



How mothers manage the stressor of an adult son's incarceration: The role of coping resources[☆]

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ABSTRACT

More than one fifth of U.S. older adults have endured the stressor of a child's incarceration. We use longitudinal in-depth interviews with 69 mothers of incarcerated adult sons to examine mothers' coping resources during and after their son's incarceration. First, mothers report coping with their son's incarceration via activating social support and using self-directed accessible resources (including prayer, distraction, and acceptance), which mitigate some of the deleterious mental health consequences of their son's incarceration. Second, mothers differentially report the salience of some coping resources during their son's confinement and reentry periods. Third, coping resources employed by mothers can occasionally both alleviate the burdens of a son's incarceration and generate new stressors. Aligned with the stress process perspective, with its attention to coping resources as buffering the mental health consequences of stressors, these findings demonstrate how the intergenerational consequences of criminal legal contact extend to mothers of the incarcerated.

1. Introduction

The expansion of the criminal legal system over the past half century, and the concomitant rise in incarceration, means that incarceration is a common life course experience for many U.S. adults (Pettit & Western, 2004). The eight million people who enter jail and prison annually are rarely socially isolated prior to their confinement and, instead, they are connected to families as children, siblings, parents, and romantic partners (Chung & Hepburn, 2018; Sawyer & Wagner, 2024; Yi, 2023). Indeed, nearly half (45%) of all U.S. adults have had an immediate family member incarcerated for at least one night, and a non-trivial percentage (14%) have had an immediate family member incarcerated for at least one year (Enns et al., 2019). Child incarceration is a common form of family member incarceration, with about one fifth of older adults (ages 50 and older) experiencing the confinement of a son or daughter (Enns et al., 2019). Though the expansion of the criminal legal system has burdened families of all demographic groups, exposure to

family member incarceration—and the incarceration of an adult child, specifically—is concentrated among people of color, people with low levels of educational attainment, and people residing in neighborhoods of concentrated poverty (Enns et al., 2019; Yi, 2023).

The stress process perspective, which draws attention to how stressors can impair health, provides a lens for understanding the mental health consequences of family member incarceration (Arditti, 2016; Pearlin, 1989; Pearlin et al., 1981). Incarceration is a stressor that can proliferate from the person enduring the confinement to those connected to them (Pearlin et al., 1997; also see Foster & Hagan, 2013; Smith & Coleman, 2024). Family members navigate the criminal legal system (Umamaheswar, 2024), manage the economic and social fallout from the confinement (Condry, 2013; Mowen & Visser, 2016), and anticipate their loved one's release (Miller, 2021), all of which can generate worry and distress (Turney et al., 2024; Turney et al., 2025). The stress process perspective, with its focus on how stressors unfold within a broader social context, also brings attention to the role of

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coping resources in navigating stressors (Pearlin, 1989). On the one hand, coping resources—such as the activation of social support—may protect against the deleterious mental health consequences of family member incarceration (Lazarus & Folkman, 1984; Pearlin et al., 1981; Thoits, 1995). On the other hand, coping resources may generate additional stressors (Cohen et al., 1986; Condry, 2013; Kotova, 2020; Pearlin & Schooler, 1978), be deleterious for health (Huey & Ferguson, 2022), or simply be unable to alleviate the steep burdens of navigating family member incarceration (Comfort, 2016). Relatively little research explores how those enduring family member incarceration deploy coping resources during their loved one's incarceration and release and, specifically, how these coping resources ameliorate or exacerbate the mental health consequences of family member incarceration.

We use data from the Jail and Family Life Study, a longitudinal in-depth interview study of incarcerated men and their family members (including their children, their children's mothers, and their own mothers), to examine the processes of coping with family member incarceration. We focus our analyses on coping processes among mothers enduring the incarceration of an adult child, given the commonality of this incarceration exposure (Enns et al., 2019), the importance of these intergenerational relationships for both mothers and adult children (Swartz, 2009), and the accompanying relative lack of systematic knowledge on how mothers of incarcerated adult children navigate the criminal legal system (though see Braman, 2007; Rogers, 2020; Western, 2018). Understanding how these mothers navigate their adult son's incarceration, a common and consequential life course event, is important to understanding the broader context of these older adults' lives as they commonly navigate other challenges such as chronic pain and financial instability (Kahn & Pearlin, 2006; Timmermans & Haas, 2008; Zajacova et al., 2021). Our systematic analysis of interview data reveals that mothers report coping with their son's incarceration via activating social support and using self-directed accessible resources (including prayer, distraction, and acceptance). Our analysis also reveals that coping resources primarily mitigate the deleterious mental health consequences of their son's incarceration but occasionally generate new stressors.

2. Background

2.1. Commonality and unequal distribution of child incarceration

Older U.S. adults have spent most of their lives in the shadow of the prison boom, characterized by a precipitous rise in incarceration and the concentration of incarceration among vulnerable population groups (Alexander, 2020). The increase in U.S. incarceration rates beginning in the mid-1970s and continuing mostly unabated for four decades, in conjunction with increases in sentence lengths, means that confinement in jail or prison is a common experience among older adults (Porter et al., 2016). Furthermore, it is even more common for adults coming of age during the prison boom to endure vicarious incarceration exposure. More than one fifth of U.S. adults ages 50 and older experience a child's incarceration (Enns et al., 2019). The incarceration of a child, like incarceration more generally, is an especially common stressor among marginalized populations including Black and Latinx parents, poor parents, and parents living in disadvantaged neighborhoods (Enns et al., 2019; Goldman, 2019). For example, child incarceration is twice as common among Hispanic adults compared to white adults (Enns et al., 2019). Child incarceration is also more than twice as common among adults without a college degree compared to those with a college degree (Enns et al., 2019).

2.2. Proliferation of stressors across people

The stress process perspective, foundational for understanding health inequalities, highlights how stressors can impair mental health. The framework is instructive for how the stressor of a son's incarceration

may unfold to impair the mental health of their mothers (Pearlin, 1989; Pearlin et al., 1981). We conceptualize incarceration as an event stressor, and examine the consequences of this stressor, but acknowledge the interconnectedness and embeddedness of stressors as they unfold in contexts of ongoing strain (e.g., Giordano et al., 2019).

One aspect of the stress process perspective, stress proliferation, highlights the contagious nature of stressors such as incarceration (Pearlin, 1989). That is, stressors proliferate across people, with stressors endured by one person being consequential for one's own mental health and the mental health of those connected to them (Barr et al., 2018; Pearlin et al., 1997). Incarceration is a stressor initially endured by one person that has rippling repercussions for family members (Turney, 2014, 2021), with those connected to currently and formerly incarcerated people having lower wellbeing than those who do not endure family member incarceration (Sundaresh et al., 2021). The deleterious mental health repercussions of incarceration extend to children (e.g., Turney, 2014), partners (e.g., Wildeman et al., 2012), and parents (e.g., Green et al., 2006; Rogers, 2020) of the incarcerated. For example, exposure to an adult child's incarceration is associated with mother's health impairments including psychological distress (Green et al., 2006), depression (Goldman, 2019), and health limitations (Sirois, 2020). Mothers of incarcerated children describe increased emotional, instrumental, and financial responsibilities that accompany the incarceration, especially when they have caregiving responsibilities for their grandchildren, which may explain some of these deleterious consequences (Turney et al., 2025; also see Clayton et al., 2018; Goldman, 2019). Therefore, the mental health consequences of incarceration extend beyond the consequences for the currently and formerly incarcerated (Wildeman et al., 2019).

2.3. The role of coping resources

Another aspect of the stress process perspective highlights the role of coping resources, either via the provision of emotional, instrumental, or financial resources or via inhibiting maladaptive coping mechanisms. Mothers' coping strategies, or their attempts to manage stressors via behavioral or cognitive means (Lazarus & Folkman, 1984), may include activating social support, turning to prayer, and engaging in distraction (Thoits, 1986, 1995).

The stress process perspective suggests that coping resources can buffer deleterious responses to stressors and, accordingly, coping resources may help mothers assuage the ramifications of their son's incarceration (Cohen & Wills, 1985; Pearlin et al., 1981). Coping resources—such as social support (or the emotional, instrumental, and financial assistance people receive from their family, friends, and other social connections [Thoits, 1995])—may alleviate challenges associated with a son's incarceration, thereby mitigating against the negative mental health consequences. Family and friends can provide emotional, instrumental (e.g., attending court dates, helping with caregiving responsibilities), and financial (e.g., putting money on their son's commissary account) support, all of which may ease worry and distress endured by mothers. Indeed, survey research shows that social support, a coping resource, buffers against stress among older adults with an incarcerated family member (Fahmy & Testa, 2021; also see Testa & Fahmy, 2021). Other forms of coping—such as turning to prayer or distraction—may be especially beneficial when mothers lack social support, a possibility given the stigma associated with family member incarceration (Condry, 2013; Goffman, 1963; Kotova, 2020).

Though the stress process perspective is most commonly invoked to suggest that available coping resources will buffer the mental health consequences of a son's incarceration, as suggested above, three (related) alternative possibilities exist. First, the stress process perspective acknowledges that coping resources can facilitate additional stressors, especially among women (Pearlin & Schooler, 1978). Coping resources are not always efficacious and, in some cases, may provoke additional stressors that could increase worry and distress among

mothers (Pearlin & Schooler, 1978). For example, the high demands of a child's incarceration, and the corresponding provision of social support from friends and family, may increase mothers' dependency on loved ones, foster relationship challenges (Smith, 2007), and expose mothers to stigma (Braman, 2007; Condry, 2013; Kotova, 2020), all of which may impair mental health (Hatzenbuehler et al., 2013; House et al., 1988). Second, mothers may engage in coping strategies commonly referred to as "maladaptive" (e.g., Huey & Ferguson, 2022) or "dysfunctional" (e.g., Meyers et al., 2024), such as procrastination or substance use, which may provide immediate relief but be damaging over the life course. Third, the mental health consequences of a son's incarceration may be so severe that coping resources do little to ameliorate the deleterious consequences of this stressor. Taken together, though relatively little research examines coping resources in the context of family member incarceration, despite the strain and stigma stemming from this stressor (Condry, 2013), coping resources may either buffer or exacerbate the mental health consequences of an adult son's incarceration.

Furthermore, coping resources, and the effectiveness of these resources, may change over time. Mothers' coping resources may vary during their adult child's incarceration and reentry, as mothers navigate different stressors during these time periods. The incarceration period often involves communication challenges, as contact with incarcerated people is limited and costly (Comfort, 2008); economic hardship, as incarcerated people often provide financial support to their families prior to their confinement and the incarceration itself is commonly accompanied by additional expenses (Page et al., 2019); and additional caregiving responsibilities, as the confinement leads to changes in family dynamics and child care instability (Goldman, 2019; Turney & Kaiser, 2024). Some stressors of confinement may persist during reentry, as incarceration has some intractable consequences for family dynamics, but stressors may also shift after a son's release. The reentry period commonly involves helping recently released adult children find housing, reunite with other family members, and avoid re-incarceration (Miller, 2021; Western, 2018), stressors that may demand different coping resources than those utilized during the incarceration period. Alternatively, given some commonality in stressors stemming from the incarceration and reentry period, such as courtesy stigma stemming from criminal legal contact (Kotova, 2020), as well as the often cyclical nature of incarceration that provides little opportunity for mothers to recover between confinement spells (Christensen et al., 2025), mothers may deploy similar coping strategies during these times.

2.4. The current study

Despite knowledge that son's incarceration is harmful to mother's mental health, and competing theoretical perspectives that coping resources can either ameliorate or exacerbate the deleterious mental health consequences of stressors, little is known about how mothers cope with their son's incarceration, how this changes between periods of confinement and release, and how these coping resources buffer or exacerbate the mental health consequences of incarceration. In this paper, we examine mothers' coping resources during their son's incarceration and reentry using longitudinal in-depth interviews from 69 mothers of incarcerated sons, most of whom identify as Latina. Understanding coping resources among Latina mothers—a population rarely considered when examining how the consequences of incarceration ripples throughout families—is important, given the concentration of vicarious incarceration exposure (Enns et al., 2019), the role of systemic oppression in facilitating health challenges (Geronimus, 2023), and the emphasis on supporting family members (Campos et al., 2014) among this population. The context of jail incarceration, with its relatively short duration of confinement, is unique because it allows for an examination of coping during and after incarceration (Turney & Conner, 2019; Walker, 2022). We contribute to research on stressors among middle-age and older adults by providing the first systematic examination of how

mothers of incarcerated adult sons describe their coping resources and the role of these coping resources in shaping their mental health. In doing so, we contribute to research on the consequences of family member incarceration more broadly.

3. Methods

3.1. Data

Our analysis of coping resources among mothers of incarcerated adult sons draws on interview data from the Jail and Family Life Study, a longitudinal in-depth interview study designed to understand the cascading consequences of family member incarceration. The Jail and Family Life Study includes interviews with 123 men incarcerated in Southern California and their family members (including their children, their children's mothers, and their own mothers). We interviewed 69 mothers with incarcerated sons. We conducted baseline interviews with men and their family members when the men were in jail. We endeavored to conduct follow-up interviews with all participants after the men had been released. The short, cyclical, and unpredictable nature of jail incarceration necessitated that follow-up interviews were sometimes conducted when men had been released but re-incarcerated or when men were still incarcerated one year after their baseline interview; as applicable, we asked mothers to reflect on their experiences during and after their son's incarceration.¹ This interviewing approach both allowed researchers to establish rapport and allowed for an examination of variation across time (Stuart, 2020). This paper uses the 69 baseline and 56 follow-up interviews with mothers (drawing on 125 total interviews).²

Most interviews with mothers occurred in person at a location of their choosing (most often their home or a public park), though we conducted telephone interviews with mothers who resided in another state or in Mexico ($n = 11$ at baseline, 10 at follow-up). In the interviews, conducted between 2015 and 2017, we asked mothers to describe, among other things, their son's incarceration, their physical and mental health, and their coping resources. Specific questions include the following: "What kinds of things make you feel stressed?" and "What kinds of things make you feel worried?" We asked a general question about coping ("Tell me about your coping strategies for getting through these stressful or sad times") and then a more specific question about coping ("Friends and relatives can help us out with getting through these tough times. How about for you?"). At the end of the interview, we commonly asked mothers to describe how it felt to talk to us. Most mothers reported how it was helpful to talk with us about their son's incarceration, aligned with research describing how participants can receive emotional support from discussing difficult topics (Canizales, 2024; Jewkes, 2012). About half of mothers in the analytic sample ($n = 33$) were interviewed in Spanish (with the other interviews conducted in English). Interviews lasted more than 2 hours, on average. We recorded and transcribed interviews verbatim. Mothers were given a \$50 Visa gift card for completing each interview.

3.2. Analytic strategy

The analyses included deductive coding, inductive coding, and memo-writing, a flexible coding strategy for analyzing interview data with large samples (Deterding & Waters, 2021). First, under the direction of the study PI (and first author), a team of trained graduate students completed deductive coding of the baseline and follow-up interviews in Dedoose, a software program useful for managing large amounts of qualitative data. We created a codebook after reading through all interview transcripts. We coded about 10 transcripts together and, after reaching consensus about code application, had one coder code each transcript and a second coder review this coding (with the coders working together—and with the larger team—to resolve any inconsistencies). An example of a deductive code includes "Coping and

Social Support”, which comprises any discussion of resources participants employ to cope with sad, stressful, and uncertain times. These excerpts often stem from responses to interview questions about coping but also include excerpts that emerged in the interviews not in response to a direct question.

Second, two graduate students (including the second author of this paper) conducted fine-grained inductive coding of the Coping and Social Support code (also using Dedoose). This inductive coding includes themes that emerged from the data—as opposed to the interview guide or preconceptions from prior research—and forms the basis of our findings. Examples of inductive codes include instrumental support, religion, acceptance, and substance use.

Finally, we wrote extensive memos for each inductive code, summarizing findings from all themes (even those that were infrequently related to their son’s incarceration, such as substance use or therapy), identifying exemplary vignettes, describing countervailing processes, and documenting similarities and differences in themes during and after incarceration. Our analysis of coping during reentry is necessarily limited to the 38 mothers who participated in the follow-up interview and experienced their son’s release between the two interviews (including 33 mothers with sons living in the community and five mothers with sons who had been reincarcerated at the follow-up).

Importantly, as we document mothers’ reports of coping processes that buffer against the deleterious consequences of their son’s incarceration, we are careful to distinguish between mothers who describe coping resources generally and mothers who describe coping resources as they relate to mitigating deleterious mental health consequences of an adult son’s incarceration (focusing our analysis on the latter). Understanding the positionality and reflexivity of the research team is critical. Some members of the research team (including interviews and coders) shared identities (e.g., race/ethnicity, system-impacted) with the mothers, which could simultaneously yield important insights or an assumption of shared knowledge (and, for a full discussion of research team reflexivity, please see [Christensen et al., 2025]).

3.3. Sample Description

Table 1 describes the analytic sample, to provide context for the findings below. Mothers had a mean age of 55. On average, they had four children. Most mothers (n = 53 of the 69 mothers, or 77% of the sample) identified as Latina, which is consistent with the large Latinx population in Southern California. The remainder identified as white (n = 12, 17%), Black (n = 2, 3%), Asian (n = 1, 1%), and multiracial (n = 1, 1%). Nearly two-thirds (n = 44, 64%) of mothers were foreign-born and, though we did not directly ask about legal status, some (n = 9, 13%) disclosed they were undocumented. About half (n = 35, 51%) were employed and more than half (n = 39, 57%) were in married or cohabiting relationships. Mothers’ sons were, on average, 29 years old and had two children. Most mothers (n = 51, 74%) had sons who had been incarcerated four times or more. Total incarceration durations of longer than one year were common, with 43 (62%) mothers having sons incarcerated between one and up to five years and 11 (16%) mothers having sons incarcerated for five or more years.

4. Findings

Our analysis of mothers’ coping resources following their son’s incarceration yields three conclusions. First, we find mothers report coping with their son’s incarceration via activating social support and employing self-directed accessible resources (including prayer, distraction, and acceptance), both of which they describe as mitigating some of the deleterious mental health consequences of their son’s incarceration. We define self-directed accessible resources as coping resources mothers use to cope within oneself, though we acknowledge that this can overlap with social support (e.g., praying with one’s family). Whereas activating social support relies on relationships and availability of others to

Table 1
Descriptive characteristics of sample.

	Mean/frequency	%
Mother's Characteristics		
Age	55	
Number of children	4	
Race/ethnicity		
Hispanic/Latina	53	77%
White	12	17%
Black	2	3%
Asian/Pacific Islander	1	1%
Multiracial	1	1%
Born outside of United States	44	64%
Documentation status		
Undocumented	9	13%
Not undocumented	30	43%
Unknown	30	43%
Educational attainment		
Less than high school	13	19%
High school or GED	8	12%
More than high school	17	25%
Unknown	31	45%
Employed	35	51%
Relationship status		
Married or cohabitating	39	57%
In a romantic relationship	5	7%
No romantic relationship	21	30%
Unknown	4	6%
Ever incarcerated	14	20%
Son's Characteristics		
Age	29	
Number of children	2	
Sentencing status		
Pre-trial	30	43%
Sentenced	37	54%
Unknown	2	3%
Duration of total incarceration		
Less than one year	15	22%
Between one and up to five years	43	62%
Five or more years	11	16%
Frequency of incarceration		
One to three times	18	26%
Four or more times	51	74%
N	69	

Note: Percentages for binary variables based on variables with non-missing data.

support mothers’ coping, mothers can activate self-directed resources (e.g., prayer, acceptance) themselves to cope. These resources are accessible because they have low barrier to access (e.g., do not require strong social relationships or financial resources). Second, we find mothers differentially report the salience of some of these coping resources during their son’s confinement and reentry periods, in part because of the different stressors mothers experience during these two time periods. Third, we find that though coping resources most commonly alleviate the burdens of a sons’ incarceration, these resources can occasionally generate new stressors.

4.1. Coping via activating social support

Mothers commonly describe coping with their son’s incarceration by activating emotional, instrumental, and financial support, which they report as improving their mental health. Mothers describe leaning on family, friends, co-workers, and community members to process stressors stemming from their son’s incarceration, including emergent legal issues, caregiving for his children (and their grandchildren), and reentry challenges. Nearly all mothers report activating consistent emotional support throughout their son’s carceral cycle (including during his incarceration and at their follow-up interview). Mothers also

describe activating instrumental and financial support, with about half reporting these forms of support during their son's incarceration and about one fourth reporting these forms at their follow-up interview. We find that mothers report needing less instrumental and financial support when their son is released, as some of these burdens—for example, the expense and logistics of maintaining contact—are alleviated during this time.

4.1.1. Emotional support

Nearly all mothers report activating emotional support—from romantic partners, siblings, non-incarcerated children, and others—as a coping resource during their son's incarceration. Consider Ofelia, a 48-year-old Latina mother who describes how she activates social support to ameliorate some of the negative consequences of her son's frequent incarceration.³ Ofelia tells us her son's most recent incarceration generated considerable emotional distress that manifests physically: "I have severe headaches and I think it is because sometimes I start counting when he has to go to trial ... I have headaches because I cannot stop thinking about him."⁴ Ofelia explains that when she is sad about her son's incarceration, she activates emotional support from her husband and other sons. She says this support improves her mental health: "When we talk, I feel a little bit better." Ofelia also describes how she activates emotional support from her co-workers because they are more understanding and less stigmatizing of her son's incarceration than her extended family members, and this support improves her mental health. She explains that she talks about her son "more than anything at work, because sometimes you can talk better there ... Sometimes you trust someone more than your family." Therefore, mothers like Ofelia rely on and benefit from emotional support from both inside and outside their families to process the stressor of their son's incarceration.

Most mothers also report consistent emotional support as a coping resource during their son's reentry, a period that can generate new stressors for mothers. The stressors of reentry commonly include facilitating housing for sons, witnessing their sons return to substance use, and assisting their sons in reconnecting with their children. Mothers describe leaning on emotional support to process frustrations that emerge during their son's reentry. For example, Roxanne, a 58-year-old white mother, tells us how she activated emotional support during her son's incarceration, and that she continued to activate this support to cope with her declining relationship quality with her son during his reentry. Roxanne describes how her son rarely communicates with her since his release, even though she felt their relationship strengthened as they wrote to each other consistently during his jail confinement. She reports activating emotional support from her friends and co-workers, who she is emotionally close to, and her Alcoholics Anonymous sponsor, who regularly asks about Roxanne's relationship with her son, to cope with this stressor. She tells us about the support received from her sponsor: "She's the one that told me to—when he didn't want to talk to me—just send him a text and tell him you're thinking of him ... He doesn't really have any family and his sister's not talking to him." For Roxanne, having people she describes as "very supportive" helps her process the difficulties and assuage the emotional distress during her son's transition from jail to the community.

4.1.2. Instrumental and financial support

About half of mothers report activating instrumental and financial support as coping resources during their son's incarceration, which they commonly describe as ameliorating their mental health. Mothers report receiving help communicating with their son (via phone calls and visitation), putting money on their son's commissary account, and navigating the legal system, often describing the activation of instrumental and financial support in tandem. For example, Martina, a 52-year-old Latina mother, describes how the instrumental support she receives from her son's friends improves her mental health. She reports support even in the context of experiencing stigma from others regarding her son's incarceration history. Martina explains how her son's friends, who

she considers her adoptive sons, "take care of me like my other sons did," including arranging to take Martina to visit her son in jail, a trip she cannot make alone due to health concerns. Martina has also received considerable financial support from her adoptive sons, who offered to pay her son's legal fees, which she cannot afford to pay herself. She tells us that although she must "swallow my Mexican pride" when asking for financial help, her son's friends "came up with over \$2600 to help pay for the attorney ... I was in shock that they would do all that." Finances—both stemming from and pre-dating her son's entanglement with the criminal legal system—are one of Martina's greatest stressors, and she describes the social support from her adoptive sons as "a blessing" that benefits her depression and anxiety. For Martina and other mothers, activating instrumental and financial support can be key to processing their son's incarceration, ultimately alleviating some stressors stemming from his confinement and improving their mental health.

Mothers also describe instrumental and financial support as coping resources during their son's reentry period. Instrumental and financial support differs in the reentry period because many of the stressors endured during their son's incarceration—such as communication via visitation and phone calls, putting money on his commissary account, and caregiving for grandchildren—are alleviated. Rather, mothers describe needing support to ease their son's reentry, including helping him reconnect with his children or find stable housing. Consider Martha, a 45-year-old Latina mother who has relied on instrumental support from her family and church community to navigate her son's frequent releases from jail over the past six years. Martha reports activating instrumental support during the follow-up interview only. She describes that her depression is exacerbated by stressors related to her son's confinement but that this support during his reentry period ameliorates some of her distress. She tells us that when she learned her son would be deported directly to Mexico from jail, "It was like 'get ready for the worst' ... he won't be around you anymore."⁵ She reports preferring not to activate emotional support for this stressor, but in anticipating her son's deportation, Martha decided to activate instrumental support to aid her son's reentry in Mexico: "I had to call some of my mum's relatives [in Mexico] to ask them to help him out. Then I talked to the pastors who were the ones able to cross the border." Martha describes how this assistance makes her feel supported in facilitating her son's settlement in Mexico, buffering some emotional distress stemming from the uncertainty surrounding her son's reentry. Martha's narrative reveals the complicated and stressful nature of reentry and, accordingly, how many mothers cope with their son's incarceration by relying on their social support system to assist their sons' reintegration.

4.1.3. Lacking social support

Though mothers commonly report activating emotional, instrumental, and/or financial support within their communities, a minority of mothers report not activating (or receiving) social support during the stressor of their son's incarceration and reentry, which can in turn increase their stress. Some of these mothers describe not having reliable sources of social support, often given their physical distance from family, because of the limited financial resources available from their social networks, or occasionally due to anticipated stigma from their networks. Other mothers describe how they have social support available to them but do not activate these potential sources of support, preferring to endure the stressor of their son's incarceration mostly on their own.

Consider Kaylee, a 49-year-old Latina mother who does not rely on most of her family and friends for support surrounding her son's most recent incarceration. His carceral spell generated insomnia for Kaylee and exacerbated her depression. She tells us that she only discusses her son's incarceration with select people: "I only talk about him with my husband ... I don't tell friends."⁶ Kaylee says that when she is feeling sad, "It makes me weak. It's also more difficult because I don't have anyone to talk to. It's like I always have high and lows. There is no one with me." Her son's incarceration causes her considerable emotional distress, and Kaylee reports that her lack of social support from most

family—who she anticipates as stigmatizing her son and herself because of his incarceration—or friends further exacerbates her stress. Other mothers refrain from activating social support, like Max, a 48-year-old white mother. Max reports that, while her son is incarcerated, she does not receive consistent emotional or financial support from others and that she receives limited instrumental support. She explains that she does not talk about her son's situation with others when she is feeling stressed or sad: "I don't like to discuss my problems ... I don't know why. It's terrible." Not activating social support is consistent with how Max describes she typically handles conflict, explaining, "I don't like negativity. You got to just move on." However, she tells us that her son's cyclical incarcerations and reentry periods exacerbate her feelings of distress and worry: "I try not to let things get to me, but they all stress me out." Mothers like Max and Kaylee are unable to rely heavily on social support to process the stressor of their son's incarceration and reentry and, therefore, continue to bear the weight of this stress on their own.

4.2. Coping via self-directed accessible resources

In addition to activating social support, mothers cope with the stressor of their son's incarceration by engaging with self-directed accessible coping resources including prayer, distraction, and acceptance. Mothers commonly report employing the first two resources during their son's incarceration and all three resources during their son's reentry. These self-directed accessible resources can be activated by mothers to cope on their own, without relying on relationships with others or meeting a financial requirement.

4.2.1. Prayer

Nearly two thirds of mothers in the sample describe using prayer to cope with the stressor of their son's incarceration and reentry, reporting that this self-directed accessible coping resource dampens worry and distress. Mothers commonly report leaving their son's situation "in God's hands." They describe praying—primarily individually but sometimes in institutions such as church—for their son's safety or behavior to change. These mothers often consider religion an important resource to cope with everyday challenges, and they explain their devotion to prayer as being strengthened when thinking about their son's confinement or reentry. Consider Cruzecita, a 74-year-old Latina mother whose son had been in jail awaiting adjudication of his case for three years. Cruzecita tells us that this uncertainty generates considerable mental distress: "How do I feel? Horrible, depressed, waiting for God's goodwill."⁷ Cruzecita also describes how singing to the Virgin Mary makes her happy and how she uses prayer as a coping resource for this distress. She explains, "Sometimes I'm walking and I start praying, 'God, please, help my son. I don't even want to think anymore' ... God listens to a mother's prayer." Similarly, Pequeña, a 47-year-old Latina mother, reports relying on prayer to process the stressor of her son's cyclical incarcerations. She tells us that praying assuages the toll her son's absence takes on her mental health. She says, "Sometimes I wake up sad ... because he's locked in there."⁸ Pequeña describes how she prefers not to activate social support from family or friends, but instead that she turns to prayer as a coping resource. She explains, "I always entrust it to God. I always say, 'God, you're great, you're the one in command here and I'll charge [my son] to you.'" For mothers like Cruzecita and Pequeña, turning to prayer is one of the most accessible and helpful ways to cope with the stressor of a son's incarceration.

4.2.2. Distraction

Distraction is a self-directed accessible coping resource for more than one third of mothers during the incarceration period and three fifths of mothers during the release period. Mothers commonly report engaging in activities—including cleaning, running errands, listening to music, and caregiving—to keep their mind off their son's confinement and reentry. For example, Katrijn, a 51-year-old Latina mother, tells us she has multiple sources of distraction that keep her from stressing about her

son's cyclical incarceration. She says, "I start doing the housework ... I went to work ... That distracts you a little bit, even though you're always thinking, but you're not so focused on what's going on ... And now I think my grandchildren will distract me."⁹ Katrijn's grandchildren, then, provide both a source of distraction and social support. Likewise, Maria, a 58-year-old Latina mother, copes with the stressor of her son's incarceration by going to the park to read and taking care of her grandchild. Maria reports struggling with anxiety and depression that is exacerbated by her son's incarceration, but says that these coping resources help manage her mental health. She says, "This kid has me so busy. I take him out for a walk or things like that and I get rid of my stress."¹⁰ Katrijn and Maria, like other mothers, turn to distraction as an accessible coping resource to improve their mental health when dealing with the stressor of their son's incarceration.

4.2.3. Acceptance

About one third of mothers report coping with the aftermath of their son's incarceration by accepting their son's situation and letting go. This self-directed coping resource is usually reported by mothers dealing with their son's reentry (as opposed to prayer, which is similarly used during both their son's incarceration and reentry). A son's reentry comes with a particular set of stressors for mothers, as their sons face challenges adjusting to life outside incarceration such as finding stable employment, staying clean from substances, avoiding reincarceration, and navigating strained relationships. Some mothers accept that their son's behavior has not changed after his confinement, letting go of continually thinking about how to improve their son's wellbeing. Acceptance during the reentry period is more common among mothers of sons with cyclical incarcerations, who sometimes experience relief when their son is incarcerated. These mothers report choosing to let go of their worries about their son to protect their own mental health.

Consider Elizabeth, a 74-year-old white mother whose son has cycled through incarceration more than 10 times across almost two decades, a pattern of incarceration and reentry that Elizabeth has come to accept. She describes the emotional toll her son's cyclical incarceration has taken on her: "It's like a never-ending book. Keep turning the pages and one day it's gonna end ... You do give up." Elizabeth tells us that her coping strategies have changed over the course of her son's repeated carceral spells. She says she used to think about her son every day but now, "I just kinda block it out. Our lives right now have enough going on." She continues, "I just try to think about the positives. I don't stay [thinking about her son] that long. As I'm getting older it's less. So, not bringing me down like that." Like Elizabeth, Rosie, a 65-year-old white mother, also describes acceptance as a coping resource to process her son's repeated jail confinements. Rosie, who is a part-time caregiver for her son's child, reports that her son's cyclical absences cause her much emotional strain as he churns through the carceral system: "I get stressed. Dealing with the emotions of the courts. Things I can't handle—I can't control." After his most recent jail confinement, Rosie's son was experiencing homelessness and began using drugs again. She tells us that she has accepted her son's situation to cope with her stress and alleviate her mental health, a new coping resource employed to manage her son's repeated challenges during reentry. She explains, "I can't fix it for him ... I keep telling myself, if you cannot change it—you need to let it go." These narratives exemplify how mothers who experience recurring distress from their son's cyclical incarcerations turn to accepting their son's behaviors during reentry as a coping resource to buffer the consequences of these stressors on their own mental wellbeing.

4.3. New stressors of coping

Although mothers most consistently report activating social support and using self-directed accessible coping resources to process the stressor of a son's incarceration and reentry, mothers occasionally describe how coping resources can generate new challenges. Activating social support and, to a lesser extent, using self-directed accessible

coping resources can strain relationships with other family members—including romantic partners, children, and their incarcerated son—who use different (or no) coping resources. For example, Araceli, a 64-year-old Latina mother, explains how she and her husband's different ways of coping with their son's reentry have generated relationship tensions. Araceli describes that she wants to "talk, talk and talk" to their family to cope with her son's reentry.¹¹ Araceli tells us that she wants to activate social support among her family members by discussing her son's incarceration openly and that she wants her husband to also adopt this coping resource. She says that her husband "doesn't know what to ... say," telling us that he prefers to not talk about this stressor with others. These differing expectations for coping within families can generate new stressors for mothers. Similarly, Ofelia (introduced earlier), relies on her family members for support but notes that this support has strained her relationships with her family members, in part because they blame her for his trouble with the law. This inhibits her from fully activating social support from them. She explains, "Sometimes everyone in your family sees it wrong and they all think he deserved it. And it hurts." Ofelia navigates these strained relationships by limiting her communication with some family members. These mothers demonstrate the new relationship challenges that emerge from their deployment of coping resources.

5. Discussion

In this paper, we use in-depth interview data from the Jail and Family Life Study, a longitudinal study of incarcerated people and their family members, to describe how mothers cope with the stressor of their adult son's incarceration, the similarities and differences in coping during the confinement period and afterward, and how these coping resources buffer or exacerbate mental health consequences of incarceration. Our analysis, which more broadly sheds light on how middle-age and older adults engage in coping resources in ways that improve their mental health, suggest three key findings.

First, we find that mothers engage in two primary coping resources—including activating social support and employing self-directed accessible coping resources (particularly prayer, distraction, and acceptance)—that protect against the deleterious mental health consequences of having an incarcerated son. These coping resources were the most accessible among our sample, which includes many mothers enduring various social constraints—such as financial burden, lack of health insurance, and undocumented status—that limit their access to other coping resources commonly used to address stressors (e.g., therapy, medication, support groups). These coping resources used by mothers buffer against the deleterious mental health consequences that stem from their son's incarceration (Lazarus & Folkman, 1984; Pearlin et al., 1981; Thoits, 1995). Importantly, though research suggests that family member incarceration is accompanied by considerable courtesy stigma (Condry, 2014; Kotova, 2020), we found only occasional evidence of stigma interfering with mothers' activation of coping resources or in how these coping resources protected mothers' health, perhaps unsurprising given the high levels of financial, emotional, and instrumental support reported by mothers. We suspect this is because mothers enduring stigma also commonly have a large network of others who provide coping resources.

Second, we find that mothers use these two sets of coping resources as their sons cycle through incarceration and reentry, but that the stressors of the incarceration and reentry periods necessitate slightly different coping resources. Mothers more commonly describe instrumental and financial support as coping resources during their son's incarceration and more commonly describe distraction and acceptance as coping resources during their son's reentry. We find some evidence that this variation in activating coping resources stems from mothers having different needs for instrumental and financial support during these two periods. This variation in activating coping resources may also be due to the heightened uncertainty related to the confinement period,

including uncertainty regarding a son's sentencing, length of confinement, or possibility of shifting behavior). This uncertainty could lead to mothers activating more social support during this time or to mothers' family and friends withdrawing their support over time, particularly when mothers are navigating repeated and cyclical incarceration spells. During the reentry period, some of this uncertainty resolves, but some mothers accept that the carceral spell was not a transformative time for their sons. That said, there are more similarities than differences in coping during the incarceration and reentry periods; this may partly result from the fact that jail incarceration often involves relatively short and repeated stints of confinement (Comfort, 2016), potentially blurring the distinction between these two periods.

Third, we find some evidence that coping resources, particularly those that involve relying on others for social support, can occasionally strain relationships with other family members—including romantic partners, children, and their incarcerated son—and generate new stressors. We anticipated this theme would be more prominently represented in our participants' narratives, given theoretical reasons linking coping resources to additional strain (Pearlin & Schooler, 1978). It may be that mothers of incarcerated sons endure extensive strain, both prior to their son's incarceration and resulting from it, so that additional strains do not emerge from coping resources. It may also be that direct questions about strains stemming from coping resources, which did not appear in our interview guide, would yield information not captured in our interviews. Finally, it is also possible that some mothers who do not activate social support refrain from doing so because of anticipated strain, though we did not see evidence of this from our interviews.

These findings are situated in the stress process perspective, a commonly used framework for understanding the relationship between stressors and mental health (Pearlin, 1989; Pearlin et al., 1981). Indeed, incarceration is a stressor that proliferates from the incarcerated person to their family members (Pearlin et al., 1997; Turney, 2014). The stress process perspective highlights how coping resources—which people employ to manage stressors after they emerge—can buffer against the negative consequences of stressors for mental health (Pearlin & Schooler, 1978; Thoits, 1995; also see Cohen & Wills, 1985). The stress process perspective also highlights how the activation of coping resources, while potentially still alleviating the primary stressor, can produce other stressors that impair mental health (Pearlin & Schooler, 1978). Our data provide evidence of both possibilities. We primarily find that coping resources—including activating social support and employing self-directed accessible coping resources—alleviate the negative mental health consequences of a son's incarceration, consistent with prior research on coping with family member incarceration (Fahmy & Testa, 2021). Existing research might classify the coping resource of distraction as "dysfunctional coping" (Meyers et al., 2024; Testa & Fahmy, 2021), but our data reveal that distraction alleviates the consequences of the stressor of a son's incarceration, thus, serving a useful coping resource for mothers. Also, considering the social context of mothers with incarcerated sons is important, as many of them have limited financial resources that impede the availability of coping resources. We also find some evidence that coping resources—particularly the activation of social support—can generate additional stressors such as relationship strain. Taken together, these findings highlight the complicated and sometimes countervailing consequences of coping resources.

5.1. Limitations

These findings must be interpreted within the bounds of our sample. Nationally representative survey research would be well-positioned to measure and establish the prevalence of coping resources among adults enduring family member incarceration (and other stressors), the relative importance of various coping resources in ameliorating the deleterious mental health consequences of family member incarceration, and the extent to which coping resources generate new stressors that further

impair mental health. Survey research, particularly survey research that includes time-varying measures, may also consider strengthening causal inference around the relationship between stressors, coping resources, and mental health among middle-age and older adults. Additionally, future research should examine how our findings apply to other groups. Our conclusions may be different if our sample was more diverse in terms of race, ethnicity, and immigration status. For example, a different sample could yield accounts of substance use as a coping strategy (Redman, 2008). The importance of familism and religiosity among Latinas may facilitate different coping resources in response to stressors (though, importantly, our supplemental analyses indicate no meaningful differences in coping resources between Latina and non-Latina mothers) (Campos et al., 2014). Similarly, our conclusions may be different if our sample included mothers of incarcerated daughters given gender differences in mother-child relationships (Russell & Saebel, 1997), mothers of sons incarcerated in prison given the longer typical duration of prison incarceration (Apel, 2016), or mothers of sons who perpetrated violence against them or others in the family (Condry & Miles, 2014).

5.2. Implications

In addition to the implications our findings have for future research on incarceration and health, they have implications for policy and practice. First, aligned with other research, we find that mothers' mental health suffers considerably when their sons are incarcerated (e.g., Goldman, 2019; Green et al., 2006; Sirois, 2020). Therefore, reducing jail incarceration—via eliminating cash bail or finding alternatives to incarceration—could have positive ramifications for the many mothers who experience their adult child's incarceration. Second, we find that mothers work to ameliorate the proliferating pains of incarceration by activating social support and using self-directed accessible resources; that is, they engage in coping resources that are efficacious for their mental health. Designing programming to help family members, including mothers, who experience vicarious incarceration exposure develop their coping resources could have short- and long-term consequences for their mental health. This programming, and the corresponding community-building for mothers, could have the added benefit of helping their adult children, both during the carceral period and after their release, given the tight coupling between maternal mental health and child wellbeing (Goodman, 2007). Third, themes that do not commonly emerge in the interviews can also provide useful insights. For example, few mothers reported coping with their son's incarceration by connecting with therapists or other medical professionals, which could stem from this population's lack of access to such medical services (Subica & Link, 2024). Increasing access to individual or family therapy could improve mothers' mental health (Tadros et al., 2023).

5.3. Conclusions

This analysis of coping resources employed by mothers of incarcerated adult sons extends our understanding of family member incarceration and mental health among middle-age and older adults, a population that has grown up in the shadow of the prison boom. We provide one of the first systematic accountings of how mothers cope with the stressor of their son's incarceration, shedding light on how these coping resources protect mental health among these women. A child's incarceration is a stressful life event endured by about one fifth of adults aged 50 and older. Despite the commonality of this stressor, especially among people of color and economically vulnerable people, relatively little research examines its mental health consequences (though see Goldman, 2019; Green et al., 2006; Sirois, 2020; Turney

et al., 2025) or how mothers engage in coping resources to mitigate these mental health consequences. Understanding how middle-age and older adults cope with stressors is also important because this population must often simultaneously navigate multiple challenges such as financial difficulties, chronic health conditions, and caregiving concerns. These findings, by moving the focus away from the health consequences of incarceration history among older adults (Latham-Mintus et al., 2023) and toward a focus on the intergenerational consequences of incarceration, expand our understanding of how the carceral system affects adults and how these people manage challenges stemming from a loved one's incarceration.

CRediT authorship contribution statement

Kristin Turney: Writing – review & editing, Writing – original draft, Supervision, Resources, Project administration, Methodology, Investigation, Funding acquisition, Formal analysis, Data curation, Conceptualization. **Rachel Bauman:** Writing – review & editing, Writing – original draft, Methodology, Investigation, Formal analysis.

Notes

1. Some mothers had follow-up interviews after their son had been released ($n = 33$ of the 56 mothers with follow-up interviews). Other mothers, though, had follow-up interviews while their son was still incarcerated in jail (as adjudication of cases often takes considerable time, $n = 9$), after their son had been sentenced (and transferred) to prison ($n = 9$), or after their son had been released and re-incarcerated in jail ($n = 5$).
2. The most common reasons for not interviewing mothers includes the son did not have contact information for his mother ($n = 19$), the mother did not respond to invitation ($n = 14$), and the mother is deceased ($n = 13$). One mother had two sons in the study.
3. We refer to all participants by their chosen pseudonym.
4. This interview was translated from Spanish.
5. This interview was translated from Spanish.
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11. This interview was translated from Spanish.

Declaration of competing interest

The authors declare that they have no known competing financial interests or personal relationships that could have appeared to influence the work reported in this paper.

References

- Alexander, M. (2020). *The new Jim Crow: Mass incarceration in the age of colorblindness*. The New Press.
- Apel, R. (2016). The effects of jail and prison confinement on cohabitation and marriage. *The Annals of the American Academy of Political and Social Science*, 665(1), 103–126. <https://doi.org/10.1177/0002716216629360>
- 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 and Practice*, 5(2), 65–88. <https://doi.org/10.1037/cfp0000058>
- Barr, A. B., Simons, L. G., Simons, R. L., Beach, S. R. H., & Philibert, R. A. (2018). Sharing the burden of the transition to adulthood: African American young adults' transition challenges and their mothers' health risk. *American Sociological Review*, 83(1), 143–172. <https://doi.org/10.1177/0003122417751442>

- Campos, B., Ullman, J. B., Aguilera, A., & Dunkel Schetter, C. (2014). Familism and psychological health: The intervening role of closeness and social support. *Cultural Diversity and Ethnic Minority Psychology*, 20(2), 191–201. <https://doi.org/10.1037/a0034094>
- Canizales, S. L. (2024). *Sin padres, ni papeles: Unaccompanied migrant youth coming of age in the United States*. University of California Press.
- Christensen, M., Turney, K., & Jang, S. (2025). The carceral contradictions of motherhood: How mothers of incarcerated sons parent in the shadow of the criminal legal system. *American Sociological Review*, 90(1), 61–87.
- Christensen, M. A., Turney, K., & Park Jang, S. (2025). The carceral contradictions of motherhood: How mothers of incarcerated sons parent in the shadow of the criminal legal system. *American Sociological Review*. <https://doi.org/10.1177/0003122424130765>
- Chung, P. H., & Hepburn, P. (2018). Mass imprisonment and the extended family. *Sociological Science*, 5, 335–360. <https://doi.org/10.15195/v5.a15>
- Clayton, G., Richardson, E., Mandlin, L., & Farr, B. (2018). *Because she's powerful: The political isolation and resistance of women with incarcerated loved ones*. Essie Justice Group.
- Cohen, S., Evans, G. W., Stokols, D., & Krantz, D. S. (1986). Stress processes and the costs of coping. In *Behavior, health, and environmental stress* (pp. 1–23). Springer Science & Business Media.
- Cohen, S., & Wills, T. A. (1985). Stress, social support, and the buffering hypothesis. *Psychological Bulletin*, 98(2), 310–357. <https://doi.org/10.1037/0033-2909.98.2.310>
- Comfort, M. (2008). *Doing time together: Love and family in the shadow of the prison*. University of Chicago Press.
- Comfort, M. (2016). “A twenty-hour-a-day job”: The impact of frequent low-level criminal justice involvement on family life. *The Annals of the American Academy of Political and Social Science*, 665(1), 63–79. <https://doi.org/10.1177/0002716215625038>
- Condry, R. (2013). Families shamed: The consequences of crime for relatives of serious offenders. *Willan*.
- Condry, R., & Miles, C. (2014). Adolescent to Parent violence: Framing and mapping a hidden problem. *Criminology and Criminal Justice*, 14(3), 257–275. <https://doi.org/10.1177/1748895813500155>
- Deterding, N. M., & Waters, M. C. (2021). Flexible coding of in-depth interviews: A twenty-first-century approach. *Sociological Methods & Research*, 50(2), 708–739. <https://doi.org/10.1177/0049124118799377>
- Enns, P. K., Yi, Y., Comfort, M., Goldman, A. W., Lee, H., Muller, C., Wakefield, S., Wang, E. A., & Wildeman, C. (2019). What percentage of Americans have ever had a family member incarcerated? Evidence from the family history of incarceration survey (FamHIS). *Socius*, 5, 1–9. <https://doi.org/10.1177/2378023119829332>
- Fahmy, C., & Testa, A. (2021). Stress among older adults with an incarcerated family member: Testing the buffering model of social support. *The Journals of Gerontology: Serie Bibliographique*, 76(10), 2057–2062. <https://doi.org/10.1093/geronb/gbab117>
- Foster, H., & Hagan, J. (2013). Maternal and paternal imprisonment in the stress process. *Social Science Research*, 42(3), 650–669. <https://doi.org/10.1016/j.ssresearch.2013.01.008>
- Geronimus, A. T. (2023). *Weathering: The extraordinary stress of ordinary life in an unjust society*. Hachette.
- Giordano, P. C., Copp, J. E., Manning, W. D., & Longmore, M. A. (2019). Linking parental incarceration and family dynamics associated with intergenerational transmission: A life-course perspective. *Criminology (Beverly Hills)*, 57(3), 395–423. <https://doi.org/10.1111/1745-9125.12209>
- Goffman, E. (1963). *Stigma: Notes on the management of spoiled identity*. Touchstone.
- Goldman, A. W. (2019). Linked lives in double jeopardy: Child incarceration and maternal health at midlife. *Journal of Health and Social Behavior*, 60(4), 398–415. <https://doi.org/10.1177/0022146519882328>
- Goodman, S. H. (2007). Depression in mothers. *Annual Review of Clinical Psychology*, 3(1), 107–135. <https://doi.org/10.1146/annurev.clinpsy.3.022806.091401>
- Green, K. M., Ensminger, M. E., Robertson, J. A., & Juon, H.-S. (2006). Impact of adult sons' incarceration on African American mothers' psychological distress. *Journal of Marriage and Family*, 68(2), 430–441. <https://doi.org/10.1111/j.1741-3737.2006.00262.x>
- Hatzenbuehler, M. L., Phelan, J. C., & Link, B. G. (2013). Stigma as a fundamental cause of population health inequalities. *American Journal of Public Health*, 103(5), 813–821. <https://doi.org/10.2105/AJPH.2012.301069>
- House, J. S., Landis, K. R., & Umberson, D. (1988). Social relationships and health. *Science*, 241(4865), 540–545. <https://doi.org/10.1126/science.3399889>
- Huey, L., & Ferguson, L. (2022). ‘Going missing’ as a maladaptive coping behavior for adults experiencing strain. *Deviant Behavior*, 43(1), 17–29. <https://doi.org/10.1080/01639625.2020.1773175>
- Jewkes, Y. (2012). Autoethnography and emotion as intellectual resources: Doing prison research differently. *Qualitative Inquiry*, 18(1), 63–75. <https://doi.org/10.1177/1077800411428942>
- Kahn, J. R., & Pearlin, L. I. (2006). Financial strain over the life course and health among older adults. *Journal of Health and Social Behavior*, 47(1), 17–31. <https://doi.org/10.1177/002214650604700102>
- Kotova, A. (2020). Beyond courtesy stigma: Towards a multi-faceted and cumulative model of stigmatisation of families of people in prison. *Forensic Science International: Mind and Law*, 1, Article 100021. <https://doi.org/10.1016/j.fsml.2020.100021>
- Latham-Mintus, K., Deck, M. M., & Nelson, E. (2023). Aging with incarceration histories: An intersectional examination of incarceration and health outcomes among older adults. *The Journals of Gerontology: Serie Bibliographique*, 78(5), 853–865. <https://doi.org/10.1093/geronb/gbac088>
- Lazarus, R. S., & Folkman, S. (1984). *Stress, appraisal, and coping*. Springer.
- Meyers, T. J., Fahmy, C., & Wright, K. A. (2024). Coping with incarceration: Examining the longitudinal relationship between individual coping styles and mental health outcomes. *Journal of Mental Health*, 33(1), 14–21. <https://doi.org/10.1080/09638237.2022.2118693>
- Miller, R. J. (2021). *Halfway home: Race, punishment, and the afterlife of mass incarceration*. Little, Brown and Company.
- Mowen, T. J., & Visser, C. A. (2016). Changing the ties that bind. *Criminology & Public Policy*, 15(2), 503–528. <https://doi.org/10.1111/1745-9133.12207>
- Page, J., Piehowski, V., & Soss, J. (2019). A debt of care: Commercial bail and the gendered logic of criminal justice predation. *RSF: The Russell Sage Foundation Journal of the Social Sciences*, 5(1), 150–172. <https://doi.org/10.7758/rsf.2019.5.1.07>
- Pearlin, L. I. (1989). The sociological study of stress. *Journal of Health and Social Behavior*, 30(3), 241–256. <https://doi.org/10.2307/2136956>
- Pearlin, L. I., Aneshensel, C. S., & Leblanc, A. J. (1997). The forms and mechanisms of stress proliferation: The case of AIDS caregivers. *Journal of Health and Social Behavior*, 38(3), 223–236. <https://doi.org/10.2307/2955368>
- Pearlin, L. I., Menaghan, E. G., Lieberman, M. A., & Mullan, J. T. (1981). The stress process. *Journal of Health and Social Behavior*, 22(4), 337–356. <https://doi.org/10.2307/2136676>
- Pearlin, L. I., & Schooler, C. (1978). The structure of coping. *Journal of Health and Social Behavior*, 19(1), 2–21. <https://doi.org/10.2307/2136319>
- Pettit, B., & Western, B. (2004). Mass imprisonment and the life course: Race and class inequality in U.S. incarceration. *American Sociological Review*, 69(2), 151–169.
- Porter, L. C., Bushway, S. D., Tsao, H.-S., & Smith, H. L. (2016). How the U.S. prison boom has changed the age distribution of the prison population. *Criminology (Beverly Hills)*, 54(1), 30–55. <https://doi.org/10.1111/1745-9125.12094>
- Redman, D. (2008). Coping-related substance use motives and stressful life experiences among people with a history of incarceration. *Journal of Social Work Practice in the Addictions*, 8(4), 490–510. <https://doi.org/10.1080/15332560802323956>
- Rogers, C. (2020). Just mothers: Criminal justice, care ethics and “disabled” offenders. *Disability & Society*, 35(6), 926–948. <https://doi.org/10.1080/09687599.2019.1655711>
- Russell, A., & Saebel, J. (1997). Mother–son, mother–daughter, father–son, and father–daughter: Are they distinct relationships? *Developmental Review*, 17(2), 111–147. <https://doi.org/10.1006/drev.1996.0431>
- Sawyer, W., & Wagner, P. (2024). *Mass incarceration: The whole pie 2024*. Prison Policy Initiative.
- Sirois, C. (2020). The strain of sons' incarceration on mothers' health. *Social Science & Medicine*, 264, Article 113264. <https://doi.org/10.1016/j.socscimed.2020.113264>
- Smith, S. S. (2007). *Lone pursuit: Distrust and defensive individualism among the Black poor*. Russell Sage Foundation.
- Smith, N. C., & Coleman, M. E. (2024). Beyond empathy: Familial incarceration, stress proliferation, and depressive symptoms among African Americans. *Social Forces*, 102(4), 1424–1445. <https://doi.org/10.1093/sf/soad151>
- Stuart, F. (2020). Code of the tweet: Urban gang violence in the social media age. *Social Problems*, 67(2), 191–207. <https://doi.org/10.1093/socpro/spz010>
- Subica, A. M., & Link, B. G. (2024). Mental illness stigma in Black, latina/o, and asian Americans. *Journal of Racial and Ethnic Health Disparities*. <https://doi.org/10.1007/s40615-024-02259-8>
- Sundaresh, R., Yi, Y., Harvey, T. D., Roy, B., Riley, C., Lee, H., Wildeman, C., & Wang, E. A. (2021). Exposure to family member incarceration and adult well-being in the United States. *JAMA Network Open*, 4(5), Article e2111821. <https://doi.org/10.1001/jamanetworkopen.2021.11821>
- Swartz, T. T. (2009). Intergenerational family relations in adulthood: Patterns, variations, and implications in the contemporary United States. *Annual Review of Sociology*, 35, 191–212. <https://doi.org/10.1146/annurev.soc.34.040507.134615>
- Tadros, E., Hutcherson, R., & Aguirre, N. (2023). How is family therapy discussed in the literature on incarceration? A systematic review. *American Journal of Family Therapy*, 51(5), 673–691. <https://doi.org/10.1080/01926187.2022.2031343>
- Testa, A., & Fahmy, C. (2021). Family member incarceration and coping strategies during the COVID-19 pandemic. *Health & Justice*, 9(16), 1–10. <https://doi.org/10.1186/s40352-021-00142-w>
- Thoits, P. A. (1986). Social support as coping assistance. *Journal of Consulting and Clinical Psychology*, 54(4), 416–423. <https://doi.org/10.1037/0022-006X.54.4.416>
- Thoits, P. A. (1995). Stress, coping, and social support processes: Where are we? What next? *Journal of Health and Social Behavior*, 53–79. <https://doi.org/10.2307/2626957>
- Timmermans, S., & Haas, S. (2008). Towards a sociology of disease. *Sociology of Health & Illness*, 30(5), 659–676. <https://doi.org/10.1111/j.1467-9566.2008.01097.x>
- Turney, K. (2014). Stress proliferation across generations? Examining the relationship between parental incarceration and childhood health. *Journal of Health and Social Behavior*, 55(3), 302–319. <https://doi.org/10.1177/0022146514544173>
- Turney, K., Bauman, R., Christensen, M. A., & Goodsell, R. (2025). Stress proliferation or stress relief? Understanding mothers' health during son's incarceration. *Journal of Health and Social Behavior*. <https://doi.org/10.1177/00221465251330848>
- Turney, K., & Conner, E. (2019). Jail incarceration: A common and consequential form of criminal justice contact. *Annual Review of Criminology*, 2, 265–290. <https://doi.org/10.1146/annurev-criminol-011518-024601>
- Turney, K., & Kaiser, D. E. (2024). Paternal incarceration, child care instability, and children's wellbeing. *Journal of Marriage and Family*. <https://doi.org/10.1111/jomf.13051>
- Turney, K., Sugie, N. F., Marín, E., & Kaiser, D. E. (2024). The waiting game: Anticipatory stress and its proliferation during jail incarceration. *Criminology (Beverly Hills)*, 62(4), 830–858. <https://doi.org/10.1111/1745-9125.12388>

- Umamaheswar, J. (2024). The construction of capital among family members of people in prison. *British Journal of Criminology*, 64(6), 1259–1274. <https://doi.org/10.1093/bjc/zaae013>
- Walker, M. L. (2022). *Indefinite: Doing time in jail*. Oxford University Press.
- Western, B. (2018). *Homeward: Life in the year after prison*. Russell Sage Foundation.
- Wildeman, C., Goldman, A. W., & Lee, H. (2019). Health consequences of family member incarceration for adults in the household. *Public Health Reports*, 134(1), 15S–21S. <https://doi.org/10.1177/0033354918807974>
- Wildeman, C., Schnittker, J., & Turney, K. (2012). Despair by association? The mental health of mothers with children by recently incarcerated fathers. *American Sociological Review*, 77(2), 216–243. <https://doi.org/10.1177/0003122411436234>
- Yi, Y. (2023). Racial inequality in the prevalence, degree, extension, and permeation of incarceration in family life. *Demography*, 60(1), 15–40.
- Zajacova, A., Grol-Prokopczyk, H., & Zimmer, Z. (2021). Sociology of chronic pain. *Journal of Health and Social Behavior*, 62(3), 302–317. <https://doi.org/10.1177/00221465211025962>