

Inmate mothers: forgotten social penalty.

A systemic review

Madres reclusas: penuria social olvidada.

Una revisión sistémica

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ABSTRACT

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Background: this review reveals the needs of inmate mothers from different perspectives: as women, wives, and mothers, as well as their physical, mental and social characteristics, going through their histories of violence, traumas, victimization, and the impact of separation on the family ties especially with their children. **Methods:** an integrative bibliographic review was carried out in databases of Biomedicine, Sociology, Nursing, Anthropology and Psychology, as well as original articles, online reviews, national and international books published between 1993 and 2017 were included. The variables considered were, characterization, social condition, mental health, gender, mother and child relationship and intervention programs. **Findings:** out of 7950 articles found, 50 were selected taking into account the interests of the research. With the analysis conducted, 5 categories emerged: Characterization (16 %), Social status (20 %), Mental health (22 %), Gender (16 %), Mother-child relationship (10 %), Intervention programs (16

%) ; Being mental health and social conditions the most studied variable and to a lesser extent the mother-child relationship, we should state that the work has as their first author "Women", highlighting the gender approach. **Conclusion:** incarceration with a gender focus is given mostly by female authors, where vital aspects such as jail conditions, sociodemographic characteristics, maternity, mental health, social condition, and mother-child relations, were seen to be neglected by the system with very few interventions and types of control. The condition of female prisoners continues to be framed by social inequality, and it is necessary to incorporate these mothers' needs into fundamental and solid strategies so we can restore their human rights.

Keywords: Women; Prisoners; Mother; Child; Needs.

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RESUMEN

Introducción: esta revisión revela las necesidades de las madres reclusas desde distintas ópticas: mujeres, esposas, madres, características físicas, mentales y sociales; historiales de violencia, traumatismo, victimización, e impacto en el vínculo con sus hijos. **Métodos:** se llevó a cabo una revisión bibliográfica de tipo integradora, en bases de datos de Biomedicina, Sociología, Enfermería, Antropología y Psicología. Se incluyeron artículos originales, revisiones y libros en línea, nacionales e internacionales, publicadas entre 1993 y 2017. Las variables contempladas fueron, caracterización, condición social, salud mental, género, relación madre e hijo y programas de intervención. **Hallazgos:** se encontraron 7950 artículos de los cuales se seleccionaron 50 teniendo en cuenta los intereses de la investigación. Con el análisis realizado surgieron 5 categorías: Caracterización (16 %), Condición social (20 %), Salud mental (22 %), Género (16 %), Relación madre-hijo (10 %), Programas de intervenciones (16 %); siendo la salud mental y las condiciones sociales las más estudiadas y en menor proporción la relación madre e hijo, cabe resaltar que los trabajos tienen como primera autora a las mujeres, resaltando el enfoque de género **Conclusión:** los trabajos de reclusión con enfoque de género están dados mayoritariamente por mujeres, desde la mayoría de sus aspectos: condiciones, características sociodemográficas, maternidad, salud mental, condición social, relación madre e hijo, siendo escasos los de tipo intervención y control. La condición de las mujeres reclusas sigue enmarcada en la desigualdad social, siendo necesario incorporar sus necesidades al abordaje integral para el restablecimiento de sus derechos humanos.

Palabras clave: Mujeres; Prisoneras; Madres; Hijo; Necesidades.

INTRODUCTION

It's strange how vulnerability can forge stories of violence, where victims become perpetrators, and self-defense turns into murder; Suddenly children, families, loved ones and lives are interrupted, making the inmates' only purpose is to survive the sentence. This document echoes the lives of female prisoners, especially those of mothers, where we try to analyze and understand their situation as inmates and the consequences of their bad decisions.

It is not normal to see mothers nursing their children in prisons, nor children standing in line waiting to be checked and authorized so they can see their mothers. When dealing with the impact of a mother-child bond separation, we notice that the real weight of this situation is underestimated, and that all the new implemented policies are still lacking appropriate interventions, and forward thinking. It is important to highlight the need of "life restoration" policies to rescue the families on both ends, to look at these imprisoned mothers beyond their legal status and start to view them as humans in search of their primary needs that is "being with their families".

We live in a society where inequality prevails, especially when it is gender based, nowadays we notice a number of significant changes that are taking place in our society, particularly those that focus on protecting the human rights. Today, we are trying hard to fight gender inequality, and to promote respect for biodiversity; but we

remain short, poverty, apathy and corruption in the system are great walls that we haven't been able to climb, there people can't even hear their own voices nether the less defend them; these people are the inmate mothers [1].

It has become a habit of our society to ignore the conditions that prisoners live in, the system doesn't care for their needs and the public doesn't empathize with their cases, an understandable situation hence it is our own way of showing them our anger towards their actions, but unlike free people, these inmates cannot defend their actions nor express their feelings to the world, one of the reasons why they have turned invisible to our society; a society that unfortunately forgets how unequal it has become [2].

When speaking of inmate mothers, it is important to focus the study on their mental, physical, emotional, social wellbeing, as well as, bring up the protective factors that were forged and broken in their courses of life [3]. One of the aspects that should be taken into account with the inmates' population is anger management and problem solving skills as a group rather than individually, following an approach that studies multidisciplinary strategies that preserve and restore the health of prisoners based on their collective needs [4].

In this sense, we start by talking about their social characteristics; Most of these women have precarious socioeconomic conditions, establishing the main motivation that led them to commit a crime [5]. Moreover, these women have high rates of comorbidity such as disorders that are consequences of psychoactive substances abuse [6], that have the power to influence their consciousness, physical coordination, concentration and judgment [7], not to mention their previous sufferings that may have effected their mental wellbeing [8].

This overlook is not very far from our daily life; children surrounded by drug addiction, absent parents, hostile environments, poverty, and a fragile society with a disoriented future ready for interrupted their lives full of conflict; probably a common factor among these female prisoners [9, 10].

Similarly, there are distresses product of violence, which are generally well known when they are physical, but if being mental and emotional, they are not easily detected [11]; According to the WHO data on mental health, exposure to traumatic events that generate violence against women can cause stress, fear and desolation, which can lead to depression and suicide attempts [12]. Moreover, Collier et al [13], describes that the majority of female prisoners (54 %) reported a personal history of family abuse; being predominant cases of domestic violence such as between couples 26 %, general abuse 29 %, physical abuse 22 % and sexual abuse 10 %. In addition, the vast majority of the females (90 %) reported being under the effects of drugs before incarceration. Undoubtedly, the consequence of violence is often devastating for the psychological functioning of an individual, being an antisocial risk factor.

Based on the ideas presented, we deduce that Posttraumatic Stress Disorder (PTSD) is among the consequences that have the highest percentage; In the analysis carried out by Howard et al [14], it is revealed that 97.8% of the inmates experienced traumatic situations and that 60.5% of them met the criteria for a PTSD diagnosis, being childhood abandonment, emotional abuse, physical neglect, sexual and physical abuse the most common forms of childhood traumas. On the other hand, in adulthood, physical assault and unwanted sexual experience are commonly found. We should note that the cases where multiple traumatic experiences occurred are very frequent, and these were found both in childhood and adulthood, generating greater consequences in these individuals [15].

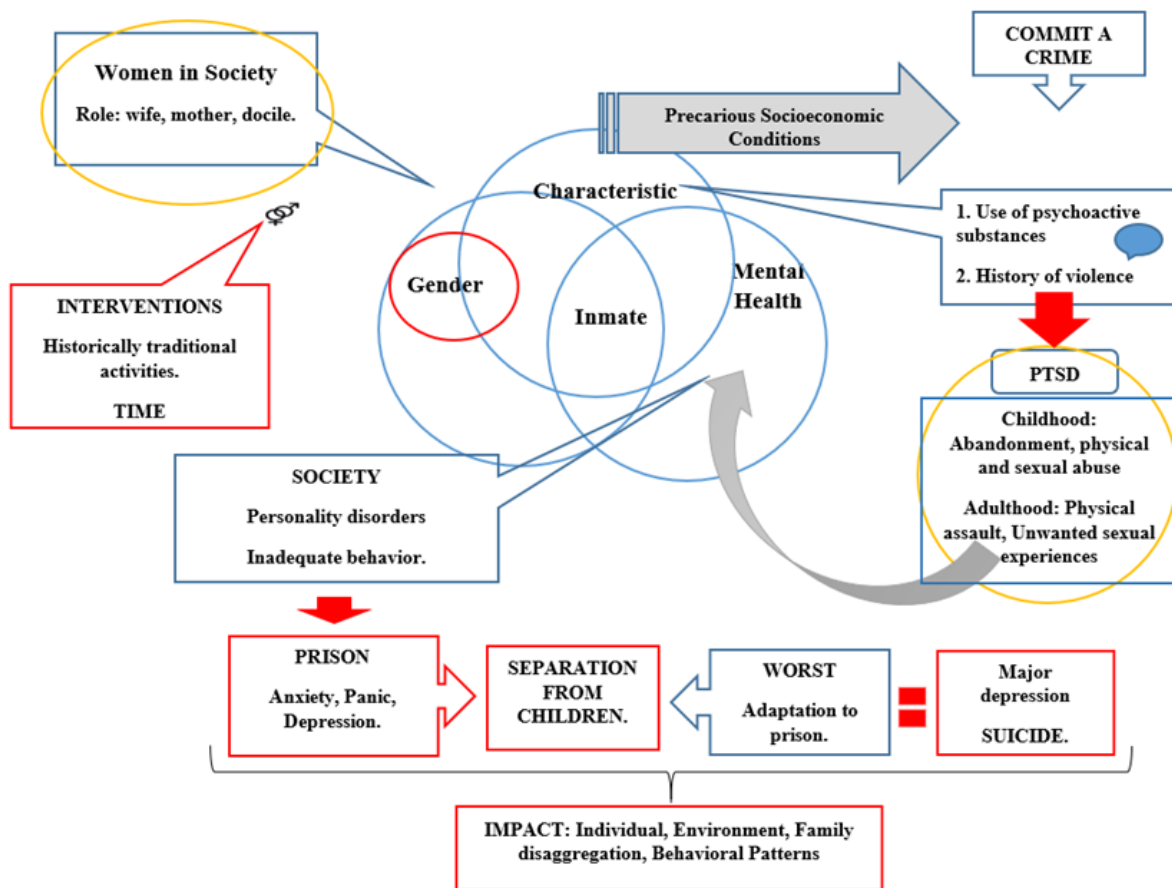
In the same way, these stories of traumatic events bring with them a high number of Personality Disorders; Lopez et al [16] managed to establish a statistically significant relationship between the risk of violence and the Paranoid, Limit, Histrionic and Narcissistic Disorders; a set of personality disorders characterized by being, feeling, thinking and behaving with little to no adaptations, which in most cases may become permanent and persistent diverging from the expectations of what is normal [17]. In short, it can be inferred that a series of traumatic events in the course of a life, can create mental disorders, which generally conditions an individual to adapt inappropriate behaviors against society, a situation that is a product of its consequences, both for the individuals and the environment surrounding them [18, 19] (See diagram 1).

Moving forward to the impact on their mental and emotional health upon their incarceration, these females manifest their inability to sleep, headaches, frequent crying, anxiety, fear, worry, stress, depression and panic attacks; generally, being a product of homesickness, their separation from their children and their economic uncertainty; the latter is one of their greater stressors since most of them are single mothers who are the only supporters of their families and loved ones [20, 21], and may worsen when lacking the support of their children's father or grandparents [22], the greater this emotional symptomatology is, the worse is the coping, the emotional climate and therefore the adaptation in prison [23].

However, the fact of having a daily routine, knowing that their children are well and being aware of their jail sentence, generates some kind of relief and adaptation to prison, thus decreasing the symptoms and dependence on medication [24]. Likewise, Yang et al [25], describes the outside world as an important role in the stories of the inmates and their psychological state, highlighting its association with anxiety, instead of depression.

Consequently, if these patients are not diagnosed or treated in a timely manner, their mental instability can transcend to other neuropsychiatric disorders such as major depression, which in turn can lead to serious complications such as suicide [26]. Mundt et al [27], states that major depression was present in 43% of female prisoners with a high suicide risk of 15%. Nevertheless, other studies argue that mental disorders are overrated in prisoners [28].

Diagram 1: Inmate mothers



Source: construction of the author

On the other hand, data provided by Walker et al [29], maintains that mental health, particularly the ones that present symptoms of anxiety and depression, increase with incarceration, but then improve with the passage of time; This is not an independent factor, hence there are other conditions that may cause it such as overcrowding and other causes that are associated with poor mental health. In this regard, the WHO points out that overcrowding in prisons has indisputable effects on the health of inmates [30].

At the same time, the gender aspect sets up an added value in all the aforementioned context, because of the role that women represent in the family and in society. The mother is the main caretaker of the family and in some cases the only mean of sustenance of the household, there is also an alteration of roles and attachment problems, effects that are aggravated in the case of having small children or babies [31]. Likewise, a female incarceration carries a family disgrace, since she is then described as a "bad person" because she contravened the role that corresponds to her as a submissive, dependent and docile wife or mother [32], a reason why it is important to address the fact that it's not that women have problems

different from those of men, but that in addition they are subjected to gender inequality [33].

Even though it is true that female prisoners represent a very small and less problematic population compared to male inmates, placing their conditions as a secondary concern is unjust for them and their families [34]. This situation has led to a series of factors of discrimination such as precariousness of spaces, poor housing conditions, inaccessibility to their family and protective surroundings, criminal profile mix-ups, and most important lack of knowledge regarding their social and personal traits, a vital aspect that turns them more vulnerable when entering this harsh world [35].

In addition to the above, when we add the “mother” variable to these prisoners we realize that a certain family nucleus has been ruptured, and that their members are lacking the care and affection of their most important pillar, which results in negative effects for both the inmates and their children [36]. In this sense, not only mothers are those who suffer; Children experience some feelings after the separation, leading them to sadness, worry, confusion, loneliness, anger and fear [37]. Likewise, this situation links up to more serious problems such as developing psychological difficulties, separation anxiety, stress and depression, as well as bad behaviors, lack of self-regulation, social regulation and low self-esteem [38]. All these behaviors are the result of family disaggregation, since in many cases children must move with relatives, friends, or neighbors, not mentioning, those less fortunate who have no one and must be sent to foster care [39].

So far, we have seen all the problems that this specific population has, but without a doubt the impact that this generates on the family, is what worries the most. When the foundations that constitute a family are weakened, problems become frequent, in many cases these events may lead bad behavioral patterns to the extent that the children commit crimes or misdemeanors, thus reliving their mothers’ story [40, 41]. Incidentally, Dunkel [42], confirms that an intervention focused on the needs of the inmates may lead to positive results, especially those programs that emphasize on interpersonal and family problems, former victims, trauma and self-esteem. Some studies focus their interventions on providing more humane conditions while under arrest, including a medical visit after 48 hours of police custody, the right to receive visits and communication, ease the disciplinary system, access to educational, cultural, recreational services and activities, as well as medical and psychological visits upon entering and leaving prison [43].

On the other hand, González [19] proposes more gradual interventions, initially resolving the socio-family problems that are triggered by the mother’s incarceration, including specific programs focused on reducing vulnerability, such as acquiring knowledge or craftsmanship to organize their lives after their release, such as cooking, dry cleaning, sewing or tapestry, etc. However, there are other authors who, from a gender perspective, do not view the last mentioned activities so well, since these trainings are historically traditional activities that condition the female gender

to be weak and dependent; that is, the authentic role that was assigned to them by society, leaving them again in disadvantage when entering the labor market, since few of these activities will allow them to subsist independently [18].

On the other hand, Bilington et al [44] states that shared reading is an intervention that satisfies the need to promote well-being and improve the inmate's sense of achievement, self-esteem and social participation, hence, these women recommend that the first interventions should be focused on the integral evaluation of their health in their entry and exit from incarceration and have always had a positive response towards it, as well as generating strategies to improve health, literacy and the establishment of support groups [45].

It should be noted that the time that these women must spend in prison should not be a time-out; although from a legal point of view it is a punishment, this should be an opportunity to evaluate their needs and provide them with treatments aimed to reducing the effects of their previous violent experiences as well as to raise awareness of their ill choices that led them to jail [46]. In addition, the prison services are obligated to take care of the prisoners and within that context they must implement strategies that prepares these inmate mothers to be useful, and productive future citizens that are abided by the law [47].

Furthermore, it is important to highlight that good treatment, decent spaces for work and leisure favors equality and dignity and improves their present and future life [48], an essential condition for their mental health [49]. The above-mentioned statements would not be significant without give emphasis to the "family" as one of the most important protective factors in the inmates' well-being and mental health, not only to maintain or strengthen the family ties, but also as a right that must be protected [50].

METHODS

A search of scientific articles was carried out, with the purpose of understanding the social adversities that female inmates live from different perspectives using an integrative bibliographic review, defined by Guirao [51], as one that "focuses on synthesizing knowledge about Methodology, theoretical knowledge or carried out research, outlining a conclusion on a specific topic", which allows the identification of theoretical gaps. The databases of Biomedicine, Sociology, Nursing, Anthropology and Psychology were used for this research.

Original articles, reviews, national and international online books published between 1993 and 2017 were included; the review was carried out during the months of March and June of 2017 using the search descriptors: women, prisoners, mother-child relationship and needs, which were taken from the descriptors in health sciences (DeCS), in order to give a correct use for the term.

The methods used in the bibliographic search were:

- Analysis and categorization of the articles according to the needs of the study.
- Evaluation and organization for the synthesis of information.
- Selection of the articles that were to be included in the document, taking into account those published in scientific journals of greater visibility, both nationally and internationally, and which may backup our review.

The validity of the articles was given by the applicability to the context, and the level of sustainable evidence II-2, II-3 and III (USPSTF) [52].

FINDINGS

There were 7.950 articles found, of which 50 were selected considering the interests of the research; from the analysis that was carried out, 5 categories emerged: Characterization (16 %), Social status (20 %), Mental health (22 %), Gender (16 %), Mother-child relationship (10 %), Intervention programs (16 %) ; where mental health and social conditions were the most studied category, and the mother and child relationship the least one; It should be noted that the work has as its first author women, highlighting the gender approach.

CONCLUSION

For decades, society has been marked by human situations that differ in extreme magnitudes, leaving the weakest unprotected, who in their eagerness to survive become easy targets of everything that corrupts our society, this is a reality that many inmates live, whether they are the precarious socio-economic conditions, or just in the wrong place at the wrong time, their life stories are full of violence and persecution, where they take refuge in drugs and commit crimes avenging their own, the series of traumatic experiences throughout their lives along with substance abuse lead them to neuropsychological problems that affect their lives in society, a situation that only gets worse when children are introduced; The anguish, the uncertainty, the broken bonds and the fear just overwhelm the endless wait of these forgotten subjects.

Historically, the fact of being a woman constitutes a significant variable, hence society has stigmatized men and women with well-defined roles, where women represent the docile, comprehensive, maternal role of a human being that is expected to be submissive, weak and dependent, a reason why current and former female inmates are classified as “Bad” just because they break all traditional stereotypes.

Finally, it is important to highlight that this problem should not be seen as an individual problem, since the reality of this situation impacts not only the individual but also extends to the family nucleus, affecting their behaviors, life expectancies and their own self-definition; that is, a chain of never-ending conflicts, the reason

why it is a social duty to look thoroughly at these inmate mothers from all perspectives; thus, establishing intervention strategies that aim to improve their conditions in terms of their physical, mental, and emotional needs, with the objective of preserving the family unit as the fundamental axis of society.

CONFLICT OF INTERESTS

The authors declare that they have no conflict of interest.

REFERENCES

1. Corrãa S; Parker R. Sexualidad, derechos humanos y pensamiento demográfico. 2004, P. 520-538.
2. Stiglitz J. El precio de la desigualdad: el 1% de población tiene lo que el 99% necesita. Taurus. 2012, P. 12-18.
3. Galván J, et al. La importancia del apoyo social para el bienestar físico y mental de las mujeres reclusas. *Salud Mental*; 2006. Vol. 29, no 3, p. 68-74.
4. Previdi I, et al. Oportunidades y Retos metodológicos en investigaciones de salud en el contexto carcelario de Puerto Rico. *Ciencias de la conducta: revista del Centro Caribeño de Estudios Post-Graduados*; 2006. Vol. 30, no 1, p. 30.
5. Rincón S. Un acercamiento teórico a la mujer víctima-victimaria. *Estudios de Derecho*; 2013. Vol. 70, No 155, P. 235.
6. Pontón J. Cárceles del Ecuador: los efectos de la criminalización por drogas". *URVIO-Revista Latinoamericana de Estudios de Seguridad*; 2014. Vol. 1, no 1, p. 55-73.
7. García J, et al. Salud y drogas. Instituto de Investigación de Drogodependencias España; 2003. Vol. 3, no 1, p. 33-55.
8. Organización Mundial de la Salud [Internet]. 2005. Interamericana para neurociencia del consumo y dependencia de sustancias psicoactivas. Washington. Diario Oficial; [citado 1 junio 2019]. Disponible en: <http://www.sncpharma.com/assets/lib/kcfinder/upload/files/libros%20snc/Neurociencia%20del%20Consumo%20y%20Dependencia%20de%20Sustancias%20Psicoactivas.pdf>
9. Kempe R, Kempe, C. Henry. Niños maltratados. Ediciones Morata; 1998, P. 69-80.
10. Barudy J. El Dolor Invisible de la infancia. Una lectura ecosistémica del maltrato infantil; 1998, P. 102-180.
11. Velázquez S. Violencias cotidianas, violencia de género; 2003, P. 62-120.
12. Gúezmes A, et al. Violencia sexual y física contra las mujeres en el Perú: estudio multicéntrico de la OMS sobre la violencia de pareja y la salud de las mujeres. Centro de la mujer peruana Flora Tristán; 2002, P. 62-80.
13. Collier S, Friedman S. Mental illness among women referred for psychiatric services in a New Zealand women's prison. *Behavioral Sciences & The Law*; 2016. Vol. 34, No 4, P. 539-550.
14. Howard R, et al. Posttraumatic stress disorder (Ptd) symptoms mediate the relationship between substance misuse and violent offending among female prisoners. *Social Psychiatry and Psychiatric Epidemiology*; 2017. Vol. 52, No 1, P. 21-25.
15. Karatzias T, et al. Multiple traumatic experiences, post-traumatic stress disorder and offending behaviour in female prisoners. *Criminal behaviour and mental health*. 2017. P. 21-32.
16. López R, Lafuente O, García J. Del mito de narciso a los trastornos de la personalidad en las cárceles aragonesas: una aproximación al perfil de estos desórdenes en las personas privadas de libertad. *Revista española de sanidad penitenciaria*; 2007. Vol. 9, No 2, P. 28-40.
17. Liporace, Fernández, et al. Evaluación de la personalidad normal y sus trastornos: teoría e instrumentos. Instituto de hermanas terciarias franciscanas de la caridad. 2015. P. 16-29.

18. González S. Factores psicosociales relacionados con conductas infractoras en menores internos en el centro de observación y tratamiento del consejo tutelar del estado de Hidalgo". 2007. P. 116-229.
19. Truffino J. La salud mental en el mundo de hoy. Ediciones Universidad de Navarra. 2015. P. 3-48.
20. Caulfield S, Caulfield L. Counterintuitive findings from a qualitative study of mental health in english women's prisons. International Journal Of Prisoner Health; 2016. Vol. 12, No 4, P. 216-229.
21. Pérez E, Redondo S. Efectos psicológicos de la estancia en prisión. papeles del psicólogo; 1991. Vol. 48, No 3, P. 54-57.
22. Harner M, Wyant R, Fernanda S. Prison ain't free like everyone thinks" financial stressors faced by incarcerated women. Qualitative Health Research; 2017. Vol. 27, No 5, P. 688-699.
23. Ruiz J. Síntomas psicológicos, clima emocional, cultura y factores psicosociales en el medio penitenciario. Revista Latinoamericana de Psicología; 2007. Vol. 39, No 3.
24. Echeverri-Vera J. La prisionalización, sus efectos psicológicos y su evaluación". Pensando Psicología; 2010. vol. 6, no 11, p. 157-166.
25. Yang S, et al. Doing Time: a qualitative study of long-term incarceration and the impact of mental illness. International Journal of Law and Psychiatry; 2009. Vol. 32, No 5, P. 294-303.
26. Colombia, Ministerio de Salud y Protección Social, Colciencias, et al. [Internet]. 2013. Detección temprana y diagnóstico del episodio depresivo y trastorno depresivo recurrente en adultos. Atención integral de los adultos con diagnóstico de episodio depresivo o trastorno depresivo recurrente-2013. Guía N° 22. Bogotá. Diario Oficial. [citado 2 junio 2019]. Disponible en: http://gpc.minsalud.gov.co/gpc_sites/Repositorio/Conv_500/GPC_td/gpc_td.aspx
27. Mundt, A. P., et al. Prevalence of mental disorders at admission to the penal justice system in emerging countries: a study from Chile". Epidemiology and Psychiatric Sciences; 2013. Vol. 25, No 5, P. 441-449.
28. Fazel S, et al. Mental health of prisoners: prevalence, adverse outcomes, and interventions. The Lancet Psychiatry; 2016. Vol. 3, No 9, P. 871-881.
29. Walker J, et al. Changes in mental state associated with prison environments: a systematic review. Acta Psychiatrica Scandinavica; 2014. Vol. 129, No 6, P. 427-436.
30. Naciones Unidas. [Internet]. 2007. Recopilación de reglas y normas de las naciones unidas en la esfera de la prevención del delito y la justicia penal. Estados unidos: Diario Oficial. [citado 2 agosto 2019]. Disponible en: https://www.unodc.org/pdf/criminal_justice/Compendium_UN_Standards_and_Norms_CP_and_CJ_Spanish.pdf
31. Lagarde M. Los cautiverios de las mujeres madre esposas, monjas, putas, presas y locas; 1993. Vol. 5, no 4, p. 241-250.
32. Antony C. Mujeres invisibles: las cárceles femeninas en américa latina. Nueva Sociedad; 2007. Vol. 208, P. 73-86.
33. Herrera M. Expósito F. Una vida entre rejas: aspectos psicosociales de la encarcelación y diferencias de género. Psychosocial Intervention; 2010. Vol. 19, No 3, P. 235-241.
34. García S, et al. Fluctuaciones de la población penitenciaria colombiana-situación actual y perspectivas". Derecho Penal y Criminología; 1994. Vol. 17, p. 125.
35. Yagüe C. Mujeres en prisión. intervención basada en sus características, necesidades y demandas. Revista Española de Investigación Criminológica; 2007. Vol. 5, P. 1-23.
36. Beltran A, Pena A, Samaranch E. La realidad familiar de las mujeres encarceladas en el sistema penitenciario español; 2005, P. 5-8.
37. Poehlmann J. Representations of attachment relationships in children of incarcerated mothers. Child Development; 2005. Vol. 76, No 3, P. 679-696.
38. Inciarte G, Sánchez G, Ocando F. Consecuencias psicosociales en niños cuyas madres se encuentran cumpliendo pena privativa de libertad. Revista de Ciencias Sociales; 2010. Vol. 16, No 1.
39. Conf. Oliver Robertson. El impacto que el encarcelamiento de un (a) progenitor(a) tiene sobre sus hijos. Quaker United Nations Office; 2007, P. 32.
40. De La Peña F, Gómez J. Conducta antisocial en adolescentes: factores de riesgo y de protección". Universidad Complutense de Madrid, Servicio de Publicaciones. 2005, P. 82-100.

41. Navarrete A. Los menores y la violencia, Mingote, JC y Requena, M; 2008, P. 8-10.
42. Dünkel F. Empirische forschung im strafvollzug: bestandaufnahme und perspektiven"; 1996. Vol. 5, No 4, P. 8-10.
43. Gharaibeh N, El-Khoury J. The state of health care provision and extent of mental health in the prisons of the arab world: a literature review and commentary". International Journal of Prisoner Health; 2009. Vol. 5, No 4, P. 241-250.
44. Billington J, Longden E, Robinson J. (2016). A literature-based intervention for women prisoners: preliminary findings. International Journal of Prisoner Health. Vol. 12, No 4, P. 230-243.
45. Ahmed R, et al. Access to healthcare services during incarceration among female inmates. International Journal of Prisoner Health; 2016. Vol. 12, No 4, P. 204-215.
46. Sánchez F, et al. The nexus of trauma, victimization, and mental health disorders among incarcerated adults in Spain. Psychiatric Quarterly; 2017, P. 1-14.
47. De Viggiani N. Unhealthy prisons: exploring structural determinants of prison health". Sociology of Health & Illness; 2007. Vol. 29, No 1, P. 115-135.
48. Wilkinson R, Pickett K. Un análisis de la (in) felicidad colectiva". Madrid: Turner; 2009, P. 7-18.
49. Fatoye O, et al. Psychological characteristics as correlates of emotional burden in incarcerated offenders in Nigeria". East African Medical Journal; 2006. Vol. 83, No 10, P. 545-552.
50. Constantino P, ASSIS Gonçalves S, Pinto L. Impacto da prisão na saúde mental dos presos do estado do Rio de Janeiro, Brasil". Ciência & Saúde Coletiva; 2016, Vol. 21, No 7. P. 99-121.
51. Guirao J, Olmedo A, et al. El artículo de revisión. Revista Iberoamericana de Enfermería Comunitaria; 2008. Vol. 1, no 1, p. 1-25.
52. Primo J. Niveles de evidencia y grados de recomendación (I/II). Enfermedad inflamatoria intestinal al día; 2003. Vol. 2, no 2, p. 39-42.