Mears, D. P. (2018). Social exclusion and parental incarceration impacts on adolescents' networks and school engagement. *Journal of Marriage and Family*, *80*(2), 478-498. <https://doi.org/10.1111/jomf.12464>
- Cooper-Sadlo, S., Mancini, M. A., Meyer, D. D., & Chou, J. L. (2019). Mothers talk back: Exploring the experiences of formerly incarcerated mothers. *Contemporary Family Therapy*, *41*(1), 92–101. <https://doi.org/10.1007/s10591-018-9473-y>

- Correa, N. P., Hayes, A. K., Bhalakia, A. M., Lopez, K. K., Cupit, T., Kwarteng-Amaning, V., Keefe, R. J., Greeley, C. S., & Van Horne, B. S. (2021). Parents' perspectives on the impact of their incarceration on children and families. *Family Relations: Interdisciplinary Journal of Applied Family Science*, *70*(1), 162–170. <https://doi.org/10.1111/fare.12529>
- Couvrette, A., Plourde, C., & Brochu, S. (2016). Negotiating identity: Three events that weaken the maternal identity of addicted law-breaking women. *Deviant Behavior*, *37*(11), 1252–1263. <https://doi.org/10.1080/01639625.2016.1170549>
- Craig, J. M., Cardwell, S. M., & Piquero, A. R. (2017). The effects of criminal propensity and strain on later offending. *Crime & Delinquency*, *63*(13), 1655–1681. <https://doi.org/10.1177/0011128716665334>
- Crittenden, C. A., & Koons-Witt B. A. (2017). Gender and programming: A comparison of program availability and participation in U.S. prisons. *International Journal of Offender Therapy and Comparative Criminology*, *61*(6), 611–644. <https://doi.org/10.1177/0306624X15601432>
- Dallaire, D. H., Zeman, J. L., & Thrash, T. M. (2015). Children's experiences of maternal incarceration-specific risks: Predictions to psychological maladaptation. *Journal of Clinical Child & Adolescent Psychology*, *44*(1), 109–122. <https://doi.org/10.1080/15374416.2014.913248>
- Dewey, S., Wesley, J. K., Epler, R., Connolly, C., Zare, B., & Bratton, R. (2018). Ontologies of blame and the cultural value of accountability: Formerly incarcerated women's narratives. *Psychology of Women Quarterly*, *42*(1), 88–104. <https://doi.org/10.1177/0361684317733284>

- Duckett, L. (2021). Quantitative research excellence: Study design and reliable and valid measurement of variables. *Journal of Human Lactation* 37(3), 456–463.
<https://doi.org/10.1177/08903344211019285>.
- Easterling, B. A., & Feldmeyer, B. (2017). Race, incarceration, and motherhood. *The Prison Journal*, 97(2), 143–165. <https://doi.org/10.1177/0032885517692791>
- Easterling, B. A., Feldmeyer, B., & Presser, L. (2019). Narrating mother identities from prison. *Feminist Criminology*, 14(5), 519–539.
<https://doi.org/10.1177/1557085118773457>
- Easterling, B. A., & Johnson, E. I. (2015). Conducting qualitative research on parental incarceration: Personal reflections on challenges and contributions. *The Qualitative Report*, 20(10), 1550–1567. <https://doi.org/10.46743/2160-3715/2015.2322>
- Fahmy, C., & Wallace, D. (2019). The influence of familial social support on physical health during reentry. *Criminal Justice and Behavior*, 46(12), 1738–1756.
<https://doi.org/10.1177/0093854819870268>
- Folk, J. B., Stuewig, J., Mashek, D., Tangney, J. P., & Grossmann, J. (2019). Behind bars but connected to family: Evidence for the benefits of family contact during incarceration. *Journal of Family Psychology*, 33(4), 453–464.
<https://doi.org/10.1037/fam0000520>
- Forgiven Ministries. (n.d.). *Forgiven Ministries One Day with God*.
<https://forgivenministry.org/about/programs/>

- Garcia, J. (2016). Understanding the lives of mothers after incarceration: Moving beyond socially constructed definitions of motherhood. *Sociology Compass*, *10*(1), 3–11.
<https://doi.org/10.1111/soc4.12337>
- Gaston, S. (2016). The long-term effects of parental incarceration. *Criminal Justice and Behavior*, *43*(8), 1056–1075. <https://doi.org/10.1177/0093854816628905>
- Georgia Department of Corrections (n.d.). *Send money/view receipts*.
<http://gdc.ga.gov/InmateInfo/Payments/Payments>
- Glidden, M. D., Brown, T. C., Smith, M., & Hughes, M. H. (2020). Prisoners with purses: The financial literacy and habits of incarcerated women. *Corrections: Policy, Practice, and Research*, *5*(5), 377-400.
<https://doi.org/10.1080/23774657.2018.1549966>
- GlobalTel. (n.d.). *How to sign up for calls from inmates*. <https://blog.globaltel.com/how-sign-calls-inmates/>
- Gobeil, R., Blachette, K., & Stewart, L. (2016). A meta-analytic review of correctional interventions for women offenders. *Criminal Justice and Behavior*, *43*(3), 301–322. <https://doi.org/10.1177/0093854815621100>
- Halter, E. (2018). Parental prisoners: The incarcerated mother’s constitutional right to parent. *Journal of Criminal Law & Criminology*, *108*(3), 539–567.
<https://doi.org/0091-4169/18/10803-0539>
- Harris, M. S. (2017). Incarcerated mothers: Trauma and attachment issues. *Smith College Studies in Social Work*, *87*(1), 26–42.
<https://doi.org/10.1080/00377317.2017.1246796>

- Haskins, A. R., Amorim, M., & Mingo, M. (2018). Parental incarceration and child outcomes: Those at risk, evidence of impacts, methodological insights, and areas of future work. *Sociology Compass*, *12*(3). <https://doi.org/10.1111/soc4.12562>
- Heard-Garris, N., Winkelman, T. N. A., Choi, H., Miller, A. K., Kan, K., Schlafer, R., & Davis, M. M. (2018). Health care use and health behaviors among young adults with history of parental incarceration. *Pediatrics*, *142*(3). <https://doi.org/10.1542/pegs/2017-4314>
- Heartbound Ministries. (n.d.). *Heartbound Ministries Returning Hearts*. <https://www.heartboundministries.com/returning-hearts>
- Herbst, J. H., Branscomb-Burgess, O., Gelaude, D. J., Seth, P., Parker, S., & Fogel, C. I. (2016). Risk profiles of women experiencing initial and repeat incarcerations: implications for prevention programs. *AIDS Education and Prevention*, *28*(4), 299–311. <https://doi.org/10.1521/aeap.2016.28.4.299>
- Hyppolite, M. L. (2017). Understanding child outcomes within a multiple risk model: Examining parental incarceration. *Social Sciences*, *6*(3), 82. <https://doi.org/10.3390/socsci6030082>
- Iratzoquil, A. (2020). A gendered model of lifetime experiences of strain. *Youth & Society*, *52*(2), 166–186. <https://doi.org/10.1177/0044118X17736328>
- Jones, M. S., Worthen, M. G. F., Sharp, S. F., & McLeod, D. A. (2018). Bruised inside out: The adverse and abusive life histories of incarcerated women as pathways to PTSD and illicit drug use. *Justice Quarterly*, *35*(6), 1004–1029. <https://doi.org/10.1080/07418825.2017.1355009>

- Kajstura, A. (2019). *Women's mass incarceration: The whole pie 2019*. Prison Policy Initiative. <https://www.prisonpolicy.org/reports/pie2019women.html>
- King, K. M. & Delgado, H. (2021). Losing a family member to incarceration: Grief and resilience. *Journal of Loss and Trauma*, 26(5), 436–450.
<https://doi.org/10.1080/15325024/2020.1816753>
- Lawson, N. (2016). It's a man's prison: How the traditional incarceration model fails females in Kansas. *Kansas Journal of Law and Public Policy*, 25(2), 273–288.
<https://lawjournal.ku.edu/wp-content/uploads/2021/02/V25I2A4.pdf>
- Lazzari, S. R., Miller, K. M., & Lee, J. (2019). Opening the “black box”: Exploring enhanced visitations at a women’s prison. *Journal of Social Service Research*, 45(5), 684–695. <https://doi.org/10.1080/01488376.2018.1501792>.
- Leigey, M. E. (2019). Female institutional misconduct: A test of deprivation, importation, and gendered importation theories. *The Prison Journal*, 99(3), 343–362.
<https://doi.org/10.1177/0032885519837532>
- Link, N. W., Ward, J. T., & Stansfield, R. (2019). Consequences of mental and physical health for reentry and recidivism: Toward a health-based model of desistance. *Criminology*, 57(3), 544–573. <https://doi.org/10.1111/crim.2019.57.issue-3/issuetoc>
- Mancini, C., Baker, T., Sainju, K., Golden, K., Bedard, L. E., & Gertz, M. (2016). Examining external support received in prison and concerns about reentry among incarcerated women. *Feminist Criminology*, 11(2), 163–190.
<https://doi.org/10.1177/1557085115579483>

- Markson, L., Lamb, M. E., & Lösel, F. (2016). The impact of contextual family risks on prisoners' children's behavioural outcomes and the potential protective role of family functioning moderators. *European Journal of Developmental Psychology, 13*(3), 325–340. <https://doi.org/10.1080/17405629.2015.1050374>
- Mayo Clinic. (n.d.a). *Antisocial personality disorder*.
<https://www.mayoclinic.org/diseases-conditions/antisocial-personality-disorder/symptoms-causes/syc-20353928>
- Mayo Clinic. (n.d.b). *Post-traumatic stress disorder (PTSD)*.
<https://www.mayoclinic.org/diseases-conditions/post-traumatic-stress-disorder/symptoms-causes/syc-20355967>
- Mangurenje, T., & Konner, M. J. (2018). Mothers in prison: The effects of incarceration on children's behavioral health outcomes. *International Public Health Journal, 10*(3), 275–286.
<https://www.proquest.com/openview/acea7d847cd3c4964ed6c5194e06db4a/1?pq-origsite=gscholar&cbl=2034853>
- Mechling, B. M., Ahern, N. R., & Palumbo, R. (2018). Applying ambiguous loss theory or children of parents with an opioid use disorder. *Journal of Child and Adolescent Psychiatric Nursing, 31*(2-3), 53–60.
<https://doi.org/10.1111/jcap.12209>.
- Menting, A. T. A., Castro, B. O. D., & Matthys, W. (2017). Arrested motherhood: Parenting, cognitive distortions, and depressive symptoms in mothers being released from incarceration. *Parenting, 17*(3), 177–186.
<https://doi.org/10.1080/15295192.2017.1333317>

- Mertens, A., & Laenen, F. V. (2020). Pains of imprisonment beyond prison walls: Qualitative research with females labeled as not criminally responsible. *International Journal of Offender Therapy and Comparative Criminology*, 64(13-14), 1343–1364. <https://doi.org/10.1177/0306624X19875579>
- Muftić, L. R., Bouffard, L. A., & Armstrong, G. S. (2016). Impact of maternal incarceration on the criminal justice involvement of adult offspring. *Journal of Research in Crime and Delinquency*, 53(1), 93–111. <https://doi.org/10.1177/0022427815593988>
- New York Department of Corrections and Community Supervision. (n.d.). *Family Reunion Program*. <https://doccs.ny.gov/family-reunion-program>
- Nosek, M., Stillman, J. A., & Whelan, Z. (2019). Youth experiences of parent incarceration: Doing time from both sides. *Journal of Psychosocial Nursing and Mental Health Services*. <https://doi.org/10.3928/02793695-20181220-03>
- Ortiz, J. M., & Jackey, H. (2019). The system is not broken, it is intentional: The prisoner reentry industry as deliberate structural violence. *The Prison Journal*, 99(4), 484–503. <https://doi.org/10.1177/0032885519852090>
- Parolin, M., & Simonelli, A. (2016). Drug addiction: The contribution to parenting interventions. *Frontiers in Psychiatry*, 7. <https://doi.org/10.3389/fpsy.2016.00152>
- Pearl, J. (2000). *Causality: Models, reasoning, and inference*. Cambridge University Press.

- Pettus-Davis, C., Veeh, C. A., Davis, M., & Tripodi, S. (2018). Gender differences in experiences of social support among men and women releasing from prison. *Journal of Social and Personal Relationships, 35*(9), 1161–1182.
<https://doi.org/10.1177/0265407517705492>
- Poehlmann-Tynan, J., Burnson, C., Runion, H., & Weymouth, L.A. (2017). Attachment in young children with incarcerated fathers. *Development and Psychopathology, 29*(2), 389–404. <https://doi.org/10.1017/50954579417000062>
- Poehlmann-Tynan, J. & Turney, K. (2021). A developmental perspective on children with incarcerated parents. *Child Development Perspectives, 15*(1), 3–11.
<https://doi.org/10.1111/cdep.12392>
- Prison Insight. (n.d.). *How to call an inmate in Georgia*. <https://prisoninsight.com/how-to-call-an-inmate/georgia/>
- Ray, B., Grommon, E., Buchanan, V., Brown, B., & Watson, D.P. (2017). Access to recovery and recidivism among former prison inmates. *International Journal of Offender Therapy and Comparative Criminology, 61*(8), 874–893.
<https://doi.org/10.1177/0306624X15606688>
- Roettger, M., & Houle, B. (2021). Assessing the relationship between parental imprisonment in childhood and risk of sexually transmitted infections: A cohort study of U.S. adults in early adulthood. *BMJ Open, 11*(4).
<https://doi.org/10.1136/bmjopen-2020-038445>

- Robillard, A. G., Holliday, R. C., Dehart, D. D., Lewis, K., Rutherford, Y., & Amutah, N. N. (2016). An exploratory study examining risk communication among adolescent children, their incarcerated mothers, and their caregivers. *Journal of Health Care for the Poor and Underserved, 27*(2A), 101–119. <https://doi.org/10.1353/hpu.2016.0050>
- Sawyer, W. & Wagner P. (2020). *Mass incarceration: The whole pie 2020*. Prison Policy Initiative. <https://www.prisonpolicy.org/reports/pie2020.html>
- Schubert, E. C., Duininck, M., & Shlafer, R. J. (2017). Visiting mom: A pilot evaluation of a prison-based visiting program serving incarcerated mothers and their minor children. *Journal of Offender Rehabilitation, 55*(4), 213–234. <https://doi.org/10.1080/10509674.2016.1159641>
- Semenza, D. C., & Grosholz, J. M. (2019). Mental and physical health in prison: How co-occurring conditions influence inmates' misconduct. *Health & Justice, 7*(1). <https://doi.org/10.1186/s40352-018-0082-5>
- Sinko, R., DeAngelis, T., Alpajora, B., Beker, J., & Kramer, I. (2020). Experience of stigma post incarceration: A qualitative study. *Open Journal of Occupational Therapy, 8*(3), 1–16. <https://doi.org/10.15453/2168-6408.1610>
- Smith, C. J., & Young, D. S. (2017). A retrospective look at the experience of parental incarceration and family reentry during adolescence. *Social Work in Public Health, 32*(8), 475–488. <https://doi.org/10.1080/19371918.2017.1360819>

- Sobba, K. N., Prochaska, B., & Berthelot, E. (2017). Maternal incarceration penalty: An examination of the effect of maternal conviction and incarceration on childhood delinquency. *Journal of Criminal Psychology, 7*(1), 29–46.
<https://doi.org/10.1108/JCP-09-2016-0025>
- Solinas-Saunders, M., & Stacer, M. J. (2017). A retrospective analysis of repeated incarceration using a national sample: what makes female inmates different from male inmates? *Victims & Offenders, 12*(1), 138–173.
<https://doi.org/10.1080/15564886.2015.1101033>
- Sparks, L., Stauss, K., & Grant, K. (2017). Letters to children project: A letter-writing group designed to help incarcerated women develop or reinforce their roles as mothers. *Journal of Offender Rehabilitation, 56*(5), 349–372.
<https://doi.org/10.1080/10509674.2017.1327920>
- Stearns, A. E. (2019). Baking bittersweet: Mothers' dessert-making behind bars. *Feminist Criminology, 14*(5), 612–632. <https://doi.org/10.1177/1557085118769748>
- Tasca, M. (2016). The gatekeepers of contact: Child-caregiver dyads and parental prison visitation. *Criminal Justice and Behavior, 43*(6), 739–758.
<https://doi.org/10.1177/0093854815613528>
- Taylor, C. J. (2016). The family's role in the reintegration of formerly incarcerated individuals: The direct effects of emotional support. *The Prison Journal 96*(3), 331–354. <https://doi.org/10.1177/0032885516635085>

- Thomson, N. D., Moeller, F. G., Amstadter, A. B., Svikis, D., Perera, R. A., & Bjork, J. M. (2020). The impact of parental incarceration on psychopathy, crime, and prison violence in women. *International Journal of Offender Therapy and Comparative Criminology*, *64*(10-11), 1178–1194.
<https://doi.org/10.1177/0306624X202904695>
- Tremblay, M. D., & Sutherland, J. E. (2017). The effectiveness of parenting programs for incarcerated mothers: A systematic review. *Journal of Child and Family Studies*, *26*(12), 3247–3265. <https://doi.org/10.1007/s10826-017-0900-8>
- Trotter, C., Flynn, C., & Baidawi, S. (2016). The impact of parental incarceration on children's care: Identifying good practice principles from the perspective of imprisoned primary carer parents. *Child & Family Social Work*, *22*(2), 952–962.
<https://doi.org/10.1111/cfs.12315>
- Turney, K. & Goodsell, R. (2018). Parental incarceration and children's wellbeing. *The Future of Children*, *28*(1), 147–164.
<https://files.eric.ed.gov/fulltext/EJ1179185.pdf>
- Turney, K., & Lanuza, Y. R. (2017). Parental incarceration and the transition to adulthood. *Journal of Marriage and Family*, *79*(5), 1314–1330.
<https://doi.org/10.1111/jomf.12429>
- Uggen, C., & McElrath, S. (2014). Criminology parents behind bars first in a series parental incarceration: What we know and where we need to go. *Journal of Criminal Law & Criminology*, *104*(3), 597–604.
http://users.soc.umn.edu/~uggen/Uggen_McElrath_JCLC_14.pdf

- Vigesaa, L. E., Bergseth, K. J., & Jens, K. R. (2016). Who participates in reentry programming? An examination of women offenders in a Midwestern state. *Journal of Offender Rehabilitation, 55*(5), 308-328.
<https://doi.org/10.1080/10509674.2016.1181131>
- Wakefield, S. (2015). Accentuating the positive or eliminating the negative? Paternal incarceration and caregiver-child relationship quality. *Journal of Criminal Law & Criminology, 104*(4), 905–927.
<https://scholarlycommons.law.northwestern.edu/jclc/vol104/iss4/6>
- Wakefield, S., Lee, H., & Wildeman, C. (2016). Tough on crime, tough on families? Criminal justice and family life in America. *ANNALS of the American Academy of Political and Social Science, 665*(1), 8–21.
<https://doi.org/10.1177/0002716216637048>
- Walsh, K. (2016). Inadequate access: Reforming reproductive health care policies for women incarcerated in New York state correctional facilities. *Columbia Journal of Law and Social Problems, 50*(1), 45–95.
- Warren, J. M., Coker, G. L., Collins M. L. (2019). Children of incarcerated parents: Considerations for professional school counselors. *The Professional Counselor, 9*(3), 185–199. <https://doi.org/10.15241/jmw.9.3.185>
- Washington State Department of Correction. (n.d.). *Family Services Program*.
<https://www.doc.wa.gov/family/program.htm>
- Western, B., & Smith, N. (2018). Formerly incarcerated parents and their children. *Demography, 55*(3), 823–847. <https://doi.org/10.1007/s13524-018-0677-4>

Wilson, A., & Koons-Witt, B. (2021). “They still know I’m their momma”: Incarcerated mothers’ perceptions of reunification and resuming a caregiver role. *Feminist Criminology*, 27(2A), 1–24. <https://doi.org/10.1177/1557085120983468>

YWCA of Greater Portland (n.d.). *Family Preservation Project*.

<https://www.ywcapdx.org/what-we-do/family-preservation-project/>

Zeman, J. Dallaire, D., & Borowski, S. (2016). Socialization in the context of risk and psychopathology: Maternal emotion socialization in children. *Social Development*, 25(1), 66–81 <https://doi.org/10.1111/sode.12117>

Zeman, J. L., Dallaire, D. H., Folk, J. B., & Thrash, T. M. (2018). Maternal incarceration, children's psychological adjustment, and the mediating role of emotion regulation. *Journal of Abnormal Child Psychology*, 46(2), 223–236.

<https://doi.org/10.1007/s10802-017-0275-8>

APPENDIX: RESEARCH SURVEY INSTRUMENT

1.	How long have you been continuously incarcerated?		
	Include the number of years and months:		
	Arrest Date MM/DD/YYYY:		

2.	How long were you sentenced to serve in prison?	
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3.	What is your Maximum Release Date (MRD) MM/YYYY?	
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4.	What is your Tentative Parole Month (TPM) MM/YYYY?		
	If you do not know your TPM select the reason why:		
		I am eligible for Parole but do not know my TPM.	
		I do not know if I am eligible for Parole.	
	I am not eligible for Parole.		

5.	Do you still have pending charges/probation violation, where you anticipate the county will pick you up upon your release from prison?		Yes	No
	What are these charges?			
	If yes, do you anticipate these charges will result in your immediate return to prison?		Yes	No

6.	How many children do you have?			
	Please list gender, age, and specific relationship prior to and during incarceration:			
	Gender (M/F)	Age	Relationship (Poor; Fair; Good; Excellent; Other: Explain)	
			Prior to Incarceration	During Incarceration

7.	Are all your children with same caregiver?	Yes	No
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8.	If yes, what is the kinship of the caregiver to the child?		
	Grandmother		Biological Father
		Maternal	You and the father are legally married
		Paternal	You and the father are together, but not legally married
			You and the father are no longer together
	Grandfather		Step-Parent
		Maternal	You and the step-parent are legally married
		Paternal	You and the step-parent are together, but not legally married
			You and the step-parent are no longer together
	Family Friend		Other:
	If no, please list each child and the kinship of the caregiver to the child.		
	Gender (M/F)	Age	Caregiver Relationship to the child Grandmother, Grandfather, Biological Father, Step-Parent, Family Friend, Other

9.	How much planning prior to your incarceration did you do to determine the caregiver of your child?		
	None		The current caregiver usually takes care of my children so there was not much planning required
	Very Little		Other:
	A significant amount		

10.	Is the person you intended to care for your child(ren) actually the individual caring for them?	Yes	No
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11.	Has the current caregiver cared for your child(ren) during any previous incarcerations (jail or prison)?	Yes	No
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12.	Has the current caregiver cared for your child(ren) while you were involved in criminal activity, but not incarcerated?	Yes	No
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13.	Has the current caregiver cared for your child(ren) in day-to-day life (i.e. while you were working or attending school, etc.)?	Yes	No
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For the following items, identify your feelings:

14.	I would describe my relationship with the caregiver to my child(ren) prior to my incarceration as...				
	Poor	Fair	Neutral	Good	Excellent
	Other:				

15.	I would describe my relationship with the caregiver to my child(ren) during my incarceration as...				
	Poor	Fair	Neutral	Good	Excellent
	Other:				

16.	I would describe my relationship with my child(ren) overall prior to incarceration as...				
	Poor	Fair	Neutral	Good	Excellent
	Other:				

17.	I would describe my relationship with my child(ren) overall during incarceration as...				
	Poor	Fair	Neutral	Good	Excellent
	Other:				

18.	I would describe my child(ren)'s relationship with their caregiver overall prior to my incarceration as...				
	Poor	Fair	Neutral	Good	Excellent
	Other:				

19.	I would describe my child(ren)'s relationship with their caregiver overall during my incarceration as...				
	Poor	Fair	Neutral	Good	Excellent
	Other:				

20.	How would you describe each child's relationship with their caregiver?			
	Gender (M/F)	Age	Child's relationship with Caregiver (Poor; Fair; Good; Excellent; Other)	
			Prior to Incarceration	During Incarceration

For the following items, identify your level of agreement:

21.	I feel my child(ren)'s caregiver supports my child(ren)'s desire to have contact with me?				
	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
	Other:				

22.	If my child(ren) does not want contact with me, my child(ren)'s caregiver encourages them to have contact with me.				
	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
	Other:				

23.	My child(ren)'s caregiver talks poorly about me to my child(ren).				
	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
	Other:				

24.	I think there are people my child(ren) has contact with who speak poorly of me?				
	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
	Other:				

25.	I think my child(ren)'s caregiver defends me in these situations.				
	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
	Other:				

26.	I think my child(ren)'s caregiver feels I am a good mother to my child(ren).				
	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
	Other:				

27.	I think my caregiver will attempt to hold my child(ren) from me upon my release from custody?				
	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
	Why?				

28.	Are all your children and their caregivers approved for visitation?	Yes	No
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29.	Do you have a phone number on your phone list for all your children or their caregivers?		Yes	No		
If no to question 28. or 29., please list each child and if they are approved or not for visitation/phones.						
	Gender (M/F)	Age	Visitation		Phones	
			Approved	Not Approved	Approved	Not Approved

30	How often do you communicate with your child(ren) through each method? **You will answer this question for each child, please notify the researcher if you need additional copies of this question**							
	Gender (M/F)			Age				
	Phone Calls	Never	Holidays	Daily	Weekly	2x per month	Mont hly	Other
	Letters	Never	Holidays	Daily	Weekly	2x per month	Mont hly	Other
	Emails	Never	Holidays	Daily	Weekly	2x per month	Mont hly	Other
	Video Visit	Never	Holidays	Daily	Weekly	2x per month	Mont hly	Other
	In Person Visit (Prior to COVID)	Never	Holidays	Daily	Weekly	2x per month	Mont hly	Other
	In Person Visit (Since COVID)	Never	Holidays	Daily	Weekly	2x per month	Mont hly	Other
	Explain "Other":							

31	How often do you communicate with your caregiver, for the purposes of communication about or with your child(ren), through each method?							
	Phone Calls	Never	Holidays	Daily	Weekly	2x per month	Mont hly	Other
	Letters	Never	Holidays	Daily	Weekly	2x per month	Mont hly	Other
	Emails	Never	Holidays	Daily	Weekly	2x per month	Mont hly	Other
	Video Visit	Never	Holidays	Daily	Weekly	2x per month	Mont hly	Other
	In Person Visit (Prior to COVID)	Never	Holidays	Daily	Weekly	2x per month	Mont hly	Other
	In Person Visit (Since COVID)	Never	Holidays	Daily	Weekly	2x per month	Mont hly	Other
	Explain "Other":							

32	If you have had less in-person visits since COVID what is the reason?
.	
	The children no longer want to visit me (not related to COVID)
	My child(ren) is under age 12 and cannot visit
	My child(ren)'s caregiver does not want to visit due to the shorter visitation timeframe
	My child(ren)'s caregiver or I do not want to visit because of COVID
	There has been no change in in-person visits since before COVID
	Other:

Personal Data:

33.	What is your ethnicity?			
	White	Black	Hispanic	Asian
	Other:			

34.	How old are you?	
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35.	What is your education level?	
		Did not finish high school What is the last grade you completed?
		High School/GED
		Some College
		Completed College
		Post-Secondary
	Other:	

VITA

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