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Katarzyna Celinska¹ and Jane A. Siegel²

Abstract

Although female offenders are the fastest growing population in prison today, relatively few studies focus on their unique experiences as mothers. In this study, the authors utilize 74 semistructured interviews with mothers before trial and during incarceration to document coping strategies employed to deal with potential or actual separation from their children. From the study data, seven strategies emerge: being a good mother, mothering from prison, role redefinition, disassociation from prisoner identity, self-transformation, planning and preparation, and self-blame. The findings show that mothers used multiple strategies and tended to employ emotion-focused and adaptive coping techniques. The policy implications are discussed.

Keywords

women in prison, incarcerated mothers, coping, separation from children

Introduction

Although they constitute only 7.5% of inmates (West & Sabol, 2009), female offenders are the fastest growing population in the America's prisons today.

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Some attribute this trend to gender-blind sentencing and the “war on drugs,” which has been labeled an “unannounced war on women” (Chesney-Lind, 1998; Dalley, 2002).

From 1977 to 2008, the rate of incarceration of women grew by 943%, whereas the incarceration rate for men increased by 520% (Hill & Harrison, 2005; West & Sabol, 2009). Since 2000, women’s incarceration rates have increased on average 4.6% annually (West & Sabol, 2009). In 2008, 115,779 women were incarcerated in state and federal prisons and approximately 5 times more were under correctional supervision in the community (West & Sabol, 2009). The Federal Bureau of Justice Statistics reports that most incarcerated women are mothers and, unlike fathers in prison, were the main caregivers for their children before their imprisonment (Glaze & Maruschak, 2009; Mumola, 2000). In addition, the number of children with a mother in prison more than doubled (131% increase) since 1991. In 2007, approximately 81% of mothers aged between 25 and 34 in state prison and 75% in federal prisons lived with their minor children prior to incarceration (Glaze & Maruschak, 2009).

Although those statistics indicate a growing social problem, relatively few studies in the fields of criminal justice and corrections focus on women offenders’ experiences as mothers (Enos, 2001). This study was intended to fill this gap. It utilizes 74 semistructured interviews conducted with mothers before trial and during incarceration, to document coping strategies that they employed to deal with potential or actual separation from their children.

Though there are studies that have examined women’s experiences in prison, this study makes several important contributions. First, the sample is relatively large in comparison to other studies in this area: 74 interviews were conducted with women who were either separated or potentially faced pending separation from their children due to incarceration. Second, we analyzed the data using grounded theory to identify coping techniques. In addition, we classified them within a coping framework. Third, unlike other qualitative studies, this study sampled both women who were incarcerated in jail or prison and those who were in the community awaiting trial. This sampling strategy helps to differentiate behavioral patterns among women involved with the criminal justice system at different stages in the criminal justice process.

Prior Research on Incarcerated Mothers

Research suggests that female prisoners tend to share certain characteristics and many have problems that predate incarceration. They are likely to be poor, single, and disproportionately racial minorities; on average, incarcerated

mothers have two children (Covington, 2002; Glaze & Maruschak, 2009; Hairston, 1991; Stanton, 1980). Most incarcerated women experienced multiple traumas in their lives, and many were sexually abused as children and victimized in their adolescence and adulthood (Boudin, 1998; Chesney-Lind, 1998; DeHart, 2008; Greene, Haney, & Hurtado, 2000). Most women in prison are incarcerated for drug-related offenses and were abusing drugs or alcohol before incarceration—arguably as a way of adapting to earlier life-course abuse and violence (Widom, 1989). According to McDaniels-Wilson and Belknap (2008), women's sexual victimization in many cases is a trajectory leading to criminal behavior. Henriques and Manatu-Rupert (2001) suggested that prison is a "safe haven" for some African American women from abuse and from addiction. In that sense, prison may actually mitigate some women's preexisting problems. Compared to men, women are more likely to be incarcerated for property crimes and minor offenses. Lastly, many incarcerated women suffer from mental health problems such as depression (Bloom & Covington, 2009; Dalley & Michels, 2009; Glaze & Maruschak, 2009; Lindquist & Lindquist, 1997; Mumola, 2000).

Much of the research on women in prison has emphasized the centrality of the maternal role to women's identities and the importance that maintaining a maternal relationship has in adjustment within the institution and postrelease (e.g., Greene et al., 2000). In her study of 25 incarcerated mothers, Enos (2001) found that imprisoned mothers attempt to maintain their relationship with children by presenting themselves as "good mothers" and disassociating from other imprisoned but "unfit" mothers. Furthermore, research has shown that mothers consider isolation and separation from their children to be the hardest aspects of imprisonment (e.g., Dodge & Pogrebin, 2001; Hairston, 1991). Based on her own experience in prison and observations and interviews conducted with other inmates, Boudin (1998) reported that incarcerated women feel "enormous grief" about time lost with their children. Others have found that women prisoners' primary concern centered on the effects of separation and incarceration on their children's lives and psychological development (Kazura, 2001).

Thus, children continue to play a central role in women's lives even during imprisonment. Mothers in prison often see children as motivation for change and their primary purpose in life (Enos 2001; Ferraro & Moe, 2003), and they worry about their children's care (Henriques, 1982). Women are concerned about their ability to both sustain their relationships with children during imprisonment and regain or continue it after release from prison (Enos, 2001). While incarcerated, they may idealize their relationships with their children and have high hopes about their family lives following reunification (Hairston,

1991; Stanton, 1980). However, once released, the pains of financial hardship, social stigma, shame, and struggles in addiction recovery often make it difficult for women to reclaim their relationships with their children (Dodge & Pogrebin, 2001; Richie, 2001). According to Arditti and Few (2006), female ex-offenders need assistance in addressing “three threats” to full community reintegration: substance abuse, trauma, and mental disorders. In addition, many researchers report that mothers face not only familial and community barriers to maintaining maternal roles and relationships during and after imprisonment but also criminal justice and child welfare system impediments (e.g., see Beckerman, 1998, for details on the social and personal cost of the Adoption and Safe Families Act of 1997).

The literature on relationships between imprisoned parents and their children tends to focus on the issue of maintaining parent–child contact during incarceration. Many researchers believe that children’s visits, phone calls, and mail assist in sustaining a parent–child bond, lessen the deleterious impact of separation, and help parents adjust to the prison environment (Berry & Eigenberg, 2003; Casey-Acevedo & Bakken, 2002). Even correctional officials, who may hold negative stereotypes about incarcerated mothers (Schram, 1999), tend to agree that visitation helps inmates cope with separation from their families (Casey-Acevedo & Bakken, 2002).

Other researchers assert that the benefits from visitation may be contingent upon the type of relationship between child and parent before incarceration, the immediate goals of the visit, and available support for children and parents before, during, and after the visit (Gabel, 1992). Others suggest that, in fact, phone calls are a more effective mode of communication than visits (Owen & Bloom, 1995). Finally, some skeptical researchers argue that prison visitation imposes a very restricted experience of motherhood and, as a result, does little to lessen the pains of imprisonment. Even when mothers are visited by their children, the visits are usually irregular, or of poor quality, due to the same problems that limit some children and their families from visiting mothers in the first place: the distant location of women’s prisons, lack of transportation, restrictive and burdensome prison rules, and child-unfriendly visiting areas (Block & Potthast, 1998; Bloom & Steinhart, 1993; Mumola, 2000). For example, Hairston (1998) describes families and children standing in line for hours to be cleared for a short visit in crowded and noisy facilities or visits with jailed mothers who are separated from visitors by a glass barrier. Some correctional facilities impose a no-visitation policy for the first 60 days following a prisoner’s arrival in prison (Kazura, 2001). Finally, further challenges to sustaining relationships between imprisoned parents and their families arise when correctional institutions treat family visitation as a behavioral control

mechanism, withholding visitation for rule infractions (Dressel, Porterfield, & Barnhill, 1998).

Understandably, given the problems listed previously, some children's caregivers discourage or prohibit visits (Bloom & Steinhart, 1993). Researchers have found that from 40% to 71% of mothers in prison or jail had never been visited by their children (Bloom & Steinhart, 1993; Casey-Acevedo & Bakken, 2002; Hairston, 1991; Mumola, 2000). This low rate of visitation is attributable in part to prisoners' own desires, with many mothers reporting that they prefer not to see family and friends while incarcerated (Casey-Acevedo & Bakken, 2002). Hairston found that 63% of women in her sample claimed that they did not want to be visited by their children. However, they were the same women who had never been visited by any family members in the first place.

Coping With Potential or Actual Separation due to Imprisonment

Thoits (1995) recommended that research on stress and coping, usually studied within a psychological framework, should be expanded to sociological questions to promote social change. The current study is an attempt to follow this recommendation by analyzing a phenomenon not sufficiently described in the literature, related to the social problem of increasing female incarceration rates, and its concomitant impact on family structure.

Clearly, being imprisoned poses many challenges to a woman's ability to sustain her maternal role, given that "they are unable to do mothering on a daily basis" (Berry & Eigengberg, 2003, p. 104). Recognizing that incarcerated women would view separation from their children as one of the most challenging and burdensome aspects of imprisonment, we expected that they would employ diverse approaches to cope with separation and to sustain their maternal identity.

Moreover, based on studies among incarcerated mothers, we expected that a similar pattern would emerge among women anticipating incarceration. Incarceration is not an event that occurs unexpectedly. It takes place after an extended period involving the adjudicatory process and sentencing. The mere act of being arrested raises the specter of possible separation and the need to cope with the prospect of that eventuality.

Coping has been defined as "constantly changing cognitive and behavioral efforts to manage specific external and/or internal demands that are appraised as taxing or exceeding the resources of the person" (Lazarus & Folkman, 1984, pp. 141). In this definition, "coping is a process-oriented"

phenomenon and is viewed as a way to manage stressful circumstances and events regardless of what the outcomes are (Lazarus & Folkman, 1984). We presume that pending or actual separation from children due to imprisonment is indeed a “taxing” circumstance that requires coping. Thus, our research attempted to uncover the ways mothers cope with the pressures and strains associated with their roles as mothers.

The concept of coping has its roots in psychoanalytic ego psychology (Lazarus & Folkman, 1984). Accordingly, the literature on coping is concentrated mainly in the field of psychology. Within the fields of criminology and criminal justice, only a limited number of quantitative studies addresses coping by incarcerated females. In one such study of female adjustment to imprisonment Negy, Woods, and Carlson (1997) found six coping techniques that were positively associated with adjustment and two that were negatively associated. However, this study did not differentiate between mothers and nonmothers. Houck, Loper, and Booker (2002) surveyed 362 incarcerated mothers to measure parental stress related to imprisonment. They found that mothers exhibited stress associated with self-perceived skills and competence as a parent. Interestingly, the mothers did not report distress related to attachment with their children. Although this study focused on sources of maternal stress during incarceration, it did not address the issue of how mothers managed or coped with stress. Finally, Berry and Eigenberg (2003) examined factors that affected the maternal role strain of incarcerated women. They found minorities, women with shorter sentences, and those who approved of the temporary child care arrangements for their children experienced significantly less role strain than other incarcerated mothers.

We located no qualitative studies that directly examine how mothers cope with possible or actual separation from their children. However, several studies detail the hardships and challenges of separation from children and mothering from prison. For example, Enos (2001) interviewed 25 mothers incarcerated in a state prison, focusing on how imprisoned mothers managed to maintain their roles as mothers. She found that mothers sought to affirm their fitness as mothers by “identity talk”—that is, defending their past and present maternal competence in conversations with others—and by actions like arranging visits with children and being involved in children’s current care. Other studies based on interviews with incarcerated mothers (e.g., Datesman & Cales, 1983; Hairston, 1991) tend to focus on the consequences of separation and related programmatic and policy changes.

After identifying different coping styles described by the mothers in this study, we categorized them within Lazarus and Folkman’s (1984) binary coping typology of emotion- and problem-focused coping. Emotion-focused

coping modifies and decreases stress and trauma via cognitive-emotional means such as positive reinterpretation and acceptance—both of which are often aided through religion. Mechanic (1962) described emotion-focused coping as a defense used to maintain integrity and to control feelings.

Problem-focused coping, by contrast, involves actively managing the problem that causes the stressful situation. Components of problem-focused coping include defining the problem, planning and choosing solutions, weighing the costs and benefits of action, and the actual behavior engaged in as the coping mechanism.¹ In addition, we also consider whether the coping mechanisms are adaptive or maladaptive (Carver, Scheier, & Weintraub, 1989). Whereas adaptive methods improve the management of stress, maladaptive techniques ultimately pile on more stress and decrease coping capacity. Carver et al. provide examples of maladaptive techniques such as acting out, withdrawal, or denial.

Methods and Data

The data used in this study come from a larger study examining the impact of parental incarceration on children and included semistructured interviews conducted by the second author between 2002 and 2004. The researcher interviewed 37 incarcerated mothers (20 were in pretrial detention in the county jail of a large Northeastern city and 17 were inmates in a Northeastern state prison), and 37 mothers awaiting trial at home. The protocol for this study was reviewed and approved by the Rutgers University Institutional Review Board. The adult participants signed forms for their own participation as well as for their children's participation. The child participants gave assent to participate.

The interviews provided women with an opportunity to share their life stories and discuss their parenting in depth. Ferraro and Moe (2003) suggested that life history narratives are the optimal method to collect data from incarcerated women and other marginalized populations.

Women recruited for the study all had at least one child aged between 8 and 18 years. Those in the pretrial groups (in pretrial detention and at home awaiting trial) were recruited for the purpose of observing mother-child relationships prior to incarceration, whereas the prison sample was recruited in order to better understand the consequences of long-term separation from children. The women in this group were represented by the city's public defender office. Nearly all those interviewed at home were recruited at court when they came in for their arraignment. The public defender provided any female defendant with a brief description of the study and asked her whether

she would be willing to speak with the researcher. The women in pretrial detention were recruited in the county jail when a lawyer from the defender's office went to interview them in preparation for case disposition. Finally, flyers describing the study were distributed in the prison by the prison staff. Women interested in participating were then allowed to attend the general meeting with the researcher, after which individual meetings were held.

Altogether, 21 interviews were recorded by hand (17 interviews in the jail setting, 1 in the maximum-security wing of the women's prison and 1 at home), and the rest were tape-recorded. Both tape-recorded and handwritten interviews were transcribed and then coded using Atlas Ti, a qualitative analysis program.

In our analysis, we let coping categories emerge using the grounded theory method described by Glaser and Strauss (1967). The grounded theory technique allows for interpretation that aims at generating concepts, hypotheses, and theories from the data. This technique seems to be particularly useful when analyzing narratives and life stories. After identifying the major coping styles, we applied a basic coding scheme described earlier for classifying coping mechanisms as emotion focused, problem focused, and as adaptive or maladaptive.

The sample includes 55 Black (74%), 12 White (26%) and 7 (10%) Latino mothers. Thus, African American women are overrepresented, reflecting the particular racial makeup of the population of defendants and inmates from whom the samples were drawn. The average age of the mother in the sample was 34 years; also, the mother was single and had 3 children from 2 partners; 78% of incarcerated mothers lived with at least one of their children before incarceration; 55 women (81%) admitted to past and/or current drug abuse predominantly of cocaine; 24 mothers (32%) spontaneously reported being abused as children; and 34 mothers (46%) reported having been in a violent intimate relationship. On average, mothers had been arrested 5 times and incarcerated once (including their current incarceration).² The women's most common current charges were drug possession and/or sale or assault. Further demographic data are presented in Table 1.

Results

Although mothers' stories and experiences differ in many respects, the central theme that emerged in the interviews was motherhood. Mothers who were incarcerated and mothers who were awaiting trial talked extensively about their experiences as mothers. Incarcerated mothers were aware of their inability to perform most of their maternal duties, whereas mothers awaiting trial were dealing with the possibility of losing their ability to perform them.

Table 1. Sample Description Based on Self-Reported Data (N = 74)

		Characteristics	Percent/ range	Mean
Demographics	Race	Black	74%	
		White	26%	
	Ethnicity	Latino	10%	
	Age		23-51	34
	Highest grade completed ^a	10th grade and below	30%	
		11th grade	31%	
		12th grade	25%	
		Some college	13%	
		Not known	1%	
	Number of children		1-10	3
	Marital status	Single	44%	
		Separated/divorced	15%	
Married		14%		
Common law		13%		
Widowed		4%		
	Not known	10%		
Criminal justice involvement	Prior arrests		1-40	5
	Number of times incarcerated		0-5	1
	Charges ^a	Drug possession/sale	24%	
		Assault	24%	
		Theft	9%	
		Robbery	7%	
		Other	31%	
		Not known	6%	
	Alcohol use ^a	No problem	28%	
		Current sporadic use	18%	
Past dependence		20%		
Past sporadic use		11%		
	Not known	23%		

(continued)

Table 1. (continued)

Characteristics		Percent/ range	Mean
Drug use ^a	No problem	18%	
	Current sporadic use	1%	
	Current dependence	11%	
	Past dependence	55%	
	Past sporadic use	7%	
	Not known	7%	
Other ^b	Current partner in prison	14%	
	Self-reported history of mental health– related problems	27%	
	Abused as child	30%	
	Domestic violence	46%	

a. The percentages in some columns do not add to 100 due to rounding.

b. Women spontaneously reported these data.

As a consequence, mothers were experiencing stress and strain and discussed how they tried to cope with them.

This analysis uncovered seven techniques that incarcerated mothers and mothers who were awaiting trial employed to cope with the problems arising from actual or pending separation from their children: being a good mother, mothering from prison, role redefinition, disassociation from prisoner identity, self-transformation, planning and preparation, and self-blame. The definition and our prevalence estimates for each technique, as well as its categorization within the theoretical framework of coping, are presented in Table 2. In what follows, we discuss each coping strategy in more detail.

Being a Good Mother

“Being a good mother” was an emotion-focused coping strategy that mothers uniformly employed to affirm their fitness as mothers. Mothers in all three groups tended to present themselves as good and capable mothers. However, the arguments and symbols used to construct and convey a self-image as a fit mother differed slightly among the subgroups.

Table 2. Coping Techniques: Definition, Categories, and Prevalence

Coping	Definition	Coping category	Percentage
Being a good mother	Motherhood as a central identity	Emotion focused, adaptive	100%
Disassociation from prisoner identity	Detachment from prison and other inmates.	Emotion focused, adaptive (short-term), and maladaptive (long-term)	31% & 41% (jailed & incarcerated)
Mothering from prison	Maintaining relationship and parental supervision from prison	Problem focused, adaptive	66% & 95% (jailed & incarcerated)
Role redefinition (role reversal)	Children as capable grown-ups: friends and/or confidants.	Emotion focused, adaptive	51% & 49% (before trial)
Self-transformation	Mother resolves to change behavior and life-style	Emotion focused and problem focused, adaptive	61% & 88% (incarcerated)
Planning and preparation	Making decisions about future	Problem focused (pretrial sample) and emotion focused (incarcerated mothers), adaptive	54% & 100% (incarcerated)
Self-blame	Guilt and shame for separation from children	Emotion focused, maladaptive	32% & 59% (incarcerated)

Note: The first percentage is based on the whole sample (74 cases) and the second percentage is based on the subsample identified in the parenthesis.

Mothers awaiting trial at home were able to demonstrate their bona fides by focusing on everyday life events and the bond they had with their children, based on these daily and routine activities. For example, one mother of 4 children (age 32) explained, “We eat together, we sleep together, everything. I don’t go out and, you know, like a lot of people go out. I don’t go out or nothing, it’s just me and my children.”

Mothers in prison and jail attempted to continue performing their roles as mothers—albeit in a highly circumscribed manner. For many jailed and incarcerated women, establishing their credentials as good mothers also meant having to defend their parenting skills against their criminal and drug-abusing past, the very behavior that had separated them from their children. For example, one mother of 4 children (age 28) who was a heavy drug user before her incarceration discussed how she was able to take good care of her children despite her drug use:

Drugs were controlling me, but I also had control of my life. I got high in the house, never got high out of the house. The kids stayed clean all the time; I never left them with anyone but my mother or my sister. The refrigerator was always filled; my house was clean.

Another mother (age 36, three children) explained,

‘Cause you have some mothers who have kids and they get high right there in front of their kids. And a lot of the kids run around the house hungry, being neglected . . . but I didn’t do that.

“I was a super mom. They got whatever they wanted,” added another incarcerated mother (age 40, two children).

Children sometimes provided further confirmation that a woman was a good mother. For instance, one mother in prison (age 33, two children) incarcerated on a drug conviction said,

That’s a good thing to know, that they look at me as a good mom, not a bad mom, because I’m locked up. ‘Cause that’s what I was thinking, I’m a bad mom, I’m on drugs, you know. They don’t see it like that, and Takann, she just wants to know when I am coming home.

Further evidence of the incarcerated women coping with the need to defend their maternal competence came from statements reflecting concern about their children’s current childcare, the type of concern that might be expected of a “good” mother. For instance, one 28-year-old mother of two children worried about the health of her children’s grandmother, their current caregiver: “And God forbid that something should happen to her—then my kids end up in the system. God forbid! My mom is not capable, you know what I mean? I’m not saying that’s what would happen. But it’s possible.” Another mother (age 24, one child) said that her daughter

[. . .] tells me that I don't love her because if I loved her, I wouldn't be locked up. She tells me that she misses me. Sometimes I can hear in her voice that she's a little depressed. She wants me home. Some things she can't talk to my mother or sister about.

Coping with threats to their maternal identity by reinforcing their maternal role was very important, since many mothers saw their children as the light at the end of the tunnel of their incarceration and had a great deal invested in their self-image as mothers, poignantly expressed by one mother (age 37, four children):

You see, my kids are my life [Starts crying] Sometimes I think I'm still alive because of them, you know, because I want to go home to them. If it hadn't been for them, I don't think I would have cared. Honestly, I wouldn't care.

Another mother (age 25, one child) said,

I don't want my daughter to be 18 visiting me in prison. I see a lot of women that have kids and never talk about them. With me, I stay talking about my daughter. I love her to death. She's the best thing that ever happened to me.

There were also similarities in how mothers in the three groups defined and performed their maternal role. Mothers in all three samples, just like any "other mother," expressed concern about their children regularly going to school, doing homework, and staying away from drugs and crime. One incarcerated mother (age 33, two children) explained:

I know at this age this is when you get introduced to pot. I've been there. And drinks. So, I wonder about that. And I hope and pray that she don't. That's why I'm mad at myself a lot 'cause I'm not there.

Mothers of girls and boys were also concerned about pregnancy at an early age: "When I got locked up, I wrote to her and I told her, 'You know, these boys are looking at you. But if you're out there having sex, please get out there and get some protection'" (age 36, three children).

In general, the mothers viewed their relationships with their children in a positive way. They tended to portray these relationships as unique, special, and emotionally meaningful. One incarcerated mother (age 36, one child)

said, "But my son will come to me right now and talk to me about his girl . . . he tells me everything, like I'm his best friend in the world. That's being a good mother."

Disassociation From Prisoner Identity

Establishing their *bona fides* as credible mothers was one way to cope with the problem imposed by the incarcerated women's absence from their families. Another emotion-focused technique utilized to cope with threats to their maternal identity was disassociation from the image of a prisoner. Even mothers at home utilized this technique, though it was obviously concentrated mainly among jailed and incarcerated mothers, 41% of whom indicated that they employed it. With striking consistency, incarcerated women distanced themselves from their fellow prisoners. As one mother (age 32, four children) firmly explained when discussing how some women end up in prison multiple times: "You got to be crazy in your head to want to keep going back to a place like that. That's no place for no human being." Another mother (age 35, three children) said,

I didn't come here to make friends, and there's so much bull crap around here. I'm leaving. I knew the day I walked in that I was leaving sooner or later. When I leave I don't want to take anyone from here with me. I'm not that needy. Like, emotionally, I can handle this on my own. I'm used to it.

Disassociation from prisoner identity was present in several different ways. Some women claimed that though there are people who belong in jail or prison, they do not fit in there. "There is no reason for me to be here. I'm a high school grad. I took some computer classes, some college courses here . . . I'm too smart to be in jail" (age 24, one child).

Other mothers tended to minimize the behavior that resulted in their incarceration, thereby distinguishing themselves from other prisoners. One mother (age 28, two children) said: "I don't understand. Personally, since I've been in here, I've seen women who killed their children leave before me. And it baffles me, I've no understanding. I would never hurt anybody." The same mother added, "All these men that did a hell of a lot more than me [. . .], are still free."

Disassociating themselves from a prisoner's image was both an adaptive and maladaptive coping strategy for the women. Refusing to accept the negative connotations associated with the image of a prisoner helped women hold

onto their own identity as somehow different and, therefore, potentially still having the right to be seen as a good mother. On the other hand, distancing themselves as they did to avoid identification with their fellow inmates meant that they were denied any comfort and solidarity other women in similar situations might have provided, which in turn could have helped them adapt to their situation.

Mothering From Prison

In addition to confronting the need to establish and maintain a maternal identity and to distinguish themselves from other prisoners, incarcerated mothers had to find ways to cope with their diminished capacity to provide active mothering. The principle means they utilized to sustain their maternal bond was by maintaining contact with their children and their surrogate caregivers, a problem-focused and adaptive strategy. One mother (age 28, two children) explained:

Um, when they used to come up and visit me, that was like my bonding session. [. . .] like to be able to speak to them face to face and see them and ask them if everything is okay and look at them in the eye and know.

Another mother (age 35, three children) is serving time in prison for attempted murder. She was a drug and alcohol user in the past. She misses her children and plans to reunify with them after incarceration, making clear that she still tries to be a mother to them while she is locked up: “I write my kids, like each one. They all get individual letters. [. . .] I try to emotionally help them, help support them. I try to put fun and games in there with them, too.”

The attempts to maintain their parental authority and remain actively engaged in their children’s lives—“mothering from prison”—included decision making about their children’s future and staying abreast of their children’s whereabouts and their progress in school. Although the visits were often described as a main tool of “mothering from prison,” 41% of incarcerated mothers and 75% of jailed mothers in the sample received no visits from their children. One of the mothers (age 28, two children) described the disincentives for her children to visit:

It’s crazy. It’s really far. It’s a hassle. ‘Cause the visits out here are nine o’clock in the morning. In the morning traffic, to get here by nine o’clock you have to be here earlier—actually, by eight thirty. You

would have to leave so early . . . My kids would have to be up five o'clock in the morning to come in. It's just a big hassle.

The interviews suggest that phone calls and letters, along with sporadic visits, are the primary channels through which mothering from prison occurs. Arguably, more frequent and better quality visits, phone calls, and letters would aid women in coping. It is also likely that it would help women ease their transition to life in community after release from prison. However, the results of the data also confirm the prior reports and studies about persistent and system-wide barriers to maintain a mother-child relationship in prison via these traditional ways of communication. In their study, Berry and Eigenberg (2003) noted that mothering is not a static characteristic but rather an active and ever-changing attribute. As such, it does not depend exclusively on the number of family visits to prison but rather on myriad factors. For example, the extent to which incarcerated mothers can maintain their authority is tied to the cooperation of the children's caregivers. Women who most effectively mothered from prison were those whose children's guardians included them to the largest extent possible in the children's lives and facilitated communication between the mother and child.

Role Redefinition

Role redefinition and role reversal phenomena have been previously described in the field of psychology and specifically, in the area of developmental psychopathology. Role reversal, the extreme form of role redefinition, has been defined as a relationship disturbance in which parents rely on children to meet their needs for comfort and intimacy, and children take the roles of parents or peers (Kerig, 2003).

Our analyses revealed a similar type of role redefinition in which mothers redefined their children as friends or even confidants. By attributing exaggerated maturity to their children, these mothers seemed to neutralize the harms they may have caused their children, while minimizing their own guilt and sense of failure, thus making this technique an adaptive strategy, at least in the short-term. Although this emotion-focused technique was evident in all three subsamples, it was most prominent among mothers awaiting trial who were living at home.

Mothers living with their children tended to vividly recall circumstances and events in which their children acted in a mature way. One mother (age 46, five children) summarized it as follows: "I learned how to talk up and speak to them. Talk to them like adults now." Similarly, a younger mother of two

(age 35) explained her relationship with her daughter: “You know, we’re not mother-daughter. We never had a mother-daughter relationship. We were most like sisters. Like, you know, and I don’t know if it’s a good thing or a bad thing but that’s the truth.”

The interviews revealed that many children prematurely witnessed or experienced adverse events like violence in the home, their mothers’ arrests and incarceration, or their mothers’ substance abuse. Often as a consequence of these experiences, older children had to fulfill some grown-up responsibilities, such as taking care of the younger siblings. In some cases, children actually exhibited some adult-like behavior and assumed the role of protective guardians of their vulnerable and dependent mothers. Such “parentification” (Cox, Paley, & Harter, 2001) or “adult gratification” (Grella & Greenwell, 2006) is aptly illustrated by a short conversation between a drug-using mother and her young daughter, Mariah, that her mother recounted having: “Are you going out to get high today mom?” I’d say, “Yeah, why?” “Well, I think that you need some money.” She’d go in her little piggy bank. “Well, here’s ten dollars to get you started” (age 27, four children). Another mother (age 34, four children) recalled her conversation with her son:

“Either you had too many cigarettes, or you had some bad drugs.”

And, I was like, “Really?” And, he was like, “Yeah. But, I think it’s the drugs though.” And ever since that day, I just felt as though even though I didn’t want him to know, but I thought it was kind of important that I explain myself to him. But, it really hurt me for him to know that I was doing drugs.

In both examples mothers seemed to recognize how unhealthy and damaging to their children their relationships were. However, most mothers seemed also to believe that taking the roles of an adult by their children was a sign of maturity and resilience in the face of the harms their mothers’ behavior inflicted upon them.

Self-Transformation

Many women explicitly expressed the shame they felt about their situation and about letting their children down when they were imprisoned. One way to cope with such deep disappointment was to focus on self-transformation, an adaptive process that we classified as both emotion and problem focused. Approximately 45 women talked about self-transformation in their narratives. Some women consciously took active steps to improve their lot, which

may have actually improved their perceived maternal efficacy. One mother (age 29, six children) explained,

I've been through rehab, detox, programs, all that. This time, I'm gonna leave it in God's hands. I've been clean before. But I want it now more than I ever did. I plan on going to church for help. I want to get a job, and keep my mind occupied.

This quote illustrates the fact that the process of self-transformation often included becoming spiritual or religious, which many saw as a pathway to desistance from drug and alcohol use. Several other mothers mentioned being involved in community and helping others. One mother said,

I had a dream that maybe one day I would be able to help troubled teenagers, so while in their youth they have a chance to do something with themselves before they get too old. That's one of the dreams I have had . . . to help people that have all these different problems. (age 36, one child)

Planning and Preparation

Approximately 40 mothers talked about planning and preparation for the future, an adaptive strategy that was problem focused among those awaiting trial and more emotion focused than problem focused for those in prison. Mothers talked about who would take care of their children in the event they were incarcerated after their cases were heard in court. They generally knew who their children's caregiver would be because in most cases the same family members were already involved in caring for their children.

Incarcerated mothers talked about getting jobs and finding places to live after release, though these plans were insubstantial and indefinite. Leaving the prison was the main concern: "My priority, first of all, is getting out of here" (age 37, four children). It was followed by concerns of parenting: "Then when I do go home, I'm gonna be like a different person and I got to make him my baby again." (age 24, one child). Another mother (age 24, one child) said,

Go home, see my mom and my daughter. I want to continue to be positive and live a positive life. I want to do the best I can . . . be a better mother and a better daughter. Focus on myself, my mom, my daughter and my sister. Stay away from negativity.

Self-Blame

This emotion-focused technique, which we classified as maladaptive, was present nearly exclusively among incarcerated mothers—a number of whom admitted that their life choices had an adverse impact on their children. Being in prison seemed to have given them a different perspective on their past behavior, leading to the need to cope with feelings of guilt and shame about their past actions. Mothers who utilized self-blame admitted these feelings and expressed responsibility for their past behavior. A mother (age 36, one child) admitted: “The only thing I regret even though my life had been real hard is not being a better mother to my son. I could have been better than I was, but I can’t change that.” Another mother (age 40, three children) declared, “Like I said, don’t nobody really understand how much my children mean to me. Because I could never repay the pain that I put them through. Younger, even though they were younger, they still feel the pain.” One woman (age 33, one child) expressed hope that she would be able to “get out of here in enough time to make it up to him [son]. To show him love.”

Initially, we tended to view self-blame primarily as a negative and even destructive strategy. However, we realized that self-blame plays an important role in mothers’ self-transformation. Self-blame might be self-harmful, especially when no help or assistance is provided to mothers to “counterbalance” it. On the other hand, self-blame, if followed by real opportunities for self-transformation and a change in circumstances might be a step toward positive reinterpretation and adaptive coping.

Conclusions

The questions asked in the interviews allowed women to freely present their life stories and talk about their relationships with children, partners, family members, and friends. We were able to identify seven main coping strategies employed by mothers to deal with separation from their children: being a good mother, mothering from prison, role redefinition, disassociation from prisoner identity, self-transformation, planning and preparation, and self-blame.

In order to categorize coping techniques that emerged from our data, we drew traditional distinctions between emotion-focused and problem-focused and between adaptive and maladaptive coping techniques. We found that mothers used multiple strategies and tended to employ emotion-focused over problem-focused techniques and adaptive over maladaptive techniques.

Lazarus and Folkman (1984) enumerated several so-called coping resources needed to develop and utilize coping strategies effectively: health and energy, positive beliefs, positive solving skills, social skills, social support, and material resources. Although researchers tend to maintain that active, goal-oriented, or problem-focused techniques are more effective in managing stress and trauma (Thoits, 1995), individuals do not have equal access to the resources that would facilitate their ability to employ them. Researchers agree that disadvantaged minority women tend to have very limited access to coping resources (Thoits, 1995) that would enable them to use active or problem-focused strategies. Instead, they are inclined to employ a smaller number of less effective emotion-focused coping techniques.

Most mothers in this study came from disadvantaged, lower social and economic strata. They often struggled with physical and mental problems and suffered from a lack of social support. Thus, though mothers were planning or attempting an active response to stress and separation, most often they were not able to deliver on their efforts. For example, though some mothers attempted to mother their children from prison, their families' economic limitations and prison regulations prevented regular face-to-face visits, thereby significantly inhibiting their ability to do so.

As a consequence of the prison context and limited resources both inside and outside the prison, mothers employed mainly emotion-focused coping techniques. Establishing and maintaining a maternal identity emerged in this study as dominant challenges with which women in prison must cope. The present findings confirm prior research about the central role of motherhood among incarcerated mothers (e.g., Enos, 2001). In addition, we found that mothers awaiting trial tended to use the same techniques when faced with potential separation from their children. Being a good mother was linked to the need to disassociate oneself from a prisoner self-image. The finding that more than 40% of mothers who talked about their prison and jail experience tended to disassociate themselves from prison or jail was surprising at first. This rejection might be a counterproductive and maladaptive method of dealing with incarceration and separation. On the other hand, disassociation from prison does appear to be an appropriate way of defending a good-mother image. Mothers isolate themselves in order to protect their core identity as a good mother, which because of the stigma of imprisonment, they see as incompatible with self-identification as a prisoner.

We also found that 51% of mothers in our sample and 49% of mothers who were awaiting trial employed role redefinition as a coping strategy. This technique alleviated pressures resulting from perceived inadequacies and failings as mothers. It seems that mothers who are uncertain about their future

(awaiting trial) opt to view their children as mature and probably able to handle a separation from them. Interestingly, this mode of adaptation seems to play a lesser role while mothers are jailed or incarcerated, perhaps because continuing to view their offspring as children helped incarcerated mothers reinforce their sense of motherhood by emphasizing the youthfulness of their children and, thus, their need for a mother. It is also likely that some children of incarcerated mothers actually experience less adversity while their mothers are in prison because they are better taken care of and, thus, can act as children again.

Rather than portraying children as mature individuals, incarcerated mothers tend to feel shame and tend to blame themselves for problems in their relationships with their children more frequently than mothers who still live outside. Thus, not only self-blame but also a commitment to self-transformation were more common among the imprisoned subsample. We suggest that self-blame primarily might be harmful in the short-run but that it might lead toward adaptive coping if it is followed by real opportunities for self-transformation.

Some limitations of this research must be noted. The interview questions were not designed specifically to address the issue of coping but rather to focus on all aspects of mothers' lives and their relationships with children. Women who volunteered to participate in this study may have been better able to cope than others, which may explain why maladaptive coping was not as evident. In addition, whereas coping is a process (Lazarus & Folkman, 1984), there were no follow-up interviews available that would have permitted investigation of the ongoing utilization of these techniques or their efficacy. Finally, the data on addiction, drug, and alcohol abuse, criminal history, and victimization came from the women themselves and were not compared with any official data.

This study offers also important contributions to the topic of mothers in the criminal justice system. The sampling of women at different stages in the process (before trial, in pretrial detention, and in prison) permits the analysis of coping as a dynamic process. In addition, the sample was uniform across many characteristics of women. Nonetheless, our analysis suggests that the length of incarceration and race might influence the ways mothers cope with separation from their children³ confirming some results found in quantitative studies. Finally, we also found that traditional coping framework was highly contingent on the context in which women were situated. The division into emotion-focused and problem-focused, and especially adaptive and maladaptive categories, was not clear-cut. For example, both disassociation from prisoner identity and self-blame could be either adaptive or maladaptive depending on characteristics of a particular mother and her specific life circumstances,

including social support. Although we categorized mothering from prison as problem-focused coping, this way of adapting also carries important emotional weight. It appears to be a problem-focused and adaptive coping strategy, but it is plausible to conceive that visits (or rare visits) and phone calls (short and expensive for families) might in fact bring more stress and strain to incarcerated mothers and as such become a maladaptive way of adapting to prison and to separation from family and children.

This study has several important implications for correctional policy and practice. Prisons should consider adopting programs that support emotion-focused coping and model problem-focused coping techniques. For example, being a good mother (emotion-focused) and mothering from prison (problem-focused) coping techniques can be aided by developing and supporting programs that help maintain contact and build relationships between imprisoned parents and their children, such as Girl Scouts Beyond Bars (Block & Potthast, 1998), Parenting From a Distance (Boudin, 1998), or Parents in Prison (Hairston & Lockett, 1987). Parenting classes and legal aid regarding parental rights could help mothers develop problem-focused coping skills.

In addition, certain correctional policy reforms should promote positive coping. Inconvenient and troublesome visiting hours, the distance of women's prisons from the cities, costly phone calls, rigid rules of visitations, and sending packages and letters, all hinder contact between incarcerated mothers and their children. The guiding principle of reforms to address these problems should be that visitation and other parental contact is a right and not a privilege. Removing or loosening restrictions on visitation should help women maintain a good-mother image and may help them accept a prisoner identity.

This study joins prior research in supporting calls for fundamental changes in policies that affect women and mothers in the criminal justice system. Incarcerated mothers differ from incarcerated fathers and differ from women in general population. Women involved in the criminal justice system are more likely to face the "triple threat" of substance abuse; trauma due to sexual abuse; violence in childhood, adolescence, and adulthood; and mental health disorders (Arditti & Few, 2006; Bloom & Covington, 2009; Raj et al., 2008; Staton, Leukefeld, & Webster, 2003). Thus, researchers tend to agree that female prison inmates need a comprehensive gender-specific model of treatment and care (Arditti & Few, 2006; Chesney-Lind, 1998; Covington, 1998; Dalley, 2002; Hairston, 1991; Staton et al., 2003). Proposed models generally encompass treatment for drug abuse and addiction, trauma recovery, and quality mental and physical health care. Such a model would aid in sustaining and developing important coping techniques, especially self-transformation. It could also reduce role redefinition and self-blame, the techniques that seem

to be significant barriers to effective mothering. Finally, focusing on and providing assistance with addressing the “triple threats” within prison would assist mothers in building the skills necessary for functioning outside of prison and for reuniting successfully with their children.

Of course, successful mother–child reunification can be achieved only if women are not reincarcerated after their release. However, women face formidable challenges upon release. Compounding the challenge of reunification and readjustment to custodial parenting are the struggles to obtain and maintain a job, housing, sobriety, and quality health care (Dalley & Michels, 2009). According to Richie, women who leave the prisons are in need of wrap-around and case management services that would focus on gender-specific needs and ensuring continuity of services received in prison, and Dalley (2002) recommends creating a separate counseling unit within probation departments to offer a coordinated, multiagency approach to assist women and their children. Thus, assistance within the community is crucial in women’s successful reintegration and reunification with their families and children. It would assist in building problem-focused coping skills while providing vital emotional support. Women could be empowered by being able to find and utilize community resources and care (Richie, 2001).

Finally, the present research highlights the problem of social stigma and its adverse effects on mothering from prison. Negative labeling continues when women are released even though they are not viewed as bad individuals or bad parents by their children, families, and close communities (Hairston, 1998). Female ex-offenders frequently confront community distrust, their own shame and guilt, and social stigma, which often prevent them from finding a job and housing. Support groups, both within prison and in the community, could assist in reducing stigma and promoting positive coping techniques such as self-transformation, being a good mother, and planning and preparation.

Services and treatment, both inside and outside of the criminal justice system, can assist mothers in effective coping with actual and pending separation from their families and children. A multimodal, continuous, and gender-specific approach can help mothers maintain their maternal identity and provide hope for theirs and their children’s futures.

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Notes

1. It is important to note that recent coping research tends to reject the use of simplified dichotomies. Skinner, Edge, Altman, and Sherwood (2003) claimed that the emotion-focused and problem-focused concepts are unclear, incomplete and that they overlap. Nonetheless, they also recognize that these concepts can be useful, especially in analyzing topics not examined yet in the coping literature.
2. Incarceration in this case refers to imprisonment either in jail or prison
3. We found that mothers who lived with at least some of their children (78%) and mothers who did not live with any of their children before incarceration tended to employ similar coping techniques.

We divided the sample of incarcerated mothers ($n = 17$) into two subgroups: mothers who were incarcerated for less than 6 months, and mothers who were incarcerated for at least 6 months. Women in the first group were more likely to use the following two strategies: being a good mother, and mothering from prison. This finding is plausible because separation from families was more recent and these mothers were more likely to be in contact with their children, make decisions about their future, and overall believed that they were in fact involved in raising their children. We also found that mothers who were incarcerated for shorter time tended to cope more via self-transformation, disassociation from prisoner identity, and planning techniques. One possible explanation is that women with shorter incarceration had more available social and emotional resources to help them cope in adaptive and active ways. The question remains however, whether the resources were really available (e.g., partly because these mothers had a stronger and better contact with their families and friends) or whether the women were more hopeful and optimistic about their opportunities and future because of less time spent in prison and their rejection of prison identity. These results appear to confirm Berry and Eigenberg's (2003) finding that women who served shorter sentences and were faced with shorter separation from their children experienced less role strain as mothers.

We found two additional trends in the data. First, White mothers tended to employ mothering from prison more frequently than African American mothers. Second,

African American mothers were more likely to employ self-blame than their White counterparts. These preliminary findings need to be explored further with a larger sample.

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