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CORRECTIONAL STRATEGIES TO MITIGATE THE IMPACT OF A LOVED ONE'S INCARCERATION ON WOMEN'S HEALTH AND WELLBEING

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Abstract

Decades of robust research clearly establishes that caring for incarcerated loved ones adds considerable stress, anxiety, and hardship to women's lives, with important implications for their health and wellbeing. Although incarceration is a complex and multi-systemic issue, correctional systems can enact concrete strategies to ease this burden and help protect women's health. These include facilitating communications between women and their incarcerated loved ones, providing ways for women to know that their loved one is safe and well, making visitation more family-friendly and supportive of health-promoting activities, and removing financial barriers to staying in touch with loved ones.

Keywords: Incarceration, jail, prison, women, family, caregiving



Introduction

Correctional policies and practices tend to focus on people inside of jails and prisons—those held there and those who work there. Yet there are millions of additional people whose lives are profoundly affected by correctional systems: family members and other loved ones of people who are incarcerated. Caring for someone who is incarcerated involves various forms of labor, including communication, visitation, financial support, and legal advocacy. Most of this labor is provided by women, and although the socio-structural reasons that result in women being called upon to care for incarcerated loved ones are complex, there are straightforward ways correctional systems can help to ease the burden of providing such caregiving. Doing so is advantageous to all involved, since positive family and social connections are associated with improved outcomes for in-custody wellbeing, including decreased violence and increased participation in programming (Burns, Murray, Ferguson, & Moore, 2024; Cochran, 2012), as well as for successful transitions to housing, employment, and services upon release (Bales & Mears, 2008; Berg & Huebner, 2011; Duwe & Clark, 2013).

Brief review of justifying literature

Over 10 million people are held annually in jails and prisons in the United States alone (U.S. Department of Justice & Office of Justice Programs, 2023). Carceral facilities rarely collect information about family relations, and health, education, social service, and other community systems do not routinely screen for a loved one's incarceration. The Family History of Incarceration Survey, fielded in 2018, provides the strongest estimates of the prevalence of family member incarceration, finding that 45% of people in the United States had ever had an immediate family member held in jail or prison (Enns et al., 2019). Estimates of current family member imprisonment derived from the 2006 General Social Survey found approximately 25% of women had a loved one in prison at the time the survey was conducted (Lee, McCormick, Hicken, & Wildeman, 2015). Family member incarceration is more concentrated among people of color and people with lower incomes (Enns et al., 2019), reflecting structural factors such as policing practices, money bail, and divestment from social services that make people targeted by racism or experiencing poverty more likely to wind up in carceral facilities (Rabuy & Kopf, 2015, 2016; Tonry, 1995; Wacquant, 2007).

Research clearly indicates that the emotional, financial, practical, and advocacy labor of taking care of people in jail or prison falls primarily to women (Arditti, 2012; Christian, Mellow, & Thomas, 2006; Deckard, 2024; Delerme, 2025; deVunono-Powell, Schweidler, Walters, & Zohrab, 2015; McKay, 2022; Page, Piehowski, & Soss, 2019). Comfort (2008) developed the conceptual framework of "secondary prisonization" to analyze how non-incarcerated women's daily lives are profoundly affected by carceral institutions, which can shape their options for and choices about food, housing, residential location, physical activity, employment, sexual intimacy, and even clothes and belongings (M. Comfort, Grinstead, McCartney, Bourgois, & Knight, 2005; M. L. Comfort, 2003; O Grinstead et al., 2005). Women often spend substantial periods of time behind bars as they maintain relationships with loved ones, and thereby are subjected to intrusive surveillance, restrictive rules, and punishment despite not having been accused or convicted of a crime (M. L. Comfort, 2002; Fishman, 1990; Girshick, 1996). Harris (2025) coined the term "mainline mama" to describe the experiences women form in relationship to prisons—through visitation or incarceration—while engaging with family, children, partners, and other women. Mainline Mama is a practical and theoretical way of harnessing the experiences of Black women to describe experiences with state violence, but also connections and joys.

There is a rich literature demonstrating that women experience a range of health-damaging conditions such as anxiety, depression, stigma, despair, loneliness, and high levels of stress related to a loved one's incarceration (Braman, 2004; Christensen, Turney, & Park Jang, 2025; Clayton-Johnson, 2024; M. Comfort, 2007; M. Comfort et al., 2016; McKay, Comfort, Lindquist, & Bir, 2019; Turney, Sugie, Marín, & Kaiser, 2024; Western & McLanahan, 2000). As Lee and Wildeman (2013) observe, these types of emotions and experiences are highly plausible pathways to chronic health conditions such as cardiovascular disease, hypertension, and diabetes, and the health-specific research that has been conducted to date supports this hypothesis (Lee, Wildeman, Wang, Matusko, & Jackson, 2014; Sirois, 2020). Harris (2021; 2025) has extensively documented how women caring for incarcerated loved ones frequently present as hyper-competent and strong because they have been socialized to manage other people's tremendous needs while ignoring their own emotional and physical health. Women also may experience health consequences from the trauma of witnessing a loved one's arrest (for examples focused on children's trauma, see Metcalfe et al., 2023; Muentner, Kapoor, Weymouth, & Poehlmann-Tynan, 2021; Phillips & Zhao, 2010; Roberts et al., 2014); worrying about a loved one's safety (Boppre & Novisky, 2023; J. Harris, 2021; Tadros, Presley, & Guzman, 2023); distress around managing phone communications, such as being available for a call, not receiving a call when it is expected, or having phone calls surveilled and controlled (M. Comfort, 2008; Soderlund, 2023); financial precarity caused by the loss of a loved one's economic or childcare support combined with the costs of phone calls, visiting, and sending money to cover essentials such as toiletries and food (deVunono-Powell et al., 2015; Olga Grinstead, Faigles, Bancroft, & Zack, 2001; Schwartz-Soicher, Geller, & Garfinkel, 2011); and logistics of jail and prison visitation, including long drives, unpredictability of visits occurring, lack of healthy food options around and inside of carceral facilities, surveillance, searches, and managing children in restricted environments (Clayton, Richardson, Mandlin, & Farr, 2018; M. L. Comfort, 2003; Fishman, 1990; Girshick, 1996; K. Harris, 2021; Miller, 2021; Zarrow & Blackwell, 2024).

It is increasingly evident that incarceration is a key determinant of health disparities not only for currently and formerly incarcerated people but also for the women who care for them (Lee & Wildeman, 2013; Wildeman, Lee, & Comfort, 2013; Wildeman, Schnittker, & Turney, 2012; Wildeman & Wang, 2017). While the root causes of this phenomenon are deep and complicated and require a robust multi-system approach, there also are strategies correctional systems can advance in the near-term to decrease stress, facilitate caregiving, and protect women's health.

Applied considerations to mitigate the impact of a loved one's incarceration on women's health and wellbeing

Communication

Across research studies and anecdotal accounts, communication is consistently identified as a major source of stress for women caring for incarcerated loved ones. Although the modern world has evolved to facilitate instant, inexpensive, and reliable means of communicating through text messages, emails, and voice and video calls from mobile phones, women are forced to routinely contend with a multitude of challenges to maintaining regular communications with loved ones in jails and prisons. In some facilities, people who are incarcerated continue to be required to use landline pay phones to contact their families and friends; these calls often are limited to 15-minutes once a day, are made from public places where other people can overhear conversations, and are placed as collect calls with inflated fees. It is increasingly common for people who are incarcerated to be provided with



tablets through which they can send electronic messages (emails and texts) and place phone calls. However, these devices (and the wireless or cell services that they rely on) experience frequent technology glitches, rendering the communications conducted through them inconsistent, blurry, and indecipherable. In addition, voice and video calls must be initiated by the person who is incarcerated, so if a woman wants to check on her loved one's wellbeing, she must wait until the person contacts her rather than being able to proactively reach out to them. Thus, while tablets and technology have improved communications to some extent, it is still very difficult for women to assuage their worries and verify that their loved ones are safe and well.

Given the many health and safety concerns one might have about an incarcerated loved one, it is important that facilities provide women with a reliable and no-cost means of gaining information. With the expansion of technology into correctional services, there is a ripe opportunity for an app that could send push notifications with key updates. When someone is booked into a facility, they could designate family members or close connections whom they want to be made aware of their status. Then if the incarcerated person is admitted to the infirmary, is placed in isolation, or no longer has access to their tablet for another reason, a notification could be sent to their designated contacts (ideally containing a phone number the outside person could call for more information). Knowing they would be informed in a timely manner if their loved one was in crisis or needed help would likely go a long way in lessening women's day-to-day stress and anxiety, and could be particularly helpful for women whose loved ones have cognitive or speech challenges that impede their ability to be in touch. An app serving this purpose should draw on existing technology developed for healthcare platforms that protects highly sensitive information and avoids sharing users' data with the company or third parties.

Women caring for incarcerated loved ones often find themselves operating as informal social workers as they plan for the housing, employment, healthcare, and treatment programs someone may need upon their release (M. Comfort, 2016; Miller, 2021). An app providing information about an incarcerated loved one could be further developed to include case management components, such as reminders of the loved one's medical and court appointments; notifications of completion of educational, vocational, or psychosocial programs (including any certificates or credentials earned); contact information for the assigned probation or parole officer; and resources for post-release services. Centralizing this information and providing it directly to women would acknowledge and support the role many mothers, aunts, partners, and sisters take on in helping their loved one transition out of incarceration. This could be especially beneficial for women caring for people who have a hard time tracking and organizing this information themselves.

If correctional systems voiced demand for a loved ones' communication app, the technology likely would be developed quickly. In the interim, making information about incarcerated people's safety, wellbeing, appointments, programming, and re-entry planning needs through other means (e.g., a password-protected website, a counselor, or case manager) would assist women caring for incarcerated loved ones, decrease stress, and improve wellbeing.

Visiting Conditions

Visiting conditions at jails and prisons are another primary source of hardship for women. The app described above could also use push notifications to improve women's ability to know when visiting

has been suspended at a facility due to a lockdown and alert them to any changes to visiting hours or regulations. Some institutions post these types of updates on a website or have numbers people can call, but women caring for incarcerated loved ones often are exceptionally busy managing households, working one or more jobs, and taking care of children and elders (Harris, 2025). Push notifications are routine for updates to weather, transportation, and other conditions that affect our ability to plan our days and manage our time. Real-time alerts would decrease the number of people who show up at jails and prisons who are disappointed and upset when they are told there has been a change and they will not be able to see their loved one, which benefits correctional staff as well as visitors.

As helpful as technology may be, it is imperative that technology not be used as a substitute for human connection. There has been a trend in recent years toward replacing in-person visits with video visits, including the paradoxical practice of requiring people to travel to a jail or prison only to sit in a separate area where they talk with their loved one via video. Video visitation can provide a necessary alternative for people who cannot get to a facility due to distance, mobility issues, or illness, and having a video visit is preferable to not being able to see and talk with a loved one (McNeeley, 2025). However, research strongly supports the benefits of in-person (sometimes referred to as “touch”) visits, especially for establishing connections with children (Charles, Poehlmann, Kerr, Jensen, & Pritzl, 2023; Fasah, 2018; Kremer et al., 2022).

Research also points to the advantages for parents, children, and correctional staff of creating specific areas in visiting rooms with toys, picture books, and mats for children to lie or sit on (Dart, 2021). These areas are beneficial for supporting children’s wellbeing by giving them a space where they can act in age-appropriate ways (e.g., not be expected to sit in a plastic chair for hours) and where they can interact with their incarcerated loved one through play, storytelling, and cuddling in their lap. It may work best to have designated correctional officers who are trained in parent-child interactions supervise these areas. If space allows, having one area for very young children and one for school-age children (with puzzles, board games, and art supplies) would help prevent the harmful adultifying of youth who feel pressured to suppress developmentally appropriate behaviors in order to comply with correctional regulations (Aiello & McCorkel, 2017).

Prison visits are often characterized by traveling long distances in cars or on buses, having limited access to anything other than fast food and vending machines, having one’s movements be heavily restricted and surveilled, and not being allowed to bring purses, toiletries, or other personal belongings into visiting rooms (Christian, 2005; M. Comfort, 2008; Harris, 2025). Practices such as making healthy food options available in waiting areas and visiting rooms and giving permission for visitors and their loved ones to walk together rather than sit in chairs could greatly enhance visitors’ experiences and help counteract visitation’s health-damaging effects. Inclusion of health-promoting practices would be even more beneficial, such as providing an area near the parking lot for visitors to stretch (similar to yoga and meditation rooms that have started appearing in airports and hospitals) or offering a light movement class in the visiting room (indeed, activity-based visitation could be welcome for people who are struggling to connect verbally and for children who need to discharge excess energy). Facilities could also permit women to bring in strollers and small playpens (or these could be provided once visitors are through security checks), and assistance could be provided for women carrying children and people with mobility challenges on long walks from parking lots and to visiting rooms. Finally, menstrual hygiene products should be freely available in restrooms in visiting

areas to avoid women needing to end visits early if caught unawares, and people should be allowed to bring in umbrellas on rainy days to avoid sitting in wet clothes during visits (if umbrellas pose a security concern, they could be left in an entry area of the visiting room).

Financial support

The incarceration of a loved one often has significant financial consequences due to the removal of a wage-earning or childcare-providing adult from the household as well as the incursion of extra expenses for legal representation, fines and fees, communication, and visitation. Financial barriers are consistently reported as a barrier to staying in touch with an incarcerated loved one (Boppre, Dehart, & Shapiro, 2022), and correctional systems can help reduce these barriers and thereby support the maintenance of emotional support and social bonds.

As noted earlier, in many institutions technological advances have shifted communications between people who are incarcerated and their loved ones to emails, texts, and video calls placed through tablets. These interactions should all be free of charge. There is a long history of charging high fees for phone calls with incarcerated loved ones, but this practice levies additional financial burden on already under-resourced families. It also penalizes women who are providing a service to correctional facilities by supporting incarcerated people's emotional wellbeing and improved mental health. Indeed, women already contribute to these communications by paying for their own mobile phones and cell service.

Similarly, it can be extremely costly to visit people who are incarcerated. Women may need to take time off of work, arrange for childcare, cover travel costs (including lodging), and pay for multiple meals for themselves and their loved ones (Harris, 2025). Given the demonstrated benefits of in-person visitation for people who are incarcerated and their loved ones, His Majesty's Prison and Probation Service in the United Kingdom offers the Assisted Prison Visits Scheme, which provides financial support for prison visits (Gov.UK, 2025). Similar assistance is offered in the United States by the Prison Visitation Fund (2025), a non-profit organization founded by people who were incarcerated and who credit their ability to move forward after release to the strong ties they were able to maintain due to visiting with their loved ones. Correctional systems could partner with such organizations and with state and local governments to provide financial aid to women who are unable to cover these expenses. In addition, institutions could work to reduce the costs of jail and prison visitation by helping establish free shuttles from public transportation hubs, offering on-site childcare, maximizing scheduling flexibility so that women can organize visits on days when they do not work, and providing food and drink free of charge in waiting areas and visiting rooms.

Conclusion

Incarceration is a complex issue that can be daunting to address. However, the last several decades have yielded a robust body of research that clearly documents many hardships faced by women caring for incarcerated loved ones and supports policy changes that ease this burden. Concrete practices that strengthen communications between women and their loved ones and help women better understand their loved ones' medical, legal, and reentry resources and needs could decrease women's anxiety and stress while supporting their ongoing efforts to improve their loved ones' wellbeing during and after incarceration. Likewise, putting measures in place to facilitate logistics and improve conditions for jail and prison visitation could minimize damage to women's mental and

physical health and potentially promote wellness practices like movement and healthy eating. Finally, addressing the economic toll of caring for incarcerated loved ones and providing financial support for communications and visitation would reduce women's need to sacrifice their own and their families' welfare to maintain emotional connection and social ties, ultimately benefitting everyone through the increased likelihood of positive in-custody and post-release outcomes.

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